

AHS Board and Executive Expense Report

Name Andrea Beckwith-Ferraton
Title Chief Ethics & Compliance Officer

Location Calgary

Expenses submitted during the month of May 2017

							Travel (1))							
													Working		
												Drofossional	Sessions		
	Source								Other	To	otal	Professional Development	Hosting and Hospitality	Othe	r
MMM-YY	Document	Purpose	Air	fare	M	eals	Accommoda	tion			avel	(2)	(3)	(4)	
May 17	Europea Clains	Manathana				F.2		1/7	147		2//				
May-17 May-17	Expense Claim Direct Billing	Meetings Meetings		844		53		167	146		366 844				
May-17	Direct billing	Meetings		044							044				
Total			\$	844	\$	53	\$	167	\$ 146	\$	1,210	\$ -	\$ -	\$	

Total for

the Month \$ 1,210

Maximum daily single meal expense claimed in the month	\$ 21
Maximum daily base hotel rate claimed in the month	\$ 149
Non economy air travel in the month	\$ _

1) Travel expenses

Includes local and out of province/country travel expenses. Other travel includes items such as taxis, parking mileage, car rental and other expenses related to travel.

2) Professional Development

Includes conference, seminar and course registration fees and material

3) Hosting and Hospitality expenses

Hospitality and Hosting expenses may be incurred to advance AHS' mission, vision and values. For example, may include working lunches with staff and prospective employees meetings with government officials, dignitaries, public interest groups, donors other public or private organizations.

4) Other

Other expenses include expenses incurred in the normal course of business that are required for work purposes. May include small item technology purchases, books, etc.

5) Remuneration, Allowances Reported in the Financial Statements

Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
BECKWITH- FERRATON, ANDREA	Chief Ethics & Compliance Officer	Calgary	\$ 366.08									
Expense Date	Business reason	•	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/10/2017	Meeting in Edmonton		AB - Other Zones	Taxi	\$ 63.25	Office in Edmonton	Airport	Meeting with Todd Gilchrist and Ethics & Compliance Team at 7th Street Plaza	1			
5/10/2017	Meeting in Edmonton		AB - Local	Parking - Lot or Parkade	\$ 20.00			Meeting with Todd Gilchrist and Ethics & Compliance Team at 7th Street Plaza				
5/10/2017	Meeting in Edmonton		AB - Other Zones	Meals Per Diem	\$ 32.35			Meeting with Todd Gilchrist and Ethics & Compliance Team at 7th Street Plaza Lunch \$ 11.60 Dinner \$ 20.75				
5/11/2017	Meeting in Edmonton		AB - Other Zones	Accommodations	\$ 167.28			Attend AHS Governance Committee Meeting at 7th Street Plaza	1			
5/11/2017	Meeting in Edmonton		AB - Other Zones	Taxi	\$ 62.40	Airport	Office in Edmonton	Attend AHS Governance Committee Meeting at 7th Street Plaza	1			
5/11/2017	Meeting in Edmonton		AB - Other Zones	Meals Per Diem	\$ 20.80			Attend AHS Governance Committee Meeting at 7th Street Plaza Bfast \$ 9.20 Lunch \$ 11.60	1			
Approver(s) for	the claim	Approval	Status App Date	roval	1	1	•	,		1	ı	_1

GILCHRIST, TODD

Approve

29-May-17

AIRPORT TAXI SERVICE 4608 101 ST. (7808907070) EDMONTON AB

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2017/05/10
TIME 0563 12:04:41
INVOICE #

RECEIPT NUMBER

PURCHASE
AMOUNT \$55.00
TIP \$8.25
TOTAL

\$63.25



APPROVED

AUTH# YOU

CARDHOLDER COPY

AIRPORT TAX! SERVICE 4608 101 ST. (7808907070) EDMONTON AB

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2017/05/11
TIME 4858 14:55:14
INVOICE #

RECEIPT NUMBER

TOTAL

and made and half was specially have been seen one and half the

PURCHASE

AMOUNT \$48.00

TIP \$14.40

\$62.40

Interac

APPROVED

AUTH# THANK YOU

CARDHOLDER COPY

Written Attestation for Lost Receipt

Date: May 10, 2017

Location: Calgary Airport

Amount: \$20.00

Expense Reason: Park2Go Airport Parking. Parking necessary for vehicle during a return flight from Calgary to Edmonton.

- The above receipt has been misplaced.
- The expense was incurred and related to AHS business.
- The expense has not been previously claimed.

Andrea Beckwith-Ferraton

Employee Authorization

Date Signed: January 5, 2018



Andrea M Beckwithferraton

Room Number:

00

0;

0:

Arrival Date:

Departure Date:

Page No:

age No:

Guest Name:

INFORMATION INVOICE

Folio No:

Date	Description		Charges
05-10-17	Room Revenue		149.00
05-10-17	Destination Marketing Fee - 3%		4.47
05-10-17	Tourism Levy - 4%		6.14
05-10-17	Room GST - 5%		7.67
05-11-17	Visa		
		Total	167.28
		Balance	0.00

Signature:

I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #105631154 RT 0008



Expense Report Direct Bill Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive or an AHS Board Member and paid for by a third party vendor. The information will be used for public disclosure reporting.

Expenses Paid Directly to Third Party Vendors:

AHS may have established accounts with certain vendors used to book travel and other expenses that are billed directly to AHS.

Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund. It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- Information will be used for reporting purposes only.
- A personal cheque must be attached to cover expenses deemed ineligible.

 Indicate whet 	ther you have expenses to report in this sect	ion for this reporting period:	YES	
Name :	Andrea Reckwith-Ferraton	Penarting Period for the	Month of · May-17	

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
18-05-2017	Direct Billing	Airline Ticket	Meeting in Edmonton - SSP with Todd Gilchrist and PWL COI discussion	Marlin Travel	\$454.46
17-04-2017	Direct Billing	Airline Ticket	Meeting in Edmonton - SSP with Todd Gilchrist, Operational Planning Review	Marlin Travel	\$389.66
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	-
Total Paid in the	Month				\$ 844.12



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET **EDMONTON AB** T5J 3E4

Trip #: Booking Date: 08 May 17 Client: Agent:

File Locator:

PASSENGERS: MS ANDREA BECKWITHFERRATON

REFERENCE/ DESCRIPTION AIR CANADA Ticket #				FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				379.50	0.00	\$0.00	74.96	0.00	454.46 CAD
			Total:	379.50	0.00	0.00	74.96	0.00	454.46 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount
		05/08/2017							0.00 CAD

PAY	ME	NT	S
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Invoice #	Payment Date	Card Holder	F	orm of Payment		Amount
	05/08/2017					0.00 CAD
	05/08/2017					454.46 CAD
	05/08/2017					-454.46 CAD
	05/05/2017					454.46 CAD
					Total Payment:	454.46 CAD

Balance Due CAD Currency 0.00 CAD

0.00 \$0.00 Total GST Total HST

CORPORATE UNIT 101 REASON FOR TRAVEL WORK MEETINGS

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY ----------AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS. ------****PLEASE NOTE CHECKIN MINUTES PRIOR

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4



MY ITINERARY

Passengers Citizenship Required Travel Documents

ANDREA BECKWITHFERRATON Not Specified Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: ANDREA BECKWITHFERRATON Booking Date: 05/05/2017

File Locator/Ticket #:

Airline Flight From Terminal To Class Seat Stops

AIR CANADA 08136 CALGARY INTL EDMONTON INTL 05/10/2017 10:35AM 05/10/2017 11:25AM





AIR

Passengers: ANDREA BECKWITHFERRATON Booking Date: 05/05/2017

File Locator/Ticket #:

Airline Flight From Terminal To Class Seat Stops

AIR CANADA 08151 EDMONTON INTL CALGARY INTL U

05/11/2017 3:35PM 05/11/2017 4:27PM



Invoice

ALBERTA HEALTH SERVICES ANDREA BECKWITHFERRATON 10030 107 ST **EDMONTON AB** CA T5J3E4

Trip #: **Booking Date:** Client: Agent:

File Locator:

PASSENGERS: MS ANDREA BECKWITHFERRATON

REFERENCE/ DESCRI	PTION			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				314.70	0.00	\$0.00	74.96	0.00	389.66 CAD
			Total:	314.70	0.00	0.00	74.96	0.00	389.66 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Paymen	t		Amount
		04/17/2017							389.66 CAD
							Total Pa	ayment:	389.66 CAD

0.00 CAD **Balance Due CAD Currency**

Total GST 0.00 \$0.00 Total HST

CORPORATE UNIT 101 REASON FOR TRAVEL WORK PURPOSES

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ... 1 888 342 3292 OUTSIDE OF TOLL FREE AREA REVIEW YOUR ITINERARY FOR ACCURACY*** PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY ------AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES ANDREA BECKWITHFERRATON 10030 107 ST EDMONTON AB CA T5J3E4 Trip #: 17 Apr 17
Client: Agent:

File Locator:

MY ITINERARY

Passengers Citizenship Required Travel Documents

ANDREA BECKWITHFERRATON Not Specified Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: ANDREA BECKWITHFERRATON Booking Date: File Locator/Ticket #:							04/17/2017	
Airline	Flight	From	Terminal	То	Class	Seat	Stops	
AIR CANADA	08134	CALGARY INTL		EDMONTON INTL	V			
		04/19/2017 9:05AM		04/19/2017 9:55AM				
AIR CANADA	08173	EDMONTON INTL		CALGARY INTL	V			
		04/19/2017 7:10PM		04/19/2017 8:02PM				