

AHS Board and Executive Expense Report

Name:Andrea Beckwith-FerratonTitle:Chief Ethics & Compliance OfficerLocation:CalgaryExpenses approved during the month of June 2022

143

					Travel (1)				
Approved MMM-YY	Source Document	Purpose	Airfare	e Meal	s Accommod	Other ation Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
	P-Card	Meetings					-			
	Expense Claim	5					-			
Jun-22		Meetings					-			143
Total			¢	- ¢	- ¢	- ¢	- ¢ -	¢ _	¢ -	\$ 143

Total for the Month \$

Maximum daily single meal expense claimed in the month	\$ -
Maximum daily base hotel rate claimed in the month	\$ -
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.

Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report



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 whether y	ou have expenses to report in this section f	or this reporting period:	YES	
Name :	Andrea Beckwith-Ferraton	Reporting Period for the Month of :	Jun-22	

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
2-Jun-22	Direct Billing		Institute of Corporate Directors - Board Membership Fee - Aug 01-22 to Jul 31-23	Institute of Corporate Directors	\$142.86
Total Paid in tl	ne Month				\$ 142.86



Invoice

ICD Member

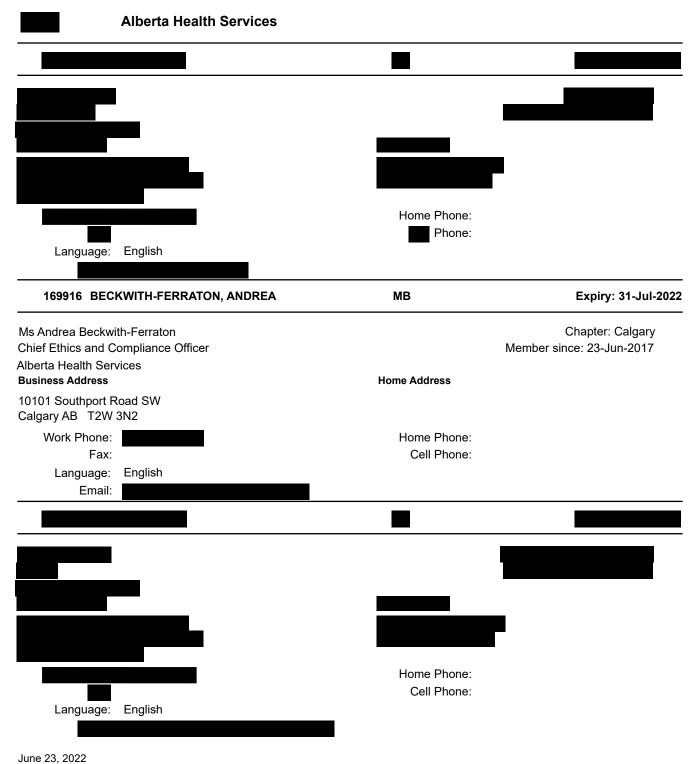
Alberta Health Services 14th Floor, Seventh Street Plaza 10030-107 Street NW, North Tower Edmonton AB T5J 3E4

				lling Date Jun-2022	ICD Membe
<u>Code</u>	ltem		From	To	<u>Amount</u>
FEE_BRDSEC	Board Membership / Adhé	sion globale du C. A.	1-Aug-2022	31-Jul-2023	2,000.00
				Total Billing	2,000.00
-	payable to "Institute of Corporate ir payment. You can also make your			÷ \$1	142.86 per
-	r payment. You can also make your			÷ \$1	
Member ID with you	r payment. You can also make your			÷ \$1	142.86 per
Member ID with you Additional Perso	nal Information	r membership payment online by le		÷ \$1	142.86 per
Member ID with you Additional Perso Work Phone:	nal Information	r membership payment online by lo Chapter:		÷ \$1	142.86 per
Member ID with you Additional Perso Work Phone: Home Phone:	nal Information	r membership payment online by lo Chapter:		÷ \$1	142.86 per

Please take a moment to review and confirm that your mailing and additional personal information is up-to-date and accurate. **Please fax any updates and changes to us at 416-593-0636**, or simply go online to update your member profile at www.icd.ca.

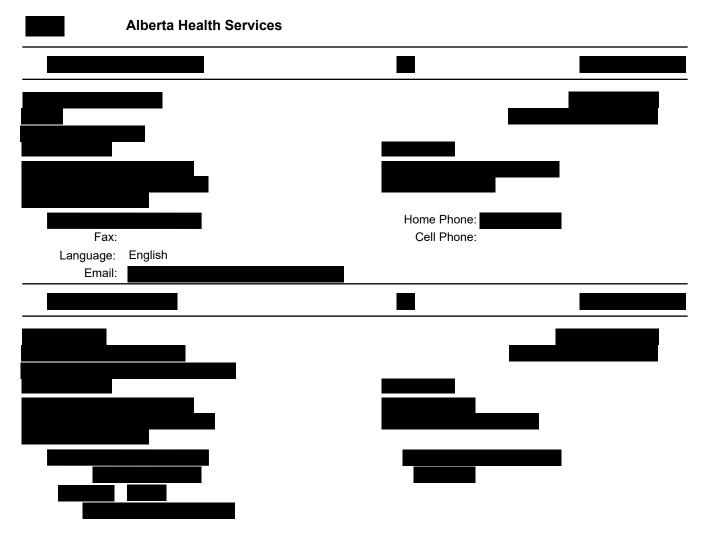
Thank you for your membership!





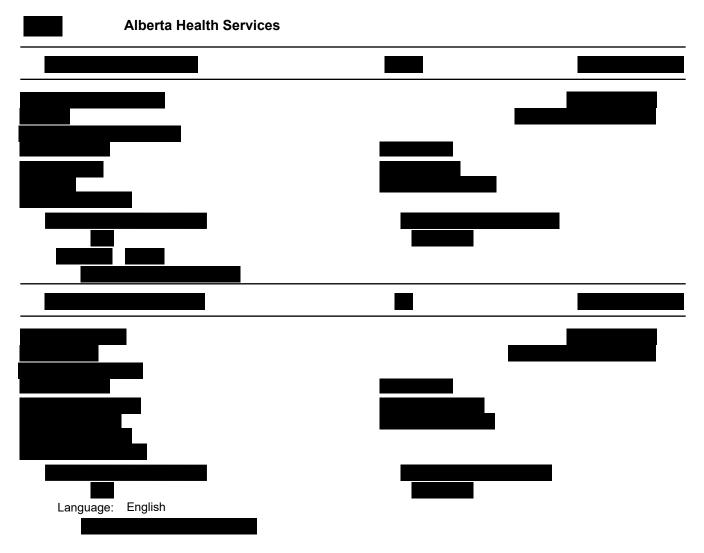


Board Membership Program - Company Listing

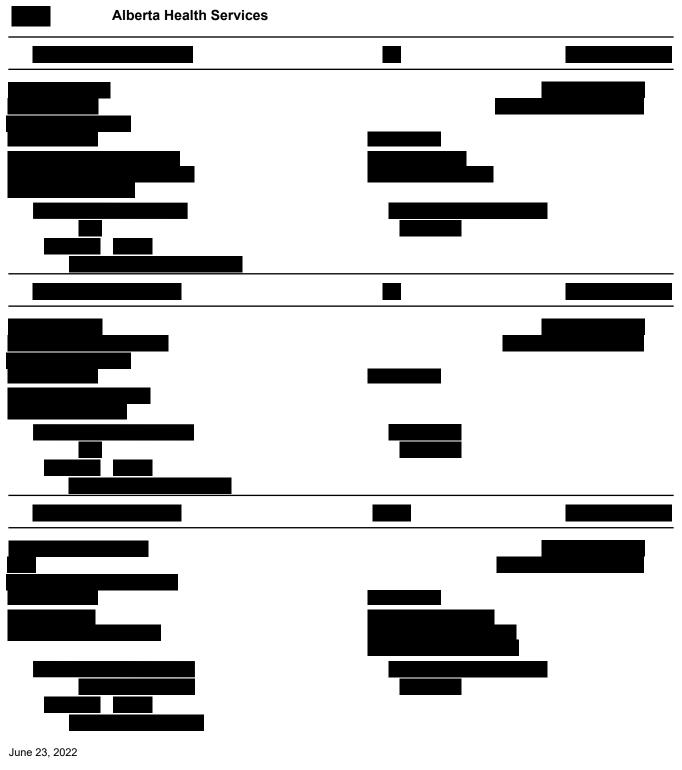


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Alberta Health Services



Board Membership Program - Company Listing



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