

## Official Administrator and Executive Expense Report

**Name** Brenda Huband  
**Title** VP & Chief Health Operations Officer Central & Southern Alberta  
**Location** Calgary  
 Expenses submitted during the month of April 2015

Travel (1)										
Month-Year	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Apr-15	P-Card	Meetings	391		698	1,111	2,200			
Apr-15	Expense Claim	Meetings					-			42
<b>Total</b>			<b>\$ 391</b>	<b>\$ -</b>	<b>\$ 698</b>	<b>\$ 1,111</b>	<b>\$ 2,200</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 42</b>

**Total for the Month** \$ 2,242

Maximum daily single meal expense claimed in the month \$ -  
 Maximum daily base hotel rate claimed in the month \$ 159  
 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

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

**SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)**

• Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system  
 • Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system  
 • If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 4-Apr-15 To \_\_\_\_\_ (if applicable)  
 Travel Period from: \_\_\_\_\_ To \_\_\_\_\_  
 Out-of-Province Travel

Name: Brenda Huband Position (Title): VP & CHOO Central & Southern Alberta  
 Location: \_\_\_\_\_ Dept: \_\_\_\_\_ DOFA Level: \_\_\_\_\_ (if applicable) Union: \_\_\_\_\_ Business Phone #: \_\_\_\_\_ Ext: \_\_\_\_\_  
 Employee # (E-People): \_\_\_\_\_

**SECTION E: FINANCE CODING & TOTAL CLAIM**

CAPITAL PROJECT CODING ONLY → Project Number \_\_\_\_\_ Project Task Number \_\_\_\_\_  
 Expenditure Organization \_\_\_\_\_ Expenditure Type \_\_\_\_\_

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT	
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total Expense	Total Section B	Total Section C&D
2A	101	0767	71205000206		101	0767	71205000206		\$41.99		\$41.99
2B	101	0767	71205000206								
2C	101	0767	71205000206								
2D	101	0767	71205000206								
									\$41.99		\$41.99

NOTE: This section auto fills from page 2A, 2B, 2C & 2D

NOTE: These fields do not automatically fill for Section C & D

**SECTION F: AUTHORIZATION**

I attest that I have read and understand the "Travel, Hospitality & Working Session Expense Policy (11/22)" of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of this policy.  
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.  
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above. *Travel, Hospitality and Working Session Expenses Policy - Document# 1122*

I, by signing this form, attest that I am compliant to all the above statements.  
 Employee Signature: Brenda Huband Date: 15-Apr-15

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.  
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.  
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Approved By (PRINT ONLY): Deborah Rhodes DOFA Level: \_\_\_\_\_ Position #: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Signature: Deborah Rhodes Title: VP Corp Services + CFO Date: April 16/15

I, by signing this form, attest that I am compliant to all the above statements.  
 Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Health and Personal Information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 33(c) and 34(2) of the Freedom of Information and Protection of Privacy Act (FIPPA) Act respectively, for the purpose of administering AHS Procure to Pay program.

Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10090-107 St, North Tower, 10th Floor - Edmonton, Alberta T5C 0G8

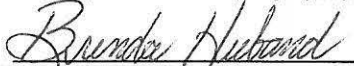
- 1 of 3 -

## TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

<b>SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)</b>													
<ul style="list-style-type: none"> <li>• Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system</li> <li>• Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system</li> <li>• If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)</li> </ul>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Expense Date From:</td> <td style="text-align: center;">4-Apr-15</td> <td>To</td> <td></td> </tr> <tr> <td>Travel Period from:</td> <td></td> <td>To</td> <td style="text-align: right;">(if applicable)</td> </tr> <tr> <td colspan="4">Out-of-Province Travel</td> </tr> </table>	Expense Date From:	4-Apr-15	To		Travel Period from:		To	(if applicable)	Out-of-Province Travel			
Expense Date From:	4-Apr-15	To											
Travel Period from:		To	(if applicable)										
Out-of-Province Travel													
Name: <u>Brenda Huband</u>	Position (Title): <u>VP &amp; CHOO Central &amp; Southern Alberta</u>												
Location: <span style="background-color: black; color: black;">[REDACTED]</span>	Dept: <span style="background-color: black; color: black;">[REDACTED]</span> DOFA Level: <span style="background-color: black; color: black;">[REDACTED]</span> (if applicable) Union: _____ Business Phone #: <span style="background-color: black; color: black;">[REDACTED]</span> Ext: _____												
Employee # (E-People): _____													

<b>SECTION E: FINANCE CODING &amp; TOTAL CLAIM</b>		
CAPITAL PROJECT CODING ONLY →	Project Number _____	Project Task Number _____
	Expenditure Organization _____	Expenditure Type _____

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT	
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total Expense	Total Section B	
2A	101	0767	71205000206		101	0767	71205000206		\$41.99	Total Section C&D	\$41.99
2B	101	0767	71205000206							Less Cash Advance	
2C	101	0767	71205000206								
2D	101	0767	71205000206							<b>TOTAL CLAIM</b>	<b>\$41.99</b>
					**User to enter Coding & \$ Amounts				\$41.99		
<b>NOTE:</b> This section auto fills from page 2A, 2B, 2C & 2D					<b>NOTE:</b> These fields do not automatically fill for Section C & D						

<b>SECTION F: AUTHORIZATION</b>	
<p>I attest that I have read and understand the "Travel, Hospitality &amp; Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of this policy.</p> <p>I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.</p> <p>I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above. <span style="float: right;"><u>Travel, Hospitality and Working Session Expenses Policy - Document# 1122</u></span></p>	
I, by signing this form, attest that I am compliant to all the above statements <b>Employee Signature:</b> <u></u>	<b>Date</b> <u>15-Apr-15</u>
<p>I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.</p> <p>I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.</p> <p>I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.</p> <p style="text-align: right;">Approved claim form with receipts should be sent by the approver directly to Accounts Payable for processing.</p>	
<b>Approved By (PRINT ONLY):</b> _____ <b>Signature:</b> _____	<b>DOFA Level</b> _____ <b>Position #</b> _____ <b>Phone #</b> _____ <b>Ext</b> _____ <b>Title</b> _____ <b>Date</b> _____
<p>I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.</p> <p>I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.</p> <p>I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.</p>	
<b>Approved By (PRINT ONLY):</b> _____ <b>Signature:</b> _____	<b>DOFA Level</b> _____ <b>Position #</b> _____ <b>Phone #</b> _____ <b>Ext</b> _____ <b>Title</b> _____ <b>Date</b> _____

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Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10030-107 St, North Tower, 10th Floor, Accounts Payable, Edmonton, AB T5J 3E4



**EXPENSE CLAIM DETAILS**

*If **NOT** claiming any expenses in **Sections C or D**, this page does **NOT** have to be submitted.*

<b>SECTION C: OTHER EXPENSES</b>					Emp # (E-People)		Page 3		
<p>• Expenses to be claimed in this section include but are not limited to: Hospitality &amp; Hosting, Working Sessions, Recruitment, Relocation, Continuing Education, Business Insurance, and miscellaneous expenses.                  → If expenses are for <u>travel, gas, etc.</u>, go to Section B on pg 2.                  • ALL "OTHER" expenses listed below MUST have a secondary/expense code indicated!</p> <p align="center"><b>***Subtotal "Other Expenses" for each functional centre separately and enter each subtotal into column "Section C Total" on page 1 Section E***</b></p>									
Date dd-mmm-yy	Business Reason for Expense - Detailed Description Required (include who attended-(if meal/Hospitality), why expense was required, what expense was and pertaining to and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page				
		Bal Unit	Location	Functional Centre	Secondary/Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Yes/No	Continuing Education Select type from dropdown menu (if applicable)	GST is ON till slip/receipt, enter total amount in this column WITH GST	GST is NOT on till slip/receipt, enter total amount in this column
4-Apr-15	Blackberry Holder -	101	0767	71205000206				\$41.99	\$41.99

<b>SECTION D: FOREIGN CURRENCY</b>				<p align="center"><b>ONLY ENTER IN THIS SECTION IF AMOUNT NOT CONVERTED INTO CDN \$ (conversion not indicated on receipt/statement)</b>                  If foreign currency has been converted to CDN \$ on your receipt, enter expense in CDN \$ in either Section B or C as applicable.</p>						
<p>Please click on the following link for the Bank of Canada exchange rate using the date of expense</p>		<p align="center"><a href="#">Bank of Canada Currency Converter</a> →</p>		<p align="center">Select foreign country in 'From cell', and Canadian Dollar in 'To cell'; Enter date of expense in both date cells then select convert which will give the exchange rate - enter this amount in exchange rate column</p>						
Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Secondary/Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Yes/No	Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page			
		Bal Unit	Location	Functional Centre			Foreign Currency Amount	Currency Type	Exchange Rate	Canadian Value

**Rationale is Required for expenses that are not Cost Effective**  
 (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

**Expenses Paid (Retain a copy for your records)**  
 Do not include amounts paid by Alberta Health Services or reimbursed / reimbursable by another organization

-Blackberry holder  
-Used personal Visa

**TELUS®**

Market Mall Flag  
3625 Shaganappi Trail NW  
Unit D6A  
Calgary AB  
403-247-1840

GST Registration #: 812758878 RT0001  
Date: 04/04/2015 Time: 14:02

Store: [REDACTED] Cashier: [REDACTED]  
Terminal: [REDACTED] Sales Rep: [REDACTED]  
Receipt #: [REDACTED]



HOL1105  
BB CLASSIC LEATHER SWIVEL HOLSTER BLAC  
Reg: 39.99 each  
Qty: 1 39.99  
-----  
Subtotal: 39.99  
GST: 2.00  
-----  
Total: CAD\$41.99  
Tender: CC (VISA): 41.99

TERMINAL: 00551202  
VISA [REDACTED] Exp [REDACTED]  
AID: A000000003T010  
VISA  
CARDHOLDER: BRENDA HUBANG

PURCHASE

41.99

AUTH #: [REDACTED] CHIP  
REFERENCE #: [REDACTED]  
SEQ: [REDACTED]  
Date: 15/04/04 Time: 14:02:47  
APPROVED ACI/ISO: 001/00

PLEASE RETAIN RECEIPT FOR REFUND  
AND WARRANTY CLAIMS.

Items can be returned within 15 days of  
Some conditions apply.  
See stores for details.

Purchase price includes any  
applicable provincial electronics  
environmental fees.

Manage your account for free at  
telusmobility.com

\*\*\* CLIENT COPY \*\*\*

**Instruction:**

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

HUBAND, BRENDA Cardholder's Name	VP/CHIEF HEALTH OPERATIONS Cardholder's Position/Title	Billing Reporting Period:	20/04/2015
HEALTH OPERATIONS CENTRAL & Cardholder's Dept	SOUTHPORT Cardholder's Site/Location	Total Statement Amount:	\$2,199.48
BRENDA.HUBAND@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address		Last 6 digits of the P-Card #: [REDACTED]	

**Statement of Transactions**

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
1	21/03/2015	384382722	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	28.35	CAD	28.35	1.35	.00 Prkg-Woman of Vision-V. Kaminski - Percy Wickman Award
2	24/03/2015	384972022	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	56.70	CAD	56.70	2.70	.00 Prkg-Exec Comm
3	25/03/2015	384778892	THE WESTIN EDMONTON, WESTIN HOTELS	178.51	CAD	178.51	33.39	.00 Hotel-Exec Comm
4	25/03/2015	384972021	AIR CAN [REDACTED] AIR CANADA	390.86	CAD	390.86	.00	.00 Fit-Exec Comm; PLT; Sr. Leadership Mtg
5	26/03/2015	384972015	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-Westin-Exec Comm; PLT; Aborg Hlth Prog; AH&AHS Abor Hlth
6	26/03/2015	384972016	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-ATB PI to YEG-return to Calg re mtgs in Edm Mar 3
7	26/03/2015	384972017	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-Westin-Exec Comm
8	26/03/2015	384972018	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-SSP to YEG-Salimah W. also passenger; return to Calg from Mtgs Edm
9	26/03/2015	384972019	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-YEG-Westin-Exec Comm; Conf Call CEO; Zone Lead Bdgt
10	26/03/2015	384972020	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-SSP to YEG-return Calg from mtgs Edm
11	01/04/2015	385868384	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	72.45	CAD	72.45	3.45	.00 Prkg-Exec Comm; TCC N. Thain & C. Keenan; PLT, L. Dempster, Sr. Leadership
12	01/04/2015	386225593	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi YEG - SSP Bdgt Task Force & Woman of Vision & Percy Wickman Award
13	01/04/2015	386225594	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi Shaw Conf Centre to YEG-return to Calgary from Events in Edm, Lori Anderson passenger too
14	01/04/2015	386225595	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi-YEG to Westin-Exec Comm
15	01/04/2015	386225596	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi SSP to YEG return to Calgary mtgs in Edm
16	01/04/2015	386225597	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	.00 Taxi YEG to Westin-Exec Comm, TCC N. Thain; C. Keenan; PLT; L. Dempster; Sr. Leaders Mtg
17	02/04/2015	385868383	THE WESTIN EDMONTON, WESTIN HOTELS	357.02	CAD	357.02	66.78	.00 Hotel-Exec Comm; TCC Cath Keenan; PLT; L. Dempster; Sr. Leadership
18	07/04/2015	386225598	AHS PARKING, HOSPITALS	8.50	CAD	8.50	.40	.00 Prkg South Zone Tour & Trip
19	07/04/2015	386423854	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	28.35	CAD	28.35	1.35	.00 Prkg YYC-Exec Comm
20	13/04/2015	386706270	CO OP TAXI LINE LTD, LIMOUSINES AND TAXICABS	62.00	CAD	62.00	2.95	.00 Taxi from SSP - YEG & Salimah Walji as well - Exec Comm
21	14/04/2015	387189089	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	56.70	CAD	56.70	2.70	.00 Prkg-Hotel-Exec Comm; Dental Clinics Comp; Zone Leaders Bdgt Session; OA & Dr. Talbot
22	15/04/2015	386965477	THE WESTIN EDMONTON, WESTIN HOTELS	162.79	CAD	162.79	30.45	.00 Hotel-Exec Comm; Dental Clinics Comp; Zone Leaders Bdgt Session; OA & Dr. Talbot
23	16/04/2015	387189088	VINCI PARK - PETROLEUM, AUTOMOBILE PARKING LOTS AND GARAGES	5.25	CAD	5.25	.25	.00 Parking for Funny Bone Event - Calgary Hlth Trust



<b>Signatures</b>		
<p><b>Cardholder Designate (If Applicable)</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies, Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre.</li> </ul>		
<p><u>Kerry Pace</u> Name of Cardholder Designate</p> <p><u>Kerry Pace</u> Signature of Cardholder Designate</p>	<p><u>Exec Admin</u> Cardholder Designate Position/Title</p> <p><u>Apr. 27/15</u> Date of Signature</p>	
<p><b>Cardholder</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul>		
<p><u>HUBAND, BRENDA</u> Name of Cardholder</p> <p><u>Brenda Huband</u> Signature of Cardholder</p>	<p><u>VP/CHIEF HEALTH OPERATIONS</u> Cardholder Position/Title</p> <p><u>2015 April 30</u> Date of Signature</p>	
<p><b>Approver Designate (If Applicable)</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul>		
<p><u>Susan Best</u> Name of Approver Designate</p> <p><u>Susan Best</u> Signature of Approver Designate</p>	<p><u>Exec Assistant</u> Approver Designate Position/Title</p> <p><u>Apr. 30/15</u> Date of Signature</p>	
<p><b>Approver</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul>		
<p><u>Deborah Rhodes</u> Name of Approver</p> <p><u>Deborah Rhodes</u> Signature of Approver</p>	<p><u>VP Corp Services &amp; CFO</u> Approver Position/Title</p> <p><u>May 4, 2015</u> Date of Signature</p>	
<p><b>Attach:</b></p> <ul style="list-style-type: none"> <li>• Original (or scanned) itemized receipts with documented business reasons including names of participants where required</li> <li>• Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable:</li> <li>• Copies of pre-approvals for travel</li> <li>• Personal cheque payable to "Alberta Health Services"</li> <li>• Return, refund and/or credit receipts</li> <li>• Disputes letter</li> <li>• Business reasons for travel require detailed descriptions - include where travelled to, who attended (if meal) why travel was necessary and detailed explanation of reason.</li> </ul>	<p><b>Address:</b></p> <p>Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4</p>	
Reference # _____	Reviewed by: _____	Date: _____

- CKO Woman of Vision
- Beryl Wickman Award

①

Parking

RECEIPT  
GST NO. R122556194

TKT NO: [REDACTED]  
POF: CSB  
IN: 03/20/15 04:35  
OUT: 03/20/15 23:34  
PAID: \$ 28.35 ✓  
(GST INCLUDED)  
MASTERCARD  
[REDACTED]

YOU HAVE 15 MIN.  
TO EXIT

Calgary International Airport Parking



2

**RECEIPT**  
**GST NO. R122556194**

TKT [REDACTED]  
POF: CSO  
IN: 03/23/15 15:40  
OUT: 03/24/15 19:07 }  
PAID: \$ 56.70 ✓  
(GST INCLUDED)  
MASTERCARD  
[REDACTED]

YOU HAVE 15 MIN.  
TO EXIT

Calgary International Airport Parkade

*Excel Comm.*

- Exec Comm

(3)

The Westin Edmonton  
10135 100 St  
Edmonton, AB T5J 0N7  
Canada  
Tel: 780-426-3636 Fax: 780-426-1454

# WESTIN<sup>®</sup>

HOTELS & RESORTS

Brenda Huband



Page Number :  
Guest Number :  
Folio ID :  
Arrive Date :  
Depart Date :  
No. Of Guest :  
Room Number :  
Club Account :

	Invoice Nbr
[Redacted]	[Redacted]
23-MAR-15	15.29
24-MAR-15	06.09
[Redacted]	[Redacted]

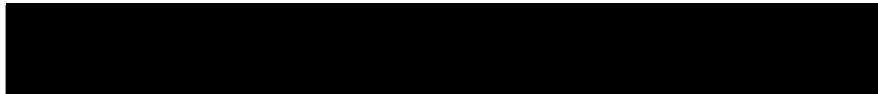
Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 24-MAR-15 06:2

Date	Reference	Description	Charges (CAD)	Credits (CAD)
23-MAR-15	[Redacted]	Room Charge	159.00	
23-MAR-15	[Redacted]	GST	8.19	
23-MAR-15	[Redacted]	DMF	4.77	
23-MAR-15	[Redacted]	Tourism Levy	6.55	
24-MAR-15	[Redacted]	Mastercard		-178.51
** Total			178.51	-178.51
*** Balance			0.00	

FIND CLARITY, BOOST HAPPINESS - Like a gym membership for your mind, Headspace gives you simple tools to feel happier, work smarter and sleep better. Get some Headspace at [westin.com/headspace](http://westin.com/headspace)



Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

Continued on the next page

The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454

**WESTIN®**  
 HOTELS & RESORTS

Brenda Huband

Page Number : [REDACTED] Invoice Nbr : [REDACTED]  
 Guest Number : [REDACTED]  
 Folio ID : [REDACTED]  
 Arrive Date : 23-MAR-15 15:29  
 Depart Date : 24-MAR-15 06:09  
 No. Of Guest : [REDACTED]  
 Room Number : [REDACTED]  
 Club Account : [REDACTED]

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
03-23-2015	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00
03-24-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-178.51
<b>Total</b>	<b>159.00</b>	<b>8.19</b>	<b>6.55</b>	<b>0.00</b>	<b>0.00</b>	<b>4.77</b>	<b>178.51</b>	<b>-178.51</b>



\$390.00

Your booking is confirmed. Booking reference: [REDACTED]

(4)

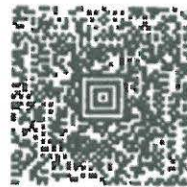
An email booking confirmation has been sent to: [brenda.huband@albertahealthservices.ca](mailto:brenda.huband@albertahealthservices.ca).  
Use your booking reference to retrieve your official Itinerary/Receipt at [aircanada.com](http://aircanada.com).

Passengers Mrs Brenda Huband

Flight	From	To	Departure	Arrival
AC8164	Calgary (YYC)	Edmonton (YEG)	19:30 Mon 30-Mar 2015	20:21 Mon 30-Mar 2015
AC8157	Edmonton (YEG)	Calgary (YYC)	18:00 Wed 01-Apr 2015	18:00 Wed 01-Apr 2015

Air Transp. Charges	298.00
Options	0.00
Taxes, fees and charges	92.86
Travel Insurance	Purchase travel insurance
<b>Grand Total</b>	<b>\$390.86</b>
Canadian dollars	

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



- Exec Comm.  
- P&T  
- Sr. Leaders Team

Booking Information



Booking Reference: [REDACTED]  
Electronic Ticketing confirmed. This is your official Itinerary/receipt.

Customer Care  
Air Canada  
1-800-247-2262

Main Contact:  
Mrs Brenda Huband  
[brenda.huband@albertahealthservices.ca](mailto:brenda.huband@albertahealthservices.ca)  
Mo [REDACTED]  
We [REDACTED]

Flight Arrivals and Departures  
1-800-422-7533

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8164 <sup>1</sup>	Calgary (YYC) Mon 30-Mar 2015 19:30	Edmonton, Edmonton Int'l (YEG) Mon 30-Mar 2015 20:21	0	0hr51	DH3	Flex, V	
AC8157 <sup>1</sup>	Edmonton, Edmonton Int'l (YEG) Wed 01-Apr 2015 18:00	Calgary (YYC) Wed 01-Apr 2015 18:50	0	0hr50	DH4	Flex, W	

Operated by:  
<sup>1</sup> Air Canada Express - Jazz

Passenger Information

1: Mrs Brenda Huband : Adult (16+), Ticket Number [REDACTED]

Air Canada - Aeroplan : [REDACTED]  
Payment Card: [REDACTED]  
Seat Selection: [REDACTED]

Meal Preference: None  
Special Needs: None

Purchase Summary

Fare Summary	
Total for 1 adult	
Departing Flight (Flex) (including surcharges)	154.00
Return Flight (Flex) (including surcharges)	144.00
Options	0.00

Taxes, Fees and Charges	92.86
Total	390.86
Travel Insurance (declined)	0.00
<b>Grand Total - Canadian dollars</b>	<b>\$390.86</b>

**Payment Information**

**Credit/Debit Card** [redacted] Amount paid: **\$390.86**  
 The following amount (tax inclusive) will appear on your credit card or debit card statement:

- Air Canada: \$390.86 (Air Transp. Charges - per ticket)

Ticket # [redacted]

**Fare Rules**

**Departing Flight** Calgary (YYC) To Edmonton (YEG) - Flex

**Return Flight** Edmonton (YEG) To Calgary (YYC) - Flex

**Changes:**

- Prior to day of departure - **Change fee** per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
- Same-day confirmed changes** at check-in or at the airport are permitted at a flat fee of \$75 CAD/USD per direction, per passenger (subject to availability). Same-day flights only.
- Same-day standby** is available: on flights between Toronto and Montreal or Ottawa, on flights between Calgary, Edmonton and Vancouver, as well as on flights between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) or Newark (EWR) airports (connecting flights excluded).
- Flights can only be used in sequence from the place of departure specified on the itinerary.

**Cancellations:**

- Tickets are **non-refundable** and **non-transferable**.
- Cancellations** can be made up to 45 minutes prior to departure.
- Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.
- Customers who **no-show** their flight will forfeit the fare paid.
- Complimentary advance standard seat selection** on Air Canada and Air Canada Express (operated by Jazz), subject to availability.
- Up to 24 hours after the purchase of a **new ticket**, Air Canada will cancel your ticket and provide a full refund without penalty.
- Flights operated by Air Canada: earn 100% Aeroplan Miles (Altitude Qualifying Miles)
- Read complete fare rules applicable to this fare.

**Baggage Allowance and Fees**

Prepare your checked and carry-on baggage with the help of our Baggage Guide .

**Carry-on Baggage**

On your Air Canada, Air Canada Express, or Air Canada rouge operated flight, you are entitled to 1 standard item (max. size: 23 x 40 x 55 cm [9 x 15,5 x 21,5 in]) and 1 personal item (max. size: 16 x 33 x 43 cm [6 x 13 x 17 in]). Maximum weight for each item is 10 kg (22 lb). View more details.

**Checked Baggage**

Please see below for details on the bags you plan to check in at the baggage counter.

<b>Departing Flight</b> : Calgary (YYC) To Edmonton (YEG) - Flex	
<b>Return Flight</b> : Edmonton (YEG) To Calgary (YYC) - Flex	
Regular Baggage Allowance	1st bag: <b>Complimentary</b>
	2nd bag: <b>\$25.00 CAD</b> + taxes* per direction
	Max. weight per bag: 23 kg (50 lb) Max. linear dimensions per bag: 158 cm (62 in)

\* For travel within Canada or between Canada and the United States, a Canadian tax of \$3.00 CAD may apply to baggage fees. For travel between Canada or the United States and Mexico, the Dominican Republic and Barbados, an applicable local sales tax of \$4.00 CAD may apply to baggage fees. For all other itineraries to/from Mexico, the Dominican Republic and Barbados as well as itineraries to/from South America, an applicable local sales tax of \$21.00 CAD may apply to baggage fees. All above tax amounts are based on the maximum applicable tax amounts per itinerary type. Actual amounts may vary and will be charged in the currency used in your departure airport. Tax amounts are subject to change without notice by local government.

JKG - Weston

5

- Exec Comm.

- PLT

- Above Health Prog

- AH + AHS, Above Health

BRENDA HUBAND

March 02/2015

Apd Weston

PRESTIGE TRANSPORTATION  
18115 31 Avenue NW  
Edmonton AB T6H-1C2  
780-463-3888

Term Id: 4582412509440  
Term: 1161  
N/C PURCHASE  
Dr: 10111400  
Card #: [REDACTED]

APPROVED

AMOUNT

CAD\$72.00 ✓

Ref: [REDACTED]  
Aut: [REDACTED]

Book on line at  
EHPRESTIGE.COM

Thank you for being our guest.  
GST #62104769

Date: 2015/03/26 Time: 10:58:22  
Response: [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*



ATB Place → YEG

return to YEG from mtg held  
March 3rd

(6)

BRENDA HUSBAND

March 03/2015 ✓

ATB Place Ap

PRESTIGE TRANSPORTATION  
19135 31 Avenue NW  
Edmonton AB T6H 1C2  
788-463-5000

Item Id: 4502412509440

Item #: 1167

W/C PURCHASE

Op Id: [REDACTED]

Card #: [REDACTED]

APPROVED

AMOUNT

CAD\$72.00 ✓

Ref. # [REDACTED]

Auth. # [REDACTED]

BOOK on line at  
EDWPRESTIGE.COM

Thank you for being our Guest  
GST R62104769

Date: 2015/03/03 14:49

Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

JEG - Westin  
- Excl Comm

⑦

BRENDA HUBAND  
March 09/2015 ✓  
Apr Westin  
PRESTIGE TRANSPORTATION  
10135 51 Avenue NW  
Edmonton AB T6A-1C2  
780-463-5000

Term Id: 4502412509440  
Item #: 1103  
M/C PURCHASE  
Op Id: 114995  
Card # [REDACTED]

APPROVED  
AMOUNT CAD\$72.00 ✓

Re [REDACTED]  
Ru [REDACTED]  
Book on line at  
EDIPRESTIGE.COM  
Thank you for being our guest  
GST 062184769

Date: 2015/03/26 Time: 11:42:20  
Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

SSP → JEC

- Salimat Walji also a passenger
- return to Calgary from intps in J. Edm.

⑧

BRENDA HUBAND  
+ SAUMAT  
March 10/2015 ✓  
SSP/AP

PRESTIGE TRANSPORTATION  
10135 21 Avenue NW  
Edmonton AB T6H-1C2  
780-463-5000

Item Id: 4502412509440  
Item #: 1164  
N/C PURCHASE  
Op: 1-11-15  
Car: [REDACTED]

APPROVED  
AMOUNT CAD\$72.80 ✓

Ref. [REDACTED]  
Auth. [REDACTED]

See us online at  
EDMPRESTIGE.COM  
Thank you for being our guest  
GST #G2184769

Date: 2015/03/25 11:08:50  
Response: A [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*



(19)

JEG → Weston

- Exec Comm.
- Conf Call & CEO
- Zone Readers Bdgt. Mtg

BRENDA HUBBARD

March 16 / 2015 ✓

Ap2 Weston ✓

PRESTIGE TRANSPORTATION  
18135 31 Avenue NW  
Edmonton AB T6A-1C2  
780-463-5888

Term ID: 4382412589448

Gen Billings

/C PURCHASE

P. 1

Card

APPROVED

AMOUNT

CAD\$72.88 ✓

NOI.

Look us up at  
EMPLOYEE.COM

Thank you for being our best  
GST 862184769

Date: 2015/03/16 Time: 11:05:23  
Response: 00

\*\*\*CUSTOMER COPY\*\*\*

SSP → JFK-

- return to Kelly from mtg in kitchen

(10)

BRENDA HUBANO.  
March 17/2015 ✓  
SSP7 AP  
PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6H-1C2  
780-463-5000  
Term Id:4502412509440  
Item #1166  
R/C PURCHASE  
Sp [REDACTED]  
Car [REDACTED]  
APPROVED  
AMOUNT CAD\$72.00 ✓  
Ref [REDACTED]  
Cut [REDACTED]  
Book on line at  
EQ@PRESTIGE.COM  
Thank you for being our guest  
GST 062184769  
Date: 2015/03/17 16:50  
Response: AD [REDACTED]  
\*\*\*CUSTOMER COPY\*\*\*

11

**RECEIPT**  
**GST NO: R122556194**

TK [REDACTED]  
POF: 650  
IN: 03/30/15 10:00  
OUT: 04/01/15 10:12  
PAID: \$ 72.45  
(GST INCLUDED)  
MASTERCARD



YOU HAVE 15 MIN.  
TO EXIT

Calgary International Airport Parkade

- Exec Comm.
- TCC - N. Thain
- TCC - C. Keenan
- PHT
- L. Dempster
- J. Leaders

JEG → SSP

(12)

- Woman of Vision - CEO
- Percy Wilkinson Award
- Bdgk Task Force

Brenda Huband  
 March 20/2015  
 App SSP ✓

PRESTIGE TRANSPORTATION  
 18135 31 Avenue NW  
 Edmonton AB T6H-1C7  
 780-463-5000

Term Id: 4502432509440  
 Item #: 1106  
 R/C PURCHASE  
 Op Id: 114985  
 Car: [REDACTED]

APPROVED

AMOUNT CAD\$72.00 ✓

Ref. [REDACTED]  
Auth. [REDACTED]

Book on line at  
EDWPRESTIGE.COM

Thank you for being our guest.  
657 862184769

Date: 2015/04/01 15:20:20  
Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

13

- Show Loy Centre  
to JEG

- return to Kelly from events  
in Edm.

- Lori Anderson was passenger as well

Brenda Huband +  
Lori Anderson

March 29 / 2015  
Shaw Conference Ap.

PRESTIGE TRANSPORTATION  
10125 31 Avenue SW  
Edmonton AB T6A-1G2  
784-463-5800

Term 1014582412589440  
Item 011107  
N/C PURPOSE  
By ID1111000  
Card #

APPROVED

AMOUNT

CAD\$72.00

Ref.  
Auth.

Book on line at  
EDMPRESTIGE.COM

Thank you for being our Guest  
GST 062104768

Date: 2015/03/29 05:41:01  
Response: AUT

\*\*\*CUSTOMER COPY\*\*\*



JEG - Weston  
- Exec Comm

14

March 23/2015  
Apd Weston ✓  
Brenda Huband

PRESTIGE TRANSPORTATION  
10125 31 Avenue NW  
Edmonton AB T6H 1C2  
780-463-5000

Term Id: 4502412509440  
Item #: 1100  
P/C PURCHASE  
Op 1  
Card

APPROVED

AMOUNT CAD\$72.00 ✓

Ref.  
Auth.

Book on line at  
EQMPRESTIGE.COM

Thank you for being our Guest  
GST 062104769

Date: 2015/04/01 15:11:48  
Response: AUTH

\*\*\*CUSTOMER COPY\*\*\*

SSP - JKG

return the key from  
mtga Edm.

15

Brenda Huband

March 21/2015

SSP > Ap. ✓

PRESTIGE TRANSPORTATION  
18185 31 Avenue NW  
Edmonton AB T6A-1C2  
780-463-3000

Term Id: 4502412509440

Item #: 1103

W/C PURCHASE

W/ Id

Card

APPROVED

AMOUNT

CAD\$72.00 ✓

Book us online at

[www.prestige.com](http://www.prestige.com)

Thank you for being our guest

061 062104763

Date: 2015/03/21 Time: 05:40:31

Response: 0

\*\*\*CUSTOMER COPY\*\*\*

16

JEG - Western

- Exec Comm
- TCC = N. Thain
- TCC = O. Keenan
- PhT
- L. Dempster
- Sr. Leaders Mtg.

Brenda Huband + Solmski  
March 30 / 2015

Apd Western

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6N-1C2  
780-463-5000

Term Id: 4502412509440  
Item #1190  
N/C PURCHASE  
Op Id  
Card

APPROVED  
AMOUNT CAD\$72.00

Ref.  
Auth.

Book on line at  
EMPRESTIGE.COM  
Thank you for being our Guest  
651 862104769

Date: 2015/04/01 Time: 15:19:58  
Response: AUTH

\*\*\*CUSTOMER COPY\*\*\*

17

The Westin Edmonton  
10135 100 St  
Edmonton, AB T5J 0N7  
Canada  
Tel: 780-426-3536 Fax: 780-426-1454

# WESTIN

HOTELS & RESORTS

Brenda Huband

Page Number : [REDACTED] Invoice Nbr : [REDACTED]  
Guest Number : [REDACTED]  
Folio ID : [REDACTED]  
Arrive Date : 30-MAR-15 16:19  
Depart Date : 01-APR-15 06:17  
No. Of Guest : [REDACTED]  
Room Number : [REDACTED]  
Club Account : [REDACTED]

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 01-APR-15 06:20

Date	Description	Charges (CAD)	Credits (CAD)
30-MAR-15	Room Charge	159.00	
30-MAR-15	GST	8.19	
30-MAR-15	DMF	4.77	
30-MAR-15	Tourism Levy	6.55	
31-MAR-15	Room Charge	159.00	
31-MAR-15	GST	8.19	
31-MAR-15	DMF	4.77	
31-MAR-15	Tourism Levy	6.55	
01-APR-15	Mastercard		-357.02
** Total		357.02	-357.02
*** Balance		0.00	

REST EASY - Nothing recharges mind and body like sound sleep. Experience superior rest at home with the Westin Heavenly(R) Bed, a revitalizing retreat for the sleep of your dreams. Learn more at [westin.com/store](http://westin.com/store)

Continued on the next page

- Exec Comm.
- TCC & C Keenan
- PLT
- L. Dempster
- A Leaders Mtg

The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454



Brenda Huband

Page Number : [REDACTED] Invoice Nbr : [REDACTED]  
 Guest Number : [REDACTED]  
 Folio ID : [REDACTED]  
 Arrive Date : 30-MAR-15 16:19  
 Depart Date : 01-APR-15 06:17  
 No. Of Guest : [REDACTED]  
 Room Number : [REDACTED]  
 Club Account : [REDACTED]

Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
03-30-2015	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00
03-31-2015	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00
04-01-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-357.02
Total	318.00	16.38	13.10	0.00	0.00	9.54	357.02	-357.02



18

ALBERTA HEALTH SERVICES  
CHINOOK REGIONAL HOSPITAL  
PARKING SERVICES  
980 19 STREET S  
LETHBRIDGE AB

Rcpt# [REDACTED]  
03/30/15 13:41 L# 2 A# 1 Txn# [REDACTED]  
03/30/15 07:14 In 03/30/15 13:41 Out  
TKC# [REDACTED]  
CRH [REDACTED] \$ 8.50  
Total Fee 8.50  
MASTERCARD [REDACTED] \$ 8.50- ✓

Change Due \$ 0.00  
DRIVE SAFELY  
COMMENTS OR CONCERNS?  
403-988-6754  
provincialparking@  
albertahealthservices.ca  
P2 POF 3301

*Trip to Lethbridge - South  
zone  
- Sean Chilton, Sean*

*Exec Comm*

19

**RECEIPT**  
**GST NO. R122556194**

TKT # [REDACTED]  
POF: CS0  
IN: 04/07/15 04:36  
OUT: 04/07/15 18:50  
PAID: \$ 28.35 ✓  
(GST INCLUDED) ✓  
MASTERCARD  
[REDACTED]

YOU HAVE 15 MIN.  
TO EXIT

*for Dr. - Salimah Wali*

*SEP-JEG*

*return to Calgary after Exec Comm.*

20

Co-op Taxi Line  
(780)425-2525  
www.co-optaxi.com

Terminal [REDACTED]  
Driver [REDACTED]  
15/04/13 19:39:29

MASTERCARD  
Card : [REDACTED]  
MasterCard  
CHIP CARD  
AID : A0000000041010  
TVR : 0000000000  
Ref # [REDACTED]  
Auth # [REDACTED]

FARE : \$ 62.00  
-----  
TOTAL : \$ 62.00 ✓

APPROVED - THANK YOU  
(01-027)

IMPORTANT: Retain a  
copy for your records

Customer Copy

(21)

- Dental Clinic Companion
- Staffing Centres
- Lexie Comm.
- Zone Leaders Bdgt.
- 2:1 CEO
- O.A. + Mr. Talbot

RECEIPT  
GST NO. R122556194

TKT [REDACTED]  
POF: [REDACTED] C50  
IN: 04/13/15 16:23  
OUT: 04/14/15 20:37  
PAID: \$ 50.70 ✓  
(GST INCLUDED)  
MASTERCARD

YOU HAVE 15 MIN.  
TO EXIT

Calgary International Airport Parkade

= OA + Dr. Tallist

(22)

- Exec Comm.
- Dental Clinic Comparison
- Zone Leaders Edgely Hessein

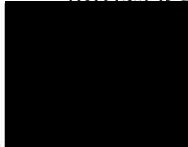
The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454

**WESTIN**  
 HOTELS & RESORTS

Brenda Huband



Page Number  
 Guest Number  
 Folio ID  
 Arrive Date  
 Depart Date  
 No. Of Guest  
 Room Number  
 Club Account



Invoice Nbr



15:36  
 06:24

: 14-APR-15  
 : 1

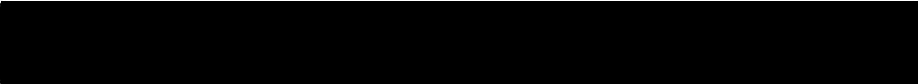
Tax Invoice

Tax ID : 615461330RT0001

The Westin Edmonton 14-APR-15 06:30

Date	Description	Charges (CAD)	Credits (CAD)
13-APR-15	Room Charge	145.00	
13-APR-15	GST	7.47	
13-APR-15	DMF	4.35	
13-APR-15	Tourism Levy	5.97	
14-APR-15	Mastercard		-162.79
** Total		162.79	-162.79
*** Balance		0.00	

KIDS EAT WELL AT WESTIN - Discover kids' meals that are as delicious as they are nutritious with the Westin Eat Well Menu for Kids, developed with Sup  
 erchefs(TM) to make kids and parents happy. Learn more at [westin.com/eatwell](http://westin.com/eatwell)



Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

Continued on the next page



The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454

# WESTIN<sup>®</sup>

## HOTELS & RESORTS

Brenda Huband

Page Number : [REDACTED] Invoice Nbr : [REDACTED]  
 Guest Number : [REDACTED]  
 Folio ID : [REDACTED]  
 Arrive Date : 13-APR-15 15:36  
 Depart Date : 14-APR-15 06:24  
 No. Of Guest : 1  
 Room Number : [REDACTED]  
 Club Account : [REDACTED]

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payments
04-13-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
04-14-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-162.79
<b>Total</b>	<b>145.00</b>	<b>7.47</b>	<b>5.97</b>	<b>0.00</b>	<b>0.00</b>	<b>4.35</b>	<b>162.79</b>	<b>-162.79</b>

23

NO NEED TO DISPLAY TICKE

VINCI Park  
Petroleum Club  
Lot # 045

License Plate Number

[Redacted]

Expiration Date/Time

06:00 AM  
APR 17, 2015

Purchase Date/Time: 05:16pm Apr 16, 2015  
Total Parking: \$5.00  
Total GST: \$0.25  
Total Due: \$5.25 ✓ Rate: Evening Rate \$ 5.00  
Total Paid: \$5.25 ✓ Payment Type: Card  
Tic [Redacted]  
SN #: 600012040111 ✓  
Setting: Petroleum Luke II  
Mach Name: Petroleum II

[Redacted]

MasterCard

[Redacted]

GST # 12099-6096  
Thank You  
VINCI Park  
403 206 1820

CHT - parking for  
Funny Bone Event