

## 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 October 2015

						Trave	l (1)					
Month-Year	Source Document	Purpose	£	\irfare	Meals	Accomm	odation	ther avel	Total Travel	fessional elopment (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Oct-15 Oct-15 Oct-15	P-Card Expense Claim Direct Billing	Meetings Meetings Meetings		1,784			683	1,090 190	1,773 190 1,784			
Total			\$	1,784	\$	- \$	683	\$ 1,280	\$ 3,747	\$ -	\$ -	\$ -

**Total for** 

**the Month** \$ 3,747

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

RUN DATE: 10/21/2015

## P-Card details Online ® Cardholder Statement Report

<ul> <li>Attached ALL original detailed rece</li> <li>Cardholder AND Approver's signat</li> </ul>	ipts and supporting documents in the samures required where indicated below	e order as it appears on this state	ement
HUBAND, BRENDA	VP/CHIEF HEALTH OPERATIONS		Manual Community of the
Cardholder's Name	Cardholder's Position/Title	Billing Reporting Period	0040
HEALTH OPERATIONS CENTRAL &	SOUTHPORT	bining Keporting Period	20/10/2015
Cardholder's Dept	Cardholder's Site/Location	Total Statement Amount:	£4.770.00
BRENDA.HUBAND@ALBERTAHEALTH	ISERVICES CA	Total Statement Amount.	\$1,773.05
Cardholder's e-mail address		Last 6 digits of the P-Card #	

Statement	of Transac	tions	105207 345	N. Activity	50,037050	7 32 2	
Transaction Date	Trans (D	Merchant Name & Description	Trans Original	Currency	Trans Amount	GST	FreighDescription
22/09/2015	404023257	THE CALGARY AIRPORT AU. AUTOMOBILE PARKING LOTS AND	58.70	CAD	58.70	2.80	.00Prkg at YYC-Workforce Impact; ELT; D. Rhodes; L. Dempster & D. Gordon
23,09/2615	403022009	NEINITY TRANSPORTATIO, L'IMPUSINES AND TAXICABS	72.00	CAD	72.00	3.43	Taxi YEG to Westin & S. Walji too - PPAH ELT; CEO; Unlori D. Gordon & D. Funk
3	403822010	AND TAXICABS	72.00	CAD	72.00	3.43	Taxi SSP to YEG return to Calgary - PPAI ELT, CEO; D. Gordon & D. Funk Union
(4)	403822011	NFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72 00	CAD	72.00	3 43	Taxi YEG to Westin-Workforce Impact, EL PLT; N/S Dyad
3/09/3015	403822012	INFINITY TRANSPORTATIO, L'MOUSINES AND TAXICABS	72.00	CAD	72.00	3 43	Taxi SSP to YEG return to Calgary - Workforce Impact, ELT; PLT; N/S Dyad
6	403822013	THE WEST IN EDMONTON, WESTIN HOTELS	178.51	CAD	178 51	33.39	.00 Hotel-Workforce Impact, TCC M. Fullerton ELT, D Rhodes, CEO, L. Dempster & D Gordon
2/09/2015	404808877 404581390	THE CALGARY AIRPORTAU, AUTOMOBILE PARKING LOTS AND	58 70	CAD	58.70	2.80	.00Prkg at YYC-HR; Staff Scheduling: ELT, Privacy; Workforce Init; Dr. Tibbles & D. Gordon
6 10 2015		HE WESTIN EDMONTON, W. STIN	178.51	CAD	178.51	33.39	.00Hotel-HR; Staff Scheduling; ELT; Privacy; Workforce Init; Dr. Tibbles & D. Gordon
9	405642533	THE CALGARY AIRPORT AU. AUTOMOBILE PARKING LOTS AND	50.35	CAD	50.35	2.40	OPrkg YYC-Workforce Impact; 2:2 Gerry & Peter; Organ Donation; OHS - PRC; Secu
0	405477332	HE WESTIN EDMONTON, WESTIN	162 79	CAD	162.79	30.45	SHC; L. Dempster  .00 Hotel-Workforce Impact; 2:2 G. Predy & V.  der, Organ Donation, OHS/PRC, Security, SHC; Nrsq Leadership
(1)	406307008 408101216	THE CALGARY AIRPORT AU. AUTOMOBILE PARKING LOTS AND	58 70	CAD	58.70	2.80	.00Prkg-Primary Care, J. Cantwell, ELT; D. Mador/K. Todd; CEO; Western Cndn Collaborative
(2)	406025847	HE WESTIN COMON ON, WESTIN	162.79	CAD	162.79	30,45	00Hotel-Primary Care; J. Cantwell; ELT, D. Mador/K. Todd; CEO, Western Cndn. Collaborative
(13)	CACCOTANE	NEINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	Taxi-Workforce Impact; El.T; D. Rhodes, L. Dempster & D. Gordon
(14)	406625848	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72 00	3.43	Taxi-return trip Calgary -Workforce Impact, ELT; D. Rhodes; L. Dempster & D. Gordon
15	409625849	NEINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72 00	3.43	Taxi-HR: Staff Scheduling, ELT; M. Tolfree; Workforce Initiatives; Dr. Tibbles & D. Gord
(D)	1000 5856	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	Return trip Calgary Taxi-HR; Staff Scheouill ELT, M. Tolfree; Workforce Initiatives; Dr Tribbles & D. Gordon
0	106625851	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3 43	Pater, Organ Donation; OHS & PRC, Security; SHC; L. Dempster
(18)	(AF 25 86)	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	Taxi-return trip Calgary -Workforce Impact; 2:2 Verna & Gerry & Peter; Organ Donation OHS & PRC; Security, SHC; L. Dempster
(9)	06025853	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3,43	Taxi-Primary Hith: J. Cantwell, D. Mador & I Todd, CEO; Western Cndn Collaborative
(20)	0.5625854	INFINITY TRANSPORTATIO. LIMOUSINES AND TAXICARS	72 00	CAD	72 00	3 43	Tax-return trip Calgary, Primary Htth; J Cantwell, D. Mador & K. Todd, CEO, Weste Ondn Collaborative

## P-Card details Online ® Cardholder Statement Report

Signatures	- AND THE ATTENDED
Cardholder Designate (If Applicable)	
By signing this statement  I hereby certify that I have reviewed and recognised this statement. The Configuration is a second statement.	
<ul> <li>I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability Program User Guide and Treining. I have allocated the transaction(s) to the proper cost centre.</li> </ul>	ity in accordance to AHS Corporate Policies.
Kerry Pace Even Ad.	
Name of Children County	
Cardinous Designate Position In	9
Jerry Pace Octa/15	
Signatuse of Cardholder Designate Date of Signature	-
Cardholder	
By signing this statement	
<ul> <li>I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1 expenses being claimed are in compliance with such policy.</li> </ul>	122)" of Alberta Health Services and confirm
and the state of the complete and with state policy.	
<ul> <li>I affect the expenses enclosed in this claim are for valid business purposes for Alberta Health Services claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheq charged is affected.</li> </ul>	and that this claim has not been previously
<ul> <li>I attest that expenses submitted in this claim have been incurred by using a cost effective method, other provided.</li> </ul>	rwise rationale and supporting analysis is
HUBÁND, BRENDA VEICHISE HEALTH OPERATIONS	\$ CONTRACTOR OF THE PROPERTY O
Name of Cili dholder  Cardholder Position/Title	_
Dender Nectored 201 At 22	
Signature of Cardholder  Signature of Cardholder  Date of Signature	
Catt Of Signature	
Approver Designate (if Applicable)  By signing this statement	
I attest that I have read and understand the "Travel Hospitality and Markins Santa Tolling	
expenses being claimed are in compliance with such policy.	122) of Alberta Health Services and confirm
I aftest the expenses enclosed in this claim are for valid business purposes for Alberta Heelth Services a	PRINCE REPORT
	and that this claim has not been previously
charged has been obtained.  I attest that expenses submitted in this claim have been formally of any other organization. A per-	animi anadae in beindine avbailees unichteriouth
<ul> <li>I attest that expenses submitted in this claim have been incurred by using a cost effective method, other provided.</li> </ul>	wise rationale and supporting analysis is
*	
Name of Approver Designate Position/Title	-
The cost pasitive into	
Signature of Approver Designate Date of Security	
Approver Designate Date of Equation	
By signing this statement	
·   aftert that   have read and understand the Towns   Hazarta W	
<ul> <li>I aftest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (11 expenses being dalmed are in compliance with such policy.</li> </ul>	122)" of Alberta Health Services and confirm
<ul> <li>I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services is claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personaged has been obtained.</li> </ul>	and that this claim has not been previously
<ul> <li>I attest that expenses submitted in this claim have been incurred by using a cost effective method, other provided.</li> </ul>	wise rationale and supporting analysis is
11 11 1	
Victil Laminster Lossident + C	EC).
Name of Approver	20
Vellie anul With 29	man
Signature of Approver Date of Signature	TE 12
Submit approved statement with attachments to Accounts Payable 1	CATTALLE STORY OF THE PROPERTY WHEN
Affach:	Address:
<ul> <li>Criginal (or scanned) itemized receipts with documented business reasons including names of participants where required</li> </ul>	
According to the Control of the Cont	Alberta Health Services
<ul> <li>Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report)</li> <li>And where applicable;</li> </ul>	Accounts Payable 7th Street Pisza
* Copies of pre-approvels for travel	10th Floor, North Tower, 10030-107 Street
<ul> <li>Personal cheque payable to "Alberta Health Services"</li> </ul>	Edmonton, AB T5J 3E4
Return, refund and/or credit receipts	
Disputes letter	
<ul> <li>Business reasons for travel require detailed descriptions – include where travelled to, who attended (if nical), why travel was necessary and detailed explanation of reason.</li> </ul>	
Accounts Payable only:	TORREST TO THE PARTY OF THE PARTY.

Reviewed by...



# The Calgary Airport Authority 2000 Airport road NE

eceipt Number

ut. 09/21/2015 17:11 09/22/2015 20:15 Usration: 1,03:04

nsient Parker \$ 58.70 V

al: \$ 58.70 alidations. \$ 0.00

lance Due: \$ 58.70

redit Card \$ 58.70

thange \$ 0.00

# The Calgary Airport Authority 2000 Airport road NE



ransaction Type Clear rate/Time: 9/22/2015 8:16 PM

imount: \$58.70

itatus: Payment was superceful Authorisation Code:

Approved - Thank you!

-Workforce Impact
- EST
- D. Rhodes
- S. Nempster +
D. Gordon

(2)

From:

tobias tobias

Sent:

September 25, 2015 11.12 Alv

To:

Kerry Pace

Subject:

Fwd: Transaction Receipt - Do Not Reply

Brenda Huband Sept.07/2015 Ap>Westin + Aldimah Wilji

-TPAH
-ELT
-CED
-D. Hordono D. Funk

# **INFINITY TRANSPORTATION I**

TYPE

**PURCHASE** 

ORDER ID

**CUSTOMER ID** 

**CARD NUM** 

ACCOUNT

Dienua Fiuband

MASTERCARD

DATE

**REF NUM** 

AUTH CODE

Sep 23 2015 11:07AM

AMOUNT (CAD)

\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

## 01 APPROVED - THANK YOU 027

- IMPORTANT - Retain this copy for your records

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return to Calgary from m + go.

From:

tobias tobias

Sent: To: September 23, 2015 11:13 AM Kerry Pace

Subject:

Fwd: Transaction Receipt - Do Not Reply

Brenda Huband Sept.08/2015 SSP>ap -KO) -CEO - D. Hardon + D. Funk

# **INFINITY TRANSPORTATION I**

**TYPE** 

**PURCHASE** 

ORDER ID

**CUSTOMER ID** 

**CARD NUM** 

ACCOUNT

Brenda Huband

MASTERCARD

DATE

REF NUM

**AUTH CODE** 

Sep 23 2015 11:08AM

AMOUNT (CAD)

\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

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H

From:

tobias tobias

Sent:

September 23, 2015 11.13 AM

To:

Kerry Pace

Subject:

Fwd: Transaction Receipt - Do Not Reply

-Workforce Impac -EST -PST -North/South Dyard

Brenda Huband Sept.14/2015 Ap>Westin

# **INFINITY TRANSPORTATION I**

TYPE

**PURCHASE** 

ORDER ID

**CUSTOMER ID** 

CARD NUM

ACCOUNT

Brenda Huband

MASTERCARD

DATE

**REF NUM** 

**AUTH CODE** 

Sep 23 2015 11:09AM

AMOUNT (CAD)

\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

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**Kerry Pace** From: tobias tobias September 23, 2015 11:14 AM Sent: To: Kerry Pace Subject: Fwd: Transaction Receipt - Do Not Reply - PTI - North South Dyad Brenda Huband & Dr.Belanger Sept.15/2015 SSP>ap

## **INFINITY TRANSPORTATION I**

TYPE **PURCHASE** 

ORDER ID

**CUSTOMER ID** 

**CARD NUM** 

ACCOUNT

DATE

**REF NUM** 

Brenda Huband

MASTERCARD

Sep 23 2015 11:10AM

**AUTH CODE** 

AMOUNT (CAD)

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

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- La Rhoder - CEO Wester

The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7

Canada

Tel: 780-426-3636 Fax: 780-428-1454

Brenda Huband

HOTELS & RESORTS

Page Number Invoice Nbr Guest Number Folio ID Arrive Date 20:55 21-SEP-15 Depart Date 22-SEP-15 06:18 No. Of Guest Room Number Club Account

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 22-SEP-15 06:20 Date Reference Description Charges (CAD) Credits (CAD) 21-SEP-15 Room Charge 159.00 21-SEP-15 GST 8.19 21-SEP-15 Destination Marketing Fee 4.77 21-SEP-15 Tourism Levy 6.55 22-SEP-15 Mastercard -178.51 \*\* Total 178.51 -178,51 \*\*\* Balance 0.00

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Continued on the next page

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Brenda Huband

Tel: 780-426-3636 Fax: 780-428-1454

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

Club Account

HOTELS & RESORTS Invoice Nbr 21-SEP-15 20:55 22-SEP-15 06:18

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	TourLevy	Food\Bev	Pnone	Other	Total	Payment
09-21-2015	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00
09-22-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-178.51
		****	-	ATT 10 TO 10	****			
Total	159.00	8.19	6.55	0.00	0.00	4.77	178.51	-178.51



- HR
- Stay Scheduling
- EST
- Privacy - Legal
- Privacy - Legal
- Workforce Init.
- Workforce Init.

Parking

RECEIPT GST NO. R122556194

TKT N POF:

IN: 09/28/15, 16:58 OUT:09/29/15 19:13 PAID: \$ 58.70 DURATION: 1 02: 15 (GST INCLUDED)

MACTERCARD

YOU HAVE 10 MIN. TO EXIT

Calgary International Airport Parkade

- Workow - .... - Nr. Tilbeles + D. Gordon

- HK - Staff Scheduling - EKT - Privacy

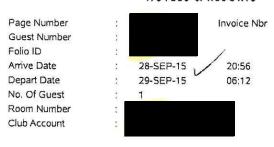


The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7

Canada Tel: 780-426-3636 Fax: 780-428-1454 WESTIN

HOTELS & RESORTS

Brenda Huband



Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 29-SEP-15 06:20

Date	Reference	Description		Charges (CAD)	Credits (CAD)
28-SEP-15		Room Charge		159.00	
28-SEP-15		GST		8.19	
28-SEP-15		Destination Marketing Fee		4.77	
28-SEP-15		Tourism Levy		6.55	
29-SEP-15		Mastercard			-178.51
	a et	** Total		178.51	-178.51
		*** Balance	9	0.00	
DACKLICK		MATERIAL PROGRAMMENT AND			

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at westin.com/newbalance

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The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7 Canada

Tel: 780-426-3636 Fax: 780-428-1454 Brenda Huband



HOTELS & RESORTS

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

Invoice Nbr 1 20:56 29-SEP-15 06:12

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food\Bev	Phone	Other	Total	Payment
09-28-2015	159.00	8,19	6.55	0.00	0.00	4.77	178.51	0.00
09-29-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-178.51
	*******		*********	-	-		-	-
Total	159.00	8.19	6.55	0.00	0.00	4.77	178.51	-178.51

- Harking JJ C

- Workforce Impact

- 2:2 Herry - Reter

- Organ Donation

- OH+S-PRC

- Security

- SHC

- Ginda Dempster

- Jinda Dempster

## RECEIPT GST NO. R122556194

TKT HO: POF: IN: ::0/05/15 16:49 OUT:::0/06/15 18:03 PAID \$ 50.35 V

DURA"ION: 1 01: 14 (GS" INCLUDED)

MASTI RCARD

YOU HAVE 10 MIN. TO IXIT

Calgary International Airport Parkade

-SHC Sendership - Workforce Impact
- Nrog Sendership - 2:2 Harry Ferry Tester
- Organ Donation - Offo 5 1 PRC

HOTELS & RESORTS

The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7 Canada

Tel: 780-426-3636 Fax: 780-428-1454

Brenda Huband

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

Invoice Nbr 05-OCT-15 16:10 06-OCT-15 06:22

Copy Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 06-OCT-15 06:

05-OCT-15	Room Charge	Charges (CAD)	Credits (CAD)
SOUTH THE MENTING SWEETING	7.74	145.00	
05-OCT-15	GST	7,47	
05-OCT-15	Destination Marketing Fee	4.35	
05-OCT-15	Tourism Levy	5.97	
06-OCT-15	Mastercard		-162.79
	** Total	162.79	(-162.79)
	*** Balance	0.00	

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WESTIN

HOTELS & RESORTS

Brenda Huband

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

05-OCT-15 16:10 06-OCT-15 06:22 1

**EXPENSE SUMMARY REPORT** 

Currency: CAD

Date	Room	GST	Tour Levy	FoodBev	Phone	Other	Total	Payment
10-05-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
10-06-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-162.79
	***	-		-			-	Manager and the Print
Total	145.00	7.47	5.97	0.00	0.00	4.35	162.79	-162.79

TCC-G. Kanlinger, M.
FEST Retrest

- REST

- REST

- D. Mador/KTodd

- 2:1 KED

- 2:1 KED

- Western Endow

Collaborative

(farking)

RECEIPT GST NO. R122556194

TKT III

POF: C50

IN: 1.0/12/15 17:30

OUT::0/13/15 20:01

PAID \$58.70

DURA"ION: 1 02: 31

(GS" INCLUDED)

MASTI RCARD

YOU HAVE 10 MIN. TO IXIT

Calgary International Airport Parkade

- Sparer Lindr - TCC Julianne Rentwell

Collaborative - EST

- D. Mador / K. Todd

- C. EO

The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7 Canada

HOTELS & RESORTS

Brenda Huband

Tel: 780-426-3636 Fax: 780-428-1454

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

Invoice Nbr 12-OCT-15 16:13 13-OCT-15 06:11

Copy Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 13-OCT-15 06:20 Reference Date Description Charges (CAD) Credits (CAD) 12-OCT-15 Room Charge 145.00 12-OCT-15 GST 7.47 12-OCT-15 Destination Marketing Fee 4.35 12-OCT-15 Tourism Levy 5.97 13-OCT-15 Mastercard -162.79\*\* Total 162.79 -162,79 \*\*\* 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

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WESTIN

Brenda Huband

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

Invoice Nbr

12-0CT-15 16:13
13-0CT-15 06:11

EXPENSE SUMMARY REPORT

Currency: CAD

10-12-2015	Room 145.00	GST	Tour Levy	Food Bey	Phone	diametrossa	TO SUPERIOR OF THE PARTY OF THE	
10-13-2015	0.00	7.47	5.97	0.00		Other	Total	Payment
		0.00	0.00		0.00	4.35	162,79	
otal		***************************************		0.00	0.00	0.00		0.00
)(a)	145.00	7 47				0.00	0.00	-162.79
		7.47	5.97	0.00		***************************************		
				0.00	0.00	4.35	162.79	-162.79

(13)

From:

tobias tobias

Sent:

October 19, 2015 5:53 AM

To:

Kerry Pace

Subject:

Fwd: Transaction Receipt - Do Not Reply

Brenda Huband Sept.21/2015 Ap>Westin - Workbree Impact - RAT - D. Rhodes - L. Dempster & D. Gordon

# **INFINITY TRANSPORTATION I**

TYPE

**PURCHASE** 

ORDER ID

**CUSTOMER ID** 

CARD NUM

ACCOUNT

Brenda Huband

**MASTERCARD** 

DATE

Oct 19 2015 05:48AM

**REF NUM** 

**AUTH CODE** 

AMOUNT (CAD)

\$72.00 ~

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

#### 01 APPROVED - THANK YOU 027

- IMPORTANT -

Retain this copy for your records

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Kerry Pace	creturn trip to Colgary	(19)
From: Sent: To: Subject:	tobias tobias October 19, 2015 5:53 AM Kerry Pace Fwd: Transaction Receipt - Do Not Reply	-Workforce Impres -Eft
Brenda Huband Sept.22/2015		- Rhodes - Lilempoter & Gordo
SSP>Ap		

# **INFINITY TRANSPORTATION I**

TYPE PURCHASE

ORDER ID
CUSTOMER ID
CARD NUM
ACCOUNT

MASTERCARD

DATE
REF NUM
AUTH CODE

PURCHASE

Brenda Huband

Oct 19 2015 05:49AM

\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

### 01 APPROVED - THANK YOU 027

- IMPORTANT - Retain this copy for your records

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Please see the Moneris Privacy Policy: http://www.moneris.com/privacy

Kerry Pace		(15)
From: Sent: To: Subject:	tobias tobias October 19, 2015 5:53 AM Kerry Pace Fwd: Transaction Receipt - Do Not Reply	- HR - Stoff Schoduling
Brenda Huband Sept.28/2015 Ap>Westin		- RAT - Molfree - Workforce Initialius - Dr. Libbles & D. Lordo - Dr. Libbles & D. Lordo
INFINITY	TRANSPORTATION I	- Workforce The Sords -Dr. Libbles & D. Lords
ТҮРЕ	PURCHASE	
ORDER ID CUSTOMER ID CARD NUM ACCOUNT	Brenda Huband  MASTERCARD	,

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

DATE

**REF NUM AUTH CODE** 

AMOUNT (CAD)

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Oct 19 2015 05:50AM

https://www.moneris.com/unsubscribe

\$72.00 V

Kerry Pace return trip to In -HR -Stoff Scheduling -EXT -M Jolphee -Workfolce Snitiatures -Dr. Fibbles + D Gordon From: tobias tobias Sent: October 19, To: Kerry Pace Subject: Fwd: Transaction Receipt - Do Not Reply Brenda Huband Sept.29/2015 SSP>Ap V

# **INFINITY TRANSPORTATIO**

TYPE **PURCHASE** ORDER ID **CUSTOMER ID** Brenda Huband CARD NUM **ACCOUNT** MASTERCARD DATE Oct 19 2015 05:51AM **REF NUM** AUTH CODE AMOUNT (CAD) \$72.00 /

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

### 01 APPROVED - THANK YOU 027

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Please see the Moneris Privacy Policy: http://www.moneris.com/privacy

Kerry Pace		- Worklove Impact
From: Sent: To:	tobias tobia <mark>s</mark> October 19, 2015 9:39 AM Kerry Pace	- Vaina, Gerry Reter
Subject:	Fwd: Transaction Receipt - Do Not Reply	2.7
Brenda Huband Oct.05/2015 Ap>Westin		- Organ Donation - OHS + PRC - Security - SHC
INFINITY	TRANSPORTATIO	NI-S. Dempster
ТҮРЕ	PURCHASE	
ORDER ID		
CUSTOMER ID	Brenda Huband	
CARD NUM	1	
ACCOUNT	MASTERCARD	
DATE	Oct 19 2015 09:33AM	
REF NUM		
AUTH CODE		
AMOUNT (CAP)		770.00
AMOUNT (CAD)		\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

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Kerry Pace Rot	um Trip to Colgary	(18)	Worklove Impact
From: Sent: To: Subject:	tobias tobias October 19, 2015 9:39 AM Kerry Pace Fwd: Transaction Receipt - Do Not Reply	-	- Organ donation
Brenda Huband Oct.06/2015 SSP>Ap			-OHS-PRC - Security - SHCO - S. Dempsler

# **INFINITY TRANSPORTATION I**

TYPE PURCHASE

ORDER ID
CUSTOMER ID
CARD NUM
ACCOUNT

MASTERCARD

DATE
Oct 19 2015 09:33AM

REF NUM
AUTH CODE

AMOUNT (CAD)

\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

### 01 APPROVED - THANK YOU 027

- IMPORTANT -

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From:

Sent:

tobias tobias October 19, 2015 9.40 AM

To:

Kerry Pace

Subject:

Fwd: Transaction Receipt - Do Not Reply

Brenda Huband Oct.12/2015 Ap>Westin

- Primary Health
- J. Cantwell
- D. Mador / K. Todd
- CEO
- Western Lodn
Collaborative

# INFINITY TRANSPORTATION I

TYPE

**PURCHASE** 

ORDER ID

CUSTOMER ID

**CARD NUM** 

ACCOUNT

MASTERCARD

Brenda Huband

DATE

**REF NUM** 

**AUTH CODE** 

AMOUNT (CAD)

Oct 19 2015 09:36AM

\$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

## 01 APPROVED - THANK YOU 027

- IMPORTANT -

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Kerry Pace return trip to - Primary Idealth
- Jr. Calabratull
- D. Mador/K. Jodd
- CEO
- Western Endn
Collaboration From: tobias tobias Sent: October 19, 2015 9:40 AM To: Kerry Pace Subject: Fwd: Transaction Receipt - Do Not Reply Brenda Huband Oct.13/2015 SSP>Ap 1

## INFINITY TRANSPORTATION I

**TYPE PURCHASE** ORDER ID **CUSTOMER ID** Brenda Huband **CARD NUM** ACCOUNT MASTERCARD DATE Oct 19 2015 09:36AM **REF NUM AUTH CODE** AMOUNT (CAD) \$72.00

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

## 01 APPROVED - THANK YOU 027

- IMPORTANT -

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## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	1	Expense Claim Total		
HUBAND,	VP & Chief Health	Calgary	190.06		
BRENDA	Operations Officer, Central				
	& Southern Alberta				

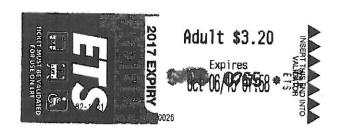
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/16/2015	SPTT to RGH & Return-RGH 7th Annual		Mileage	5.05	SPTT	RGH	SPTT to RGH & Return-RGH	1			10
a la piri	Run						7th Annual Run				
9/21/2015	FMC to YYC-mtgs in Edm-Workforce		Mileage	10.10	FMC	Calgary	FMC to YYC-mtgs in Edm-	1			20
	Impact; ELT; D. Rhodes; CEO					Airport 1	Workforce Impact; ELT; D.				
						way	Rhodes; CEO				İ
9/23/2015	1 way from Calgary G&C club - Calgary		Mileage	3.03	Calgary	SPTT	1 way from Calgary G&C	1			6
	Health Trust Board Meeting				G&C Club		club - Calgary Health Trust				
							Board Meeting				
9/21/2015			Mileage	7.58	SPTT	FMC - 1	SPTT TO FMC - 1 way - CZ	1			15
	& CZ Quality & Pt Safety					way	Leadership & CZ Quality &				
						travel	Pt Safety				
						from SPTT					
						to FMC -					
9/24/2015	1 way from SPTT to ACHF for Board		Mileage	8.59	SPTT	ACH	1 way from SPTT to ACHF	1			17
	and AGM					Foundatio	for Board and AGM				
9/28/2015	SPTT to YYC & return - mtgs Edm - HR;		Mileage	29.29	SPTT	Calgary	SPTT to YYC & return - mtgs	1			58
	Staff Scheduling; ELT; M. Tolfree;					Airport &	Edm - HR; Staff Scheduling;				
	Workforce Init; Dr. Tibbles & D.					return	ELT; M. Tolfree; Workforce			1	
	Gordon						Init; Dr. Tibbles & D. Gordon				
9/30/2015	SPTT to Wingate Hotel Macleod Tr SE		Mileage	8.08	SPTT	Wingate	SPTT to Wingate Hotel	1			16
	& return - Wisdon Council					Hotel	Macleod Tr SE & return -				
						Macleod	Wisdon Council Mtg				
10/1/2015	SPTT to Wingate Hotel Macleod Tr SE		Mileage	8.08	SPTT	Wingate	SPTT to Wingate Hotel	1			16
	& return - Wisdon Council Mtg day 2					Hotel	Macleod Tr SE & return -				
	Name of the Control o			i		Macleod	Wisdon Council Mtg - day 2				
						Tr SE					
10/2/2015	SPTT to Calgary G&C Club & return for		Mileage	6.06	SPTT	Calgary	SPTT to Calgary G&C Club	1			12
	CHT Dev Trust					G&C Club	for Calgary Health Trust				
							Development Trust				

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/5/2015	SPTT to YYC & return - mtgs Edm - Workforce Impact; 2:2 V. Yiu & G. Predy; Organ Donation; OHS & PRC; Security; SHC; Nrsg Leadership		Mileage	29.29	SPTT		SPTT to YYC & return - mtgs Edm -Workforce Impact; 2:2 V. Yiu & G. Predy; Organ Donation; OHS & PRC; Security; SHC; Nrsg Leadership				58
10/12/2015	Home to YYC & return-mtgs ELT, CEO, D. Mador; TCC D. Gordon & Western Cndn Collaborative		Mileage	38.38	home	Calgary Airport & return	Home - stat day - to YYC & return-mtgs ELT, CEO, D. Mador; TCC D. Gordon & Western Cndn Collaborative	1			76
10/19/2015	FMC to Calgary Airport - 1 way - Mtgs Edm - Workforce Impact & ELT& all day Zone Leaders mtg		Mileage	10.10	FMC	Calgary Airport 1 way	FMC to Calgary Airport - 1 way - Mtgs Edm - Workforce Impact & ELT& all day Zone Leaders mtg	1			20
10/19/2015	Calgary Police Services to FMC-1 way- mtg with T. Deroux et al		Mileage	8.08	CPS 5111- 47 St NE	FMC - 1 way	Calgary Police Services to FMC - 1 way - mtg with T. Deroux et al	1			16
10/17/2015	Calgary Health Trust Strategy Session & return		Mileage	15.15	Home	Calgary G&C Club	Home to Calgary G&C club for Calgary Health Trust Strategy Session & return	1			30
10/6/2015 Approver(s) for t	Edm Transit to mtgs at SSP  he claim   Approval Sta	AB - Local	Miscellaneous val Date	3.20			Edm Transit to mtgs at SSP	1			

Approver(s) for the claim Approval Status Approval Date

KAMINSKI, VICTORIA Approve 29-Oct-15

Transit to Mtgo. -55F





## **Executive Expenses Report Direct Billing Summary**

### **Purpose of This Form:**

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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 you have expenses to report in this section for this reporting period.

• Indicate wheti	ier you have expenses to report in th	TES		
Name:	Brenda Huband	Reporting Period for the Month of	f: Sept 21 - Oct 19 2015	

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
21-Sep-21	Direct Billing	Airline Ticket	Inv: Mtgs - Workforce Impact; ELT; D. Rhodes; CEO; L. Dempster & D. Gordon	Marlin Travel	353.78
28-Sep-28	Direct Billing	Airline Ticket	Inv ; Mtgs - HR; Staff Scheduling; ELT; M. Tolfree, Workforce Initiatives; Dr. Tibbles & D. Gordon	Marlin Travel	335.18
05-Oct-15	Direct Billing	Airline Ticket	Inv # Mtgs - Workforce Impact; 2:2 Verna/Gerry/Peter; Organ Donation; OH&S PRCs; Security; SHC; L. Dempster	Marlin Travel	370.52
12-Oct-15	Direct Billing	Airline Ticket	Inv # gs - Primary Hlth; J. Cantwell; ELT; D. Madlor/K. Todo, OLO, Western Cndn Collaborative	Marlin Travel	370.52
19-Oct-15	Direct Billing	Airline Ticket	Inv # 99119 Mtgs - Workforce Impact; ELT; All Day ZEL mtg Oct 21	Marlin Travel	353.78
otal Paid in th	e Month			***************************************	\$ 1,783.78

却353年 MARLIN TRAVEL O-O PERCY HUNT TRAVELGROUP INC MAIN FLOOR, 9929 108TH ST. EDMONTON, AB T5K 1G8

GST Reg#: 885101915 Branch: Agent:

To: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER

> 10030-107 ST **EDMONTON AB** CA T5J 3E4

F. Rhodes

Invoice Number:

Date: Page:

16, 2015 1/2

lempster + D. Gordon

Our Reference:

INVOICE

For

MS BRENDA HUBAND

AC

Monday, September 21, 2015

- Air

AIR CANADA

From: CALGARY

AB EDMONTON INTL. AB

To: Stops:

0 Arrival: 21Sep15

AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

Flight: 8164 07:30 PM Equipment: D8 (300 SERIES)

08:22 PM

Mile(s) Flown: 163



(o: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON AB CA T5J 3E4

Invoice Number:

Date: Page:

Our Reference:

September 16, 2015

## INVOICE

Tuesday, September 22, 2015

Air

AIR CANADA

From: EDMONTON INTL AB

To: Stops:

CALGARY

0 Arrival:

22Sep15

ATR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

Flight: 8171

W CLASS

07:00 PM Equipment: D8 (300 SERIES)

07:55 PM

Mile(s) Flown: 163

Cost:

Total:

AIR CANADA WE

**Grand Total:** 

Ticket Total:

353.78

278.82 74.96

Less Credit Card Payments:

353.78 353.78

Credit / Balance Due To This Invoice:

0.00

Total Balance Due:

0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:....DECLINED:

DOCUMENTATION REQUIRED: VALID PASSPORT...VISA..TOURIST CARD.. ...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....

PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.

CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT

1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0

OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

MARLIN TRAVEL O-O PERCY HUNT TRAVELGROUP INC MAIN FLOOR, 9929 108TH ST. EDMONTON, AB T5K 1G8

GST Reg#: \_885101915

Branch: Agent:

To: ALBERTA HEALTH SERVICES

**SUITE 800, NORTH TOWER** 

10030-107 ST **EDMONTON AB CAT5J3E4** 

Invoice Number:

Our Reference:

Date: Page: September 23, 2015

1/2

INVOICE

For

MS BRENDA HUBAND

Monday, September 28, 2015 1

K Air

AIR CANADA

From: CALGARY

EDMONTON INTL AB

Stops:

0 Arrival: 28Sep15

AB

AIR CANADA E

SEATS 9F AND 10F UNAVAILABLE

TICKET NUMBE

Flight: 8164

W CLASS

07:30 PM Equipment: D8 (300 SERIES)

08:22 PM

Mile(s) Flown: 163

10: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST **EDMONTON AB** CA T5J 3E4

Invoice Number:

September 23, 2015

Date: Page:

2/2

Our Reference:

### INVOICE

Tuesday, September 29, 2015

- Air

AIR CANADA

From: EDMONTON INTL. AB CALGARY AB

Stops:

0

Arrival: 29Sep15

AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

Flight: 8153

W CLASS

06:00 PM Equipment: DH4

06:52 PM

Mile(s) Flown: 163

Cost:

AIR CANADA WEB

Tax:

260.22 74.96

Ticket Total:

335.18

Total:

Grand Total:

335.18

Less Credit Card Payments:

335.18 0.00

Credit / Balance Due To This Invoice: Total Balance Due:

0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:....DECLINED:....

DOCUMENTATION REQUIRED: VALID PASSPORT... VISA.. TOURIST CARD... ...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID.,. OTHER..... PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE. CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL 24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT 1 303 801 2147. PLEASE QUOTE ACCESS CODE 2ECO OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

MARLIN TRAVEL

O-O PERCY HUNT TRAVELGROUP INC

MAIN FLOOR, 9929 108TH ST. EDMONTON, AB T5K 1G8

GST Reg#: 885101915

Branch: Agent:

To: ALBERTA HEALTH SERVICES

SUITE 800, NORTH TOWER

10030-107 ST **EDMONTON AB CAT5J3E4** 

-Workforce Impact
-2:2 Herry P. + ReterMank + BH
- For Organ Dorston

Date:

October 1, 2015

1/2

Page:

Our Reference: - SHC Deripoter

INVOICE

For

**BRENDA HUBAND** 

MS BRENDA HUBAND AC 540001906

Monday, October 5, 2015 \

Air

AIR CANADA

From: CALGARY AB

EDMONTON INTL. AB To:

0 Arrival: 05Oct15

Stops: AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

PATE OR BOOKING DETAILS MAY DIFFER FROM ORIGINAL

AIR CANADA CONF

TICKET NUMBER

SEAT 9F

Flight: 8164 V CLASS 07:30 PM Equipment: D8 (300 SERIES) 08:22 PM

Mile(s) Flown: 163



To: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER

10030-107 ST EDMONTON AB CA T5J 3E4 Invoice Number:

Date: Page: October 1, 2015

e:

Our Reference:

W CLASS

05:00 PM Equipment: D8 (300 SERIES)



### INVOICE

Flight: 8169

05:54 PM

Tuesday, October 6, 2015

Air Air

AIR CANADA

From: EDMONTON INTL AB

To: Stops: CALGARY AB

0 Arrival: 06Oct15

ATR CANADA E

SEAT 8F - HUBAND/BRENDA MS

AIR CANADA CONFIRMATION

TICKET NUMBER

SEAT 8F - SEATS 9F AND 10F NOT AVAILABLE

Cost:

AIR CANADA

295.56 74.96

Mile(s) Flown: 163

Ticket Total:

Tax:

370.52

l'otal:

Grand Total:

370.52

Less Credit Card Payments:

370.52

0.00

0.00

Credit / Balance Due To This Invoice:

Total Balance Due:

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:.....DECLINED:.....

DOCUMENTATION REQUIRED: VALID PASSPORT... VISA..TOURIST CARD.. ... PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....

PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.

CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT

1 303 801 2147. PLEASE QUOTE ACCESS CODE 2ECO

OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

MARLIN TRAVEL

O-O PERCY HUNT TRAVELGROUP INC

MAIN FLOOR, 9929 108TH ST.

EDMONTON, AB T5K 1G8 GST Reg#: 885101915

Branch: Agent:

To: ALBERTA HEALTH SERVICES

SUITE 800, NORTH TOWER

10030-107 ST **EDMONTON AB CAT5J3E4** 

#37052 - Primary Klesett
- Western Codo - J. Rantwell
Collaboration - EST

Invoice Number:

Date: Page:

October 8, 2015

Our Reference:

1/3

## INVOICE

For

MS BRENDA HUBAND

AC

Monday, October 12, 2015

- Air

AIR CANADA

From: CALGARY

To: EDMONTON INTL AB

Stops: 0 Arrival: 120ct15

AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

Flight: 8164 V CLASS 07:30 PM Equipment: D8 (300 SERIES)

08:22 PM Mile(s) Flown: 163



ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST **EDMONTON AB** CA T5J 3E4

Invoice Number:

Date:

October 8, 2015

Page:

Our Reference:

W CLASS

2/3

## INVOICE

Tuesday, October 13, 2015 🥪 Air

AIR CANADA

From: EDMONTON INTL AB CALGARY

To: Stops:

13Oct15

0 Arrival:

AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

07:00 PM Equipment: DH4

07:52 PM

Flight: 8171

Mile(s) Flown: 163

Cost:

AIR CANADA WEB

AIR CANADA WE

Total:

-295.56 Tax: -74.96 Ticket Total: -370.52295.56

Tax:

Ticket Total:

Grand Total:

370.52 0.00

74.96

Credit / Balance Due To This Invoice:

**Total Previous Payments:** 

**Total Charges Previous Invoices:** Total Balance Due:

0.00 370.52 370.52

0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:....DECLINED:....

DOCUMENTATION REQUIRED: VALID PASSPORT...VISA..TOURIST CARD.. ...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER......

PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.

CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT 1 303 801 2147. PLEASE QUOTE ACCESS CODE 2ECO

DOOD.

MARLIN TRAVEL

O-O PERCY HUNT TRAVELGROUP INC

MAIN FLOOR, 9929 108TH ST. EDMONTON, AB T5K 1G8

GST Reg#: 885101915

Branch: Agent:

To: ALBERTA HEALTH SERVICES

SUITE 800, NORTH TOWER

10030-107 ST EDMONTON AB CA T5J 3E4 - Lorkforce Impact
- Edd
- Lis Augant Aldg.
- 322 all day brity

Invoice Number:

Date: Page:

Our Reference:

October 15, 2015

## INVOICE

For

MS BRENDA HUBAND

AC

Monday, October 19, 2015

≺ Air

AIR CANADA

From: CALGARY

To: EDMONTON INTL AB

Stops: 0 Arrival: 19Oct15

AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

Flight: 8172 V CLASS 05:30 PM Equipment: D8 (300 SERIES)

06:22 PM

Mile(s) Flown: 163



**J: ALBERTA HEALTH SERVICES** SUITE 800, NORTH TOWER 10030-107 ST **EDMONTON AB CAT5J3E4** 

Invoice Number:

Date:

Page:

Our Reference:

2/2

## INVOICE

Wednesday, October 21, 2015

- Air

AIR CANADA

From: EDMONTON INTL AB To: AB

Stops:

CALGARY 0 Arrival:

21Oct15

AIR CANADA E

SEAT 9F - HUBAND/BRENDA MS

TICKET NUMBER

Flight: 8171

W CLASS

07:00 PM Equipment: DH4

07:52 PM

Mile(s) Flown: 163

Cost:

AIR CANADA WE

Tax: 74.96

Ticket Total: 353.78

Grand Total:

353.78

278.82

Less Credit Card Payments:

Credit / Balance Due To This Invoice:

353.78 0.00

Total Balance Due:

0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:....DECLINED:....

DOCUMENTATION REQUIRED: VALID PASSPORT... VISA.. TOURIST CARD... ...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID.,, OTHER..... PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE. CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT

1 303 801 2147. PLEASE QUOTE ACCESS CODE 2ECO

OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.