

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 November 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)
Nov-15	P-Card	Meetings			667	331	998			263
Nov-15	Expense Claim	Meetings				182	182			
Nov-15	Direct Billing	Meetings	737				737			
Total			\$ 737	\$ -	\$ 667	\$ 513	\$ 1,917	\$ -	\$ -	\$ 263

Total for the Month \$ 2,180

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 161
 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

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

<u>HUBAND, BRENDA</u> Cardholder's Name	<u>VP/CHIEF HEALTH OPERATIONS</u> Cardholder's Position/Title	Billing Reporting Period:	<u>20/11/2015</u>
<u>HEALTH OPERATIONS CENTRAL &</u> Cardholder's Dept	<u>SOUTHPORT</u> Cardholder's Site/Location	Total Statement Amount:	<u>\$1,260.24</u>
<u>BRENDA.HUBAND@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address		Last 6 digits of the P-Card #	<u> </u>

Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
21/10/2015 1	407123283	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	88.05 ✓	CAD	88.05	4.19	.00	Prkg YYC-Workforce Impact; ELT; N. Guebert; EMS; L. Anderson; Zone Leaders ✓
22/10/2015 2	407123282	THE WESTIN EDMONTON, WESTIN HOTELS	325.58 ✓	CAD	325.58	60.90	.00	Hotel-Workforce Impact; ELT; N. Guebert; EMS; L. Anderson; Zone Leaders ✓
26/10/2015 3	407402382	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00 ✓	CAD	72.00	3.43		Taxi YEG to Westin Workforce Impact; ELT; N. Guebert; EMS; L. Anderson; Zone Leaders ✓
26/10/2015 4	407402383	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00 ✓	CAD	72.00	3.43		Taxi-SSP to YEG return to Calgary - Workforce Impact; ELT; N. Guebert; EMS; L. Anderson; Zone Leaders ✓
27/10/2015 5	407917730	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	39.85 ✓	CAD	39.85	1.90	.00	Prkg at YYC - Hotel - D. Gordon; ELT; President's Speaker Series ✓
28/10/2015 6	407888848	THE WESTIN EDMONTON, WESTIN HOTELS	162.78 ✓	CAD	162.78	30.48	.00	Hotel - D. Gordon; ELT; President's Speaker Series ✓
03/11/2015 7	408534042	STONERIDGE MOUNTAIN RE, LODGING HOTELS, MOTELS, RESORTS	282.76 ✓	CAD	282.76	12.51		Hotel for ELT Retreat ✓
10/11/2015 8	408493441	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70 ✓	CAD	58.70	2.80	.00	Prkg at YYC-ELT; Security Clin Settings; Bdgt Task Force; CEO; Unmet Clinical Needs ✓
11/11/2015 9	409264200	THE WESTIN EDMONTON, WESTIN HOTELS	178.51 ✓	CAD	178.51	33.38	.00	Hotel - ELT; Security Clinical Settings; Bdgt Task Force; CEO ✓

*Reviewed by:
Colette Mooney.
11/30/2015.*

Signatures

Cardholder Designate (if Applicable)
By signing this statement

- 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.

Kerry Pace
Name of Cardholder Designate

Kerry Pace
Signature of Cardholder Designate

Exec Asst.
Cardholder Designate Position/Title

Nov 25/15
Date of Signature

Cardholder
By signing this statement

- 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.
- 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.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

HUBAND, BRENDA
Name of Cardholder

Brenda Huband
Signature of Cardholder

VP/CHIEF HEALTH OPERATIONS
Cardholder Position/Title

2015 Nov 25
Date of Signature

Approver Designate (if Applicable)
By signing this statement

- 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.
- 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.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Name of Approver Designate

Approver Designate Position/Title

Signature of Approver Designate

Date of Signature

Approver
By signing this statement

- 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.
- 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.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Vickie Kaminski
Name of Approver

Vickie Kaminski
Signature of Approver

President + CEO
Approver Position/Title

Dec 7, 2015
Date of Signature

Submit approved statement with attachments to Accounts Payable:

<p>Attach:</p> <ul style="list-style-type: none"> Original (or scanned) itemized receipts with documented business reasons including names of participants where required Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) <p>And where applicable:</p> <ul style="list-style-type: none"> Copies of pre-approvals for travel Personal cheque payable to "Alberta Health Services" Return, refund and/or credit receipts Disputes letter 	<p>Address:</p> <p>Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4</p>
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①

- Workforce Impact
- EAT
- N. Guebert
- EMS
- S. Anderson
- Zone Leaders

Parking

RECEIPT
GST NO. R122556194

TKT NO: [REDACTED]
POF: C50
IN: 10/19/15 15:15
OUT: 10/21/15 18:11 ✓
PAID: \$ 88.05 ✓
DURATION: 2 02: 56
(GST INCLUDED)

MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

Calgary International Airport Parkade

gone readers

(2)

- Workforce Impact
- Ed P
- N. Guebert
- EMS
- S. Anderson

WESTIN®

HOTELS & RESORTS

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

Brenda Huband
 [Redacted]

Page Number : [Redacted] Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 19-OCT-15 15:50
 Depart Date : 21-OCT-15 06:21 ✓
 No. Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

Tax Invoice

Tax ID : 815461330RT0001
 The Westin Edmonton 21-OCT-15 06:30 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
19-OCT-15	[Redacted]	Room Charge	145.00	
19-OCT-15	[Redacted]	GST	7.47	
19-OCT-15	[Redacted]	Destination Marketing Fee	4.35	
19-OCT-15	[Redacted]	Tourism Levy	5.97	
20-OCT-15	[Redacted]	Room Charge	145.00	
20-OCT-15	[Redacted]	GST	7.47	
20-OCT-15	[Redacted]	Destination Marketing Fee	4.35	
20-OCT-15	[Redacted]	Tourism Levy	5.97	
21-OCT-15	[Redacted]	Mastercard		-325.58
** Total			325.58	-325.58 ✓
*** Balance			0.00	

WESTIN FINDS FROM AFAR - Delve deeper into your destination with a curated selection of hidden gems and off-the-beaten-path experiences right by your hotel, all with a Westin point of view. Discover more at westin.com/FindsfromAFAR

Continued on the next page

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HOTELS & RESORTS

Brenda Huband

Page Number : [REDACTED] Invoice Nbr [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 19-OCT-15 15:50
 Depart Date : 21-OCT-15 06:21
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Tell us about your stay. www.westin.com/reviews

EXPENSE SUMMARY REPORT

-Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
10-19-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
10-20-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
10-21-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-325.58
Total	290.00	14.94	11.94	0.00	0.00	8.70	325.58	-325.58

Kerry Pace

From: tobias tobias [tobias.goldengoose@gmail.com]
Sent: October 26, 2015 10:31 AM
To: Kerry Pace
Subject: Fwd: Transaction Receipt - Do Not Reply

- Workforce Impact
- Edt
- N. Guebert
- EMS
- S. Anderson
- Zel Mtg

Brenda Huband
Oct.19/2015 ✓
Ap>Westin

③

INFINITY TRANSPORTATION I

TYPE	PURCHASE
ORDER ID	[REDACTED]
CUSTOMER ID	[REDACTED]
CARD NUM	[REDACTED]
ACCOUNT	MASTERCARD
DATE	Oct 26 2015 10:27AM
REF NUM	[REDACTED]
AUTH CODE	[REDACTED]

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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www.moneris.com 1-866-319-7450

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<https://www.moneris.com/unsubscribe>

Kerry Pace

return trip to Calgary

From: tobias tobias [tobias.goldengoose@gmail.com]
Sent: October 26, 2015 10:32 AM
To: Kerry Pace
Subject: Fwd: Transaction Receipt - Do Not Reply

*- Workforce Impact
- left
- N. Guebert
- EMS
- L. Anderson
- ZED mtg*

Brenda Huband
Oct.21/2015
SSP>Ap



(4)

INFINITY TRANSPORTATION I

TYPE	PURCHASE
ORDER ID	[REDACTED]
CUSTOMER ID	Brenda Huband
CARD NUM	[REDACTED]
ACCOUNT	MASTERCARD
DATE	Oct 26 2015 10:28AM
REF NUM	[REDACTED]
AUTH CODE	[REDACTED]

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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www.moneris.com 1-866-319-7450

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<https://www.moneris.com/unsubscribe>

5

- Del Dordon
- EDT
- Pres. Speaker Series

Parking

RECEIPT
GST NO. R122556194

TKT [REDACTED]
POF: CSO
IN: 08/26/15 16:40 ✓
OUT: 08/27/15 17:03 ✓
PAID \$ 39.85
DURATION: 1 00: 23
(GST INCLUDED)

MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

Calgary Inter Airport Parkade

(6)

- D. Gordon
- EAT
- President's Speaker Series

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	:	26-OCT-15	16:30		
Depart Date	:	27-OCT-15	06:00	✓	
No. Of Guest	:	1			
Room Number	:	[Redacted]			
Club Account	:	[Redacted]			

Information Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 27-OCT-15 03:40 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
26-OCT-15	[Redacted]	Room Charge	145.00	
26-OCT-15	[Redacted]	GST	7.47	
26-OCT-15	[Redacted]	Destination Marketing Fee	4.35	
26-OCT-15	[Redacted]	Tourism Levy	5.97	
27-OCT-15	[Redacted]	Mastercard		-162.79
		** Total	162.79	-162.79
		*** Balance	0.00	

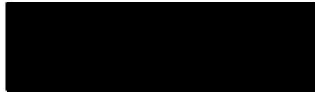
For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

Continued on the next page

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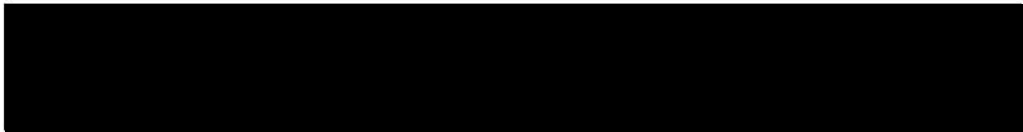


Brenda Huband



Page Number : [REDACTED] Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 26-OCT-15 16:30
 Depart Date : 27-OCT-15 06:00
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

STAY LONGER - Enjoy more time to explore your destination with the benefits of Westin Weekend, from extended breakfast hours to late Sunday checkouts.
 Book your next Westin Weekend at westin.com/weekend



EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
10-26-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
Total	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00

①

Stoneridge Resort
30 Lincoln Park
Canmore, AB T1N 3E9

Ed T Ketrust
Page 1 of 1
Nov 2+3

TAX ID: GST#873770648RT005

Brenda Huband

Room	Folio	CheckIn	CheckOut	Balance
		11/02/15	11/03/15	0.00
Master Folio		Meeting Room Package Executive		

Date	Room	Description / Voucher	Charges	Credits	Balance
11/02/15		Meeting Room Package Executive	239.00	0.00	239.00
11/02/15		GST	12.20	0.00	251.20
11/02/15		Resort Fee	4.87	0.00	256.07
11/02/15		Alberta Tourism Levy	6.69	0.00	262.76
11/03/15		Mastercard - [REDACTED]	0.00	262.76	0.00
		Balance Due			0.00
		Summary and Taxes			
		Taxable Sales	239.00		
		Resort Fee - 3%	4.87		
		Alberta Tourism Levy - 4%	6.69		
		GST - 5%	12.20		

The room package includes accommodation at a base rate of \$161.46 per night, meals and meeting room usage along with visual/audio supplies/equipment disclosed under "Other"

Check for Specials www.stoneridgesort.ca
Toll Free Direct 1-877-675-5001
Thank you for Staying with Us!

8

- EDT
- Security Clin. Settings
- Bdggt Jack Force
- Unmet Clin. Needs

Parking

RECEIPT
GST NO. R122556194

TKT ID: [REDACTED]
POF: CS0
IN: 11/09/15 13:42
OUT: 11/10/15 19:35
PAID: \$ 58.70
DURATION: 1 05: 53
(GST INCLUDED)



MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

Calgary International Airport Parkade

9

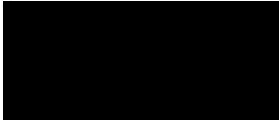
Mtgs - ELT;
Security in Clinical Settings
Bdgt Task Force
2:1 CEO

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Edmonton, AB T5J 0N7
Canada
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WESTIN

HOTELS & RESORTS

Brenda Huband



Page Number : [Redacted] Invoice Nbr : [Redacted]
Guest Number : [Redacted]
Folio ID : A
Arrive Date : 09-NOV-15 15:29 ✓
Depart Date : 10-NOV-15 06:12 ✓
No. Of Guest : 1
Room Number : [Redacted]
Club Account : [Redacted]

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 10-NOV-15 06:20 SONISIN3

Date	Reference	Description	Charges (CAD)	Credits (CAD)
09-NOV-15	[Redacted]	Room Charge	159.00	
09-NOV-15	[Redacted]	GST	8.19	
09-NOV-15	[Redacted]	Destination Marketing Fee	4.77	
09-NOV-15	[Redacted]	Tourism Levy	6.55	
10-NOV-15	[Redacted]	Mastercard		-178.51
** Total			178.51	-178.51 ✓
*** Balance			0.00	

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HOTELS & RESORTS

Brenda Huband
 Alberta Health Services

Page Number : [REDACTED] Invoice Nbr [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 09-NOV-15 15:29
 Depart Date : 10-NOV-15 06:12
 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	Payment
11-09-2015	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00
11-10-2015	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

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
HUBAND, BRENDA	VP & Chief Health Operations Officer, Central & Southern Alberta	Calgary	181.81

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/22/2015	Donor Event - Vascular - CHT - 1 way SPTT to PLC		Mileage	10.61	SPTT	PLC - 1 way	Donor Event - Vascular - CHT - 1 way SPTT to PLC	1			21
10/26/2015	SPTT to YYC & return for D. Gordon; ELT; President's Speaker Series		Mileage	29.29	SPTT	Calgary Airport & return	SPTT to YYC & return for D. Gordon; ELT; President's Speaker Series	1			58
10/30/2015	SPTT to Acclaim Hotel 123 Freeport Blvd for Foundation Forum & return		Mileage	29.29	SPTT	Acclaim Hotel 123 Freeport Blvd NE	SPTT to Acclaim Hotel 123 Freeport Blvd for Foundation Forum & return	1			58
11/2/2015	Home to Stoneridge Resort in Canmore & Return - ELT Retreat on Nov 2 & 3		Mileage	94.94	Home	Stoneridge Resord in Canmore	Home to Stoneridge Resort in Canmore & Return - ELT Retreat on Nov 2 & 3	1			188
11/9/2015	SPTT to FMC - 1 way - Newborn Campaign		Mileage	7.58	SPTT	FMC - 1 way	SPTT to FMC - 1 way - Newborn Campaign	1			15
11/9/2015	FMC to YYC - 1 way - Security Clin Settings; Bdgt Task Force; CEO; Unmet Clin Needs		Mileage	10.10	FMC	Calgary Airport 1 way	FMC to YYC - 1 way - Security Clin Settings; Bdgt Task Force; CEO; Unmet Clin Needs	1			20
Approver(s) for the claim		Approval Status		Approval Date							
KAMINSKI, VICTORIA		Approve		2-Dec-15							

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: YES

Name : Brenda Huband	Reporting Period for the Month of : Oct 21 to Nov 20 2015
-----------------------------	--

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
26-Oct-15	Direct Billing	Airline Ticket	Inv # [REDACTED] Mtgs - D. Gordon; ELT; President's Speaker Series	Marlin Travel	384.47
09-Nov-15	Direct Billing	Airline Ticket	Inv [REDACTED] Mtgs - ELT; Security Clinical Settings; Bdgt Task Force; 2:1 CEO	Marlin Travel	352.96
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in the Month					\$ 737.43

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: October 22, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For

MS BRENDA HUBAND
AC [REDACTED]

Monday, October 26, 2015

Air

AIR CANADA **Flight:** 8225 V CLASS
From: CALGARY AB 06:30 PM **Equipment:** DH4
To: EDMONTON INTL AB 07:19 PM **Mile(s) Flown:** 163
Stops: 0 **Arrival:** 26Oct15
AIR CANADA E
SEAT 11F - HU
TICKET NUMBER [REDACTED]

Tuesday, October 27, 2015

Air

AIR CANADA **Flight:** 8153 Q CLASS
From: EDMONTON INTL AB 06:00 PM **Equipment:** D8 (300 SERIES)
To: CALGARY AB 06:52 PM **Mile(s) Flown:** 163
Stops: 0 **Arrival:** 27Oct15
AIR CANADA E
SEAT 9F - HUBAND/BRENDA MS
TICKET NUMBER [REDACTED]

Cost:

AIR CANADA WEB [REDACTED]	[REDACTED]	309.51
		74.96
	Ticket Total:	384.47

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

Invoice Number: [REDACTED]
Date: October 22, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	384.47
Less Credit Card Payments:	384.47
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: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: November 4, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

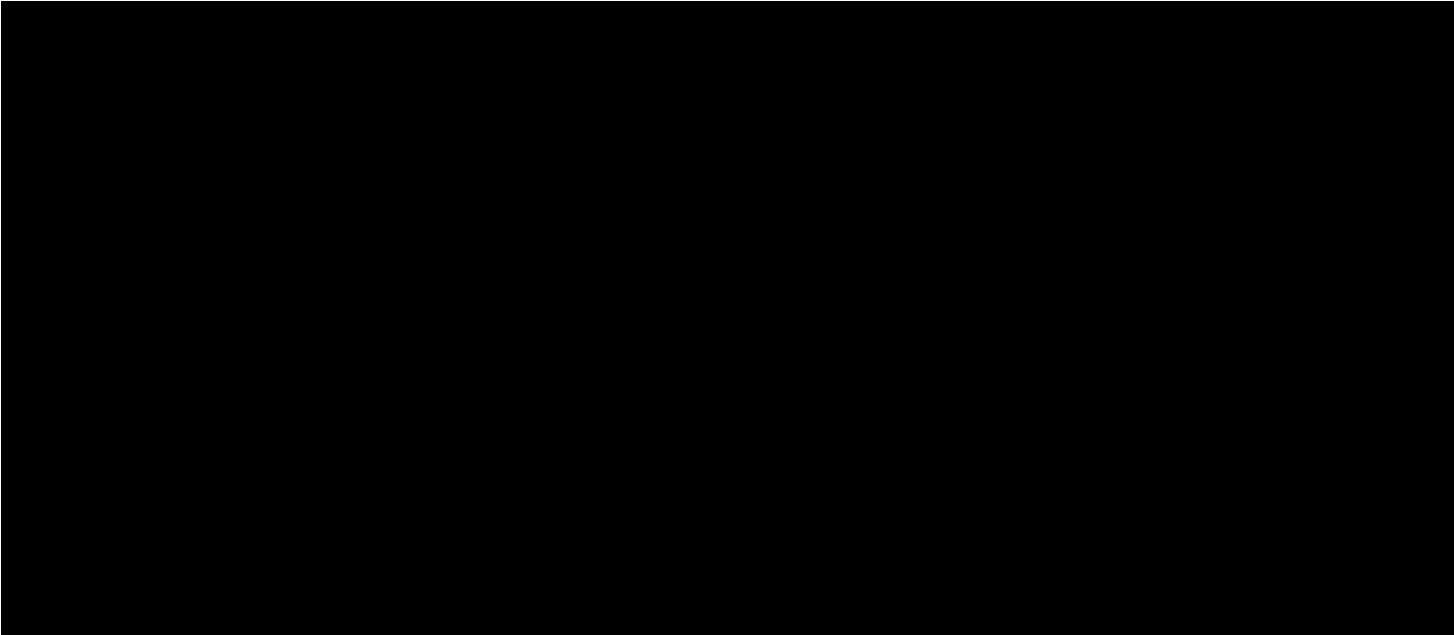
For

MS BRENDA HUBAND
AC [REDACTED]

Monday, November 9, 2015

 Air

AIR CANADA
From: CALGARY AB Flight: 8156 G CLASS
To: EDMONTON INTL AB 03:25 PM Equipment: D8 (300 SERIES)
Stops: 0 Arrival: 09Nov15 04:19 PM Mile(s) Flown: 163
AIR CANADA E
AIR CANADA CON [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 9F [REDACTED]



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

Invoice Number: [REDACTED]
Date: November 4, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Tuesday, November 10, 2015

 Air

AIR CANADA
From: EDMONTON INTL AB Flight: 8153 G CLASS
To: CALGARY AB 06:40 PM Equipment: DH4
Stops: 0 Arrival: 10Nov15 07:30 PM Mile(s) Flown: 163
AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 9F

Cost:

AIR CANADA WEB [REDACTED]	[REDACTED]	278.00
	Tax:	74.96
	Ticket Total:	352.96

Total:

Grand Total:	352.96
Less Credit Card Payments:	352.96
Credit / Balance Due To This Invoice:	0.00
Total Balance Due:	0.00

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