

## AHS Board and Executive Expense Report

**Name:** Dr Brian Muir  
**Title:** Zone Medical Director North Zone  
**Location:** Edmonton

Expenses approved during the month of September 2023

			Travel (1)							
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
	P-Card	Meetings					-			
	Expense Claim	Meetings					-			
Sep-23	Direct Bill	Meetings			302		302			
<b>Total</b>			\$ -	\$ -	\$ 302	\$ -	\$ 302	\$ -	\$ -	\$ -

**Total for  
the Month** \$ 302

Maximum daily single meal expense claimed in the month \$ -  
Maximum daily base hotel rate claimed in the month \$ 139  
Non economy air travel in the month \$ -

### 1) Travel expenses

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

### 2) Professional Development

Includes conference, seminar and course registration fees and material

### 3) Hosting and Hospitality expenses

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

### 4) Other

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

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

## Expense Report Direct Bill Summary

**Purpose of This Form:**

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

**Expenses Paid Directly to Third Party Vendors:**

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

Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund.

It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

### Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- Information will be used for reporting purposes only.
- Refer to Quick Reference Guide for: [Providing a Standard Business Reason\(s\)](#)
- 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

<b>Name :</b> Dr. Brian Muir	<b>Reporting Period for the Month of :</b> Sep-23
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
7/24/2023	Direct Billing	Hotel	Hotel expense for July 23, 2023 for in-person physician visits with Dr. Peter Jamieson	Days Inn High Prairie	\$152.60
7/25/2023	Direct Billing	Hotel	Hotel expense for July 24, 2023 for in-person physician visits with Dr. Peter Jamieson	Canalta Real Estate Services Ltd	\$148.90
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
<b>Total Paid in the Month</b>					\$ 301.50



**DAYS INN HIGH PRAIRIE**

4125 52 AVE  
BOX 820  
HIGH PRAIRIE AB T0G 1E0 CA  
Phone: 780-523-3050  
Fax: 780-523-3181

Email: [REDACTED]

Printed: 2023-10-04 2:36:11 PM

**Folio (Detailed)**

Name: MUIR, BRIAN P DR Confirmation Number: [REDACTED]  
ACCOUNT/ INVOICE# : [REDACTED]

Room: [REDACTED] Room Type: NQ1, 1QUEEN/NS/MIC/FRG/ Nights: 1 Guests: 1/0  
Rate Plan: RACK Daily Rate: WIFI GTD: MC - MASTERCARD  
Arrival: 2023-07-24 (Mon) Departure: \$140.00 + \$12.60 Tax 2023-07-25 (Tue)

Room Rate:  
2023-07-24 (Mon) - 2023-07-24 (Mon) \$140.00 + \$12.60 Tax per night.

Date	Code	Description	Amount	Balance
2023-07-24	RM	ROOM CHARGE	\$140.00	\$140.00
2023-07-24	TAX1	GST	\$7.00	\$147.00
2023-07-24	TAX2	TTC	\$5.60	\$152.60
2023-07-25	MC	MC [REDACTED]	-\$152.60	\$0.00

**Summary**

Room	Tax	F&B	Other	CC	Cash	DB
\$140.00	\$12.60	\$0.00	\$0.00	-\$152.60	\$0.00	\$0.00

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**Guest Signature:**

\_\_\_\_\_

(1) Regardless of charge instructions, the undersigned acknowledges the above as personal indebtedness. (2) This property is privately owned and management reserves the right to refuse services to any one, and will not be responsible for injury or accidents to guests or loss of money, jewelry or any personal valuables of any kind. "We or our affiliates may contact you about goods and services unless you call 888-946-4283 or write to Opt Out/ Privacy, Wyndham Hotel Group, LLC, 22 Sylvan Way, Parsippany, NJ 07054 to opt out. View our website about privacy."



REMIT TO: Canalta Real Estate Services Ltd.

o/a Ramada Lac La Biche

PO Box 2109

Drumheller AB, T0J 0Y0

Website: [www.canaltahotels.com](http://www.canaltahotels.com)

# Invoice

Invoice#: [REDACTED]

GST#: 894948450 RT0001

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**Bill To:**

**Alberta Health Services**

PO Box 1600

Edmonton AB, T5J 2N9

Invoice Date	25-Jul-23
Due Date	24-Aug-23

Folio No	Description	QTY	Amount	Total
	Room: [REDACTED] 1 King Bed - Standard Room: Brian Dr. Muir Jul-23			
	Reference: PO [REDACTED]		0.00	0.00
	ROOM CHARGE	1	139.00	139.00
	ATL ON DMF	1	0.17	0.17
	DMF	1	4.17	4.17
	AB TRAVEL & TOURISM LEVY	1	5.56	5.56

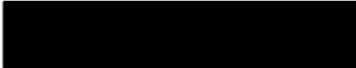
<b>Invoice Total</b>	<b>\$148.90</b>
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**Invoice Summary**

Room Charges	Other Charges	Other Payments	GST/HST	PST/RST	DMF/TIF	Accommodation Tax	TL (AB)
\$139.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.56

**Terms: Net 30 Days**

Your Canalta Account Manager:



**Make all payments to: Canalta Real Estate Services Ltd.**

Please remit payment to PO Box 2109, Drumheller, AB T0J 0Y0

Should you have any inquiries concerning this invoice, please contact Account Receivables Office

Phone: 1-403-823-2030 Email: [accr@canalta.com](mailto:accr@canalta.com) Website: [www.canaltahotels.com](http://www.canaltahotels.com)

**Thank you for choosing Canalta Hotels!**

