

## AHS Board and Executive Expense Report

**Name** Brian Postl  
**Title** Quality Assurance and Patient Safety Advisory Committee  
**Location** Winnipeg  
 Expenses submitted during the month of May 2018

			Travel (1)						Working Sessions Hosting and Hospitality		Other
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Hosting and Hospitality (3)	Other (4)	
May-18	Expense Claim	Meetings	317	27		124	468				
<b>Total</b>			\$ 317	\$ 27	\$ -	\$ 124	\$ 468	\$ -	\$ -	\$ -	

**Total for  
the Month** \$ 468

Maximum daily single meal expense claimed in the month \$ 27  
 Maximum daily base hotel rate claimed in the month \$ -  
 Non economy air travel in the month \$ -

### 1) Travel expenses

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

### 2) Professional Development

Includes conference, seminar and course registration fees and material

### 3) Hosting and Hospitality expenses

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

### 4) Other

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

### 5) Remuneration, Allowances Reported in the Financial Statements

Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.



Employee # [REDACTED]

AHS - AP Processing - Internal Use Only

Voucher #

Naming Convention:

T4A/NR Applicable? - If yes, indicate line & amt

## BOARD MEMBER EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION					
Name:	Dr. Brian Postl			Expense Period Month:	May-18
Address:	[REDACTED]		City:	[REDACTED]	
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Attendance at the Quality & Safety Committee Meeting of the AHS Board on May 23, 2018 in Edmonton.				

SECTION 2: FINANCE CODING & TOTAL CLAIM					
Description	Corp/BU/Org	Location (If applicable)	Functional Centre/Primary	Expense/Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	101	0005	71110300000	45000000	\$27.19 ✓
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$440.49 ✓
Other (D)	101	0005	71110300000	41090000	\$0.00
<b>TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE</b>					<b>\$467.68</b> ✓

SECTION 3: AUTHORIZATION			
I attest that I have read and understand all applicable policies 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 Board 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 below.			
Claimant (Print Name) Dr. Brian Postl	Signature:	Date June 20/18	Phone# [REDACTED]
I attest that I have read and understand all applicable policies of 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 Board and that this claim has not been previously claimed by the claimant or on their 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 below.			
Approved by (Print Name) Linda Hughes	Position Title/Program Group Board Chair		
Signature:	Date June 27/18		

Health and Personal information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act, respectively, for the purpose of administering

Deborah Rhodes, VP Corporate Services & CFO  
Position # [REDACTED] DOFA Level: [REDACTED]

For payment please submit to:  
14<sup>th</sup> Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: Jennifer Hamstra

**Carry forward from Section 1**

Name:	Dr. Brian Postl	Expense Period Month:	May-18
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Completion of the "cost effective method used" Column is required. If you select "No" in this column, Further Explanation is Required in the "Rationale is Required" section below

**Rationale is Required for expenses that are not Cost Effective:** (supporting analysis and documentation must be attached to this form)

**SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM**

The Board Members follow the Government of Alberta (GOA) Travel, Meal and Hospitality Expenses Policy

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates (Appendix C for USA, Appendix D for International).

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt)(A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)
			Allowance Within Canada		With Receipt or Allowance Outside Canada					
			Meal Type	Allowance	Meal Type	Amount				
23-May-2018	Parking at Winnipeg Airport to attend Quality & Safety Committee Meeting in Edmonton.	Yes					\$59.88	✓		
23-May-2018	Flight from Winnipeg to YEG to attend Quality & Safety Committee Meeting in Edmonton.	Yes					\$317.36	✓		
23-May-2018	Taxi from YEG to SSP.	Yes					\$63.25	✓		
23-May-2018	Dinner.	Yes			D	\$27.19	✓			
<b>Total: (amount auto fills to page 1)</b>			\$0.00			\$27.19	\$0.00	\$440.49	\$0.00	0.00

<b>BOARD MEMBER Mileage Rate</b>	0.505	<b>Total Mileage</b>	\$ -
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**Winnipeg Airport**

Thank you for parking at the Winnipeg Airport  
Please call 204-774-5897 if you have any questions  
or comments

Ticket: [REDACTED]  
Spot: [REDACTED]  
Tranact: [REDACTED]  
Licence/State: [REDACTED]  
Colour: [REDACTED]  
Make/Mod: [REDACTED]

Garage Loc: South Lot  
Request Loc: Main Location  
Arrival Date: 23/05/2018 05:52:08  
Trans Date: 23/05/2018 22:16:31  
Customer: POSTL, BRIAN  
Cashier: Bill  
Park Chrg: 35.00 Parking  
Regardless Car 20.00  
Wash Exterior  
Only  
GST 1.25  
Tip: 3.63  
**Ttl Charge: 59.88 VISA**  
Customer: ✓  
Last 4:  
Approval: Approved

Signature:

[REDACTED]



Search



Flights



Guests



Seats



Extras



Payment



Confirmation



Booking complete. We've sent a copy of your itinerary to [REDACTED]

**Reservation code**

[REDACTED]

**Flights**

Winnipeg, MB (YWG) to Edmonton, AB (YEG)

\$264.86 CAD

Round trip 1 guest

May 23, 2018 to May 23, 2018

**Seats**

\$52.50 CAD

**WS** 571 Winnipeg to Edmonton

1 seat (11C)

**WS** 304 Edmonton to Winnipeg

1 seat (14C)

**Payment**

Payment card

\$317.36 CAD

MasterCard ending in [REDACTED]

Total:

\$317.36

CAD

Rent a car

GREATER EDMONTON TAXI  
SERVICE  
10135 31 AVE NW  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE VISA  
DATE 2018/05/23  
TIME 3045 08:38:33  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE  
AMOUNT \$55.00  
TIP \$8.25  
TOTAL

**\$63.25**

Visa Credit  
[REDACTED]

**APPROVED**

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456  
BARREL TAXI 780.489.7777  
EDMTAXI.COM  
GST 100403070



ESKIMO'S BAR & GRILL  
EDMONTON INTERNATIONAL AIRPORT

104/1 GST 1  
MAY23'18 4:59PM

DINE IN

\*\*\*\* SEAT 1 \*\*\*\*  
1 SODA BAR M 3.59  
FIRST RND SFTBEV  
DIET COKE  
1 BRUG DOUBLE E 17.99  
FRIES  
1 SODA BAR M 0.00  
REFILL SFTBEV  
DIET COKE  
TAX 1.08 AMOUNT D 22.66  
\*\*\*\*\*  
TAX 0.00 AMOUNT DU 0.00  
\*\*\*\*\*  
SUBTOTAL 21.58  
TAX 1.08  
AMOUNT DUE \$22.66

WE WANT TO HEAR YOUR FEEDBACK!  
PLEASE CONTACT 1-877-672-7467  
OR CUSTOMERSERVICE@HMSSHOT.COM  
TO SHARE YOUR EXPERIENCE.

STOREID: YEGBG01  
GST #137512901

HMS HOST  
EDMONTON INTERNATIONAL AIRPORT

Check No: [REDACTED]  
Trans Date: 2018-05-23 17:38:28  
Trans Type: PURCHASE  
Card Type: VA  
Entry Mode: Chip  
Acct Num: [REDACTED]  
Auth Code: [REDACTED]  
Response Code: 00

Subtotal: 22.66  
Gratuity: 4.53  
Total: 27.19

\*\*\*\*\* EMV PURCHASE \*\*\*\*\*  
App Label: Visa Credit  
Mode: Issuer  
AID: [REDACTED]  
TVR: [REDACTED]  
TSI: [REDACTED]  
IAD: [REDACTED]  
ARC: [REDACTED]

Pin Verified

Customer Copy