

AHS Board and Executive Expense Report

Name Dave Bilan
Title VP Collaborative Practice, Nursing & Health Professions (Acting)
Location Calgary

Expenses submitted during the month of May 2016

Travel (1)

MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
May-16	Expense Claim	Meetings		278	1,055	904	2,237			
Total			\$ -	\$ 278	\$ 1,055	\$ 904	\$ 2,237	\$ -	\$ -	\$ -

Total for the Month \$ 2,237

Maximum daily single meal expense claimed in the month \$ 21
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.

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.

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
BILAN, DAVE	VP, Collaborative Practice, Nursing and Health Professions (Acting)	Calgary	1,584.80

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
4/18/2016	Bus travel to Edmonton for leadership meetings	AB - Other Zones	Miscellaneous	138.00				2			
4/18/2016	Hotel accommodations while in Edmonton for leadership meetings	AB - Other Zones	Accommodations	468.18				3			
4/18/2016	Leadership meetings in Edmonton		Meals Per Diem	117.80			18-Apr-16- Dinner 19-Apr-16- Lunch/ Dinner 20-Apr-16- Lunch/ Dinner 21-Apr-16- Lunch/ Dinner	4			
4/25/2016	Bus travel to Edmonton for leadership meetings	AB - Other Zones	Miscellaneous	148.00				2			
4/25/2016	Hotel accommodations while in Edmonton for leadership meetings	AB - Other Zones	Accommodations	156.06				1			
4/25/2016	Meals in Edmonton for leadership meetings		Meals Per Diem	64.70			25-Apr-16- Lunch/ Dinner 26-Apr-16- Lunch/ Dinner	2			
4/29/2016	Midwifery meetings in Red Deer		Mileage	148.98	Calgary	Red Deer		1			295
5/2/2016	Travel to Edmonton for leadership meetings	AB - Other Zones	Miscellaneous	133.92				1			
5/2/2016	Hotel accommodations while in Edmonton for leadership meetings	AB - Other Zones	Accommodations	156.06				1			
5/2/2016	Meals in Edmonton for leadership meetings		Meals Per Diem	53.10			02-May-16- Dinner 03-May-16- Lunch/ Dinner	2			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		26-May-16							

Dave Bilan

From: Red Arrow Reservations [itinerary@redarrow.ca]
Sent: April 14, 2016 9:01 AM
To: Tracy Knourek
Subject: Invoice

Invoice

Date: 2016-04-14



As of:

No. can reach us at

Website User

Order#	Ordered	Customer#	P.O.	Group Name	Departing	Returning	Sales Rep	Sales Agent
[REDACTED]	2016-04-13	[REDACTED]	-	-	2016-04-18	2016-04-21	-	Website User

Travellers

Bilan/Dave

Product	Details	Duration	Price Basis	Qty	Each	Billed
CAEDM 18 30 YYC Assigned to 04A	Departs Calgary (CGYNORTH / CALGARY NORTH) 2016-04-18 at 18:45 Arrives Edmonton (EDMTO / Edmonton Ticket Office) 2016-04-18 at 22:15	3 hrs 30 mins	Senior	1	65.71	69.00
ECEXP 16 30 Assigned to 10B	Departs Edmonton (EDMTO / Edmonton Ticket Office) 2016-04-21 at 16:30 Arrives Calgary (CGYNORTH / CALGARY NORTH) 2016-04-21 at 19:35	3 hrs 5 mins	Senior	1	65.71	69.00

Invoice Amount

Date	From	Reference	Amount
2016-04-13	Website User	[REDACTED]	138.00 CAD

Base Price:	131.42 CAD
Discounts:	0.00 CAD
Service Charges:	0.00 CAD
GST	6.58 CAD
Invoice Total:	138.00 CAD
Commission:	0.00 CAD
Received:	138.00 CAD
Balance:	0.00 CAD

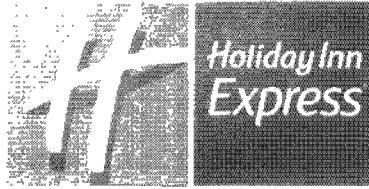


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04-21-16

David Bilan	Folio No. :	[REDACTED]	Room No. :	[REDACTED]
[REDACTED]	A/R Number :		Arrival :	04-18-16
	Group Code :		Departure :	04-21-16
	Company :	Alberta Health Services	Conf. No. :	[REDACTED]
	Membership No. :	[REDACTED]	Rate Code :	[REDACTED]
	Invoice No. :		Page No. :	1 of 2

Date	Description	Charges	Credits
04-18-16	*Room	139.00	
04-18-16	GST Tax	6.95	
04-18-16	Trsm Levy Tax	5.56	
04-18-16	Municipal DMF	4.17	
04-18-16	Municipal DMF GST	0.21	
04-18-16	Municipal DMF Tourism Levy	0.17	
04-19-16	*Room	139.00	
04-19-16	GST Tax	6.95	
04-19-16	Trsm Levy Tax	5.56	
04-19-16	Municipal DMF	4.17	
04-19-16	Municipal DMF GST	6.95	
04-19-16	Municipal DMF Tourism Levy	5.56	
04-20-16	Municipal DMF GST Adj	-6.74	
04-20-16	Municipal DMF Tourism Levy -/	-5.39	
04-20-16	*Room	139.00	
04-20-16	GST Tax	6.95	
04-20-16	Trsm Levy Tax	5.56	
04-20-16	Municipal DMF	4.17	
04-20-16	Municipal DMF GST	0.21	
04-20-16	Municipal DMF Tourism Levy	0.17	
04-21-16	MasterCard [REDACTED]		468.18



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04-21-16

David Bilan	Folio No. :	[REDACTED]	Room No. :	[REDACTED]
[REDACTED]	A/R Number :		Arrival :	04-18-16
	Group Code :		Departure :	04-21-16
	Company :	Alberta Health Services	Conf. No. :	[REDACTED]
	Membership No. :	[REDACTED]	Rate Code :	[REDACTED]
	Invoice No. :		Page No. :	2 of 2

Date	Description	Charges	Credits
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Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Total	468.18	468.18
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Balance	0.00
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Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Dave Bilan

From: "Red Arrow Reservations" <Gimcray@redarrow.ca>
 Date: Monday, April 25, 2016 6:35 PM
 To: [REDACTED]
 Subject: Invoice



Invoice

Date: 2016-04-25

OR #

File can report us if

Website User

Order#	Ordered	Customer#	P.O.	Group Name	Departing	Returning	Sales Rep	Sales Agent
[REDACTED]	2016-04-13	[REDACTED]			2016-04-25	2016-04-26		Website User

Travellers

Bilan/Dave

Product	Details	Duration	Price Basis	Qty	Each	Billed
Parking Per Day	2016-04-25	2 days	Per Day Parking	1	9.52	10.00
CALEDM 18:30 YYC Assigned to: 06A	Departs Calgary (CGYNORTH / CALGARY NORTH) 2016-04-25 at 18:45 Arrives Edmonton (EDMTO / Edmonton Ticket Office) 2016-04-25 at 22:15	3 hrs 30 mins	Senior	1	65.71	69.00
EDMCAL 18:30 Assigned to: 06A	Departs Edmonton (EDMTO / Edmonton Ticket Office) 2016-04-26 at 18:30 Arrives Calgary (CGYNORTH / CALGARY NORTH) 2016-04-26 at 21:45	3 hrs 15 mins	Senior	1	65.71	69.00

Payments Received

Date	From	Reference	Amount
2016-04-13	Website User	[REDACTED]	138.00 CAD
2016-04-25	Bilan/Dave	[REDACTED]	10.00 CAD

Base Price:	140.94 CAD
Discounts:	0.00 CAD
Service Charges:	0.00 CAD
GST:	7.06 CAD
Invoice Total:	148.00 CAD
Commission:	0.00 CAD
Received:	148.00 CAD
Balance:	0.00 CAD

TERMS: DUE UPON RECEIPT
 GST# BN139981476

If you wish to time change, date change, or cancel for a full refund - 30 minutes notice prior to A.M. departure; 3 P.M. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked with us. Red Arrow will not be responsible for the loss of or damage to checked baggage in excess of stated maximum liability. Red Arrow reserves the right to check I.D. or perform carry-on baggage checks at any time.

CORPORATE BILLING ACCOUNTS - PLEASE PAY OFF OF YOUR MONTHLY STATEMENT & NOT OFF OF INDIVIDUAL INVOICES.

Thank you for choosing Red Arrow.

Our Core Values: Safety | Customer Service | Resourcefulness | Integrity | Initiative Attitude | Team Work | Loyalty |



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04-26-16

David Bilan	Folio No. :	[REDACTED]	Room No. :	[REDACTED]
[REDACTED]	A/R Number :	[REDACTED]	Arrival :	04-25-16
	Group Code :		Departure :	04-26-16
	Company :	Red Arrow	Conf. No. :	[REDACTED]
	Membership No. :	[REDACTED]	Rate Code :	[REDACTED]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
04-25-16	*Room	139.00	
04-25-16	GST Tax	6.95	
04-25-16	Trsm Levy Tax	5.56	
04-25-16	Municipal DMF	4.17	
04-25-16	Municipal DMF GST	0.21	
04-25-16	Municipal DMF Tourism Levy	0.17	
04-26-16	MasterCard [REDACTED]		156.06
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.		Total	156.06
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Mirela Sumera

From: Red Arrow Reservations <itinerary@redarrow.ca>
Sent: Wednesday, April 27, 2016 3:08 PM
To: Tiffany Aske
Subject: Invoice

Invoice

Date: 2016-04-27

Bill To:

You can reach us at

ALBERTA HEALTH SERVICES - MARLIN TRAVEL
 9929 - 108 STREET
 EDMONTON, AB T6K 1G8

Order#	Ordered	Customer#	P.O.	Group Name	Departing	Returning	Sales Rep	Sales Agent
[REDACTED]	2016-04-25	[REDACTED]		-	2016-05-02	2016-05-03	-	Website User

Travellers:

Bilan/Dave

Product	Details	Duration	Price Basis	Qty	Each	Billed
CALEDM 18:30 YYC Assigned to: 03A	Departs Calgary (CALTO / Calgary Ticket Office) 2016-05-02 at 18:30 Arrives Edmonton (EDMTO / Edmonton Ticket Office) 2016-05-02 at 22:15	3 hrs 45 mins	Adult	1	70.48	70.48
EDMCAL 18:30 Assigned to: 05A	Departs Edmonton (EDMTO / Edmonton Ticket Office) 2016-05-03 at 18:30 Arrives Calgary (CALTO / Calgary Ticket Office) 2016-05-03 at 22:00	3 hrs 30 mins	Adult	1	70.48	66.96

Payments Received:

Date	From	Reference	Amount
2016-04-25	ALBERTA HEALTH SERVICES - MARLIN TRAVEL	[REDACTED]	133.92 CAD
2016-04-25	Full Payment	due	3.52 CAD

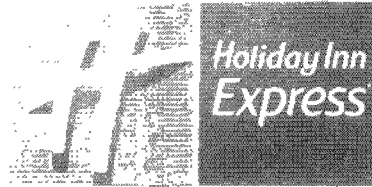
Base Price: 140.96 CAD
 Discounts: 3.52 CAD
 Service Charges: 0.00 CAD
 Invoice Total: 137.44 CAD
 Commission: 0.00 CAD
 Received: 133.92 CAD
 Balance: 3.52 CAD

TERMS: DUE UPON RECEIPT
 GST# RN139981476

If you wish to time change, date change, or cancel for a full refund - 30 minutes notice prior to A.M. departures; 3 hours notice prior to P.M. departures must be given. Failure to provide proper notice makes the trip non-refundable & will result in an additional change fee for a date / time change.

Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 90 days for a change fee. If you wish to change or cancel your booking, please contact our Central Reservation line at 1-800-20-1959.

*Red Arrow will not be responsible for the loss of or damage to baggage or luggage in excess of the maximum allowed by the applicable carrier's conditions of carriage. For more information, please contact the applicable carrier.



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05-03-16

David Bilan	Folio No. :	[REDACTED]	Room No. :	[REDACTED]
[REDACTED]	A/R Number :	[REDACTED]	Arrival :	05-02-16
	Group Code :		Departure :	05-03-16
	Company :		Conf. No. :	[REDACTED]
	Membership No. :	[REDACTED]	Rate Code :	[REDACTED]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-02-16	*Room	139.00	
05-02-16	GST Tax	6.95	
05-02-16	Trsm Levy Tax	5.56	
05-02-16	Municipal DMF	4.17	
05-02-16	Municipal DMF GST	0.21	
05-02-16	Municipal DMF Tourism Levy	0.17	
05-03-16	MasterCard [REDACTED]		156.06
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews . We look forward to welcoming you back soon.		Total	156.06
		Balance	0.00

Guest Signature: _____

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AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
BILAN, DAVE	VP, Collaborative Practice, Nursing and Health Professions (Acting)	Calgary	651.57

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/16/2016	Meetings in Edmonton and Leduc		Mileage-Other	323.20			Return trip to Edmonton and Leduc for meetings	2			320
5/16/2016	Meals per diem while in Edmonton	AB - Other Zones	Meals Per Diem	41.50			Meals while in Edmonton for meetings. 16 & 17 May 2016	2			
5/16/2016	Accommodation Edmonton for leadership meetings	AB - Other Zones	Accommodations	155.46			Accommodation in Edmonton for leadership meetings	1			
5/16/2016	Parking for leadership meeting	AB - Other Zones	Parking	12.60			Parking in Edmonton for leadership meetings	1			
5/17/2016	Accommodation in Leduc for Ambulatory Community Rehab meetings	AB - Other Zones	Accommodations	118.81			Accommodation in Leduc for Ambulatory Community Rehab meetings.	1			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		6-Jun-16							



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05-17-16

David Bilan	Folio No.	[REDACTED]	Room No.	[REDACTED]
[REDACTED]	A/R Number	:	Arrival	: 05-16-16
[REDACTED]	Group Code	:	Departure	: 05-17-16
[REDACTED]	Company	: Alberta Health Services	Conf. No.	[REDACTED]
[REDACTED]	Membership No.	: [REDACTED]	Rate Code	[REDACTED]
[REDACTED]	Invoice No.	:	Page No.	[REDACTED]

Date	Description	Charges	Credits
05-16-16	Parking	12.00	
05-16-16	*Accommodation	139.00	
05-16-16	Marketing Fee	4.17	
05-16-16	GST #896724515 RT0001	7.16	
05-16-16	AB Tourism Levy	5.73	
05-17-16	MasterCard [REDACTED]		168.06
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon		Total	168.06
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Executive Royal Hotel Leduc

8450 SPARROW DRIVE
LEDUC, AB T9E7G4

(780) 986-1840

info.ert@royalhotelgroup.ca

www.executivehotels.net

879535953RT0004

C/O 05/18/2016 09:54 AM KY

EXECUTIVE ROYAL HOTEL EDMONTON

Room #

[REDACTED]

Conf #

[REDACTED]

Arrival

05/17/16

Departure

05/18/16

Registered To:

BILAN, DAVE

[REDACTED]

Room Type

Guests

[REDACTED]

Payment

Visa/Master

Acct

(000) 000-0000

Posting Date	Oper	AcctCode	Description	From	Reference	Amount
05/17/16	[REDACTED]	[REDACTED]	ROOM CHRG REVENUE			\$109.00
05/17/16	[REDACTED]	[REDACTED]	GST			\$5.45
05/17/16	[REDACTED]	[REDACTED]	ALBERTA TOURISM LEVY			\$4.36
05/18/16	[REDACTED]	[REDACTED]	PAYMENT MASTER CARD			\$118.81
Balance Due						\$0.00

THE UNDERSIGNED GUEST AGREES TO PAY THE AMOUNT INDICATED ON THE BALANCE DUE PORTION OF THIS INVOICE. IF THE CHARGES ARE TO BE BILLED TO A THIRD PARTY, THE UNDERSIGNED AGREES TO BE PERSONALLY LIABLE FOR PAYMENT OF THE CHARGES IN THE EVENT THAT THE INDICATED THIRD PARTY, PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF SUCH CHARGES.

X _____
GUEST SIGNATURE

Signature

EXECUTIVE ROYAL HOTEL
EDMONTON
8450 SPARROW DRIVE
LEDC AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/05/18
TIME 2711 09:54 39
CLERK ID 701
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PRE-AUTH COMPLETION
TOTAL

\$118.81

MasterCard
A0000000041010

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS