

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 November 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)
Nov-16	Expense Claim	Meetings		50	156	146	352			
Nov-16	Direct Billing	Meetings				134	134			
Total			\$ -	\$ 50	\$ 156	\$ 280	\$ 486	\$ -	\$ -	\$ -

Total for the Month \$ 486

Maximum daily single meal expense claimed in the month \$ 24
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

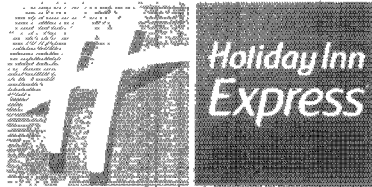
Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

AHS Public Disclosure Expense Claims


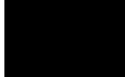


Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
BILAN, DAVE	VP, Collaborative Practice, Nursing and Health Professions (Acting)	Calgary	\$ 352.36


Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/14/2016	Lunch while in Red Deer for midwifery negotiations	AB - Other Zones	Meals Per Diem	\$ 13.00			Lunch while in Red Deer for midwifery negotiations Lunch \$13.00	2			
11/14/2016	Travel to and from Red Deer for midwifery negotiations		Mileage-Local-Home Zone	\$ 136.30	Residence in Calgary	43 Michener Bend Red Deer	Travel from home address to 43 Michener Bend in Red Deer for midwifery negotiations; return to home address in Calgary from 43 Michener Bend in Red Deer	1			290
11/28/2016	Accommodation while in Edmonton for ELT meetings	AB - Other Zones	Accommodations	\$ 156.06			Accommodation while in Edmonton for ELT meetings	1			
11/29/2016	Parking at Red Arrow - bus to Edmonton for ELT meeting	AB - Other Zones	Parking - Lot or Parkade	\$ 10.00			Parking at Red Arrow - bus to Edmonton for ELT meeting	1			
11/29/2016	Lunch and dinner while in Edmonton for ELT meetings	AB - Other Zones	Meals Per Diem	\$ 37.00			Lunch \$13.00 Dinner \$24.00	2			

Approver(s) for the claim	Approval Status	Approval Date
YIU, VERNA	Approve	5-Dec-16



11-29-16

David Bilan 	Folio No. :	Room No. :
	A/R Number :	Arrival : 11-28-16
	Group Code :	Departure : 11-29-16
	Company :	Conf. No. : 
	Membership No. : 	Rate Code : 
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
11-28-16	*Accommodation	139.00	
11-28-16	Marketing Fee	4.17	
11-28-16	GST #87857 8491 RT0002	7.16	
11-28-16	AB Tourism Levy	5.73	
11-29-16	MasterCard 		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.

phone: 1-800-232-1958

ORDER#	ORDERED	CUSTOMER#	P.O.	GROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
	2016-11-28			PARKING	2016-11-28	2016-11-29	-	RICKY

Location:

Bilan/Dave

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
Parking Per Day 2016-11-28 until 2016-11-29 (2 days)	2 days	Per Day Parking	1	\$ 9.52	\$ 10.00

Base Price: \$ 9.52

Discounts: \$ 0.00

Service Charges: \$ 0.00

GST: \$ 0.48

Invoice Total: \$ 10.00

Payments Received: \$ 10.00

Balance Due: \$ 0.00

Payments Received

DATE	GUEST	REFERENCE	AMOUNT
2016-11-28	customer: Dave Bilan		\$ 10.00

FARES FILED FROM RECEIPT CST# RND#9981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to 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. December 15 - January 5 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice may result in 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 30 days for a change fee. If you wish to change or cancel your booking, please contact our Central Area main line at 1-800-232-1958. **Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices **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 RE-OPENING / DUPLICATING INVOICES. Thank you for choosing Red Arrow. Our Core Values: Safety | Customer Service | Resourcefulness | Integrity | Positive Attitude | Team Work | Loyalty | Accountability | Respect | Dedication

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.
- 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 : Dave Bilan	Reporting Period for the Month of : Nov-16
--------------------------	---

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
15-Nov-16	Direct Billing	Other Transportation	Red Arrow Bus from Calgary to Edmonton - Attending AHS ELT meetings in Edmonton	Marlin Travel	133.92
	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	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	-
Total Paid in the Month					\$ 133.92

ALBERTA HEALTH SERVICES - MARLIN TRAVEL
 10030 107 STREET
 EDMONTON, AB T5J 3E4

You can reach us at:

Corporate Sales

ORDER#	ORDERED	CUSTOMER#	P.O.	GROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
[REDACTED]	2016-11-15	[REDACTED]			2016-11-28	2016-11-29	-	Website User

Previous

Bilan/Dave

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
CAEDM 18:30 YYC	3 hrs 45 mins	Adult	1	\$ 70.48	\$ 66.96

Assigned to: 05A
 Departs Calgary (CALTO / Calgary Ticket Office) at 18:30 on 2016-11-28.
 Arrives Edmonton (EDMTO / Edmonton Ticket Office) at 22:15 on 2016-11-28. (3 hrs 45 mins)

EDMCAL 18:30	3 hrs 30 mins	Adult	1	\$ 70.48	\$ 66.96
---------------------	---------------	-------	---	----------	----------

Assigned to: 05A
 Departs Edmonton (EDMTO / Edmonton Ticket Office) at 18:30 on 2016-11-29.
 Arrives Calgary (CALTO / Calgary Ticket Office) at 22:00 on 2016-11-29.
 (3 hrs 30 mins)

Payments Received

DATE	GUEST	REFERENCE	AMOUNT
2016-11-15	ALBERTA HEALTH SERVICES - MARLIN TRAVEL	[REDACTED]	\$ 133.92

Base Price: \$ 140.96
 Discounts: \$ 7.04
 Service Charges: \$ 0.00
 Invoice Total: \$ 133.92
 Payments Received: \$ 133.92