

## Official Administrator and Executive Expense Report

**Name:** Deb Gordon  
**Title:** VP & Chief Health Operations Officer Northern Alberta And VP Collaborative Practice, Nursing and Health Professions(Acting)  
**Location:** Edmonton  
 Expenses submitted during the month of January 2015

Travel (1)										
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Jan-15	Expense Claim	Meeting	406				406			
<b>Total</b>			\$ 406	\$ -	\$ -	\$ -	\$ 406	\$ -	\$ -	\$ -

**Total for the Month**    \$        406

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

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

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

**SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)**

- Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system
- Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system
- If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 1-Nov-14 To 5-Nov-14  
 Travel Period from: 1-Nov-14 To 5-Nov-14 (if applicable)  
 Out-of-Province Travel YES

Name: Deb Gordon Position (Title): VP & Chief Health Operations Officer, Northern Alberta  
 Location: Dept: Health Operations DOFA Level: Union: Business Phone #: Ext:  
 Employee # (E-People):

**SECTION E: FINANCE CODING & TOTAL CLAIM**

CAPITAL PROJECT CODING ONLY → Project Number Expenditure Organization Project Task Number Expenditure Type

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3				
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/ Expense	Total Expense
2A	101	0006	71110100014	\$ 406.31					
2B									
2C									
2D									
				\$406.31					

NOTE: This section auto fills from page 2A, 2B, 2C & 2D

\*\*User to enter Coding & \$ Amounts  
 NOTE: These fields do not automatically fill for Section C & D

TOTAL REIMBURSEMENT	
Total Section B	\$406.31
Total Section C&D	
Less Cash Advance	
<b>TOTAL CLAIM</b>	<b>\$406.31</b>

**SECTION F: AUTHORIZATION**

I attest that I have read and understand the "Travel, Hospitality & Working Session Expense Policy (1100)" of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of the 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 for 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 above.

Travel, Hospitality and Working Session Expense Policy - Document 1100

I, by signing this form, attest that I am compliant to all the above statements.  
 Employee Signature: [Signature] Date: 2015-05-18

I attest that I have read and understand applicable policies of Alberta Health Services 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 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 above.

Approved claim form with receipts should be sent by the approver directly to Accounts Payable for processing.

Approved By (PRINT ONLY): Deb Rhodes DOFA Level: Position #: Phone:  
 Signature: [Signature] Title: Vice President, Corporate Services & CFO Date: RL 2/15

I, by signing this form, attest that I am compliant to all the above statements.  
 Signature: Title: Date:

Health and Personal information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 30(1) and 34(2) of the Freedom of Information and Protection of Privacy (FOIP) Act, respectively, for the purpose of administering AHS Procure to Pay program.

Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10030-107 St, North Tower, 10th Floor, Accounts Payable, Edmonton, AB T5J 3E4

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 0006 71110100014 Emp # (E-People) [REDACTED] Page 2A

*If expenses incurred are for multiple FC's please use pages 2B,2C,2D (after pg3) as there should be one FC per page OR if more lines are required for the same FC use these additional pages. Enter total \$ amount on slip, DO NOT separate any taxes (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.*

**SECTION B: TRAVEL EXPENSES** NOTE: If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C.

Select from dropdown (column Prov) where expenses were incurred (Out of N America = Inter!)  
 Ensure separate lines are used for claim items that differ in Province, US and Out of North America

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 on this page

Date dd-mm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi			
					Meal Type with value	Allowance	Meal Type	with receipt						
1-Nov-14	Flight to San Francisco for CXO Roundtable Conference - Innovators in Human Experience	US	Conf	Yes					\$406.31					
SUBTOTALS														Total Kms

**MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle**  
 → details of travel location to & from must be included above under the purpose of travel column  
 Rates applicable \$0.506 per km for under 5,000km/yr or \$0.47 per km for over 5,000km/yr or per Union Agreement

Enter \$0.506 km, \$0.47 km OR rate per Union Agreement (see Mileage details to the left)

Mileage \$ \_\_\_\_\_

Travel \$ Subtotal 406.31

Auto fills on page 1 - TOTAL TRAVEL \$ 406.31

**Rationale is Required for expenses that are not Cost Effective**  
 (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

From: Air Canada [redacted]  
Subject: Air Canada - 01-Nov: Edmonton - San Francisco (booking ref: [redacted])  
Date: August 15, 2014 at 7:31 PM  
To: [redacted]

Flight to SFO  
for CXO  
Roundtable.  
Claiming only  
Deb's travel

\*\*\*\*\* PLEASE DO NOT REPLY TO THIS E-MAIL \*\*\*\*\*

AIR CANADA   
Itinerary/Receipt

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

Scan this barcode to check in at any Air Canada check-in kiosk.



\$406.31  
- not full fare  
just one passenger

Booking Information

Booking Reference: [redacted]

Customer Care

Air Canada  
1-888-247-2262

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Flight Arrivals and Departures  
1-888-422-7533


Main Contact:

Ms Deborah Ann Gordon  
hwburke@ams.com  
Mob [redacted]  
Home [redacted]  
Work [redacted]

Online Services

- [Manage](#) my booking online (view/change my booking, select seats\*)
- [Select Seats](#)
- [Maple Leaf Lounge | Meal Vouchers | On My Way](#)
- [Alert me](#) of flight status changes directly to my mobile phone or email.
- [Flight Arrivals & Departures](#) - check online if my flight is on time.
- [Check-in online](#) and print my boarding pass

\* [Can my booking be changed online?](#)

 Additional passenger information is required

Your current flight itinerary includes travel to a country that requires additional passenger information.

We strongly encourage you to provide this information ahead of time from the comfort of your home or office with our secure online form.

[Provide passenger information](#)

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
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AC4130<sup>1</sup> Edmonton, Edmonton Int'l (YEG) Sat 01-Nov 2014 12:40 San Francisco, San Francisco Int'l (SFO) Sat 01-Nov 2014 14:53 - Terminal 3 0 3hr13 CP7 Tango, A

<sup>1</sup> Flight AC4130 is operated by United Express/Skywest. Please check in directly at the United Express/Skywest counter. Certain air operations through airport operations through the ticketing counters of major airlines.

AC4139<sup>1</sup> San Francisco, San Francisco Int'l (SFO) Wed 05-Nov 2014 19:25 - Terminal 3 Edmonton, Edmonton Int'l (YEG) Wed 05-Nov 2014 23:23 0 2hr58 CR7 Tango, K

<sup>1</sup> Flight AC4139 is operated by United Express/Skywest. Please check in directly at the United Express/Skywest counter. Certain air operations through airport operations through the ticketing counters of major airlines.

Operated by:

<sup>1</sup> United Express/Skywest

### Passenger Information

1: Ms Deborah Ann Gordon : Adult (16+), Ticket Number [REDACTED]

Air Canada - Aeroplan : [REDACTED] Meal Preference : None  
 Payment Card: [REDACTED] Special Needs: None  
 Seat Selection: None

2: [REDACTED] Ticket Number [REDACTED]

Frequent Flyer Prog : None Meal Preference : None  
 Payment Card: [REDACTED] Special Needs: None  
 Seat Selection: None

### Purchase Summary

#### Fare Summary

Passenger Type	Adult
<b>Air Transportation Charges</b>	
Departing Flight - <u>Tango,</u>	152.00
Return Flight - <u>Tango,</u>	111.00
<u>Surcharges</u>	15.00
<b>Taxes, Fees and Charges</b>	
<u>Canada Airport Improvement Fee</u>	30.00
U.S.A Transportation Tax	39.24
U.S Agriculture Fee	5.51
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	16.01
U.S Passenger Facility Charge	5.05
U.S.A Immigration User Fee	7.85
<u>Air Travellers Security Charge (ATSC)</u>	12.10
September 11 Security Fee	6.28
U.S. Federal Customs Fee	5.17
Total airfare and taxes before options (per passenger)	406.31
Number of passengers	x 2
Total airfare, taxes and options	812.62
Travel Insurance (declined)	0.00

*only claiming Deb's portion - not full fare. \$406.31.*

Grand Total - Canadian dollars

\$812.62

*- only claim is  
\$406.31  
- not full fare  
just Deb's  
portion*

Payment Information

Credit/Debit Card [REDACTED] Amount paid: \$812.62

The following charges (tax inclusive) will appear on your credit or debit card statement:

- Air Canada: \$406.31 (Airfare - per ticket)

Ticket number(s) [REDACTED]

enRoute City Guide

## San Francisco

San Francisco merges the frontier spirit and the Pacific Rim with a cosmopolitan flair. It's one of the few cities where the suits mingle with the counterculture. An art gallery downtown, for example, will draw stockbrokers, hipsters, neo-beatniks and dot-commers alike. Its venerated Golden Gate Bridge, like a horizontal Eiffel Tower, architecturally represents the city in pop art everywhere.

[Read the complete guide](#)

### Fare Rules

Departing Flight Edmonton, (YEG) To San Francisco (SFO) - Tango

• **Changes:**

- o Prior to day of departure - **Change fee** per transaction, per passenger, is \$200 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
- o **Same-day confirmed changes at check-in or at the airport** are subject to availability and are permitted only for same-day flights at a fee of \$150 CAD/USD per direction, per passenger.
- o **Same-day standby** is available only to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
- o Flights can only be used in sequence from the place of departure specified on the itinerary.

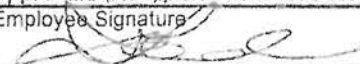
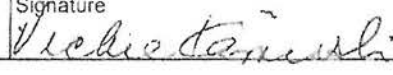
• **Cancellations:**

- o Tickets are **non-refundable** and **non-transferable**.
- o **Cancellations** can be made up to 45 minutes prior to departure.
- o Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per transaction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.
- o Customers who **no-show** their flight will forfeit the fare paid.

- **Paid Advance Seat Selection** is available on Air Canada and Air Canada Express (operated by Jazz), subject to availability.
- Up to 24 hours after the purchase of a **new ticket**, Air Canada will cancel your ticket and provide a full refund without penalty.
- Flights operated by Air Canada: earn 25% Aeroplan Miles (Altitude Qualifying Miles) for flights within Canada and 50% Aeroplan Miles (Altitude Qualifying Miles) for flights between Canada and the U.S.
- **Flight AC4130:** This flight is a **codeshare** flight with United Express/Skywest Airlines. A fee for **checked bags** is charged by United Airlines for codeshare flights it operates between Canada and the U.S. If your itinerary includes a **connecting flight**, the fee applies only if your first flight is

### Out of Province Travel Approval

- All travel expenses must be approved in accordance to "Appendix A" of the Alberta Health Services [Travel Policy](#)
- Pre-Approval form MUST be attached to the actual expense claim

<b>Employee Information</b>					
First Name Deb		Last Name Gordon		Employee Number [REDACTED]	
Phone Number [REDACTED]			Reports To Vickie Kaminski		
Department Health Operations			Office Location [REDACTED]		
<b>Travel Details</b>					
Purpose of Trip Attend CXO Roundtable Conference - Innovations in Human Experience					
Destination San Francisco		From 4-Nov-2014		To 5-Nov-2014	
<b>Finance Coding / Accounting Distribution</b>					
Corp/BU/Org 101		Location / Site 0006		Functional Centre / Primary 71110100014	
<b>Project Coding</b>					
Project		Task		Expense Org	
<b>Estimate of Expenses</b>					
Category		Description			Amount
Accommodation Charge		Hotel Accomodation (Conference Rate - \$299/night+tax) - 700 USD\$			\$820.54
Meals					
Registration		Complimentary Registration			\$0.00
Airfare		Airfare to San Francisco - CAD\$			\$406.31
Taxi/Rental Car/Fuel/Parking/Bus/LRT					
Other Expenses (please specify)					
		Currency <input checked="" type="checkbox"/> Cdn <input type="checkbox"/> USD <input type="checkbox"/> OTHER			\$1,226.85
<b>Total Estimated Travel Costs</b>		*Bank of Canada Currency Converter		Exchange Rate	\$0.00 Cdn\$ \$1,226.85
*Select foreign country in "From cell", and Canadian Dollar in "To cell" Enter date of expense in both date cells then select convert which will give the exchange rate					
<b>Approvals (Pre-approvals for all Out-of-Province Travel must be per DOFA table)</b>				<b>authorization table</b>	
Employee Signature 		Date (dd-Mon-yyyy)		Phone Number [REDACTED]	
Approved by (Print Name) Vickie Kaminski *		Signature 		Date (dd-Mon-yyyy) [REDACTED]	
Title President & CEO		Position Number		DOFA Level [REDACTED]	
Approved by (Print Name)		Signature		Date (dd-Mon-yyyy)	
Title		Position Number		DOFA Level	

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*\* had approval @ the time; form completed in January 2015 MJK.*