

Official Administrator and Executive Expense Report

 Name:
 Deb Gordon

 Title
 VP & Chief Health Operations Officer Note

 Title
 VP & Chief Health Operations Officer Northern Alberta

Location Edmonton

Expenses submitted during the month of August 2015

						Travel	(1)				<u> </u>		
Month-Year	Source Document	Purpose	Air	fare	Meals	Accommod	lation	Other Travel		otal 'avel	Professional Development (2)	-	Other (4)
Aug-15 Jul-15	Direct Billing Direct Billing	Meeting Meeting		475 (11)						475 (11)			
Total			\$	464	\$	- \$	-	\$	- \$	464	\$	- \$ -	\$

Total for

the Month \$ 464

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



Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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:

	Name:	Deb Gordon	Reporting Period for the Month of :	Aug-15
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YES

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
17-Aug-15	Direct Billing	Airline Ticket	Travel to Grande Prairie for meetings with staff and Site Tours with CEO	Marlin Travel	474.96
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in th	ne Month			5 · · · · · · · · · · · · · · · · · · ·	\$ 474.96

MARLIN TRAVEL O-O PERCY HUNT TRAVELGROUP INC MAIN FLOOR, 9929 108TH ST. EDMONTON, AB T5K 1G8 GST Reg#: 885101915

Branch: Agent:

To: ALBERTA HEALTH SERVICES 10030 107 ST NW EDMONTON AB CA T5J 3E4

Invoice Number:
Date:
Page:
Our Reference:

August 17, 2015 1/2

INVOICE



Thursday, August 20, 2015

AIR CANADA From: EDMONTON INTL AB To: GRANDE PRAIRIE Stops: 0 Arrival: 20Aug15 Seat(s): 02D AIR CANADA E
 Flight:
 8363
 V CLASS

 08:40 AM
 Equipment:
 D8 (300 SERIES)

 09:51 AM

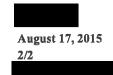
Mile(s) Flown: 247

Friday, August 21, 2015

Travel to Grande Prairie for meeting 2 staff + Site Tors 2 (EO

To: ALBERTA HEALTH SERVICES 10030 107 ST NW EDMONTON AB CA T5J 3E4

Invoice Number:
Date:
Page:
Our Reference:



0.00

0.00

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Friday, August 21, 2015

AIR CANADA From: GRANDE PRAIRIE To: EDMONTON INTL AB Stops: 0 Arrival: 21Aug15 Seat(s): 02D AIR CANADA E	Flight: 8366 V CLASS 03:20 PM Equipment: D8 (300 SERIES) 04:29 PM	Mile(s) Flown: 247
Cost: TKT- E-TKT		410.00
en e	Tax:	64.96
	Ticket Total:	474.96
Total:		
	Grand Total:	474.96
	Less Credit Card Payments:	474.96

Credit / Balance Due To This Invoice:

Total Balance Due:

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:......DECLINED:......DECLINED:.....DECLINED:.....DECLINED:....DECLINED:....DECLINED:....DECLINED:....DECLINED:....DECLINED:....DECLINED:...DECL





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- Indicate whether you have expenses to report in this section for this reporting period:

Name : Deb Gordon

Reporting Period for the Month of : Jul-15

YES

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
21-Jul-2015	Direct Billing	Airline Ticket	Seat Selection Refund(Airline Ticket previously disclosed refunded and credit applied to the file-trip to Calgary cancelled will use airline credit for furute travel)	Marlin Travel	(10.50)
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in the Month					\$ (10.50)

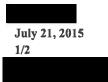
MARLIN TRAVEL O-O PERCY HUNT TRAVELGROUP INC MAIN FLOOR, 9929 108TH ST. EDMONTON, AB T5K 1G8 GST Reg#: 885101915 Branch:

Agent:

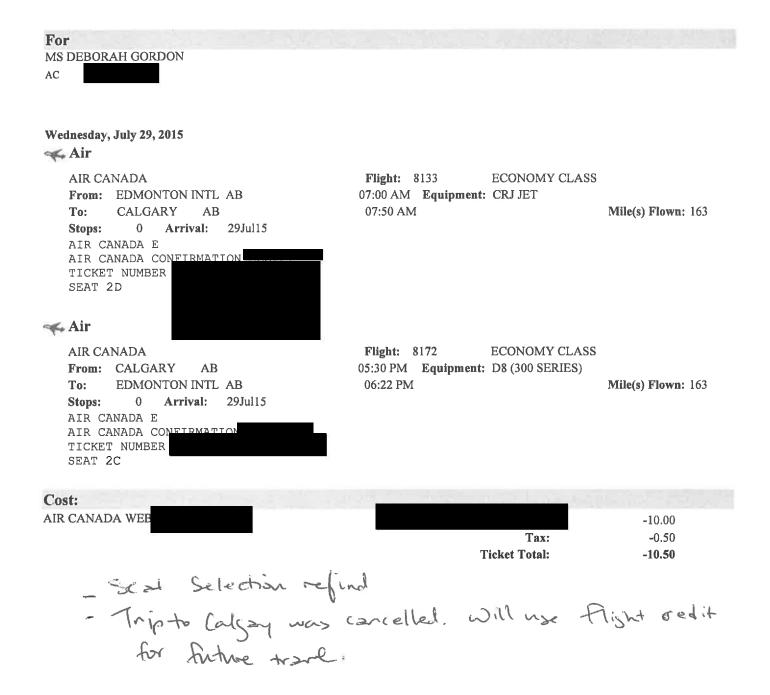
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To: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON AB CA T5J 3E4

Invoice Number:
Date:
Page:
Our Reference:



INVOICE



To: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON AB CA T5J 3E4

Invoice Number: Date: Page: Our Reference:

July 21, 2015

INVOICE

Total:

1.4

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Grand Total:	-10.50
Less Credit Card Payments:	-10.50
Credit / Balance Due To This Invoice:	0.00
Total Previous Payments:	257.96
Total Charges Previous Invoices:	257.96
Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:......DECLINED:.....DECLINED:.....DECLINED:....DECLINED:....DECLINED:....DECLINED:....DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED:...DECLINED: AND PHOTO ID... OTHER.....PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER....PROOF OF THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDER WRITTEN BY MANULIFE FINANCIAL 24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT 1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0 OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.