

## AHS Board and Executive Expense Report

**Name** Deb Gordon  
**Title** VP & Chief Health Operations Officer Northern Alberta  
**Location** Edmonton  
 Expenses submitted during the month of November 2018

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-18	P-Card	Meetings			505	130	635			
Nov-18	Expense Claim	Meetings		23		49	72			
Nov-18	Direct Billing	Meetings	518				518			
<b>Total</b>			\$ 518	\$ 23	\$ 505	\$ 179	\$ 1,225	\$ -	\$ -	\$ -

**Total for the Month** \$ 1,225

Maximum daily single meal expense claimed in the month \$ 13  
 Maximum daily base hotel rate claimed in the month \$ 154  
 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 P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
GORDON, DEBORAH A	VP & Chief Health Operations Officer Northern Alberta	Edmonton	\$ 634.74									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/28/2018	PHSSC Meeting - taxi from Calgary Airport to Delta Calgary South		AB - Other Zones	Taxi	\$ 54.86	Calgary Airport	Delta South - 135 Southland Drive SE	PHSSC Meeting - taxi from Calgary Airport to Delta Calgary South	1			
10/28/2018	PHSSC Meeting in Calgary		AB - Other Zones	Accommodations	\$ 342.88			PHSSC Meeting in Calgary	2			
11/12/2018	EMS Leadership Day - taxi from Calgary Airport to Residence Inn Marriott		AB - Other Zones	Taxi	\$ 75.33	Calgary Airport	Residence Inn Marriott - 3710 Market St SE	EMS Leadership Day - taxi from Calgary Airport to Residence Inn Marriott	1			
11/13/2018	EMS Leadership Day		AB - Other Zones	Accommodations	\$ 161.67			EMS Leadership Day	1			
Approver(s) for the claim		Approval Status		Approval Date								
YIU, VERNA		Approve		30-Nov-18								

ASSOCIATED CAB  
ALLIED LIMOUSIN  
307-41 AVENUE NE  
CALGARY AB T2E 2N4  
(403) 299-1111  
CAR#168

### SALE

MID: [REDACTED]  
TID: [REDACTED] REF#: [REDACTED]  
Batch #: [REDACTED] SEQ: [REDACTED]  
11/12/18 22:01:46  
APPR CODE: [REDACTED]  
MASTERCARD  
[REDACTED]

AMOUNT	\$65.50
TIP	\$9.83
TOTAL	\$75.33

00 - APPROVED - 001

MasterCard  
[REDACTED]

ASSOCIATED CAB  
ALLIED LIMOUSIN  
307-41 AVENUE NE  
CALGARY AB T2E 2N4  
(403) 299-1111  
CAR#1004

### SALE

MID: [REDACTED]  
TID: [REDACTED] REF#: [REDACTED]  
Batch #: [REDACTED] SEQ: [REDACTED]  
10/28/18 21:52:39  
APPR CODE: [REDACTED]  
MASTERCARD  
[REDACTED]

AMOUNT	\$47.70
TIP	\$7.16
TOTAL	\$54.86

00 - APPROVED - 001


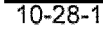
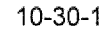
MasterCard  
[REDACTED]


THANK YOU



135 Southland Drive S.E Calgary, Alberta, T2J 5X5  
Telephone: 403-278-5050 Fax: 403-225-5834

Ab Health Services  
Ms Deborah Gordon

Room:   
Folio:   
Cashier:   
Arrival: 10-28-18  
Departure: 10-30-18

Date	Description	Additional Information	Charges	Credits
10-28-18	Room Charge		154.00	
10-28-18	DMF		4.02	
10-28-18	Tourism Levy		5.52	
10-28-18	Rooms - GST		7.90	
10-29-18	Room Charge		154.00	
10-29-18	DMF		4.02	
10-29-18	Tourism Levy		5.52	
10-29-18	Rooms - GST		7.90	
10-30-18	Master Card			342.88

GST Summary

Registration No: **895126332**

Room 15.80

F&B 0.00

Other 19.08

**Total 34.88**

Total	342.88	342.88
Balance Due	0.00	CDN

Guest Signature: \_\_\_\_\_

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.

**Residence**  
Inn<sup>®</sup>  
**Marriott.**

Residence Inn by Marriott  
Calgary South

3710 Market Street SE  
Calgary AB T3M 2P2  
T 587.349.8633

Deborah/Ms Gordon

Room [REDACTED]

Room Type: STKT

Number of Guests: 1

Rate: \$144.00

Clerk: RAA

Arrive: 12Nov18

Time: 10:06PM

Depart: 13Nov18

Time: 06:09AM

Folio Number: [REDACTED]

Date	Description	Charges	Credits
12Nov18	Room Charge	144.00	
12Nov18	Gst	7.42	
12Nov18	Hotel Levy	5.93	
12Nov18	Destination Marketing Fee	4.32	
13Nov18	Master Card		161.67
	Card #: [REDACTED]		
	Amount: 161.67 Auth: [REDACTED] Signature on File		
	This card was electronically swiped on 12Nov18		
	Balance:	0.00	

As a Rewards Member, you could have earned points toward your free dream vacation today. Start earning points and elite status, plus enjoy exclusive member offers. Enroll today at the front desk.

See our "Privacy & Cookie Statement" on Marriott.com.

Operated under license from Marriott International, Inc. or one of its affiliates.

To plan your next stay, visit [residenceinn.com](http://residenceinn.com)

## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
GORDON, DEBORAH A	VP & Chief Health Operations Officer Northern Alberta	Edmonton	\$ 71.98

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/12/2018	EMS Leadership Day		Mileage-Local-Home Zone	\$ 24.24	Residence	Edmonton International Airport	EMS Leadership Day - from Sherwood Park to Edmonton International Airport	1			48
11/13/2018	EMS Leadership Day		Mileage-Local-Home Zone	\$ 24.24	Edmonton International Airport	Residence	EMS Leadership Day - Edmonton International Airport to Sherwood Park	1			48
11/13/2018	EMS Leadership Day	AB - Other Zones	Meals Per Diem	\$ 23.50			EMS Leadership Day Bfast \$10.50 Lunch \$13.00	1			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		30-Nov-18							

## 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**

<b>Name :</b>	Deb Gordon	<b>Reporting Period for the Month of :</b>	October
---------------	------------	--	---------

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
26-09-2018	Direct Billing	Airline Ticket	Trip to Calgary - Oct 16, 17 & 18, 2018 Quality & Safety Summit	Marlin Travel	352.69
27-09-2018	Direct Billing	Airline Ticket	Trip to Calgary - Oct 29, 2018 - Psychological Health and Safety Summit	Marlin Travel	166.03
<b>Total Paid in the Month</b>					<b>\$ 518.72</b>



Invoice

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

Trip #: [REDACTED]  
Booking Date: 27 Sep 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

PASSENGERS: MS DEBORAH GORDON

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER		TOTAL
				TAXES	PENALTY	
AIR CANADA Ticket # [REDACTED]	266.18	0.00	\$0.00	74.96	0.00	341.14 CAD
AIR CANADA Ticket # [REDACTED]	11.55	0.00	\$0.00	0.00	0.00	11.55 CAD
Total:		277.73	0.00	0.00	74.96	0.00 352.69 CAD

PAYMENTS					
Invoice #	Payment Date	Card Holder	Form of Payment		Amount
	09/26/2018				0.00 CAD
	09/26/2018				341.14 CAD
	09/27/2018				11.55 CAD
Total Payment:					352.69 CAD
Balance Due CAD Currency					0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL QUALITY SUMMIT

\*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\*  
\*\*\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----  
----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.



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

Trip #: [REDACTED]  
Booking Date: 27 Sep 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
DEBORAH GORDON	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers:		DEBORAH GORDON		Booking Date:		26 Sep 18	
				File Locator/Ticket #:		[REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat	Stops	
AIR CANADA	08155	EDMONTON INTL 16 Oct 18 8:00PM		CALGARY INTL 16 Oct 18 8:53PM	S/		

Passengers:		DEBORAH GORDON		Booking Date:		27 Sep 18	
				File Locator/Ticket #:		[REDACTED]	



AIR

Passengers:		DEBORAH GORDON		Booking Date:		26 Sep 18	
				File Locator/Ticket #:		[REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat	Stops	
AIR CANADA	08140	CALGARY INTL 18 Oct 18 1:10PM		EDMONTON INTL 18 Oct 18 2:04PM	T/		



Invoice

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

Trip #: [REDACTED]  
Booking Date: 27 Sep 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

PASSENGERS: MS DEBORAH GORDON

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER		TOTAL
				TAXES	PENALTY	
AIR CANADA Ticket # [REDACTED]	117.00	0.00	\$0.00	37.48	0.00	154.48 CAD
AIR CANADA Ticket # [REDACTED]	11.55	0.00	\$0.00	0.00	0.00	11.55 CAD
Total:		128.55	0.00	0.00	37.48	0.00 166.03 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	09/26/2018	[REDACTED]	[REDACTED]	154.48 CAD
	[REDACTED]	09/26/2018	[REDACTED]	[REDACTED]	11.55 CAD
Total Payment:					166.03 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL SENIORS LEADERS TEAM MEETING

\*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\* PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----  
----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

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

Trip #: [REDACTED]  
Booking Date: 27 Sep 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
DEBORAH GORDON	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers:		DEBORAH GORDON		Booking Date:		26 Sep 18	
				File Locator/Ticket #:		[REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat	Stops	
AIR CANADA	08161	EDMONTON INTL 28 Oct 18 8:25PM		CALGARY INTL 28 Oct 18 9:26PM	L/		

Passengers:		DEBORAH GORDON		Booking Date:		26 Sep 18	
				File Locator/Ticket #:		[REDACTED]	

