

Official Administrator and Executive Expense Report

Name Dr. Evan Lundall
Title ZMD, Central Zone
Location Red Deer

Expenses submitted during the month of October 2015

Travel (1)										
Month-Year	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Oct-15	P-Card	Meetings		19	1,028	78	1,125			
Oct-15	Expense Claim	Meetings		21		146	167	577		
Total			\$ -	\$ 40	\$ 1,028	\$ 224	\$ 1,292	\$ 577	\$ -	\$ -

Total for the Month \$ 1,869

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 184
 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

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
LUNDALL, EVAN L	ZMD, Central Zone	Red Deer	744.40

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/28/2015	Quality Summit Workshop	AB - Local	Conference Fees	577.20			Registration Fee	2			
9/17/2015	Attending PMI Course -		Meals Per Diem	20.75				1			
10/7/2015	Attended PPEC Mtg		Mileage	146.45	Red Deer	Calgary		1			290

Approver(s) for the claim	Approval Status	Approval Date
YIU, VERNA	Approve	30-Oct-15

Questions about this event?

Contact the organizer at [REDACTED]

Order Summary

6 July 2015

Order # [REDACTED]

Name	Type	Quantity	Price
Evan Lundall Full Conference-SuperEarlyBird(Exp.July 8)		1	\$577.20
TOTAL			\$577.20

Charged to: MasterCard [REDACTED]

This charge will appear on your card statement as EB *7th Canadian Quali

This order is subject to Eventbrite Terms of Service, Privacy Policy, and Cookie Policy

About this event

Monday, 28 September
2015 at 8:00 AM -
Tuesday, 29 September
2015 at 4:30 PM (MDT)
Lister Center, University
of Alberta, Edmonton
11613 – 87 Ave; NW,
Edmonton, Alberta T6G
2H6 – CANADA
Edmonton, AB T6G 2H6
Canada



Add to my calendar:
Google · Outlook · iCal ·
Yahoo

7th Canadian Quality Congress, September 28-29, 2015; Edmonton, AB



437460717552977070001



Monday, 28 September 2015 at
8:00 AM - Tuesday, 29
September 2015 at 4:30 PM
(MDT)

Lister Center, University of Alberta, Edmonton
11613 - 87 Ave; NW, Edmonton, Alberta T6G
2H6 - CANADA
Edmonton, AB T6G 2H6
Canada

Evan Lundall

Payment by

Eventbrite
Completed

Order [REDACTED] d by Evan Lundall on 6 July 2015 3:23 PM



Full Conference-SuperEarlyBird(Exp.July 8) \$577.20



437460717552977070001



Do you organize events?

Start selling in minutes with Eventbrite!
www.eventbrite.ca

Instruction:			
<ul style="list-style-type: none"> • Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement • Cardholder AND Approver's signatures required where indicated below 			
LUNDALL, EVAN	CENTRAL ZONE MEDICAL	Billing Reporting Period:	20/10/2015
Cardholder's Name	Cardholder's Position/Title		
MEDICAL AFFAIRS	AHS MICHENER BEND	Total Statement Amount:	\$1,148.89 \$1124.66
Cardholder's Dept	Cardholder's Site/Location		
EVAN.LUNDALL@ALBERTAHEALTHSERVICES.CA		Last 6 digits of the P-Card #	XXXXXXXXXX
Cardholder's e-mail address			

Statement of Transactions								
Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
18/09/2015	403442750	RADISSON HOTEL EDMONTO, RADISSON	332.88	CAD	332.88 \$308.65	.00	.00	hotel accomodtion; breakfast; lunch
26/09/2015	404192333	THE WESTIN EDMONTON, WESTIN HOTELS	185.25	CAD	185.25	27.79	.00	Hotel accomodtion - Quality Summit Conference
28/09/2015	404331002	UNIVERSITY OF ALBERTA, AUTOMOBILE PARKING LOTS AND GARAGES	14.00	CAD	14.00	.67		Parking at U of A
29/09/2015	404454187	UNIVERSITY OF ALBERTA, AUTOMOBILE PARKING LOTS AND GARAGES	14.00	CAD	14.00	.67		Parking at U of A
29/09/2015	404808871	DELTA EDMONTON CENTRE, DELTA HOTELS	396.18	CAD	396.18	.00		Hotel - Attended 2 day conference - 7th Cdn Quality Congress
07/10/2015	405642829	DELTA CALGARY AIRPORT, DELTA HOTELS	206.58	CAD	206.58	.00	.00	Hotel accomodtion- attended PPEC mtg - Calgary

Signatures		
<p>Cardholder Designate (If Applicable) By signing this statement</p> <ul style="list-style-type: none"> • I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre. 		
<p><u>Sheryl Hergott</u> Name of Cardholder Designate</p> <p><u>Sheryl Hergott</u> Signature of Cardholder Designate</p>	<p><u>GA</u> Cardholder Designate Position/Title</p> <p><u>Oct 29, 2015</u> Date of Signature</p>	
<p>Cardholder By signing this statement</p> <ul style="list-style-type: none"> • I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such 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 by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached. • I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided. 		
<p><u>LUNDALL, EVAN</u> Name of Cardholder</p> <p><u>Evan Lundall</u> Signature of Cardholder</p>	<p><u>CENTRAL ZONE MEDICAL</u> Cardholder Position/Title</p> <p><u>20 Oct 2015</u> Date of Signature</p>	
<p>Approver Designate (If Applicable) By signing this statement</p> <ul style="list-style-type: none"> • I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such 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 by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained. • I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided. 		
<p><u>Audrey MacIn</u> Name of Approver Designate</p> <p><u>Audrey MacIn</u> Signature of Approver Designate</p>	<p><u>Exec. Asst</u> Approver Designate Position/Title</p> <p><u>Oct 26/15</u> Date of Signature</p>	
<p>Approver By signing this statement</p> <ul style="list-style-type: none"> • I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such 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 by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained. • I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided. 		
<p><u>Dr. Verna Yu</u> Name of Approver</p> <p><u>Dr. Verna Yu</u> Signature of Approver</p>	<p><u>VP Quality + CMO</u> Approver Position/Title</p> <p><u>Oct 27/15</u> Date of Signature</p>	
<p>Submit approved statement with attachments to Accounts Payable:</p>		
<p>Attach:</p> <ul style="list-style-type: none"> • Original (or scanned) itemized receipts with documented business reasons including names of participants where required • Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable: • Copies of pre-approvals for travel • Personal cheque payable to "Alberta Health Services" • Return, refund and/or credit receipts • Disputes letter • Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason 	<p>Address:</p> <p>Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4</p>	
<p>Accounts Payable only:</p>		
Reference # _____	Reviewed by: _____	Date: _____



Evan Lundall



Room No : [REDACTED]
 Arrival : 09-16-15
 Departure : 09-18-15
 Page No. : 1 of 1
 Folio No. : [REDACTED]
 Conf. No. : [REDACTED]
 Cashier No. : [REDACTED]

INFORMATION INVOICE

Membership No. [REDACTED]
 AVR Number [REDACTED]
 Group Code : [REDACTED]
 Company Name : [REDACTED]

09-18-15 08:13:18 AM MST

Date	Text	Charges	Credits
09-16-15	Room Charge	129.00	
09-16-15	Rooms GST	6.64	
09-16-15	Alberta Tourism Levy	5.31	
09-16-15	Destination Marketing Fee	3.87	
09-17-15	Room Service - Breakfast	19.01	
09-17-15	Room Service - Lunch/Brunch	24.23	
09-17-15	Room Charge	129.00	
09-17-15	Rooms GST	6.64	
09-17-15	Alberta Tourism Levy	5.31	
09-17-15	Destination Marketing Fee	3.87	
09-18-15	Mastercard		332.88
Room GST	13.28	F&B GST 1.65	AB Levy 10.62
		Other Tax 7.74	
Net Amount	299.59	CAD	

Total 332.88 ~~332.88~~

Balance 0.00
 \$308.65

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 Enroll and learn more at the front desk or at clubcarlson.com

Thank You For Staying With Us

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

Guest Signature _____

Radisson Hotel Edmonton South
 4440 Gateway Boulevard
 Edmonton, Alberta T6H 5C2
 Telephone: (780) 437-6010 Fax: (780) 431-5804
 Email: RHL_FSAL@radisson.com
 GST # 84420 3075 RT0001



Check Detail

In Room Dining

[REDACTED]

Chk 9095 Gcd 1
09/17/15 06:17:45

1 DEL CHARGE 03.00 3.00
1 COWBOY BREAKFAST 13.00
Auto SVC: 0.21
Tax: 0.80
[REDACTED] 19.01

CASH PAID closed-----
-----09/17/15 06:40:52-----

Sheryl Hergott

From: Mea Moore [REDACTED]
Sent: July 17, 2015 11:24 AM
To: Sheryl Hergott
Subject: FW: Rest easy. Your reservation has been confirmed ([REDACTED])

Note rate details and cancellation policy.

Mea Moore

Travel Consultant
Marlin Travel Government Centre
[REDACTED]

From: The Westin Edmonton [mailto:GCCUSTSERVICE@CONFIRM.STARWOODHOTELS.COM]
Sent: Friday, July 17, 2015 11:14 AM
To: Mea Moore
Subject: Rest easy. Your reservation has been confirmed ([REDACTED])

View in a browser for up to date reservation information, or change language
English, Français, Español, Deutsch, 中文, 日本語, Italiano, Português, Русский
සිංහල, العربية, हिन्दी, Polski, Türkçe, Nederlands, বাংলা, ភាសាខ្មែរ



The Westin Edmonton
10135 100th Street
Edmonton, Alberta T5J 0N7 Canada
Phone: (1)(780) 426-3636 Fax: (1)(780) 428-1454



- CONTACT US >
- GUEST ROOMS >
- FEATURES AND ACTIVITIES >
- DINING OPTIONS >
- LOCAL AREA >
- DRIVING DIRECTIONS >
- AREA MAP >
- MEETING SPACE >

Greetings Evan

Your reservation is all set—we're excited to welcome you to The Westin Edmonton

At Westin, we're committed to your well-being. If there is anything you need as we prepare for your arrival, don't hesitate to ask.

Stay Well.

Joumana Ghandour
GENERAL MANAGER

Confirmation: [REDACTED]

While there is no complimentary parking in downtown Edmonton, we do provide paid parking service at The Westin Edmonton to accommodate your needs. Self-service parking is available for \$29.00 + tax per night and valet service is available for \$39.00 per night + tax.

STAY CONNECTED



**As per hotel policy - 1 night accommodation rate charged 30 days prior to arrival.
- Oct 26/27 attending Arts & Quality Summit.*

YOUR RESERVATION

Check In 25-OCT-2015 - 3:00 PM *
Check Out 27-OCT-2015 - 12:00 PM *
Number of Rooms 1
Number of Guests 1

* Indicates standard hotel check-in and check-out times and does not reflect special arrangements made with the hotel.

YOUR RATE: ROOM 1 OF 1

Rates for the night of:
25 Oct 15 - 26 Oct 15

Rate Details



A deposit equal to 1 (one) night is required and shall be taken 30 (thirty) days prior to arrival. These deposits paid by individuals are refundable if notice is received by

YOUR ACCOMMODATIONS: ROOM 1 OF 1

Guest Name EVAN LUNDALL
Number of Adults *
Number of Children 0

Room Description

- Traditional Non-smoking, Smoke-free
- 25 Sq m (285 Sq ft)
- Modern Design
- Heavenly Bed And Bath
- In-room Safe
- 32 Inch Flat Panel Led Tv

Basic Room Rate	\$165.00
Room GST 5%	\$ 8.25
Room Tax 4%	\$ 6.60
Total	\$ 179.85
Destination Market Fee (3% on \$179.85)	\$ 5.40
	\$ 185.25

hotel at least 10, three days prior to arrival and a cancellation number is obtain

Room Rate **165/00 CANADA DOLLAR Per**

Taxes

Room rate excludes the following:

Goods & Svc Tax

5.0% Per Room / Per Night

Room Tax

4.0% Per Room / Per Night

Hotel Charges

Room rate excludes the following:

Dest Mkt Fee

3.0% Per Room / Per Night

Guarantee and Cancellation Policies

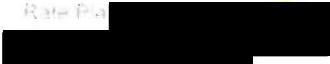
CAD 165/00 deposit is due on Fri, Sep 25, 2015 and will be charged to the credit card provided if you cancel before 04:00 PM on Thursday, 22 October 2015 there will be no forfeit amount. If you cancel after 04:00 PM on Thursday, 22 October 2015 the forfeiture amount will be 165.00. Room taxes are included with deposits and any penalties.



Special Services for All Rooms:

October 20, 2015 - October 27, 2015

Rate Plan



Debit and Credit cards will be authorized at check-in for the amount of your stay, plus an amount to cover incidentals. Please visit "Announcements" on the hotel website for more information.

YOUR PRIVACY

If you believe this reservation was made in error, please contact us as soon as possible.

Please note: For security purposes, you will be asked to provide a valid government or state-issued photo ID at check-in.

This email may contain links to websites that collect personally identifiable information about you. Starwood Hotels & Resorts Worldwide, Inc. is not responsible or liable for the actions of such independent websites, and encourages you to review the privacy statements and policies of such websites to understand how they collect, use and store such information.

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DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE 29/09/15 EXPIRATION TIME 06:00 AM

AMOUNT PAID \$ 14.00 84880000 08:02 AM



DETACH RECEIPT FROM TICKET
RECEIPT GST # R108102831

DATE ISSUED 28/09/15 TIME ISSUED 08:02 AM AMOUNT PAID \$ 14.00

CREDIT CARD NUMBER LOT M



Sept 28. Attended "Fifty International Speakers"
7th Cdn Quality Congress @ UofA.

DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE 30/09/15 EXPIRATION TIME 06:00 AM

AMOUNT PAID \$ 14.00 84880000 08:16 AM



DETACH RECEIPT FROM TICKET
RECEIPT GST # R108102831

DATE ISSUED 29/09/15 TIME ISSUED 08:16 AM AMOUNT PAID \$ 14.00

CREDIT CARD NUMBER LOT M



Sept 29 - Attended "Fifty International Speakers"
7th Cdn Quality Congress @ UofA
Day 2



10222 - 102 Street, Edmonton, Alberta T5J 4C5
Tel: 780-429-3900 Fax: 780-421-3259

AB HEALTH SERVICES
Evan Lundall
Canada

Room: [REDACTED]
Folio: [REDACTED]
Cashier: [REDACTED]
Arrival: 09-27-15
Departure: 09-29-15

Date	Description	Additional Information	Charges	Credits
09-27-15	Room charge		154.00	
09-27-15	Room - GST		7.93	
09-27-15	Room - Tourism Levy		6.34	
09-27-15	Room - Destination Mkt. Fee		4.62	
09-27-15	Weekend-Parking		19.00	
09-27-15	Parking - GST		0.95	
09-28-15	Room charge		154.00	
09-28-15	Room - GST		7.93	
09-28-15	Room - Tourism Levy		6.34	
09-28-15	Room - Destination Mkt. Fee		4.62	
09-28-15	Weekdays-Parking		29.00	
09-28-15	Parking - GST		1.45	
09-29-15	Mastercard	[REDACTED]		396.18
Total			396.18	396.18
Balance Due			0.00	CDN

GST Summary
Registration No: 899111215

Room	15.86
F&B	0.00
Other	2.40
Total	18.26

*Attended: "Fifty International Speakers - 7th Cdn Quality Congress"
- Edmonton - Sept 28+29, 2015*

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.


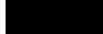



DELTA

CALGARY AIRPORT

2001 Airport Road NE, Calgary, Alberta T2E 6Z8
 Tel: 403-291-2600 Fax: 403-250-8722

Evan Lundall

Room: 
 Folio: 
 Cashier: 
 Arrival: 10-06-15
 Departure: 10-07-15

Date	Description	Additional Information	Charges	Credits
10-06-15	Room Charge		184.00	
10-06-15	Rooms Destination Marketing Fee		5.52	
10-06-15	Rooms Tourism Levy		7.58	
10-06-15	Rooms GST		9.48	
10-07-15	Master Card			206.58

GST Summary

Registration No: 826085417
 Room 9.48
 F&B 0.00
 Other 5.52
Total 15.00

Total	206.58	206.58
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.