

AHS Board and Executive Expense Report

Name Dr. Evan Lundall
Title Zone Medical Director Central Zone
Location Red Deer

Expenses submitted during the month of December 2017

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)
Dec-17	Expense Claim	Meetings		24	156		180			
Total			\$ -	\$ 24	\$ 156	\$ -	\$ 180	\$ -	\$ -	\$ -

Total for the Month \$ 180

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								
LUNDALL, EVAN L	ZMD, Central Zone	Red Deer	\$ 180.06								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
12/5/2017	Attended Prov Practitioner Exec Meeting	AB - Other Zones	Meals Per Diem	\$ 24.00			Attended Prov Practitioner Exec Meeting Dinner: \$24	1			
12/6/2017	Attended Prov Practitioner Exec Meeting	AB - Other Zones	Accommodations	\$ 156.06			Attended Prov Practitioner Exec Meeting	1			
Approver(s) for the claim		Approval Status	Approval Date								
BELANGER, FRANCOIS		Approve	20-Dec-17								

[REDACTED]	LUNDALL/EVAN/L NAME	139.00 RATE	12/06/17 DEPART 12/05/17 ARRIVE	TIME TIME	DUPLICATE 9:32	[REDACTED] ACCT#
ROOM CLERK	ADDRESS	[REDACTED] PAYMENT			MR#:	[REDACTED]
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE		
12/05	TELECOMM	BASEHSIA	.00			
12/05	TELECOMM	FREEHSIA	.00			
12/05	TR ROOM	[REDACTED]	139.00			
12/05	DMF	[REDACTED]	4.17			
12/05	GST	[REDACTED]	7.16			
12/05	TRSM LEV	[REDACTED]	5.73			
12/06	CCARD-MC	[REDACTED]		208.06		
						.00

Claiming only \$156.06

Hotel cost: 139.00
 4.17
 7.16
 5.73

 156.06

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amounts shown in the credit column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after check-out, you will owe us interest from the check-out date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X