

Official Administrator and Executive Expense Report

Name Dr. Francois Belanger
Title VP & Medical Director, Central & Southern Alberta
Location Calgary
 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			581	201	782			
Oct-15	Expense Claim	Meetings		111		1,143	1,254			
Oct-15	Direct Billing	Meetings	702				702			
Total			\$ 702	\$ 111	\$ 581	\$ 1,344	\$ 2,738	\$ -	\$ -	\$ -

Total for the Month \$ 2,738

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 159
 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

Instruction:

- 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

BELANGER, FRANCOIS
VICE PRESIDENT & MEDICAL

Cardholder's Name

Cardholder's Position/Title

 Billing Reporting Period: 20/10/2015
HEALTH OPERATIONS CENTRAL &
SOUTHPORT

Cardholder's Dept

Cardholder's Site/Location

 Total Statement Amount: \$782.06
FRANCOIS.BELANGER@ALBERTAHEALTHSERVICES.CA

Cardholder's e-mail address

 Last 6 digits of the P-Card #: XXXXXXXXXX
Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
1 22/09/2015	403687871	MPARK00020256U, AUTOMOBILE PARKING LOTS AND GARAGES	✓ 25.00	CAD	25.00	1.19	.00	MPARK-parking for executive mtgs at 10030-107 St, Edm on Sep 22, 2015
2 23/09/2015	403822100	THE WESTIN EDMONTON, WESTIN HOTELS	✓ 178.51	CAD	178.51	33.39	.00	Westin EDM-Sep 21, Tertiary & Regional Cancer Ctrs. & Medical Leaders mtg, Red Deer & travel on to edm for Sep 22 ELT mtgs.
3 01/10/2015	404809024	THE WESTIN EDMONTON, WESTIN HOTELS	✓ 208.98	CAD	208.98	33.39	.00	Westin EDM-Oct 29 Executive Leadership mtg at 10030-107 St, and Oct 30 AARP mtg at ATB Place, EDM
4 07/10/2015	405842959	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	✓ 29.35	CAD	29.35	1.40	.00	Parking at Calgary airport for flight to edm on Oct 7 -OA mtg at 10030-107 St, EDM.
5 09/10/2015	405842958	MPARK00020256U, AUTOMOBILE PARKING LOTS AND GARAGES	✓ 25.00	CAD	25.00	1.19	.00	MPARK-parking Oct 9 at 10030-107 St, Edm for CNSC mtg.
6 10/10/2015	405867848	THE WESTIN EDMONTON, WESTIN HOTELS	✓ 183.24	CAD	183.24	30.45	.00	Westin EDM-Oct 8 CMPA mtg & Oct 9 CNSC mtg in EDM.
7 19/10/2015	408625894	INFINITY TRANSPORTATIO, LIMOUSINES AND TAXICABS	✓ 72.00	CAD	72.00	3.43	.00	Infinity Transport-pick up from OA mtg at 10030-107 St to EDM airport on Oct 7

Transactions without Receipts or supporting documentation

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
8 29/09/2015	404454274	MPARK00020256U, AUTOMOBILE PARKING LOTS AND GARAGES	✓ 25.00	CAD	25.00	1.19	.00	mpark- Sep 29 Parking @ 10030-107 St, EDM for Executive Leadership mtg.
9 30/09/2015	404581494	MPARK00020256U, AUTOMOBILE PARKING LOTS AND GARAGES	✓ 25.00	CAD	25.00	1.19	.00	MPARK-Parking at ATB place EDM for AARP mtg on Sep 30.

WORKING COPY

Signature		
<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>Margaret Hampson</u> Name of Cardholder Designate</p>	<p><u>Exec. Adm. Assist.</u> Cardholder Designate Position/Title</p>	
<p><u>[Signature]</u> Signature of Cardholder Designate</p>	<p><u>Oct 23, 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>BELANGER, FRANCOIS</u> Name of Cardholder</p>	<p><u>VICE PRESIDENT & MEDICAL</u> Cardholder Position/Title</p>	
<p><u>[Signature]</u> Signature of Cardholder</p>	<p><u>Oct 22 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>_____ Name of Approver Designate</p>	<p>_____ Approver Designate Position/Title</p>	
<p>_____ Signature of Approver Designate</p>	<p>_____ 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>Vickie Kaminski</u> Name of Approver</p>	<p><u>President + CEO</u> Approver Position/Title</p>	
<p><u>[Signature]</u> Signature of Approver</p>	<p><u>Nov 4/15</u> Date of Signature</p>	
Details to provide with statement		
<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: <ul style="list-style-type: none"> • 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>	
Accounts Payable only:		
Reference #: _____	Reviewed by: _____	Date: _____

1

4

5

RECEIPT
GST NO. R122556194

RECEIPT
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

License Plate Number



Expiration Date/Time

06:00 PM
SEP 22, 2015

Purchase Date/Time: 06:59am Sep 22, 2015 ✓
Total Parking: \$23.81
Total gst: \$1.19
Total Due: \$25.00
Total Paid: \$25.00
Ticket # [REDACTED]
S/N #: 500012451104
Setting: Lot 256
Mach Name: Meter 1

Rate: \$25 - Early Bird ✓
Payment Type: Card

MasterCard

Auth

GST #887315638RT0001

EXIT No. A4
IN: 10/07/15 05:51 ✓
OUT: 10/07/15 13:05
DURATION: 0 07: 14
PAID: \$ 29.35 ✓
(GST INCLUDED)
MASTERCARD

REF. 14
THANK YOU FOR
YOUR VISIT

Calgary International Airport Parkade

RECEIPT
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

License Plate Number



Expiration Date/Time

06:00 PM
OCT 09, 2015

Purchase Date/Time: 07:06am Oct 09, 2015 ✓
Total Parking: \$23.81
Total gst: \$1.19
Total Due: \$25.00
Total Paid: \$25.00
Ticket # [REDACTED]
S/N #: 500012451104
Setting: Lot 256
Mach Name: Meter 1

Rate: \$25 - Early Bird ✓
Payment Type: Card

MasterCard

Auth #:

GST #887315638RT0001

F. Beinaer

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Francois Belanger

Page Number : [REDACTED] Invoice Nbr [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 21-SEP-15 21:25 ✓
 Depart Date : 22-SEP-15 06:48
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Copy Tax Invoice

Tax ID : 815461330RT0001
 The Westin Edmonton 22-SEP-15 06:50 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
21-SEP-15	[REDACTED]	Room Charge	159.00	
21-SEP-15	[REDACTED]	GST	8.19	
21-SEP-15	[REDACTED]	Destination Marketing Fee	4.77	
21-SEP-15	[REDACTED]	Tourism Levy	6.55	
22-SEP-15	[REDACTED]	Mastercard		-178.51
		** Total	✓ 178.51	-178.51
		*** Balance	0.00	

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Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Francois Belanger



Page Number : [Redacted] Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 29-SEP-15 ✓ 17:58
 Depart Date : 30-SEP-15 12:23
 No. Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

Tax Invoice

Tax ID : 815461330RT0001
 The Westin Edmonton 30-SEP-15 12:30 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
29-SEP-15	[Redacted]	Room Charge	159.00	
29-SEP-15	[Redacted]	GST	8.19	
29-SEP-15	[Redacted]	Destination Marketing Fee	4.77	
29-SEP-15	[Redacted]	Tourism Levy	6.55	
29-SEP-15	[Redacted]	Parking Self	29.00	
29-SEP-15	[Redacted]	GST	1.45	
30-SEP-15	[Redacted]	Mastercard		-208.96
		** Total	✓ 208.96	-208.96
		*** Balance	0.00	

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Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454

Francois Belanger

Page Number : [REDACTED] Invoice Nbr: [REDACTED]
 ✓ Guest Number: [REDACTED] Arrive Date: 08-OCT-15 16:50 ✓
 Folio ID : [REDACTED] Depart Date: 09-OCT-15 06:57
 No. Of Guest: [REDACTED]
 Room Number : [REDACTED]
 Room Rate : 145.00
 Club Account: [REDACTED]

Tax Invoice

Tax ID: 815461330RT0001
 The Westin Edmonton 09-OCT-15 06:58 [REDACTED]

Date	Reference	Description	Charges	Credits
08-OCT-15	[REDACTED]	Room Charge	145.00	
08-OCT-15	[REDACTED]	GST	7.47	
08-OCT-15	[REDACTED]	Destination Marketing Fee	4.35	
08-OCT-15	[REDACTED]	Tourism Levy	5.97	
08-OCT-15	[REDACTED]	Parking Self	29.00	
08-OCT-15	[REDACTED]	GST	1.45	
09-OCT-15	[REDACTED]	Mastercard		-193.24
		** Total	✓ 193.24	-193.24
		*** Balance	-0.00	

KIDS EAT WELL AT WESTIN - Discover kids' meals that are as delicious as they are nutritious with the Westin Eat Well Menu for Kids, developed with Superchefs(TM) to make kids and parents happy. Learn more at

 Continued on the next page

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7

Margaret Hampong

From: tobias tobias <[REDACTED]>
Sent: Monday, October 19, 2015 9:43 AM
To: Margaret Hampong; Marlene Hamilton K.
Subject: Fwd: Transaction Receipt - Do Not Reply

Dr.Belanger
Oct.07/2015
SSP>Ap

INFINITY TRANSPORTATION I

TYPE PURCHASE

ORDER ID [REDACTED]
CUSTOMER ID Dr Francois Belanger
CARD NUM [REDACTED]
ACCOUNT MASTERCARD

DATE Oct 19 2015 09:41AM
REF NUM [REDACTED]
AUTH CODE [REDACTED]

AMOUNT (CAD) -----
\$72.00 ✓

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement

01 APPROVED - THANK YOU 027

- IMPORTANT -
Retain this copy for your records

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www.moneris.com 1-866-319-7450

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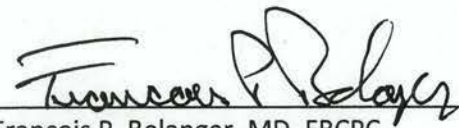
I, Dr. Francois Belanger, attest that the travel expenses listed below was incurred related to AHS business and was not previous claimed. The receipt was lost.

29 September 2015

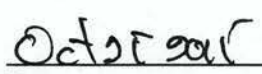
IMPARK \$25.00
Transaction ID: [REDACTED]
Parking at 10030-107 St, Edmonton for Executive Leadership Team meeting

30 September 2015

IMPARK \$25.00
Transaction ID: [REDACTED]
Parking at ATB Place, Edmonton for AARP meeting



Francois P. Belanger, MD, FRCPC
Vice President and Medical Director, Central and Southern Alberta
Zone Medical Director, Calgary Zone



Date

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
BELANGER, FRANCOIS	VP & Medical Director, Central & Southern Alberta	Calgary	1,253.62

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/21/2015	CalZ Sr Leadership Mtg		Mileage	7.58	SPTT	FMC		1			15
9/21/2015	Central Zone Oncologist Mtg		Mileage	71.71	FMC	Red Deer Regional Hospital		1			142
9/21/2015	ELT and other Mtgs (Edmonton)		Mileage	79.29	Red Deer Regional Hospital	SSP		1			157
9/22/2015	ELT and other Mtgs (Edmonton)		Mileage	155.54	SSP	SPTT		1			308
9/28/2015	ZCDH and other Mtgs		Mileage	15.15	SPTT to FMC	SPTT		1			30
9/21/2015	Oncologist Mtg (Red Deer) and ELT (Edmonton)		Meals Per Diem	29.95			Dinner-21-Sep-2015 B/F- 22-Sep-2015	2			
9/29/2015	ELT Mtg and AARP Mtg (Edmonton)		Meals Per Diem	29.95			Dinner-29-Sep-2015 B/F- 30-Sep-2015	2			
10/8/2015	CMPA Conference and CNSC Mtg (Edmonton)		Meals Per Diem	29.95			Dinner-08-Oct-2015 B/F- 09-Oct-2015	2			
10/20/2015	ELT Mtg and CCI Physician Mtg (Edmonton)		Meals Per Diem	20.75			Dinner 20-Oct-2015	1			
9/29/2015	ELT and other Mtgs (Edmonton)		Mileage	155.54	SPTT	SSP		1			308
9/30/2015	AARP and other Mtgs (Edmonton)		Mileage	53.58	SSP	SPTT		1			114
10/1/2015	Interview - ZCDH - Pathology		Mileage	14.10	SPTT to FMC	SPTT		1			30
10/5/2015	TBCC Mtg		Mileage	7.05	FMC	SPTT		1			15
10/6/2015	Physician Engagement Session - traveled with C. Keenan and S. Viner		Mileage	146.64	SPTT to Radisson Hotel, Red Deer	SPTT		1			312
10/7/2015	Mtg with Official Administrator (Edmonton)		Mileage	11.75	SPTT	Calgary International Airport		1			25
10/7/2015	Mtg with Official Administrator (Edmonton)		Mileage	11.75	Calgary International Airport	SPTT		1			25
10/8/2015	CMPA Conference (Edmonton) - Travelled with S. Viner and T. Braun		Mileage	144.76	SPTT	SSP		1			308
10/9/2015	CNSC and other Mtgs		Mileage	144.76	SSP	SPTT		1			308
10/13/2015	Calgary AARP Town Hall Mtg		Mileage	7.05	SPTT	FMC		1			15
10/15/2015	Mtg re Dept of Oncology		Mileage	7.05	SPTT	FMC		1			15
10/20/2015	ELT Mtg and CCI Physician Mtg (Edmonton)		Mileage	11.75	SPTT	Calgary International Airport		1			25
9/30/2015	AARP and other Mtgs (Edmonton)		Mileage	97.97	SSP	SPTT		1			194
Approver(s) for the claim		Approval Status		Approval Date							
KAMINSKI, VICTORIA		Approve		29-Oct-15							

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: YES

Name : Francois Belanger	Reporting Period for the Month of : Sept 21 - Oct 20, 2015
---------------------------------	---

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
02-Oct-15	Direct Billing	Airline Ticket	Meeting with Official Administrator - Oct 7, 2015 - YYC to YEG - WestJet	Marlin Travel	180.12
02-Oct-15	Direct Billing	Airline Ticket	Meeting with Official Administrator - Oct 7, 2015 - YEG to YYC - Air Canada	Marlin Travel	176.89
15/10/2015	Direct Billing	Airline Ticket	Executive Leadership Team and other mtgs - Oct 20-21, 2015 - YYC to YEG - Air Canada	Marlin Travel	344.48
Total Paid in the Month					\$ 701.49

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

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: October 2, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For
MR FRANCOIS P BELANGER

Wednesday, October 7, 2015

Air

WESTJET AIRLINES
From: CALGARY AB
To: EDMONTON INTL AB
Stops: 0 Arrival: 07Oct15
WESTJET ENCO
WESTJET CONFIRMATION [REDACTED]

Flight: 3394 Q CLASS
07:00 AM Equipment: DH4
07:51 AM

Mile(s) Flown: 163

Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 07Oct15
AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
SEAT 3C
TICKET NUMBER [REDACTED]

Flight: 8143 W CLASS
12:00 PM Equipment: D8 (300 SERIES)
12:54 PM

Mile(s) Flown: 163

Cost:

TK [REDACTED] E-TKT [REDACTED] 130.64
Tax: 49.48
Ticket Total: 180.12

①

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

Invoice Number: [REDACTED]
Date: October 2, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Cost:		
AIR CANADA WI [REDACTED]	[REDACTED]	139.41
	Tax:	37.48
	Ticket Total:	176.89
Total:		
	Grand Total:	357.01
	Less Credit Card Payments:	357.01
	Credit / Balance Due To This Invoice:	0.00
	Total Balance Due:	0.00

2

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED: VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN 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.

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

Branch: [REDACTED]

Agent: [REDACTED]

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

Invoice Number: [REDACTED]

Date:

October 15, 2015

Page:

1/2

Our Reference: [REDACTED]


INVOICE

For

DR FRANCOIS BELANGER

AC [REDACTED]

Tuesday, October 20, 2015

 Air

AIR CANADA

From: CALGARY AB

To: EDMONTON INTL AB

Stops: 0 Arrival: 20Oct15

AIR CANADA E

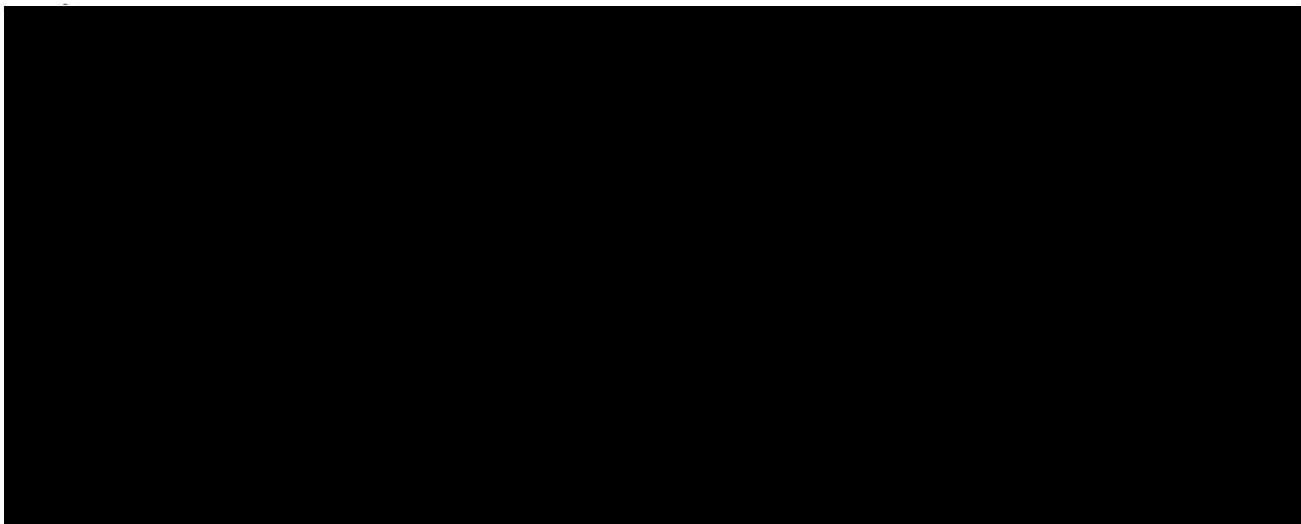
AIR CANADA CONFIRMATION [REDACTED]

TICKET NUMBER [REDACTED]

SEAT 7D

Flight: 8130 W CLASS
06:00 AM Equipment: D8 (300 SERIES)
06:52 AM

Mile(s) Flown: 163



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

Invoice Number: [REDACTED]
Date: October 15, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Wednesday, October 21, 2015

 Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 21Oct15
AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 3C

Flight: 8171 W CLASS
07:00 PM Equipment: DH4
07:52 PM

Mile(s) Flown: 163

Cost:

AIR CANADA WE [REDACTED]	269.52
Tax:	74.96
Ticket Total:	344.48

Total:

Grand Total:	344.48
Less Credit Card Payments:	344.48
Credit / Balance Due To This Invoice:	0.00
Total Balance Due:	0.00

3

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED: VALID PASSPORT... VISA.. TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN 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.