

AHS Board and Executive Expense Report

Name Dr. Francois Belanger
Title VP, Quality & Chief Medical Officer (Acting)
Location Calgary
 Expenses submitted during the month of September 2016

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)
Sep-16	P-Card	Meetings			1,112	218	1,330			
Sep-16	Expense Claim	Meetings		417		792	1,209			
Sep-16	Direct Billing	Meetings	1,197				1,197			
Total			\$ 1,197	\$ 417	\$ 1,112	\$ 1,011	\$ 3,736	\$ -	\$ -	\$ -

Total for the Month \$ 3,736

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 170
 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.



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 Cardholder's Name	VICE PRESIDENT & MEDICAL Cardholder's Position/Title	Billing Reporting Period	20/09/2016
HEALTH OPERATIONS CENTRAL & Cardholder's Dept	SOUTHPORT Cardholder's Site/Location	Total Statement Amount	\$1,329.86
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
22/08/2016		WESTIN (WESTIN HOTELS) WESTIN HOTELS	431.26	CAD	431.26	20.54	00 Travel to Edmonton Aug 22-24 for DM/AHS/CEO Meeting/ELT Meeting and Meeting with Board Member ✓
29/08/2016		WESTIN (WESTIN HOTELS) WESTIN HOTELS	646.89	CAD	646.89	30.80	00 Travel to Edmonton Aug 28-31 for CIS Vendor Meetings/ELT Meeting ✓
07/09/2015		THE CALGARY AIRPORT AU AUTOMOBILE PARKING LOTS AND	29.35	CAD	29.35	1.40	00 Parking at Calgary International Airport for PPEC Meeting ✓
12/09/2016		WESTIN (WESTIN HOTELS) WESTIN HOTELS	222.36	CAD	222.36	10.59	00 Travel to Edmonton Sept 12 - 13 for Alberta Clinician Council Meeting and ELT Meeting ✓

Handwritten signature

Signatures

Cardholder Designate (if Applicable)

By signing this statement

- 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

Name of Cardholder Designate _____

Cardholder Designate Position/Title _____

Signature of Cardholder Designate _____

Date of Signature _____

Cardholder

By signing this statement


- 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.

BELANGER, FRANCOIS

VICE PRESIDENT & MEDICAL

Name of Cardholder _____

Cardholder Position/Title _____

Signature of Cardholder 

Date of Signature Sept 20, 2016

Approver Designate (if Applicable)

By signing this statement

- 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

Name of Approver Designate _____

Approver Designate Position/Title _____

Signature of Approver Designate _____

Date of Signature _____

Approver

By signing this statement

- 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

Dr. Vereng Yiu

President + CEO

Name of Approver _____

Approver Position/Title _____

Signature of Approver 

Date of Signature Oct 3, 2016

Submit approved statement with attachments to Accounts Payable:

Attach:

- 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

Address:

Alberta Health Services
Accounts Payable
7th Street Plaza
10th Floor, North Tower, 10030-107 Street
Edmonton, AB T5J 3E4

Accounts Payable only:

Reference # _____

Reviewed by _____

Date _____

①

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

Francois Belanger

Page Number : 1 Invoice Nbr: [REDACTED]
Guest Number: [REDACTED] Arrive Date: 22-AUG-16 18:31
Folio ID : [REDACTED] Depart Date: 24-AUG-16 06:53
No. Of Guest: 1
Room Number : [REDACTED]
Room Rate : 164.00
Club Account: [REDACTED]

Tax Invoice

Tax ID: 815461330RT0001
The Westin Edmonton 24-AUG-16 06:53 [REDACTED]

Date	Reference	Description	Charges	Credits
22-AUG-16	[REDACTED]	Room Charge	164.00 ✓	
22-AUG-16	[REDACTED]	GST	8.45	
22-AUG-16	[REDACTED]	Destination Marketing Fee	4.92	
22-AUG-16	[REDACTED]	Tourism Levy	6.76	
22-AUG-16	[REDACTED]	Parking Self	30.00 -	
22-AUG-16	[REDACTED]	GST	1.50	
23-AUG-16	[REDACTED]	Room Charge	164.00 ✓	
23-AUG-16	[REDACTED]	GST	8.45	
23-AUG-16	[REDACTED]	Destination Marketing Fee	4.92	
23-AUG-16	[REDACTED]	Tourism Levy	6.76	
23-AUG-16	[REDACTED]	Parking Self	30.00 -	
23-AUG-16	[REDACTED]	GST	1.50	
24-AUG-16	[REDACTED]	[REDACTED]		-431.26
		** Total	431.26	-431.26
		*** Balance	0.00	

Continued on the next page

Parking: \$ 63.00
Accom: \$ 368.26

(2)

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

Francois Belanger

[Redacted]

Email: [Redacted]

Page Number : 1 Invoice Nbr: [Redacted]
Guest Number: [Redacted] Arrive Date: 28-AUG-16 22:26
Folio ID : [Redacted] Depart Date: 31-AUG-16 06:49
No. Of Guest: 1
Room Number : [Redacted]
Room Rate : 164.00
Club Account: [Redacted]

Tax Invoice

Tax ID: 815461330RT0001
The Westin Edmonton 31-AUG-16 06:49 [Redacted]

Date	Reference	Description	Charges	Credits
28-AUG-16	[Redacted]	Room Charge	164.00 ✓	
28-AUG-16	[Redacted]	GST	8.45	
28-AUG-16	[Redacted]	Destination Marketing Fee	4.92	
28-AUG-16	[Redacted]	Tourism Levy	6.76	
28-AUG-16	[Redacted]	Parking Self	30.00 —	
28-AUG-16	[Redacted]	GST	1.50	
29-AUG-16	[Redacted]	Room Charge	164.00 ✓	
29-AUG-16	[Redacted]	GST	8.45	
29-AUG-16	[Redacted]	Destination Marketing Fee	4.92	
29-AUG-16	[Redacted]	Tourism Levy	6.76	
29-AUG-16	[Redacted]	Parking Self	30.00 —	
29-AUG-16	[Redacted]	GST	1.50	
30-AUG-16	[Redacted]	Room Charge	164.00 ✓	
30-AUG-16	[Redacted]	GST	8.45	
30-AUG-16	[Redacted]	Destination Marketing Fee	4.92	
30-AUG-16	[Redacted]	Tourism Levy	6.76	
30-AUG-16	[Redacted]	Parking Self	30.00 —	

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Parking = \$74.50
Accom = \$552.39

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

Francois Belanger

[REDACTED]

Email: [REDACTED]

Page Number : 2 Invoice Nbr: [REDACTED]
Guest Number: [REDACTED] Arrive Date: 28-AUG-16 22:26
Folio ID : [REDACTED] Depart Date: 31-AUG-16 06:49
No. Of Guest: 1
Room Number : [REDACTED]
Room Rate : 164.00
Club Account: [REDACTED]

Date	Reference	Description	Charges	Credits
30-AUG-16	[REDACTED]	GST	1.50	
31-AUG-16	[REDACTED]	Mastercard [REDACTED]		-646.89
		** Total	646.89	-646.89
		*** 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 westin.com/eatwell

As a Starwood Preferred Guest you have earned at least 1476 Starpoints for this visit [REDACTED]
Tell us about your stay. www.westin.com/reviews

Continued on the next page

3

RECEIPT
GST NO. R122556194

EXIT No. [REDACTED]
IN: 29/07/16 09:01
OUT: 29/07/16 15:34
DURATION: 0 06:33
PAID: \$ 29.35
(GST INCLUDED)
MASTERCARD
[REDACTED]

REF. [REDACTED]
THANK YOU FOR
YOUR VISIT



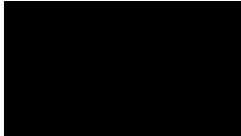
14

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

WESTIN®

HOTELS & RESORTS

Francois Belanger



Page Number : 1 Invoice Nbr :

Guest Number :

Folio ID :

Arrive Date : 12-SEP-16 18:05

Depart Date : 13-SEP-16 13:22

No. Of Guest : 1

Room Number :

Club Account :

Copy Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 20-SEP-16 13:23

Date	Reference	Description	Charges (CAD)	Credits (CAD)
12-SEP-16		Room Charge	170.00 ✓	
12-SEP-16		GST	8.76	
12-SEP-16		Destination Marketing Fee	5.10	
12-SEP-16		Tourism Levy	7.00	
12-SEP-16		Parking Self	30.00 ✓	
12-SEP-16		GST	1.50	
13-SEP-16		Mastercard		-222.36
		** Total	222.36	-222.36
		*** Balance	-0.00	

FUEL YOUR BODY - It's easy to maintain a healthy lifestyle on the road. Our extensive SuperFoodsRx(TM) menu features nutrient-rich, delicious dishes that fuel your body and give you the focused energy you need. Discover dishes to supercharge your day at westin.com/eatwell

Continued on the next page

Parking \$ 31.50
Accom: \$190.86

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



Francois Belanger
 [Redacted]

Page Number : 2 Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 12-SEP-16 18:05
 Depart Date : 13-SEP-16 13:22
 No Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

As a Starwood Preferred Guest you have earned at least 510 Starpoints for this visit [Redacted]

Tell us about your stay. www.westin.com/reviews

EXPENSE SUMMARY REPORT

Currency CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
09-12-2016	170.00	8.76	7.00	0.00	0.00	36.60	222.36	0.00
09-13-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-222.36
Total	170.00	8.76	7.00	0.00	0.00	36.60	222.36	-222.36

AHS Public Disclosure Expense Claims


Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
BELANGER, FRANCOIS	VP Quality & Chief Medical Officer (Acting)	Calgary	\$ 1,209.42								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
8/22/2016	Travel to Edmonton for DM/CEO, ELT Meetings and coverage for CEO		Mileage-Other	\$ 144.76				1			308
8/22/2016	Travel to Edmonton from DM/CEO and ELT Meetings	AB - Other Zones	Meals Per Diem	\$ 103.50			Bfast 3 * \$10.50 = \$31.50 Dinner 3 * \$24.00 = \$72.00	4			
8/24/2016	Travel back to Calgary from DM/CEO, ELT Meetings and coverage for CEO		Mileage-Other	\$ 144.76				1			308
8/28/2016	Travel to Edmonton for CIS RFP Meetings and ELT Meetings		Mileage-Other	\$ 144.76				1			308
8/28/2016	Travel to Edmonton for CIS RFP Meetings and ELT Meetings	AB - Other Zones	Meals Per Diem	\$ 127.50			Bfast 3 * \$10.50 = \$31.50 Dinner 4 * \$24.00 = \$96.00	5			
8/31/2016	Travel back to Calgary from CIS RFP Meetings and ELT Meetings		Mileage-Other	\$ 144.76				1			308
9/7/2016	Travel from Delta Calgary Airport for PPEC Meeting		Mileage-Other	\$ 13.63				1			29
9/7/2016	Travel to Delta Calgary Airport for PPEC Meeting		Mileage-Other	\$ 13.63				1			29
9/12/2016	Travel from Nisku to Edmonton for ELT Meetings		Mileage-Other	\$ 13.16				1			28

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
BELANGER, FRANCOIS	VP Quality & Chief Medical Officer (Acting)	Calgary	\$ 1,209.42

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/12/2016	Travel to Nisku for Alberta Clinician Council Meeting		Mileage-Other	\$ 132.07				1			281
9/12/2016	Travel to Edmonton for Alberta Clinician Council Meeting and ELT Meeting	AB - Other Zones	Meals Per Diem	\$ 69.00			Bfast 2 * \$10.50 = \$21.00 Dinner 2 * \$24.00 = \$48.00	3			
9/14/2016	Travel to Calgary International Airport for IHI Conference in Boston		Mileage-Other	\$ 13.63				1			29
9/14/2016	Travel to Boston for IHI Conference	AB - Other Zones	Meals Per Diem	\$ 82.50			Bfast 1 * \$10.50 = \$10.50 Dinner 3 * \$24.00 = \$72.00	4			
9/16/2016	Travel from Calgary International Airport for IHI Conference in Boston		Mileage-Other	\$ 13.63				1			29
9/19/2016	Travel to Calgary International Airport for VP Interviews and ELT Meeting in Edmonton		Mileage-Other	\$ 13.63				1			29
9/20/2016	Travel to Edmonton for VP Interviews and ELT Meetings	AB - Other Zones	Meals Per Diem	\$ 34.50			Bfast 1 * \$10.50 = \$10.50 Dinner 1 * \$24.00 = \$24.00	2			

Approver(s) for the claim	Approval Status	Approval Date
YIU, VERNA	Approve	17-Oct-16


 Date Oct 11, 2016
 Dr. Francois Belanger
 Acting VP Quality and CMO
 DOFA: 2 Position #: [REDACTED]
 Phone: [REDACTED]

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

Name :		Reporting Period for the Month of : Sep-16			
DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
14-Sep-16	Direct Billing	Airline Ticket	Travel from Calgary to Boston and return for IHI Conference Sept 14-17	Marlin Travel	\$827.83
19-Sep-16	Diret Billing	Airline Ticket	Travel from Calgary to Edmonton and return for September 20th ELT meeting and VP Interviews in Edmonton	Marlin Travel	\$368.76
Total Paid in the Month					\$1,196.59

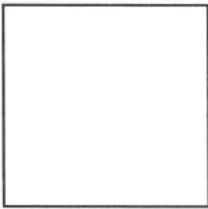
Inv

Sara Coupland

From: Barbara Lazarenko <barbara.lazarenko@marlintravel.ca>
Sent: Thursday, October 06, 2016 4:53 PM
To: Sara Coupland
Subject: FW: Air Canada - DR FRANCOIS BELANGER - 14-Sep/YYC-BOS [REDACTED]
Itinerary-Receipt

Will this do for now?

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****



Itinerary-Receipt

Your booking is confirmed. Please print/retain this page for your financial records (for taxation, expense claim or credit card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

[Scan this barcode to check in at any Air Canada check in kiosk.](#)



Booking Date: **Aug 24, 2016** Passengers **DR FRANCOIS BELANGER**
Agent Name: **BARB**
Agency ID: **6087935**



[Purchase a travel option](#) Relax in Air Canada's Maple Leaf lounges. Purchase On My Way travel assistance.

Booking Information

Booking Reference [REDACTED]	Customer Care
Electronic Ticketing confirmed. This is your official itinerary/receipt.	Air Canada 1-888-335-4189*
Main Contact Marlin Travel KAREN.GONZALEZ@MARLINTRAVEL.CA 01 780 4258611	Flight Arrivals and Departures 1-888-422-7533
Online Services	*For use from phones in Canada, the continental USA, Hawaii and Alaska.
Select Seats	
Manage My Booking (change, cancel, upgrade).	
Alert me of flight status changes directly to my mobile phone or email.	
Flight Arrivals & Departures check online if my flight is on time.	

Check-in online and print my boarding pass.

* [Can my booking be changed online?](#)



Advance Passenger Information

Your current flight itinerary includes travel to a country that requires additional passenger information.

Please note that if you are **travelling to/from the U.S.** and have already provided the required U.S. Transportation Security Administration (TSA)'s [Security Flight Program](#) passenger information on the Who is travelling page, you must also provide Advance Passenger Information (APIS) information prior to your departure.

We strongly encourage you to provide this information ahead of time from the comfort of your home or office with our secure online form.

ADVANCE PASSENGER INFORMATION

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meals
 AC170	Calgary (YYC) Wed 14-Sep 2016 06:00	Toronto Lester B Pearson Intl (YYZ) Wed 14-Sep 2016 11:43 - 1	0	3hr43	<u>321</u>	<u>Flex G</u>	 F
 AC362	Toronto Lester B Pearson Intl (YYZ) Wed 14-Sep 2016 14:15 - 1	Boston Edward L Logan Intl (BOS) Wed 14-Sep 2016 15:50 - B	0	1hr35	<u>E90</u>	<u>Flex G</u>	
 AC363	Boston Edward L Logan Intl (BOS) Fri 16-Sep 2016 14:45 - B	Toronto Lester B Pearson Intl (YYZ) Fri 16-Sep 2016 16:35 - 1	0	1hr50	<u>E90</u>	<u>Flex G</u>	



**Toronto
Lester B
Pearson
Intl
(YYZ)**
Fri 16-Sep
2016
18:20 - 1

**Calgary
(YYC)**

Fri 16-Sep
2016
20:33

0

4hr13

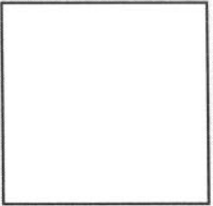
321

Flex
G



AC1155

F



F: Food for Purchase, All Air Canada Café purchases made on board Air Canada flights (excluding Jazz) are payable only with Visa, MasterCard and American Express credit cards.

Passenger Information

1: DR FRANCOIS BELANGER : Adult (16+), Ticket Number: [REDACTED]			
Frequent Flyer Pgm :	[REDACTED]	Meal Preference :	None
Payment Card :	[REDACTED]	Special Needs :	None
Seat Selection :	AC 170 (YYC-YYZ) - 16C (Preferred)		
	AC 362 (YYZ-BOS) - 14C (Preferred)		
	AC 363 (BOS-YYZ) - 13C (Preferred)		
	AC 1155 (YYZ-YYC) - 23C		

Purchase Summary

Corporate Rewards Account

Fare Summary

	Adult
Passenger Type	
Departing Flight - <u>Flex</u>	317.30
Returning Flight - <u>Flex</u>	343.90
Sub Total	661.20

Taxes, Fees and Charges

<u>Canada Airport Improvement Fee</u>	38.00
<u>Air Travellers Security Charge (ATSC)</u>	12.10
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	35.17
Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001)	1.04
Customs User Fee	7.11
U.S.A Transportation Tax	46.00
U.S Agriculture Fee	5.12
U.S.A Immigration User Fee	9.04
September 11 Security Fee	7.24
U.S Passenger Facility Charge	5.81
Total airfare and taxes (per passenger)	827.83
Number Of Passengers	1
Total	827.83
Grand Total - Canadian Dollar (CAD)	\$827.83

Payment Information



Trip Statement

ALBERTA HEALTH SERVICES "SUITE 800, NORTH TOWER" 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 16 Sep 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: BREANN KELLY File Locator: [REDACTED]
---	--

PASSENGERS: FRANCOIS P BELANGER

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	293.80	0.00	\$0.00	74.96	0.00	368.76 CAD
Total:	293.80	0.00	0.00	74.96	0.00	368.76 CAD

PAYMENTS				Form of Payment	Amount
Invoice #	Payment Date	Card Holder			
[REDACTED]	09/16/2016			[REDACTED]	368.76 CAD
Total Payment:					368.76 CAD
Balance Due CAD Currency					0.00 CAD

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** 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. -----

 ****PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

ALBERTA HEALTH SERVICES
"SUITE 800, NORTH TOWER"
10030-107 ST
EDMONTON, AB T5J 3E4
CANADA

Trip #: [REDACTED]
Booking Date: 16 Sep 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: BREANN KELLY

File Locator: Z2MFFA

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
FRANCOIS P BELANGER	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: FRANCOIS P BELANGER
Booking Date: 16 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08433	CALGARY INTL		EDMONTON INTL	V		
		19 Sep 16 8:40PM		19 Sep 16 9:30PM			

Passengers: FRANCOIS P BELANGER
Booking Date: 16 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08155	EDMONTON INTL		CALGARY INTL	W		
		21 Sep 16 7:30PM		21 Sep 16 8:26PM			