

AHS Board and Executive Expense Report

Name Dr. Francois Belanger

Title VP, Quality & Chief Medical Officer

Location Calgary

Expenses submitted during the month of December 2016

						Travel (1)						
MMM-YY	Source Document	Purpose	Ai	rfare	Meals	Accommod	ation	her avel	Total Travel	ofessional relopment (2)	Working Sessions Hosting and Hospitality (3)	Othe (4)	
Dec-16	P-Card	Meetings					575	395	970				
Dec-16	Expense Claim	Meetings			262		373	73	335				
Dec-16	Direct Billing	Meetings		1,209					1,209				
Total			\$	1,209	\$ 262	\$	575	\$ 468	\$ 2,514	\$ -	\$ -	\$	

Total for

the Month \$ 2,514

Maximum daily single meal expense claimed in the month \$ 24 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.

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.

P-Card details Online ® Cardholder Statement Report

Cardholder AND Approver's signature	ipts and supporting documents in the sar ures required where indicated below	no order as a opposition and dusto	
BELANGER, FRANCOIS	VICE PRESIDENT & MEDICAL		
Cardholder's Name	Cardnolder's Position/Title	Billing Reporting Period	20/12/2016
HEALTH OPERATIONS CENTRAL &	SOUTHPORT		A
Cardholder's Dept	Cardholder's Site/Location	Total Statement Amount:	\$969.79
FRANCOIS BELANGER@ALBERTAHE	ALTHSERVICES.CA		
Cardholder's e-mail address		Last 6 digits of the P-Card #	

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	FreighDescription
1/11/2016		CO OP TAX! LINE LTD LIMOUSINES AND	62 00	CAD	62 00	2 95	Taxi from YEG to Westin - in Edmonton for Translational Research Workshop ELT
1/11/2016		WESTIN (WESTIN HOTELS) WESTIN HOTELS	206 58	CAD	206 58	9 84	Odn Edmonton for ELT Budget meetings and updates with direct reports
2/11/2016		GREATER EDMONTON TAXI, UMOUSINES AND TAXICABS	62 20	CAD	62 20	2 56	Taxi to YEG from SSP
2/11/2016		THE CALGARY ARPORT AU, AUTOMOBILE PARKING LOTS AND	58 70	ÇAD	59 70	2 80	OParking at YYC - in Edmonton for ELT, Budget meetings and meetins with direct reports
6/12/2016		CAPITAL TAXI LIMOUSINES AND TAXICABS	62 00	CAD	62 00	2 95	Taxi from YEG to SSP for ELT and meeting with direct reports
3/12/2016		WESTIN (WESTIN HOTELS) WESTIN HOTELS	368 20	CAD	368 20	17 54	OCHatel white in Edmonton for ELT AHS Boar Exec Steering Committee and meetings wat pirect reports.
8/12/2016		CAPITAL TAXI LIMOUSINES AND TAXICABS	62 00	ÇAD	62 00	2 95	Taxi from SSP to YEG - anended ELT, AHS Board meeting and meetings with direct reports
8/12/2016		CALGARY A RPORT EXIT T, AUTOMOBILE PARKING LOTS AND GAPAGES	88 C5	CAD	88 05	4 15	OParking at YYC while in Edmonton for ELT, AHS Board meeting and meetings with dire seconts.

P-Card details Online ® Cardholder Statement Report

-		- Our	moraci otatement repor
	Signatures		
_	Cardholder Designate (If Applicable)	110001111111111111111111111111111111111	***
	By signing this statement I hereby certify that I have reviewed and recond Program User Guide and Training I have alloca	alled this statement in BMO Online to the best of my ability ted the transaction(s) to the proper cost centre	in accordance to AHS Corporate Policies
	Name of Cardnolder Designates	Cardholder Designate Position/Title	USTANT
	Signature of Cardholder Designate	Date of Signature	•
	Cardholder	777/17-18-40	The distriction
	expenses being claimed are in compliance with	[MATCHAN HER SPANISH MATCHAN M	
	claimed by me or on my behalf from Alberta Hea charged is attached.	for valid business purposes for Alberta Health Services an alth Services or any other Organization. A personal cheque	of or any personal expenses inadvertently
	 I attest that expenses submitted in this claim has provided 	ve been incurred by using a cost effective method, otherw	se rationale and supporting analysis is
	BELANGER, FRANCOIS	VICE PRESIDENT & MEDICAL	-1
	= 0/2/	Cardholder Posit.on/Title	
	Signature of Cardholder	Date of Signature	- ::
_		Date of Signature	
	Approver Designate (if Applicable) By signing this statement		
	 I attest that I have read and understand the "Tra expenses being claimed are in compliance with 	vel, Hospitality and Working Session Expense Policy (112 such policy	2)" of Alberta Health Services and confirm
	I attest the expenses enclosed in this claim are followed by the claimage are to their helpfold from A.	for valid business purposes for Alberta Health Services an Alberta Health Services or any other Organization. A perso	d that this claim has not been previously
	charged has been obtained.		
	 I attest that expenses submitted in this claim has provided 	we been incurred by using a cost effective method, otherwi	se rationale and supporting analysis is
	Name of Approver Designate	Approver Designate Position/Title	
	Signature of Approver Designate	Date of Signature	_
	Approver	Retres	
	By signing this statement	Inchial Hacostologica and Minduan Casasana Casasana Dalay 1882	201-1-1-1
	expenses being claimed are in compliance with	VALUE OF THE PARTY	
	 I attest the expenses enclosed in this claim are fi claimed by the claimant or on their behalf from A 	or valid business purposes for Alberta Health Services an liberta Health Services or any other Organization. A persol	d that this claim has not been previously
	charged has been obtained	re been incurred by using a cost effective method, otherwi	
	Dr Vernd Yin	Organization L. CE	
	Name of Approved / A.	Yvesident + CE	0
	1/1/1/	Jal 17,20A	
	Signature of Approver	Date of Signature	
_	Submit approved statement with attachments to Acc		
_	Attach:		Address:
	 Original (or scanned) itemized receipts with docum where required 	ented business reasons including names of participants	Alberta Health Services
	 Signed Cardholder Statement Report (or copies of And where applicable 	electronic signatures if signatures are not on report)	Accounts Payable 7th Street Plaza
	 Copies of pre-approvals for trave; 		10th Floor North Tower 10030-107 Street
	 Personal cheque payable to "Alberta Health Servici" Return refund and/or credit receipts 	es	Edmonton AB TSJ 3E4
	* Disputes letter		
	 Business reasons for travel require detailed descrip meal) why travel was necessary and detailed expra 		
	Accounts Payable only:	V	
	Reference #	Reviewed by	Date
	A. District of the second seco		

Co-op Taxi Line (780)425-2525 www.co-optaxi.com

Terminal 171/66247561 Driver 5075 16/11/21 10:19:18

MASTERCARD
Card:
MasterCard
CHIP CARD

Ref #
Auth #

PURCHASE
FARE : \$ 55.00
TIP : \$ 7.00

TOTAL : \$ 62.00

APPROVED - THANK YOU (01-027)

IMPORTANT: Retain this copy for your records

Protomon Paris

CAPITAL TAXI 9762 54 AVE NW EDMONTON AB T6E 0A9 780 423-2425

SALE



AMOUNT \$55.00 TIP \$7.00 TOTAL \$62.00

00 - APPROVED - 001



CUSTOMER COPY

GREATER EDMONTON TAXI SERVICE

10135 31 AVE NW EDMONTON AB

CARD
CARD TYPE MASTERCARD
DATE 2016/11/22
TIME 0212 18:11:16
INVOICE #
RECEIPT NUMBER

PURCHASE
AMOUNT \$52.40
TIP \$9.80
TOTAL

\$62.20

MasterCard

APPROVED

AUTH# THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456 BARREL TAXI 780.489.7777 EDMTAXI.COM

RECEIPT GST NO. R122556194

EXIT No. A102
IN: 12/06/16 05:48
OUT: 12/08/16 16:40
DURATION: 2 10:52
PAID: \$88.05
(GST INCLUDED)
MASTERCARD

F. THANK YOU FOR YOUR VISIT

RECEIPT GST NO. R122556194



TKT NO.

POF:
IN: 11/21/16 07:31
OUT:11/22/16 20:12
PAID: \$ 58.70
DURATION: 1 12: 41
(GST INCLUDED)

MASTERCARD

TO EXIT



O O FIYYYC





CAPITAL TAXI 9762 54 AVE NW EDMONTON AB T6E 0A9 780 423-2425

SALE



AMOUNT TIP TOTAL

\$55.00 \$7.00 \$62.00

00 - APPROVED - 001



CUSTOMER COPY







The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7 Canada

Tel: 780-426-3636 Fax: 780-428-1454

Francois Belanger Alberta Health Services Ii WESTIN®
HOTELS & RESORTS

 Page Number
 1
 Invoice Nbr

 Guest Number
 :
 ...

 Folio ID
 :
 ...

 Arrive Date
 :
 ...

 Depart Date
 :
 ...

 No. Of Guest
 :
 1

 Room Number
 :
 ...

 Club Account
 :
 ...

Information Invoice

Tax ID: 815461330RT0001

the westin Edmonto			
Date Refere	nce Description	Charges (CAD)	Credits (CAD)
21-NOV-16	Room Charge	184.00	
21-NOV-16	GST	9.48	
21-NOV-16	Destination Marketing Fee	5.52	
21-NOV-16	Tourism Levy	7.58	
22-NOV-16	Mastercard		-206.58
	** Total	206.58	-206.58
	*** Balance	0.00	

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

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

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

Francois Belanger Alberta Health Services Ii Page Number Guest Number Folio ID Arrive Date Depart Date No. Of Guest Room Number Club Account 2 Invoice Nbr 21-NOV-16 18:37 22-NOV-16 08:01

As a Starwood Preferred Guest you have earned at least

Starpoints for this visit

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
11-21-2016	184.00	9.48	7.58	0.00	0.00	5.52	206.58	0.00
		******	******	*******		*******		*********
Total	184.00	9.48	7.58	0.00	0.00	5.52	206.58	0.00



The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7 Canada

Tel: 780-426-3636 Fax: 780-428-1454

WESTIN'

HOTELS & RESORTS

0.00

Francois Belanger

Page Number Guest Number Folio ID Arrive Date Depart Date No. Of Guest Room Number Club Account

Invoice Nbr 06-DEC-16 18:40 08-DEC-16 09:00

Information Invoice

Tax ID: 815461330RT0001

The Westin Edmonton DEC-08-2016 03:4 Date Reference Description Charges (CAD) Credits (CAD) 06-DEC-16 Room Charge 164.00 06-DEC-16 GST 8.45 06-DEC-16 Destination Marketing Fee 4.92 06-DEC-16 Tourism Levy 6.76 07-DEC-16 Room Charge 164.00 07-DEC-16 GST 8.45 07-DEC-16 Destination Marketing Fee 4.92 Tourism Levy 07-DEC-16 6.76 DEC-08-2016 Mastercard -368.26 ** Total -368.26 368.26

Continued on the next page

*** Balance

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Tel: 780-426-3636 Fax: 780-428-1454

WESTIN®
HOTELS & RESORTS

Francois Belanger



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STAY LONGER - Enjoy more time to explore your destination with the benefits of Westin Weekend, from extended breakfast hours to late Sunday checkouts. Book your next Westin Weekend at westin.com/weekend

As a Starwood Preferred Guest you have earned at least

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

Continued on the next page

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
BELANGER, FRANCOIS	VP Quality & Chief Medical Officer	Calgary	\$ 335.35									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification		# of Attendees	Attendee Name(s)	Trip Distance
11/21/2016	In Edmonton - ELT n MAID meeting and r with direct reports	O,	AB - Other Zones	Meals Per Diem	\$ 69.00			In Edmonton to attend ELT meeting, MAID meeting with Covenant Health, and meetings with direct reports Bfast 2 * 10.50 = \$21.00 Dinner 2 * 24.00 = \$48.00	3			
11/21/2016	Travel to YYC from S to Edmonton to atte MAID meeting with executive, CCP Executive, Oversight committe meetings with di	end ELT, Covenant utive		Mileage-Local- Home Zone	\$ 11.75			Travel to YYC from SPTT to fly to Edmonton to attend ELT, MAID meeting with Covenant executive, CCP Executive Oversight committee and meetings with direct reports	1			25
11/22/2016	YYC to Southport To Edmonton to attend meeting with Coven executive, CCP Exect Oversight committe meetings with direct	l ELT, MAID ant utive e and		Mileage-Local- Home Zone	\$ 11.75			YYC to Southport Tower - in Edmonton to attend ELT, MAID meeting with Covenant executive, CCP Executive Oversight committee and meetings with direct reports	1			25
12/1/2016	Southport Tower to Medical Centre to to ATSSL facility			Mileage-Local- Home Zone	\$ 7.05			Southport Tower to Foothills Medical Centre to tour new ATSSL facility	1			15
12/1/2016	Foothills Medical Ce Southport Tower aft new ATSSL facility			Mileage-Local- Home Zone	\$ 7.05			Foothills Medical Centre to Southport Tower after touring new ATSSL facility	1			15
12/6/2016	SPTT to YYC to fly to for AHS Board meet meetings with direct	ing, ELT and		Mileage-Local- Home Zone	\$ 11.75			SPTT to YYC to fly to Edmonton for AHS Board meeting, ELT and meetings with direct reports	1			25

12/6/2016	In Edmonton for ELT, Board meeting and meetings with direct reports	AB - Other Zones	Meals Per Diem	\$ 79.50	In Edmonton for ELT, Board meeting and 4 meetings with direct reports Bfast 3 * 10.50 = \$31.50 Dinner 2 * 24.00 = \$48.00
12/8/2016	YYC to SPTT after flying to Edmonton for AHS Board meeting, ELT and meetings with direct reports		Mileage-Local- Home Zone	\$ 11.75	YYC to SPTT after flying to Edmonton for 1 AHS Board meeting, ELT and meetings with direct reports
12/19/2016	SPTT to YYC to fly to Edmonton for visit to Edmonton MSK Centre, ELT and meetings with direct reports		Mileage-Local- Home Zone	\$ 11.75	SPTT to YYC to fly to Edmonton for visit to Edmonton MSK Centre, ELT and meetings with direct reports
12/19/2016	In Edmonton to attend ELT, Visit to Edmonton Musculoskeletal Centre, Radiation Oversight Committee, Health Information Exec with government	AB - Other Zones	Meals Per Diem	\$ 114.00	In Edmonton to attend ELT, Visit to Edmonton Musculoskeletal Centre, Radiation Oversight Committee, Health Information Exec with government Bfast 4 * 10.50 = \$42.00 Dinner 3 * 24.00 = \$72.00

Approver(s) for the claim	• •	Approval Date
YIU, VERNA	Approve	9-Jan-17



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 wheth 	Indicate whether you have expenses to report in this section for this reporting period:					
Name ·	Dr. François Belanger	Reporting Period for the	Month of : Dec-16			

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
8-Dec-2016	Direct Billing	Airline Ticket	Travel from Calgary to Edmonton and return - attend ELT, Consortiumn and Integrated Patient Safety Action Plan, AHS Board Meeting, briefing for Minister's office, and meetings with direct reports	Marlin Travel	383.43
12-Dec-2016	Direct Billing	Airline Ticket	Travel from Calgary to Edmonton and return - attend ACC meeting, ELT, AHS Board meeting and Exec Steering Committee for Calgary Cancer Centre with government	Marlin Travel	357.36
13-Dec-2016	Direct Billing	Airline Ticket	Change of departure time for air travel from Calgary to Edmonton and return to attend ACC meeting, ELT, AHS Board meeting and Exec Steering Committee for Calgary Cancer Centre with governement	Marlin Travel	75.00
19-Dec-2016	Direct Billing	Airline Ticket	Travel from Calgary to Edmonton and return - visit to Edmonton Musculoskeletal Centre with CEO, ELT, CoACT Exec Sponsors, Health Information Executive Committee	Marlin Travel	173.75
19-Dec-2016	Direct Billing	Airline Ticket	Travel from Calgary to Edmonton and return - visit to Edmonton Musculoskeletal Centre with CEO, ELT, CoACT Exec Sponsors, Health Information Exec - change departure date to Dec 22	Marlin Travel	144.00
Total Paid in the	Month				\$ 1,133.54



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Direct Bill Report

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- 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 whet	Indicate whether you have expenses to report in this section for this reporting period:					
Name ·	Dr. François Belanger	Reporting Period for the	Month of: Dec-16			

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
16-Dec-2016	Direct Billing		Change hotel - travel to Edmonton and return - visit Edmonton Musculoskeletal Centre with CEO, Elt, CoACT Exec Sponsors, Health Information Exec	Marlin Travel	75.00
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in the	Month				\$ 75.00



ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 Trip #: Booking Date: 30 Nov 16

Client: Agent:

CARLEY WALLS

File Locator:

PASSENGERS: FRANCOIS P BELANGER

REFERENCE/ DESCRIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #		169.00	0.00	\$0.00	37.48	0.00	206.48 CAD
WESTJET Ticket #		122.22	0.00	\$0.00	49.48	0.00	171.70 CAD
WESTJET Ticket #		5.25	0.00	\$0.00	0.00	0.00	5.25 CAD
	Total:	296.47	0.00	0.00	86.96	0.00	383.43 CAD

PAYMENTS

Invoice #	Payment Date	Card Holder	Form of Payment		Amount
	11/30/2016				206.48 CAD
	11/30/2016				171.70 CAD
	11/30/2016	ALBERTA HEALTH SERVICES			5.25 CAD
				Total Payment:	383.43 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL CLINICAL WORK

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

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

Booking Date: 30 Nov 16

Client:
Agent: CARLEY WALLS

File Locator:



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: 30 Nov 16
File Locator/Ticket #:

From:CALGARY INTLDeparting on:06 Dec 16To:EDMONTON INTLReturning on:08 Dec 16



AIR

Passengers: FRANCOIS P BELANGER Booking Date: 30 Nov 16
File Locator/Ticket #:

AirlineFlightFromTerminalToClass/SeatStopsWESTJET03394CALGARY INTLEDMONTON INTLM/

VESTJET 03394 CALGARY INTL EDMONTON INTL 06 Dec 16 7:00AM 06 Dec 16 8:01AM

Passengers: FRANCOIS P BELANGER 30 Nov 16

File Locator/Ticket #:

 Airline
 Flight
 From
 Terminal
 To
 Class/Seat
 Stops

 AIR CANADA
 08151
 EDMONTON INTL
 CALGARY INTL
 V/

AIR CANADA 08151 EDMONTON INTL CALGARY INTL
08 Dec 16 3:30PM 08 Dec 16 4:24PM



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

Trip #: 06 Dec 16 **Booking Date:** Client: Agent: ASHLEY QUACH

File Locator:

PASSENGERS: FRANCOIS P BELANGER

REFERENCE/ DESCRIP	TION			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	
AIR CANADA Ticket #				282.40	0.00	\$0.00	74.96	0.00	357.36	CAD
			Total:	282.40	0.00	0.00	74.96	0.00	357.36	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	Payment			Amount	
		12/06/2016							357.36	CAD
							Total Pa	ayment:	357.36	CAD
					В	alance Du	e CAD Cu	rrency	0.00	CAD
				Total GS	ST	0.00	Tota	al HST	\$0.00	100

CORPORATE UNIT 101 REASON FOR TRAVEL ELT MEETING

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 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

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

Trip #: 06 Dec 16 **Booking Date:** Client: ASHLEY QUACH Agent:

File Locator:



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

06 Dec 16 **Booking Date:** File Locator/Ticket #: Passengers: FRANCOIS P BELANGER Flight Terminal Class/Seat Stops Airline From G/ AIR CANADA 08134 CALGARY INTL **EDMONTON INTL** 12 Dec 16 9:57AM 12 Dec 16 9:05AM





AIR

Passengers:	FRANCOIS P BELANC	GER		Booking Date: File Locator/Ticket #:	06 Dec 16	
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08171	EDMONTON INTL 13 Dec 16 6:00PM		CALGARY INTL 13 Dec 16 6:59PM	W/	



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

Trip #:
Booking Date: U/ Dec 16
Client:
Agent: ASHLEY QUACH

File Locator:

PASSENGERS:

FRANCOIS P BELANGER

REFERENCE/ DESC	RIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	-	
AIR CANADA ONL	INE Confirmation			75.00	0.00	\$0.00	0.00	0.00	75.00	CAD
			Total:	75.00	0.00	0.00	0.00	0.00	75.00	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Payment			Amount	
		12/07/2016					Tetal Da		75.00	CAD
							Total Pa	ayment.	75.00	CAD
					В	alance Du	e CAD Cu	rrency	0.00	CAD
				Total G	ST	0.00	Tota	al HST	\$0.00)

CORPORATE UNIT 101
REASON FOR TRAVEL ELT MEETING

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

Trip #: Booking Date: 07 Dec 16

Client:

Agent: ASHLEY QUACH

File Locator:

MY ITINERARY

Passengers

Citizenship

Required Travel Documents

12 Dec 16 9:37PM

FRANCOIS P BELANGER

Not Specified

Not Specified

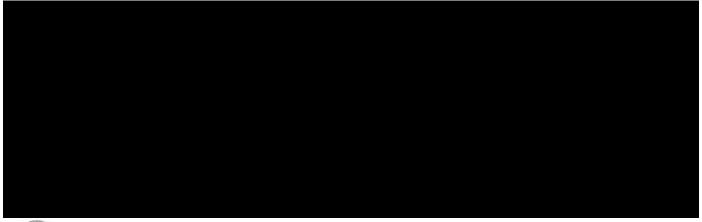
All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada

12 Dec 16 8:45PM



AIR

				Booking Date:	06 Dec 16	
Passengers:	FRANCOIS P BELANC	3ER		File Locator/Ticket #:		
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08431	CALGARY INTL		EDMONTON INTL	G/	





AIR

Passengers:	FRANCOIS P BELANC	GER		Booking Date: File Locator/Ticket #:	06 Dec 16	
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08171	EDMONTON INTL		CALGARY INTL	W/	
		13 Dec 16 6:00PM		13 Dec 16 6:59PM		



v14

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

Trip#: 13 Dec 16 **Booking Date:** Client: Agent: CARLEY WALLS

File Locator:

PASSENGERS: FRANCOIS P BELANGER

DR. BELANGER FRANCOIS

REFERENCE/ DESCRIPTI	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				173.75	0.00	\$0.00	0.00	0.00	173.75 CAD
			Total:	173.75	0.00	0.00	0.00	0.00	173.75 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	of Pavment			Amount
		12/13/2016					Total Pa	avment:	173.75 CAD
					В	Total Payment: Balance Due CAD Currency			0.00 CAD
				Total GS	т	0.00	Tota	al HST	\$0.00

CORPORATE UNIT 101 REASON FOR TRAVEL WEEKLY EDMONTON SITE VISIT

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

STATES CALL ... 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT... 303 801 2147 PLEASE QUOTE ACCESS 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

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

Trip#: 13 Dec 16 **Booking Date:** Client: **CARLEY WALLS** Agent:

File Locator:



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

FRANCOIS P BELANGER Passengers:

Booking Date: File Locator/Ticket #:

Airline

Flight

From

Terminal

Class/Seat

Stops

AIR CANADA

08130

CALGARY INTL

19 Dec 16 6:45AM

EDMONTON INTL 19 Dec 16 7:41AM W/



AIR

Passengers:

FRANCOIS P BELANGER

Booking Date: File Locator/Ticket #: 13 Dec 16

Flight

EDMONTON INTL

Terminal

Stops

AIR CANADA

08173

CALGARY INTL

W/

Class/Seat

21 Dec 16 7:10PM

21 Dec 16 8:04PM



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

Trip #: Booking Date: 13 Dec 16 Client: Agent: CARLEY WALLS

File Locator:

PASSENGERS: DR. BELANGER FRANCOIS

							OTHER			
REFERENCE/ DESCRIPT	ION			FARE	HST/GST	PST	TAXES	PENALTY	TOTAL	-
AIR CANADA Ticket				144.00	0.00	\$0.00	0.00	0.00	144.00	CAD
			Total:	144.00	0.00	0.00	0.00	0.00	144.00	CAE
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Payment			Amount	
		12/13/2016	ALBERTA HEALTH	H SERVICES					144.00	CAD
							Total Pa	ayment:	144.00	CAD
					В	alance Du	e CAD Cui	rrency	0.00	CAL
				Total GS	ST	0.00	Tota	al HST	\$0.00	

change of return date to 22 from 21

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

Trip #: **Booking Date:** 13 Dec 16 Client: Agent: CARLEY WALLS

File Locator:

MY ITINERARY

Passengers

Citizenship

Required Travel Documents

BELANGER FRANCOIS

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: BELANGER FRANCOIS

Booking Date:

File Locator/Ticket #:

13 Dec 16

From: To:

CALGARY INTL

EDMONTON INTL

Departing on:

19 Dec 16



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

Trip #: Booking Date: 16 Dec 16 Client: Agent: CARLEY WALLS

File Locator:

PASSENGERS: DR. FRANCOIS BELANGER

REFERENCE/ DESCRIPTION	EFERENCE/ DESCRIPTION					PST	OTHER TAXES	PENALTY	TOTAL	
AIR CANADA Ticket #				75.00	0.00	\$0.00	0.00	0.00	75.00	CAE
			Total:	75.00	0.00	0.00	0.00	0.00	75.00	CAI
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount	9
		12/16/2016	ALBERTA HEALTH	SERVICES					75.00	CAD
							Total Pa	ayment:	75.00	CAE
					В	alance Du	e CAD Cui	rrency	0.00	CAI
				Total GS	т	0.00	Tota	al HST	\$0.00	ľ

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

Booking Date: 16 Dec 16

Client: Agent: CARLEY WALLS

File Locator:

MY ITINERARY

Passengers

Citizenship

Required Travel Documents

FRANCOIS 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 BELANGER

Booking Date:

File Locator/Ticket #:

16 Dec 16

From:

CALGARY INTL

Departing on:

19 Dec 16

To:

Returning on: 19 Dec 16 22 Dec 16