

AHS Board and Executive Expense Report

Name Gregory Cummings Title Chief Zone Officer

Location Westlock

Expenses submitted during the month of December 2016

							Travel (1))						
MMM-YY	Source Document	Purpose	A	irfare	Mea	als	Accommoda	tion	Other Travel	Total Trave		Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Dec-16 Dec-16 Dec-16	P-Card Expense Claim Direct Billing	Meetings Meetings Meetings		2,188		106		707	341	1,0 1 2,1	06			
Total			\$	2,188	\$	106	\$	707	\$ 341	\$ 3,3	42	\$ -	\$ -	\$ -

Total for

the Month \$ 3,342

Maximum daily single meal expense claimed in the month \$ 24 Maximum daily base hotel rate claimed in the month \$ 134 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.



	eceipts and supporting documents in the s natures required where indicated below	The state of the specific attention of	
CUMMINGS, GREGORY	CHIEF ZONE OFFICER		0 6 (see 5 (see
Cardholder's Name	Cardholder's Position/Title	Billing Reporting Period:	20/12/2016
NORTH ZONE OPERATIONS	WESTLOCK ADMIN BLDG.		
Caronolder's Dept	Cardholder's Site/Location	Total Statement Amount:	\$1,048.13
REGORY.CUMMINGS@AHS CA			_ 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Cardholder's e-mail address		Last 6 digits of the P-Card #	<i>t</i> .

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	FreighDescription
19/11/2016		CANADIAN CABS, LIMOUSINES AND TAXICABS	34 62	CAD	34.62	1.65	axi from airport
19/11/2016		CANADIAN CABS, LIMOUSINES AND TAXICABS	16.50	CAD	16 50	.79	Festival of Trees
19/11/2016		CANADIAN CABS, LIMOUSINES AND TAXICABS	36.69	CAD	36.69	1,75	Festival of Trees - GP
20/11/2016		HOLIDAY INN HOTEL & SU. HOLIDAY INNS	148.25	CAD	148.25	7.06	Early ming in FMM rext day - Hotel
20/11/2016		EDMONTON INTERNATION, AUTOMOBILE PARKING LOTS AND GARAGES	17.75	CAD	17.79	28.	Odgirport to hotel - FMM Ming
20/11/2016		VIP CABS: LIMOUSINES AND TAXICABS	19.26	CAD	18 25	87	Grande Prairie Festival of Trees
2,1/11/2016		SUNTAXI (FT MCMURRAY), LIMOUSINES AND TAXICABS	37,90	GAD	37.90	1.80	ac to FMM Hosp
21/11/2016		HOLIDAY INN EXPRESS. HOLIDAY INNS	124,79	CAD	124.79	5.94	Travel to Fort McMurray for meeting with l and Staff
21/11/2016		EDMONTON INTERNATION, AUTOMOBILE PARKING LOTS AND GARAGES	15.00	CAD.	15.00	.71	.00Meeting with HR and staff in Fort McMums
21/11/2016		SUN TAX! (FT MCMURRAY). LIMOUSINES AND TAXICABS.	38.80	CAD	38.80	1.85	Travel to Fort McMurray for Staff Meetings
23/11/2016		HOLIDAY INN HOTEL & SU, HOLIDAY INNS	144 82	CAD	144.82	6 90	HFNNA Meeting in Edmonton
01/12/2016		SUN TAXI (FT MCMURRAY), LIMOUSINES AND TAXICABS	35.50	CAD	36.50	1,74	Slaff Meetings in Fort McMurray
02/12/2016		EDMONTON INTERNATION, AUTOMOBILE PARKING LOTS AND GARAGES	50 00	CAD	50 00	2.38	.00Trayel for Fort McMurray Staff Meetings
02/12/2016		SUN TAXI (HUSSEIN FARA, LIMOUSINES AND TAXICABS	38.87	CAD	38 57	,eq	.00Travel to Fort McMurray for Staff Meetings
03/12/2016		MERIT HOTEL & SUITES, LODGING HOTELS, MOTELS, RESORTS	144.58	CAD	144,56	6.88	fravel to Fort McMurray for Steff Meanings
14/12/2016		HOLIDAY INN HOTEL & SU, HOLIDAY INNS	144,82	CAD	144.92	6.90	HENNA Meeting in Edinonton



RUN DATE: 12/21/2016

P-Card details Online ® Cardholder Statement Report

Signatures		
Cardholder Designate (if Applicable)		
By signing this statement	iled this statement in BMO Online to the best of my ability in	t t- film g
Program User Guide and Training I have alloca	ited this statement in SMO Offline to the best of my aprilly a state the transaction(s) to the proper cost centre.	accordance to AHS Corporate Policies.
Name of Cardholda: Designate	Cardholder Designate Position/Title	6.
Signature of Cardholder Designate	Date of Signature	
Cardholder		
By signing this statement I attest that I have read and understand the "Tra expenses being claimed are in compliance with	avel. Hospitality and Working Session Expense Policy (1122 such policy	t)" of Alberta Health Services and confirm
claimed by me or on my behalf from Alberta Hei charged is attached.	for valid business purposes for Alberta Health Services and aith Services or any other Organization. A personal cheque	for any personal expenses inadvertently
 I attest that expenses submitted in this claim ha provided. 	ve been incurred by using a cost effective method, otherwis	se rationale and supporting analysis is
CUMMINGS, GREGORY Name of Cardnopper	CHIEF ZONE OFFICER	ar .
A -	Cardholder Position/Title	*
Signature of Sardholder	Dec 2 2016 Date of Signalule	e.
//	<i>34,65,049,000</i>	
Approver Designate (if Applicable) By signing this statement I attest that I have read and understand the "Tra	ivel, Hospitality and Working Session Expense Policy (1122	t)" of Alberta Health Services and confirm
expenses being claimed are in compliance with		
 I attest the expenses enclosed in this claim are claimed by the claimant or on their behalf from A 	for valid business purposes for Alberta Health Services and Alberta Health Services or any other Organization. A person	that this claim has not been previously all cheque for personal expenses inadvertently
charged has been obtained	ve been incurred by using a cost effective method, otherwis	
provided.		30 to 20
De Anne Liche Name of Approver Designate	Acting Exec. Adim - Approver Designate Position Title	Coordinator
D'heche	Jan. 4/16	
Signature of Approver Designate	Date of Signature	
Approver By signing this statement		
 I attest that I have read and understand the "Tra expenses being claimed are in compliance with 	ivel, Hospitality and Working Session Expense Policy (1122 such policy.	r)" of Alberta Health Services and confirm
l attest the expenses enclosed in this claim are	for valid business purposes for Alberta Health Services and	that this claim has not been previously
charged has been obtained.	Alberta Realth Services or any other Organization. A person	
 I attest that expenses submitted in this claim has provided. 	ve been incurred by using a cost effective method, otherwis	e rationale and supporting analysis is
John Gordon	UPACHOOUL thou	. 40
skage of Approver	Approver Position/Title	<i>"</i> 76
	Approver Position/Title	26
Signature of Approver	Date of Signature	
Submit approved statement with attachments to Ac-	counts Payables	
Attach:	sented business reasons including names of participants	Address:
where required	remod business reasons including names or 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 travel		10th Floor, North Tower, 10030-107 Street
 Personal cheque payable to "Alberta Health Servic Return, refund and/or credit receipts 	æs"	Edmonton, AB T5J 3E4
Disputes letter		
 Business reasons for travel require detailed descriment), why travel was necessary and detailed expl 		
Accounts Payable only:		\$2.50
Reference #	Reviewed by:	Date:



NOU 19,2016 Taxi from GP air port





NOU 19, 2016 GP Taxi - ES Festival of Trees.

CANDIAN CASS 10516 - 99 AVENUE GRANGE PRAIRIE AS 10V USS 17881 539-4242

Sale

INVE:

Sale

NOU 19, 2016 Festival of Trees Grande Prairie.

CANADIAN CABS

GRANCE PRAIRIE AN 18V 855 (788) 539-4242





NOU 20, 2016 Fmm Mtng.

11-20-16

Gren Cumminas Folio No. Room No. : A/R Number Arrival : 11-19-16 Group Code Departure : 11-20-16 Company Alberta Health Services Conf. No. Membership No. : Rate Code : Invoice No. Page No. : 1 of 1

Date	Description	Markova to to	Charges	Credits
11-19-16	*Accommodation		134.00	***************************************
11-19-16	Sustainability Levy		2.01	
11-19-16	GST Tax - Room		6.80	
11-19-16	Tourism Tax - Room		5.44	
11-20-16	MasterCard			148.25
your accou	for staying with us! Qualifying points for this stay will automatically be credited to nt. Please tell us about your stay by writing a review here - www.ing.com/reviews.	Total 148.25		148.25
We look forward to welcoming you back soon.		Balance	0.00	J

Gi	iest	Si	ana	ture:

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

NOU 20, 2016. Airport to Hotel Frim Ming.

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton Tax Code CA5%

Exit Lane 20/11/16 12:05 Receipt

Short-Term Parking Mastercard Value Park 19/11/16 11:52 20/11/16 12:05 Period 1d0h30' (lax)

\$17.75 \$17.75

Total

Payment Received MC

\$17.75 √

Merch: Auth Type: Swiped

Sub Total STax 5%

\$16.90 \$0.85



VIP CABS 10001 101 AVE UNIT T8V0X9 GRANDE PRAIRIAB 22619296 GH2261929615

**** **** PURCHASE 11-20-2016 09:28:35 Acct # Exp Date **/** Card Type MC Name: GREGORY CUMMINGS MasterCard Trace # Inv. # Auth # RRN Purchase \$16.30 \$1.96 Tip Total \$18.26 (001) APPROVED-THANK YOU

Retain this copy for your records Customer copy (T)

Sun Taxi

140 MacKernic King Road Fort McMarry, AB 19-41.2 780-743-5050

TAX1: 154/662:33

16/11/21

10:08:48

MASTERCARD Card : MasterCard

WasterCard CHIP CARD

VERIFIED BY PIN

Order Ref Auth

PURCHASE

FARE :

\$ 32.90

TIP

nin-

5.00

TOTAL:

2

37. 90 /

APPROVED - THANK YOU (01-027)

IMPORTANT: Retain a copy for your records

GST# 125968893

Thank you for using





Nou 21, 2014 EDM

Travel to Fort Mac Meeting with David

11-21-16

Greg Cummings

Folio No. A/R Number

Group Code Company

Membership No. :

Invoice No.

Room No. : Arrival

: 11-20-16

Departure : Conf. No. : 11-21-16

Rate Code:

Page No. 3 1 of 1

Date	Description		Charges	Credits
11-20-16	*Accommodation		114.49	
11-20-16	G.S.T.		5.72	
11-20-16	Tourism Levy		4.58	
11-21-16	Manual - MasterCard			124.79
your accou	for staying with us! Qualifying points for this stay will automatically be credited to nt. Please tell us about your stay by writing a review here - www.lhg.com/reviews.	Total 124.79		124.79
we look fo	We look forward to welcoming you back soon.		0.00	

Business

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge. I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

NOU 21, 2016

Travel to Fort McMun Meeting with David Make and HR.

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton Tax Code CA5%

Exit Lane 21/11/16 17:44 Receipt

Short-Term Parking Mastercard Value Park 21/11/16 06:49 21/11/16 17:44 Period 1d0h0' (Tax)

Total

Payment Received

\$15.00 \$15.00 /

\$15.00

Auth: Type: Swiped

Sub Total STax 5%



Sun faxi 140 MacKedzie biou Road

Fort McMurry: A8 198 8.7 34: 113 14:30

TAX1: 100/862137 ()

16/11/21

15:18:04

MASTERCARD

Card : **MasterCard**

CHIP CARD

VERIFIED SV FIR **Under**

Rei Auth

FARE:

PURCHASE 3; 33.80

TIP

8 5.00

TOTAL:

38. 80 /

APPROVED THANK YOU (a) (027)

William All Retain a copy for your records

6ST# 125,668893

Thank you for using





Greg Cumming	S		
		Group Code Folio/Invoice No. Reference #	1
Room No.		Page No.	1 of 1
Arrival	11-21-16	Cashier No.	
Departure	11-22-16	User ID	

Date	Description		Charges	Credits
11-21-16	*Accommodation		129.00	
11-21-16	GST		6.45	
11-21-16	Tourism Levy 4%		5.16	
11-21-16	Destination Marketing 3%		3.87	
11-21-16	GST on DMF		0.19	
11-21-16	Tourism Levy on DMF		0.15	
11-22-16	MasterCard			144.82
	you for staying with us! Qualifying points for this stay will automatically be credited to your nt. Please tell us about your stay by writing a review here - www.ing.com/reviews. We look		144.82	144.82
forward to welcoming you back soon.		Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bit is not waived and agree to be held personally liable in the event that the indicated person, company, or association feils to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Dec. 1-2, 2016 Travel to Fort Marmuray for staff meeting

Sun Taxi

140 MacKenzie King Road Fort McMurry, A8 T9H 4L2 780-743-5050

TAX1: 173/66234625

16/12/01

20:49:40

MASTERCARD Card: Waster Card CHIP CARD

VERIFIED BY PIN

Or der Ref Auth



PURCHASE \$

FARE :

31.50

TIP

\$

5.00

TOTAL:

36.50



APPROVED - THANK YOU (01-027)

IMPORTANT: Retain a copy for your records

GST# 125868893

Thank you for using Sun Terr

GST# R128599776

Edmonton Airports

Can-T53 2T2 Edmonton Tax Code CA5%

Exit Lare Receipt 02/12/16 20:30

Short-Term Parking Mastercard Daily Lot 01/12/16 16:55 02/12/16 20:30 Period 2d0h0'

(Tax) \$50.00 Total \$50.00

Payment Received

\$50.00

merch: Type: Swiped

Sub Total STax Sw

\$47.62

140 MACKENZIE KING RO UN TT 110 FORT MCMURRAY AB T9H4L2 TEL: 780-370-8898

TERM # RECORD # HOST INVOICE # HOST SEQ #

CARD CREDIT/MASTERCARD 16:05:11

PURCHASE

AMOUNT TIP TOTAL

\$33.80 \$38.87

AUTH#: HTS#; 00 TRANSACTION

APPROVED 000 THANK YOU

MasterCard AID: TC:

TVR: TSI:

CUSTOMER COPY





Dec. 2, 2016 Staff Meeting

Gregory Cummings

Guest Name:

Company Name: Alberta Health Services

Group Name:

G.S.T: 84970 2444 RT0014

INVOICE

Room No.

Arrival: 12-01-16

Departure: 12-02-16

Folio No.:

Conf. No.:

Cashier No.:

PO#

Cost Center#

Job#

	Cost Center# :
Description	Charges Credits
Room Charge	139.00
Tourism Levy 4%	5.56
2-01-16 Tourism Levy 4% 2-02-16 <u>MasterCard</u>	144.56

Total Charges	144.56	
Total Credits		144.56
Balance		0.00

Page No. 1 of 1.

Guest Signature

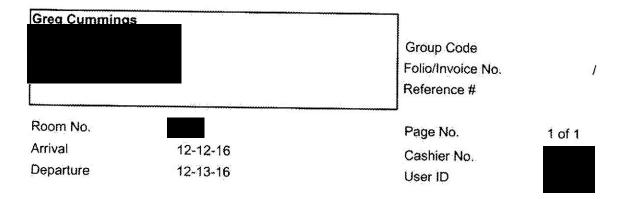
I have received the goods and/or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the Issuer.

Thank you for staying with us!





Dec. 13,2016 IHFNNA Mig. Edmenton



Date	Description		Charges	Credits
12-12-16	*Accommodation		129.00	703.074.000.07 8 0
12-12-16	GST		6.45	
12-12-16	Tourism Levy 4%		5.16	
12-12-16	Destination Marketing 3%		3.87	
12-12-16	GST on DMF		0.19	
12-12-16	Tourism Levy on DMF		0.15	
12-13-16	MasterCard		0,10	144.82
Thank you for s	staying with us! Qualifying points for this stay will automatically be credited to your se tell us about your stay by writing a review here - www.ing.com/reviews. We look	Total	144.82	144.82
forward to welc	oming you back soon.	Balance	0.00	/

Guest	Signature:	
	and the state of t	

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CUMMINGS, GREGORY	Chief Zone Officer, North Zone	Westlock	\$ 106.00									
Expense Date	Business reaso	n	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
12/1/2016	Travel to Fort N for staff meetir	•	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			
12/2/2016	Travel to Fort N for staff meetin	•	AB - North Zone	Meals Per Diem	\$ 47.50			Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1			
12/12/2016	IHFNNA Meetir	ng	AB - North Zone	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			
12/13/2016	IHFNNA Meetir	ng	AB - North Zone	Meals Per Diem	\$ 10.50			Bfast \$10.50	1			

Approver(s) for the claim		Approval Date
GORDON, DEBORAH A	Approve	21-Dec-16



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 whetl	her you have expenses to report in th	is section for this reporting period:	YES
Name ·	Gregory Cummings	Reporting Period for the	Month of : Dec-16

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid	
18-Nov-2016	Direct Billing	Airline Ticket	November 21st flight to Fort McMurray for staffing concerns (Ticket #	Marlin Travel	539.96	
30-Nov-2016	Direct Billing	Airline Ticket	December 22nd flight to Fort McMurray for Willow Square Meeting	Marlin Travel	411.46	
18-Nov-2016	Direct Billing	Airline Ticket	December 4/5th flight to Calgary for the South Zone Officer interviews. Plans changed and this trip was cancelled. The credit will be used at a a later date.	Marlin Travel	303.96	
10-Nov-2017	Direct Billing	Airline Ticket	November 17th travel to Fort McMurray - Staffing Concerns	Marlin Travel	490.96	
22-Nov-2017	Direct Billing	Airline Ticket	December 1st travel to Fort McMurray - Staffing Concerns	Marlin Travel	441.91	
Total Paid in the Month						



Invoice

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

Trip #: 18 Nov 16 Booking Date:

> Client: Agent:

LEISA KING WHITBY

File Locator:

PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION				FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticke	et #			465.00	0.00	\$0.00	74.96	0.00	539.96 CAD
			Total:	465.00	0.00	0.00	74.96	0.00	539.96 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount
		11/17/2016							539.96 CAD
							Total Pa	ayment:	539.96 CAD

0.00 CAD **Balance Due CAD Currency**

Total GST

0.00

Total HST

\$0.00

CORPORATE UNIT 101

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

HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW

HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML FOR IMPORTANT INFORMATION ON

MINUTES PRIOR ------ 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. -------------------------

------ 1 FREE CHECKED BAGS UP TO 50LBS EACH BAG

PER PASSENGER ----2ND BAG 20.00 UP TO 50LBS EACH PER PERSON----

Trip #:

Booking Date: 18 Nov 16

Client:
Agent: LEISA KING WHITBY

File Locator:



MY ITINERARY

Passengers Citizenship Required Travel Documents

GREGORY CUMMINGS 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

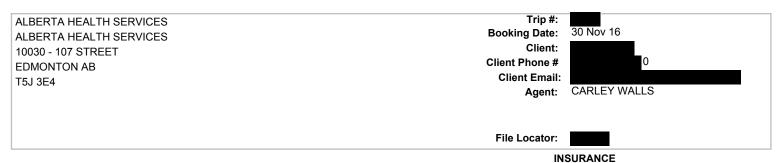


AIR

Passengers:	GREGORY CUMMING	S		Booking Date: File Locator/Ticket #:	17 Nov 16	
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08380	EDMONTON INTL 21 Nov 16 8:15AM		FT. MCMURRAY 21 Nov 16 9:26AM	Q/	
AIR CANADA	08385	FT. MCMURRAY 21 Nov 16 4:05PM		EDMONTON INTL 21 Nov 16 5:18PM	V/	



Invoice

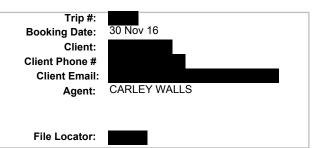


PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION				FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				326.00	0.00	\$0.00	74.96	0.00	400.96 CAD
AIR CANADA Ticket #				10.50	0.00	\$0.00	0.00	0.00	10.50 CAD
			Total:	336.50	0.00	0.00	74.96	0.00	411.46 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount
		11/30/2016							400.96 CAD
		11/30/2016	ALBERTA HEALT	H SERVICES					10.50 CAD
					-		Total Pa	ayment:	411.46 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
REASON FOR TRAVEL SOUTH ZONE CHIEF OFFICER INTERVIEWS



MY ITINERARY

Passengers Citizenship Required Travel Documents

GREGORY CUMMINGS 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: GREGORY CUMMINGS Booking Date: 30 Nov 16
File Locator/Ticket #:

 From:
 EDMONTON INTL
 Departing on:
 22 Dec 16

 To:
 FT. MCMURRAY
 Returning on:
 22 Dec 16



AIR

Passengers:	GREGORY CUMMING		Booking Date: File Locator/Ticket #:	30 Nov 16		
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08380	EDMONTON INTL 22 Dec 16 8:15AM		FT. MCMURRAY 22 Dec 16 9:28AM	K/	
AIR CANADA	08385	FT. MCMURRAY 22 Dec 16 4:05PM		EDMONTON INTL 22 Dec 16 5:18PM	G/	



Invoice

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

Booking Date: 18 Nov 16

Client:
Agent: CARLEY WALLS

File Locator:

PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket#		208.00	0.00	\$0.00	74.96	0.00	282.96 CAD
AIR CANADA Ticket #		21.00	0.00	\$0.00	0.00	0.00	21.00 CAD
	Total:	229.00	0.00	0.00	74.96	0.00	303.96 CAD

PAYMENTS

Payment against balance in the exchanged amount of - exch rate

Balance Due CAD Currency 303.96 CAD

Payment Due Date:

18 Nov 16

Total GST

0.00

Total HST

\$0.00

FLIGHT PASS TYPE 296.36 CORPORATE UNIT 101

REASON FOR TRAVEL SOUTH ZONE CHEIF PFFICER INTERVIEWS

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

----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

Tél: 780 425 8611

Trip #:

Booking Date: 18 Nov 16

Client:
Agent: CARLEY WALLS

File Locator:



MY ITINERARY

Passengers Citizenship Required Travel Documents

GREGORY CUMMINGS 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: GREGORY CUMMINGS Booking Date: 18 Nov 16

File Locator/Ticket #:

From:EDMONTON INTLDeparting on:04 Dec 16To:CALGARY INTLReturning on:05 Dec 16



v14

AIR

Passengers: GREGORY CUMMINGS

Booking Date: 18 Nov 16
File Locator/Ticket #:

 Airline
 Flight
 From
 Terminal
 To
 Class/Seat
 Stops

 AIR CANADA
 08137
 EDMONTON INTL
 CALGARY INTL
 L/

CANADA 08137 EDMONTON INTL CALGARY INTL
04 Dec 16 9:30AM 04 Dec 16 10:24AM

Trip#:
Booking Date: 18 Nov 16
Client:
Agent: CARLEY WALLS

File Locator:







AIR

Passengers:	GREGORY CUMMING	S		Booking Date: File Locator/Ticket #:	18 Nov 16	
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08431	CALGARY INTL 05 Dec 16 8:45PM		EDMONTON INTL 05 Dec 16 9:37PM	L/	



Invoice

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
Booking Date:
14 Nov 16

10030 - 107 STREET
Client:
EDMONTON AB
Client Phone #
Client Email:
Agent:
TRINA MACAULEY

File Locator:

INSURANCE

Balance Due CAD Currency

PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION			FARE	HST/GST	PST	OTHER TAXES		TOTAL	
AIR CANADA Ticket	#			416.00	0.00	\$0.00	74.96	0.00	490.96 CAD
			Total:	416.00	0.00	0.00	74.96	0.00	490.96 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount
		11/10/2016							490.96 CAD
							Total Pa	ayment:	490.96 CAD

CORPORATE UNIT 101
REASON FOR TRAVEL STAFF MEETING

v14

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

0.00 CAD

Trip #:

Booking Date: 14 Nov 16

Client:
Client Phone #

Client Email: TRINA.MACAULEY@MARLINTRAVEL.(

Agent: TRINA MACAULEY

File Locator:

MY ITINERARY

Passengers Citizenship Required Travel Documents

GREGORY CUMMINGS 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:	GREGORY CUMMING	S		Booking Date: File Locator/Ticket #:	10 Nov 16	
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08380	EDMONTON INTL 17 Nov 16 8:15AM		FT. MCMURRAY 17 Nov 16 9:26AM	W/	
AIR CANADA	08391	FT. MCMURRAY 17 Nov 16 8:40PM		EDMONTON INTL 17 Nov 16 9:53PM	W/	



Invoice

T5J 3E4

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB Trip #: 22 Nov 16

Client: Agent:

TIFFANY ASKE

File Locator:

PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #	Cancelled	377.00	0.00	\$0.00	74.96	0.00	451.96 CAD
AIR CANADA Ticket #		-377.00	0.00	\$0.00	-74.96	0.00	-451.96 CAD
AIR CANADA Ticket #		366.95	0.00	\$0.00	74.96	0.00	441.91 CAD
	Total:	366.95	0.00	0.00	74.96	0.00	441.91 CAD

PAYMENTS

Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	01/18/2017			-451.96 CAD
	01/18/2017			441.91 CAD
	11/21/2016			451.96 CAD
	11/21/2016			0.00 CAD

Balance Due CAD Currency 0.00 CAD

Total Payment:

Total GST 0.00 Total HST \$0.00

TRAVEL APPROVED BY DEB.GORDON CORPORATE UNIT 101 REASON FOR TRAVEL STAFF MEETINGS

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

441.91 CAD

Trip #:

Booking Date: 22 Nov 16

Client:
Agent: TIFFANY ASKE

File Locator:



MY ITINERARY

Passengers Citizenship Required Travel Documents

GREGORY CUMMINGS 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: GREGORY CUMMINGS Booking Date: 22 Nov 16

File Locator/Ticket #:

From:EDMONTON INTLDeparting on:01 Dec 16To:FT. MCMURRAYReturning on:02 Dec 16



AIR

Passengers: GREGORY CUMMINGS Booking Date: 21 Nov 16
File Locator/Ticket #:

 Airline
 Flight
 From
 Terminal
 To
 Class/Seat
 Stops

 AIR CANADA
 08388
 EDMONTON INTL
 FT. MCMURRAY
 G/

AIR CANADA 08388 EDMONTON INTL FT. MCMURRAY
01 Dec 16 7:00PM 01 Dec 16 8:13PM

Passengers: GREGORY CUMMINGS Booking Date: 18 Jan 17

Pile Locator/Ticket #:

Trip #:

Booking Date: 22 Nov 16

Client: Agent: TIFFANY ASKE

File Locator:





AIR

Passengers:	GREGORY CUMMINGS			Booking Date: File Locator/Ticket #:	21 Nov 16	
Airline AIR CANADA	Flight 08391	From FT. MCMURRAY 02 Dec 16 8:40PM	Terminal	To EDMONTON INTL 02 Dec 16 9:53PM	Class/Seat G/	Stops
Passengers:	GREGORY CUMMING	S		Booking Date: File Locator/Ticket #:	18 Jan 17	