

AHS Board and Executive Expense Report

Name Gregory Cummings
Title Chief Zone Officer, North Zone
Location Westlock
 Expenses approved during the month of June 2020

Travel (1)

Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Jun-20	P-Card	Meetings			3,973		3,973			45
Jun-20	Expense Claim	Meetings		1,555			1,555			
	Direct Billing	Meetings					-			
Total			\$ -	\$ 1,555	\$ 3,973	\$ -	\$ 5,528	\$ -	\$ -	\$ 45

**Total for
the Month** \$ 5,573

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.

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
CUMMINGS, GREGORY	Chief Zone Officer North Zone	Westlock	\$ 2,565.97								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
4/20/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06			As per Alberta Health Ministerial order, AHS is acting administrator for Manoir du Lac	1			
4/21/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
4/22/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 135.16				1			
4/23/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
4/24/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
4/25/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
4/27/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
4/28/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
4/29/2020	Administration for Manoir du Lac (April 20-29)	AB - North Zone	Accommodations	\$ 146.06				1			
5/3/2020	Administration for Manoir du Lac (May 3-6)	AB - North Zone	Accommodations	\$ 146.06				1			
5/4/2020	Administration for Manoir du Lac (May 3-6)	AB - North Zone	Accommodations	\$ 146.06				1			
5/5/2020	Administration for Manoir du Lac (May 3-6)	AB - North Zone	Accommodations	\$ 146.06				1			
5/6/2020	Administration for Manoir du Lac (May 3-6)	AB - North Zone	Accommodations	\$ 146.06				1			
5/10/2020	Administration for Manoir du Lac (May 10-12)	AB - North Zone	Accommodations	\$ 126.55				1			
5/11/2020	Administration for Manoir du Lac (May 9-12)	AB - North Zone	Accommodations	\$ 135.16				1			
5/12/2020	Administration for Manoir du Lac (May 9-12)	AB - North Zone	Accommodations	\$ 146.06				1			
5/17/2020	Administration for Manoir du Lac (May 9-12)	AB - North Zone	Accommodations	\$ 135.16				1			
5/18/2020	Administration for Manoir du Lac (May 16-19)	AB - North Zone	Accommodations	\$ 135.16				1			
Approver(s) for the claim	Approval Status	Approval Date									
GORDON, DEBORAH A	Approve	25-May-20									

1.



04-20-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-19-20
	Group Code :	[Redacted]	Departure :	04-20-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-19-20	*Accommodation	134.00	
04-19-20	GST (806941001RT001) 5% - I	6.70	
04-19-20	Tourism Levy 4% - Room	5.36	
04-20-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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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.

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 1551 Main Street SE
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2.



04-21-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-20-20
	Group Code :	[Redacted]	Departure :	04-21-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-20-20	*Accommodation	134.00	
04-20-20	GST (806941001RT001) 5% - I	6.70	
04-20-20	Tourism Levy 4% - Room	5.36	
04-21-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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3.



04-22-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-21-20
	Group Code :	[Redacted]	Departure :	04-22-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-21-20	*Accommodation	124.00	
04-21-20	GST (806941001RT001) 5% - f	6.20	
04-21-20	Tourism Levy 4% - Room	4.96	
04-22-20	MasterCard XXXXXXXXXXXX [Redacted]		135.16
Total		135.16	135.16
Balance		0.00	

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4.



04-23-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-22-20
	Group Code :	[Redacted]	Departure :	04-23-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-22-20	*Accommodation	134.00	
04-22-20	GST (806941001RT001) 5% - f	6.70	
04-22-20	Tourism Levy 4% - Room	5.36	
04-23-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06

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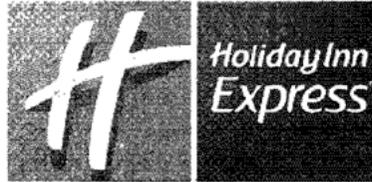
Total	146.06	146.06
Balance	0.00	

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5.



04-24-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-23-20
	Group Code :	[Redacted]	Departure :	04-24-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-23-20	*Accommodation	134.00	
04-23-20	GST (806941001RT001) 5% - I	6.70	
04-23-20	Tourism Levy 4% - Room	5.36	
04-24-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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04-27-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-24-20
	Group Code :	[Redacted]	Departure :	04-25-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-24-20	*Accommodation	134.00	
04-24-20	GST (806941001RT001) 5% - f	6.70	
04-24-20	Tourism Levy 4% - Room	5.36	
04-25-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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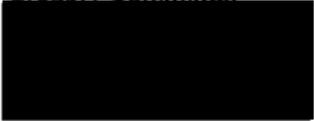
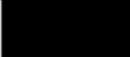
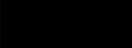
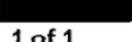
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7.



05-21-20

Gregory Cummings 	Folio No. :		Room No. :	
	A/R Number :		Arrival :	04-26-20
	Group Code :		Departure :	04-27-20
	Company :		Conf. No. :	
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
04-26-20	*Accommodation	134.00	
04-26-20	GST (806941001RT001) 5% - f	6.70	
04-26-20	Tourism Levy 4% - Room	5.36	
04-27-20	MasterCard XXXXXXXXXXXX 		146.06
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews . We look forward to welcoming you back soon.		Total	146.06
		Balance	0.00

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8-



04-28-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-27-20
	Group Code :	[Redacted]	Departure :	04-28-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-27-20	*Accommodation	134.00	
04-27-20	GST (806941001RT001) 5% - I	6.70	
04-27-20	Tourism Levy 4% - Room	5.36	
04-28-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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9.



04-29-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	04-28-20
	Group Code :	[Redacted]	Departure :	04-29-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
04-28-20	*Accommodation	134.00	
04-28-20	GST (806941001RT001) 5% - f	6.70	
04-28-20	Tourism Levy 4% - Room	5.36	
04-29-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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10.



05-03-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-02-20
	Group Code :	[Redacted]	Departure :	05-03-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
05-02-20	*Accommodation	134.00	
05-02-20	GST (806941001RT001) 5% - I	6.70	
05-02-20	Tourism Levy 4% - Room	5.36	
05-03-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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05-04-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :		Arrival :	05-03-20
	Group Code :		Departure :	05-04-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-03-20	*Accommodation	134.00	
05-03-20	GST (806941001RT001) 5% - I	6.70	
05-03-20	Tourism Levy 4% - Room	5.36	
05-04-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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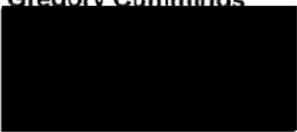
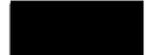
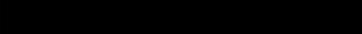
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12.



05-05-20

Gregory Cummings 	Folio No. :		Room No. :	
	A/R Number :		Arrival :	05-04-20
	Group Code :		Departure :	05-05-20
	Company :		Conf. No. :	
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-04-20	*Accommodation	134.00	
05-04-20	GST (806941001RT001) 5% - I	6.70	
05-04-20	Tourism Levy 4% - Room	5.36	
05-05-20	MasterCard XXXXXXXXXXXX 		146.06
Total		146.06	146.06
Balance		0.00	

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13.



05-06-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-05-20
	Group Code :	[Redacted]	Departure :	05-06-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
05-05-20	*Accommodation	134.00	
05-05-20	GST (806941001RT001) 5% - I	6.70	
05-05-20	Tourism Levy 4% - Room	5.36	
05-06-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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Guest Signature: _____

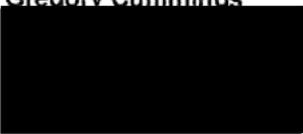
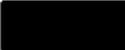
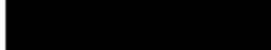
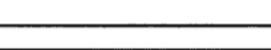
I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit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

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14.



05-10-20

Gregory Cummings 	Folio No. :		Room No. :	
	A/R Number :		Arrival :	05-09-20
	Group Code :		Departure :	05-10-20
	Company :		Conf. No. :	
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-09-20	*Accommodation	116.10	
05-09-20	GST (806941001RT001) 5% - I	5.81	
05-09-20	Tourism Levy 4% - Room	4.64	
05-10-20	MasterCard XXXXXXXXXXXX 		126.55
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.		Total	126.55
		Balance	0.00

Guest Signature: _____

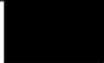
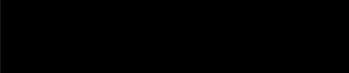
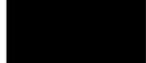
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15.



05-11-20

Gregory Cummings 	Folio No. :		Room No. :	
	A/R Number :		Arrival :	05-10-20
	Group Code :		Departure :	05-11-20
	Company :		Conf. No. :	
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-10-20	*Accommodation	124.00	
05-10-20	GST (806941001RT001) 5% - I	6.20	
05-10-20	Tourism Levy 4% - Room	4.96	
05-11-20	MasterCard XXXXXXXXXXXX 		135.16
Total		135.16	135.16
Balance		0.00	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____

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16.



05-12-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-11-20
	Group Code :	[Redacted]	Departure :	05-12-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
05-11-20	*Accommodation	134.00	
05-11-20	GST (806941001RT001) 5% - I	6.70	
05-11-20	Tourism Levy 4% - Room	5.36	
05-12-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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Guest Signature: _____

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17.



McKenna

05-17-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-16-20
	Group Code :	[Redacted]	Departure :	05-17-20
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
05-16-20	*Accommodation	124.00	
05-16-20	GST (806941001RT001) 5% - I	6.20	
05-16-20	Tourism Levy 4% - Room	4.96	
05-17-20	MasterCard XXXXXXXXXXXX [Redacted]		135.16

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Total	135.16	135.16
Balance	0.00	

Guest Signature: _____

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18.



05-18-20

Gregory Cummings 	Folio No. :		Room No. :	
	A/R Number :		Arrival :	05-17-20
	Group Code :		Departure :	05-18-20
	Company :		Conf. No. :	
	Membership No. :		Rate Code :	
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-17-20	*Accommodation	124.00	
05-17-20	GST (806941001RT001) 5% - I	6.20	
05-17-20	Tourism Levy 4% - Room	4.96	
05-18-20	MasterCard XXXXXXXXXXXX 		135.16
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.		Total	135.16
		Balance	0.00

Guest Signature: _____

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AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CUMMINGS, GREGORY	Chief Zone Officer North Zone	Westlock	\$ 992.50									
Expense Report Number	Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
OIE2420375	4/19/2020	Acting on-site Management for Manoir du Lac in McLennan (April 19-28, 2020)	AB - North Zone	Meals Per Diem	\$ 454.00				11			
OIE2420375	5/2/2020	Acting on-site Management for Manoir du Lac in McLennan (May 2 - 5, 2020)	AB - North Zone	Meals Per Diem	\$ 179.50				5			
OIE2420375	5/9/2020	Acting on-site Management for Manoir du Lac in McLennan (May 9 - 12, 2020)	AB - North Zone	Meals Per Diem	\$ 179.50				5			
OIE2420375	5/16/2020	Acting on-site Management for Manoir du Lac in McLennan (May 16-19, 2020)	AB - North Zone	Meals Per Diem	\$ 179.50				5			
Approver(s) for the claim	Approval Status	Approval Date										
PUBLIC DISCLOSURE1, AHS	Approve	25-May-20										

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
CUMMINGS, GREGORY	Chief Zone Officer North Zone	Westlock	\$ 1,451.75								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/19/2020	Administration at Manoir du Lac (May 16-18)	AB - North Zone	Accommodations	\$ 135.16			As per Alberta Health Ministerial Order, AHS is acting administrator for Manoir du Lac in McLennan (330km from Westlock).	1			
5/24/2020	Administration at Manoir du Lac (May 23-26)	AB - North Zone	Accommodations	\$ 146.06				1			
5/25/2020	Administration at Manoir du Lac (May 23-26)	AB - North Zone	Accommodations	\$ 146.06				1			
5/26/2020	Administration at Manoir du Lac (May 23-26)	AB - North Zone	Accommodations	\$ 135.16				1			
5/31/2020	Administration at Manoir du Lac (May 30 - Jun 2)	AB - North Zone	Accommodations	\$ 131.45				1			
6/1/2020	Administration at Manoir du Lac (May 30 - Jun 2)	AB - North Zone	Accommodations	\$ 146.06				1			
6/2/2020	Administration at Manoir du Lac (May 30 - Jun 2)	AB - North Zone	Accommodations	\$ 146.06				1			
6/8/2020	i4 Conference	AB - Other Zones	Conference Fees	\$ 45.00			Conference Fee to attend the i4 Conference (formally the Quality Summit), on October 6-7, 2020.	1			
6/11/2020	Slave Lake Seniors Health Meeting/Concern	AB - North Zone	Accommodations	\$ 146.06			Travelled to Slave Lake to have urgent meeting to address concerns about seniors indigenous health.	1			
6/12/2020	Site Visit to McLennan (June 11)	AB - North Zone	Accommodations	\$ 135.16				1			
6/17/2020	Whitecourt Functional Assessment Meeting (June 17)	AB - North Zone	Accommodations	\$ 139.52				1			
Approver(s) for the claim	Approval Status	Approval Date									
Deborah Gordon	Approve	24-Jun-20									

1



05-19-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-18-20
	Group Code :	[Redacted]	Departure :	05-19-20
	Company :	Ihg Small Biz 2 Cad Rates	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
05-18-20	*Accommodation	124.00	
05-18-20	GST (806941001RT001) 5% - F	6.20	
05-18-20	Tourism Levy 4% - Room	4.96	
05-19-20	MasterCard XXXXXXXXXXXX [Redacted]		135.16
Total		135.16	135.16
Balance		0.00	

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Guest Signature: _____

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2.



05-24-20

Gregory Cummings [Redacted]	Folio No. :	Room No. :	[Redacted]
	A/R Number :	Arrival :	05-23-20
	Group Code :	Departure :	05-24-20
	Company :	Conf. No. :	[Redacted]
	Membership No. :	Rate Code :	[Redacted]
	Invoice No. :	Page No. :	1 of 1

Date	Description	Charges	Credits
05-23-20	*Accommodation	134.00	
05-23-20	GST (806941001RT001) 5% - I	6.70	
05-23-20	Tourism Levy 4% - Room	5.36	
05-24-20	MasterCard		146.06
Total		146.06	146.06
Balance		0.00	

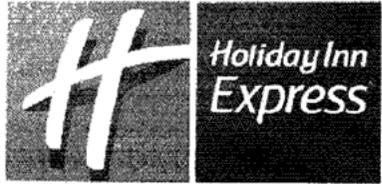
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3.



05-25-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :		Arrival :	05-24-20
	Group Code :		Departure :	05-25-20
	Company :	Ihg Small Biz 2 Cad Rates	Conf. No. :	[Redacted]
	Membership No. :	PC 148886110	Rate Code :	[Redacted]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-24-20	*Accommodation	134.00	
05-24-20	GST (806941001RT001) 5% - f	6.70	
05-24-20	Tourism Levy 4% - Room	5.36	
05-25-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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4.



05-26-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-25-20
	Group Code :	[Redacted]	Departure :	05-26-20
	Company :	Ihg Small Biz 2 Cad Rates	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
05-25-20	*Accommodation	124.00	
05-25-20	GST (806941001RT001) 5% - F	6.20	
05-25-20	Tourism Levy 4% - Room	4.96	
05-26-20	MasterCard XXXXXXXXXXXX [Redacted]		135.16
Total		135.16	135.16
Balance		0.00	

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5



05-31-20

Gregory Cummings [Redacted]	Folio No. :		Room No. :	[Redacted]
	A/R Number :		Arrival :	05-30-20
	Group Code :		Departure :	05-31-20
	Company :	Govt of AB	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-30-20	*Accommodation	120.60	
05-30-20	GST (806941001RT001) 5% - f	6.03	
05-30-20	Tourism Levy 4% - Room	4.82	
05-31-20	MasterCard		131.45
Total		131.45	131.45
Balance		0.00	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____

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10.



06-02-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	05-31-20
	Group Code :	[Redacted]	Departure :	06-01-20
	Company :	Ihg Small Biz 2 Cad Rates	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

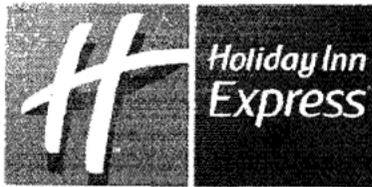
Date	Description	Charges	Credits
05-31-20	*Accommodation	134.00	
05-31-20	GST (806941001RT001) 5% - I	6.70	
05-31-20	Tourism Levy 4% - Room	5.36	
06-01-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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06-02-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	06-01-20
	Group Code :	[Redacted]	Departure :	06-02-20
	Company :	ihg Small Biz 2 Cad Rates	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
06-01-20	*Accommodation	134.00	
06-01-20	GST (806941001RT001) 5% - I	6.70	
06-01-20	Tourism Levy 4% - Room	5.36	
06-02-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

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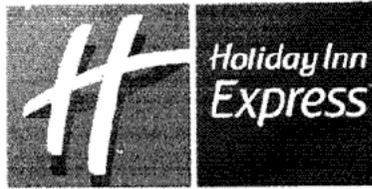
Payment Details

Transaction Type	Purchase	
Reference Number	AHSi42020-PFTM0-1	
Date & Time	6/8/2020 12:47:20 PM	AHS Cash Handling 9th Floor, North Tower SSP 10030-107 Street, Edmonton, AB T5J3E4 Laura Phillips - 780-735-0486
Card Type	MasterCard	AHS Conferences
Card Number	***** [REDACTED]	
Expiration Date	**/**	

Event Fees

Alberta Resident - i4 Virtual - Oct 6&7, 2020 registration (including Launchpad) x [1] @ \$45.00 CAD each (Early Bird Rate)	\$45.00 CAD
Subtotal	\$45.00 CAD
Total	\$45.00 CAD
Paid This Time	\$45.00 CAD
Total Paid	\$45.00 CAD
Balance Due	\$0.00 CAD

9.



06-11-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	06-10-20
	Group Code :	[Redacted]	Departure :	06-11-20
	Company :	ahs	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
06-10-20	*Accommodation	134.00	
06-10-20	GST (806941001RT001) 5% - F	6.70	
06-10-20	Tourism Levy 4% - Room	5.36	
06-11-20	MasterCard XXXXXXXXXXXX [Redacted]		146.06
Total		146.06	146.06
Balance		0.00	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

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.

Holiday Inn Express Hotel Slave Lake
 1551 Main Street SE
 PO Box 427
 Slave Lake, Alberta, T0G2A0 Canada
 Telephone: (780) 849-4819 Fax: (780) 849-5045

10.



06-12-20

Gregory Cummings [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	06-11-20
	Group Code :	[Redacted]	Departure :	06-12-20
	Company :	Ihg Small Biz 2 Cad Rates	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
06-11-20	*Accommodation	124.00	
06-11-20	GST (806941001RT001) 5% - I	6.20	
06-11-20	Tourism Levy 4% - Room	4.96	
06-12-20	MasterCard XXXXXXXXXXXX [Redacted]		135.16
Total		135.16	135.16
Balance		0.00	

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06-17-20

Gregory Cummings [Redacted]	Folio No. :	Room No. :
[Redacted]	A/R Number :	Arrival : 06-16-20
[Redacted]	Group Code :	Departure : 06-17-20
[Redacted]	Company : Alberta Health Services	Conf. No. : [Redacted]
[Redacted]	Membership No. : [Redacted]	Rate Code : [Redacted]
[Redacted]	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
06-16-20	*Accommodation	128.00	
06-16-20	GST 806941001RT0001 5%	6.40	
06-16-20	Tourism Levy 4%	5.12	
06-17-20	MasterCard		139.52
Total		139.52	139.52
Balance		0.00	

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Owned by 3G Equity Inc. Operated by APX Hospitality.

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
CUMMINGS, GREGORY	Chief Zone Officer North Zone	Westlock	\$ 562.50								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/23/2020	Administration at Manoir du Lac (May 23-26)	AB - North Zone	Meals Per Diem	\$ 179.50				4			
5/30/2020	Administration at Manoir du Lac (May 30 - Jun 2)	AB - North Zone	Meals Per Diem	\$ 179.50				4			
6/10/2020	Slave Lake Indigenous Health Concern/McLennan Visit	AB - North Zone	Meals Per Diem	\$ 132.00				3			
6/16/2020	Whitcourt Functional Assessment Meeting	AB - North Zone	Meals Per Diem	\$ 71.50				2			
Approver(s) for the claim	Approval Status	Approval Date									
Deborah Gordon	Approve	24-Jun-20									