

AHS Board and Executive Expense Report

Name: Dr Jane Ojedokun

Title: Zone Medical Director North Zone

Location: Edmonton

Expenses posted during the month of December 2024

					Travel (1)								
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodat	ion	Other Travel		Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)	
Dec-24	P-Card Expense Claim Direct Bill	Meetings Meetings Meetings	480		3	341			- - 820				
		Total by category	\$ 480	\$ -	· \$ 3	41	\$	- \$	820	\$ -	\$ -	\$	Ξ

Total posted for

the Month \$ 820

Maximum daily single meal expense posted in the month \$
Maximum daily base hotel rate posted in the month \$
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 membership dues, small item technology purchases, books, etc.

Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report



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.
- Refer to Quick Reference Guide for: Providing a Standard Business Reason(s)
- A personal cheque must be attached to cover expenses deemed ineligible.

 Indicate who 	ether you have expenses to report in this section for	this reporting period:	YES	
Name :	Dr. Jane Ojedokun	Reporting Period for the M	lonth of: Dec-24	

YES

Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
10-Oct-2024	Direct Billing	Hotel	Pomeroy Hotel for 1 night, October 9, 2024 for New Physician Orientation, held in Grande Prairie on October 10, 2024	PHCC Partnership	\$159.61
22-Oct-2024	Direct Billing	Airline Ticket	Flight from Edmonton to Fort McMurray on November 6, returning on November 7, 2024 for "All Fort McMurray Physician Town Hall with Dr. Peter Jamieson, CMO", and in person physicians meeting on November 7th at the NLRH	Vision Travel DT Ontario- West Inc	\$479.74
12-Dec-2024	Direct Billing	Hotel	In person Meeting (Beaverlodge Community Session) in Beaverloge on December 4, 2024.	Canalta Real Estate Services LTD	\$181.03
	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 th	ne Month				\$ 820.38

PHCC Partnership o/a Pomeroy Hotel Grande Prairie

11633 100th Street

Grande Prairie, AB T8V 3Y4

Phone:

(780)532-5221

Fax:

(780)532-5441

E-mail:

fd@pomeroyhotelgp.com

Website: www.pomeroyhotel.com/grande-

prairie



CONFERENCE CENTRE

Guest Charges

Folio #: Room #:

Guest: Ojedokun, Jane Dr.

Conf #:

CRS #:

Payment Method: Direct Bill

Rate:

Billing Reference:

Company:

AHS-Medical Affairs North

Arrival:

10/9/2024

10/9/2024 \$149.00 Departure: 10/10/2024

Next Payment Due:

10/10/2024

Estimated Next Payment Amount:

Date	Department	Reference	Voucher	Room	Charge	Credit	Balance
10/9/2024	ROOM CHARGE	Auto Posted Rate: AHS			\$149.00		\$149.00
10/9/2024	HOTEL TAX	Auto Posted Rate: AHS			\$5.96		\$154.96
10/9/2024	HOTEL TAX	Auto Posted Rate: AHS			\$0.18		\$155.14
10/9/2024	D.M.F. FEE	Auto Posted Rate: AHS			\$4.47		\$159.61
10/10/2024	Direct Bill	Trans - To Account AHS - Medical Affairs North Zone				\$159.61	\$0.00
	*******				Balan	ce	\$0.00

Additional Estimated Charges (Room, Tax, Other) through 10/9/2024 \$0.00

I agree that my liability for all charges is not waived. GST #720259688 RT0001



Your Direct Itinerary

DIRECT TRAVEL 9929-108TH STREET NW EDMONTON AB T5K 1G8 1-833-692-4120 ALBERTA HEALTH SERVICES 10030 107 STREET EDMONTON AB Z/T5H3E4

Quick links

Check-in

Visa Requirements

Information Passport &

Canadian Government

Advisories

Airport & Flight

Travel

Agency reference:

Traveler name

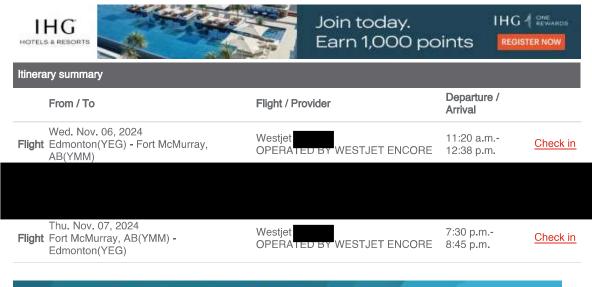
Client reference

JANE OJEDOKUN

Thank you for choosing Direct Travel. Complete details for your trip are below. Please review this document and the trip details thoroughly. If a discrepancy exists, please contact us immediately upon receipt. Missing your flight without cancelling will result in the forfeiture of the value of your airline ticket.

Government issued photo I.D. is required for all travel and the name on your photo I.D. must match the name on your ticket.

Please <u>click here</u> upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you come back to this information regularly in advance of and during travel as documentation and health requirements could change without notice.





TRAVEL INTELLIGENCE HUB Get the latest information & advisories



₹ ws	Edmonton Edmonton (YEG)		Fort McMurray Fort McMurray, AB (YMM)
Departure	Wed. Nov. 06, 2024 11:20 a.m.	Arrival	Wed. Nov. 06, 2024 12:38 p.m.
Terminal		Terminal	M
Class	Economy/Coach Discounted(B)	Seat	
Status	Confirmed	Airline check-in	<u>ID</u>
Special requests		Frequent traveler	
Equipment	DHC8 Dash 8-400	Duration/ Meal service	01:18/Snack
eTicket			
Remarks	OPERATED BY WESTJET ENCORE **CHECK IN WITH WESTJET ENCORE**		
Baggage ►		•	



₹ ws	Fort McMurray Fort McMurray, AB (YMM)		Edmonton Edmonton (YEG)
Departure	Thu. Nov. 07, 2024 7:30 p.m.	Arrival	Thu. Nov. 07, 2024 8:45 p.m.
Terminal	М	Terminal	
Class	Economy/Coach Discounted(B)	Seat	
Status	Confirmed	Airline check-ir	n ID
Special requests		Frequent traveler	
Equipment	DHC8 Dash 8-400	Duration/ Meal service	01:15/Snack
eTicket			
Remarks	OPERATED BY WESTJET ENCORE **CHECK IN WITH WESTJET ENCORE**		
Baggage •		>	

Invoice/Ticket information for JANE OJEDOKUN

Ticket:

Westjet

Invoice:

CAD351.82 Base: Other tax: CAD127.92 GST/HST tax: CAD0.00 QST tax: CAD0.00

> CAD479.74 Amount:

CA XXXXXXXXXXXXX Payment: Issue date: 16-Oct.-2024

> Total invoiced amount: CAD479.74

Balance due: CAD0.00

General remarks

AIRFARES ARE NOT GUARANTEED UNTIL TICKETED AIRLINES RECOMMEND CHECKING IN 2 HOURS PRIOR TO FLIGHT. THIS TICKET IS NON-REFUNDABLE. CHANGES/CANCELLATIONS MUST BE MADE PRIOR TO DEPARTURE OR TICKET WILL HAVE ZERO VALUE AIRLINE CHANGE/CANCELLATION FEES MAY APPLY.

Agency registration TPS/GST-723782728 RT 0001



REMIT TO: Canalta Real Estate Services Ltd.

o/a Hamptons Grande Prairie

PO Box 2109

Drumheller AB, T0J 0Y0 Website: www.canaltahotels.com

Invoice Invoice#:

GST#: 894648450 RT0001

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Bill To:

Alberta Health	Services			
PO Box 1600		In	voice Date	12-Dec-24
Edmonton AB,	T5J 2N9		Due Date	11-Jan-25
Folio No	Description	QTY	Amount	Total
	Room: 1 King Studio, Wet Bar - Deluxe Room: Jane Ojedokun Dec-04	·**	200	
	Reference: NZ MED AFFAIRS		0.00	0.00
	GUEST ROOM	1	169.00	169.00
	RM - DMF 3PCT	1	5.07	5.07
	RM - GST 5PCT	1	-8.45	-8.45
	RM - GST 5PCT	1	8.45	8.45
	DMF RM - GST 5PCT	1	-0.25	-0.25
	DMF RM - GST 5PCT	1	0.25	0.25
	DMF RM - Travel and Tourism Levy 4PCT	1	0.20	0.20
	RM - Travel and Tourism Levy 4PCT	1	6.76	6.76
Invoice Sumr	mary	Invoice	e Total	\$181.03

Room Charges	Other Charges	Other Payments	GST/HST	PST/RST	DMF/TIF	Accomodation Tax	TL (AB)
\$169.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.07	\$0.00	\$6.96

Terms: Net 30 Days

Your Canalta Account Manager:

Make all payments to: Canalta Real Estate Services Ltd.

Please remit payment to PO Box 2109, Drumheller, AB T0J 0Y0

Should you have any inquiries concerning this invoice, please contact Account Receivables Office Phone: 1-403-823-2030 Email: accr@canalta.com Website: www.canaltahotels.com















