

## Official Administrator and Executive Expense Report

**Name** Jitendra Prasad  
**Title** Chief Program Officer, Contracting, Procurement & Supply Management  
**Location** Edmonton  
 Expenses submitted during the month of October 2015

Travel (1)										
Month-Year	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Oct-15	Expense Claim	Meetings		12		178	190			
Oct-15	Direct Billing	Meetings	1,201				1,201			
<b>Total</b>			\$ 1,201	\$ 12	\$ -	\$ 178	\$ 1,391	\$ -	\$ -	\$ -

**Total for the Month** \$ 1,391

Maximum daily single meal expense claimed in the month \$ 12  
 Maximum daily base hotel rate claimed 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 small item technology purchases, books, etc.

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

### AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
PRASAD, JITENDRA	Chief Program Officer, Contracting, Procurement & Supply Management	Edmonton	189.89

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/7/2015	Taxi from Southport Office to attend Pharmacy & Liver Clinic meeting at FMC	AB - Other Zones	Taxi	39.56				1			
10/7/2015	Attended AHS Corp/CPSM Meetings and		Meals Per Diem	11.60			Lunch	1			
10/7/2015	Attended AHS Corp & CPSM Meetings. Also	AB - Other	Parking - Lot or	25.00				1			
10/7/2015	Taxi from Calgary Airport to Southport Office	AB - Other	Taxi	67.50				1			
10/7/2015	Taxi from FMC to Calgary Airport	AB - Other	Taxi	46.23				1			

Approver(s) for the claim	Approval Status	Approval Date
RHODES, DEBORAH	Approve	5-Nov-15

October 14, 2015

Attended AHS corporate/CPSM meetings, also  
Participated in a Pharmacy & Liver Clinic meeting

GST# R128599776

Edmonton Airports

Car-15J 2T2 Edmonton  
 Tax CodeCA5%  
 Exit Lane 07/10/15 21:46  
 Receipt [REDACTED]  
 Short-term parking tkt  
 HL - No. [REDACTED]  
 07/10/15 06:02  
 08/10/15 06:01  
 Period 1d0h0'  
 (Tax) \$25.00  
 Total \$25.00  
 Payment Received  
 [REDACTED] \$25.00  
 Auth [REDACTED]  
 Type: Swiped  
 Sub Total \$23.83  
 Tax 5% \$1.19

ASSOCIATED CAB ALTA LTD  
307 - 41 AVE NE (403) 299-1111  
INSIST ON THE PROFESSIONALS

DATE: 2015/10/07  
 PICK-UP TIME: 08:09  
 DROP-OFF TIME: 09:01  
 TRIP ID: 0  
 LOCATION: 073000-45824103787  
 CAR NUMBER: 1534  
 DRIVER: 175195  
 CARD TYPE: MC  
 CARD: [REDACTED]  
 EXPIRY: [REDACTED]  
 AUTH: [REDACTED]

FARE (\$): 67.50  
 EXTRA (\$): 0.00  
 SUBTTL (\$): 67.50

TIP (\$): \_\_\_\_\_

TOTAL (\$): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

FOR ONLINE TAXI BOOKINGS VISIT  
OUR WEBSITE@WWW.ASSOCIATEDCAB.CA

CUSTOMER'S COPY

All day parking at  
the Edmonton Intl  
Airport.

Tosci from <sup>Calgary</sup> Airport to  
AHS Southport office.

(2)

316 PERKINS ROAD SE  
CALGARY, AB T2A 1X2

TERMINAL ID: 314-635-956  
MERCHANT ID: 4327658P  
VEHICLE ID: 0213  
DRIVER ID: 7527  
GST ACCOUNT ID: 093261298  
TRIP NUMBER: [REDACTED]  
PASSENGERS: 1

10-07-2015  
START: 15:09 END: 15:36  
DISTANCE: 100.00 RATE: 1

FARE AMOUNT: \$ 32.76

TAX AMOUNT: \$ 1.64  
TIP AMOUNT: \$ 5.16

TOTAL : \$ 39.56

MASTER CARD SALE : [REDACTED]  
APPROVAL NUMBER : [REDACTED]

\*\*\*PASSENGER COPY\*\*\*

THANK YOU  
14833299 9999  
WWW.THECHECKERGROUP.COM



Taxi from Southport Office  
to allens Pharmacy & Clinic  
Clinic Mtg at FMC.

316 PERKINS ROAD SE  
CALGARY, AB T2A 1X2

TERMINAL ID: 314-651-222  
MERCHANT ID: 4327658G  
VEHICLE ID: 0433  
DRIVER ID: 6316  
GST ACCOUNT ID: 818402795  
TRIP NUMBER: [REDACTED]  
PASSENGERS: 1

10-07-2015  
START: 17:05 END: 18:03  
DISTANCE: 206.00 RATE: 1

FARE AMOUNT: \$ 36.25

TAX AMOUNT: \$ 1.91  
TIP AMOUNT: \$ 6.05

TOTAL : \$ 44.21

MASTER CARD SALE : [REDACTED]  
APPROVAL NUMBER : [REDACTED]

\*\*\*PASSENGER COPY\*\*\*

THANK YOU  
14833299 9999  
WWW.THECHECKERGROUP.COM



Taxi from Foothills  
Medical Centre to  
Calgary Airport.

## Executive Expenses Report Direct Billing Summary

### Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive and paid for by a third party vendor. The information will be used for public disclosure reporting.

### Expenses Paid Directly to Third Party Vendors:

AHS may have established accounts with certain vendors used to book travel and other expenses that are billed directly to AHS. Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund. It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

### Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- Information will be used for reporting purposes only.
- A personal cheque must be attached to cover expenses deemed ineligible.
- Indicate whether you have expenses to report in this section for this reporting period: YES

<b>Name :</b> Jitendra Prasad	<b>Reporting Period for the Month of :</b> Oct-15
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DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
07-Oct-16	Direct Billing	Airline Ticket	Attended AHS Corporate/CPSM Meetings and a Pharmacy & Liver Clinic Meeting in Calgary	Marlin Travel	372.96
26-Oct-15	Direct Billing	Airline Ticket	Attending a GHX Data Standards POC Project - Press Release Conference in Toronto	Marlin Travel	827.96
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
<b>Total Paid in the Month</b>					<b>\$ 1,200.92</b>

MARLIN TRAVEL  
O-O PERCY HUNT TRAVELGROUP INC  
MAIN FLOOR, 9929 108TH ST.  
EDMONTON, AB T5K 1G8  
GST Reg#: 885101915

Branch:

Agent:

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

Invoice Number:

Date:

Page:

Our Reference:

October 8, 2015

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## INVOICE

For

MR JITENDRA PRASAD

AC

Monday, October 26, 2015

 Air

AIR CANADA

From: EDMONTON INTL AB

To: TORONTO PEARSON

Stops: 0 Arrival: 26Oct15

SEAT SELECTION 12D

Flight: 154 G CLASS  
06:00 PM Equipment: A320  
11:41 PM

Mile(s) Flown: 1671

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

Invoice Number: [REDACTED]  
Date: October 8, 2015  
Page: 2/2  
Our Reference: [REDACTED]

# INVOICE

Tuesday, October 27, 2015

✈ Air

AIR CANADA  
From: TORONTO PEARSON  
To: EDMONTON INTL AB  
Stops: 0 Arrival: 27Oct15  
SEAT SELECTION 12D

Flight: 127 G CLASS  
02:50 PM Equipment: A320  
04:57 PM

Mile(s) Flown: 1671

Cost: AIR CANADA WE [REDACTED] 5 [REDACTED] 588.00

Tax: 69.96  
Ticket Total: 827.96

Total: Grand Total: 827.96  
Less Credit Card Payments: 827.96  
Credit / Balance Due To This Invoice: 0.00  
Total Balance Due: 0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE  
ACCEPTED:.....DECLINED:.....  
DOCUMENTATION REQUIRED: VALID PASSPORT... VISA... TOURIST CARD..  
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....  
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR  
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.  
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY  
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL  
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL  
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT  
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0  
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

Business Reason: JP will be attending a GHX Data Standards POC Project  
Press Release Conference in Toronto

MARLIN TRAVEL  
O-O PERCY HUNT TRAVELGROUP INC  
MAIN FLOOR, 9929 108TH ST.  
EDMONTON, AB T5K 1G8  
GST Reg#: 885101915  
Branch: [REDACTED]  
Agent: [REDACTED]

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

Invoice Number: [REDACTED]  
Date: October 1, 2015  
Page: 1/2  
Our Reference: [REDACTED]  
Your Reference: [REDACTED]

# INVOICE

For  
MR JITENDRA PRASAD  
AC [REDACTED]

Wednesday, October 7, 2015

✈ Air

AIR CANADA  
From: EDMONTON INTL AB  
To: CALGARY AB  
Stops: 0 Arrival: 07Oct15  
AIR CANADA E  
AIR CANADA CONFIRMATION [REDACTED]  
TICKET NUMBER [REDACTED]  
SEAT 6D

Flight: 8133 W CLASS  
07:00 AM Equipment: DH4  
07:50 AM

Mile(s) Flown: 163

✈ Air

AIR CANADA  
From: CALGARY AB  
To: EDMONTON INTL AB  
Stops: 0 Arrival: 07Oct15  
AIR CANADA E  
AIR CANADA CONFIRMATION [REDACTED]  
TICKET NUMBER [REDACTED]  
SEAT 5D

Flight: 8225 W CLASS  
08:15 PM Equipment: CRJ JET  
09:04 PM

Mile(s) Flown: 163

Cost: [REDACTED]

AIR CANADA W [REDACTED]

298.00

Tax: 74.96

Ticket Total: 372.96



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

Invoice Number: [REDACTED]  
Date: October 1, 2015  
Page: 2/2  
Our Reference: [REDACTED]  
Your Reference: [REDACTED]

# INVOICE

Total:

Grand Total:	372.96
Less Credit Card Payments:	372.96
Credit / Balance Due To This Invoice:	0.00
Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE  
ACCEPTED:.....DECLINED:.....  
DOCUMENTATION REQUIRED:VALID PASSPORT...VISA..TOURIST CARD..  
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....  
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR  
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.  
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1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT  
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0  
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

Business Reason: Attended AHS Corporate/CPSM meetings and Pharmacy &  
Liver Clinic Meeting