

# **AHS Board and Executive Expense Report**

Name Jitendra Prasad

Title Chief Program Officer, Contracting, Procurement & Supply Management

**Location** Edmonton

Expenses submitted during the month of April 2017

|                  |                                 |                      |     |       |    |      | Travel  | (1)    |            |    |                 |                                    |  |              |
|------------------|---------------------------------|----------------------|-----|-------|----|------|---------|--------|------------|----|-----------------|------------------------------------|--|--------------|
| MMM-YY           | Source<br>Document              | Purpose              | Aiı | rfare | M  | eals | Accommo | dation | Otł<br>Tra |    | Total<br>Travel | Professional<br>Development<br>(2) | Working<br>Sessions<br>Hosting and<br>Hospitality<br>(3) | Other<br>(4) |
| Apr-17<br>Apr-17 | Expense Claim<br>Direct Billing | Meetings<br>Meetings |     | 329   |    | 72   |         | 223    |            | 45 | 340<br>329      |                                    |  |              |
| Total            |                                 |                      | \$  | 329   | \$ | 72   | \$      | 223    | \$         | 45 | \$ 669          | \$ -                               | \$ -   | \$ -         |

**Total for** 

the Month \$ 669

Maximum daily single meal expense claimed in the month \$ 24 Maximum daily base hotel rate claimed in the month \$ 199 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 Public Disclosure Expense Claims**

| Claimant Name       | Claimant Title  |                | Expense<br>Claim Total |                          |           |                  |                |  |              |                   |                     |                  |
|---------------------|---|----------------|------------------------|--------------------------|-----------|------------------|----------------|--|--------------|-------------------|---------------------|------------------|
| PRASAD,<br>JITENDRA | Chief Program Officer,<br>Contracting, Procurement<br>& Supply Management | Edmonton       | \$ 339.92              |                          |           |                  |                |  |              |                   |                     |                  |
| Expense Date        | Business reason   | L              | Expense<br>Location    | Expense Type             |           | From<br>Location | To<br>Location | Justification                                    | # of<br>days | # of<br>Attendees | Attendee<br>Name(s) | Trip<br>Distance |
| 4/12/2017           | Attended CPSM Vax Conve<br>in Calgary                                     | Ū              | AB - Other<br>Zones    | Parking - Lot or Parkade | \$ 45.00  |                  |                |  | 1            |                   |                     |                  |
| 4/12/2017           | Attended CPSM Vax Conve<br>in Calgary                                     | ersion Meeting | AB - Other<br>Zones    | Meals Per Diem           | \$ 24.00  |                  |                | Dinner \$24.00                                   | 1            |                   |                     |                  |
| 4/12/2017           | Attended CPSM Vax Conve<br>in Calgary                                     | ersion Meeting | AB - Other<br>Zones    | Accommodations           | \$ 223.42 |                  |                |  | 2            |                   |                     |                  |
| 4/13/2017           | Attended CPSM Vax Conve<br>in Calgary                                     | ersion Meeting | AB - Other<br>Zones    | Meals Per Diem           | \$ 47.50  |                  |                | Bfast \$10.50<br>Lunch \$13.00<br>Dinner \$24.00 | 1            |                   |                     |                  |
| Approver(s) for t   | the claim   | Approval Statu | s                      | Approval                 | 1         | 1                | 1              | <u> </u>   | <u> </u>     | 1                 | _1                  |                  |

| Approver(s) for the claim | Approval Status | Approval<br>Date |
|---------------------------|-----------------|------------------|
| RHODES, DEBORAH           | Approve         | 17-May-17        |

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton Tax Code CA5%

P3 South E 13/04/17 17:15 Receipt

Nested Parking Short-term parking tkt DL/EP - No. 12/04/17 15:23 13/04/17 17:15 Period ld2h1' (Tax) \$45.

\$45.00 Total

\$45.00 Payment Received \$45.00

Auth: Type: Swiped

,pe: Swi Sub Total Tax 59

\$42.86 \$2.14



Mr Jitendra Prasad Canada

Room Number:

Arrival Date:

04-12-17

Departure Date:

04-13-17

CRS Number: Rewards No:

1 of 1

Page No:

INVOICE

Folio No:

04-13-17

| Date     | Description                  |         | Charges | Credits |
|----------|------------------------------|---------|---------|---------|
| 04-12-17 | Room Charge                  |         | 199.00  |         |
| 04-12-17 | Rooms Destination Market Fee |         | 5.97    |         |
| 04-12-17 | Rooms Tourism Levy           |         | 8.20    |         |
| 04-12-17 | Room GST                     |         | 10.25   |         |
| 04-13-17 | Visa Card                    |         |         | 223.42  |
|          |                              | Total   | 223.42  | 223.42  |
|          |                              | Balance | 0.00    |         |

Your Marriott Rewards Points/Frequent Flyer Miles earned will be credited to your account and will appear on your next statement.



# **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.

| <ul> <li>Indicate wheth</li> </ul> | er you have expenses to report in this section | n for this reporting period: | YES                     |             |
|------------------------------------|--|------------------------------|-------------------------|-------------|
| Name :                             | Jitendra Prasad                                | Reporting Period for the Mon | nth of: March 21 to Apr | il 20, 2017 |

| DD-MMM-YYYY       | Payment Method | Category       | Description/Purpose of the Expense                    | Name of Vendor | Amount Pa | aid  |
|-------------------|----------------|----------------|---|----------------|-----------|------|
| 31-Mar-2017       | Direct Billing | Airline Ticket | CPSM Operational Alignment Meeting - Flight cancelled | Marlin Travel  | 179       | 9.20 |
| 12-Apr-2017       | Direct Billing | Airline Ticket | Attended CPSM Vax Conversion Meeting in Calgary       | Marlin Travel  | \$150     | 0.00 |
|                   |                |                |   |                |           |      |
|                   |                |                |   |                |           |      |
|                   |                |                |   |                |           | -    |
| Total Paid in the | • Month        |                |   |                | \$ 329    | 9.20 |



#### Invoice

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

Trip #: **Booking Date:** 27 Mar 17 Client: Agent:

File Locator:

PASSENGERS: MR JITENDRA PRASAD

| REFERENCE/ DESC | RIPTION            |              |             | FARE   | HST/GST | PST     | OTHER<br>TAXES | PENALTY | TOTAL      |
|-----------------|--------------------|--------------|-------------|--------|---------|---------|----------------|---------|------------|
| AIR CANADA ONL  | INE Confirmation # |              |             | 29.20  | 0.00    | \$0.00  | 0.00           | 0.00    | 29.20 CAD  |
| AIR CANADA ONL  | INE Confirmation # |              |             | 150.00 | 0.00    | \$0.00  | 0.00           | 0.00    | 150.00 CAD |
|                 |                    |              | Total:      | 179.20 | 0.00    | 0.00    | 0.00           | 0.00    | 179.20 CAD |
| PAYMENTS        | Invoice #          | Payment Date | Card Holder |        | Form of | Payment |                |         | Amount     |
|                 |                    | 03/27/2017   |             |        |         |         |                |         | 150.00 CAD |
|                 |                    | 03/27/2017   |             |        |         |         |                |         | 150.00 CAD |
|                 |                    |              |             |        |         |         | Total Pa       | yment:  | 300.00 CAD |

-120.80 CAD **Balance Due CAD Currency** 

Payment Due Date:

27 Mar 17

Total GST

0.00

Total HST

\$0.00

**CORPORATE UNIT 101** 

REASON FOR TRAVEL COSN OPP ALLIGNMENT 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 --------WESTJET AIRLINE RULES------ TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY TICKET MUST BE CANCELLED AT LEAST 2 HOURS PRIOR OR NO CREDIT WILL APPLY 24 HOURS IN ADVANCE GO TO WWW.WESTJET.COM TO CHECK IN AND PRINT YOUR **BOARDING PASS.** 

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



# MY ITINERARY

 Passengers
 Citizenship
 Required Travel Documents

 JITENDRA PRASAD
 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: | JITENDRA PRAS | SAD                                |          |                                   | Booking Date:<br>File Locator/Ticket #: | 03/27/ | 2017  |
|-------------|---------------|------------------------------------|----------|-----------------------------------|---|--------|-------|
| Airline     | Flight        | From                               | Terminal | То                                | Class                                   | Seat   | Stops |
| AIR CANADA  | 08133         | EDMONTON INTL<br>03/31/2017 7:20AM |          | CALGARY INTL<br>03/31/2017 8:19/  | V<br>AM                                 |        |       |
| Passengers: | JITENDRA PRAS | SAD                                |          |                                   | Booking Date:<br>File Locator/Ticket #: | 03/27/ | 2017  |
| Airline     | Flight        | From                               | Terminal | То                                | Class                                   | Seat   | Stops |
| AIR CANADA  | 08133         | EDMONTON INTL<br>03/31/2017 7:20AM |          | CALGARY INTL<br>03/31/2017 8:19/  | AM                                      |        |       |
| Passengers: | JITENDRA PRAS | SAD                                |          |                                   | Booking Date:<br>File Locator/Ticket #: | 03/27/ | 2017  |
| Airline     | Flight        | From                               | Terminal | То                                | Class                                   | Seat   | Stops |
| AIR CANADA  | 08225         | CALGARY INTL<br>03/31/2017 6:00PM  |          | EDMONTON INTL<br>03/31/2017 6:528 |   |        |       |
|             |               |                                    |          |                                   | Booking Date:                           | 03/27/ | 2017  |
| Passengers: | JITENDRA PRAS | SAD                                |          |                                   | File Locator/Ticket #:                  | ś      |       |
| Airline     | Flight        | From                               | Terminal | То                                | Class                                   | Seat   | Stops |
| AIR CANADA  | 08225         | CALGARY INTL<br>03/31/2017 6:00PM  |          | EDMONTON INTL<br>03/31/2017 6:52  |   |        |       |



### Invoice

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

Trip #: 11 Apr 17 **Booking Date:** Client: Agent: File Locator:

PASSENGERS: MR JITENDRA PRASAD

| REFERENCE/ DESCRIP               |           | FARE                       | HST/GST     | PST     | OTHER<br>TAXES | PENALTY    | TOTAL     |            |                      |
|----------------------------------|-----------|----------------------------|-------------|---------|----------------|------------|-----------|------------|----------------------|
| AIR CANADA ONLINE Confirmation # |           |                            | 150.00      | 0.00    | \$0.00         | 0.00       | 0.00      | 150.00 CAD |                      |
|                                  |           |                            | Total:      | 150.00  | 0.00           | 0.00       | 0.00      | 0.00       | 150.00 CA            |
| PAYMENTS                         | Invoice # | Payment Date<br>04/10/2017 | Card Holder |         | Form           | of Payment |           |            | Amount<br>150.00 CAD |
|                                  |           | 01110/2011                 |             |         |                |            | Total Pa  | syment:    | 150.00 CAD           |
|                                  |           |                            |             |         | E              | Balance Du | e CAD Cui | rency      | 0.00 CAI             |
|                                  |           |                            |             | Total G | ST             | 0.00       | Tota      | al HST     | \$0.00               |

**CORPORATE UNIT 101** REASON FOR TRAVEL CPSM VAX CONVERSION

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 ----------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.

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET

**EDMONTON AB** T5J 3E4

**Booking Date:** Client: Agent:

Trip #:

11 Apr 17

File Locator:

MY ITINERARY

**Passengers** JITENDRA PRASAD Citizenship

Required Travel Documents

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

JITENDRA PRASAD Passengers:

**Booking Date:** 

04/10/2017

File Locator/Ticket #:

Seat

Airline

Flight

**EDMONTON INTL** 

Terminal To

CALGARY INTL

Class

Stops

AIR CANADA

08169

04/12/2017 5:47PM





AIR

Passengers:

JITENDRA PRASAD

**Booking Date:** File Locator/Ticket #: 04/10/2017

Airline

Flight

From

Terminal To

Class Q

Seat Stops

AIR CANADA

08225

**CALGARY INTL** 

**EDMONTON INTL** 

04/13/2017 6:00PM

04/13/2017 6:50PM