

## 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 2018

Travel (1)										
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Apr-18	P-Card	Meetings			569	88	657			
Apr-18	Expense Claim	Meetings				302	302			
Apr-18	Direct Billing	Meetings	1,048				1,048			
<b>Total</b>			<b>\$ 1,048</b>	<b>\$ -</b>	<b>\$ 569</b>	<b>\$ 390</b>	<b>\$ 2,007</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

**Total for the Month**      \$      2,007

Maximum daily single meal expense claimed in the month      \$      -  
 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 P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
PRASAD, JITENDRA	Chief Program Officer, Contracting, Procurement & Supply Management	Edmonton	\$ 657.25								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Locatio	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
3/18/2018	Accommodation to attend AHS Senior Leaders Meeting	AB - Other Zones	Accommodations	\$ 345.78			Accommodation to attend AHS Senior Leaders Meeting	3			
3/26/2018	Parking at Edmonton International Airport to attend Rockyview General Hospital Tour/Meeting with Susan Reader	AB - Local	Parking - Lot or Parkade	\$ 25.00			Parking at Edmonton International Airport to attend Rockyview General Hospital Tour/Meeting with Susan Reader	1			
3/27/2018	Taxi from IBM Building to CN Tower to attend Optime Interface Design Meetings (Sessions 1 & 2) with Nixon Lau	AB - Local	Taxi	\$ 6.80	IBM Building	CN Tower	Taxi from IBM Building to CN Tower to attend Optime Interface Design Meetings (Sessions 1 & 2) with Nixon Lau	1			
3/28/2018	Book of 10 bus tickets for travel to future dated meetings	AB - Local	Bus	\$ 26.25			Book of 10 bus tickets for travel to future dated meetings	1			
4/11/2018	Parking at BMO Centre to attend Connect Care Directional Setting Session Day 2	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00			Parking at BMO Centre to attend Connect Care Directional Setting Session Day 2	1			
4/12/2018	Parking at BMO Centre to attend Connect Care Directional Setting Session Day 3	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00			Parking at BMO Centre to attend Connect Care Directional Setting Session Day 3	1			
4/13/2018	Accommodation to attend Connect Care Directional Setting Session Days 2 & 3	AB - Other Zones	Accommodations	\$ 223.42			Only hotel available in the surrounding area	1			
<b>Approver(s) for the claim</b>		<b>Approval Status</b>		<b>Approval Date</b>							
RHODES, DEBORAH		Approve		27-Apr-18							



MARRIOTT  
CALGARY AIRPORT  
IN-TERMINAL HOTEL

Calgary Airport Marriott In-Terminal Hotel  
2008 Airport Road NE Calgary, Alberta, Canada T2E 3B9  
Telephone: (403) 717-0522 Fax: (587) 232-0600

Alberta Health Services  
Mr Jitendra Prasad

Room: [REDACTED]  
Folio: [REDACTED]  
Cashier: [REDACTED]  
Arrival: 03-18-18  
Departure: 03-20-18

Group: AB Health Services, [REDACTED]

Date	Description	Additional Information	Charges	Credits
03-18-18	Room Charge		154.00	
03-18-18	Rooms Destination Market Fee		4.62	
03-18-18	Rooms Tourism Levy		6.34	
03-18-18	Room GST		7.93	
03-19-18	Room Charge		154.00	
03-19-18	Rooms Destination Market Fee		4.62	
03-19-18	Rooms Tourism Levy		6.34	
03-19-18	Room GST		7.93	
03-20-18	Master Card	[REDACTED]		345.78

GST Summary	
Reg No: 741907497 RT0001	
Room	15.86
F&B	0.00
Other	0.00
<b>Total</b>	<b>15.86</b>

Total	345.78	345.78
Balance Due	0.00	CDN

Line 1: Accommodations to attend AHS Senior Leader's Meeting  
in Calgary

Guest Signature: \_\_\_\_\_

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.

GREATER EDMONTON TAXI  
SERVICE  
10135 31 AVE NW  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/03/27  
TIME 0101 12:44:44  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE TOTAL  
**\$6.80**

MasterCard

**APPROVED**

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456  
BARREL TAXI 780.489.7777  
EDMT

Line 2

Taxi from IBM Building  
to CN Tower to attend  
Optime Interface Design  
Meeting (sessions 1 & 2)  
with Nixon Lau.

GST# R128599776  
Edmonton Airports  
Can-T5J 2T2 Edmonton  
Tax Code CA5%

POF 2nd Fl 26/03/18 19:18  
Receipt [REDACTED]

Short-term parking tkt  
HL - No. 061658  
26/03/18 05:20  
26/03/18 19:18  
Period 1d0h0'  
(Tax) \$25.00

Total \$25.00

Payment Received  
MC \$25.00

Merch: [REDACTED]  
Auth: [REDACTED]  
Type: Swiped

Sub Total \$23.81  
Tax 5% \$1.19

0699874 - 1/1

Line 3  
Parking at Edmonton  
International Airport  
to attend Rockyview  
General Hospital Tour/  
Meeting with Susan  
Reader

save-on-foods #6613  
9th & Jasper  
Visit www.saveonfoods.com  
G.S.T #R846980878

Bus Pass 26.25  
Sub Total \$26.25

BALANCE DUE \$26.25  
Credit \$26.25

-----TRANSACTION RECORD-----

TYPE: Purchase

ACCT: MASTERCARD \$ 26.25

CARD NUMBER: [REDACTED]  
DATE/TIME: 03/28/2018 12:03:22  
REFERENCE #: [REDACTED] C  
TERM:  
AUTHOR.# : [REDACTED]  
AID: [REDACTED]  
TVR: [REDACTED]  
TSI [REDACTED]  
MasterCard

01 APPROVED - THANK YOU 027

IMPORTANT:  
retain this copy for your records

CUSTOMER COPY

\*\*\*\*\*

CHANGE \$0.00

\*\*\*\*\*

Line 4

Book of bus tickets (10 tickets) for  
travel to future dated meetings

WELCOME TO  
CALGARY EXHIBITION &  
STAMPEDE LTD.

STAMPEDE PARKING  
DEPARTMENT  
1410 OLYMPIC WAY SE  
CALGARY AB

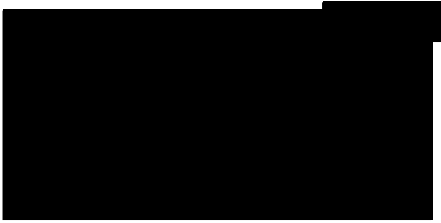
Station : [REDACTED]  
Cashier : [REDACTED]  
Trans# : [REDACTED]  
Ticket : [REDACTED]  
Time in : 11/04/2018 13:47:20  
Paid to : 11/04/2018 23:59:59  
Duration : 10:12:38  
Plate : [REDACTED]

BMOC : \$ 14.29  
Subtotal : \$ 14.29  
\*GST : \$ 0.71  
Total : \$ 15.00  
CC/DB : \$ 15.00

TYPE : PURCHASE  
DATE/TIME : 11 Apr 2018 13:47:42  
CARD NUMBER : [REDACTED]  
ACCOUNT : MASTERCARD  
REFERENCE # : [REDACTED]  
AUTH # : [REDACTED]  
MasterCard : [REDACTED]

01 APPROVED - THANK YOU 027

IMPORTANT - retain this copy for your records



ENJOY YOUR STAY  
GST#R118823467  
ONE ENTRY ONLY

Line 5

Parking at BMO Centre in  
Calgary to attend connect  
care Directional Setting  
Session Day 2

CARD : [REDACTED]  
CARD TYPE : MASTERCARD  
DATE : 2018/04/12  
TIME : 9952 09:22:42  
RECEIPT NUMBER : [REDACTED]

PURCHASE  
TOTAL

\$15.00

MasterCard

APPROVED

AUTH# : [REDACTED]  
THANK YOU

CARDHOLDER COPY




IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

Line 6

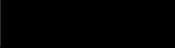
Parking at BMO Centre  
in Calgary to attend  
Connect care Directional  
Setting session Day 3

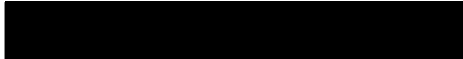


133 9th Avenue SW,  
 Calgary, AB, Canada T2P 2M3  
 T (403) 262-1234 F (403) 260-1260  
 G.S.T. Registration # 846543619

Room :   
 Folio # :   
 Cashier # :   
 Page # : 1 of 1

Mr Jitendra Prasad  


Arrival : 04-11-18  
 Departure : 04-12-18  
 Fairmont President's Club  


Date	Description	Additional Information	Charges	Credits
04-11-18	Room Charge		199.00	
04-11-18	Calgary Destination Marketing F		5.97	
04-11-18	Alberta Tourism Levy (4%)		8.20	
04-11-18	Room GST		10.25	
04-12-18	MasterCard			223.42
<b>Total</b>			<b>223.42</b>	<b>223.42</b>
<b>Balance Due</b>			<b>0.00</b>	

**GST Summary**

Room	10.25
F&B	0.00
Other	0.00
<b>Total</b>	<b>10.25</b>

Thank you for choosing Fairmont Hotels & Resorts.  
 To provide feedback about your stay, please contact Sunny Joseph, General Manager, at Sunny.Joseph@fairmont.com.  
 We also invite you to share memories of your experience on our community forum - visit www.everyonesanoriginal.com.

Merci d'avoir choisi Hôtels Fairmont.  
 Vous pouvez nous faire part de vos commentaires au sujet de votre séjour en écrivant au Directeur général, Sunny Joseph à Sunny.Joseph@fairmont.com.  
 Nous vous invitons également à partager vos observations ou photos sur notre forum communautaire www.everyonesanoriginal.com (anglais seulement).

Line 1:

Accommodations to attend connect care Directional setting sessions  
 Day 2 & 3 in Calgary

For information or reservations, visit us at  
**www.fairmont.com** or call Fairmont Hotels & Resorts from:  
 United States or Canada 1 800 441 1414  
 Pour information et réservations visitez notre web au  
**www.fairmont.com** ou téléphoner au Hôtels Fairmont de:  
 États-Unis ou Canada 1 800 441 1414

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of or the full amount of these charges. Overdue balance subject to a surcharge at the rate of 1.5% per month after one month. (18.00% per annum.)  
 I have accepted delivery of The Globe and Mail. Had I refused, I would have been eligible for a \$1.00 (Mon-Fri) and \$2.00 (Sat.) credit to my account. (At participating hotels.)

Je me porte personnellement responsable du règlement total de cette note au cas où la compagnie, l'association ou son représentant désigné en refuserait le paiement. Les comptes en souffrance sont sujets à un intérêt de 1.5% par mois après un mois (18.00% par année). J'ai accepté la livraison du journal The Globe and Mail. Si j'avais refusé, j'aurais pu obtenir un crédit à mon compte de 1.00\$ par jour (du Lundi au Vendredi) et de 2.00\$ le Samedi. (Dans les hôtels participants.)

**Thank you for choosing to stay with Fairmont Hotels & Resorts**  
**Merci d'avoir choisi les Hôtels Fairmont**

## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
PRASAD, JITENDRA	Chief Program Officer, Contracting, Procurement & Supply Management	Edmonton	\$ 301.88								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
4/11/2018	To attend Connect Care Directional Setting Session		Mileage-Other	\$ 150.94	Edmonton, home	Calgary, BMO Centre	To attend Connect Care Directional Setting Session	1			298.9
4/12/2018	Return from Connect Care Directional Setting Session		Mileage-Other	\$ 150.94	Calgary, BMO Centre	Edmonton, home	Return from Connect Care Directional Setting Session	1			298.9
Approver(s) for the claim		Approval Status	Approval Date								
RHODES, DEBORAH		Approve	27-Apr-18								

## 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 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> March 21 to April 20, 2018
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
26-Apr-2018	Direct Billing	Airline Ticket	Attended Pan-Canadian in-person meeting held in Winnipeg	Marlin Travel	213.00
30-Apr-2018	Direct Billing	Airline Ticket	Attended HealthPRO Clinical Contract Advisory Committee Meeting, Toronto	Marlin Travel	114.70
14-May-2018	Direct Billing	Airline Ticket	Attending HSCN Supply Chain Conference, Toronto	Marlin Travel	555.79
5-Jun-2018	Direct Billing	Airline Ticket	Attending Scanhealth Global Networking Event in Calgary	Marlin Travel	164.91
<b>Total Paid in the Month</b>					

\$1,048.40





**Invoice**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 06 Apr 18 Client: [REDACTED] Agent: [REDACTED] Agents email: [REDACTED] File Locator: [REDACTED]
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**PASSENGERS:** MR JITENDRA PRASAD

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
WESTJET Ticket # [REDACTED]	79.00	0.00	\$0.00	37.48	0.00	116.48 CAD
AIR CANADA Ticket [REDACTED]	78.75	0.00	\$0.00	0.00	0.00	78.75 CAD
AIR CANADA Ticket [REDACTED]	18.10	0.00	\$0.00	0.00	0.00	18.10 CAD
<b>Total:</b>	<b>175.85</b>	<b>0.00</b>	<b>0.00</b>	<b>37.48</b>	<b>0.00</b>	<b>213.33 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	04/05/2018		[REDACTED]	116.48 CAD
		04/06/2018		[REDACTED]	78.75 CAD
		04/06/2018		[REDACTED]	18.10 CAD
<b>Total Payment:</b>					<b>213.33 CAD</b>

**Balance Due CAD Currency 0.00 CAD**

CORPORATE UNIT 101 *PcCHep Mtg - Winnipeg*      Total GST      0.00      Total HST      \$0.00  
 REASON FOR TRAVEL HEALTHPRO MEETING

\*\*\*\*\* 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 CODE 2EC0 \*\*\*\*\* \*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*  
 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. -----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

Trip #: [REDACTED]  
Booking Date: 06 Apr 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]  
File Locator: [REDACTED]

### MY ITINERARY

<b>Passengers</b> JITENDRA PRASAD	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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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

<b>Passengers:</b> JITENDRA PRASAD	<b>Booking Date:</b> 05 Apr 18					
	<b>File Locator/Ticket #:</b> [REDACTED]					
<b>Airline</b>	<b>Flight</b>	<b>From</b>	<b>Terminal</b>	<b>To</b>	<b>Class/Seat</b>	<b>Stops</b>
WESTJET	00318	EDMONTON INTL 25 Apr 18 6:00AM		WINNIPEG INTL 25 Apr 18 8:52AM	C/	
<b>Passengers:</b> JITENDRA PRASAD	<b>Booking Date:</b> 06 Apr 18					
	<b>File Locator/Ticket #:</b> [REDACTED]					
<b>Passengers:</b> JITENDRA PRASAD	<b>Booking Date:</b> 06 Apr 18					
	<b>File Locator/Ticket #:</b> [REDACTED]					
<b>Airline</b>	<b>Flight</b>	<b>From</b>	<b>Terminal</b>	<b>To</b>	<b>Class/Seat</b>	<b>Stops</b>
AIR CANADA	8517	WINNIPEG INTL 25 Apr 18 4:15PM		EDMONTON INTL 25 Apr 18 5:24PM	W/	



**Invoice**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 19 Apr 18 Client: [REDACTED] Agent: [REDACTED] Agents email: [REDACTED] File Locator: [REDACTED]
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PASSENGERS: MR JITENDRA PRASAD

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
WESTJET Ticket [REDACTED]	14.70	0.00	\$0.00	0.00	100.00	114.70 CAD
<b>Total:</b>	<b>14.70</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>100.00</b>	<b>114.70 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	04/17/2018	[REDACTED]	[REDACTED]	114.70 CAD
<b>Total Payment:</b>					<b>114.70 CAD</b>

**Balance Due CAD Currency 0.00 CAD**

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL HEALTHPRO

\*\*\*\*\* 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 CODE 2EC0 \*\*\*\*\* \*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*  
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

Trip #: [REDACTED]  
Booking Date: 19 Apr 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]  
File Locator: [REDACTED]

### MY ITINERARY

<b>Passengers</b> JITENDRA PRASAD	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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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 PRASAD  
Booking Date: 17 Apr 18  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	00436	EDMONTON INTL 29 Apr 18 10:15AM		TORONTO PEARSON 29 Apr 18 3:57PM	P/	
WESTJET	00441	TORONTO PEARSON 01 May 18 6:00PM		EDMONTON INTL 01 May 18 8:05PM	G/	



**Invoice**

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

Trip #: [REDACTED]  
 Booking Date: 19 Apr 18  
 Client: [REDACTED]  
 Agent: [REDACTED]  
 Agents email: [REDACTED]  
 File Locator: [REDACTED]

**PASSENGERS:** MR JITENDRA PRASAD

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
WESTJET Ticket # [REDACTED]	439.83	0.00	\$0.00	115.96	0.00	555.79 CAD
<b>Total:</b>	<b>439.83</b>	<b>0.00</b>	<b>0.00</b>	<b>115.96</b>	<b>0.00</b>	<b>555.79 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	04/17/2018	[REDACTED]	[REDACTED]	555.79 CAD
<b>Total Payment:</b>					<b>555.79 CAD</b>

**Balance Due CAD Currency 0.00 CAD**

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
 REASON FOR TRAVEL HSCN MEETING

\*\*\*\*\* 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 CODE 2EC0 \*\*\*\*\*  
 \*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
 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

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

Trip #: [REDACTED]  
Booking Date: 19 Apr 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]  
File Locator: [REDACTED]

### MY ITINERARY

<b>Passengers</b> JITENDRA PRASAD	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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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 PRASAD

Booking Date: 17 Apr 18  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	00438	EDMONTON INTL 13 May 18 1:15PM		TORONTO PEARSON 13 May 18 6:57PM	I/	



AIR

Passengers: JITENDRA PRASAD

Booking Date: 17 Apr 18  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	00443	TORONTO PEARSON 16 May 18 7:59PM		EDMONTON INTL 16 May 18 10:04PM	G/	



A DIRECT TRAVEL<sup>SM</sup> COMPANY

Invoice

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

Trip #:
Booking Date: 19 Apr 18
Client:
Agent:
Agents email:
File Locator:

PASSENGERS: MR JITENDRA PRASAD

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row 1: WESTJET Ticket, 115.43, 0.00, \$0.00, 49.48, 0.00, 164.91 CAD. Row 2: Total: 115.43, 0.00, 0.00, 49.48, 0.00, 164.91 CAD.

Table with columns: Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row 1: [Redacted], 04/16/2018, [Redacted], [Redacted], 164.91 CAD. Row 2: Total Payment: 164.91 CAD.

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101 REASON FOR TRAVEL EXECUTIVE LEADERS MEETING - Scan health global networking session. Total GST 0.00 Total HST \$0.00

\*\*\*\*\* 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 CODE 2EC0 \*\*\*\*\* PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\* 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.

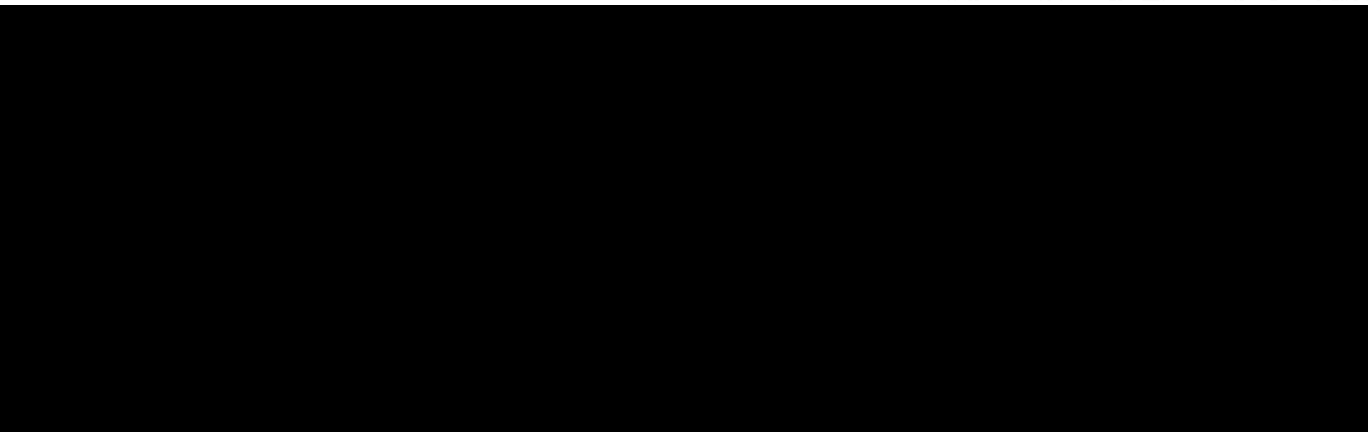
ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 19 Apr 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]  
File Locator: [REDACTED]

### 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 PRASAD

Booking Date: 16 Apr 18  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	03229	CALGARY INTL 05 Jun 18 6:15PM		EDMONTON INTL 05 Jun 18 7:07PM	P/	