

AHS Board and Executive Expense Report

Name Katherine Chubbs
Title Chief Zone Officer, South Zone
Location Lethbridge

Expenses submitted during the month of December 2017

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)
Dec-17	P-Card	Meetings			121	28	149			
Dec-17	Expense Claim	Meetings		24		39	63			
Dec-17	Direct Billing	Meetings	720				720			
Total			\$ 720	\$ 24	\$ 121	\$ 67	\$ 932	\$ -	\$ -	\$ -

Total for the Month \$ 932

Maximum daily single meal expense claimed in the month \$ 13
Maximum daily base hotel rate claimed in the month \$ 109
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									
CHUBBS, KATHERINE	Chief Zone Officer, South Zone	Lethbridge	\$ 149.49									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/24/2017	In Med Hat on Nov. 24 for 4 AMH program tours. Overnight to allow KC to attend the SZ East Christmas Party @ 630 p.m. Nov. 24		AB - Local	Accommodations	\$ 120.99			In Med Hat on Nov. 24 for 4 AMH program tours. Overnight to allow KC to attend the SZ East Christmas Party @ 630 p.m. Nov. 24	1			
11/29/2017	In Calgary @ the Rockyview for the QSO meeting from 1200 to 1600 hours		AB - Other Zones	Parking - Lot or Parkade	\$ 14.25			In Calgary @ the Rockyview for the QSO meeting	1			
12/4/2017	In Calgary for the Cancer Care Seed Grant Evaluations @ the TBCC		AB - Other Zones	Parking - Lot or Parkade	\$ 14.25			In Calgary for the Cancer Care Seed Grant Evaluations @ the TBCC	1			
Approver(s) for the claim		Approval Status		Approval Date								
HUBAND, BRENDA		Approve		22-Dec-17								



**Clarion Hotel & Conference Centre
(CN841)**

954 7th Street S.W.
Medicine Hat, AB T1A 7R7
(403) 527-8844
GM.CN841@choicehotels.com

Account: [REDACTED]

Date: 11/25/17

Room: [REDACTED]

Arrival Date: 11/24/17

Departure Date: 11/25/17

Check In Time: 11/24/17 3:22 PM

Check Out Time: 11/25/17 7:58 AM

Rewards Program ID:

You were checked out by: [REDACTED]

You were checked in by: [REDACTED]

Total Balance Due: 0.00

CHUBBS, KATHERINE MS

Post Date	Description	Comment	Amount
11/24/17	Master Card	[REDACTED]	(120.99)

11/24/17	Room Charge	[REDACTED] CHUBBS, KATHERINE MS	109.00
11/24/17	Tourism Levy		4.36
11/24/17	Destination Marketing Fee		2.18
11/24/17	Goods & Services Tax		5.45

Folio Summary 11/24/17 - 11/24/17

Room Charge	109.00
Destination Marketing Fee	2.18
Goods & Services Tax	5.45
Tourism Levy	4.36
Master Card	(120.99)

Balance Due: 0.00

This rate is eligible for partner rewards. If this rate is changed, you may no longer be entitled to partner rewards.

GST# 850078775RT0001
1764239 Alberta Ltd.

x _____



You could be earning free nights and other great rewards. Join Choice Privileges today, at www.choiceprivileges.com.

In Med Hat on
Nov. 24 for 4
AMH program
tours.
Overnight to allow
Katherine to attend
the BZ East
Christmas Party @
630p.m. Nov 24.

Alberta Health
Services
RGH Lot 1

RECEIPT

ENTRY DATE/TIME:

29/11/17 10:07

PAY DATE/TIME:

29/11/17 15:51

PARK-DUR.: HRS:MIN

0:05:44

ALLOWED EXIT TO:

30.11.17 10:22

PAID: \$ 14.25

MASTER CARD

REF. [REDACTED]

* Parking Rates *

* Are GST Exempt *

* Please Exit *

* Site Within *

* 15 Minutes *

* After Payment *

* Is Made *

* No In/Out *

* Privileges *

* Managed by *

* Alberta *

* HealthServices *

* Have Questions *

* Or Concerns? *

* Call Us *

* 403-943-3725 *

QSO mty Calgary, Rockyview 1200-1600 hrs

10 Seed Grant eval.

RECEIPT

Foothills

Medical Centre

Lot 3 - South

mty.
9-4@
Tom
Baker

License Plate Number

Expiration Date/Time

08:14 AM
DEC 05, 2017

Purchase Date/Time: 08:14am Dec 04, 2017
Total Due: \$14.25 Rate: \$14.25 - 24 Hours
Total Paid: \$14.25 Pmt Type: CC (Swipe)
Ticket [REDACTED]
S/N [REDACTED]
Setting: FMC Lot 03 - South
Mach Name: CA-FMC-0302

MasterCard

Auth #: [REDACTED]

www.ahs.ca
Do Not Place On Dash

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CHUBBS, KATHERINE	Chief Zone Officer, South Zone	Lethbridge	\$ 62.63									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/24/2017	In Med Hat for 4 AMH program/site visits		AB - Other Zones	Meals Per Diem	\$ 13.00			In Med Hat for 4 AMH program/site visits and for the SZ East Christmas Party in the evening. Lunch \$13.00	1			
11/28/2017	Fleet car fuel. In Med Hat for Palliser Triangle HAC and Physician Recognition event		AB - Local	Fuel	\$ 39.13	Chinook Regional Hospital, Lethbridge 960 19th Street South	Medicine Hat Regional Hospital 666 5 Str SW Med Hat	Fleet car fuel. Station did not take ARI so had to use personal card.	1			
12/4/2017	At the Tom Baker Cancer Centre for 10 See Grant Evaluations		AB - Other Zones	Meals Per Diem	\$ 10.50			Drove from Lethbridge to Calgary (Tom Baker Cancer Centre) for the Seed Grant Evaluations meeting. Bfast \$10.50	1			
Approver(s) for the claim		Approval Status		Approval Date								
HUBAND, BRENDA		Approve		22-Dec-17								

Safeway
2750 FAIRWAY PLAZA ROAD
LETHBRIDGE, AB
T1K6Z3

STORE NO: 8854
GST/HST: 831536503

Inv#: [REDACTED]
Trans: Pre-Auth
Completion [REDACTED]

VISA CREDIT

AID: [REDACTED]
Seq#: [REDACTED]
Term: [REDACTED]
Auth No: [REDACTED]
ACI/ISO: [REDACTED]
Date: 28/11/2017
Time: 0:00:00

APPROVED

Pump # : 2-Regular
Vol : 36.100 L
Price/L: \$1.084
Total: \$39.13

Fuel Includes:
GST/HST(5%): \$1.86

Fleet car fuel. didn't have AR1 -
Seed Grant Evaluations @ TBC

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**

Name :	Katherine Chubbs	Reporting Period for the Month of :	Dec-17
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
8-Dec-2017	DIRECT BILLING	Airline Ticket	Air Canada return flights Lethbridge to Edmonton to attend the Quality, Safety, and Outcomes Improvement Executive Committee meeting.	Marlin Travel	399.96
14-Dec-2017	DIRECT BILLING	Airline Ticket	Air Canada return flights Lethbridge to Edmonton to attend the Listening Day follow up to Truth and Reconciliation Committee meeting at the Focus Building in Edmonton	Marlin Travel	319.96
Total Paid in the Month					\$ 719.92

**Invoice**

ALBERTA HEALTH SERVICES
KATHERINE CHUBBS
10030 107 STREET
EDMONTON AB
CA
T5J3E4

Trip #: [REDACTED]
Booking Date: 08 Dec 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

PASSENGERS: MS KATHERINE CHUBBS

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	340.00	0.00	\$0.00	59.96	0.00	399.96 CAD
Total:	340.00	0.00	0.00	59.96	0.00	399.96 CAD

PAYMENTS

Invoice #	Payment Date	Card Holder	Form of Payment	Amount
[REDACTED]	12/08/2017	[REDACTED]	[REDACTED]	399.96 CAD
Total Payment:				399.96 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL QUALITY SAFETY OIE COMMITTEE

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
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
KATHERINE CHUBBS
10030 107 STREET
EDMONTON AB
CA
T5J3E4

Trip #: [REDACTED]
Booking Date: 08 Dec 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
KATHERINE CHUBBS	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: KATHERINE CHUBBS				Booking Date: 08 Dec 17	
				File Locator/Ticket #: [REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat Stops
AIR CANADA	07212	LETHBRIDGE 19 Jan 18 5:15AM		CALGARY INTL 19 Jan 18 6:06AM	L/
AIR CANADA	08130	CALGARY INTL 19 Jan 18 7:15AM		EDMONTON INTL 19 Jan 18 8:13AM	L/
AIR CANADA	08157	EDMONTON INTL 19 Jan 18 7:45PM		CALGARY INTL 19 Jan 18 8:46PM	A/
AIR CANADA	07221	CALGARY INTL 19 Jan 18 11:35PM		LETHBRIDGE 20 Jan 18 12:26AM	A/

GOVERNMENT CENTRE

MAIN FLOOR, 9929- 108TH ST, EDMONTON, AB T5K1G8

Tél.: 780 425 8611

**Invoice**

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

Trip #: [REDACTED]
Booking Date: 14 Dec 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

PASSENGERS: MS KATHERINE CHUBBS

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	260.00	0.00	\$0.00	59.96	0.00	319.96 CAD
Total:	260.00	0.00	0.00	59.96	0.00	319.96 CAD

PAYMENTS

Invoice #	Payment Date	Card Holder	Form of Payment	Amount
[REDACTED]	12/14/2017	[REDACTED]	[REDACTED]	319.96 CAD
Total Payment:				319.96 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL TRC 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
CODE 2ECO ***** PLEASE REVIEW YOUR ITINERARY FOR ACCURACY***
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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: 14 Dec 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
KATHERINE CHUBBS	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: KATHERINE CHUBBS				Booking Date: 14 Dec 17		
				File Locator/Ticket #: [REDACTED]		
Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	07212	LETHBRIDGE		CALGARY INTL	K/	
		26 Jan 18 5:15AM		26 Jan 18 6:06AM		
AIR CANADA	08130	CALGARY INTL		EDMONTON INTL	K/	
		26 Jan 18 7:15AM		26 Jan 18 8:13AM		
AIR CANADA	08153	EDMONTON INTL		CALGARY INTL	T/	
		26 Jan 18 4:45PM		26 Jan 18 5:39PM		
AIR CANADA	07219	CALGARY INTL		LETHBRIDGE	T/	
		26 Jan 18 6:15PM		26 Jan 18 7:06PM		