

## AHS Board and Executive Expense Report

**Name** Katherine Chubbs  
**Title** Chief Zone Officer, South Zone  
**Location** Lethbridge  
 Expenses submitted during the month of June 2018

		Travel (1)						Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel			
Jun-18	P-Card	Meetings				(2) 346	344			
Jun-18	Expense Claim	Meetings		117			117			
<b>Total</b>			\$ -	\$ 117	\$ (2)	\$ 346	\$ 461	\$ -	\$ -	\$ -

**Total for the Month** \$ 461

Maximum daily single meal expense claimed in the month \$ 24  
 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.

### 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	\$ 64.75								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
4/10/2018	Taxi from the airport to the Hotel Blackfoot for the Connect Care Direction Setting Session #3	AB - Other Zones	Taxi	\$ 47.50	Calgary International Airport	Hotel Blackfoot, Calgary	Taxi from the Calgary Airport to the Hotel Blackfoot for the Connect Care Direction Setting Session the next day.	1			
4/11/2018	Taxi from the Blackfoot Hotel to the BMO Conference Centre for Day 2 of the Connect Care Direction Setting Session @ the BMO Conference Centre	AB - Other Zones	Taxi	\$ 17.25	Blackfoot Hotel, Calgary	BMO Conference Centre, Calgary	Taxi from the Blackfoot Hotel to the BMO Conference Centre for Day 2 of the Connect Care Direction Setting Session @ the BMO Conference Centre	1			
Approver(s) for the claim		Approval Status	Approval Date								
SHERMANOV, JANE		Approve	18-Jun-18								
FLEYSHER, LYUBOV		Approve	7-May-18								

From Blackfoot ⑦  
Hotel to BMO Conf.  
Center  
For Connect Care Direction

316 MERIDIAN ROAD SE  
CALGARY AB T2A 1X2

TERMINAL ID:  
MERCHANT ID:  
VEHICLE ID:  
DRIVER ID:  
GST ACCOUNT #:  
TRIP NUMBER:  
PASSENGERS:

Setting  
Session  
Day 2



04/11/2018  
START: 09:45  
DISTANCE: 65.00

END: 10:00  
RATE: 1

FARE AMOUNT: \$ 14.29

TAX AMOUNT: \$ 0.71  
TIP AMOUNT: \$ 2.25

TOTAL : \$ 17.25

MASTER CARD SALE :

APPROVAL NUMBER :

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

THANK YOU  
14031299 9595  
WWW.THECHECKERGROUP.COM

**CHECKER**  
**YELLOW**  
CABS

Connect Care taxi from ⑨  
Calgary  
airport  
to Hotel  
Blackfoot

ASSOCIATED CAB  
ALLIED LIMOUSIN  
307-41 AVENUE NE  
CALGARY AB T2E 2N4  
(403) 299-1111  
CAR#1869

**SALE**

Batch #: [REDACTED] REF#: [REDACTED]  
04/10/18 SEQ: [REDACTED] 19:53:16  
APPR CODE: [REDACTED]  
MASTERCARD [REDACTED]

AMOUNT \$43.50  
TIP \$4.00  
TOTAL \$47.50

00 - APPROVED - 001

MasterCard



THANK YOU

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## AHS Public Disclosure P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
CHUBBS, KATHERINE	Chief Zone Officer, South Zone	Lethbridge	\$ 261.00								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/17/2018	Taxi from EIA to Matrix Hotel-QSO mtg.	AB - Other Zones	Taxi	\$ 69.00	Edmonton International Airport	Matrix Hotel Edmonton	Taxi from Airport to Matrix Hotel--QSO Meeting	1			
5/17/2018	Taxi from Royal Alex Hosp (QSO mtg.) back to the airport	AB - Other Zones	Taxi	\$ 55.00	Royal Alex Hospital	Edmonton International Airport		1			
5/17/2018	Overnight in Edmonton for the QSO meeting	AB - Other Zones	Accommodations	\$ (2.00)			Accidental charge of \$2	1			
5/29/2018	Taxi from EIA to the Matrix Hotel--ZEL retreat May 20	AB - Other Zones	Taxi	\$ 81.00	Edmonton International Airport	Matrix Hotel Edmonton	Both Katherine and Lori Anderson from the Airport to 2 different hotels--for ZEL retreat May 30	1			
5/30/2018	Taxi from SSP to EIA-ZEL retreat	AB - Other Zones	Taxi	\$ 58.00	Seventh Street Plaza	Edmonton International Airport	ZEL retreat taxi from SSP to EIA	1			
Approver(s) for the claim		Approval Status		Approval Date							
HUBAND, BRENDA		Approve		26-Jun-18							

ZEL Retreat  
AIRPORT TAXI SERVICE  
4608 101 ST.  
(7808907070)  
EDMONTON AB  
taxi from Airport to 2 hotels  
CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/05/29  
TIME 0356 22:38:32  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE AMOUNT \$76.00  
TIP \$5.00  
TOTAL

Lori \$81.00  
Anderson +  
Katharine  
MasterCard [REDACTED]

APPROVED

AUTH# [REDACTED]  
THANK YOU

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IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

Royal Alex Hosp to  
AIRPORT TAXI SERVICE  
4608 101 ST.  
(7808907070)  
EDMONTON AB  
Airport from QSO mtg.  
CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/05/17  
TIME 9555 17:28:23  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE AMOUNT \$50.00  
TIP \$5.00  
TOTAL

\$55.00

MasterCard [REDACTED]

APPROVED

AUTH# [REDACTED]  
THANK YOU

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IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

Hipart tototel  
ATS GROUP  
4608 101 ST NW  
7809897099  
EDMONTON AB  
for QSO mtg.  
CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/05/17  
TIME 3588 01:03:39  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE AMOUNT \$66.00  
TIP \$3.00  
TOTAL

\$69.00

MasterCard [REDACTED]

APPROVED

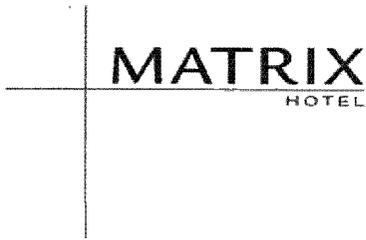
AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

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GST 85282 3290 RT0001

dm  
Edmonton  
overnight  
\$1080 mtg.



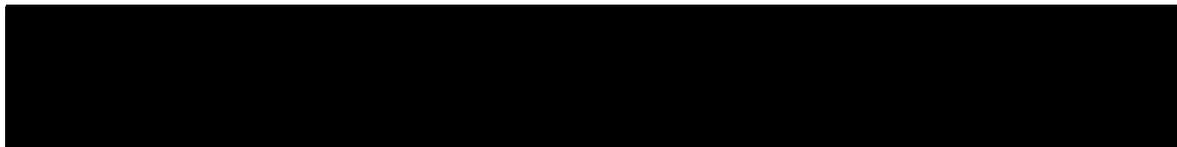
**MS Katherine Chubbs**

Room No. [REDACTED]  
Arrival : 05-16-18  
Departure Date : 05-17-18  
Folio No. [REDACTED]  
Conf. No. [REDACTED]  
P.O. No. :

Company Name: AHS - Vision/Marlin Travel  
Group Name:

**INVOICE**

Date	Description	Charges	Credits
05-16-18	Room Revenue	159.00	
05-16-18	Destination Marketing Fee	4.77	
05-16-18	Tourism Levy	6.55	
05-17-18	Mastercard [REDACTED]		172.32
* 05-17-18	Mastercard [REDACTED] Refund: Charged \$2 extra mistakenly. [REDACTED]		-2.00
		<b>Total Charges</b>	170.32
		<b>Total Credits</b>	170.32
		<b>Balance</b>	<b>0.00</b>



Merchant ID  
Transaction ID [REDACTED]  
Approval Code  
Approval Amount -2.00

Credit Card # [REDACTED]  
Capture Method Manual  
Transaction Amount -2.00

Zel Retreat  
AIRPORT TAXI SERVICE  
4608 101 ST.  
(7808907070)  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE: MASTERCARD  
DATE 2018/05/30  
TIME 7949 16:24:40  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE  
AMOUNT \$53.00  
TIP \$5.00  
TOTAL

\$58.00

Taxi to Airport  
MasterCard  
[REDACTED] from  
BSP

APPROVED

AUTH# [REDACTED]  
THANK YOU

VERIFIED BY FIN

MERCHANT COPY

## AHS Public Disclosure P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CHUBBS, KATHERINE	Chief Zone Officer, South Zone	Lethbridge	\$ 18.00									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
6/19/2018	Parking at Connect Care Day 1 Adoption Session	AB - Other Zones	Parking - Lot or Parkade	\$ 18.00			Parking at Connect Care Day 1 Adoption Session	1				
Approver(s) for the claim		Approval Status	Approval Date									
TURMAINE, PAMELA		Approve Reviewed and Approved.	27-Jun-18									

THANK YOU

THANK YOU

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THANK YOU

Connect Care  
Adoption Session  
LOT 244 #1

PARKING PERMIT

Meter: [REDACTED]  
Trans: [REDACTED]  
Paid: \$18.00  
Purchase Time:  
9:01AM JUN 19, 2018

License Plate:  
[REDACTED]

Base Price: \$17.14  
GST: \$0.86  
Total Price: \$18.00  
Card: [REDACTED]  
Auth: [REDACTED]

Expires:  
**JUN 19 2018**  
**7:00PM**

THANK YOU  
GST 120996095RT0004

TRANSACTION RECORD  
Indigo Calgary  
600 6th Ave SW, STE 288  
Calgary, Alberta T2P 0S5

TYPE: PURCHASE  
ACCT: VISA  
AMOUNT \$18.00

Card #: [REDACTED]  
Date: 2018/06/19  
Time: 09:02:26  
Ref #: [REDACTED]

Visa Credit  
AID: [REDACTED]  
Auth: [REDACTED]

ISO: 01 SPDH: 027  
APPROVED  
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\*IMPORTANT\*  
retain this copy  
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PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
CHUBBS, KATHERINE	Chief Zone Officer, South Zone	Lethbridge	\$ 34.50								
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	In Calgary for Day 2 Connect Care Direction Setting Session	AB - Other Zones	Meals Per Diem	\$ 34.50			Overnighted in Calgary on April 10 to attend Day 2 Connect Care Direction Setting Session on April 11 @ the BMO Conference Centre. Flying home @ 1805 hours Calgary to Lethbridge Bfast \$10.50 Dinner \$24.00	2			
Approver(s) for the claim		Approval Status	Approval Date								
SHERMANOV, JANE		Approve	18-Jun-18								
FLEYSHER, LYUBOV		Approve	7-May-18								

## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CHUBBS, KATHERINE	Chief Zone Officer, South Zone	Lethbridge	\$ 82.50									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
5/29/2018	Overnight in Edmonton May 29 for ZEL Retreat May 30	AB - Other Zones	Meals Per Diem	\$ 24.00			ZEL Retreat @ SSP, Edmonton Dinner \$24.00	1				
5/30/2018	Overnight in Edmonton May 29 for ZEL Retreat May 30	AB - Other Zones	Meals Per Diem	\$ 24.00			ZEL Retreat @ SSP, Edmonton Dinner \$24.00	1				
6/13/2018	In Leduc for the Cancer SCN meeting 0510 hr departure and a 2205 hr return flight	AB - Other Zones	Meals Per Diem	\$ 34.50			Travelling for Core Cancer Care SCN committee meeting, Leduc, AB Bfast \$10.50 Dinner \$24.00	1				
Approver(s) for the claim		Approval Status	Approval Date									
HUBAND, BRENDA		Approve	26-Jun-18									