

AHS Board and Executive Expense Report

Name Dr. Kathryn Todd

Title VP Research Innovation & Analytics

Location Edmonton

Expenses submitted during the month of September 2017

							Travel (1)						
	Source							Other	7	otal	Professional Development	Working Sessions Hosting and Hospitality	Other
MMM-YY	Document	Purpose	Airfar	е	Meals	Ac	commodation	Travel	Т	ravel	(2)	(3)	(4)
Sep-17 Sep-17	P-Card Expense Claim	Meetings Meetings					982	87 77		87 1,059			
Total			\$	- !	\$	- \$	982	\$ 164	\$	1,146	\$ -	\$ -	\$ -

Total for

the Month \$ 1,146

Maximum daily single meal expense claimed in the month \$ 291

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			Expense Claim Total									
TODD, KATHRYN	VP Research, Innovation & Analytics	Edmonton	\$ 86.70									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	_	Attendee Name(s)	Trip Distance
8/16/2017	Parking - SPOR meeting downtown			Parking - Lot or Parkade	\$ 10.00			SPOR meeting downtown	1			
9/12/2017	/12/2017 Cab from home to YEG to attend Healthcare Analytics Conference in SLC		AB - Local	Taxi	\$ 76.70	hom		Cab from Home to YEG. Kathryn attended a conference in Salt Lake City	1			
Approver(s) for th	Approver(s) for the claim Approval Statu			Approval Date		•	•	•		•	•	

27-Sep-17

Approve

YIU, VERNA

OUR RECEIPT

DUR RECEIPT

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT

Zone: 7010

THIS IS YOU

CITY OF EDMONTON

Terminal: 7010bb

Plate

LP - P1 North Wall 2 (Office)

Valid through:

THURSDAY 17 AUG 17

1:00 AM

Amount Paid: \$10.00 (GST incl.) Start Time: 8/16/2017 5:56 PM Ten: 758bb54012017 5:77

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT

Auth No Receipt No

THIS IS YOUR RECEIPT

THIS IS YOU

INDEPENDENT AIRPORT & 10235 112 ST UNIT T5K1M7 **EDMONTON** 22188656 GH2218865601

PURCHASE

09-12-2017 Acct #

05+26+00

Exp Date

Card Type MC

Name: KATHRYN TODD

MasterCard

Trace a Inv. #

Auth #

RRN

Purchase Tip

\$65.00 \$11.70

Total

(001) APPROVED-THANK YOU

Retain this copy for your records Customer copy

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AHS Public Disclosure Expense Claims

Claimant Name		Claimant Location	Expense Claim Total									
TODD, KATHRYN	VP Research, Innovation & Analytics	Edmonton	\$ 1,058.82									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location		# of days	# of Attendees		Trip Distance
9/12/2017	HAS Conference in Salt La	ke City	United States	Accommodations	\$ 982	12		3 night accommodation for the Health Analytics Summit conference. \$269.11 per night US at a rate of 1.2165.	3			
9/15/2017	Cab from YEG to home - Return from HAS Conf		AB - Local	Taxi	\$ 76.	70 YEG Airport	Home	Cab from YEG airport to Home - Return from HAS Conference in Salt Lake City	1			
Approver(s) for th	Approver(s) for the claim Approval Status			Approval Date	•	•	•	•	•	•	•	•

11-Oct-17

Approve

YIU, VERNA



Ms Katheryn Todd

INVOICE

Membership No. A/R Number Group Code

Company Name

Room No. Arrival 09-12-17 Departure 09-15-17 Page No. 1 of 1 Folio No. Conf. No. Cashier No.

User ID

Invoice No.

09-15-17

Date	Description	Additional Information	Charges	Credits
09-12-17	Room Charge		239.00	
09-12-17	Taxes Room Tax		13.74	
09-12-17	Taxes State Sales Tax	6	16.37	
09-13-17	Room Charge		239.00	
09-13-17	Taxes Room Tax		13.74	
09-13-17	Taxes State Sales Tax	<u> </u>	16.37	
09-14-17	Room Charge		239.00	
09-14-17	Taxes Room Tax		13.74	
09-14-17	Taxes State Sales Tax		16.37	
09-15-17	Visa Payment	PCARD WAS LOST - HAS) TO_	827.33
•			LSE PERSONAL	
			CA2D.	
	720	Total	827.33	827.33
		Balance		0.00

@1:2165

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges. \$1006.45

Guest Signature: _

Claiming only room charges \$807.33 * 1.2165 =982.12

ATS GROUP 4608 101 ST NW 7809897099 EDMONTON AB

CARD

CARD TYPE

VISA 2017/09/15

IME

0580 16:50:12

INVOICE #

MECEIPT NUMBER

PU2CH.SE

Al BRIT

\$65.00 \$11.70

Tar Otto

\$76.70

APPROVED

AUTH#

THANK YOU

TODD KATHRYN

CARDHOLDER WILL PAY
CARD ISSUER ABOVE AMOUNT
PURSUANT TO CARDHOLDER
AGREEMENT.

MERCHANT COPY