

AHS Board and Executive Expense Report

Name: Kerry Bales

Title: Chief Program Officer, Addictions & MentalHealth and Correctional Health Services, Provincial

Location: Red Deer

Expenses approved during the month of October 2022

					Travel	(1)					
Approved Source MMM-YY Document Purp	ose	Airfare		Meals	Accommo	lation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
P-Card Meetings Oct-22 Expense Claim Meetings Oct-22 Direct Bill Meetings						103	239 152	23			
Total		\$	- \$	-	\$	103	\$ 391	\$ 49	\$	- \$ -	\$ -

Total for

the Month \$ 494

Maximum daily single meal expense claimed in the month \$
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) Othe

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.

Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
BALES, KERRY R	Chief Program Officer, Addictions & Mental Health and Correctional Health Services, Provincial	Red Deer	\$ 238.77								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
7/18/2022	Round Trip - Tour of the Red Deer Recovery Community		Mileage-Local- Home Zone	\$ 19.09	Red Deer - Office	Red Deer Recovery Community		1			37.8
9/16/2022	Round Trip - AMH PAC (Addiction and Mental Health Advisory Council) Meeting in Leduc - Sept 16 & 17		Mileage-Other	\$ 138.37	Red Deer	Leduc - Royal Hotel Edmonton Airport		1			274
9/21/2022	Round Trip - Health Engagement Tour with the Health Minister		Mileage-Other	\$ 81.31	Red Deer	Stettler		1			161
Approver(s) for the claim	Approval Status	Approval Date									
CHIES, MAURO A	Approve	29-Sep-22]								

Oct-22

\$255.06



Expense Report Direct Bill Summary

Purpose of This Form:

Name:

Total Paid in the Month

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.
- Refer to Quick Reference Guide for: Providing a Standard Business Reason(s)
- A personal cheque must be attached to cover expenses deemed ineligible.

Kerry Bales

Indicate whether you have expenses to report in this section for this reporting period:

Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
16-Sep-22	Direct Billing		Provincial Addiction and Mental Health Advisory Council Meeting in Leduc (Sept 16 & 17)	ROYAL HOTEL EDMONTON AIRPORT	\$102.96
29-Sep-22	Direct Billing		Addiction Response Discussion with Alberta Health, Calgary Police and Edmonton Police Services (Sept 27th and Sept 28)	ENTERPRISE RENT-A-CAR	\$152.10
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	

Reporting Period for the Month of:



Royal Hotel Edmonton Airport Trademark Collection by Wyndham 8450 Sparrow Dr. Leduc, AB T9E7G4 info:rha@royalhotelgroup.ca www.royalhoteledmontonairport.ca GST # 879535953RT0004

Kerry Bales

COPY OF INVOICE Membership No. : Group Code :

Company Name : AB HEALTH SERVICES

Room No. Arrival Departuré Page No:

: 09/16/22 : 09/17/22 : 1 of 1

Cashier No. Folio No. Conf. No. TA Record

Locator:

Thank You For Staying With Us

Date	Text	16		Charges CAD	Credits CAD
09/16/22 09/16/22	Room Charge Provincial Tourism Levy - 4%			99.00 3.96	
Tot	al /. Balançe	102.96	0.00 / 102.96		



Federal GST#: 889365821

Consolidated Inv. # Rental Agreement # Bill Ref# **Invoice Date**



29-Sep-2022

Bill To Information

ALBERTA HEALTH SERVICES

Rental Information

Reservation Number:

Driver: BALES, KERRY

Pickup Date/Time: 09/26/2022 12:34 Return Date/Time: 09/28/2022 17:00

Miles/kms: 619

Car Class: ICAR

Requested Class: ICAR

Vehicle Information

Yr/Make/Model Unit# Beg/End/Distance License No 2021/NISN/MAXI 45127/45746/619

Rental Branch

RED DEER 5437 45 ST

RED DEER, AB - T4N 1L2

Return Branch

RED DEER 5437 45 ST

RED DEER, AB - T4N 1L2

Charge Detail				
Description	Qty	Period	Rate	Amount
TIME & DISTANCE	3	DAY	50.00	150.00
			Sub Total	150.00
VEHICLE LICENSE FEE RECOVERY	3	DAY	0.70	2.10
	Total Charge	s (CAD)	•	152.10

Remit Payment in CAD to	For Billing Inquiries	Payment Terms
ENTERPRISE RENT A CAR CANADA COMPANY P.O. BOX 9716	Tel#: +1 8773121084	Payment Due Within 30 days of invoice date.
STATION A	AskARCarada@ehi.com	
TORONTO ON M5W 1R6	1	Late payments are subject to finance charge.
Email Remit To: CanadianAR@erac.com		