

Official Administrator and Executive Expense Report

Name Dr. Kevin Worry
Title ZMD, North Zone
Location Fort McMurray

Expenses submitted during the month of October 2015

Travel (1)

Month-Year	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Oct-15	P-Card	Meetings	937		150	281	1,368			
Oct-15	Expense Claim	Meetings		208	494		702			
Total			\$ 937	\$ 208	\$ 644	\$ 281	\$ 2,070	\$ -	\$ -	\$ -

Total for the Month \$ 2,070

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 149
 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.

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

Instruction:

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

<u>WORRY, KEVIN</u> Cardholder's Name	<u>MEDICAL DIRECTOR - NORTH</u> Cardholder's Position/Title	Billing Reporting Period:	<u>20/10/2015</u>
<u>MEDICAL AFFAIRS</u> Cardholder's Dept	<u>NORTHERN LIGHTS REGIONAL</u> Cardholder's Site/Location	Total Statement Amount:	<u>\$1,367.93</u>
<u>KEVIN.WORRY@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address		Last 6 digits of the P-Card #:	<u>[REDACTED]</u>

Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
21/09/2015	403687739	AIR CAN [REDACTED], AIR CANADA	75.00	CAD	75.00	.00	.00	Change fee for change of flight for October 7th
21/09/2015	403687740	AIR CAN [REDACTED], AIR CANADA	53.00	CAD	53.00	.00	.00	Flight change fee for flights on October 7th
21/09/2015	403687741	AHS UAH PARKADE EAST I, HEALTH PRACTITIONERS, MEDICAL SERVICES	14.25	CAD	14.25	.68		Parking Paid at WMC in Edmonton Re: Edmonton AZMD meeting
28/09/2015	404454116	AIR CAN [REDACTED], AIR CANADA	193.63	CAD	193.63	37.48	.00	Return flight from Calgary to Edmonton Re: Crucial Conversation PMI
28/09/2015	404454117	WESTJET [REDACTED], Westjet Airlines	180.12	CAD	180.12	49.48	.00	Flight from Edmonton to Calgary Re: Crucial Conversation PMI
29/09/2015	404581311	AIR CAN [REDACTED], AIR CANADA	207.81	CAD	207.81	27.48	.00	Return Flight from Grande Prairie to Edmonton Re: Dr. Millers Retirement in Beaverlodge
29/09/2015	404581312	EDMONTON AIRPORT, AUTOMOBILE PARKING LOTS AND GARAGES	157.50	CAD	157.50	7.50	.00	Parking paid Re: Edmonton International Airport parking
29/09/2015	404581313	WESTJET [REDACTED], Westjet Airlines	227.04	CAD	227.04	49.48	.00	Flight from Edmonton to Grande Prairie Re: Dr. Miller's Retirement in Beaverlodge
05/10/2015	405305662	AHS UAH PARKADE EAST I, HEALTH PRACTITIONERS, MEDICAL SERVICES	14.25	CAD	14.25	.68		Parking Paid at WMC in Edmonton Re: Edmonton AZMD meeting
09/10/2015	405642673	IMPARK00020383U, AUTOMOBILE PARKING LOTS AND GARAGES	15.00	CAD	15.00	.71	.00	Parking Paid at Seventh Street Plaza Re: Meeting with Dr. David Mador
09/10/2015	405867748	POMEROY HOTEL GRANDE P, LODGING HOTELS, MOTELS, RESORTS	150.44	CAD	150.44	7.16		Hotel Accommodations in Grande prairie Re: Dr. Millers Retirement in Beaverlodge
09/10/2015	405978927	ESSO, FUEL DISPENSER, AUTOMATED	9.34	CAD	9.34	.44		Fuel paid_refill for rental car in Grande prairie Re: Dr. Millers Retirement
13/10/2015	406101157	Enterprise (780)830-19, ENTERPRISE RENT-A-CAR	70.55	CAD	70.55	3.36		Car rental in Grande prairie Re: Dr. Millers Retirement in Beaverlodge

Signatures

Cardholder Designate (If Applicable)

By signing this statement

- I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies, Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre.

KEANA BRIDGEHAL

Name of Cardholder Designate

KB Bridgehal

Signature of Cardholder Designate

Exec Adm. Coordinator

Cardholder Designate Position/Title

October 14/2015

Date of Signature

Cardholder

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

WORRY, KEVIN

Name of Cardholder

Kevin Worry

Signature of Cardholder

MEDICAL DIRECTOR - NORTH

Cardholder Position/Title

Oct 14/2015

Date of Signature

Approver Designate (If Applicable)

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Audrey Maione

Name of Approver Designate

Audrey Maione

Signature of Approver Designate

Exec Asst

Approver Designate Position/Title

Oct 21/15

Date of Signature

Approver

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Dr. Verna Hin

Name of Approver

Dr. Verna Hin

Signature of Approver

VP Quality + CMO

Approver Position/Title

Oct 23/15

Date of Signature

Submit approved statement with attachments to Accounts Payable:

Attach:

- Original (or scanned) itemized receipts with documented business reasons including names of participants where required
- Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report)

Address:

Alberta Health Services
Accounts Payable
7th Street Plaza

Flight + change fee for flights on Oct 7th.

1/2

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: September 21, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For [REDACTED]

DR KEVIN W WORRY
AC [REDACTED]

Wednesday, October 7, 2015

✈ Air

WESTJET AIRLINES
From: EDMONTON INTL AB Flight: 395 X FARE
To: CALGARY AB 06:45 AM Equipment: 736
Stops: 0 Arrival: 07Oct15 07:34 AM Mile(s) Flown: 163
SEAT SELECTION IS AVAILABLE ONLINE 24 HOURS PRIOR TO DEPARTURE

✈ Air

AIR CANADA
From: CALGARY AB Flight: 8164 G CLASS
To: EDMONTON INTL AB 07:30 PM Equipment: D8 (300 SERIES)
Stops: 0 Arrival: 07Oct15 08:22 PM Mile(s) Flown: 163
AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 5A

Cost: [REDACTED]

AIR CANADA WEB [REDACTED] 75.00 (1)
AIR CANADA WEB [REDACTED] 53.00 (2)

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: September 21, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	128.00
Less Credit Card Payments:	128.00
Credit / Balance Due To This Invoice:	0.00
Total Previous Payments:	245.39
Total Charges Previous Invoices:	245.39
Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED:VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

Parking Paid at WMC in Edmonton Re: Edmonton AZMD mtg.

3

AHS UAH PARKADE EAST
440-112 STREET T6G2B7
EDMONTON AB
20733493

1111 PURCHASE [REDACTED]

09-21-2015 [REDACTED] 14.53
Acct # [REDACTED] C
Exp Date [REDACTED] Card Type MC
Name: KEVIN WORRY
A0000000041010 MasterCard

Trace # [REDACTED]
FS2073349301
Auth # [REDACTED] RRN 001200036

Total \$14.25

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

Flight to Calgary from Edmonton, & Return

Re: Crucial conversation PMU.

4/5

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: September 28, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For
DR KEVIN W WORRY
AC [REDACTED]

Wednesday, September 30, 2015

Air

WESTJET AIRLINES
From: EDMONTON INTL AB Flight: 3142 Q CLASS
To: CALGARY AB 05:15 PM Equipment: DH4
Stops: 0 Arrival: 30Sep15 06:08 PM Mile(s) Flown: 163
WESTJET ENCO
SEAT SELECTION IS AVAILABLE ONLINE 24 HOURS PRIOR TO DEPARTURE

Friday, October 2, 2015

Air

AIR CANADA
From: CALGARY AB Flight: 8160 V CLASS
To: EDMONTON INTL AB 06:30 PM Equipment: D8 (300 SERIES)
Stops: 0 Arrival: 02Oct15 07:22 PM Mile(s) Flown: 163
AIR CANADA E
SEAT 6D - WORRY/KEVIN W DR
TICKET NUMBER [REDACTED]

Cost:
TKT- [REDACTED] E-TKT [REDACTED]

[REDACTED] 130.64
Tax: 49.48
Ticket Total: 180.12 (5)

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: September 28, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Cost:			
AIR CANADA WEB	[REDACTED]	[REDACTED]	156.15
		Tax:	37.48
Total:		Ticket Total:	193.63 (4)
		Grand Total:	373.75
		Less Credit Card Payments:	373.75
		Credit / Balance Due To This Invoice:	0.00
		Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED: VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

Flight from Edmonton in Grande Prairie, Grande Prairie to
Edmonton Re: Dr. Miller's retirement in Beaverlodge.

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915
Branch: [REDACTED]
Agent: [REDACTED]

6/8

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: September 29, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For
DR KEVIN W WORRY
AC [REDACTED]

Thursday, October 8, 2015

✈ Air

WESTJET AIRLINES Flight: 3126 Q CLASS
From: EDMONTON INTL AB 04:00 PM Equipment: DH4
To: GRANDE PRAIRIE 05:06 PM Mile(s) Flown: 247
Stops: 0 Arrival: 08Oct15
WESTJET ENCO
SEAT SELECTION IS AVAILABLE ONLINE 24 HOURS PRIOR TO DEPARTURE

Friday, October 9, 2015

✈ Air

AIR CANADA Flight: 8362 G CLASS
From: GRANDE PRAIRIE 08:05 AM Equipment: D8 (300 SERIES)
To: EDMONTON INTL AB 09:12 AM Mile(s) Flown: 247
Stops: 0 Arrival: 09Oct15
AIR CANADA E
SEAT 6D - WORRY/KEVIN W DR
TICKET NUMBER [REDACTED]

Cost:

TKT- [REDACTED] E-TKT [REDACTED] 177.56
Tax: 49.48
Ticket Total: 227.04

⑧

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: September 29, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Cost:			
AIR CANADA WEB [REDACTED]	[REDACTED]		180.33
		Tax:	27.48
Total:		Ticket Total:	207.81 (6)
		Grand Total:	434.85
		Less Credit Card Payments:	434.85
		Credit / Balance Due To This Invoice:	0.00
		Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED: VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

Parking road re: Edmonton International airport parking.
monthly.

Pay

7



Merchant Name: Edmonton International
Airport Finance
Department

Transaction Date: Tue, Sep 29, 2015,
03:04:28 PM

Merchant Address: 1, 1000 AIRPORT ROAD
Alberta, AB T9E 0V3

Card Type: **MASTERCARD**

Card Number: [REDACTED]

Amount: \$157.50

Auth Code: [REDACTED]

Transaction Ref: [REDACTED]

Transaction Type: DEBIT

Card Read Method: KEYED

Transaction Status: Capture Queued
APPROVAL

Merchant ID: [REDACTED]

User Ref: [REDACTED]

User Data 1: [REDACTED]

User Data 2: [REDACTED]

Parking Paid at WMC in Edmonton Re: Edmonton AzMD Meeting

9

UNIVERSITY OF ALBERTA
1001110 - 115 200

East Parkade North St
10/05/15 19:02 To 10/05/15 19:02
10/05/15 19:02 To 10/05/15 19:02

Unit Fee \$ 16.25
Total Fee \$ 16.25
Sales Tax \$ 16.25 (10%)
\$ 0.00

Parking Rates are GST Exempt

Comments: Paid for
parking at WMC
at: uah@services.ca

AHS UAH PARKADE EAST
3440-112 STREET T6G2B7
EDMONTON AB
20733436

1001 PURCHASE 1111

10-05-2015 19:02:44
Acct # [REDACTED] C
Exp Date [REDACTED] Card Type MC
Name: KEVIN WORRY
A000000041010 MasterCard

Trace # [REDACTED]
Auth [REDACTED] RRN 001947019

Total \$14.25

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

Parking Paid at Seventh Street Plaza R.R.: Meeting with Dr. Mador

(10)

TIC

MASH

TICKET VOID IF RE-SOLD

PLACE THIS SIDE UP ON



\$15.00

SH

RE-SOLD

1104PM FRI
OCT 09 15

PLACE THIS





Pomeroy Lodging LP o/a GP Pomeroy Hotel

GST #855473310 RT0014

11633 100th Street

Grande Prairie, AB T8V 3Y4

Telephone: (780)532-5221 Fax: (780)532-5441

Oct 14, 2015
3:33 pm

*Re: Dr. Mullers
Retirement in
Beaver Lodge*

(11)

KEVIN W DR WORRY

Folio # [REDACTED]
Room Number [REDACTED]
Rate: \$134.00
Pay Method: [REDACTED]

Arrival Date: Thursday, October 08, 2015
Departure Date: Friday, October 09, 2015

Member [REDACTED]

Information: ALBERTA HEALTH SERVICES EMPL

Date	Department	Reference	Voucher	Room	Debit	Credit
10/8/2015	ROOM CHARGE	Auto Posted		[REDACTED]	\$134.00	
10/8/2015	G.S.T - ROOM	Auto Posted		[REDACTED]	\$6.70	
10/8/2015	HOTEL TAX	Auto Posted		[REDACTED]	\$5.36	
10/8/2015	D.M.F. FEE	Auto Posted		[REDACTED]	\$4.02	
10/8/2015	G.S.T - ROOM	Auto Posted		[REDACTED]	\$0.20	
10/8/2015	HOTEL TAX	Auto Posted		[REDACTED]	\$0.16	
10/9/2015	MASTERCARD	CHECKED- [REDACTED]		[REDACTED]		\$150.44

I agree that my liability for all charges is not waived

Signature _____

Tax Summary	
G.S.T - ROO	\$6.90
D.M.F. FEE	\$4.02
HOTEL TAX	\$5.52
Balance:	\$0.00

Fuel paid - Refill for rental car Re: Dr. Muller Retirement
in Grande Prairie

12

11714 99 Ave
Grande Prairie AB T0A0G7

ESSO BUSINESS

CENTRE WEST ESSO
00302886
11910 99 AVENUE
GRANDE PRAIRIE, AB
URN:R876975210
10/09/2015 811054221
07:17:33 AM

PUMPH 2
EREG 0.497L
PRICE/L 1.099
FUEL TOTAL \$ 9.34
GST in Fuel \$ 0.44
CREDIT \$ 9.34

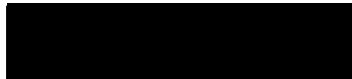
TYPE: PURCHASE
ACCOUNT: FLEET
AUTH: 071041 E INVOICE
CARD NUMBER
VERIFIED BY
N
D

BT Approved - Thank you BT!
LOYALTY: NO
IMPORTANT - Retain this copy for your records



10610 AIRPORT DRIVE
GRANDE PRAIRIE, AB T8V7Z5
Federal GST# :889365821

Rental Agreement #:
Bill Ref #:
Invoice Date:
Account #:



13/10/2015

③

Re: Dr. Muller Retirement

BILL TO

KEVIN WORRY



RENTAL INFORMATION

Date/Time Out
10/08/2015 16:55

Date/Time In
10/09/2015 08:06

Renter
WORRY, KEVIN

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
VIN				25,480	25,567

CLAIM INFORMATION

Claim# / PO# / RO#	Insured		
Date of Loss	Type of Loss	Type of Vehicle	Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	1 DAY	52.00	52.00
ROADSIDE ASSISTANCE PROTECT	1 DAY	4.99	4.99

Subtotal 56.99

CONCESSION FEE	PCT	16.28	9.41
VLF	1 DAY	0.79	0.79
GST	PCT	5.00	3.36

Total Charges (CAD) 70.55

PAYMENTS

Payment Master Card -70.55

Total Payments (CAD) -70.55

Amount Due (CAD) 0.00

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g. sales taxes and fees or surcharges) and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.

For Billing Inquiries / Payment Terms :

Tel#:(403) 216-3490
ALBARADMIN@ehi.com
Payment Due within days of invoice date
Late payments are subject to a finance charge.



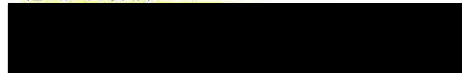
Thank You For Choosing Enterprise

Please Return This Portion With Remittance

Remit To :
ENTERPRISE RENT-A-CAR
5821 - 6 STREET SE
CALGARY, AB T2H1M4

Amount Due (CAD) -0

Paid By:
KEVIN WORRY



Account #	Rental Agreement	Amount	GPBR
		-0	

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
WORRY, KEVIN	ZMD, North Zone	Fort McMurray	702.12

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/30/2015	PMI Course in Calgary	AB - Local	Accommodations	167.28				1			
10/1/2015	PMI Course in Calgary	AB - Local	Accommodations	167.28				1			
9/17/2015	PMI Re: Management Dynamics in Edmonton		Meals Per Diem	20.80			B/F & Lunch	1			
9/19/2015	PMI Course in Red Deer	AB - Local	Accommodations	159.56				1			
9/18/2015	PMI Course in Edmonton Re: Management Dyanmics		Meals Per Diem	20.80			B/F & Lunch	1			
9/19/2015	PMI Course in Red Deer Re: leadership strategies		Meals Per Diem	20.80			B/F & Lunch	1			
9/20/2015	PMI Course in Red Deer Re: Leadership Strategies		Meals Per Diem	20.80			B/F & Lunch	1			
9/24/2015	PMI Course in Edmonton Re: Talent Management		Meals Per Diem	20.80			B/F & Lunch	1			
9/25/2015	PMI Course in Edmonton Re: Talent Management		Meals Per Diem	20.80			B/F & Lunch	1			
9/30/2015	PMI Course in Calgary Re: Crucial Conversations		Meals Per Diem	20.80			B/F & Lunch	1			
9/23/2015	PMI Course in Edmonton Re: Talent management		Meals Per Diem	20.80			B/F & Lunch	1			
10/1/2015	PMI course in Calgary Re: Crucial Conversations		Meals Per Diem	20.80			B/F & Lunch	1			
10/2/2015	PMI Course In Calgary Re: Crucial Conversations		Meals Per Diem	20.80			B/F & Lunch	1			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		13-Oct-15							



Holiday Inn
& Suites

36

09-20-15

Kevin Worry [Redacted]	Folio No. :		Room No. :	[Redacted]
	A/R Number :		Arrival :	09-19-15
	Group Code :		Departure :	09-20-15
	Company :	Alberta Health Services	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
09-19-15	*Accommodation	144.99	
09-19-15	Tourism Levy 4%	5.80	
09-19-15	DMF 1%	1.45	
09-19-15	GST 5%	7.32	
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews . We look forward to welcoming you back soon.		Total	159.56
		Balance	159.56

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. 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 associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



Kevin W Worry

Room No. : [REDACTED]
 Arrival : 09-30-15
 Departure : 10-02-15
 Page No. : 1 of 1
 Folio No. : [REDACTED]
 Conf. No. : [REDACTED]
 Cashier No. : [REDACTED]

INFORMATION INVOICE

Membership No. :
 A/R Number :
 Group Code :
 Company Name :

10-02-15 03:19:35 AM EST

Date	Text	Charges	Credits
09-30-15	Room	149.00	
09-30-15	Destination Marketing Fee	4.47	
09-30-15	GST Tax	7.67	
09-30-15	Alberta Tourism Levy	6.14	
10-01-15	Room	149.00	
10-01-15	Destination Marketing Fee	4.47	
10-01-15	GST Tax	7.67	
10-01-15	Alberta Tourism Levy	6.14	
10-02-15	Visa		334.56
Total		334.56	334.56
Balance			0.00

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Thank You For Staying With Us

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

Guest Signature _____

Radisson Hotel & Conference Centre Calgary Airport East
 6620 36th Street NE
 Calgary, AB T3J 4C8
 Telephone: (403) 475-1111 Fax: (403) 719-3855
 GST #: 82338 3401 RT0001