

AHS Board and Executive Expense Report

Name Dr. Laura McDougall
Title Senior Medical Officer of Health & Senior Medical Director
Location Edmonton
 Expenses submitted during the month of February 2019

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)
Feb-19	Expense Claim	Meetings		65	318	1,081	1,464	1,960		
Feb-19	Direct Billing	Meetings	534			231	765			
Total			\$ 534	\$ 65	\$ 318	\$ 1,312	\$ 2,229	\$ 1,960	\$ -	\$ -

Total for the Month \$ 4,189

Maximum daily single meal expense claimed in the month \$ 13
 Maximum daily base hotel rate claimed in the month \$ 184
 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 Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total										
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance		
MCDUGALL, LAURA	Senior Medical Officer of Health & Senior Medical Director	Calgary		\$ 3,424.37									
12/13/2018	Meetings with Alberta Health, Orientation Meetings with Corp. Office in Edmonton		Mileage-Other	\$ 301.99	Calgary	Edmonton		1			598		
12/13/2018	Meetings with Alberta Health, Orientation Meetings with Corp. Office in Edmonton	AB - North Zone	Parking - Lot or Parkade	\$ 20.00				1					
1/3/2019	Membership Fees - CPSA Annual Fees	AB - Local	Membership Dues	\$ 1,960.00				1					
1/8/2019	Meetings with Alberta Health and Quality & CMO Bi weekly update in Edmonton		Mileage-Other	\$ 301.99	Calgary	Edmonton		1			598		
1/8/2019	Meetings with Alberta Health and Quality & CMO Bi weekly update in Edmonton	AB - North Zone	Accommodations	\$ 121.25				1					
1/8/2019	Meetings with Alberta Health and Quality & CMO Bi weekly update in Edmonton	AB - North Zone	Meals Per Diem	\$ 13.00				3					
1/9/2019	Meetings with Alberta Health and Quality & CMO Bi weekly update in Edmonton	AB - North Zone	Meals Per Diem	\$ 13.00				3					
1/9/2019	Fuel for rental car - Primary Care/Strategic Clinical Networks Strategy Meeting in Edmonton	AB - Local	Fuel-Travel and Car Rental	\$ 35.95				1					
1/11/2019	Orientation Meetings with Key Stakeholders and Business Partners in Calgary	AB - Local	Taxi	\$ 53.57	Airport	Home		1					
1/23/2019	Parking at Sheldon M Chumir Health centre - Elbow River Healing Lodge meeting	AB - Local	Parking - Lot or Parkade	\$ 9.00				1					
1/25/2019	Parking at Foothills Medical Center, Calgary - Physician Workforce Planning Meeting held at the University parking time extended.	AB - Local	Parking - Lot or Parkade	\$ 4.50				1					
1/25/2019	Parking at Foothills Medical Center, Calgary - Physician Workforce Planning Meeting held at the University	AB - Local	Parking - Lot or Parkade	\$ 9.00				1					
1/28/2019	Attended ELT Meeting and Orientation Meetings in Edmonton	AB - North Zone	Taxi	\$ 64.90	Airport	SSP		1					
1/28/2019	Meals - ELT Meeting in Edmonton	AB - North Zone	Meals Per Diem	\$ 13.00				3					
1/28/2019	Accommodations - ELT Meeting in Edmonton	AB - North Zone	Accommodations	\$ 197.10				1					

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
MCDUGALL, LAURA	Senior Medical Officer of Health & Senior Medical Director	Calgary	\$ 3,424.37									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
1/29/2019	Meals - ELT Meeting in Edmonton	AB - North Zone	Meals Per Diem	\$ 13.00				3				
1/29/2019	Parking at YYC Airport; travel for ELT Meeting in Edmonton	AB - Local	Parking - Lot or Parkade	\$ 39.85				1				
1/29/2019	Attending ELT meeting and Orientation Meetings in Edmonton	AB - North Zone	Taxi	\$ 20.00	SSP	Hotel		1				
2/1/2019	Quality, Safety, and Outcomes Presentation and Meeting - SHC Calgary	AB - Local	Parking - Lot or Parkade	\$ 14.25				1				
2/11/2019	Presentation to ACPLF Staff - Calgary	AB - Local	Parking - Lot or Parkade	\$ 10.00				1				
2/12/2019	Fuel for rental car - AHS Senior Leaders Meeting - Edmonton	AB - Local	Fuel-Travel and Car Rental	\$ 55.32				1				
2/13/2019	Fuel for rental car - AHS Senior Leaders Meeting - Edmonton	AB - Local	Fuel-Travel and Car Rental	\$ 18.15				1				
2/13/2019	Parking at Sheldon M Chumir Health centre - Elbow River Healing Lodge meeting	AB - Local	Parking - Lot or Parkade	\$ 15.75				1				
2/13/2019	Parking at the YYC airport - PPEC Meeting	AB - Local	Parking - Lot or Parkade	\$ 10.50				1				
2/13/2019	Parking at Sheldon M Chumir Health centre - Elbow River Healing Lodge meeting - Meeting 2	AB - Local	Parking - Lot or Parkade	\$ 9.00				1				
2/22/2019	Attended PFG Meeting in Edmonton	AB - North Zone	Parking - Lot or Parkade	\$ 30.48				1				
2/22/2019	Fuel for rental car - Attended PFG Meeting in Edmonton	AB - Local	Fuel-Travel and Car Rental	\$ 56.82				1				
2/22/2019	Meals - Attended PFG Meeting in Edmonton	AB - North Zone	Meals Per Diem	\$ 13.00				2				
Approver(s) for the claim		Approval Status		Approval Date								
BELANGER, FRANCOIS		Approve		5-Apr-19								

Primary Care
Strategic Clinics
Networks

PETRO-CANADA
116 89TH ST SW
CALGARY
ALBERTA T3H 0M4
(403) 263-9304

GST 8000000000
PC0368086
TERMINAL:
PAYPOINT:

2019-01-09

PUMP 62
REGULAR
LITRES L 41.367
PRICE/L \$ 0.869
FUEL SALES \$ 35.95*

TOTAL DUE \$ 35.95

TOTAL PAID
CREDIT CARD \$ 35.91

* GST INCL. \$ 1.7

VISA

[Redacted]

PURCHASE
C F 0010010 00 02.

VISA CREDIT

[Redacted]

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

--- IMPORTANT ---
RETAIN THIS COPY
FOR YOUR RECORDS
- CUSTOMER'S COPY -

RECEIPT

MacEwan University
Transportation Services
Phone 780-497-5875
Email: parking@macewan.ca

License Plate Number

[Redacted]

Expiration Date/Time

07:00 PM
DEC 13, 2018

Purchase Date/Time: 10:42am Dec 13, 2018

Total Due: \$20.00 Rate: All Day Exp
Total Paid: \$20.00 Pmt Type: CC

Setting: Alberta College 2
Mach Name: Alberta College 2

Visa

Auth #

GST R 10744021K

PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

Alberta Health
Services
SMCHC Lot 1
RECEIPT

ENTRY DATE/TIME:
23/01/19 15:54
PAY DATE/TIME:
23/01/19 17:49
PARK-DUR.: HRS:MIN
0:01:55

ALLOWED EXIT TO:
23.01.19 18:04

PAID: \$ 9.00
VISA

[Redacted]

REF. [Redacted]

* Parking Rates *
* Are GST Exempt *

* Please Exit *

RECEIPT

Foothills
Medical Centre
Lot 3 - South

License Plate Number

[Redacted]

Expiration Date/Time

11:06 AM
JAN 25, 2019

Purchase Date/Time: 09:06am Jan 25, 2019

Total Due: \$9.00 Rate: \$9.00 - 2 Hours
Total Paid: \$9.00 Pmt Type: CC (Swipe)

Setting: FML Lot 03 - South
Mach Name: CA-FMC-0301

Visa

Auth #

www.ahs.ca
Do Not Place On Dash

RECEIPT

Foothills
Medical Centre
Lot 3 - South

License Plate Number

[Redacted]

Expiration Date/Time

12:06 PM
JAN 25, 2019

Purchase Date/Time: 09:07am Jan 25, 2019

Total Due: \$4.50 Rate: \$4.50 - 1 Hour
Total Paid: \$4.50 Pmt Type: CC (Swipe)

Setting: FML Lot 03 - South
Mach Name: CA-FMC-0301

Visa

Auth #

www.ahs.ca
Do Not Place On Dash



College of
Physicians
& Surgeons
of Alberta

2700 - 10020 100 Street NW
Edmonton, AB, Canada T5J 0N3

MEMBERSHIP RECEIPT

DR. LAURA MCDUGALL
[REDACTED]

Page: 1 of 1
Receipt Number: [REDACTED]
Date Paid: 03-Jan-2019
Registration #: [REDACTED]

Invoice	Description	Balance Owing	Paid
[REDACTED]	2019 General Register Annual Practice Permit	\$1,960.00	\$1,960.00
[REDACTED]	2019 General Register - Penalty for late renewal	\$500.00	\$500.00

Total Fees Paid: \$2,460.00
Outstanding Balance: \$0.00

Executive Royal Hotel Leduc

8450 SPARROW DRIVE
LEDUC, AB T9E7G4



EXECUTIVE ROYAL HOTEL

Line #1

(780) 986-1840

info.eryl@royalhotelgroup.ca

www.executivehotels.net

879535953RT0004

C/O 01/09/2019 01:06 PM becca

Registered To:
MCDUGALL, LAURA LOIS
VISION TRAVEL DT ONTARIO-WESTI

(780) 111-1111

Room # [REDACTED]
Conf # [REDACTED]
Arrival 01/08/19
Departure 01/09/19
Room Type C1K-Classic King Rm
Guests 1 / 0
Payment Visa/Master
Acct [REDACTED]

Posting Date	Oper	AcctCode	Description	From	Reference	Amount
01/08/19	so	2	ROOM CHRG REVENUE			
01/08/19	so	19	GST			\$108.00
01/08/19	so	42	ALBERTA TOURISM LEVY			\$5.40
01/08/19	so	FMF	FACILITY MANAGEMENT FEE			\$4.32
01/08/19	so	19	GST			\$3.24
01/08/19	so	42	ALBERTA TOURISM LEVY			\$0.16
01/09/19	becca	VI	PAYMENT VISA			\$0.13
						\$121.25-

Balance Due \$0.00

THE UNDERSIGNED GUEST AGREES TO PAY THE AMOUNT INDICATED ON THE BALANCE DUE PORTION OF THIS INVOICE. IF THE CHARGES ARE TO BE BILLED TO A THIRD PARTY, THE UNDERSIGNED AGREES TO BE PERSONALLY LIABLE FOR PAYMENT OF THE CHARGES IN THE EVENT THAT THE INDICATED THIRD PARTY, PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF SUCH CHARGES.

X _____
GUEST SIGNATURE

ENTERED

Signature

REVIEW US ON TRIP ADVISOR - Search "EXECUTIVE ROYAL HOTEL LEDUC-NISKU

RECEIPT

Alberta Health Services
South Campus
RECEIPT
ENTRY DATE/TIME:
01.02.19 13:15
EXIT DATE/TIME:
01.02.19 17:58
PARK-DUR.: HRS:MIN
0:04:43

AMOUNT:
14.25
METHOD OF PAYMENT: VISA



ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299 1111
CAR#65

SALE

MM [REDACTED]
TIC [REDACTED]
Ba [REDACTED] SEC [REDACTED]
01/11/19 11:54:14
APPR CODE: [REDACTED]
VISA

AMOUNT \$45.40
TIP \$8.17
TOTAL \$53.57

00 - APPROVED - 001

VISA CREDIT [REDACTED]

THANK YOU
CUSTOMER COPY

WELCOME
Shell Canada
4647 16th Ave NW
T3B 0M7
Calgary AB
(403) 288-4130

Bronze
PUMP No. 03
LITRES 18.347
PRICE/L \$0.989
TOTAL FUEL \$18.15
TOTAL SALE \$18.15
VISA \$18.15

FUEL INCLUDES
GST - Fuel \$0.86
No. 137400032RT

01 APPROVED - THANK YOU
APPROVAL No. [REDACTED]
TERMINAL No. 89001630
VERIFIED BY PIN

IMPORTANT
retain this copy for
YOUR RECORD

PURCHASE
INV No. [REDACTED]
2019/02/11 07:00
VISA CREDIT [REDACTED]

YOUR OPINION COUNTS
Tell us about your recent visit at
www.shell.ca/opinion
and you could win a
FUEL FOR A YEAR
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: [REDACTED]
TRAN: [REDACTED]
2/13/2019 7:07:46

RECEIPT
GST NO. R122556194

TET [REDACTED]
EXI [REDACTED] 4103
IN: 01/28/19 19:33
OUT: 01/29/19 19:50
DURATION: 1 00: 17
PAID: \$ 39.85
(GST INCLUDED)
VISA [REDACTED]

REF. [REDACTED]
THANK YOU FOR
YOUR VISIT



RECEIPT

HPARK: 403-828-7337

License Plate Number [REDACTED]

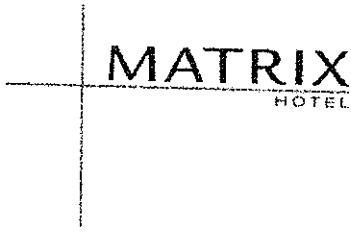
Expiration Date/Time

11:01 AM
FEB 11, 2019

Purchase Date/Time: 08:31am Feb 11, 2019
Total Due: \$10.00 Rate: 2 HR 30 MIN
Total Paid: \$10.00 Pmt Type: CC (Swipe)
Ticket [REDACTED]
S/N # [REDACTED]
Setting: Holy Cross Interior
Mach Name: Holy Cross int

[REDACTED] /isa
Auth [REDACTED]

SPACE FOR LEASE
Medical, Office, Etc.
403-852-4448



MS Laura Lois Mcdougall

Room No. [REDACTED]
Arrival : 01-28-19
Departure Date : 01-29-19
Folio No. [REDACTED]
Conf. No. [REDACTED]
P.O. No. [REDACTED]

Company Name: AB Health
Group Name:

INFORMATION INVOICE

Date	Description	Charges	Credits
01-28-19	Room Revenue		
01-28-19	Destination Marketing Fee	184.00	
01-28-19	Tourism Levy	5.52	
01-29-19	Visa	7.58	
			197.10
Total Charges		197.10	
Total Credits			197.10
Balance			0.00

ENTERED

Taxi from Airport to
the location

#13

GREATER EDMONTON TAXI
SERVICE
10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE VISA
DATE 2019/01/28
TIME 1664 22:21:35
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$55.00
TIP \$9.90
TOTAL

\$64.90

VISA CREDIT
[REDACTED]

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456
BARREL TAXI 780.489.7777
EDMTAXI.COM
GST 100403070

Taxi from one
Location to another

#4

(780)425-2525

www.co-optaxi.com

TRANSACTION RECORD

Terminal 108/66286063
Driver 1320
18/01/2019 13:05:20

Card : [REDACTED]
VISA CREDIT
CHIP CARD [REDACTED]

Ref [REDACTED]
Auth [REDACTED]

PURCHASE
FARE : \$ 15.00
TIP : \$ 5.00
TOTAL : \$ 20.00

APPROVED - THANK YOU
(01-027)

IMPORTANT: Retain this
copy for your records

Customer Copy

Thank you for choosing
Co-op taxi

WELCOME

Shell Canada
190 Leva Ave
T4E 0A5

Red Deer AB
587 457 5953

Bronze
PUMP No. 02
LITRES 55.372
PRICE/L \$0.999
TOTAL FUEL \$55.32

TOTAL SALE \$55.32
VISA \$55.32

FUEL INCLUDES
GST - Fuel \$2.63
No. 137400032RT

01 APPROVED - THANK
YOU 001

APPROVAL NO [REDACTED]
TERMINAL NO. 09813040
VERIFIED BY PIN

IMPORTANT
Retain this copy for
YOUR RECORDS

PURCHASE C

INV No [REDACTED]
2019/01/28

YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
FUEL FOR A YEAR
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: C81204
TRAN: [REDACTED]
8:05:09

PFQ Mtg

TRANSACTION RECORD

7-ELEVEN STORE 37797

283180 RNG RD 293
CROSSFIELD AB T0M 0S0

DATE: 2019-02-22 TIME: 05:36:04

Paypoint: C8C TRANS #: [REDACTED]
Station#: 00302537 Cashier: manager
GST: R1:9335453

*** DUPLICATE ***

FUEL	(L)	(\$/L)	(\$)
Pump 6			
REGLR	54.686	1.039	56.82
TOTAL CAD	\$	56.82	
EXIT CARD	\$	56.82	
T INCLUDED IN FUEL	\$	2.71	

PURCHASE

CARD NO. [REDACTED]

[REDACTED]

VISA CREDIT

01 Approved - Thank You 027

VERIFIED BY PIN

-- IMPORTANT --

Retain This Copy For Your Records

- Customer's Copy -

*** DUPLICATE ***

RECEIPT
Impark Lot 02-383

License Plate Number [REDACTED]

Expiration Date/Time

04:31 PM
FEB 22, 2019

Purchase Date/Time: 12:31pm Feb 22, 2019

Total Parking: \$30.48

Total GST: \$1.52

Total Due: \$32.00

Total Paid: \$32.00

Tick [REDACTED]

S/N [REDACTED]

Setting: Lot 383

Mach Name: Meter 1

Rate: \$32 - 4 Hours
Pmt Type: CC (Swipe)

****-2008, Visa

Auth #: 06258N

Claiming only
30.48

gst #087315638RT0005
NO IN AND OUT PRIVILEGES

PARKING RECEIPT RECUS DE STATIONNEMENT

Alberta Health Services
SMCHC Lot 1
RECEIPT 050

ENTRY DATE/TIME:
13/02/19 07:55
PAY DATE/TIME:
13/02/19 09:41
PARK-DUR.: HRS:MIN
0:01:46

FOLLOWED EXIT TO:
01.02.19 09:56

PAID: \$ 9.00

VISA

REF. [REDACTED]

- * Parking Rates *
- * Are GST Exempt *
- *****
- * Please Exit *
- * Site Within *
- * 15 Minutes *
- * After Payment *
- * Is Made *
- *****

* No In and Out *

* Privileges *

RECEIPT

Alberta Health Services
SMCHC Lot 1

RECEIPT
ENTRY TIME: 13.02.19 12:27

EXIT TIME: 13.02.19 15:51
PARK-DUR.: HRS:MIN
0:00:24

AMOUNT: 15.75
KIND OF PAYMENT: VISA

RECEIPT
GST NO. R122556194

TKT NO [REDACTED]
EXIT No. A4
IN: 02/13/19 10:09
OUT: 02/13/19 10:53
DURATION: 0 00: 44
PAID: \$ 10.50
(GST INCLUDED)
VISA

REF. [REDACTED]
THANK YOU FOR
YOUR VISIT

o
lk
e
n

Don't miss out on great rewards! Earn Esso Extra or PC Optimum points on eligible fuel, car wash and convenience store purchases! Cards are free in-store!

PC Financial points awarded within 72hrs and are not printed on receipt.
PC Optimum Inquiries: 1-866-727-6468
Special Inquiries: 1-800-567-3776

IT @ 5.0000%

Calgary Health Region

YYC

YYC CALGARY INTERNATIONAL AIRPORT

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 : Laura McDougall	Reporting Period for the Month of : Jan-Feb 2019
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
9-Jan-2019	Direct Billing	Airline Ticket	Attendnace at Executive Leadership Meeting in Edmonton - Flight from Calgary to Edmonton Jan 28, 2019 and return Jan 29, 2019	Vision Travel	\$534.06
21-Feb-2019	Direct Billing	Car Rental	Attendnace at PFG Meeting in Edmonton - Car Rental from Feb 21 to 26, 2019	Vision Travel	\$230.85
	Direct Billing	Airline Ticket		Vision Travel	
	Direct Billing	Airline Ticket		Vision Travel	
	Direct Billing	Airline Ticket		Vision Travel	
Total Paid in the Month					\$ 764.91



Alberta Health Services
 North Tower
 10030-107 St
 Suite 800
 Edmonton, AB T5J 3E4

Sale Invoice No: [REDACTED]
 Date Issued: 1/22/2019
 Agent: [REDACTED]
 Group No.:

Traveler Type	Ticket/Conf No	Department Airline/Vendor	Depart Date	Return Date	Remarks	GST	Total Fare
From	To	Flight A/L	Depart		Arrive		
Mcdougall/Laura Lois Ms	[REDACTED]	AIR CANADA	1/28/2019	1/29/2019			
Dom. Air						0.00	534.06
YYC Calgary	YEG Edmonton	8160 AC	1/28/2019 8:30 PM		1/28/2019 9:26 PM		
YEG Edmonton	YYC Calgary	8157 AC	1/29/2019 6:25 PM		1/29/2019 7:26 PM		
Mcdougall/Laura Lois Ms	[REDACTED]		1/28/2019	1/29/2019	Charged To: M[REDACTED]		
Hotel	[REDACTED]						

Payments Applied To This Invoice		Received	1/22/2019	Pymt For Inv # [REDACTED]	-534.06
[REDACTED]	[REDACTED]				

HST Amount	0.00
GST/HST Combined Total	0.00
QST Total	0.00
Invoice Total	534.06
Payment Total	-534.06
Balance Due	0.00



4603 - 16 AVENUE NW
 CALGARY, AB T3B 0M7
 Federal GST# :889365821

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

Not Yet Billed

BILL TO

Alberta Health Services
 PO BOX 1600
 EDMONTON, AB - T5T2N9

RENTAL INFORMATION

Date/Time Out 02/21/2019 06:26 PM
Date/Time In 02/26/2019 08:00 AM

Renter
 MCDOUGALL, LAURA

RENTAL VEHICLES

Color	License	Model	Unit	Miles/Kms Out	In
BLACK		CAMR		35	1,367

VIN: [REDACTED]

CLAIM INFORMATION

Claim# / PO# / RO#	Insured
10103067155200133	10103067155200133

Date of Loss **Type of Loss** **Type of Vehicle**

Repair Shop

BILLING DETAIL

Description	Qty/Per	Rate	Amount
TIME & DISTANCE	5 DAY	45.00	225.00
Subtotal			225.00
VEHICLE LICENSE FEE RECOVERY	5 DAY	1.17	5.85
GOODS AND SERVICES TAX	PCT	5.00	11.54
Total Charges (CAD)			242.39

PAYMENTS

Payment	Payment	-230.85
Total Payments (CAD)		-230.85

Amount Due (CAD) 11.54

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#:+1 9184016000
 AskARCanada@ehi.com
 Payment Due within 30 days of invoice date
 Late payments are subject to a finance charge.

ADDITIONAL INFORMATION

COST CENTER# 10103067155200133

Thank You For Choosing Enterprise

Please Return This Portion With Remittance		Amount Due (CAD)	11.54
Remit To : ENTERPRISE RENT A CAR CANADA COMPANY 709 MILNER AVE SCARBOROUGH, ON M1B 6B6		Paid By: Alberta Health Services PO BOX 1600 EDMONTON, AB T5T2N9	
Account #	Rental Agreement	Amount	GPBR
[REDACTED]	[REDACTED]	11.54	[REDACTED]