

## Official Administrator and Executive Expense Report

**Name** Linda Dempster  
**Title** VP Collaborative Practice, Nursing & Health Professions  
**Location** Edmonton  
 Expenses submitted during the month of June 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)
Jun-15	Expense Claim	Meetings					-	\$ 562		
<b>Total</b>			\$ -	\$ -	\$ -	\$ -	\$ -	\$ 562	\$ -	\$ -

**Total for the Month** \$ 562

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) Other

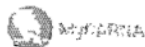
Other expenses include expenses incurred in the normal course of business that are required for work purposes. May include small item technology purchases, books, etc.

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

### AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
DEMPSTER, LINDA	VP Collaborative Practice, Nursing & Health Professions	Edmonton	561.73

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
4/9/2015	Registration confirmation - CRNBC	AB - Local	Miscellaneous	52.50			Verification from CRNBC required for CARNA membership application. CRNBC charges for registration verification.	1			
3/26/2015	CARNA Registration	AB - Local	Membership Dues	509.23			CARNA membership registration fee	1			
<b>Approver(s) for the claim</b>		<b>Approval Status</b>		<b>Approval Date</b>							
RHODES, DEBORAH		Approve		11-Jun-15							



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### Order Confirmation



Order Confirmation



11620-168 Street  
Edmonton, AB T5M 4A6

Phone: (780) 451-0043

Fax: (780) 452-3276

Registration #: [Redacted]

Order Number: [Redacted]

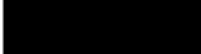
Person ID Number: [Redacted]

Payment Method: MasterCard

Payment Date: 26/03/2015

Bill To:

Linda Dempster



Canada

Product	Description	Quantity	Price
RN Initial Kit		1.0000	\$469.48

Sub-Total \$484.98  
 Sales Tax \$24.25  
 Grand Total \$509.23 CAD  
 Payments \$509.23  
 Balance \$0.00 CAD

#### CONNECT WITH US

Toll Free: 1.800.252.9392  
 Tel: 780.451.0043  
 Fax: 780.452.3276  
 Email: [carna@nurses.ab.ca](mailto:carna@nurses.ab.ca)

#### CARNA OFFICE

Address: 11620 168 Street  
Edmonton, Alberta  
T5M 4A6

Office Hours: Monday - Friday

## Payment Summary

We have received your request for registration verification.

**Please note: it may take up to three weeks for your request to be processed.**

You will receive a confirmation email as soon as the verification or documents have been sent to the regulatory body or educational institution.

## Invoice/Receipt

**Verification & Copying:** \$50.00

**GST:** \$2.50

**Account Balance:** \$0.00

**Total Paid:** \$52.50

Thank you, your payment was successful. Please keep this receipt for your records.

*Receipt for  
CARNA registration*