

## AHS Board and Executive Expense Report

**Name:** Linda Iwasiw  
**Title:** Chief Zone Officer South Zone  
**Location:** Medicine Hat  
 Expenses approved during the month of August 2023

Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
<b>Travel (1)</b>										
	P-Card	Meetings					-			
	Expense Claim	Meetings					-			
Aug-23	Direct Bill	Meetings	232		178		410			
<b>Total</b>			<u>\$ 232</u>	<u>\$ -</u>	<u>\$ 178</u>	<u>\$ -</u>	<u>\$ 410</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

**Total for  
the Month** \$ 410

Maximum daily single meal expense claimed in the month \$ -  
 Maximum daily base hotel rate claimed in the month \$ 166  
 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

## 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.
- Refer to Quick Reference Guide for: [Providing a Standard Business Reason\(s\)](#)
- 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

<b>Name :</b> Linda Iwasiw	<b>Reporting Period for the Month of :</b> Aug-23
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
25-Jun-23	<b>Direct Billing</b>	<b>Airline Ticket</b>	Chief Zone Officer Strategy Day in Grande Prairie Sept 20, 2023. Flight was cancelled as meeting was rescheduled, credit is on file for future use.	<b>Vision Travel DT Ontario-West Inc</b>	\$231.52
23-Aug-23	<b>Direct Billing</b>	<b>Hotel</b>	Overnight hotel stay August 15, 2023. Attended Pincher Creek Community engagement session that started at 7pm.	<b>Best Western Plus Service Inn &amp; Suites</b>	\$178.09
	<b>Direct Billing</b>	<b>Choose from Drop-down List</b>		<b>Choose from Drop-down List</b>	
	<b>Direct Billing</b>	<b>Choose from Drop-down List</b>		<b>Choose from Drop-down List</b>	
	<b>Direct Billing</b>	<b>Choose from Drop-down List</b>		<b>Choose from Drop-down List</b>	
<b>Total Paid in the Month</b>					\$ 409.61

# Invoice/Itinerary

Invoice [REDACTED]  
Issued: 28 June 2023  
ALBERTA HEALTH SERVICES  
10030 107 STREET  
EDMONTON AB  
T5J 3E4

Agency Ref.: [REDACTED]  
Sales Person: [REDACTED]  
Passenger(s):

Customer Number: [REDACTED]  
Customer Ref.: N/A  
IWASIW/LINDA MRS

**Disclaimer:** It is your responsibility to carefully review this itinerary immediately upon receipt and notify us if there are any discrepancies.

**Important Information Related To Your Travels:**

For complete Canadian Government details for returning to or travelling to Canada – click [here](#). Please [click here](#) upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you continue to come back to this information regularly in advance of and during travel as requirements and restrictions could change.

AIR - Thursday, September 21 2023

[Add To Calendar](#)

WestJet Flight [REDACTED] Economy Class

Depart	Grande Prairie, Alberta <a href="#">Weather</a> Grande Prairie Municipal Airport 05:05 PM Thursday, September 21 2023	Arrive	Calgary, Alberta <a href="#">Weather</a> Calgary International Airport 06:26 PM Thursday, September 21 2023
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Duration: 1 hour(s) and 21 minute(s) Non-stop

Status: Confirmed - WestJet Booking Reference: [REDACTED]

Operated By: WESTJET ENCORE

Online Check In: Available 24 hours prior - [click here](#)

Remarks: PLEASE CHECK IN WITH WESTJET ENCORE

AIR - Thursday, September 21 2023

[Add To Calendar](#)

WestJet Flight [REDACTED] Economy Class

<b>Depart</b>	Calgary, Alberta <a href="#">Weather</a> Calgary International Airport 08:10 PM Thursday, September 21 2023	<b>Arrive</b>	Medicine Hat, Alberta <a href="#">Weather</a> Medicine Hat Airport 09:09 PM Thursday, September 21 2023
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Duration: 0 hour(s) and 59 minute(s) Non-stop  
 Status: Confirmed - WestJet Booking Reference: [REDACTED]  
 Operated By: WESTJET LINK BY PACIFIC COASTAL  
 Online Check In: Available 24 hours prior - [click here](#)

Remarks: PLEASE CHECK IN WITH WESTJET LINK BY PACIFIC COASTAL

**Invoice Details**

Transaction	Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Invoice Number:	[REDACTED]					
WestJet	[REDACTED]	176.40	55.12	0.00	0.00	231.52
					Billed to [REDACTED]	
<b>Totals:</b>		<b>176.40</b>	<b>55.12</b>	<b>0.00</b>	<b>0.00</b>	<b>231.52</b>
				<b>Total Credit Card Billing:</b>		<b>231.52</b>
				<b>Balance Due:</b>		<b>0.00</b>

**Remarks**

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 24 HOUR EMERGENCY TRAVEL ASSISTANCE  
 OUTSIDE REGULAR BUSINESS HOURS - MONDAY TO FRIDAY  
 A SERVICE FEE MAY APPLY FOR CALLS TO THIS SERVICE  
 WITHIN NORTH AMERICA - CALL 1-888-700-6063  
 OUTSIDE NORTH AMERICA - CALL COLLECT 1-514-855-4263  
 PLEASE QUOTE ACCESS CODE [REDACTED]  
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RECOMMENDED CHECK-IN TIME IS AT LEAST 120 MINUTES  
 PRIOR TO DEPARTURE. AFTER CHECK-IN YOU MUST BE  
 AVAILABLE AT THE BOARDING GATE AT LEAST 60 MINUTES  
 PRIOR TO DEPARTURE OR YOU MAY BE DENIED BOARDING.  
 PLEASE ENSURE THAT YOU HAVE VALID GOVERNMENT ISSUED  
 PHOTO I.D. GATE ASSIGNMENTS AND DEPARTURE  
 ARRIVAL INFORMATION ARE SUBJECT TO CHANGE.  
 PLEASE CHECK MONITORS AT THE AIRPORT.  
 PLEASE RECONFIRM ALL FLIGHTS  
 IT IS YOUR RESPONSIBILITY TO VERIFY FLIGHT TIMES WITH  
 THE AIRLINE PRIOR TO YOUR DEPARTURE. SCHEDULE CHANGE  
 MAY OCCUR AT ANY TIME WITHOUT NOTICE BY THE AIRLINE.

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 ENSURE ALL TRAVELLERS HAVE PROPER TRAVEL DOCUMENTS  
 CHECK THIS WEBSITE FOR AIRPORT SECURITY INFO  
[WWW.CATSA.GC.CA](http://WWW.CATSA.GC.CA)

Best Western Plus Service Inn & Suites  
 209-41 Street South  
 Lethbridge, AB T1J1Z3

Fax: 403-327-8807  
 Email: info@bestwesternlethbridge.ca

Phone: 403-329-6844

Web: www.bestwesternlethbridge.ca



**Invoice**

Guest Name: IWASIW, LINDA MRS  
 Contact: Accounts Payable, Alberta Health Services  
 PO Box 1600  
 United States  
 Phone : [REDACTED]  
 E-mail : [REDACTED]

Invoice # : [REDACTED]  
 Account Name : Alberta Health Services (GST Exempt)  
 Account # : [REDACTED]  
 Confirmation # : [REDACTED]  
 Invoice Printed : Wednesday, August 23, 2023 04:37 PM  
 Folio # : [REDACTED]  
 Billing Reference: [REDACTED]

Department	Date	Reference	Voucher	Folio	Charge	Credit
Room Charge	8/15/2023	Auto Posted		[REDACTED]	\$166.25	
DMF	8/15/2023	Auto Posted		[REDACTED]	\$4.99	
Provincial Tourism Le	8/15/2023	Auto Posted		[REDACTED]	\$6.65	
Provincial Tourism Le	8/15/2023	Auto Posted		[REDACTED]	\$0.20	
<b>Sub Total</b>						
Direct Bill Transfer	8/16/2023	From Account [REDACTED] LINDA MRS IWASIW		[REDACTED]	\$178.09	
<b>Payments</b>						
<b>Current Balance:</b>					<b>\$178.09</b>	