

Official Administrator and Executive Expense Report

Name Mauro Chies
Title Chief Program Officer Clinical Support Services
Location Edmonton
 Expenses submitted during the month of December 2014

Travel (1)

Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Dec-14	Expense Claim	Meeting				29	29			
Dec-14	Direct Billing	Meeting	706				706			
Total			\$ 706	\$ -	\$ -	\$ 29	\$ 735	\$ -	\$ -	\$ -

Total for the Month \$ 735

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

Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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. hotel accommodation, airline tickets, car rental, hosting events and working sessions.
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all other expenses paid by AHS not mentioned above
- Copies of invoices and other relevant back up must be attached including approvals for working sessions/hosting events
- 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 No

Name:	Reporting Period for the Month of:
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Date	Payment Method	Category	Description/Purpose for Expense	Name of Vendor Paid	Amount Paid
2014-12-03	Direct Billing	Transportation	Airfare - Return trip to Calgary to attend Alberta Clinical Pathways Steering Ctte Planning Mtg.	Marlin Travel	\$362.96 ✓
2014-12-09	Direct Billing	Transportation	Airfare - Return trip to Calgary to attend DIPET Meeting	Marlin Travel - (Flight was cancelled - credit on file)	\$342.96 ✓
	Choose One	Choose One			
	Choose One	Choose One		TOTAL PAID IN MONTH	\$705.92 ✓

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

BRANCH: N61107
GST REG# 885101915
PHONE: 780-425-8611

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

YOUR REF : [REDACTED]
LOCATOR : [REDACTED]
OUR REF : [REDACTED]
AGENT :

I N V O I C E
*** D U P L I C A T E ***

INV NO: [REDACTED]
DATE: 26NOV14
PAGE: 1

FOR: MR MAURO CHIES
[REDACTED]

I T I N E R A R Y

*** AIR/RAIL/BUS ***

FROM TO CARRIER FLT/CL ST DATE DEPART ARRIVE MEALS BAGS
EDMONTON INTL CALGARY AIR CANADA 8137 W GK 03DEC 8:00A 8:56A
D8 (300 SERIE

AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]

CALGARY EDMONTON INTL AIR CANADA 8150 W GK 03DEC 3:30P 4:25P
DH4

AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]

C O S T

AIR CANADA TKT NO ACO (INCL 74.96 TAX) 362.96

*** SUB-TOTAL EXCLUDING GST/HST & APT 362.96

*** TOTAL CHARGES THIS INVOICE *** 362.96

PAYMENT BY [REDACTED] TKT [REDACTED] 362.96

*** BALANCE DUE THIS INVOICE **** 0.00

BALANCE DUE TO DATE 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.

CONTINUED ON NEXT PAGE

Return flight to Calgary
Attend Alberta Clinical Pathways
Steering Ctte. Mtg.

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LOCATOR :
OUR REF :
AGENT :



I N V O I C E
*** D U P L I C A T E ***

INV NO: 
DATE: 26NOV14
PAGE: 2

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.

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YOUR REF : [REDACTED]
LOCATOR : [REDACTED]
OUR REF : [REDACTED]
AGENT :

INVOICE
*** D U P L I C A T E ***

INV NO: [REDACTED]
DATE: 26NOV14
PAGE: 1

FOR: MR MAURO CHIES
[REDACTED]

TRIP CANCELLED
CREDIT ON
FILE

----- I T I N E R A R Y -----

*** AIR/RAIL/BUS ***

FROM	TO	CARRIER	FLT/CL	ST DATE	DEPART	ARRIVE	MEALS	BAGS
EDMONTON INTL	CALGARY	AIR CANADA	8133 G	GK 09DEC	7:00A	7:53A		
		DH4						
		AIR CANADA E						
		AIR CANADA CONFIRMATION [REDACTED]						
		TICKET NUMBER [REDACTED]						
CALGARY	EDMONTON INTL	AIR CANADA	8150 G	GK 09DEC	3:30P	4:25P		
		DH4						
		AIR CANADA E						
		AIR CANADA CONFIRMATION [REDACTED]						
		TICKET NUMBER [REDACTED]						

----- C O S T -----

AIR CANADA	TKT NO	ACO	(INCL 74.96	TAX)	342.96
*** SUB-TOTAL EXCLUDING GST/HST & APT					342.96
*** TOTAL CHARGES THIS INVOICE ***					342.96
PAYMENT BY [REDACTED]	TKT	[REDACTED]			0.00
*** BALANCE DUE THIS INVOICE ****					0.00
BALANCE DUE TO DATE					0.00

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CONTINUED ON NEXT PAGE

Return flight to Calgary
Attend DIPET mtg.
Trip cancelled.

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