

### Official Administrator and Executive Expense Report

Name Mauro Chies

Title Chief Program Officer, Clinical Support Services

**Location** Edmonton

Expenses submitted during the month of August 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)
Aug-15	Direct Billing	Meeting	205				205			
Total			\$ 205	\$	- \$ -	\$ -	\$ 205	\$ -	\$ -	\$ -

**Total for** 

the Month \$ 205

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) Otnei

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 Bill 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. 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 when	ether you have expenses to report in the	s section for this reporting period:
Name :	Mauro Chies	Reporting Period for the Month of: Aug-15

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
19-Aug-2015	Direct Billing	Airline Ticket	Travel to Medicine Hats for meetings(Lab Services), Govt Representatives, Stakeholders and AHS Staff	Marlin Travel	205.00
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in the Month					\$ 205.00

MARLIN TRAVEL O-O PERCY HUNT TRAVELGROUP INC MAIN FLOOR, 9929 108TH ST.

EDMONTON, AB T5K 1G8 **GST Reg#:** 885101915

**Branch:** Agent:

To: ALBERTA HEALTH SERVICES

**SUITE 800, NORTH TOWER** 10030-107 ST

**EDMONTON AB CA T5J 3E4** 

**Invoice Number:** 

Date: August 19, 2015

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Our Reference:

W CLASS

# INVOICE

For

MR MAURO CHIES

AC

Tuesday, August 25, 2015

**⋖** Air

AIR CANADA **Flight:** 8143 **Q CLASS** 

12:00 PM **Equipment:** D8 (300 SERIES) From: EDMONTON INTL AB

To: CALGARY AB12:54 PM Mile(s) Flown: 163

Stops: 0 Arrival: 25Aug15

AIR CANADA E

**4** Air

AIR CANADA **Flight:** 7231 Q CLASS From: CALGARY AB 02:35 PM **Equipment:** BEH

To: MEDICINE HAT 03:28 PM Mile(s) Flown: 164

Stops: 0 Arrival: 25Aug15

AIR CANADA E

Wednesday, August 26, 2015

 **Air** 

AIR CANADA **Flight:** 7234 04:00 PM **Equipment:** BEH From: MEDICINE HAT

04:59 PM Mile(s) Flown: 164 CALGARY

Stops: 26Aug15 0 Arrival:

AIR CANADA E

To: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER

10030-107 ST EDMONTON AB CA T5J 3E4 **Invoice Number:** 

**Our Reference:** 

Date: Au

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# INVOICE

Wednesday, August 26, 2015

≼ Air

AIR CANADA Flight: 8172 W CLASS

From: CALGARY AB 05:30 PM Equipment: D8 (300 SERIES)

To: EDMONTON INTL AB 06:22 PM Mile(s) Flown: 163

Stops: 0 Arrival: 26Aug15

AIR CANADA E

Cost:			
TKT-	E-TKT EXCHANGED		205.00
Total:			
		Grand Total:	205.00
		<b>Less Credit Card Payments:</b>	205.00
		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.