

## AHS Board and Executive Expense Report

**Name:** Dr Mircea Fagarasanu  
**Title:** VP Provincial Clinical Excellence, Cancer Care Alberta & Clinical Support Services (Interim)  
**Location:** Edmonton  
 Expenses posted during the month of July 2025

Travel (1)										
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
	P-Card	Meetings					-			
Jul-25	Expense Claim	Meetings		74	161	723	957			
Jul-25	Direct Bill	Meetings			186		186			
<b>Total by category</b>			\$ -	\$ 74	\$ 347	\$ 723	\$ 1,143	\$ -	\$ -	\$ -

**Total  
posted for  
the Month** \$ 1,143

Maximum daily single meal expense posted in the month \$ 24  
 Maximum daily base hotel rate posted in the month \$ 169  
 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 membership dues, 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 Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
FAGARASANU, MIRCEA	VP Provincial Clinical Excellence, Cancer Care Alberta & Clinical Support Services (Interim)	Edmonton	\$ 957.12								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/23/2025	Site Engagement visit at Chinook hospital	AB - Other Zones	Meals Per Diem	\$ 37.00				1			
6/23/2025	Site Engagement visit at Chinook hospital, Meeting was held June 24, 2025	AB - Other Zones	Accommodations	\$ 160.55				1			
6/23/2025	Traveled provincially for site leadership engagement sessions. Lethbridge, Calgary, Red Deer, Westlock.		Mileage-Other	\$ 684.78	Edmonton	Lethbridge, Calgary, Red Deer, Westlock & return		3			1356
6/24/2025	Chinook Regional Hospital for Engagement visit with leaders	AB - Other Zones	Parking - Lot or Parkade	\$ 9.00				1			
6/24/2025	Red Deer for site leadership engagement visit	AB - Other Zones	Meals Per Diem	\$ 13.00				1			
6/25/2025	Southport for Engagement visit with leaders	AB - Other Zones	Parking - Lot or Parkade	\$ 14.29				1			
6/25/2025	Travel to Westlock and back to Edmonton for site leadership engagement visit	AB - Other Zones	Meals Per Diem	\$ 23.50				1			
6/26/2025	University of Alberta Hospital for Engagement visit with leaders	AB - Local	Parking - Lot or Parkade	\$ 15.00				1			
Approver(s) for the claim	Approval Status	Approval Date									
CHILTON, SEAN A	Approve	2-Jul-25									



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Mircea Fagarasanu

Room

Room Type:

Number of Guests: 1

Rate: \$143.00

Clerk:

Arrive: 23Jun25

Time: 05:59PM

Depart: 24Jun25

Time: 09:17AM

Folio Number:

DATE	DESCRIPTION	CHARGES	CREDITS
23Jun25	Advance Deposit		160.55
23Jun25	Room Charge	143.00	
23Jun25	Convention and Tourism Tax	5.72	
23Jun25	Dmf	4.68	
23Jun25	Gst	7.15	
		<b>BALANCE:</b>	<b>0.00</b>

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# RECEIPT

CHIMEX  
FESTIVAL HOSPITAL  
PARKING

License Plate Number



Expiration Date/Time

09:30 AM

~~JUN 25, 2025~~

Purchase Date/Time: 09:30am Jun 24, 2025

Total Due: \$9.00 Rate: \$9.00 - 24 Hours

Total Paid: \$9.00 Pmt Type: CC (Swiped)

Ticket

S/N =

Setting: Lathuride

Match Name:

\*\*\* American Express

Auth #:

Weekly/Monthly Passes  
Avail at Parking Office  
REFUNDS WILL NOT  
BE PROVIDED

DETAILS OF YOUR PURCHASE

PARKING: C150 - SOUTHLAND PARK IV,  
10301 SOUTHPORT LANE SW,  
CALGARY, ALBERTA T2W 1S7

YOUR PURCHASE  
MADE ON: WED, JUNE 25, 2025 08:38

TRANSACTION #: [REDACTED]

PAYMENT: \$14.29

WED, JUNE 25, 2025 08:37 TO WED, JUNE 25, 2025 19:00

Time	Rate	Amount
Jun 25, 2025 08:37 - Jun 25, 2025 19:00	Day Max	\$13.65

Additional Items	Amount
Convenience Fee	\$0.50
Transaction Fee	\$0.14
GST 5.000%	\$0.68

Promo Code: None      Promo Amount: None

CARD XXXX-XXXX-XXX [REDACTED]

VAT [REDACTED]

VAT2# NONE

RECEIPT  
UAFI Parking  
Edmonton, Alberta  
For assistance call  
1-855-535-1100

License Plate Number



Expiration Date/Time

01:50 PM

JUN-27, 2025

Purchase Date/Time: 01:50pm Jun 26, 2025

all Due: \$15.00 Rate: 24 hrs for \$15.00

all Paid: \$15.00 Pat Type: CC (Swipe)

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\*\*\* American Express

Auth #:



Rates are GST Exempt  
Weekly/Monthly passes are  
available@Parking Office  
NO REFUNDS

## 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. 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> Mircea Fagarasanu	<b>Reporting Period for the Month of :</b> Jul-25
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
26-Jun-2025	Direct Billing	Hotel	Zone and Hospital Leadership Engagement June 25, 2025- this visit was at Southport in Calgary after returning from Lethbridge the previous day	Courtyard by Marriott	\$186.31
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
<b>Total Paid in the Month</b>					\$ 186.31

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Mircea Fagarasan

Room: [REDACTED]

Room Type: KSOF

Number of Guests: 1

Rate: \$169.00

Clerk: [REDACTED]

Arrive: 24 Jun25

Time: 05:05PM

Depart: 25 Jun25

Time: 08:12AM

Folio Number: [REDACTED]

DATE	DESCRIPTION	CHARGES	CREDITS
24Jun25	Room Charge	169.00	
24Jun25	Gst	8.96	
24Jun25	Hotel Levy	7.17	
24Jun25	Destination Marketing Fee	10.14	
25Jun25	Gst		8.96
		<b>BALANCE:</b>	<b>186.31</b>

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The undersigned agrees to make immediate payment upon receipt of statement. In the event such payment is not made within 30 days after receipt of the original statement. It is agreed that the hotel may impose a late payment charge at a rate of 1 1/2% per month [annual rate of 18%], or the maximum allowed by law, on the unpaid balance, and the reasonable cost of collection, including attorney's fees.

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