

AHS Board and Executive Expense Report

Name Nancy Guebert
Title Chief Program Officer Cancer Control Alberta (Interim)
Location Calgary

Expenses submitted during the month of November 2016

Travel (1)										
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Nov-16	P-Card	Meetings			977	669	1,646			
Nov-16	Expense Claim	Meetings				362	362			
Nov-16	Direct Billing	Meetings	2,151				2,151			
Total			\$ 2,151	\$ -	\$ 977	\$ 1,031	\$ 4,159	\$ -	\$ -	\$ -

Total for the Month \$ 4,159

Maximum daily single meal expense claimed in the month \$ -
Maximum daily base hotel rate claimed in the month \$ 189
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.

5) Remuneration, Allowances Reported in the Financial Statements

Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

Instruction:

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

<u>GUEBERT, NANCY</u> Cardholder's Name	<u>CHIEF PROGRAM OFFICER</u> Cardholder's Position/Title	Billing Reporting Period	<u>20/11/2016</u>
<u>CANCER CONTROL ALBERTA</u> Cardholder's Dept	<u>TOM BAKER CANCER CENTRE</u> Cardholder's Site/Location	Total Statement Amount	<u>\$1,645.60</u>
<u>NANCY.GUEBERT@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address		Last 8 digits of the P-Card #: XXXXXXXX	

Statement of Transactions								
Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
18/10/2016	[REDACTED]	WESTIN (WESTIN HOTELS), WESTIN HOTELS	✓ 184.13	CAD	184.13	8.77		00 Accommodations YEG mtgs 2-1 Donna, Trevor; 1-1 Matt, Compression Review, Sr Leaders Meeting
19/10/2016	[REDACTED]	THE CALGARY AIRPORT ALL AUTOMOBILE PARKING LOTS AND	✓ 59.70	CAD	59.70	2.80		00 Parking at YYC for YEG mtgs 2-1 Donna, Trevor; 1-1 Matt, Compression Review, Sr Leaders Meeting
20/10/2016	[REDACTED]	CalgParkAuth 21443760, GOVERNMENT SERVICES NOT ELSEWHERE CLASSIFIED	✓ 31.25	CAD	31.25	1.46		Parking YYC Downtown - Guest speaker opening remarks at CANO conference
21/10/2016	[REDACTED]	WESTIN (WESTIN HOTELS), WESTIN HOTELS	✓ 184.13	CAD	184.13	8.77		00 Accommodations in YEG to attend Prov Advisory Councils' Fall Forum Oct 21-22
21/10/2016	[REDACTED]	AIRPORT TAXI SERVICE, LIMOUSINES AND TAXICABS	✓ 63.29	CAD	63.29	3.07		Transportation from YEG airport to Westin hotel (Fall Forum HAC & PAC)
22/10/2016	[REDACTED]	THE CALGARY AIRPORT ALL AUTOMOBILE PARKING LOTS AND	✓ 59.70	CAD	59.70	2.80		00 Parking at YYC airport Oct 21-22 Prov Advisory Councils' Fall Forum (HAC & PAC)
25/10/2016	[REDACTED]	CalgParkAuth 21474874, GOVERNMENT SERVICES NOT ELSEWHERE CLASSIFIED	✓ 5.50	CAD	5.50	26		Parking - YYC Downtown during CANO Conference
24/10/2016	[REDACTED]	PARKING SERVICES, COLLEGES, UNIVERSITIES, PROFESSIONAL	✓ 20.00	CAD	20.00	95		Parking at UofC - Quality Summit Reception
25/10/2016	[REDACTED]	PARKING SERVICES, COLLEGES, UNIVERSITIES, PROFESSIONAL	✓ 24.00	CAD	24.00	1.14		Parking at UofC - Quality Summit lectures/Workshops
09/11/2016	[REDACTED]	AHS MHRH PARKING LOTS, AUTOMOBILE PARKING LOTS AND GARAGES	✓ 7.50	CAD	7.50	36		Parking at Med Hat Reg Hospital to attend BRA Day 2016
07/11/2016	[REDACTED]	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	✓ 75.90	CAD	75.90	3.51		Taxi YEG airport to Westin Hotel mtgs Nov 8-9 (Prov Tumour Teams, Breast Reconstruction Proposal, Myeloma Canada, COEC)
07/11/2016	[REDACTED]	WESTIN (WESTIN HOTELS), WESTIN HOTELS	✓ 424.38	CAD	424.38	20.21		00 Accommodations YEG Nov 7-9 for Nov 8-9 mtgs (Myeloma Canada, Prov Tumour Teams, Breast Reconstruction Proposal, COEC)
08/11/2016	[REDACTED]	GREATER EDMONTON TAXI, LIMOUSINES AND TAXICABS	✓ 9.43	CAD	9.43	45		Taxi from SunLife Plaza to Royal Alex Hospital (Prov Tumour Teams mtgs)
09/11/2016	[REDACTED]	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	✓ 75.90	CAD	75.90	3.51		Taxi from SunLife Plaza to YEG Airport
09/11/2016	[REDACTED]	THE CALGARY AIRPORT ALL AUTOMOBILE PARKING LOTS AND	✓ 68.05	CAD	68.05	4.16		00 Parking at YYC Nov 7-9 (YEG mtgs Myeloma Canada, Prov Tumour Teams, Breast Reconstruction Proposal, COEC)
10/11/2016	[REDACTED]	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	✓ 75.90	CAD	75.90	3.51		Taxi from YEG Airport to SunLife Plaza mtgs CBCP Process, ACF, Cell Imaging Facility, CCP TBCC Monthly, CCAED and
16/11/2016	[REDACTED]	WESTIN (WESTIN HOTELS), WESTIN HOTELS	✓ 184.13	CAD	184.13	8.77		00 Accommodations YEG Nov 16-17 mtgs (CBCP Process, ACF, Cell Imaging Facility, CCP TBCC, CCAED, and CCOC Monthly)
17/11/2016	[REDACTED]	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	✓ 74.75	CAD	74.75	3.56		Taxi from Cross Cancer Institute to YEG Airport after Nov 16-17 mtgs

Signatures		
<p>Cardholder Designate (if Applicable) By signing this statement</p> <ul style="list-style-type: none"> • I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies, Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre. 		
<p><u>SELENE SWELL</u> Name of Cardholder Designate</p> <p><u>[Signature]</u> Signature of Cardholder Designate</p>	<p><u>EXEC ADMIN COORDINATOR</u> Cardholder Designate Position/Title</p> <p><u>NOV. 22/2016</u> Date of Signature</p>	
<p>Cardholder By signing this statement</p> <ul style="list-style-type: none"> • I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy. • I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached. • I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided. 		
<p><u>GUEBERT NANCY</u> Name of Cardholder</p> <p><u>[Signature]</u> Signature of Cardholder</p>	<p><u>CHIEF PROGRAM OFFICER</u> Cardholder Position/Title</p> <p><u>November 22, 2016</u> Date of Signature</p>	
<p>Approver Designate (if Applicable) By signing this statement</p> <ul style="list-style-type: none"> • I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy. • I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained. • I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided. 		
<p><u>RUTH HOLLAND RICHARDSON</u> Name of Approver Designate</p> <p><u>[Signature]</u> Signature of Approver Designate</p>	<p><u>EXECUTIVE ASSISTANT</u> Approver Designate Position/Title</p> <p><u>2016 NOV 24</u> Date of Signature</p>	
<p>Approver By signing this statement</p> <ul style="list-style-type: none"> • I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy. • I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained. • I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided. 		
<p><u>DR. F. BELANGER</u> Name of Approver</p> <p><u>[Signature]</u> Signature of Approver</p>	<p><u>VP QUALITY & CMO</u> Approver Position/Title</p> <p><u>Nov 25/16</u> Date of Signature</p>	
Submit approved statement with attachments to Accounts Payable:		
<p>Attach:</p> <ul style="list-style-type: none"> • Original (or scanned) itemized receipts with documented business reasons including names of participants where required • Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable: • Copies of pre-approvals for travel • Personal cheque payable to "Alberta Health Services" • Return, refund and/or credit receipts • Disputes letter • Business reasons for travel require detailed descriptions - include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason 	<p>Address:</p> <p>Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4</p>	
Accounts Payable only		
Reference #: _____	Reviewed by: _____	Date: _____

#1 Accommodations Edmonton CCA Mtgs:
 2:1 Donna, Trevor; Unmet Needs; 1:1 Matt;
 Compression Review, Snr. Leaders Mtg.
 Oct. 18-19

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
 Alberta Health Services li
 [Redacted]

Page Number : 1 Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 18-OCT-16 17:57
 Depart Date : 19-OCT-16 07:38
 No. Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 19-OCT-16 07:40 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
18-OCT-16	[Redacted]	Room Charge	164.00	
18-OCT-16	[Redacted]	GST	8.45	
18-OCT-16	[Redacted]	Destination Marketing Fee	4.92	
18-OCT-16	[Redacted]	Tourism Levy	6.76	
19-OCT-16	[Redacted]	Mastercard [Redacted]		-184.13
		** Total	184.13	-184.13
		*** Balance	-0.00	

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at westin.com/newbalance

Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
 Alberta Health Services li
 [Redacted]

Page Number : 2 Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 18-OCT-16 17:57
 Depart Date : 19-OCT-16 07:38
 No. Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

As a Starwood Preferred Guest you have earned at least [Redacted] Starpoints for this visit [Redacted]

Tell us about your stay. www.westin.com/reviews

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
10-18-2016	164.00	8.45	6.76	0.00	0.00	4.92	184.13	0.00
10-19-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-184.13
	-----	-----	-----	-----	-----	-----	-----	-----
Total	164.00	8.45	6.76	0.00	0.00	4.92	184.13	-184.13

#2 Parking @ YYC for mtg in Edm.
OCT 18-19 (2:1 Donna, Trevor; 1:1 Matt's Compression Review);
Senior Leaders Mtg.

RECEIPT
GST NO. R122556194

TKT NO: 30327088
POF: [REDACTED]
IN: 10/18/16 06:23
OUT: 10/19/16 19:14
PAID: \$ 58.70
DURATION: 1 12: 51
(GST INCLUDED)

MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

*cc.A notes
Pcard for
Matters.*



#3 Parking YYC Downtown - Guest Speaker
Opening Remarks @ CANO Conference

03) 537-7000 CALGARY PARKING AUTHORITY (4

Terminal: 868
Plate: [REDACTED] Zone: Lot 60 : 9060
[REDACTED]

Valid through:
FRIDAY 21 OCT 16
6:00 AM

AMOUNT PAID: \$31.25 (GST incl.)
START TIME: 10/20/2016 8:18 AM
es (403) 537-7006 FREE Battery Boosting & Tire Inflation Service

Auth No: [REDACTED]
RECEIPT NO: [REDACTED]

*Pcard
Guest speaker
CANO
2016*

AIRPORT TAXI SERVICE
4608 101 ST.
(7808907070)
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/10/21
TIME 2869 16:50:49
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$55.00
TIP \$8.25
TOTAL

\$63.25

#5 Transport
from YYC
Airport to
Westin
Hotel for
Fall Forum
(HAC & PAC)

RECEIPT
GST NO. R122556194

TKT NO: [REDACTED]
POF: [REDACTED]
IN: 10/21/16 13:42
OUT: 10/22/16 17:48
PAID: \$ 58.70
DURATION: 1 04: 06
(GST INCLUDED)

MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

*Fall Forum HAC
PAC - C*



#6 Parking at
YYC Airport Oct 21-22
to attend Prov. Councils'
Fall Forum (HAC / PAC)

MasterCard



APPROVED

AUTH# [REDACTED]
THANK YOU

*Pcard Forum
HAC - C
PAC - C*

ARY PARKING AUTHORITY (403) 537-7000 CALG

Terminal: 868
Plate: [REDACTED] Zone: Lot 60 : 9060
[REDACTED]

Valid through:
SUNDAY 23 OCT 16
6:10 PM

AMOUNT PAID: \$5.50 (GST incl.)
START TIME: 10/23/2016 9:14 AM
ery Boosting & Tire Inflation Services (403) 537-7006 FREE Bat

CANO

#7 Parking
Downtown YYC
for CANO
Conference

#4 Accommodations UEG to attend Fall Advisory Council's Forum Oct. 21 - 22

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

WESTIN®

HOTELS & RESORTS

Nancy Guebert

Page Number : 1 Invoice Nbr : [REDACTED]
Guest Number : [REDACTED]
Folio ID : [REDACTED]
Arrive Date : 21-OCT-16 16:54
Depart Date : 22-OCT-16 14:35
No. Of Guest : 1
Room Number : [REDACTED]
Club Account : [REDACTED]

Tax Invoice

Tax ID : 815461330RT0001
The Westin Edmonton 22-OCT-16 14:40 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
21-OCT-16	[REDACTED]	Room Charge	164.00	
21-OCT-16	[REDACTED]	GST	8.45	
21-OCT-16	[REDACTED]	Destination Marketing Fee	4.92	
21-OCT-16	[REDACTED]	Tourism Levy	6.76	
22-OCT-16	[REDACTED]	Mastercard [REDACTED]		-184.13
		** Total	184.13	-184.13
		*** Balance	-0.00	

KIDS EAT WELL AT WESTIN - Discover kids' meals that are as delicious as they are nutritious with the Westin Eat Well Menu for Kids, developed with Superchefs(TM) to make kids and parents happy. Learn more at westin.com/eatwell

Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
 [Redacted]

Page Number : 2 Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 21-OCT-16 16:54
 Depart Date : 22-OCT-16 14:35
 No. Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

As a Starwood Preferred Guest you have earned at least [Redacted] Starpoints for this visit [Redacted]

Tell us about your stay. www.westin.com/reviews

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
10-21-2016	164.00	8.45	6.76	0.00	0.00	4.92	184.13	0.00
10-22-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-184.13
Total	164.00	8.45	6.76	0.00	0.00	4.92	184.13	-184.13

SH FACE UP	PLACE ON DASH FACE UP	PLACE ON D
Terminal: 3B		TERMINAL: 3B
Plate: [REDACTED]		PLATE: [REDACTED]
Valid through: MONDAY 24 OCT 16 11:59 PM		VALID THROUGH: 24OCT16 11:59 PM
AMOUNT PAID: \$20.00		AMOUNT PAID: \$20.00
ENTRY TIME: 10/24/2016 4:51 PM		ENTRY TIME: 10/24/2016 4:51 PM
RECEIPT NO: [REDACTED]		RECEIPT NO: [REDACTED]
P	P 0050-0124 P	P

#8 Parking @ UofC for Quality Summit Reception

FACE UP	PLACE ON DASH FACE UP	PLACE ON DASH
Terminal: MACEWANA_CWT		TERMINAL: MACEWANA_CWT
Plate: [REDACTED]		PLATE: [REDACTED]
Valid through: TUESDAY 25 OCT 16 11:59 PM		VALID THROUGH: 25OCT16 11:59 PM
AMOUNT PAID: \$24.00	RECEIPT NO: [REDACTED]	AMOUNT PAID: \$24.00
ENTRY TIME: 10/25/2016 8:04 AM		ENTRY TIME: 10/25/2016 8:04 AM
AUTH: [REDACTED]		8:04 AM
TRN: [REDACTED]		RECEIPT NO: [REDACTED]
P	P 0085-048 P	P

#9 Parking @ UofC for Quality Summit workshops/lectures

Paid Med Hat Bra Day

RECEIPT

Welcome to
MEDICINE HAT
REGIONAL HOSPITAL

License Plate Number
[REDACTED]

Expiration Date/Time
01:04 PM
NOV 06, 2016

Purchase Date/Time: 01:04pm Nov 05, 2016
Total Due: \$7.50 Rate: BUY 24 HRS FOR \$7.50
Total Paid: \$7.50 Payment Type: Card
Ticket #: [REDACTED]
S/N #: [REDACTED]
Setting: Medicine Hat [REDACTED]
Mach Name: [REDACTED]

[REDACTED] MasterCard Auth #: [REDACTED]

THANK YOU
DRIVE SAFELY

EIP T PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

#10 Parking @ Med Hat Reg Hospital to attend Bra Day 2016

PRESTIGE CABS Paid: 780.462.4444

GST# B09M374

Date: 07.11.2016 Amount: \$75.90

Driver: [REDACTED] Car#: 516

From: Airport

To: WESTIN

10135-31 Avenue, Edmonton, AB T6N 1C2

#11 Taxi YES Airport to Westin Hotel
Mtg Nov 8-9 (Provincial Team Teams;
Breast Reconstruction Proposal; Myeloma
Canada; COEC)

*Pcard Prox. imo
tammy*
GREATER EDMONTON TAXI
SERVICE
10135 31 AVE NW
EDMONTON AB

*#12 Taxi from
Sunlife Plaza to
Royal Alex Hospital
(Prov. Tumour Teams Mtgs)*

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/11/08
TIME 0206 10:41:16
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$8.20
TIP \$1.23
TOTAL

\$9.43

MasterCard
[REDACTED]

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456
BARREL TAXI 780.489.7777
EDMTAXI.COM
GST 100403070

Pcard
PRESTIGE TRANSPORTATION
10135 31 AVE NW
EDMONTON AB

*#13 Taxi from
Sunlife Plaza to
YYE Airport
after Nov 8-9 mtgs*

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/11/09
TIME 4461 16:40:52
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$66.00
TIP \$9.90
TOTAL

\$75.90

MasterCard
[REDACTED]

APPROVED

AUTH# [REDACTED]
THANK YOU

VERIFIED BY PIN

MERCHANT COPY

RECEIPT
GST NO. R122556194

Pcard

TKT NO: [REDACTED]
POF: [REDACTED]
IN: 11/07/16 16:29
OUT: 11/09/16 19:04
PAID: \$ 88.05
DURATION: 2 02: 35
(GST INCLUDED)

MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

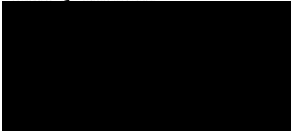
*#15 Parking @ YYE Airport
Nov. 7-9 (YYE Mtgs Myeloma
Canada's Prov Tumour Teams,
Breast Reconstruction Proposal, COEC)*

#14 Accommodations YES Nov. 7-9 to attend Nov. 8-9 mtg
 (Myeloma Canada; Prov Tumour Teams; Breast Reconstruction
 Proposal; Quality & CMO; COEC)

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert



Page Number : 1 Invoice Nbr :

Guest Number :

Folio ID :

Arrive Date : 07-NOV-16 19:36

Depart Date : 09-NOV-16 10:48

No. Of Guest : 1

Room Number :

Club Account :

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 09-NOV-16 10:50

Date	Reference	Description	Charges (CAD)	Credits (CAD)
07-NOV-16		Room Charge	189.00	
07-NOV-16		GST	9.73	
07-NOV-16		Destination Marketing Fee	5.67	
07-NOV-16		Tourism Levy	7.79	
08-NOV-16		Room Charge	189.00	
08-NOV-16		GST	9.73	
08-NOV-16		Destination Marketing Fee	5.67	
08-NOV-16		Tourism Levy	7.79	
09-NOV-16		Mastercard-		-424.38
		** Total	424.38	-424.38
		*** Balance	0.00	

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at westin.com/newbalance

Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
 Alberta Health Services li
 [Redacted]

Page Number : 2 Invoice Nbr : [Redacted]
 Guest Number : [Redacted]
 Folio ID : [Redacted]
 Arrive Date : 07-NOV-16 19:36
 Depart Date : 09-NOV-16 10:48
 No. Of Guest : 1
 Room Number : [Redacted]
 Club Account : [Redacted]

As a Starwood Preferred Guest you have earned at least [Redacted] Starpoints for this visit [Redacted]

Tell us about your stay. www.westin.com/reviews

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
11-07-2016	189.00	9.73	7.79	0.00	0.00	5.67	212.19	0.00
11-08-2016	189.00	9.73	7.79	0.00	0.00	5.67	212.19	0.00
11-09-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-424.38
Total	378.00	19.46	15.58	0.00	0.00	11.34	424.38	-424.38

#16 Taxi from YEG Airport to SunLife Plaza
(mtgs: C&CP Process; ACF; CCR TBC Monthly;
ED Monthly; CCOC Monthly) Nov. 16-17

pcard

PRESTIGE TRANSPORTATION
10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/11/16
TIME 6417 10:27:41
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$66.00
TIP \$9.90
TOTAL

\$75.90

MasterCard

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

PRESTIGE 780.463.5000
GOPRESTIGE.CA
GST 862184769

pcard

10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/11/17
TIME 0323 17:44:03
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$65.00
TIP \$9.75
TOTAL

\$74.75

MasterCard

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS
PRESTIGE 780.463.5000
GOPRESTIGE.CA
GST 862184769

#17 Taxi from
Cross Cancer
Institute to YEG
Airport after Nov.
16-17 mtgs

#18) Accommodations YEG Nov. 16-17 (mtgs: CBCP Process; ACF Cell Imaging Facility; TBCC CCP, CDA ED, and CCOC Monthly mtgs)

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
 Alberta Health Services

Page Number : 1 Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 16-NOV-16 10:32
 Depart Date : 17-NOV-16 06:58
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Tax Invoice

Tax ID : 815461330RT0001
 The Westin Edmonton 17-NOV-16 07:00 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
16-NOV-16	[REDACTED]	Room Charge	164.00	
16-NOV-16	[REDACTED]	GST	8.45	
16-NOV-16	[REDACTED]	Destination Marketing Fee	4.92	
16-NOV-16	[REDACTED]	Tourism Levy	6.76	
17-NOV-16	[REDACTED]	Mastercard [REDACTED]		-184.13
		** Total	184.13	-184.13
		*** Balance	-0.00	

FIND CLARITY, BOOST HAPPINESS - Like a gym membership for your mind, Headspace gives you simple tools to feel happier, work smarter and sleep better. Get some Headspace at westin.com/headspace

As a Starwood Preferred Guest you have earned at least [REDACTED] Starpoints for this visit [REDACTED]

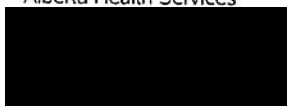
Tell us about your stay. www.westin.com/reviews



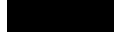

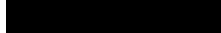
Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
 Alberta Health Services



Page Number : 2 Invoice Nbr : 
 Guest Number : 
 Folio ID : 
 Arrive Date : 16-NOV-16 10:32
 Depart Date : 17-NOV-16 06:58
 No. Of Guest : 1
 Room Number : 
 Club Account : 

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food\Bev	Phone	Other	Total	Payment
11-16-2016	164.00	8.45	6.76	0.00	0.00	4.92	184.13	0.00
11-17-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-184.13
	-----	-----	-----	-----	-----	-----	-----	-----
Total	164.00	8.45	6.76	0.00	0.00	4.92	184.13	-184.13

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
GUEBERT, NANCY COLLEEN	Chief Program Officer, Cancer Control Alberta (Interim)	Calgary	\$ 361.75

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/19/2016	Attend AHS Performance Measurement Session 1		Mileage-Local-Home Zone	\$ 7.73				1			15.3
9/21/2016	Attend AHS Performance Measurement Session 2		Mileage-Local-Home Zone	\$ 7.73				1			15.3
9/23/2016	Attend PACC Meetings Friday evening		Mileage-Local-Home Zone	\$ 6.01				1			11.9
9/24/2016	Attend Saturday PACC meetings		Mileage-Local-Home Zone	\$ 9.85				1			19.5
10/5/2016	Attend 50th Anniversary Celebrations as previous SOO		Mileage-Local-Home Zone	\$ 5.61				1			11.1
10/13/2016	Attend Cancer SCN Core Committee meeting		Mileage-Local-Home Zone	\$ 10.40				1			20.6
10/28/2016	Attend ACF Chair Funding meeting		Mileage-Local-Home Zone	\$ 7.73				1			15.3
11/5/2016	Attend Saturday Cancer BRA Day		Mileage-Local-Home Zone	\$ 298.96				1			592
11/18/2016	Attend meeting w/ACF and Quality CMO		Mileage-Local-Home Zone	\$ 7.73				1			15.3

Approver(s) for the claim	Approval Status	Approval Date
BELANGER, FRANCOIS	Approve	16-Dec-16

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.
- 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

Name : Nancy Guebert	Reporting Period for the Month of : Oct 21 2016 to Nov 20 2016 [REDACTED]
-----------------------------	--

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
08-Nov-16	Direct Billing	Airline Ticket	Attend Edmonton meetings Nov 16-17: CBCP Process; Alberta Cancer Foundation (Cell Imaging Facility); CCA ED and CCOC monthly meetings.	Marlin Travel	357.36
08-Nov-16	Direct Billing	Airline Ticket	Attend Edmonton meetings Dec 12-14: ERC Transition; Cancer SCN Core Committee; CBCP; Monthly Finance Variance; Community Oncology DYAD; Quality & CMO; SunLife Long Service Awards & Christmas function; COEC; and IM/IT Exec Committee	Marlin Travel	347.86
08-Nov-16	Direct Billing	Airline Ticket	Attend Edmonton meetings Nov 24: Action Planning Quality 2020 Launch; Alberta Cancer Foundation; 1:1 w/Dr. Parliament	Marlin Travel	347.86
14-Nov-2016	Direct Billing	Airline Ticket	Attend Edmonton meetings Dec 2: Alberta Health; P Prov Programs	Marlin Travel	357.36
			Invoice #s [REDACTED]		-
Total Paid in the Month					\$ 1,410.44

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.
- 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

Name : Nancy Guebert	Reporting Period for the Month of : Oct 21 2016 to Nov 20 2016 [REDACTED]
-----------------------------	--

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
01-Oct-16	Direct Billing	Airline Ticket	Attend Edmonton mtgs Oct 27: Executive Steering Committee Calgary Cancer Centre	Marlin Travel	381.11
06-Oct-16	Direct Billing	Airline Ticket	Attend Edmonton mtgs Nov 8 & 9: Myeloma Canada;Prov Tumour Teams Council;Breast Reconstruction Proposal;COEC	Marlin Travel	359.26
			Invoice [REDACTED]		
					-
Total Paid in the Month					\$ 740.37



Trip Statement

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 08 Nov 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: MEA MOORE File Locator: [REDACTED]
--	---

PASSENGERS: MS NANCY GUEBERT

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	282.40	0.00	\$0.00	74.96	0.00	357.36 CAD
Total:	282.40	0.00	0.00	74.96	0.00	357.36 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/07/2016		[REDACTED]	357.36 CAD
				Total Payment:	357.36 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
REASON FOR TRAVEL ACF AND OPERATIONAL COMMITTEE MEETINGS

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****

PLEASE REVIEW YOUR ITINERARY FOR ACCURACY

PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [REDACTED]
Booking Date: 08 Nov 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: MEA MOORE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
NANCY GUEBERT	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: NANCY GUEBERT
Booking Date: 07 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08134	CALGARY INTL 16 Nov 16 9:05AM		EDMONTON INTL 16 Nov 16 9:55AM	W		
AIR CANADA	08173	EDMONTON INTL 17 Nov 16 7:10PM		CALGARY INTL 17 Nov 16 8:02PM	G		



Trip Statement

ALBERTA HEALTH SERVICES
 ALBERTA HEALTH SERVICES
 10030 - 107 STREET
 EDMONTON AB
 T5J 3E4

Trip #: [REDACTED]
 Booking Date: 08 Nov 16
 Client: [REDACTED]
 Client Phone #: [REDACTED]
 Client Email: [REDACTED]
 Agent: MEA MOORE

File Locator: [REDACTED]

INSURANCE

PASSENGERS: MS NANCY GUEBERT

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	272.90	0.00	\$0.00	74.96	0.00	347.86 CAD
Total:	272.90	0.00	0.00	74.96	0.00	347.86 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/08/2016	[REDACTED]	[REDACTED]	347.86 CAD
Total Payment:					347.86 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****
 *****PLEASE REVIEW YOUR ITINERARY FOR ACCURACY***
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY
 ***** FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW
[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/traveldoc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. *****
 *****PLEASE NOTE CHECKIN TIMES*****
 **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----AIR CANADA RULES-----
 TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO [WWW.AIRCANADA.COM](http://www.aircanada.com) TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [REDACTED]
Booking Date: 08 Nov 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: MEA MOORE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
NANCY GUEBERT	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: NANCY GUEBERT
Booking Date: 08 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08130	CALGARY INTL 12 Dec 16 6:45AM		EDMONTON INTL 12 Dec 16 7:41AM	G		



AIR

Passengers: NANCY GUEBERT
Booking Date: 08 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08171	EDMONTON INTL 14 Dec 16 6:00PM		CALGARY INTL 14 Dec 16 6:59PM	G		



Trip Statement

ALBERTA HEALTH SERVICES
 ALBERTA HEALTH SERVICES
 10030 - 107 STREET
 EDMONTON AB
 T5J 3E4

Trip #: [REDACTED]
 Booking Date: 08 Nov 16
 Client: [REDACTED]
 Client Phone #: [REDACTED]
 Client Email: [REDACTED]
 Agent: MEA MOORE

File Locator: [REDACTED]

PASSENGERS: MS NANCY GUEBERT

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	272.90	0.00	\$0.00	74.96	0.00	347.86 CAD
Total:	272.90	0.00	0.00	74.96	0.00	347.86 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/08/2016	[REDACTED]	[REDACTED]	347.86 CAD
Total Payment:					347.86 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
 REASON FOR TRAVEL COEC AND EXEC STEERING FOR CALGARY CANCER PROJECT

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 ***** **PLEASE REVIEW YOUR ITINERARY FOR ACCURACY**
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY
 ***** FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW
[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/traveldoc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. ***** **PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [REDACTED]
Booking Date: 08 Nov 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: MEA MOORE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
NANCY GUEBERT	Not Specified	Not Specified

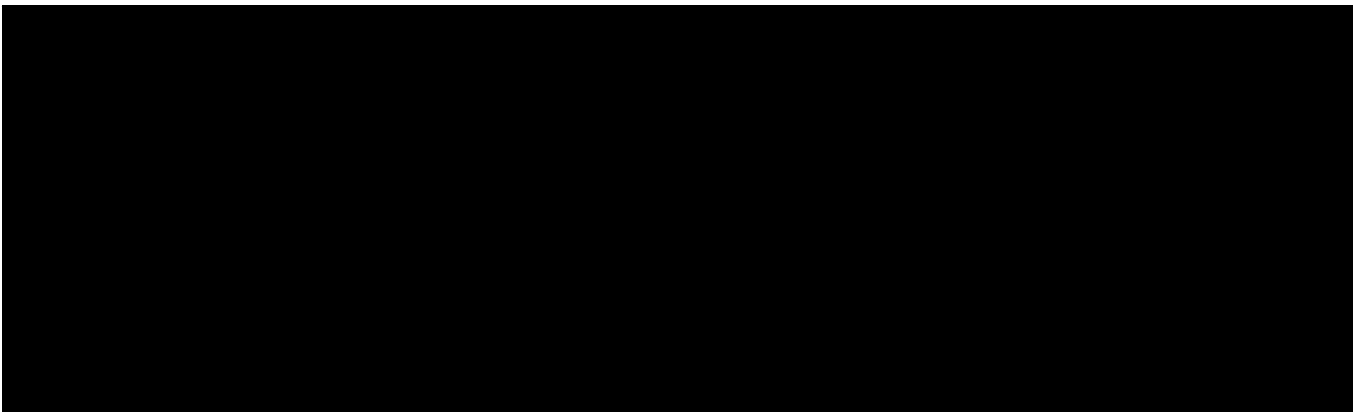
All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: NANCY GUEBERT
Booking Date: 08 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08225	CALGARY INTL 23 Nov 16 6:00PM		EDMONTON INTL 23 Nov 16 6:50PM	G		



AIR

Passengers: NANCY GUEBERT
Booking Date: 08 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08171	EDMONTON INTL 24 Nov 16 6:00PM		CALGARY INTL 24 Nov 16 6:56PM	G		



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 14 Nov 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: MEA MOORE File Locator: [REDACTED]
--	---

PASSENGERS: MS NANCY GUEBERT

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	282.40	0.00	\$0.00	74.96	0.00	357.36 CAD
Total:	282.40	0.00	0.00	74.96	0.00	357.36 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/14/2016		[REDACTED]	357.36 CAD
Total Payment:					357.36 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
REASON FOR TRAVEL MEETING WITH ALBERTA HEALTH

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2ECO *****

PLEASE REVIEW YOUR ITINERARY FOR ACCURACY

PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY

***** FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW

[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/traveldoc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. *****

*****PLEASE NOTE CHECKIN TIMES*****

**DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [REDACTED]
Booking Date: 14 Nov 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: MEA MOORE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
NANCY GUEBERT	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: NANCY GUEBERT Booking Date: 14 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08130	CALGARY INTL 02 Dec 16 6:45AM		EDMONTON INTL 02 Dec 16 7:41AM	G/	
AIR CANADA	08151	EDMONTON INTL 02 Dec 16 3:30PM		CALGARY INTL 02 Dec 16 4:24PM	G/	



Invoice

ALBERTA HEALTH SERVICES "SUITE 800, NORTH TOWER" 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 01 Oct 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: MEA MOORE File Locator: [REDACTED]
---	---

INSURANCE

PASSENGERS: MS NANCY GUEBERT

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	306.15	0.00	\$0.00	74.96	0.00	381.11 CAD
Total:	306.15	0.00	0.00	74.96	0.00	381.11 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	09/27/2016			0.00 CAD
	[REDACTED]	10/01/2016		[REDACTED]	381.11 CAD
Total Payment:					381.11 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
 REASON FOR TRAVEL PROV BREAST HEALTH INITIATIVE MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****
 ***** PLEASE REVIEW YOUR ITINERARY FOR ACCURACY*****
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY
 ***** FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW
[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/traveldoc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. *****
 ***** PLEASE NOTE CHECKIN TIMES*****
 **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----AIR CANADA RULES-----
 TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

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

Trip #: [REDACTED]
Booking Date: 01 Oct 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: MEA MOORE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
NANCY GUEBERT	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: NANCY GUEBERT
Booking Date: 27 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08152	CALGARY INTL 26 Oct 16 4:45PM		EDMONTON INTL 26 Oct 16 5:39PM	Q/	



AIR

Passengers: NANCY GUEBERT
Booking Date: 27 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08153	EDMONTON INTL 27 Oct 16 6:00PM		CALGARY INTL 27 Oct 16 6:56PM	G/	



Invoice

ALBERTA HEALTH SERVICES "SUITE 800, NORTH TOWER" 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 06 Oct 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: MEA MOORE File Locator: [REDACTED]
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INSURANCE

PASSENGERS: MS NANCY GUEBERT

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	284.30	0.00	\$0.00	74.96	0.00	359.26 CAD
Total:	284.30	0.00	0.00	74.96	0.00	359.26 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	10/06/2016	[REDACTED]	[REDACTED]	359.26 CAD
	[REDACTED]	10/06/2016	[REDACTED]	[REDACTED]	0.00 CAD
				Total Payment:	359.26 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
 REASON FOR TRAVEL PROVINCIAL TUMOUR TEAM MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****
 ***** PLEASE REVIEW YOUR ITINERARY FOR ACCURACY*****
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY
 ***** FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW
[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/traveldoc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. *****
 ***** PLEASE NOTE CHECKIN TIMES*****
 **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

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

Trip #: [REDACTED]
Booking Date: 06 Oct 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: MEA MOORE

File Locator: [REDACTED]

MY ITINERARY

Passengers NANCY GUEBERT	Citizenship Not Specified	Required Travel Documents Not Specified
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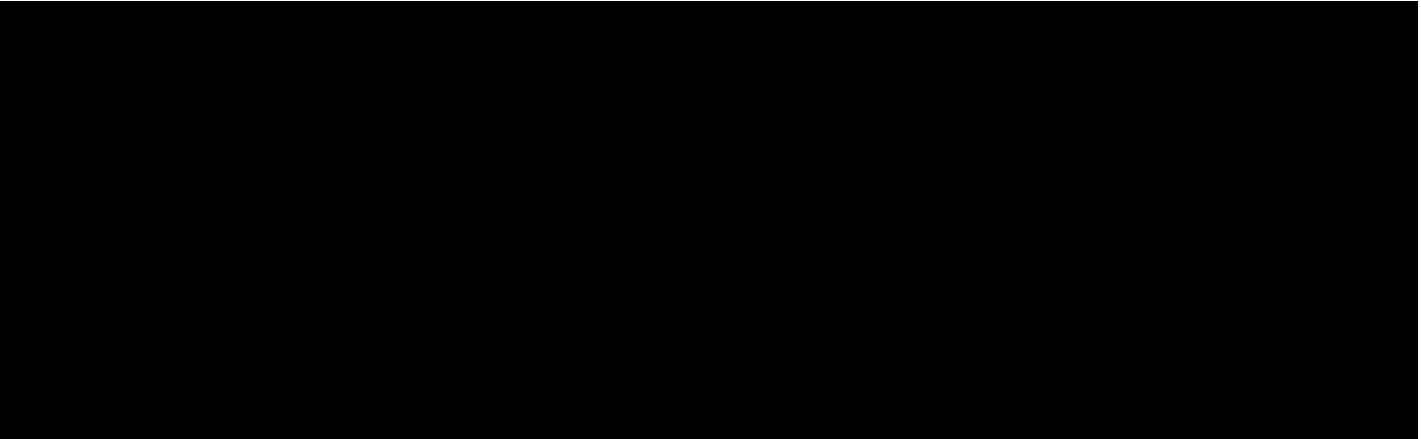
All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: NANCY GUEBERT	Booking Date: 06 Oct 16
	File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08225	CALGARY INTL 07 Nov 16 6:00PM		EDMONTON INTL 07 Nov 16 6:50PM	G/	



AIR

Passengers: NANCY GUEBERT	Booking Date: 06 Oct 16
	File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08171	EDMONTON INTL 09 Nov 16 6:00PM		CALGARY INTL 09 Nov 16 6:56PM	V/	