

Official Administrator and Executive Expense Report

Name	Other Official Administrator
Title	Office Administrator
Location	Calgary
Expenses sul	omitted during the month of November 2014

				Trave	l (1)								
Source Date Document Purpose	Airf	are	Meals	Accomm	odation	Other Travel	Total Travel	Profess Develop (2)	ment	Se Hos	orking essions ting and spitality (3)	Ot	ther (4)
Nov-14 P-Card Meetings							-						184
Total	\$	-	\$	- \$	-	\$ -	\$ -	\$	-	\$	-	\$	184
Total for the Month \$ 184													
Maximum meal expense claimed in the month Maximum daily 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

P-Card details Online ® Cardholder Statement Report

Alberta	Health
Service	S

Instruction:	an a		and a second
 Attached ALL original detailed 	receipts and supporting documents in the	same order as it appears on this stat	lement
Cardholder AND Approver's si	gnatures required where indicated below		
DECOSTE, LOU	EXECUTIVE ASSISTANT		
Cardholder's Name	Cardholder's Position/Title	Billing Reporting Period:	20/11/2014
OFFICE OF THE OFFICIAL	SOUTHLAND PARK III		
Cardholder's Dept	Cardholder's Site/Location	Total Statement Amount:	\$183.64
LOU.DECOSTE@ALBERTAHEALT	HSERVICES.CA		
Cardholder's e-mail address		Last 6 digits of the P-Card #	#:

Statement	ar iransacu	ons						
Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount		Trans Amount	GST	Freig	Description t
25/10/2014	368775401	CALGARY HERALD SUB, DIRECT MARKETING - OTHER DIRECT	31.50	CAD	31.50	1.50		Subscription fee for Calgary Herald for the OA office
06/11/2014	370246096	OLLY FRESCO S, EATING PLACES, RESTAURANTS	115.00	CAD	115.00	5.48		Catering-Lunch for OA's Audit & Finance Advisory Committee Meeting on November 6, 2014
07/11/2014	370631035	OLLY FRESCO S, EATING PLACES, RESTAURANTS	-14.00	CAD	-14.00	67		Refund for return of refreshments from Audit and Finance meeting on November 6, 2014
13/11/2014	370972549	OLLY FRESCO S, EATING PLACES, RESTAURANTS	22.00	CAD	22.00	1.05		Catering-Refreshments for OA's Quality & Safety Advisory Committee Meeting on November 13, 2014
17/11/2014	371288800	CALGARY SUN, NEWS DEALERS AND NEWSSTANDS	29.14	CAD	29.14	1.39		Subscription fee for Calgary Sun for the OA Office

Alberta Health Services	P-Card details Online @ Cardholder Statement Report
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Control for Dosignate (if Appleoube) By signing and statement • Thereby centry that - have reviewed and recorded Program Liker Guide and Tracing, - have stocked	ons statement in SMO One-end the bast of my statery to accordance to AIIIS Corporate Posters ? a high-sensor is, so the procer cost central
Numer of Catchedee Designate	Carana der Dasienste Position/Title
Signature of Carefronder Designate	Dere of Dignation
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Senance of Caroline der	NUX 34/14

Approver Designate (if Apply able)

By signing this statement

1 Affekt that I have seed and understand the "Trivel, Hospital's and Victoring Galaxies Expense Policy (1122)" of Apenta Health Dervices and control expenses being claimed are in completions with such policy

I altest the trapensor enclosed in the chemical business corpores for Alberta Hastin Services and that the claim has not been producely claimed by the claimant or on their benefitron Alberta Hestin Services of any other Organization. A personal charges for personal exponent inadvertently charged has peen obtained

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Approver By signing this statement.

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Acting Cornerate Secretary

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RUN DATE: 11/24/2014

Proprietary and Confidential Poweres by BMO Spend & Payment Solutions

PAGE NO: 2



Price Includes GST., GST: 8929214	5-RT00001
SERVICE TYPE:	7 Days
DATE:	November 26, 2014
ACCOUNT #	
NAME:	AB Health Services (John Cowell)
ADDRESS:	
CITY:	
POSTAL CODE:	
PHONE NUMBER:	ninitiette te angenerate en
AMOUNT PAID:	<u>\$29.14</u>
PAYMENT METHOD:	
Approval Code:	
PAYMENT DATE:	November 17, 2014
EXPIRY DATE:	December 16, 2014

SUBSCRIPTION RECEIPT

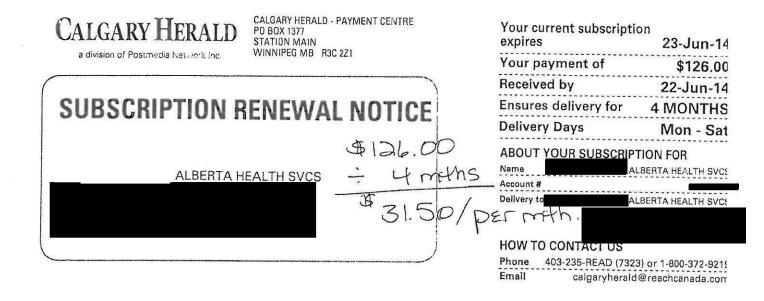
SUBSCRIPTION RATES [per Paper] (as of June 2014)

\$83.40
\$166.80
\$333.61

SUN MEDIA

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- Register by completing the information on the reverse of this stub and sending it in
 - You can have us charge your credit card
 - You can have a withdrawal from your bank account

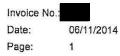
How do I pay?

- Pay online by visiting www.calgaryherald.com/renew
- Pay by calling 403-235-READ (7323) or 1-800-372-9219
- Pay by completing the information is on the reverse of this stub and sending it in.
 - You can pay by cheque
 - · You can pay by credit card

ONE-TIME TERMS

OLLY FRESCO'S INC UNIT 120 - 10301 SOUTHPORT LANE SW CALGARY, Alberta T2W 1S7 CANADA

INVOICE



Sold to:

Ship to:



Business No.:

3**-**11

Item No.	Unit	Quantity	Description	Tax	Unit Price	Amount
Item No.	Unit Each Each Each Each Each Each Each Each	10 10 5 5 1 5 5 5	@9:30am coffee Hot Water water @11:45am Deli Sandwiches small veggie platter Yogurt Parfait water soft drink(diet coke) Subtotal: Tetorn ¶ 8 water	1687590 PURCHA	1.50 0.75 1.75 5.75 30.00 1.50 1.75 1.75 1.75	Amount 15.0 7.5 8.7 28.7 30.0 7.5 8.7 8.7 115.0
			Total		\$115.00	
			Retain t	his copy ;	for your	
annan da faran a maran an ann an				<u> </u>		
omment:					Total Amount	115.0

OLLY FRESCO'S INC UNIT 120 - 10301 SOUTHPORT LANE SW CALGARY, Alberta T2W 1S7 CANADA

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INVOICE

Invoice No .:	57
Date:	06/11/2014
Page:	1

Sold to:

Ship to:



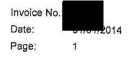
Business No.:

Item No.	Unit	Quantity	Description	Tax	Unit Price	Amount
_			@9:30am	- to see a second		
C	Each	10	coffee	1 1	1.50	15.0
HW	Each		Hot Water		0.75	7.!
W	Each	2			1.75	3.5
1414 J.	warmen up		@11:45am			
DS	Each	5	Deli Sandwiches		5.75	28.
SVP	Each	1	small veggie platter		30.00	30.0
YP	Each	5	Yogurt Parfait	1	1.50	7.
SD	Each					
50	Each	5	soft drink(diet coke)		1.75	8.
			Subtotal:			101.0
			tii) 11-07 Acct Exp D Name: Trace	# ate	17042 NORTH 1011	
			Inv. Auth		RRN 001698016	
			Refun	d	\$14.00	
					and the second	
	1		Total		\$14.00	
			1.000000000			
					REFUND	
			Re	tain this co	py for your	
				1 1		
	<u> </u>	<u> </u>				
comment:					Total Amount	101.0

OLLY FRESCO'S INC

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INVOICE



Sold to:

Ship to:



Business No.:

Item No.	Unit	Quantity	Description	Tax	Unit Price	Amount
Item No. SD J W	Unit Each Each		Description soft drink(diet coke) Julice(2 cranberry, orange) water Subtotal:	Tax	Unit Price	Amount 3.5(8.00 10.5(22.0(
omment:					Total Amount	22.00