

## AHS Board and Executive Expense Report

**Name** Penny Rae  
**Title** Chief Information Officer  
**Location** Calgary

Expenses submitted during the month of January 2018

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)
Jan-18	P-Card	Meetings			341	157	498			
Jan-18	Expense Claim	Meetings		121			121			
Jan-18	Direct Billing	Meetings	424				424			
<b>Total</b>			\$ 424	\$ 121	\$ 341	\$ 157	\$ 1,043	\$ -	\$ -	\$ -

**Total for the Month** \$ 1,043

Maximum daily single meal expense claimed in the month \$ 24  
 Maximum daily base hotel rate claimed in the month \$ 159  
 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.

## AHS Public Disclosure P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
RAE, PENELOPE JANE	Chief Information Officer	Calgary	\$ 497.32								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/16/2018	Attendance at Jan 16 ELT meeting & Connect Care Orientation	AB - Other Zones	Taxi	\$ 60.50	Edmonton International Airport	Seventh Street Plaza	Taxi on January 16 from Edm. International Airport to Seventh Street Plaza to join ELT meeting and Orientation for Connect Care mtg.	1			
1/16/2018	Taxi on Jan. 16 from residence to Cgy International Airport to attend ELT mtg and Connect Care Orientation mtg in Edm.	AB - Local	Taxi	\$ 41.40	Residence	Calgary International Airport	Taxi on January 16th from residence to Calgary International Airport to attend (1) Executive Leadership Team mtg. and (2) Connect Care Orientation mtg.	1			
1/18/2018	Edm. hotel Jan 16-18 while attending mtgs in Edm.	AB - Other Zones	Accommodations	\$ 340.64			Hotel in Edm. from Jan 16-18 while attending (1) Exec Leadership Team (2) Connect Care Orientation (3) CFO Portfolio (4) CCEC (5) HIEC (6) Managers Update) (7) 1 on 1 with M Polari	2			
1/18/2018	Taxi on Jan 18 from ATB Building to Edm. International Airport	AB - Other Zones	Taxi	\$ 54.78	10025 Jasper Avenue	Edmonton International Airport	Taxi on Jan 18 from ATB Place after attending the following mtgs.: (1) CCEC (2) HIEC with GoA (3) G5 additional time	1			
Approver(s) for the claim		Approval Status	Approval Date								
RHODES, DEBORAH		Approve	1-Feb-18								

GREATER EDMONTON TAXI  
SERVICE  
10135 31 AVE NW  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/01/16  
TIME 0964 08:47:19  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE  
AMOUNT \$55.00  
TIP \$5.50  
TOTAL

**\$60.50**

MasterCard  
[REDACTED]

Taxi on January 16th from Edm.  
International Airport to Seventh Street  
Plaza to attend (1) Executive Leadership  
Team mtg. and (2) Connect Care  
Orientation

**APPROVED**

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

ST. THERESA ROAD SE  
CALGARY AB T2A 1A2

CURRINER TO  
MERCANTILE TO  
RENTAL TO  
POSTAL TO  
GST ACCOUNT #:  
TRIP NUMBER  
TAXI NUMBER



NO. OF TRIP  
START DATE  
END DATE

TRIP TYPE  
RATE

TAXI AMOUNT

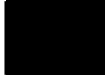
\$ 35.00

TAXI SERVICE  
TIP SERVICE

\$ 1.00  
\$ 1.00

**TOTAL \$ 41.00**

MASTERCARD SALES



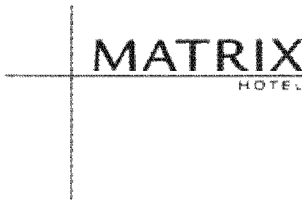
APPROVAL NUMBER

\*\*\*PASSENGER COPY\*\*\*

Call us at  
1-800-421-4555  
Visit <http://www.checker.com>



**Taxi on January 16th from residence to  
Calgary International Airport to attend the  
following mtgs. in Edm. (1) Executive Leadership  
Team mtg. and (2) Connect Care Orientation**



MRS Penelope Rae

Room Number: [Redacted]  
Arrival Date: 01-16-18  
Departure Date: 01-18-18  
Page No: 1 of 1

Guest Name:

**INFORMATION INVOICE**

Folio No:

01-18-18

Date	Description	Charges	Credits
01-16-18	Room Revenue	159.00	
01-16-18	Destination Marketing Fee - 3%	4.77	
01-16-18	Tourism Levy - 4%	6.55	
01-17-18	Room Revenue	159.00	
01-17-18	Destination Marketing Fee - 3%	4.77	
01-17-18	Tourism Levy - 4%	6.55	
<b>Total</b>		<b>340.64</b>	<b>0.00</b>
<b>Balance</b>		<b>340.64</b>	

**Signature:** \_\_\_\_\_

I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #105631154 RT 0008

**Edmonton hotel Jan 16-18 to attend the following mtgs.: (1) ELT (2) Connect Care orientation (3) CFO Portfolio (4) CCEC (5) HIEC (6) Managers Update (7) 1 on 1 with Matt Polari**

GREATER EDMONTON TAXI  
SERVICE

10135 31 AVE NW  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/01/18  
TIME 9369 15:54:20  
INVOICE # [REDACTED]  
RECEIPT NUMBER  
[REDACTED]

PURCHASE  
AMOUNT \$49.80  
TIP \$4.98  
TOTAL

**\$54.78**  
-----

MasterCard  
[REDACTED]

**Taxi on Jan. 18th from ATB Place to  
Edmonton International Airport after  
attending the following mtgs.: (1) CCEC  
(2) HIEC with GoA (3) G5 Additional Time**

**APPROVED**

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
RAE, PENELOPE JANE	Chief Information Officer	Calgary	\$ 121.50									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
1/16/2018	Attendance in Edm on Jan 16 for ELT and Connect Care Orientation	AB - Other Zones	Meals Per Diem	\$ 37.00			Meals on Jan. 16 in Edmonton while attending ELT meeting and Connect Care Orientation meeting. Lunch \$13.00 Dinner \$24.00	1				
1/17/2018	Attendance in Edm. on Jan. 17 to attend (1) Weekly Connect Care Update (2) CFO Portfolio (3) 1 on 1 with Mercy Nickel (4) Managers Update	AB - Other Zones	Meals Per Diem	\$ 37.00			Meals on Jan. 17 in Edm. while attending: (1) Weekly Connect Care Update (2) CFO Portfolio mtg. (3) Managers Update on Connect Care (4) 1 on 1 with Mercy Nickel (5) 1 on 1 with M. Polari Lunch \$13.00 Dinner \$24.00	1				
1/18/2018	Attendance in Edm. on January 18th to attend (1) CCEC mtg (2) HIEC mtg with GoA (3) CIS G5 Additional Time	AB - Other Zones	Meals Per Diem	\$ 47.50			Meals in Edm on January 18th while attending the following mtgs.: (1) CCEC (2) HIEC with GoA (3) G5 additional time Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1				
<b>Approver(s) for the claim</b>		<b>Approval Status</b>		<b>Approval Date</b>								
RHODES, DEBORAH		Approve		1-Feb-18								

## 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**

<b>Name :</b> Penny Rae	<b>Reporting Period for the Month of :</b> December 21st, 2017 to January 20th, 2018
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
12-Jan-2018	Direct Billing	Airline Ticket	Airfare Calgary to Edmonton on January 16th to attend Executive Leadership meeting, Connect Care Orientation and Resourcing for Connect Care Analytics and Inquiry Supports followed by two days of Edmonton meetings	Marlin Travel	\$178.26
20-Jan-2018	Direct Billing	Airline Ticket	Airfare Edmonton to Calgary on January 18th after attending (1) Weekly Connect Care Update (2) CFO Portfolio mtg., (3) 1 on 1 with Mercy Nickel (4) Managers update on Connect Care (5) CCEC mtg. (6) HIEC mtg with GofA (6) CIS G5 Additional time	Marlin Travel	\$245.44
	Direct Billing				
	Direct Billing				
	Direct Billing				
<b>Total Paid in the Month</b>					<b>\$ 423.70</b>



**Traveler**

Passenger Name:  
RAE, PENELOPE MRS

e-Ticket Number:  
[REDACTED] 3

Reservation Number:  
[REDACTED]

Issue Date:  
January 12, 2018

**Agency Details**

Agency Information:  
MARLIN TRAVEL  
9929 - 108Th.Street Government Centre 0/  
Edmonton, AB T5K 1G8  
Canada

Agency Phone:  
780 425-8611 MARLIN TRAVEL 60-87935-

**Fare Information**

Form Of Payment:  
CAX [REDACTED] X3249

This ticket was purchased with additional funds collected during a ticket exchange process. Additional payment was collected at the time of exchange in the amount of CAD 178.26

Fare: CAD 128.78

Taxes and Carrier-imposed fees:  
CAD 7.48 CA  
CAD EXEMPT XG  
CAD 42.00 XT

Amount Charged: CAD 178.26

**Airfare Calgary to Edmonton on Jan 16  
to attend Executive Leadership Team  
mtg., Connect Care Orientation and  
Resourcing for Connect Care Analytics  
and Inquiry Supports**



**Invoice**

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

Trip #: [REDACTED]  
 Booking Date: 20 Jan 18  
 Client: [REDACTED]  
 Agent: [REDACTED]

File Locator: [REDACTED]

**PASSENGERS:** MRS PENELOPE RAE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
WESTJET Ticket # [REDACTED]	195.96	0.00	\$0.00	49.48	0.00	245.44 CAD
<b>Total:</b>	<b>195.96</b>	<b>0.00</b>	<b>0.00</b>	<b>49.48</b>	<b>0.00</b>	<b>245.44 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	01/16/2018	[REDACTED]	[REDACTED]	245.44 CAD
<b>Total Payment:</b>					<b>245.44 CAD</b>

<p>– <b>Airfare Edmonton to Calgary on Jan 18 after attending: (1) Weekly Connect Care Update (2) CFO Portfolio (3) 1 on 1 with Mercy Nickel (4) Managers Update on Connect Care (5) CCEC (6) HIEC mtg with GoA and (6) CIS G5 Additional Time</b></p>	<p><b>Balance Due CAD Currency</b></p> <p><b>0.00 CAD</b></p>
<p><b>Total GST</b></p> <p>0.00</p>	<p><b>Total HST</b></p> <p>\$0.00</p>

TRAVEL APPROVED BY DEBORAH.RHODES  
 CORPORATE UNIT 101  
 BOOKING METHOD NUTRAVEL  
 REASON FOR TRAVEL MTGS WITH EPIC? CONNECT CARE EC & HIEC

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: 20 Jan 18  
Client: [REDACTED]  
Agent: [REDACTED]

File Locator: [REDACTED]

### MY ITINERARY

Passengers	Citizenship	Required Travel Documents
PENELOPE RAE	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: PENELOPE RAE

Booking Date: 16 Jan 18  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	03140	EDMONTON INTL 18 Jan 18 6:00PM		CALGARY INTL 18 Jan 18 7:00PM	V/	