

## AHS Board and Executive Expense Report

**Name:** Dr Peter Jamieson  
**Title:** Interim Vice President, Quality and Chief Medical Officer  
**Location:** Calgary  
 Expenses posted during the month of April 2024

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)
Apr-24	P-Card	Meetings					-			
	Expense Claim	Meetings		48		189	236			
	Direct Bill	Meetings					-			
<b>Total by category</b>			\$ -	\$ 48	\$ -	\$ 189	\$ 236	\$ -	\$ -	\$ -

**Total  
posted for  
the Month** \$ 236

Maximum daily single meal expense posted in the month \$ 24  
 Maximum daily base hotel rate posted 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 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

# MEDICAL STAFF COMMITTEE, PROJECT OR EVENT INVOICE

**Practitioner Name:** Dr. Peter Jamieson **AHS Medical Staff:** ☐ Yes ☐ No **Primary Zone:** Calgary 

**Prof Corp:** Name: Email Address: 

Committee, Project or Event Name	Meeting Event Date	Participation Method	Meeting Commitment Time	Stipend	Travel Expenses (if applicable)	Comments
				<b>Stipend Total</b>	<b>\$ 0.00</b>	

**Required Participation Review/Confirmation:** Cannot be signed by claimant

Approval kept on  
file

Title Signature Date

Please send the completed invoice and receipts (if applicable) to:



**Prepared By:** \_\_\_\_\_

**Expense Claim Details - Medical Staff Reimbursement for Approved AHS Committee/Project/Event Participation**

<b>ATTN: Please enter PER DATE, not per category</b>		<b>Meals -Per Diem (Refer Below)</b>			<b>Transportation &amp; Accommodation</b>						<b>Mileage**</b>		<b>Details</b>
<b>Committee/ Project/ Event Name</b>	<b>Expense Date (MM/DD/YY)</b>	<b>B</b>	<b>L</b>	<b>D</b>	<b>Hotel</b>	<b>Airfare</b>	<b>Taxi</b>	<b>Parking</b>	<b>Rental</b>	<b>Other* (Note details)</b>	<b>KM</b>	<b>Rate</b>	<b>*Other - include description of expense **Mileage - Required to include to/from destination</b>
Edmonton Trip for request in person meeting with CEO with Accreditation Canada	3/25/24	\$10.50	\$13.00	\$24.00								0.505	Flight early am and evening same day - submitting for full day breakfast/lunch/supper
Edmonton Trip for request in person meeting with CEO with Accreditation Canada	3/25/24						41.38					0.505	uber home to YYC Calgary Airport
Edmonton Trip for request in person meeting with CEO with Accreditation Canada	3/25/24						59.02					0.505	uber YEG Edmonton Airport to Seventh St Plaza AHS work SSP
Edmonton Trip for request in person meeting with CEO with Accreditation Canada	3/25/24						88.55					0.505	taxi from YYC Calgary airport to home
												0.505	
												0.505	
												0.505	
												0.505	
<b>Sub Totals:</b>		\$10.50	\$13.00	\$24.00	\$0.00	\$0.00	\$188.95	\$0.00	\$0.00	\$0.00	0.00	0.505	

For full terms and conditions, please refer to AHS Travel, Hospitality and Working Sessions Policy, available on the AHS intranet at: <https://www.albertahealthservices.ca/Assets/about/policies/ahs-pol-expenses.pdf>  
For applicable "Other" expenses, please identify or explain in the "Details" column.

**Required for Travel Expenses: Must be signed by the physician**

I attest that I have read and understand the "Travel, Hospitality & Working Session Expenses Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of this 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.

I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

I, by signing this form, attest that I am compliant to all the above statements

<b>Totals:</b>	
<b>Total Stipend</b>	<b>\$ 0.00</b>
<b>Total KM Rate</b>	<b>\$ 0.00</b>
<b>Total Expense</b>	<b>\$ 236.45</b>
<b>Total Payment</b>	<b>\$ 236.45</b>

**Physician Signature:**
**Date:** 27-Mar-2024

**Required for Travel Expenses: Must be signed by the Approver**

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.

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.

I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

**Approved By (PRINT ONLY):**

Approval kept on  
file

**DOA Level:**
**Position #:**
**Phone #:**

I, by signing this form, attest that I am compliant to all the above statements

**Signature:**
**Title:**
**Date:**

**Expense Limits** – Note this is summary information only. For full terms and conditions, please refer to AHS Travel, Hospitality and Working Sessions Policy, available on the AHS intranet at: <https://www.albertahealthservices.ca/Assets/about/policies/ahs-pol-expenses.pdf>

Travel and accommodation are to be booked with the AHS travel provider to ensure AHS/government rates. Expenses to be paid by the individual claimant and then submitted via this expense claim for consideration for reimbursement

**Travel – Section 3.1, 3.2, 3.3, 5, 9.1, 9.2, 9.3, 9.4, and Appendix A**

- Travel expenses can be minimized by utilizing technology (teleconference, video conference, Telehealth) where it meets business objectives.
- Individuals are expected to consider the cost effectiveness of their travel expenses. Cost effectiveness does not necessarily mean the most inexpensive method of travel; consideration of time, impact to service delivery and safety should be considered when assessing cost effectiveness.
- Where use of technology is not an effective means of achieving the desired business objectives, the following is a list to consider when selecting a mode of transportation: a) AHS fleet vehicle, b) rental vehicle or bus, c) personal vehicle, d) airfare.
- Regular commuting between residence and designated home site(s) will not be reimbursed. AHS will reimburse mileage for approved business travel from residence to an alternate work site or bus/car rental agency/airport only for the portion of mileage that is above their normal commute (or the shorter of the two distances).
- Mileage incurred while traveling between sites is eligible for reimbursement.
- Mileage reimbursement are at the general rate of \$0.505/km for 5,000 km/calendar year and below, \$0.47/km for over 5,000 km/calendar year.
- Vehicle owners responsible for any losses that may occur.
- Airfare within Alberta should not exceed \$600 for a roundtrip or \$1,000 roundtrip within Canada (inclusive of all fees and taxes). Travel outside Canada requires pre-approval by an AHS VP and cannot exceed \$2,000. Seat selection will not be reimbursed. Must be Economy class.
- Taxi fare limit of \$100 within city limits and including gratuity of up to 20%

**Meal Allowance – Section 8.1, Appendix A**

- Individuals traveling on AHS approved business may only claim meals through a meal allowance and cannot claim using the receipt method for reimbursement.

**Expense Type: Within Canada Outside of Canada**

Breakfast	\$10.50	\$13.70
Lunch	\$13.00	\$17.00
Dinner	\$24.00	\$31.00

**Accommodations – Section 8.2 and Appendix A**

- Reimbursed at the actual cost of the room including applicable taxes and surcharges (with receipt provided).
- Hotel base room rate shall not exceed \$200 (South, Calgary, Central and Edmonton Zone) and \$250 (North Zone)

**Subject:** [Business] Your Monday morning trip with Uber

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Total CA\$41.38  
March 25, 2024

Thanks for riding, Peter

We hope you enjoyed your ride this morning.



Total	CA\$41.38
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Trip fare	CA\$31.06
-----------	-----------

Subtotal	CA\$31.06
Booking Fee <input type="checkbox"/>	CA\$3.90
TNC fee recovery surcharge	CA\$0.45
Airport Recovery Surcharge	CA\$4.00
GST	CA\$1.97

[Visit the trip page](#) for more information, including invoices (where available)

[Download PDF](#)

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

You rode with 

4.93 ☐ Rating

☐ Has passed a multi-step safety screen

Rate or tip

TNDL License Number:

Please call 3-1-1 with any Compliments/Concerns



Every rideshare trip in Calgary is insured for a covered auto accident by Economical Insurance.

[Learn more](#)

Comfort

20.82 kilometers | 25 min

**Subject:** [Business] Your Monday afternoon trip with Uber

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Total CA\$59.02  
March 25, 2024

Thanks for riding, Peter

We hope you enjoyed your ride this afternoon.



Total CA\$59.02


Trip fare CA\$47.16

Subtotal	CA\$47.16
Booking Fee <input type="checkbox"/>	CA\$5.50
Airport drop-off fee / Airport pick-up fee	CA\$3.25
Per-Trip Fee	CA\$0.30
GST	CA\$2.81

[Visit the trip page](#) for more information, including invoices (where available)

[Download PDF](#)

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

You rode with 

4.97 ☐ Rating

☐ Has passed a multi-step safety screen

Rate or tip



Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more](#)

Comfort 30.03 kilometers | 32 min



2:59 PM



----- TRANSACTION RECORD -----

**ATS GROUP**  
4608 101 ST NW  
EDMONTON AB

www.airlimousine.net

**Purchase**

Mar 25, 2024

10:04:20

AMEX

Entry: Tap EMV (H)

Ref#:

Auth#:

Response:

Order:

Username:

**Amount**

**\$ 77.00**

Tip

\$ 11.55

**Total**

**\$ 88.55**

**Approved**

Signature Not Required

For GST#, see \"Username\" above