

AHS Board and Executive Expense Report

Name: Dr Peter Jamieson
Title: Chief Medical Officer and Vice President Clinical Operations and Quality
Location: Calgary
 Expenses posted during the month of June 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					-			
Jun-25	Expense Claim	Meetings		108		454	562			
Jun-25	Direct Bill	Meetings	1,465			68	1,533			
Total by category			\$ 1,465	\$ 108	\$ -	\$ 522	\$ 2,095	\$ -	\$ -	\$ -

**Total
posted for
the Month** \$ 2,095

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

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
JAMIESON, PETER	Chief Medical Officer and Vice President Clinical Operations and Quality	Calgary	\$ 320.99								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/10/2025	In person Calgary AB Health strategic session Jun 10 Calgary Greenhouse	AB - Local	Parking - Lot or Parkade	\$ 23.00				1			
6/11/2025	Edmonton meetings & in person leadership retreat Jun 11-13 2025.	AB - Local	Taxi	\$ 52.21	Home, Calgary	Airport, Calgary		1			
6/11/2025	Edmonton meetings & in person leadership retreat Jun 11-13 2025.	AB - Other Zones	Meals Per Diem	\$ 13.00				1			
6/12/2025	Edmonton meetings & in person leadership retreat Jun 11-13 2025.	AB - Other Zones	Taxi	\$ 81.54	Airport, Edmonton	10030 107 St NW, Edmonton, AB T5J 3E4		1			
6/12/2025	Edmonton meetings & in person leadership retreat Jun 11-13 2025.	AB - Other Zones	Meals Per Diem	\$ 47.50				1			
6/13/2025	Edmonton meetings & in person leadership retreat Jun 11-13 2025.	AB - Other Zones	Meals Per Diem	\$ 24.00				1			
6/13/2025	Edmonton meetings & in person leadership retreat Jun 11-13 2025.	AB - Local	Taxi	\$ 79.74	Airport, Calgary	Home, Calgary		1			
Approver(s) for the claim	Approval Status	Approval Date									
CHILTON, SEAN A	Approve	23-Jun-25									

line: www.parkplus.ca

Plate: [REDACTED]
Zone: [REDACTED]

G (403) 537-7000

Valid through:

WEDNESDAY

11 JUN 25

6:00 AM

START TIME: 6/10/2025 11:55 AM

AMOUNT PAID: \$23.00 (GST Incl.)

C *****

Auth No: [REDACTED]

Trn No: [REDACTED]

Terminal: [REDACTED]

Receipt No: [REDACTED]

10/06/2025 11:56:24 AM TID: ***

Trans Ref: [REDACTED]
Visa Card: [REDACTED]

Pay for your parking o

CALGARY PARKING

----- Forwarded message -----

From: **Uber Receipts**

Date: Wed, Jun 11, 2025 at 10:55 AM

Subject: [Business] Your Wednesday morning trip with Uber

To:

Uber

Total CA\$52.21

June 11, 2025

Thanks for tipping, Peter

Here's your updated Wednesday
morning ride receipt.



Total

CA\$52.21



Trip fare	CA\$32.44
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Subtotal	CA\$32.44
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Booking Fee 	CA\$4.05
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Airport Recovery Surcharge	CA\$4.50
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TNC fee recovery surcharge	CA\$0.45
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Tip	CA\$8.70
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GST	CA\$2.07
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Payments



American Express 

CA\$52.21

6/11/25 10:55 AM

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

[Switch Payment Method](#)

COOP TAXI LINE
1063814 ST NW
EDMONTON AB

Purchase

Jun 12, 2025

15:56:25

AMEX

TID: ***

Entry: Tap EMV (H)

Sequence

Auth#:

Response:

Batch:

Clerk:

Amount

\$ 69.10

Tip

\$ 12.44

Total

\$ 81.54

Approved

ASSOCIATED CAB
/ALLIED LIMOUSINE
307-41 AVENUE N E
CALGARY, AB T2E2N4
(403) 299-1199

SALE

Batch # [REDACTED] REF# [REDACTED]
06/13/25 SEQ: [REDACTED] 18:51:37
APPR CODE: [REDACTED]
AMERICAN EXPRESS
***** [REDACTED] *****

AMOUNT	\$66.46
TIP	\$13.29
TOTAL	\$79.74

00 - APPROVED - 000

AMERICAN EXPRESS
[REDACTED]

Thank You
Please Come Again
11-0000

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
JAMIESON, PETER	Chief Medical Officer and Vice President Clinical Operations and Quality	Calgary	\$ 241.06								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/24/2025	In person attendance Zone and Hospital Leadership Engagement in Lethbridge	AB - Other Zones	Meals Per Diem	\$ 23.50				1			
6/24/2025	In person attendance Zone and Hospital Leadership Engagement in Lethbridge		Mileage-Other	\$ 108.78	Home, Calgary	960 19 St S, Lethbridge, AB T1K 0B3		1			215.4
6/24/2025	In person attendance Zone and Hospital Leadership Engagement in Lethbridge		Mileage-Other	\$ 108.78	960 19 St S, Lethbridge, AB T1K 0B3	Home, Calgary		1			215.4
Approver(s) for the claim	Approval Status	Approval Date									
CHILTON, SEAN	Approve	27-Jun-25									

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.
- 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**

Name :	Dr Peter Jamieson	Reporting Period for the Month of :	Jun-25
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
11-May-2025	Direct Billing	Airline Ticket	May 7 & 8 to present in person & join Senior physician leadership development in Grande Prairie.	Vision Travel DT Ontario-West Inc	\$518.46
11-May-2025	Direct Billing	Airline Ticket	May 7 & 8 to present in person & join Senior physician leadership development in Grande Prairie.	Vision Travel DT Ontario-West Inc	\$508.46
11-May-2025	Direct Billing	Airline Ticket	Apr 25 in person Edmonton day retreat & driving from Rocky Mtn Health Ctr in person physician meeting Apr 23.	Vision Travel DT Ontario-West Inc	\$438.46
23-May-2025	Direct Billing	Car Rental	May 7 & 8 to present in person & join Senior physician leadership development in Grande Prairie.	Enterprise Rent A Car	\$67.56
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in the Month					\$1,532.94



Your Direct Itinerary

DIRECT TRAVEL
9929-108TH STREET NW
EDMONTON AB T5K 1G8
1-833-692-4120

ALBERTA HEALTH SERVICES
10030 107 STREET
EDMONTON AB Z/T5H3E4

Agency reference		Agent name:	
Traveler name	Client reference		
PETER JAMIESON			

Thank you for choosing Direct Travel. Complete details for your trip are below. Please review this document and the trip details thoroughly. If a discrepancy exists, please contact us immediately upon receipt. Missing your flight without cancelling will result in the forfeiture of the value of your airline ticket.

Government issued photo I.D. is required for all travel and the name on your photo I.D. must match the name on your ticket.

Please [click here](#) upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you come back to this information regularly in advance of and during travel as documentation and health requirements could change without notice.

Itinerary summary			
From / To		Flight / Provider	Departure / Arrival
Flight	Wed. May 07, 2025 Calgary(YYC) - Grande Prairie, AB(YQU)	Air Canada OPERATED BY AIR CANADA EXPRESS - JAZZ	3:50 p.m.- 5:13 p.m. Check in

Quick links

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Canadian Government Travel Advisories


Airport & Flight Status

Weather

TRAVEL INTELLIGENCE HUB

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	AC	Calgary Calgary (YYC)	Grande Prairie Grande Prairie, AB (YQU)
Departure	Wed. May 07, 2025 3:50 p.m.		Arrival Wed. May 07, 2025 5:13 p.m.
Departure terminal			Arrival terminal
Class	Economy(H)		Seat
Status	Confirmed		Airline check-in ID
Special requests			Frequent traveler
Equipment	DHC8 Dash 8-400		Duration/ Meal service 01:23/No meal service
eTicket			
Remarks	OPERATED BY AIR CANADA EXPRESS - JAZZ **CHECK IN WITH AIR CANADA EXPRESS - JAZZ**		
Baggage			

DIRECT TRAVEL

ONE CLICK.
ONE QUESTION.

TAKE SURVEY

Invoice/Ticket information for PETER JAMIESON

Ticket:	Air Canada	Invoice:	
Base:	CAD474.00		
Other tax:	CAD44.46		
GST/HST tax:	CAD0.00		
QST tax:	CAD0.00		
		Amount:	CAD518.46
Payment:	CA XXXXXXXXXXXX	Issue date:	30-Apr.-2025
			Total invoiced amount: CAD518.46
			Balance due: CAD0.00

General remarks
AIRFARES ARE NOT GUARANTEED UNTIL TICKETED
AIRLINES RECOMMEND CHECKING IN 2 HOURS PRIOR TO FLIGHT.

Agency registration
TPS/GST-723782728 RT 0001



Your Direct Itinerary

DIRECT TRAVEL
9929-108TH STREET NW
EDMONTON AB T5K 1G8
1-833-692-4120

ALBERTA HEALTH SERVICES
10030 107 STREET
EDMONTON AB Z/T5H3E4

Agency reference: [REDACTED]

Agent name: [REDACTED]

Traveler name

Client reference

PETER JAMIESON

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Itinerary summary

From / To	Flight / Provider	Departure / Arrival
Thu. May 08, 2025 Flight Grande Prairie, AB(YQU) - Calgary(YYC)	Air Canada [REDACTED] OPERATED BY AIR CANADA EXPRESS - JAZZ	5:55 p.m. - 7:19 p.m. Check in

TRAVEL INTELLIGENCE HUB

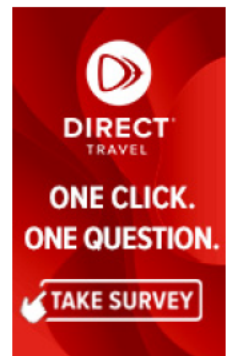
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	AC [REDACTED]	Grande Prairie Grande Prairie, AB (YQU)	Calgary Calgary (YYC)
Departure	Thu. May 08, 2025 5:55 p.m.	Arrival	Thu. May 08, 2025 7:19 p.m.
Departure terminal		Arrival terminal	
Class	Economy(H)	Seat	
Status	Confirmed	Airline check-in ID [REDACTED]	
Special requests		Frequent traveler	[REDACTED]
Equipment	DHC8 Dash 8-400	Duration/ Meal service	01:24/No meal service
eTicket	[REDACTED]		
Remarks	OPERATED BY AIR CANADA EXPRESS - JAZZ **CHECK IN WITH AIR CANADA EXPRESS - JAZZ**		
Baggage	▶		



Invoice/Ticket information for PETER JAMIESON**Ticket:** Air Canada**Invoice:****Base:** CAD474.00**Other tax:** CAD34.46**GST/HST tax:** CAD0.00**QST tax:** CAD0.00**Amount:** CAD508.46**Payment:** CA XXXXXXXXXXXX**Issue date:** 30-Apr.-2025**Total invoiced amount:** CAD508.46**Balance due:** CAD0.00

General remarks

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AIRLINES RECOMMEND CHECKING IN 2 HOURS PRIOR TO FLIGHT.

Agency registration

TPS/GST-723782728 RT 0001



Your Direct Itinerary

DIRECT TRAVEL
9929-108TH STREET NW
EDMONTON AB T5K 1G8
1-833-692-4120

ALBERTA HEALTH SERVICES
10030 107 STREET
EDMONTON AB Z/T5H3E4

Agency reference: [REDACTED]

Agent name: [REDACTED]

Traveler name

Client reference

PETER JAMIESON

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Itinerary summary

From / To	Flight / Provider	Departure / Arrival
Flight Fri. Apr. 25, 2025 Edmonton(YEG) - Calgary(YYC)	Air Canada [REDACTED] OPERATED BY AIR CANADA EXPRESS - JAZZ	6:05 p.m.- 7:01 p.m. Check in

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- [Airport & Flight Status](#)
- [Weather](#)

	Edmonton Edmonton (YEG)	Calgary Calgary (YYC)
Departure	Fri. Apr. 25, 2025 6:05 p.m.	Arrival Fri. Apr. 25, 2025 7:01 p.m.
Departure terminal		Arrival terminal
Class	Economy(Q)	Seat
Status	Confirmed	Airline check-in ID [REDACTED]
Special requests		Frequent traveler [REDACTED]
Equipment	DHC8 Dash 8-400	Duration/ Meal service 00:56/No meal service
eTicket	[REDACTED]	
Remarks	OPERATED BY AIR CANADA EXPRESS - JAZZ **CHECK IN WITH AIR CANADA EXPRESS - JAZZ**	

[Baggage](#) ▶

**ONE CLICK.
ONE QUESTION.**

[TAKE SURVEY](#)

Invoice/Ticket information for PETER JAMIESON**Ticket:** Air Canada**Invoice:****Base:** CAD394.00**Other tax:** CAD44.46**GST/HST tax:** CAD0.00**QST tax:** CAD0.00**Amount:** CAD438.46**Payment:** CA XXXXXXXXXXXX **Issue date:** 15-Apr.-2025**Total invoiced amount:** CAD438.46**Balance due:** CAD0.00

General remarks

AIRFARES ARE NOT GUARANTEED UNTIL TICKETED
AIRLINES RECOMMEND CHECKING IN 2 HOURS PRIOR TO FLIGHT.

Agency registration

TPS/GST-723782728 RT 0001



Federal GST# : 889365821

Consolidated Inv. #
Rental Agreement #
Bill Ref #
Invoice Date

23-May-2025

Bill To Information

ALBERTA HEALTH SERVICES
PO BOX 1600 STN MAIN
EDMONTON, AB - T5J 2N9
CANADA

Rental Information

Reservation Number :
Driver : JAMIESON, PETER CRAWFORD
Pickup Date/Time : 05/07/2025 17:17
Return Date/Time : 05/08/2025 16:01
Miles/kms : 20
Car Class : ICAR Requested Class : ICAR

Vehicle Information

Yr/Make/Model	Unit #	License No	Beg/End/Distance
2025/NISN/ROGU			19982/20002/20

Rental Branch

GRAND PRAIRIE ODYSSEY
10610 AIRPORT DR
GRANDE PRAIRIE, AB - T8V 7Z5

Return Branch

GRAND PRAIRIE ODYSSEY
10610 AIRPORT DR
GRANDE PRAIRIE, AB - T8V 7Z5

Charge Detail

Description	Qty	Period	Rate	Amount
TIME & DISTANCE	1	DAY	57.00	57.00
			Sub Total	57.00
CONCESSION RECOVERY FEE		PERCENT	16.96	9.80
VLF REC	1	DAY	0.76	0.76
Total Charges (CAD)				67.56

Additional Information

Remit Payment in CAD to	For Billing Inquiries	Payment Terms
ENTERPRISE RENT A CAR CANADA COMPANY P.O. BOX 9716 STATION A TORONTO ON M5W 1R6 Email Remit To: CanadianAR@em.com	Tel#: +1 8773121084 AskARCanada@em.com	Payment Due Within 30 days of invoice date. Late payments are subject to finance charge.

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.