

AHS Board and Executive Expense Report

Name Richard Dicerni
Title AHS Board Member

Location Edmonton

Expenses submitted during the month of May 2018

							Travel (1)						
MMM-YY	Source Document	Purpose	Δir	are	Me	als	Accommoda	tion	Other Travel	Total Travel		Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
IVIIVIIVI- T T	Document	Fulpose	AII	ale	IVIC	ais	Accommoda	tion	Havei	Havei		(2)	(3)	(4)
May-18 May-18	Expense Claim Direct Bill	Meetings Meetings		800		51		447	115	96 44				
Total			\$	800	\$	51	\$	447	\$ 115	\$ 1,41	3 \$	· -	\$ -	\$ -

Total for

the Month \$ 1,413

Maximum daily single meal expense claimed in the month \$ 21 Maximum daily base hotel rate claimed in the month \$ 199 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 - AP Processing - Internal Use Only	
Voucher#	
Naming Convention:	
Γ4A/NR Applicable? - If yes, indicate line & amt	

BOARD MEMBER EXPENSE OF AIM FORM

				LXI LIAOL OL	Allei I Oly	/IVI			
SECTION	1: PAYE	E INFORM	IATION	1					
Name:	Richard I	Dicerni					Expense Month:	e Period May-18	
Address:					City:			•	
Province:				Postal Code:	1	Country:		Canada	
Reason for	Expense	Attended H 2018 in Edi		Committee Meeting	g on May 30, 2	2018; Private a	nd Pub	lic Board Meetings on I	May 31,
SECTION	N 2: FINAI	NCE CODI	NG & TOTAL CL	AIM	1 20 24				
<u>Desci</u>	<u>ription</u>	Corp/BU/O rg	Location (If applicable)		tional Primary	Expe Seconda		<u>Total</u> (Note: This column will a	auto fill)
Meals (A)		101	0005	71110	300000	45000	0000	\$50.70	/
Travel Exp	(B+C+E)	101	0005	71110	300000	62212	2000	\$915.31	/
Other (D)		101	0005	71110	300000	41090	0000	\$0.00	
			8	TOTAL AMOUNT PA	YABLE BY A	CCOUNTS PA	YABLE	\$966.01	10
With the second				SECTION 3: AUT	HORIZATIO	N	n specialist		ph
such policy to I attest the e	o the best of o xpenses enclo	my understandi osed in this clair	ng and belief.	s purposes for Alberta Hea				es being claimed are in complia been previously claimed by mo	
I attest that o	expenses sub	mitted in this cl	aim have been incurre	d by using a cost effective	method, otherwis	e rationale and sup	oporting	analysis is provided below.	
Claimant (F Richard D				y signing this form, attest that I		1	Date Tuly	Phone#	
such policy to I attest the e claimant or c	o the best of o expenses enclo on their behal	my understandi osed in this clair f from Alberta H mitted in this cl	ng and belief. m are for valid busines: Health Services or any o	s purposes for Alberta Hea other Organization. d by using a cost effective	lth Services Board	l and that this clain	n has not	es being claimed are in complia been previously claimed by the analysis is provided below.	
Linda Hu	ghes			Во	ard Chair				
Signature:	I, by signing this	s form, attest that	am compliant with all the a	bove statements				Date July (2/18	
Health and F	Personal inform	nation on this for	rm is collected by AHS u	inder the authority of section	20(b) of th		<u> </u>	, — L. W/B	

Information and Protection of Privacy (FOIP) Act, respectively, for the purpos Dobach Rhados July 418 Deborah Rhodes, VP Corporate Services & CFO

For payment please subnit to.

DOFA Level:

14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: Jennifer Hamstra

Created: November 01, 2013 AP 3.006-F Rev 12 eff Jun 25, 2018 Page 1

Carry fo	orward from Section 1	
Name:	Richard Dicerni	Expense Period May-18

Completion of the "cost effective method used" Column is required. If you select "No" in this column, Further Explanation is Required in the "Rationale is Required" section below

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

The Board Members follow the Government of Alberta (GOA) Travel, Meal and Hospitality Expenses Policy

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates (Appendix C for USA, Appendix D for International).

			Meal (A	llowand	e OR Re	ceipt)(A)				
<u>Date</u>	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method	Allowa Within C		Allowan	eceipt <u>or</u> ce Outside inada	Accom- modation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi)	Other (Itemize) (D)	Mileage km (E)
	point, actails of experientally	used?	<u>Meal</u> Type	Allow- ance	Meal Type	<u>Amount</u>	121	(C)		
29-May-2018	Flight from Ottawa to Edmonton and return on June 1, 2018 to attend HR and Private/Public Board Meetings on May 30 and 31, 2018.	Yes						\$800.18	/	
30-May-2018	Taxi from SSP to hotel, attended HR Committee Meeting.	Yes	D-\$20.75	\$20.75	1			\$10.00	\checkmark	
31-May-2018	Taxi from hotel to SSP to attend Private and Public Board Meetings.	Yes			2 10			\$10.00	/	
31-May-2018	Taxi from SSP to hotel.	Yes	BD-\$29.95	\$29.95	√°			\$10.00	✓	
1-Jun-2018	Taxi from hotel to YEG.	Yes						\$55.00	/	
1-Jun-2018	Taxi from Ottawa Airport to residence.	Yes						\$30.13	✓	
	Total: (amount auto fills to	page 1)		\$50.70	/	\$0.00	\$0.00	\$915.31	\$0.00	0.00

BOARD MEMBER Mileage Rate 0.505 Total Mileage \$ -



Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada.

Please bring your itinerary-receipt to the airport.

Mr Richard Dicerni

Main Contact Information

Booking reference:

Customer Care

Air Canada Reservations

1-888-247-2262

Air Canada Flight Information

1-888-422-7533

International Reservations

Alert me of flight changes Flight notification

Flight Itinerary

Name:

E-mail:

Payment:

Flight	From	То	Aircraft	Cabin (Booking class)	Status
AC363	Ottawa (YOW)	Edmonton International (YEG)	E90	Economy Flex (A)	Confirmed
	Tue 29-May 2018	Tue 29-May 2018			
	19:25	21:39			
Seat number(s) requested: 12C				
AC358	Edmonton International (YEG)	Ottawa (YOW)	E90	Economy Flex (G)	Confirmed
	Fri 01-Jun 2018	Fri 01-Jun 2018			
	10:15	16:03			
Seat number(s) requested: 12A				
D					
Passenger I	.nrormation				



Passenger: 1

Mr Richard Dicerni

Ticket number:

Frequent Flyer Pgm:

Air Canada Aeroplan

Program number:

Purchase Summary

Passenger: 1 Ticket number

Date of issue 28-Apr 2018 **Fare Amount in Canadian dollars:** 643.00 (including navigational & other charges) Taxes, Fees & Charges Air Travellers Security Charge (CA) 14.25 Canada Goods and Services Tax (GST/HST #10009-2287 RT0001) (XG) 1.50 Combined Taxes *see fare calculation below (XT) 141.43 **Total Fare in Canadian dollars:** 800.18

Ticket particularities: AC ONLY/NONREF/CHGE FEE -BG:AC

*Fare calculation:

29MAY18YOW AC YEA Q23.00R206.00AC YOW Q23.00R391.00CAD643.00 END ROE1.00 XT88.43RC53.00SQ

Canadian tax registration numbers:

XG Canada Goods and Services Tax (GST/HST #10009-2287 RT0001) RC Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001)

XO Canada Quebec Sales Tax (QST #1000-043-172 TQ1991)

Fare Rules Summary

- Voluntary changes to your itinerary may require the payment of additional fees and fare upgrades.
- If you are travelling on a non-refundable ticket, Air Canada will be unable to make exceptions in the event of an unexpected trip cancellation or medical emergency. We recommend the purchase of travel insurance.
- Tickets are non transferable.
- Seat selection charges are per passenger and apply to each individual one-way flight segment in your itinerary. Flight segments are identified by a change in flight number, with each new flight number representing a flight segment. Taxes are not included.
- Please note that you may be moved from your selected seat without notice in the event of an involuntary schedule or airport change (e.g. flight disruption, cancellation), to accommodate a passenger with a disability, or for any other reason that requires Air Canada to move you prior to departure or during the flight. If you are moved from your seat for one of these reasons, you may request a refund for your seat charges. We invite you to read additional terms and conditions related to seat selection

Please read important information and notices regarding Air Canada's general conditions of carriage.

Baggage Information

Please see below for details on the bags you plan on checking at the baggage counter.

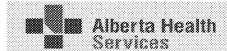
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From: Car#:		Driver: Car#: From: To: All Salar S
780.462.3456 call or text your address to book your cab GST# Date: 3 / 5 / Amount: Car#: From: Car#: To: 10135-31 Avenue, Edmonton, AB T6N 1C2		780.462.3456 call or text your address to book your cab GST# Date: 6 8 Amount: 9 55-0 Driver: Car#: 97 From: Ital Westin LD M. To: 10135-31 Avenue, Edmonton, AB T6N 1C2
10135-31 Avenue, Edmonton, AB T6N 1C2		10135-31 Avenue, Edmonton, AB T6N 1C2

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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.

Indicate whether you have expenses to report in this section for this reporting period:

- 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.

Name :	Richard Dicerni	Reporting Period for the Month of: May-18	

YES

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
			Two nights accommodation to attend Human Resources		
30-May-18	Direct Billing	Hotel	Committee Meeting on May 30th and Private and Public Board Meetings on May 31, 2018.	Vision Travel	\$446.84
	Direct Billing	Choose from Drop-down List		Vision Travel	\$
	Direct Billing	Choose from Drop-down List		Vision Travel	\$
	Direct Billing	Choose from Drop-down List		Vision Travel	\$
	2000				
	Direct Billing	Choose from Drop-down List		Vision Travel	\$
	Direct Billing	Choose from Drop-down List		Vision Travel	\$
otal Paid in th					5 446.84

The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7

Canada

Tel: 780-426-3636 Fax: 780-428-1454

WESTIN

HOTELS & RESORTS

Richard Dicerni

Page Number Invoice Nbr Guest Number : Folio ID : 29-MAY-18 22:33 Arrive Date Depart Date 01-JUN-18 12:51 No. Of Guest Room Number Club Account AR Account

Copy Tax Invoice

Tax ID: 815461330RT0001
The Westin Edmonton, ILIN-05-2018, 11:03

Date	Reference	Description	Charges (CAD)	Credits (CAD)
30-MAY-18	3	Room Charge	199.00	
30-MAY-18	3	GST	10.25	
30-MAY-18	3	Destination Marketing Fee	5.97	
30-MAY-18	3	Tourism Levy	8.20	
31-MAY-18	3	Room Charge	199.00	
31-MAY-18	3	GST	10.25	
31-MAY-18	3	Destination Marketing Fee	5.97	
31-MAY-18	3	Tourism Levy	8.20	
01-JUN-18		Direct Bill		-446.84
		** Total	446.84	-446.84
		*** Balance	0.00	

Continued on the next page