

AHS Board and Executive Expense Report

Name Dr. Rollie Nichol
Title ACMO Medical Leadership, Workforce & Medical Affairs
Location Calgary
 Expenses submitted during the month of May 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)
May-18	Expense Claim	Meetings		47	201	502	750			
May-18	Direct Billing	Meetings	706				706			
Total			\$ 706	\$ 47	\$ 201	\$ 502	\$ 1,456	\$ -	\$ -	\$ -

Total for the Month \$ 1,456

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 179
 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 Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total										
NICHOL, ROWLAND	ACMO, Medical Leadership, Workforce & Medical Affairs	Calgary	\$ 750.27										
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance		
5/2/2018	PPEC	AB - Other Zones	Parking - Lot or Parkade	\$ 29.85			PPEC	1					
5/2/2018	PPEC		Mileage-Local-Home Zone	\$ 32.83	Residence	YYC return	PPEC	1			65		
5/7/2018	PRPAC and Town Hall UofA		Mileage-Local-Home Zone	\$ 50.50	Residence	YYC return	PRPAC and Town Hall UofA	1			100		
5/7/2018	PRPAC and Town Hall UofA	AB - Other Zones	Taxi	\$ 66.00	UofA North Campus	YEG	PRPAC and Town Hall UofA	1					
5/7/2018	PRPAC and Town Hall UofA	AB - Other Zones	Meals Per Diem	\$ 13.00			PRPAC and Town Hall UofA Lunch \$13.00	1					
5/7/2018	PRPAC and Town Hall UofA	AB - Other Zones	Parking - Lot or Parkade	\$ 29.85			PRPAC and Town Hall UofA	1					
5/7/2018	PRPAC and Town Hall UofA	AB - Other Zones	Taxi	\$ 66.00	YEG	ATB	PRPAC and Town Hall UofA	1					
5/10/2018	Patient and Family Advisory Group	AB - Other Zones	Taxi	\$ 66.00	YEG	Westin	Patient and Family Advisory Group	1					
5/10/2018	Patient and Family Advisory Group	AB - Other Zones	Parking - Lot or Parkade	\$ 58.70			Patient and Family Advisory Group	1					
5/10/2018	Patient and Family Advisory Group	AB - Other Zones	Meals Per Diem	\$ 34.50			Patient and Family Advisory Group Bfast \$10.50 Dinner \$24.00	2					
5/10/2018	Provincial Hospitalist Program mtg with AB Health	AB - Other Zones	Bus	\$ 3.25			Provincial Hospitalist Program mtg with AB Health	1					
5/11/2018	Patient and Family Advisory Group	AB - Other Zones	Taxi	\$ 66.00	SSP	YEG	Patient and Family Advisory Group	1					
5/11/2018	Patient and Family Advisory Group mtg	AB - Other Zones	Accommodations	\$ 200.96			Patient and Family Advisory Group	1					
5/11/2018	Patient and Family Advisory Group mtg		Mileage-Local-Home Zone	\$ 32.83	Residence	YYC return	Patient and Family Advisory Group mtg	1			65		
Approver(s) for the claim		Approval Status		Approval Date									
BELANGER, FRANCOIS		Approve		1-Jun-18									

RECEIPT
GST NO. R122556194

TKT NO. [REDACTED]
EXIT No. A5
IN: 05/02/18 08:26
OUT: 05/02/18 11:09
DURATION: 0 02: 43
PAID: \$ 29.35
(GST INCLUDED):
MASTERCARD

[REDACTED]
AUTH. CODE
REF.
THANK YOU FOR



R. Nichol
PPEC May 2, 2018

4608 101 ST NW
7809897099
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2018/05/07
TIME 3747 20:30:26
INVOICE # [REDACTED]
RECEIPT NUMBER
[REDACTED]

PURCHASE
TOTAL

\$132.00

MASTERCARD
[REDACTED]

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST 73871 2892 RT0001

R. Nichol PRPAC and Town Hall UofA
May 7, 2018
Taxi to and from airport

RECEIPT
GST NO. R122556194

R. Nichol PRPAC and Town Hall UofA
May 7, 2018

TKT NO [REDACTED]
EXIT No. A103
IN: 05/07/18 08:14
OUT: 05/07/18 22:51
DURATION: 0 14: 37
PAID: \$ 29.35
(GST INCLUDED)
MASTERCARD
[REDACTED]
AUTH. CODE
REF.
THANK YOU FOR



RECEIPT
GST NO. R122556194

ATS GROUP
4608 101 ST NW
7809897099
EDMONTON AB

TKT NO. [REDACTED]
EXIT No. A103
IN: 05/10/18 06:09
OUT: 05/11/18 17:01
DURATION: 1 10: 52
PAID: \$ 58.78
(GST INCLUDED)
MASTERCARD

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2018/05/11
TIME 9305 14:48:16
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

AUTH. CODE
REF.
THANK YOU FOR

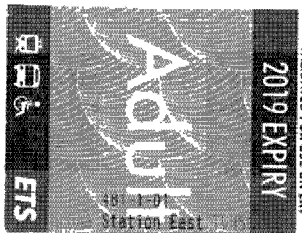
PURCHASE
TOTAL
\$132.00



MASTERCARD
[REDACTED]

APPROVED
AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY
IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS
GST 73871 2892 RT0001



Adult
Expires
May 10/18 18:25

INSERT THIS END SIDE UP

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

Rowland Nichol
Alberta Health Services Ii

Page Number : 1 Invoice Nbr: [REDACTED]
Guest Number: [REDACTED] Arrive Date: 10-MAY-18 17:06
Folio ID : [REDACTED] Depart Date: 11-MAY-18 07:44
No. Of Guest: 1
Room Number : [REDACTED]
Room Rate : 179.00
Club Account: [REDACTED]

Email: NICHOLRT@TELUSPLANET.NET

Tax Invoice

Tax ID: 815461330RT0001
The Westin Edmonton 11-MAY-18 07:44 [REDACTED]

Date	Reference	Description	Charges	Credits
10-MAY-18	[REDACTED]	Room Charge	179.00	
10-MAY-18	[REDACTED]	GST	9.22	
10-MAY-18	[REDACTED]	Destination Marketing Fee	5.37	
10-MAY-18	[REDACTED]	Tourism Levy	7.37	
11-MAY-18	[REDACTED]	Visa [REDACTED]		-200.96
		** Total	200.96	-200.96
		*** Balance	0.00	

KIDS EAT WELL AT WESTIN - Discover kids' meals that are as delicious as they are nutritious with the Westin Eat Well Menu for Kids, developed with Superchefs(TM) to make kids and parents happy. Learn more at westin.com/eatwell

Continued on the next page

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

Name : Dr Rollie Nichol	Reporting Period for the Month of : May-18
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
07-May-18	Direct Bill	Airline Ticket	PRPAC and UofA Town Hall	Marlin Travel	158.12
07-May-18	Direct Bill	Airline Ticket	PRPAC and UofA Town Hall	Marlin Travel	124.48
10-May-18	Direct Bill	Airline Ticket	Patient and Family Advisory Group	Marlin Travel	201.76
11-May-18	Direct Bill	Airline Ticket	Patient and Family Advisory Group	Marlin Travel	221.50

Total Paid in the Month	\$ 705.86
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A DIRECT TRAVEL[®] COMPANY

Invoice

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

Trip #: [REDACTED]
Booking Date: 25 Apr 18
Client: [REDACTED]
Agent: [REDACTED]
Agents email: [REDACTED]@MARLINTRAVEL.CA
File Locator: [REDACTED]

PASSENGERS: DR ROWLAND NICHOL

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
WESTJET Ticket # [REDACTED]	108.64	0.00	\$0.00	49.48	0.00	158.12 CAD
Total:	108.64	0.00	0.00	49.48	0.00	158.12 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	04/23/2018		[REDACTED]	158.12 CAD
Total Payment:					158.12 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL RESEARCH PLANNING

***** 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: 25 Apr 18
Client: [REDACTED]
Agent: [REDACTED]
Agents email: [REDACTED]@MARLINTRAVEL.CA
File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
ROWLAND NICHOL	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: ROWLAND NICHOL	Booking Date: 23 Apr 18					
	File Locator/Ticket #: [REDACTED]					
Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	03251	CALGARY INTL 07 May 18 9:00AM		EDMONTON INTL 07 May 18 9:52AM	G/	



A DIRECT TRAVELSM COMPANY

Invoice

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

Trip #: [REDACTED]
Booking Date: 21 Apr 18
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

PASSENGERS: DR ROWLAND NICHOL

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row 1: WESTJET Ticket # [REDACTED], 75.00, 0.00, \$0.00, 49.48, 0.00, 124.48 CAD. Row 2: Total: 75.00, 0.00, 0.00, 49.48, 0.00, 124.48 CAD.

Table with columns: Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row 1: [REDACTED], 04/18/2018, [REDACTED], [REDACTED], 124.48 CAD. Row 2: Total Payment: 124.48 CAD.

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL PHYSICIAN RESOURCE PLANNING.T-DE

***** 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 -----
-----WESTJET AIRLINE RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY TICKET MUST BE CANCELLED AT LEAST 2 HOURS PRIOR OR NO CREDIT WILL APPLY 24 HOURS IN ADVANCE GO TO WWW.WESTJET.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

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

Trip #: [REDACTED]
Booking Date: 21 Apr 18
Client: [REDACTED]
Agent: [REDACTED]
File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
ROWLAND NICHOL	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:	ROWLAND NICHOL	Booking Date:	18 Apr 18			
		File Locator/Ticket #:	[REDACTED]			
Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	03152	EDMONTON INTL 07 May 18 10:00PM		CALGARY INTL 07 May 18 10:55PM	I/	



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Invoice

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

Trip #:
Booking Date: 04 May 18
Client:
Agent:

File Locator:

PASSENGERS: DR ROWLAND NICHOL

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row 1: WESTJET Ticket #, 152.28, 0.00, \$0.00, 49.48, 0.00, 201.76 CAD. Row 2: Total: 152.28, 0.00, 0.00, 49.48, 0.00, 201.76 CAD.

Table with columns: PAYMENTS, Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row 1: Invoice #, 05/04/2018, 201.76 CAD. Row 2: Total Payment: 201.76 CAD.

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101

***** 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 -----
-----WESTJET AIRLINE RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY TICKET MUST BE CANCELLED AT LEAST 2 HOURS PRIOR OR NO CREDIT WILL APPLY 24 HOURS IN ADVANCE GO TO WWW.WESTJET.COM TO CHECK IN AND PRINT YOUR BOARDING PASS. ----- **PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR
***** 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**
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ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [REDACTED]
Booking Date: 04 May 18
Client: [REDACTED]
Agent: [REDACTED]
File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
ROWLAND NICHOL	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: ROWLAND NICHOL Booking Date: 04 May 18
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	03395	CALGARY INTL 10 May 18 7:00AM		EDMONTON INTL 10 May 18 7:52AM	L/	

Vision

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Invoice

ALBERTA HEALTH SERVICES ROWLAND NICHOL 9929 108 ST EDMONTON AB CA T5K1G8	Trip #: [REDACTED] Booking Date: 11 May 18 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED]
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PASSENGERS: DR ROWLAND NICHOL

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
WESTJET Ticket # [REDACTED]	172.02	0.00	\$0.00	49.48	0.00	221.50 CAD
AIR CANADA Ticket # [REDACTED] <i>Cancelled</i>	201.05	0.00	\$0.00	37.48	0.00	238.53 CAD
AIR CANADA Ticket # [REDACTED] <i>Cancelled</i>	-201.05	0.00	\$0.00	-37.48	0.00	-238.53 CAD
Total:	172.02	0.00	0.00	49.48	0.00	221.50 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	06/05/2018		[REDACTED]	-238.53 CAD
	[REDACTED]	05/11/2018		[REDACTED]	221.50 CAD
	[REDACTED]	05/11/2018		[REDACTED]	238.53 CAD
				Total Payment:	221.50 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101

***** 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
 ***** 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 -----
 ---AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS. ----- **PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

ALBERTA HEALTH SERVICES
ROWLAND NICHOL
9929 108 ST
EDMONTON AB
CA
T5K1G8

Trip #: [REDACTED]
Booking Date: 11 May 18
Client: [REDACTED]
Agent: [REDACTED]
File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
ROWLAND NICHOL	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:	ROWLAND NICHOL	Booking Date:	11 May 18
		File Locator/Ticket #:	[REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	03352	EDMONTON INTL 11 May 18 4:00PM		CALGARY INTL 11 May 18 4:55PM	Q/	