

## Official Administrator and Executive Expense Report

**Name** Salimah Walji-Shivji  
**Title** General Counsel Legal & Privacy  
**Location** Edmonton

Expenses submitted during the month of March 2015

Travel (1)										
Month-Year	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Mar-15	P-Card	Meetings	1,069	20	1,053	617	2,759			
Mar-15	Expense Claim	Meetings		293		340	633			
<b>Total</b>			\$ 1,069	\$ 313	\$ 1,053	\$ 957	\$ 3,392	\$ -	\$ -	\$ -

**Total for the Month** \$ 3,392

Maximum daily single meal expense claimed in the month \$ 21  
 Maximum daily base hotel rate claimed in the month \$ 184  
 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.

Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report

**Instruction:**

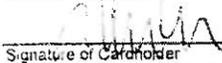
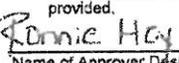
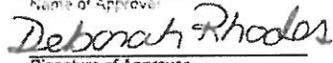
- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

WALJI-SHIVJI, SALIMAH Cardholder's Name	ACTING GENERAL COUNSEL Cardholder's Position/Title	Billing Reporting Period: 20/03/2015
LEGAL & PRIVACY Cardholder's Dept	SOUTHPORT TOWER Cardholder's Site/Location	Total Statement Amount: \$2,758.90
SALIMAH.WALJI@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address		Last 5 digits of the P-Card #: [REDACTED]

**Statement of Transactions**

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
19/02/2015	881270797	AIR CAN [REDACTED] AIR CANADA	484.31	CAD	484.31	00	00	YYC to YEG Feb 23-25 (Appeal)
20/02/2015	881270798	AIR CAN [REDACTED] AIR CANADA	105.00	CAD	105.00	00	00	Charge fee to attend committee mtgs Feb 26
26/02/2015	881724085	AIR CAN [REDACTED] AIR CANADA	401.36	CAD	401.36	00	00	YYC to YEG for March 3 ELT
26/02/2015	881600337	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	113.40	CAD	113.40	5.40	00	Airport parking from Feb23-26 (Appeal)
27/02/2015	881724086	THE WESTIN EDMONTON, WESTIN HOTELS	486.37	CAD	486.37	91.39	00	Total stay for appeal and committee mtg Feb 23-26
27/02/2015	881900333	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	YEG to SSP Feb 2 (ELT)
27/02/2015	881900331	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	YEG to SSP Feb 9 (ELT)
27/02/2015	881900332	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	SSP to YEG Feb 10 (ELT)
27/02/2015	881900333	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	YEG to Hotel Feb 16 (ELT)
27/02/2015	881900334	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	SSP to YEG Feb 17 (ELT)
27/02/2015	881900335	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	YEG to Courthouse Feb 23 (Appeal)
27/02/2015	881900336	PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	72.00	CAD	72.00	3.43	00	SSP to YEG Feb 26 (Appeal)
04/03/2015	882300280	THE WESTIN EDMONTON, WESTIN HOTELS	178.50	CAD	178.50	33.39	00	Total stay for Mar 3 ELT
10/03/2015	883455457	AIR CAN [REDACTED] AIR CANADA	78.75	CAD	78.75	00	00	Change fee to get on an earlier flight Mar 10
11/03/2015	883234797	THE WESTIN EDMONTON, WESTIN HOTELS	198.82	CAD	198.82	33.39	00	Hotel stay for Mar 10 ELT and dinner
18/03/2015	883697797	THE WESTIN EDMONTON, WESTIN HOTELS	208.58	CAD	208.58	56.64	00	Hotel stay for ELT Mar 17

✓ 1  
 ✓ 2  
 ✓ 3  
 ✓ 4  
 ✓ 5  
 ✓ 6  
 ✓ 7  
 ✓ 8  
 ✓ 9  
 ✓ 10  
 ✓ 11  
 ✓ 12  
 ✓ 13  
 ✓ 14  
 ✓ 15  
 ✓ 16  
 RH

<b>Signatures</b>		
<b>Cardholder Designate (if Applicable)</b> By signing this statement <ul style="list-style-type: none"> <li>• I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies, Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre.</li> </ul>		
Name of Cardholder Designate	Cardholder Designate Position/Title	
Signature of Cardholder Designate	Date of Signature	
<b>Cardholder</b> By signing this statement <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• 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. A personal cheque for any personal expenses inadvertently charged is attached.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul>		
WALJI-SHIVJI, SALIMAH Name of Cardholder	ACTING GENERAL COUNSEL Cardholder Position/Title	
 Signature of Cardholder	Date of Signature	
<b>Approver Designate (if Applicable)</b> By signing this statement <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• 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. A personal cheque for personal expenses inadvertently charged has been obtained.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul>		
Ronnie Hay Name of Approver Designate	Exec. Associate, Finance Approver Designate Position/Title	
 Signature of Approver Designate	Date of Signature	
<b>Approver</b> By signing this statement <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• 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. A personal cheque for personal expenses inadvertently charged has been obtained.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul>		
Deborah Rhodes Name of Approver	VP Corp. Services + CFO Approver Position/Title	
 Signature of Approver	April 17, 2015 Date of Signature	
<b>Submit approved statement with attachments to Accounts Payable:</b>		
<b>Attach:</b> <ul style="list-style-type: none"> <li>• Original (or scanned) itemized receipts with documented business reasons including names of participants where required</li> <li>• Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable:             <ul style="list-style-type: none"> <li>• Copies of pre-approvals for travel</li> <li>• Personal cheque payable to "Alberta Health Services"</li> <li>• Return, refund and/or credit receipts</li> <li>• Disputes letter</li> <li>• Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason.</li> </ul> </li> </ul>	<b>Address:</b> Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton AB T6J 3E4	
<b>Accounts Payable only:</b>		
Reference #:	Reviewed by:	Date:

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



J

**Booking Information**

**Booking Reference:** [Redacted]  
**Electronic Ticketing confirmed. This is your official itinerary/receipt.**  
**Main Contact:**  
 Mrs. Salimah Wajji  
 salimah.wajji@aircanada.com  
 Mobile: [Redacted]

**Customer Care**  
 Air Canada  
 1-888-247-2252  
**Flight Arrivals and Departures**  
 1-888-422-7532

**Flight Itinerary**

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8369 <sup>1</sup>	Calgary (YYC) Sun 22-Feb 2015 20:55	Edmonton, Edmonton Int'l (YEG) Sun 22-Feb 2015 21:50	0	0hr55	DH3	Flex, V	
AC5169 <sup>2</sup>	Edmonton, Edmonton Int'l (YEG) Wed 25-Feb 2015 17:00	Calgary (YYC) Wed 25-Feb 2015 17:50	0	0hr56	DH3	Flex, H	

Operated by:  
<sup>1</sup> Air Canada Express - Jazz

**Passenger Information**

1: Mrs Salimah Wajji : Adult (16+), Ticket Number: [Redacted]

Air Canada - Aeroplan: [Redacted]  
 Payment Card: [Redacted]  
 Seat Selection: AC8369 4D - AC5169 2F  
 Meal Preference: None  
 Special Needs: None

**Purchase Summary**

Fare Summary	Adult
Passenger Type	
<b>Air Transportation Charges</b>	
Departing Flight - Flex	147.00
Return Flight - Flex	196.00
Surcharges	44.00
<b>Taxes, Fees and Charges</b>	
Canada Airport Improvement Fee	60.00
Canada Goods and Services Tax (GST/HSF #10009-2287 RT0001)	23.06
Air Travellers Security Charge (ATSC)	14.25
<b>Total before options (per passenger)</b>	<b>484.31</b>
Number of passengers	x 1
<b>Total with options</b>	<b>484.31</b>
Travel Insurance (declined)	0.00
<b>Grand Total - Canadian dollars</b>	<b>\$484.31</b>

**Payment Information**

Credit/Debit Card [Redacted] - Amount paid: **\$484.31**  
 The following amount (tax inclusive) will appear on your credit card or debit card statement:  
 • Air Canada: \$484.31 (Air Transp. Charges - per ticket)

Ticket number(s) [Redacted]

**Fare Rules**

Departing Flight Calgary (YYC) To Edmonton (YEG) - Flex

2

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



**Booking Information**

Booking Reference: [REDACTED]  
 Electronic Ticketing confirmed. This is your official itinerary/receipt.  
 Main Contact:  
 Mrs Sallimah Walji  
 sallimah.walji@albertahealthservices.ca  
 Mobile: [REDACTED]

**Customer Care**  
 Air Canada  
 1-888-247-2262  
**Flight Arrivals and Departures**  
 1-888-422-7533

**Flight Itinerary**

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Status
AC8138 <sup>1</sup>	Calgary (YYC) Mon 23-Feb 2015 10:30	Edmonton, Edmonton Int'l (YEG) Mon 23-Feb 2015 11:25	0	0hr55	DH4	Flex, V	
AC8155 <sup>1</sup>	Edmonton, Edmonton Int'l (YEG) Thu 26-Feb 2015 19:30	Calgary (YYC) Thu 26-Feb 2015 20:26	0	0hr56	DH3	Flex, V	

Operated by:  
<sup>1</sup> Air Canada Express - Jazz

**Passenger Information**

1: Mrs Sallimah Walji : Adult (16+), Ticket Number: [REDACTED]  
 Air Canada - Aeroplan: [REDACTED] Meal Preference: None  
 Payment Card: [REDACTED] Special Needs: None  
 Seat Selection: AC8138 5C, AC8155 2C

**Additional amount payable and/or refund - Summary**

	Additional charges
Passenger Type	Adult
<b>Air Transportation Charges</b>	
Air Transportation Charges (including surcharges)	0.00
<b>Extras (Change Fee)</b>	
Change Fee	100.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	5.00
<b>Total Extras (Change Fee)</b>	<b>105.00</b>
Number of passengers	x 1
<b>Total with options</b>	<b>105.00</b>
<b>Grand Total - Canadian dollars</b>	<b>\$105.00</b>

**Payment Information**  
 Credit/Debit Card [REDACTED] Amount paid: \$105.00  
 The following amount (tax inclusive) will appear on your credit card or debit card statement:  
 • Air Canada: \$105.00 (Change Fee per ticket)  
 Ticket number(s): [REDACTED]

**Fare Rules**

**Departing Flight** Calgary (YYC) To Edmonton (YEG) - Flex  
**Return Flight** Edmonton (YEG) To Calgary (YYC) - Flex  
 • Changes:

(8)

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



**Booking Information**

Booking Reference: [REDACTED]  
 Electronic Ticketing confirmed. This is your official itinerary/receipt.  
 Main Contact:  
 Mrs Salimah Walji  
 salimah.walji@albertahealthservices.ca  
 Mobile: [REDACTED]

Customer Care  
 Air Canada  
 1-888-247-2262  
 Flight Arrivals and Departures  
 1-888-422-7533

**Flight Itinerary**

Flight	From	To	Steps	Duration	Aircraft	Fare Type	Notes
AC8359	Calgary (YYC) Mon 02-Mar 2015 20:58	Edmonton, Edmonton Int'l (YEG) Mon 02-Mar 2015 21:50	0	0hr55	DH3	Flex, Y	
AC8351	Edmonton, Edmonton Int'l (YEG) Tue 03-Mar 2015 16:00	Calgary (YYC) Tue 03-Mar 2015 16:53	0	0hr53	DH4	Flex, W	

Operated by:  
 1 Air Canada Express - Jazz

**Passenger Information**

1: Mrs Salimah Walji : Adult (16+), Ticket Number: [REDACTED]

Air Canada - Aeroplan [REDACTED]  
 Payment Card: [REDACTED]  
 Seat Selection: AC8359 3C, AC8351 5C  
 Meal Preference: None  
 Special Needs: None

**Purchase Summary**

Fare Summary	Adult
Passenger Type	
<b>Air Transportation Charges</b>	
Departing Flight - Flex	147.00
Return Flight - Flex	137.00
Surcharges	24.00
<b>Taxes, Fees and Charges</b>	
Canada Airport Improvement Fee	60.00
Canada Goods and Services Tax (GST/HST #10009 2287 RT0001)	19.11
Air Travellers Security Charge (ATSC)	14.25
Total before options (per passenger)	401.36
Number of passengers	x 1
Total with options	401.36
Travel Insurance (declined)	0.00
<b>Grand Total - Canadian dollars</b>	<b>\$401.36</b>

**Payment Information**

Credit/Debit Card [REDACTED] - Amount paid: **\$401.36**  
 The following amount (tax inclusive) will appear on your credit card or debit card statement:  
 • Air Canada: \$401.36 (Air Transp. Charges - per ticket)

Ticket number(s): [REDACTED]

**Fare Rules**

Departing Flight Calgary (YYC) To Edmonton (YEG) - Flex

4

**RECEIPT**  
**GST NO. R122556194**

EXIT No 00  
IN: 02/23/15 00:50  
OUT: 02/23/15 00:50  
DURATION: 0 11: 40  
PAID: \$ 13.40  
GST INCLUDED \$ 13.40  
MASTERCARD

[REDACTED]

SEE [REDACTED]  
THANK YOU FOR  
YOUR VISIT

**Calgary International Airport Parkade**

5

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



Sallmah Walji



Page Number : [Redacted] Invoice Nbr : [Redacted]  
Guest Number : [Redacted]  
Folio ID : [Redacted]  
Arrive Date : 23-FEB-15 21:01  
Depart Date : 26-FEB-15 19:23  
No. Of Guest : 1  
Room Number : [Redacted]  
Club Account : [Redacted]



Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
02-23-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
02-24-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
02-25-2015	145.00	7.47	5.97	0.00	0.00	4.35	162.79	0.00
02-26-2015	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-488.37
<b>Total</b>	<b>435.00</b>	<b>22.41</b>	<b>17.91</b>	<b>0.00</b>	<b>0.00</b>	<b>13.05</b>	<b>488.37</b>	<b>-488.37</b>

5

cmto mtg ✓

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

# WESTIN<sup>®</sup>

## HOTELS & RESORTS

Salimah Wali

[Redacted]

Page Number : [Redacted] Invoice Nbr : [Redacted]  
Guest Number : [Redacted]  
Folio ID : [Redacted]  
Arrive Date : 23-FEB-15 21:01  
Depart Date : 26-FEB-15 19:23  
No. Of Guest : [Redacted]  
Room Number : [Redacted]  
Club Account : [Redacted]

### Tax Invoice

Tax ID : 815461330RT0001  
The Westin Edmonton 26-FEB-15 19:30 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
23-FEB-15	[Redacted]	Room Charge	145.00	
23-FEB-15	[Redacted]	GST	7.47	
23-FEB-15	[Redacted]	DMF	4.35	
23-FEB-15	[Redacted]	Tourism Levy	5.97	
24-FEB-15	[Redacted]	Room Charge	145.00	
24-FEB-15	[Redacted]	GST	7.47	
24-FEB-15	[Redacted]	DMF	4.35	
24-FEB-15	[Redacted]	Tourism Levy	5.97	
25-FEB-15	[Redacted]	Room Charge	145.00	
25-FEB-15	[Redacted]	GST	7.47	
25-FEB-15	[Redacted]	DMF	4.35	
25-FEB-15	[Redacted]	Tourism Levy	5.97	
26-FEB-15	[Redacted]	Mastercard		-488.37
** Total			488.37	-488.37
*** Balance			0.00	

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at [westin.com/newbalance](http://westin.com/newbalance)

Continued on the next page

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SALIMAH WALJI  
Feb 02/2015  
Ap > SSP

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6H-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1090  
M/C PURCHASE  
Op Id:114995  
Card #:

APPROVED

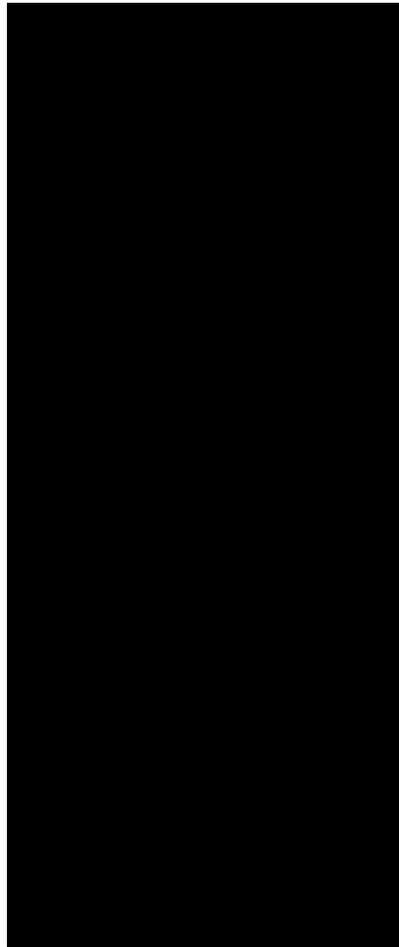
AMOUNT CAD\$72.00

Ref. #  
Auth. #

Book on line at  
EDMPRESTIGE.COM  
Thank you for being our guest  
GST 862184769

Date: 2015/02/27 Time: 11:36:52  
Response: AUTH

\*\*\*CUSTOMER COPY\*\*\*



7

SALIMAH WALJI  
Feb 09/2015  
Ap > SSP

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6H-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1102  
M/C PURCHASE  
Op Id:  
Card #

APPROVED

AMOUNT CAD\$72.00

Ref. #  
Auth. #

Book on line at  
EDMPRESTIGE.COM  
Thank you for being our guest  
GST 862184769

Date: 2015/02/27 Time: 11:39:40  
Response: AU

\*\*\*CUSTOMER COPY\*\*\*

8

SALIMAH WALJI

Feb 10/2015  
SSP > Ap

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6H-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1103  
M/C PURCHASE  
Op Id:  
Card #

APPROVED

AMOUNT CAD\$72.00

Ref. #  
Auth. #

Book on line at  
EDMPRESTIGE.COM  
Thank you for being our guest  
GST 862184769

Date: 2015/02/27 Time: 11:41:16  
Response: AUTH

\*\*\*CUSTOMER COPY\*\*\*

9

SALIMAH WALJI  
Feb. 16/2015  
Ap> Weston

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6N-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1104  
N/C PURCHASE  
Dr Id:114999  
Card # [REDACTED]

APPROVED  
AMOUNT CAD\$72.00

Ref. # [REDACTED]  
Auth. # [REDACTED]  
Book on line at  
EDMPRESTIGE.COM  
Thank you for being our Guest  
GST 862184769

Date: 2015/02/27 Time: 11:42:37  
Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

10

SALIMAH WALJI  
Feb. 17/2015  
SSP> AP

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6N-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1105  
N/C PURCHASE  
Dr Id:114999  
Card # [REDACTED]

APPROVED  
AMOUNT CAD\$72.00

Ref. # [REDACTED]  
Auth. # [REDACTED]  
Book on line at  
EDMPRESTIGE.COM  
Thank you for being our Guest  
GST 862184769

Date: 2015/02/27 Time: 11:44:12  
Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

12

SALIMAH WALJI  
Feb. 26/2015  
SSP> AP

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6N-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1110  
N/C PURCHASE  
Dr Id:114999  
Card # [REDACTED]

APPROVED  
AMOUNT CAD\$72.00

Ref. # [REDACTED]  
Auth. # [REDACTED]  
Book on line at  
EDMPRESTIGE.COM  
Thank you for being our Guest  
GST 862184769

Date: 2015/02/27 Time: 12:24:24  
Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

11

SALIMAH WALJI  
Feb. 23/2015  
Ap> Courthouse

PRESTIGE TRANSPORTATION  
10135 31 Avenue NW  
Edmonton AB T6N-1C2  
780-463-5000

Term Id:4502412509440  
Item #:1117  
N/C PURCHASE  
Dr Id:114999  
Card # [REDACTED]

APPROVED  
AMOUNT CAD\$72.00

Ref. # [REDACTED]  
Auth. # [REDACTED]  
Book on line at  
EDMPRESTIGE.COM  
Thank you for being our Guest  
GST 862184769

Date: 2015/02/27 Time: 12:07:55  
Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

13

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



Salimah Walji

[Redacted]

Page Number	:	[Redacted]	Invoice Nbr	:	[Redacted]
Guest Number	:	[Redacted]			
Folio ID	:	[Redacted]			
Arrive Date	:	02-MAR-15	22:21		
Depart Date	:	03-MAR-15	09:00		
No. Of Guest	:	[Redacted]			
Room Number	:	[Redacted]			
Club Account	:	[Redacted]			

FUEL YOUR BODY - It's easy to maintain a healthy lifestyle on the road. Our extensive SuperFoodsRx(TM) menu features nutrient-rich, delicious dishes that fuel your body and give you the focused energy you need. Discover dishes to supercharge your day at [westin.com/eatwell](http://westin.com/eatwell)

[Redacted]

Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food&Bev	Phone	Other	Total	Payment
03-02-2015	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00
Total	159.00	8.19	6.55	0.00	0.00	4.77	178.51	0.00

ELT Mar. 3/2015 ✓

13

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

# WESTIN

HOTELS & RESORTS

Salimah Walji



Page Number : [Redacted]  
Guest Number : [Redacted] Invoice Nbr : [Redacted]  
Folio ID : [Redacted]  
Arrive Date : 02-MAR-15 22:21  
Depart Date : 03-MAR-15 09:00  
No. Of Guest : 1  
Room Number : [Redacted]  
Club Account : [Redacted]

Information Invoice

Tax ID : 815461330RT0001  
The Westin Edmonton 03-MAR-15 04:00 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
02-MAR-15	[Redacted]	Room Charge	159.00	
02-MAR-15	[Redacted]	GST	8.19	
02-MAR-15	[Redacted]	DMF	4.77	
02-MAR-15	[Redacted]	Tourism Levy	6.55	
03-MAR-15	[Redacted]	Mastercard		-178.51
** Total			178.51	-178.51
*** Balance			0.00	

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

Continued on the next page

14

Change fee ✓

PASSENGER ITINERARY FOR  
THOMPSONWINGATE BROWNING

AIR CANADA  
EDMONTON  
CANADA  
10 MARCH 15

BOOKING REFERENCE  
[REDACTED]

WE ARE PLEASED TO CONFIRM THE FOLLOWING TRAVEL ARRANGEMENTS

AIR CANADA	AC8153	V ECONOMY	CONFIRMED
DEPART	TUE 10 MARCH 15	EDMONTON INTERNATIONAL	1800
ARRIVE	TUE 10 MARCH 15	CALGARY	1853

LATEST CHECK IN IS 60 MINUTES BEFORE DEPARTURE  
THIS FLIGHT IS OPERATED BY JAZZ

\*\*FREQUENT TRAVELLER\*\*

FORM OF PAYMENT - PASSENGER 1 [REDACTED]  
 AIRPORT SAME DAY CHANGE FEE  
 NUMBER OF FEES-1:SDCF  
 FEE AMOUNT WITH TAXES \$75.00CAD - 3.75XB  
 GRAND TOTAL \$78.75CAD/10MAR2015/CL  
 L. MR BROWNING /TKT NBR - [REDACTED]

THANK YOU FOR CHOOSING AIR CANADA

ELT  
MAR.10/2015  
Dinner

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

15

# WESTIN

HOTELS & RESORTS

Salimah Walij



Page Number	:	[REDACTED]	Invoice Nbr	:	[REDACTED]
Guest Number	:	[REDACTED]			
Folio ID	:	[REDACTED]			
Arrive Date	:	09-MAR-15	16:03		
Depart Date	:	10-MAR-15	09:00		
No. Of Guest	:	1			
Room Number	:	[REDACTED]			
Club Account	:	[REDACTED]			

Information Invoice

Tax ID : 815461330RT0001  
The Westin Edmonton 10-MAR-15 03:50 9999

Date	Reference	Description	Charges (CAD)	Credits (CAD)
09-MAR-15	[REDACTED]	In Room Dining	20.11	
09-MAR-15	[REDACTED]	Room Charge	159.00	
09-MAR-15	[REDACTED]	GST	8.19	
09-MAR-15	[REDACTED]	DMF	4.77	
09-MAR-15	[REDACTED]	Tourism Levy	6.55	
10-MAR-15	[REDACTED]	Mastercard		-198.62
		** Total	198.62	-198.62
		*** Balance	0.00	

↓ receipt lost  
Written Attestation  
attached.

Susan,  
Tena Dubean  
is sending attestation  
for 2nd last item.  
Please give to Deb once  
received.

Ronnie

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



Salimah Walji

Page Number : [REDACTED] Invoice Nbr : [REDACTED]  
 Guest Number : [REDACTED]  
 Folio ID : [REDACTED]  
 Arrive Date : 09-MAR-15 16:03  
 Depart Date : 10-MAR-15 09:00  
 No. Of Guest : 1  
 Room Number : [REDACTED]  
 Club Account : [REDACTED]

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

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](http://westin.com/eatwell)

Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
03-09-2015	159.00	8.19	6.55	20.11	0.00	4.77	198.62	0.00
Total	159.00	8.19	6.55	20.11	0.00	4.77	198.62	0.00

Continued on the next page

Written Attestation for Lost Receipts

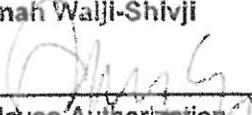
April 7, 2015

Westin – In Room Dining – March 9, 2015

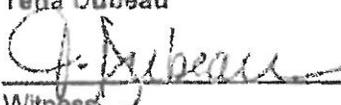
\$20.11

- The above itemized original receipt has been misplaced
- The expense was incurred and related to AHS business
- The expense has not been previously claimed

Salimah Walji-Shivji

  
\_\_\_\_\_  
Employee Authorization

Tena Dubeau

  
\_\_\_\_\_  
Witness

Date Signed:

Apr. 09 / 2015

Date Signed:

09. Apr. 2015

ELI MAR. 17 ✓

16

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

# WESTIN<sup>®</sup>

## HOTELS & RESORTS

Salmah Wali  
[Redacted]

Page Number : [Redacted] Invoice Nbr : [Redacted]  
Guest Number : [Redacted]  
Folio ID : [Redacted]  
Arrive Date : 16-MAR-15 21:31  
Depart Date : 17-MAR-15 12:00  
No. Of Guest : 1  
Room Number : [Redacted]  
Club Account : [Redacted]

### Information Invoice

Tax ID : 815461330RT0001  
The Westin Edmonton 17-MAR-15 04:31 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
16-MAR-15	[Redacted]	Room Charge	184.00	
16-MAR-15	[Redacted]	GST	9.48	
16-MAR-15	[Redacted]	DMF	5.52	
16-MAR-15	[Redacted]	Tourism Levy	7.58	
17-MAR-15	[Redacted]	Mastercard		-206.58
		<b>** Total</b>	<b>206.58</b>	<b>-206.58</b>
		<b>*** Balance</b>	<b>0.00</b>	

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

Continued on the next page

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



Salimah Wajji

Page Number : [REDACTED] Invoice Nbr : [REDACTED]  
Guest Number : [REDACTED]  
Folio ID : [REDACTED]  
Arrive Date : 16-MAR-15 21:31  
Depart Date : 17-MAR-15 12:00  
No. Of Guest : 1  
Room Number : [REDACTED]  
Club Account : [REDACTED]

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at [westin.com/newbalance](http://westin.com/newbalance)

Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
03-15-2015	184.00	9.48	7.58	0.00	0.00	5.52	206.58	0.00
Total	184.00	9.48	7.58	0.00	0.00	5.52	206.58	0.00

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

**SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)**

- Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system
- Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system
- If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 2-Mar-16 To 31-Mar-16  
 Travel Period from: 2-Mar-16 To 31-Mar-16 (if applicable)  
 Out-of-Province Travel

Name: Salmah Wali Position (Title): General Counsel

Location: [Redacted] Dept: [Redacted] DOFA Level: [Redacted] (if applicable) Union: [Redacted] Business Phone: [Redacted] Ext: [Redacted]

Employee # (E-People): [Redacted]

**SECTION E: FINANCE CODING & TOTAL CLAIM**

CAPITAL PROJECT CODING ONLY → Project Number \_\_\_\_\_ Project Task Number \_\_\_\_\_  
 Expenditure Organization \_\_\_\_\_ Expenditure Type \_\_\_\_\_

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT		
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total Expense	Total Section B	Total Section C&D	
2A	101	0005	71110550000	\$160.33 ✓						\$633.34		
2B	101	0005	71110560000	\$274.92 ✓								
2C	101	0005	71110560000	\$198.09 ✓								
2D												
				\$633.34							TOTAL CLAIM	\$633.34 ✓

NOTE: This section auto fills from page 2A, 2B, 2C & 2D

NOTE: These fields do not automatically fill for Section C & D

**SECTION F: AUTHORIZATION**

I certify that I have read and understood the Travel, Hospitality & Working Session Expense Policy (11127) of Alberta Health Services and confirm a signed copy being placed in the appropriate file for this claim and made available to the policy.

I attest that the expenses included in this claim are for valid business purposes for Alberta Health Services and that the claim has not been or will not be claimed by the employee or by the employee's spouse or family member for any other purpose.

I attest that the expenses included in this claim have been incurred by using a valid official Alberta Health Services card and supporting receipts as required above.

Travel, Hospitality and Working Session Expenses Expense Policy (11127)

By signing this form, I am certifying to the above statements.

Employee Signature: [Signature] Date: May 9, 2015

I attest that I have read and understood the Expense Policy of Alberta Health Services and confirm a signed copy being placed in the appropriate file for this claim and made available to the policy.

I attest that the expenses included in this claim are for valid business purposes for Alberta Health Services and that the claim has not been or will not be claimed by the employee or by the employee's spouse or family member for any other purpose.

I attest that the expenses included in this claim have been incurred by using a valid official Alberta Health Services card and supporting receipts as required above.

Approved By (PRINT ONLY): Deborah Rhodes DOFA Level: [Redacted] Position #: [Redacted] Phone: [Redacted] Ext: [Redacted]

Signature: [Signature] Title: VP Corp Sec. & CFO Date: May 6/15

I attest that I have read and understood the Expense Policy of Alberta Health Services and confirm a signed copy being placed in the appropriate file for this claim and made available to the policy.

I attest that the expenses included in this claim are for valid business purposes for Alberta Health Services and that the claim has not been or will not be claimed by the employee or by the employee's spouse or family member for any other purpose.

I attest that the expenses included in this claim have been incurred by using a valid official Alberta Health Services card and supporting receipts as required above.

Approved By (PRINT ONLY): \_\_\_\_\_ DOFA Level: \_\_\_\_\_ Position #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Ext: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Health and Personal Information: on this form is collected by AHS under the authority of section 20(1) of the Health Information Act (HIA) and sections 30(d) and 34.3 of the Freedom of Information Act, respectively, for the purposes of administering this Expense to Pay program.

Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10030-107 St, North Tower, 10th Floor, Account: Payable, Edmonton, AB T6J 3E4

**EXPENSE CLAIM DETAILS**

<b>Enter Finance Coding</b> 101   0005   71110550000	<b>Emp # (E-People)</b> [REDACTED]	
--	------------------------------------	--

*If expenses incurred are for **multiple FC's** please use pages 2B,2C,2D (after pg3) as there should be one FC per page **OR** if **more lines** are required for the same FC use these additional pages. Enter total \$ amount on slip, **DO NOT separate any taxes** (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.*

**SECTION B: TRAVEL EXPENSES**    **NOTE:** If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C

Select from dropdown (column <b>Prov</b> ) where expenses were incurred (Out of N.America = Interl) Ensure separate lines are used for claim items that differ in Province, US and Out of North America.		Completion of the "Cost Effective Method Used" Column is <b>REQUIRED</b> . If you select "No" in this column, <b>Further Explanation is REQUIRED</b> in the "Rationale is Required" section on this page													
Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.America where expenses incurred?	What is travel related to?	Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)	
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi				
					Meal Type with value	Allowance	Meal Type	with receipt							
		Local													
3-Mar-15	Cab from Westin Hotel to SSP for Executive Leadership Meeting	AB - Provinc	Meeting	Yes	BL-\$20.80	\$20.80						\$8.05			
3-Mar-15	Cab from YYC to Home	AB - Local	Meeting	Yes								\$38.35			
9-Mar-15	Cab from Home to YYC	AB - Local	Meeting	Yes	LD-\$32.35	\$32.35						\$30.00			
9-Mar-15	Cab from SSP to OCME Library for FIA Consultation Meeting	AB - Provinc	Meeting	Yes								\$14.72			
9-Mar-15	Cab from OCME Library to Westin Hotel	AB - Provinc	Meeting	Yes								\$16.06			
<b>SUBTOTALS</b>						\$53.15						\$107.18			Total Kms [REDACTED]

<p align="center"><b>MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle</b></p> <p align="center">→ details of travel location to &amp; from must be included above under the purpose of travel column</p> <p align="center">Rates applicable <b>\$0.505</b> per km for <u>under 5,000km/yr</u> or <b>\$0.47</b> per km for <u>over 5,000km/yr</u> or <u>per Union Agreement</u></p>	<p align="center">Enter \$0.505 km, \$0.47 km <u>OR</u> rate per Union Agreement <i>(see Mileage details to the left)</i></p>						
<p><b>Note:</b> Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">Mileage \$</td> <td></td> </tr> <tr> <td style="text-align: right;">Travel \$ Subtotal</td> <td align="right">\$160.33</td> </tr> <tr> <td style="text-align: right;">Auto fills on page 1 - TOTAL TRAVEL \$</td> <td align="right">\$160.33</td> </tr> </table>	Mileage \$		Travel \$ Subtotal	\$160.33	Auto fills on page 1 - TOTAL TRAVEL \$	\$160.33
Mileage \$							
Travel \$ Subtotal	\$160.33						
Auto fills on page 1 - TOTAL TRAVEL \$	\$160.33						

**Rationale is Required for expenses that are not Cost Effective**  
(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 0005 71110550000

Emp # (E-People)

If expenses incurred are for multiple FC's please use pages 2B,2C,2D (after pg3) as there should be one FC per page OR if more lines are required for the same FC use these additional pages. Enter total \$ amount on slip, DO NOT separate any taxes (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.

SECTION B: TRAVEL EXPENSES

NOTE: If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C

Select from dropdown (column Prov) where expenses were incurred (Out of N.America = Inter!)  
Ensure separate lines are used for claim items that differ in Province, US and Out of North America.

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 on this page

Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)	
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi				
					Meal Type with value	Allowance	Meal Type	with receipt							
10-Mar-15	Cab from YYC to Home (Executive Leadership Meeting)	AB - Local	Meeting	Yes	A-\$41.55	\$41.55						\$36.69			
16-Mar-15	Cab from Home to YYC	AB - Local	Meeting	Yes								\$26.60			
16-Mar-15	SSP for Meetings with Vickie Kaminski, Lorinda Prociuk and Denise Perret	AB - Provinc	Meeting	Yes	A-\$41.55	\$41.55									
17-Mar-15	Cab from Westin Hotel to SSP for Executive Leadership Meeting	AB - Provinc	Meeting	Yes	BL-\$20.80	\$20.80						\$7.59			
17-Mar-15	Cab from YYC to Home	AB - Local	Meeting	Yes								\$38.35			
23-Mar-15	Cab from Home to YYC	AB - Local	Meeting	Yes								\$29.44			
23-Mar-15	SSP for meeting with Verna Yiu and Vickie Kaminski	AB - Provinc	Meeting	Yes	LD-\$32.35	\$32.35									
<b>SUBTOTALS</b>						\$136.25						\$138.67			Total Kms

MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle

--> details of travel location to & from must be included above under the purpose of travel column  
Rates applicable \$0.505 per km for under 5,000km/yr or \$0.47 per km for over 5,000km/yr or per Union Agreement

Enter \$0.505 km, \$0.47 km OR rate per Union Agreement  
(see Mileage details to the left)

Mileage \$

Travel \$ Subtotal \$274.92

Auto fills on page 1 - TOTAL TRAVEL \$ \$274.92

Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3

Rationale is Required for expenses that are not Cost Effective  
(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

**EXPENSE CLAIM DETAILS**

<b>Enter Finance Coding</b>	101 0005 71110550000	<b>Emp # (E-People)</b>	[REDACTED]	Page 2C
-----------------------------	----------------------	-------------------------	------------	---------

*If expenses incurred are for multiple FC's please use pages 2B,2C,2D (after pg3) as there should be one FC per page OR if more lines are required for the same FC use these additional pages. Enter total \$ amount on slip, DO NOT separate any taxes (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.*

**SECTION B: TRAVEL EXPENSES**      **NOTE:** If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C

Select from dropdown (column Prov) where expenses were incurred (Out of N.America = Inter'l)  
 Ensure separate lines are used for claim items that differ in Province, US and Out of North America.

Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)	
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi				
					Meal Type with value	Allowance	Meal Type	with receipt							
24-Mar-15	Cab from Westin Hotel to SSP for Executive Leadership Meeting	AB - Provinc	Meeting	Yes	A-\$41.55	\$41.55									
25-Mar-15	Cab from Westin Hotel to SSP for Legal & Privacy meeting	AB - Provinc	Meeting	Yes	BL-\$20.80	\$20.80									
25-Mar-15	Cab from YYC to Home	AB - Local	Meeting	Yes											
30-Mar-15	Cab from Home to YYC	AB - Local	Meeting	Yes											
31-Mar-15	Cab from Westin Hotel to SSP for Executive Leadership Meeting	AB - Provinc	Meeting	Yes	A-\$41.55	\$41.55									
<b>SUBTOTALS</b>						\$103.90					\$94.19				Total Kms

<p align="center"><b>MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle</b></p> <p align="center">→ details of travel location to &amp; from must be included above under the purpose of travel column                  Rates applicable \$0.505 per km for under 5,000km/yr or \$0.47 per km for over 5,000km/yr or per Union Agreement</p>	<p align="center">Enter \$0.505 km, \$0.47 km OR rate per Union Agreement                  (see Mileage details to the left)</p>						
<p align="center"><b>Note:</b> Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3</p>							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; text-align: right;"><b>Mileage \$</b></td> <td></td> </tr> <tr> <td style="text-align: right;"><b>Travel \$ Subtotal</b></td> <td align="right">\$198.09</td> </tr> <tr> <td style="text-align: right;"><b>Auto fills on page 1 - TOTAL TRAVEL \$</b></td> <td align="right">\$198.09</td> </tr> </table>		<b>Mileage \$</b>		<b>Travel \$ Subtotal</b>	\$198.09	<b>Auto fills on page 1 - TOTAL TRAVEL \$</b>	\$198.09
<b>Mileage \$</b>							
<b>Travel \$ Subtotal</b>	\$198.09						
<b>Auto fills on page 1 - TOTAL TRAVEL \$</b>	\$198.09						

**Rationale is Required for expenses that are not Cost Effective**  
 (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

Westin → SSP

YELLOW CAB  
10135 31 AVENUE NW  
EDMONTON AB T6H-1C2  
780-462-3456

①

Term Id: 4504124782101  
Item #: 0879  
Visa Credit  
PURCHASE  
Op Id: 688886  
Card #: [REDACTED]

ATC: 4000000031010

APPROVED

AMOUNT CAD\$7.00  
TIP CAD\$1.05  
TOTAL CAD\$8.05 ✓

Ref. #: [REDACTED]  
A.C.H. #: [REDACTED]  
Resp. Code: 00  
TYR: 4000000000  
TSI: F800

BOOK ON LINE AT EDMTAXI.COM  
THANK YOU FOR BEING OUR GUEST

CSI 100403070

Date: 2015/03/02 Time: 07:00:13  
Response: AUTH [REDACTED]

✓

YYC → Home

ALLIED LIMO/ASSOCIATED  
307 41 AVENUE NE T2E2N4  
CALGARY AB  
21640631

|||| PURCHASE ||||

03-03-2015 17:26:35 (2)  
Acct #: [REDACTED]  
Exp Date: [REDACTED] Card Type: VI  
Name: SALMAN WALJI  
A000006031010 Visa Credit

Trace #: [REDACTED]  
Inv. #: [REDACTED]  
Auth: [REDACTED] RRN 001003003

Purchase \$33.35  
Tip \$5.00  
Total \$38.35 ✓

(00) APPROVED-THANK YOU

tain this copy for your records

✓

Home → YYC

316 HERIOTDAH ROAD SE  
CALGARY, AB T2R 1A2

TERMINAL ID: 514-632-242  
VEHICLE ID: 8875  
DRIVER ID: 334  
GST ACCOUNT #: [REDACTED]  
TYPE: [REDACTED]  
PASS: [REDACTED]

DATE: [REDACTED] END: [REDACTED] RATE: [REDACTED] (3)  
TAX AMOUNT: \$ 29.95

TAX AMOUNT: \$ 2.05

TOTAL: \$ 26.20

TIP AMOUNT: \$ 2.80 ✓

TOTAL: \$ 30.00 ✓

CASH RECEIPT

THANK YOU  
1403230-9999  
WWW.CHECKER-CHECKGROUP.COM



✓

SSP → OCME

YELLOW CAB  
10135 31 AVENUE NW  
EDMONTON AB T6H-1C2  
780-462-3456

Term Id: 45024124782159  
Item #: 1520  
Visa Credit  
PURCHASE  
Op Id: 688886  
Card #: [REDACTED]

ATC: 4000000031010

APPROVED

AMOUNT CAD\$14.72  
TIP  
TOTAL CAD\$14.72 ✓

Ref. #: [REDACTED]  
A.C.H. #: [REDACTED]  
Resp. Code: 00  
TYR: 4000000000  
TSI: F800

BOOK ON LINE AT EDMTAXI.COM  
THANK YOU FOR BEING OUR GUEST

CSI 100403070

Date: 2015/03/29 Time: 14:00:05

④

✓

OCME → Westin

YELLOW CAB  
2015 31 AVENUE NW  
EDMONTON AB T6B 1C2  
780-462-3456

Term Id: 45824124782517  
Item #: 0158  
Visa Credit  
PURCHASE  
CP To: 13 264  
Card # [REDACTED]

APPROVED

AMOUNT CAD\$14.60  
TIP CAD\$1.46  
TOTAL CAD\$16.06 ✓

Ref. # [REDACTED] \$16.06  
Auth. # [REDACTED]  
Resp. [REDACTED]  
TVR: 408008000  
TSI: F888

BOOK ON LINE AT EDMTAXI.COM  
THANK YOU FOR BEING OUR GUEST

GMT 100433070

Date: 2015/03/09 Time: 09:57  
[REDACTED]

YYC → Home

ALLIED LIMO/ASSOCIATED  
307 41 AVENUE NE T2E2N1  
CALGARY AB  
21640631

[[[[ PURCHASE ]]]]

93-10-2015 / 10-10-15

Acct # [REDACTED] (6)  
Exp Dat [REDACTED] Card type [REDACTED]  
Name: SALIMAN WALJI  
ADDRESS: 0000031010 Visa Credit

Trace [REDACTED]  
FV2154063109

Inv. # [REDACTED]  
Auth # [REDACTED] NRN 001003403

Purchase \$33.35  
Tip \$3.34

Total \$36.69 ✓

(00) APPROVED-THANK YOU \$36.69

Retain this copy for your records

Home → YYC

ASSOCIATED CAB ACIA LTD  
307 - 41 AVE NE (403) 299-1111  
INSIST ON THE PROFESSIONALS

DATE: 2015/03/10 ✓  
PICK-UP TIME: 06:28  
DROP-OFF TIME: 06:49 (7)  
TRIP ID: 165148  
LOCATION: 073000-45824103707  
CAR NUMBER: 0179  
DRIVER: 712575  
CARD TYPE: VISA  
CARD: [REDACTED]  
EXPIRY: [REDACTED]  
AUTH: [REDACTED]

FARE (\$): 26.00  
EXTRA (\$): 8.00  
SUBTTL (\$): 23.68

\$26.69 ✓

TIP (\$): \_\_\_\_\_

TOTAL (\$): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

FOR ONLINE TAXI BOOKINGS VISIT  
OUR WEBSITE WWW.ASSOCIATEDCAB.CA

CUSTOMER'S COPY

Westin → SSP

YELLOW CAB  
18135 31 AVENUE NW  
EDMONTON AB T6B 1C2  
780-462-3456

Term Id: 45824124782517  
Item #: 0157  
Visa Credit  
PURCHASE  
CP To: 13 264  
Card # [REDACTED] (8)

APPROVED

AMOUNT CAD\$6.60  
TIP CAD\$0.99  
TOTAL CAD\$7.59 ✓

Ref. # [REDACTED]  
Auth. # [REDACTED]  
Resp. [REDACTED]  
TVR: 408008000  
TSI: F888

BOOK ON LINE AT EDMTAXI.COM  
THANK YOU FOR BEING OUR GUEST

GMT 100433070

Date: 2015/03/17 Time: 09:17:19  
Response: AUTH [REDACTED]

\*\*\* \* \*

YYC → Home

ALLIED LIMO ASSOCIATED  
307 41 AVENUE NE T2E2N4  
CALGARY AB  
21640631

|||| PURCHASE ||||

03-17-2015 18:28:30  
Acct # [REDACTED] C  
Exp Date [REDACTED] Card type VI  
Name: SALIMAN MALJI  
A0620000031018 Visa Credit

(9)

Trace # [REDACTED]  
FV21G4093125

Inv [REDACTED]  
Aut [REDACTED] RRN 001003537

Purchase	\$33.55
Tip	\$5.00
Total	\$38.55 ✓

\$38.35

(00) APPROVED-THANK YOU

Retain this copy for your records

✓

Home → YYC

TIG PERLUJIAN KURSI SE  
ORIGIN: 10 JUN 12

TERMINAL ID: 319-666-750  
 RECEIPT ID: 4127651  
 DRIVER ID: [REDACTED]  
 GUEST ACCOUNT NO: [REDACTED]  
 TRIP NUMBER: [REDACTED]  
 PASSWORD: [REDACTED]

03/25/2015  
 START: 09:32  
 DISTANCE: 110.05  
 RATE: 1  
 LHO CODE: [REDACTED]

FARE AMOUNT: \$ 29.04  
 TAX AMOUNT: \$ 1.20  
 TIP AMOUNT: \$ 3.84

TOTAL: \$ 34.08 ✓

APPROVAL NUMBER: [REDACTED]

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

\$29.44



Westin → SSP

YELLOW CAB  
 31 AVENUE NW  
 CALGARY AB T2E2N4  
 403-402-3456

03/25/2015  
 START: 09:32  
 DISTANCE: 110.05  
 RATE: 1  
 LHO CODE: [REDACTED]

FARE AMOUNT: \$ 29.04  
 TAX AMOUNT: \$ 1.20  
 TIP AMOUNT: \$ 3.84

TOTAL: \$ 34.08 ✓

APPROVAL NUMBER: [REDACTED]

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

CAD\$61.99

CAD\$7.59

BOOK ON LINE AT EDIART.COM  
 THANK YOU FOR BEING OUR GUEST

661 100403070

Date: 2015/03/25 Time: 07:48:22  
 Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

Westin → SSP

YELLOW CAB  
 31 AVENUE NW  
 CALGARY AB T2E2N4  
 403-402-3456

03/25/2015  
 START: 09:32  
 DISTANCE: 110.05  
 RATE: 1  
 LHO CODE: [REDACTED]

FARE AMOUNT: \$ 29.04  
 TAX AMOUNT: \$ 1.20  
 TIP AMOUNT: \$ 3.84

TOTAL: \$ 34.08 ✓

APPROVAL NUMBER: [REDACTED]

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

CAD\$7.28

CAD\$1.08

CAD\$8.28

BOOK ON LINE AT EDIART.COM  
 THANK YOU FOR BEING OUR GUEST

661 100403070

Date: 2015/03/25 Time: 07:48:06  
 Response: AUTH [REDACTED]

\*\*\*CUSTOMER COPY\*\*\*

YYC → Home

ALLIED LIMO/ASSOCIATED  
 397 41 AVENUE NE T2E2N4  
 CALGARY AB  
 21640631

03-25-2015 12:40:45  
 Acct # [REDACTED]  
 Exp Date [REDACTED] Card Type VI  
 Name: SALIMAH WALJI  
 A000000031010 Visa Credit

Trac [REDACTED]  
 Inv. # [REDACTED]  
 Auth # [REDACTED] RRN 001001:10

Purchase \$32.90  
 Tip \$1.94  
 Total \$37.84 ✓

(2) APPROVED-THANK YOU \$37.84

Return this copy for your records  
 Customer copy

403-299-9555  
 www.calgarylino.com

Home → 44C

515 ISBROOK ROAD SE  
CALGARY, AB T2N 1X2

TERMINAL ID:  
MERCHANT ID:  
VEHICLE ID:  
UNIT ID:  
GST ACCOUNT NO:  
TRIP NUMBER:  
PASSENGER ID:

FARE POINT:  
FARE AMOUNT:  
TAX AMOUNT:  
TIP AMOUNT:  
TOTAL : \$ 32.20 ✓

FARE POINT:

TAX AMOUNT:  
TIP AMOUNT:

TOTAL : \$ 32.20 ✓

FARE POINT:

PASSENGER NUMBER:

PASSENGER COPY

\$ 32.20

THANK YOU  
WWW.THECHECKER.COM



Westin → SSP

YELLOW CAB  
10135 21 AVENUE NW  
CALGARY AB T6A-1G2  
78C-452-3456

Term Id: 45824124782338  
Card # [REDACTED]

4121A6000000031010

APPROVED

AMOUNT CAD\$7.20  
TIP CAD\$1.08

TOTAL CAD\$8.28 ✓

Ref: [REDACTED] \$ 8.28  
Auth: [REDACTED]  
Resp: [REDACTED]  
TUE: 4090000000  
TST: F800

BOOK ON LINE AT EDMTAXI.COM  
THANK YOU FOR BEING OUR GUEST

651 100403070

Date: 2015/03/31 ✓ Time: 08:06:35  
Response: RJTH

\*\*\*CUSTO [REDACTED] \*\*\*