

AHS Board and Executive Expense Report

Name:Dr Sarah HallTitle:Assoc Chief Medical OfficerLocation:CalgaryExpenses approved during the month of August 2023

							Travel (1)					1		
Approved MMM-YY	Source Document	P	urpose	Airfar	e	Meals	Accommodati		Other Travel		otal avel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
	P-Card	Meetings									-			
Aug-23	Expense Clain Direct Bill	n Meetings Meetings							194		- 194			
Aug-25	Direct Bill	Meetings							194		194			
Total				*	4		*	¢	194	¢	194	¢.	- \$ -	¢

Total for

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the Month $ 194
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Maximum daily single meal expense claimed in the month	\$ -
Maximum daily base hotel rate claimed 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 small item technology purchases, books, etc.

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



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: <u>Providing a Standard Business Reason(s)</u>
- 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:

Name :

Dr Sarah Hall

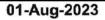
Reporting Period for the Month of : Aug-23

YES

Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
			Travel to St Paul AB for site visit with Physicians and		
			Administrators at St Therese St Paul Healthcare Centre July 25 to	Enterprise Rent a Car Canada	
1-Aug-23	Direct Billing	Car Rental	27, 2023	Co	\$193.90
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in th	e Month				\$ 193.90



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



Bill To Information		Vehicle Information				
ALBERTA HEALTH SERVICES PO BOX 1600 EDMONTON, AB - T5J 2N9		Yr/Make/Model 2021/MAZD/CX3	Unit #	License No	Beg/End/Distance 66800/67147/347	
CANADA		Rental Branch				
Rental Information Reservation Number : Driver : HALL, SARAH		CALGARY DOWNTO 129 17 AVE SE CALGARY, AB - T2G				
Pickup Date/Time : 07/25/2023 17:41 Return Date/Time : 07/27/2023 10:25	Return Branch					
Miles/kms : 347 Car Class :	Requested Class :	CALGARY DOWNTO 129 17 AVE SE CALGARY, AB - T2G				

Charge Detail				
Description	Qty	Period	Rate	Amount
TIME & DISTANCE	2	DAY	70.00	140.00
REFUELING CHARGE	25	VARIABLE	2.10	52.50
			Sub Total	192.50
VEHICLE LICENSE FEE RECOVERY	2	DAY	0.70	1.40
	Total Charges	(CAD)		193.90
Additional Information				
COST CENTER#				

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@erac.com	Tel#: +1 8773121084 AskARCanada@ehi.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.

