

AHS Board and Executive Expense Report

Name Sean Chilton

Title VP Collaborative Practice, Nursing & Health Professions

Location Lethbridge

Expenses submitted during the month of January 2017

						Travel (1)						
MMM-YY	Source Document	Purpose	Airf	are	Meals	Accommodation	Otł Tra	her ivel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Jan-17 Jan-17 Jan-17 Jan-17	P-Card Expense Claim Expense Claim Direct Billing	Meetings Meetings Relocation Meetings			285	128 121		93 299 566 188	221 299 972 188			29,714
Total			\$	- (285	\$ 249	\$	1,146	\$ 1,680	\$ -	\$ -	\$ 29,714

Total for

the Month \$ 31,394

Maximum daily single meal expense claimed in the month \$ 24 Maximum daily base hotel rate claimed in the month \$ 115 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 P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CHILTON, SEAN A	VP Collaborative Practice, Nursing & Health Professions	Lethbridge	\$ 221.34									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/5/2017	HPSP Budget mee Bilan/Michael Mc meeting in the p.I HPSP Senior Lead	Morris. 2nd m. w/the entire	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00				1			
1/5/2017	Taxi from home to Airport. In Calgary w/Dave Bilan & N & a 2nd mtg w/th leaders team	y for 1 budget mtg Iichael McMorris	AB - Other Zones	Taxi	\$ 44.85				1			
1/6/2017	Fuel for rental car from Calgary to Le for a mtg with PC Wateron councille	ethbridge. In Leth K docs &Town of	AB - Other Zones	Fuel	\$ 18.63			Receipt was misplaced - Attestation provided	1			
1/6/2017	Following 2 mtgs overnight in Letht with PCK docs and Waterton Council replaced PCK doc	oridge for 2 mtgs d Town of llor. Budget mtg	AB - Other Zones	Accommodati ons	\$ 127.86				1			
1/9/2017	Parking @ SPT for meeting with Dav		AB - Other Zones	Parking - Lot or Parkade	\$ 15.00				1			
Approver(s)	for the claim	Approval Status		Approval								

Approver(s) for the claim	••	Approval Date
YIU, VERNA	Approve	6-Feb-17

#2 Taxi from home to airport.

HIRPORT THE SERVICE 4508 tol ST. (7806907070) EDMONTON ñБ

Budget w/ DaveB+Michael emmis.

CARD CARD TYPE MHSTERCARD 2017/01/05 DATE 5097 06:17:01 THE

RECEIPT NUMBER

PURCHASE

HIQUHT TIP

\$39.50 \$5.88

TOTAL

\$44.85

flesterCard



APPROUED

HLITH# THAM YOU

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

CARDHOLDER COPY

GST 84380 2935 RT0001

Southland Park IV Southport Tower

cense Plate Numb

Expiration Date/Time

06, 2017

Purchase Date/Time: 09:53am Jan 05, 2017 Total Due: \$15.00 Rate: \$15.00 - 24 Hours Total Paid: \$15,00 Payment Type: Card Ticke: #× 5/N # Setting Mach Name:

lasterCard

DO NOT PLACE ON DASH

Auth #:

RECEIPT Southland Park IV

Southport Tower



Expiration Date/Time

JAN 10, 2017

Purchase Date/Time: 10:07am Jan 09, 2017 Total Bue: \$15,00 Rate: \$15.00 - 24 Hours Total Paid: \$15.0 Payment Type: Card licket # S/N #-Setting.

HasterCard DO NOT PLACE ON DASH

Mach Ñan

AHS P-Card Administration

RE: Written Attestation, Missing Receipt

Please accept this written attestation for a fuel expense in the amount of \$18.63 incurred at a Gas King Station in Lethbridge on January 6, 2017.

This was a fuel expense in a rental car for travel from Calgary to Lethbridge. Sean was in Calgary on January 5, 2017 for a team meeting with his new portfolio. Then in Lethbridge on January 6, 2017 to attend a meeting with Pincher Creek physicians (which was subsequently cancelled) and a second meeting with Town of Waterton Councilor, Jody Thaell which went ahead as planned.

This expense has not been claimed previously and the receipt slip was lost.

Kind Regards,

Sean Chilton

VP Collaborative Practice, Nursing and Health Professions

SC/wm

#4 Overnight in Lethbridge following 2 mtp. in Calgany. In Leth to meet w/ PCK does + Town

FAIRFIELD INN & SUITES TAIRFIELD Marriott.



Fairfield Inn & Suites Lethbridge 4081 2nd Avenue South Lethbridge Alberta T1₁1z2 587 425.0388

S. Chilton

Room⁻

Room Type: KING

Number of Guests: 1

Rate: \$115.00

Clerk:

Arrive: 05Jan17	Time: 09:52PM	Depart: 06Jan17	Time:	Folio Numbe	
Date	Description		Charges	Credits	
05Jan17 05Jan17 05Jan17 05Jan17 06Jan17	Room Charge Convention and Tou City Tax Gst Master Card Card #: Amount: 127.86 This card was elec			127.86	
		Bala	nce: 0.00		

Rewards Account # Your Rewards points/miles earned on your eligible earnings will be credited to your account. Check your Rewards Account Statement or your online Statement for updated activity.

Gst#

Get all your hotel bills by email by updating your Rewards Preferences. Or, ask the Front Desk to email your bill for this stay. See "Internet Privacy Statement" on Marriott.com.

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title		Expense Claim Total								
SEAN A	VP Collaborative Practice, Nursing & Health Professions	Lethbridge	\$ 298.96								
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	# of days	# of Attendees	Attendee Name(s)	Trip Distance
	Transition meeting for Dave Bilan. Sean offici Dave as VP, Collab Pra	ally replaces		Mileage-Other	\$ 298.96			1			592
Approver(s	s) for the claim	Approval Sta		Approval Date							
YIU, VERNA	4	Approve		13-Jan-17							

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total										
	VP Collaborative Practice, Nursing & Health Professions	Lethbridge	\$ 30,685.51										
Expense Date	Business reaso	on	Expense Location	Expense Type	Amo	ount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
2/11/2016	Moving Expens	ses	AB - Other Zones	Relocation	\$	485.10	Lethbridge	Edmonton	Mileage - Pre location House hunting: 490km each way x 3 weekends (2940 km) x 0.165	1			
11/11/2016	Moving Expens	se	AB - Other Zones	Meals Per Diem	\$	237.50			3 weekends house hunting Bfast -5 * 10.50 = \$52.50 Lunch - 5 * 13.00 = \$65.00 Dinner - 5 * 24.00 = \$120.00	5			
11/11/2016	Moving Expens	se	AB - Other Zones	Accommodation Allowance	\$	100.75			House hunting 3 weekend trips	5			
12/16/2016	Moving Expens	se	AB - Other Zones	Meals Per Diem	\$	47.50			Relocation Weekend Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1			
12/16/2016	Moving Expens	ses	AB - Other Zones	Relocation	\$	735.00			Incidental no receipts required as per relocation policy	1			
12/16/2016	Moving Expens	se	AB - Other Zones	Accommodation Allowance	\$	20.15			Accommodation night of move.	1			
12/16/2016	Moving Expens	ses	AB - Other Zones	Relocation	\$	80.85	Lethbridge	Edmonton	Mileage for vehicle one.	1		1	1

\$ 8,347.50

189.00

12/17/2016

12/20/2016

Moving Expenses

Moving Expenses

AB - Other Zones Relocation

Relocation

AB - Other Zones

490km x \$0.165/km as per

Moving Company: Lethbridge

(loading/unloading and

relocation policy

to Edmonton

Trailer rental

transport)

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CHILTON, SEAN	VP	Lethbridge	\$ 30,685.51									
Α	Collaborative											
	Practice,											
	Nursing &											
	Health											
	Professions											
Expense Date	Business reason	n	Expense Location	on Expense Type	Amount	From	То	Justification	# of	# of	Attendee	Trip
						Location	Location		days	Attendees	Name(s)	Distance
12/20/2016	Moving Expens	e	AB - Other Zone	es Relocation	\$ 18,900.00			Realtor fees from sale of house	1			
								in Lethbridge				
1/24/2017	Moving Expens	<u>es</u>	AB - Other Zone	es Relocation	\$ 1,542.16			Legal Fees:	1	+		
1,2.,251,	TATOMING EXPENS		7.5 Strict Zone		7 1,542.10			Legar rees.	Ī			
Approver(s) for	the claim	Approval Sta	atus	Approval	1	1					1	

Approver(s) for the claim	••	Approval Date
YIU, VERNA	Approve	6-Feb-17



Relocation Assistance Expense Claim Summary

A completed copy of this Relocation Assistance Expense Claim Summary and all supporting receipts and documentation must be submitted to Accounts Payable in order for payment to be processed. The maximum that can be claimed is the amount of relocation assistance offered by your manager.

Francisco de la Fila		Image Control of the
Employee Name (Last, First)		Employee Number
Chilton, Sean		
Department Name	Position Title	Employee FTE
CEO Office Admin	Vice President Collaborative Practice	.
Pre-Location (House handing): 2 2		TO THE PERSON NUMBERS OF STREET STREET, A STREET STREET
		Control of the Contro
Meaks Meaks	\$237.50	
Accommodations	\$100.75	
Transportation	\$485.10	
Total Pre-Location	\$823.36	
Moosehold		ran i Maragrafia (m. 1920). Pari dan dan baran arang dan dan dan dari
		rovatelelių erapela saudomarbų y
Logal fees	\$1,542.GO	Aldid cara piew we sitementa detsia
Real estate fees	\$18,900.00	
	#0 FB0 FB	
Household effects & one vehicle	\$8,536.50	
Mobile or modular homa	\$0.00	\$246 STATA (USA 1856 SEA) PERUNASAN
W-4-144	****	
Total Household	\$28,978.50	
CONTRACTOR	1	
Meals	\$47.50	
Subsistence allowance (Spouse or Parlner)	\$0.00	Civilização (1866) a Calcilidad de Calcilida
Subsidice aborrance (Sportse of Faritie)	30.00	
Subsistence allowance (Dependant)	\$0.00	
Transportation	\$80.85	
Tidi(apo) tation	. 400.00	
Total Relocation	\$128,36	
Total Temporary Accommodation	\$20.15	ે પ્રત્યા ભરૂતમાં ત્રું કે કું તાલ તાલું કું પ્રત્યા તે તે તે તે જાણ માટે છું છે. જે તે તે કે
Total Incidental	\$735.00	
Discretionary	The state of the s	
Mortgage penalty	to oo	
	\$0,00	
Tenancy lease penalty	\$0.00	
Interim financing/interest charges	\$0.00	
Total Temporary Accommodations, Incidental & Discretionary	\$0.00	
Total Excenses	\$30,686,35	
	233,000,00	
The same of the sa		TO be the conservation of the constitution of the first of the constitution of the conservation of the existing
I confirm that these expenses are accurate.		
Employee Signature		Date (yyyy-Mon-dd)
5//////		l '''' - '
I de la	·	2017 Feb OZ.
Militaria de la compresión para la compresión de la compr	oonemaa kaagaan ka	
	1/.10	
I have reviewed this Relocation Assistance Expense Cleam Summary ex	penses and approperture annount S	for reimbursement.
Manager's Name	Managers Gignature//	Date (yyyy Mon-dd)
Dr-Verna Tu		tel 7, 2017
		

I attest that the expenses incurred in relation to my move from Lethbridge, Alberta to Edmonton, Alberta to begin my new role as Vice President of Collaborative Practice, Nursing and Health Professions are cost effective and in compliance with the directive and applicable Alberta Health Services policies

Sean Chifton

1/2/2017

MENDIN MONTH 14712 90 AVE Affiliate of Mover's Alliance Management **EDMONTON AB** TSR 4V5 BILL OF LADING NOT NEGOTIABLE 780-895-9023 12-10 & 12-17-2016 Move Date Đέ in-tee-ri-ty SALE MOVERS __ 2 Man 3 Man - Extra ABO Crew Crew Crew SUNDER OF GOVERNMENT TO-780-995-9023 Ватий в 12/47:福 Sean Chillon Consignee Other Contac APPR CODE Trane: 1 P/U Addres Phone/Cell Married CD Edmonton AB (Full address to be determined) Destination **Notes** AMOUNT \$8,347.50 APPROVED PAYMENT TERMS Honorty Hadas Services shall be at the sale of the Other . The total cost will reliect actual work line and may o 1 has not a second to a sequent added to the work lines to cover lines incurred knowling to and from the work site. No personal chaptes will be accepted involcing privileges to be be made by cost, debt or credit card at time of delivery. (Credit and Debt card and card holder must be on site and available for imprint.) Chiecola memorphic sector is the main fightly in the model is the light them affiles THANK YOU : MERCE thru to Stop time: _____ = Work hours: ____ Less Break time MERCHANT COPY __X \$ = Biflable Work Hours ______ + Travel time ____ = Total Billable Hours + Other costs 37,986.96 + Packing Supplies + Fuel Surcharge Flot 45 x KM = = Subtotal s 7, 950.5 + GST \$ 397 54 cc 2% \$ = Total Cost \$ 8, 347. SO Method of payment: O Cash VISA O Debit Invoice Please Read Carefully: Time charges are billed to and from the job site (see travel time), charges will be calculated in 15 - minute increments. The camer's liability in the event of loss or damage is limited by the Terms & Conditions of Carriage shown here and on the reverse side of this agreement. The contract for the parage of the goods listed in this bill of lading as, by regulation passed under the Traffic Safety Act, documed to contain and be subject to conditions set out in the regulation. I have read and accept all of the terms & conditions of this bill of lading ANO release my cargo to \$1,32 per kilogram per article ALL CLAIMSTARE SUBJECT TO A CARGO DEDUCTIBLE, NO CLAIMS WILL BE RECOGNIZED UNLESS REPORTED TO THE CARRIER IN WRITING WITHIN 7 DAYS Spent Letton Service was complited and shipment was received in apparent good order. I accept charges as shown above. IN Treadmill pieces of MOYERS ALHANCE ACCREDITED The second secon

www.integrity-movers.com

BUSINESS

CUSTOMER COPY Flaman Rentals-Lethbridge FLAMAN SALES 16 Broxburn Blvd. INVOICE 16 BROXBURN BLVD. Lethbridge, AB LETHBRIDGE T1J 4P4 Agreement: Bus: 403-317-7200 Fax: 403-327-7731 CARD CARD TY MASTERCARD DATE 2016/12/20 Driver: TIME 0505 08:57:26 INVOICE # Sean Chilton RECEIPT NUMBER PURCHASE Ph1: TOTAL Ph2: \$189.00 Employee ID: AA IOURS WITH A LIMIT OF 10 HOURS OF USAGE. UNITS WITH ACRE METERS WILL BE CHARGED OUT ON A PER ACRE BASIS WITH A MINIMUM DAILY CHARGE. IES WILL APPLY TO ALL EQUIPMENT RETURNED IN UNACCEPTABLE CONDITION GST Amount Rate Type Rate \$180.00 Day \$60.00 Trailtech . Plate: .016 8:55A Return Date December 17, 2016 8:00AM Boss. Kelsey. MAKE SURE YOU CO \$180.00 SUB TOTAL Amount Payment(s) \$189.00 Mastercard GST R101872802 \$9.00 **GST** \$189.00 TOTAL 189.00 TOTAL

I understand and agree to comply with the rules and conditions of the rental agreement printed on the bottom of this page.

RENTER Name (Please Print):

RENTER Signature:

12/20 /16

RENTAL AGREEMENT

This is a contract of renting only and not of sale. The Renter agrees that this rental equipment remains the property of the Owner.

The Renter agrees that he has examined this equipment and found it to be in good condition and will return it in as good condition as when he received it, ordinary wear and tear expected.

The Renter agrees that he will promptly notify the Owner when equipment is not functioning normally.

The Renter agrees to pay all rental charges promptly. All charges are based on the time the equipment is in possession of Renter whether in use or not. Daily rental rates are based on a maximum of 10 hours use per day, weekly rates are based in a maximum of 60 hours of use.

If the renter fails to return the rental equipment at the agreed time, or fails to abide by any other terms of this contract, the Owner may take possession of

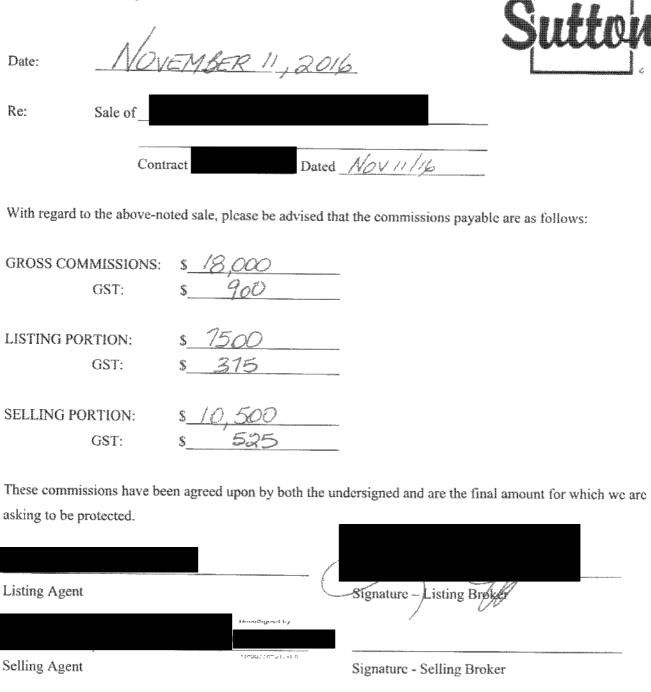
the rental equipment wherever it may be located and the Renter shall be responsible for all costs and damages incurred by the Owner as a result of taking possession of the rental equipment.

The Renter and the successors and assigns release and forever discharge the Owner and successors and assigns against all suits, claims, actions, or demands of any nature of kind which the Owner may become liable for by any reason of any breach or non-performance by the renter of any term hereof, expressed or implied, or by reason for any injury occasioned to or suffered by any person or any property resulting from any wrongfull act, neglect or default on the part of the Renter or any of the Renter's employees, agents or servants arising out of the use and possesion by the Renter of the rental agreement.

Customer is responsible for insurance of rental unit, and it's load/contents.

Seller

Commission Agreement Amendment

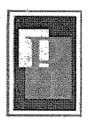


Seller

Legal Assistant: Gloria Our File: email: gloria@pennerlaw.ca December 20, 2016 Sutton Group Lethbridge E. A. Janes 1010 - 3 Ave. South Lethbridge, Alberta T1J 0J4 ATTN: Dear Madam: Sale -Re: We enclose herein our trust cheque in the sum of \$2,875.00 which represents the commission payable in this matter. We trust you will find the enclosed satisfactory and confirm that it would be in order for you to release the deposit of \$5,000.00 presently being held in your trust account. Yours truly, **PENNER LAW** Per: RGP/gka Enclosure

Our File:		Legal Assistant: Gloria email: gloria@pennerlaw.ca
December 20, 2016		
Re/Max Real Estate - Lethbridge #110, 376 - 1 Ave. South Lethbridge, Alberta T1J 0A5	Delivered	
ATTN:		
Dear Madam:		
Re: Sale -		
We enclose herein our trust cheque in the sum of \$11, payable in this matter.	025.00 which rep	presents the commission
We trust the enclosed meets with your approval.		
Yours truly,		
PENNER LAW		
Per:		
RGP/gka		
Enclosure		

* •



DATE

PENNER LAW ROGER G. PENNER PROFESSIONAL CORPORATION

2, 201 - 2 Avenue South Lethbridge, Alberta, T1J 0B7 Phone: (403)320-5350 Fax: (403)328-7217

Email: roger@pennerlaw.ca

January 24,2017

Inv #: File #:

RE: Purchase from Qualico Developments

DESCRIPTION

Jan-23-17 To receipt of Real Estate Purchase Contract;

To receipt of correspondence from Solicitor for the Vendor:

To telephone call to clients;

To correspondence to Solicitor for the Vendor;

To receipt of instructions from Mortgage Company;

To ordering all necessary searches;

To ordering tax certificate;

To ordering Real Property Report, Compliance and Zoning Letters (if applicable);

Edmonton, AB)

To receipt and review of correspondence from Solicitor for the Vendor;

To completing Affidavit of Transferee;

To preparation of Transfer Back, Direction to Pay and Mortgage documentation;

To telephone call to clients:

To attendance upon clients for execution of documents;

To receipt of cash difference to close, if applicable, from client;

To attending to registration of documents at Land Titles Office;

To reporting to Mortgage Company;

To receipt of Mortgage Funds:

To forwarding cash to close to Solicitor for Vendor;

To preparation of final report to client and the Mortgage Company; To advising appropriate property tax authority of change in ownership;

To our regular fee herein;\$1,100.00 Less: courtesy discount<\$100.00> FEE CHARGED:\$1,000.00

Total Fees \$1,000.00

OTHER CHARGES

GST

Fax/Scanner Expense	\$4.50
Photocopying	\$10.00
Total Other Charges	\$14.50

\$50.73

Postage 7.65

Dec-19-16 pick up interim/bridge financing funds at Westside Branch of BMO* 10.00

pick up mortgage funds at BMO Downtown Branch* 10.00

		2.2
1	nvoice	2£*
1.	\mathbf{H}	77.

Jan-23-17	Delivery - pick up at BMO, West Lethbridge	10.00	
	Delivery - pick up at BMO, Downtown Lethbridge	10.00	
	Tax certificate from the City of Edmonton	38.00	
	Document Registration(s) - Land Titles *	362.00	
	Title Search (2 searches)*	20.00	
	Debtor Name Search *	6.00	
	Totals	\$473.65	\$0.00
	GST on Disbursements	\$3.28	
	Total Fees, Disbursements & GST		\$1,542.16
	Less Trust Fund Transfer		\$1,542.16
	Balance of Fees, Disbursements & GST	_	\$0.00
	Previous Balance		\$0.00
	Previous Payments		\$0.00
/	Balance Due Now	-	\$0.00

Roger G. Renner Professional Corporation

Per:

E. & O.E.

Total Tax:

\$54.01

GST#:

87382 2720 RT0001

* tax-exempt



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 :	Sean Chilton	Reporting Period for the	Month of: Jan-17	

VFS

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
4-Jan-2017	Direct Billing	Car Rental	One-way rental car for Sean, Calgary to Lethbridge, evening of January 5, 2017. In Calgary for 2 meetings: Budget mtg w/Dave Bilan and Michael McMorris and a 2nd meeting with the HPSP senior leaders team in the afternoon. Then onward to Lethbridge the evening of January 5 for mtgs. on Friday, January 6 for SZ Budget meeting @ 0830 hours Originally going to meet with the PCK docs but for Sean the Budget meeting took priority.	Choose from Drop-down List	188.26
	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 the Month				\$ 188.26	

dneetbilled.



Federal GST#: 889365821

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



11-Jan-2017

Bill To Information

ALBERTA HEALTH SERVICES

PO BOX 1600

EDMONTON, AB - T5T2N9

CANADA

Rental Information

Reservation Number: Driver: CHILTON, SEAN

Pickup Date/Time: 01/05/2017 09:05 Return Date/Time: 01/06/2017 09:00

Miles/kms: 1696

Car Class: ICAR

Requested Class: ICAR

Vehicle Information Yr/Make/Model Unit # License No Beg/End/Distance 2016/TOYO/CORO 24565/26261/1696

Kental Branch

CALGARY ARPT 2000 AIRPORT ROAD NE CALGARY, AB - T2E6W5

Return Branch

LETHBRIDGE

1106 - 3 AVENUE SOUTH LETHBRIDGE, AB-T1J0J6

Charge Detail				
Description TIME & DISTANCE ONE WAY A	Qty 1 1	P eriod DAY RENTAL	Rate 40.00 117.05	Amount 40.00 117.05
		Sub	Total	157.05
AIRPORT FACILITY CHARGE CONCESSION FEE RECOVERY VEHICLE LICENSE FEE RECOVERY	1 16 1	DAY PERCENT DAY	6.00 15.61 0.60	6.00 24.61 0.60

Total Charges (CAD)

188.26

Additional Information

Ext BilRef # 1

COST CENTER#

Can rental @ Calgary airport for 2 t mta w

this is a one wou

Tel#

Remit Payment in CAD to

ENTERPRISE RENT A CAR CANADA COMP. 709 MILNER AVE

SCARBOROUGH, ON M1B6B6

For Billing Inquiries

AskARCanada@ehi.com

Payment Terms

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.