

Official Administrator and Executive Expense Report

Name Sharon Lehr
Title Chief Program Officer Operational Benchmarking & Efficiency
Location Edmonton
 Expenses submitted during the month of October 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)
Oct-15	Expense Claim	Meetings		106	615	370	1,091			
Oct-15	Direct Billing	Meetings	326				326			
Total			\$ 326	\$ 106	\$ 615	\$ 370	\$ 1,417	\$ -	\$ -	\$ -

Total for the Month \$ 1,417

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 199
 Non economy air travel in the month \$ -

1) Travel expenses

Includes local and out of province/country travel expenses. Other travel includes items such as taxis, parking mileage, car rental and other expenses related to travel.

2) Professional Development

Includes conference, seminar and course registration fees and material

3) Hosting and Hospitality expenses

Hospitality and Hosting expenses may be incurred to advance AHS' mission, vision and values. For example, may include working lunches with staff and prospective employees meetings with government officials, dignitaries, public interest groups, donors other public or private organizations.

4) Other

Other expenses include expenses incurred in the normal course of business that are required for work purposes. May include small item technology purchases, books, etc.

Car allowance 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
LEHR, SHARON	Chief Program Officer, Operational Benchmarking & Efficiency	Edmonton	1,090.66

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/1/2015	Benchmarking Meetings	AB - Local	Parking - Lot or Parkade	2.50			Drove from SSP to Sturgeon Hospital (return) to attend Benchmarking Presentation for Community and Rural Hospitals	1			
10/1/2015	Benchmarking Presentations		Mileage	19.76	Seventh Street Plaza	Sturgeon Hospital	Drove from SSP to Sturgeon Hospital for Benchmarking Presentations to Community and Rural Hospitals	1			38
10/27/2015	Benchmarking Meetings	AB - Other Zones	Taxi	41.10			Taxi from Calgary Airport to Hampton Inn to attend Benchmarking meetings	1			
10/27/2015	Benchmarking Meetings	AB - Other Zones	Accommodations	391.42			Accommodations for two nights - attend Benchmarking meetings at AB Children's Hospital and South Health Campus	1			
10/27/2015	Benchmarking Meetings	AB - Local	Taxi	72.00			Taxi to Edmonton Airport for Flight to Calgary to attend Benchmarking meetings	1			
10/28/2015	Benchmarking Meetings	AB - Other Zones	Taxi	10.00			Taxi from Hampton Inn to Alberta Children's Hospital to attend Benchmarking meetings	1			
10/28/2015	Benchmarking Meetings in Calgary		Meals Per Diem	106.25			Meals while in Calgary to attend Benchmarking meetings. Lunch/Dinner for 28/29/30 October 2015 & B/F for 30 October 2015	2			
10/28/2015	Benchmarking meetings	AB - Other	Taxi	68.00			Taxi from South Health Campus to Hampton Inn	1			
10/28/2015	Benchmarking Meetings	AB - Other Zones	Taxi	70.61			Taxi from Alberta Children's Hospital to South Health Campus - attend Benchmarking Meetings	1			
10/29/2015	Benchmarking Meetings	AB - Other Zones	Taxi	25.20			Taxi from Calgary Lab Services to Fairmont Palliser Hotel	1			
10/29/2015	Benchmarking Meetings	AB - Other Zones	Accommodations	223.42			Accommodations for one night - attend Benchmarking meetings at Foothills Medical Centre & Calgary Lab Services	1			
10/30/2015	Benchmarking Meetings	AB - Other Zones	Taxi	35.00			Taxi from Southport Office to Fairmont Palliser Hotel	1			
10/30/2015	Benchmarking Meetings	AB - Other Zones	Taxi	25.40			Taxi from Fairmont Palliser Hotel to Southport - Attend Benchmarking meetings	1			
Approver(s) for the claim		Approval Status		Approval Date							
KAMINSKI, VICTORIA		Approve		2-Dec-15							

LEAVE ON DASH - THIS SIDE UP

DETACH RECEIPT FROM TICKET

EXPIRATION DATE

EXPIRATION TIME

DATE ISSUED

TIME ISSUED

AMOUNT PAID

01/10/15 11:57 AM

01/10/15 10:57 AM \$ 2.50

AMOUNT PAID

\$ 2.50 76530000 10:57 AM

CREDIT CARD NUMBER

CC

Alberta Health Services
CHARGES ARE FOR USE OF PARKING SPACE ONLY. ALBERTA
HEALTH SERVICES ENDEAVOURS TO PROTECT THE PROPERTY
OF ITS PATRONS BUT WILL NOT BE RESPONSIBLE FOR LOSS
OR DAMAGE TO CAR OR CONTENTS.

NON TRANSFERABLE

Alberta Health Services

RECEIPT

(Oct. 1, 2015- \$2.50)

Parking: Drove from Seventh Street Plaza to
Sturgeon Hospital to attend Benchmarking
presentation for Community and Rural Hospitals

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

DATE: 28.11.2015
PICK-UP TIME: 20:36
DROP-OFF TIME: 20:58
TRIP ID: 0
LOCATION: 073000-45024103707
CAR NUMBER: 0584
DRIVER: 107101
CARD TYPE: TISSA
CARD: [REDACTED]
EXPIRY: [REDACTED]
AUTH: [REDACTED]

FARE (\$): 41.10
EXTRA (\$): 0.00
SUBTTL (\$): 41.10

(Oct. 27, 2015 - \$41.10)

Taxi from Calgary Airport to Hampton Inn
Attend Benchmarking meetings

TIP (\$): _____

TOTAL (\$): _____

SIGNATURE: _____

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

CUSTOMER'S COPY

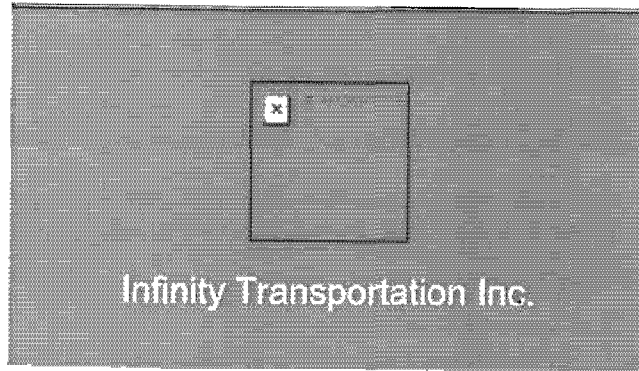
Sharon Lehr

From: outlook_f2bbe5513535e0bf@outlook.com on behalf of Infinity Transportation Inc
<infinitytransportationinc@hotmail.com>
Sent: Tuesday, October 27, 2015 8:16 PM
To: Sharon Lehr
Subject: Fwd: Receipt from Infinity Transportation Inc.

Sent using CloudMagic Email

-----Forwarded message-----

From: Infinity Transportation Inc. via Square <receipts@messaging.squareup.com>
Date: Tue, Oct 27, 2015 at 6:30 PM
Subject: Fwd: Receipt from Infinity Transportation Inc.
To: <infinitytransportationinc@hotmail.com>



(Oct. 27, 2015 - \$72.00)
Taxi to Edmonton Airport for Flight to
Calgary-Attend: Benchmarking meetings at
AB Children's Hospital, South Health Campus,
Foothills Medical Centre, Southport & Calgary
Lab Services

\$ **72.00**

Custom Amount	\$72.00
Total	\$72.00

Infinity Transportation Inc.
587-989-4007

Cash
652

27/10/2015, 18:31





Hampton Inn & Suites by Hilton - Calgary University N.W.

2231 Banff Trail NW • Calgary, AB T2M 4L2
Phone (403) 289-9800 • Fax (403) 289-9200
www.hamptoncalgary.com

LEHR, SHARON

name
address

room number: [REDACTED]
arrival date: 10/27/2015 9:00:00 PM
departure date: 10/29/2015
adult/child: [REDACTED]
room rate: [REDACTED]

If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.

CANADA

Rate Plan:
HH #
AL:
Car:

Confirmation Number [REDACTED]

10/29/2015

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. I have accepted delivery of the National Post. If refused, a \$1.00 (Mon-Fri) & \$2.00 (Sat) credit will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation assistance due to a physical disability. Please indicate yes by checking here:

signature:

date	reference	description	amount
10/27/2015	[REDACTED]	GUEST ROOM	\$179.55
10/27/2015	[REDACTED]	ROOM TAX	\$7.18
10/27/2015	[REDACTED]	GST 129123600 RT 0004	\$8.98
10/28/2015	[REDACTED]	GUEST ROOM	\$179.55
10/28/2015	[REDACTED]	ROOM TAX	\$7.18
10/28/2015	[REDACTED]	GST 129123600 RT 0004	\$8.98
10/29/2015	[REDACTED]	[REDACTED]	(\$391.42)
			\$0.00

(Oct. 27 & 28, 2015 - \$391.42)
Accommodations for two nights: Attend Benchmarking meetings at AB Childrens Hospital and South Health Campus

for reservations call 1.800.hampton or visit us online at hampton.com

thanks.

account no. [REDACTED]	date of charge 10/29/2015	folio/check no. [REDACTED]
card member name LEHR, SHARON	authorization [REDACTED]	initial
establishment no. and location establishment agrees to transmit to card holder for payment	purchases & services	
	taxes	
	tips & misc.	
signature of card member X	total amount	-391.42

Thank You for Choosing
Do not Drink & Drive Call Us
403-777-1111



Driver: [Signature] Car # [Redacted]
Date Oct 28-15 Amount \$ \$ 10.00
From: Hampton INN
To: 1403-29 St NW
GST Included # 896252616

416 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

TERMINAL ID: 314-633-835
MERCHANT ID: 432765FD
VEHICLE ID: 1078
DRIVER ID: 7627
GST ACCOUNT #: 832844623
TRIP NUMBER: 5801053
PASSENGERS: 1

START: 12:20 END: 12:48
DISTANCE: 341.80 RATE: 1

FARE AMOUNT: \$ 58.48

TAX AMOUNT: \$ 2.92
TIP AMOUNT: \$ 9.21

TOTAL : \$ 70.61

VISA SALE :

APPROVAL REF #

PASSENGER COPY

THANK YOU
(403)295 9999
WWW.THECHECKERGROUP.COM



(Oct. 28, 2015 - \$10.00)
Taxi from Hampton Inn to AB Children's Hosp.

(Oct. 28, 2015 - \$70.61)
Taxi from Alberta Children's Hospital to South
Health Campus: Attend Benchmarking meetings

CALGARY, AB T2A 1X2

Merchant ID: 4327b51N
Driver ID: 10188
Record Num.: 0002

ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111

Sale

Application Label: visa Credit

AID: A0000000031010

VISA Entry Method: Chip

Amount: \$ 63.00
Tip: \$ 5.00

Total: CAD\$ 68.00

2615/10/28 16:23:28

Resp Code: 00

TVR: 000000000
TS1: FB00

Inv#: [REDACTED] Appr Code: [REDACTED]

Apprvd: Online Batch#: [REDACTED]

TRN Ref #: [REDACTED]

Validation Code: [REDACTED]

SALE

MID: 4189233
TID: DH189233 REF#: [REDACTED]
Batch: [REDACTED]
10/29/15 16:19:05
CVC: Y

APPR CODE: [REDACTED]
VISA [REDACTED]

AMOUNT \$21.20
TIP \$4.00
TOTAL \$25.20

00 - APPROVED - 001

Visa Credit
AID: A0000000031010
TVR: 00 00 00 00 00
TS1: FB 00

THANK YOU

CUSTOMER COPY

DESCRIPTION: _____

THANK YOU
(403)299-9999
WWW.THECHECKERGROUP.COM

CARDHOLDER COPY

RETAIN THIS COPY FOR STATEMENT
VERIFICATION

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

TERMINAL ID: 316 002 076
MERCHANT ID: 4327b51N
VEHICLE ID: 0000
DRIVER ID: 10188
CUST ACCOUNT #: 8412905705
TRIP NUMBER: 5003413
PASSENGERS: 1

10-28-2015
START: 15:45
DISTANCE: 334.00
END: 16:22
RATE: 1

FARE AMOUNT \$ 68.00

TAX AMOUNT: \$ 0.00
TIP AMOUNT: \$ 5.00

TOTAL = \$ 73.00

VISA SALE: [REDACTED]
APPROVAL NUMBER: [REDACTED]

PASSENGER: [REDACTED]

(Oct. 29, 2015 – \$25.20) Taxi from Calgary
Lab Services to Fairmont Palliser Hotel
Attend: Benchmarking meetings Foothills
Medical Centre & Calgary Lab Services

(Oct. 28, 2015 – \$68.00) Taxi from South
Health Campus to Hampton Inn

THANK YOU
(403)299-9999
WWW.THECHECKERGROUP.COM



133 9th Avenue SW,
 Calgary, AB, Canada T2P 2M3
 T (403) 262-1234 F (403) 260-1260
 G.S.T. Registration # 846543619

Room : [Redacted]
 Folio # : [Redacted]
 Cashier # : [Redacted]
 Page # : 1 of 1

*
Ms Sharon Lehr
 [Redacted]

Arrival : 10-29-15
 Departure : 11-01-15
Fairmont President's Club
 [Redacted]

Canada

Date	Description	Additional Information	Charges	Credits
10-29-15	Room Charge		199.00	
10-29-15	Calgary Destination Marketing F		5.97	
10-29-15	Alberta Tourism Levy (4%)		8.20	
10-29-15	Room GST		10.25	
11-01-15	Visa	[Redacted]		223.42
Total			223.42	223.42
Balance Due			0.00	

GST Summary

Room	10.25
F&B	0.00
Other	0.00
Total	10.25

Thank you for choosing Fairmont Hotels & Resorts.
 To provide feedback about your stay, please contact Dan McGowan, General Manager, at Dan.McGowan@fairmont.com.
 We also invite you to share memories of your experience on our community forum - visit www.everyonesanoriginal.com.

Merci d'avoir choisi Hôtels Fairmont.
 Vous pouvez nous faire part de vos commentaires au sujet de votre séjour en écrivant au Directeur général, Dan McGowan à Dan.McGowan@fairmont.com.
 Nous vous invitons également à partager vos observations ou photos sur notre forum communautaire www.everyonesnoriginal.com (anglais seulement).

(Oct. 29, 2015 - \$223.42) Accommodation for one night. Attend: Benchmarking meetings at Foothills Medical Centre & Calgary Lab Services

For information or reservations, visit us at www.fairmont.com or call Fairmont Hotels & Resorts from: United States or Canada 1 800 441 1414
 Pour information et réservations visitez notre web au www.fairmont.com ou téléphoner au Hôtels Fairmont de: États-Unis ou Canada 1 800 441 1414

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of or the full amount of these charges. Overdue balance subject to a surcharge at the rate of 1.5% per month after one month. (18.00% per annum.)
 I have accepted delivery of The Globe and Mail. Had I refused, I would have been eligible for a \$1.00 (Mon-Fri) and \$2.00 (Sat.) credit to my account. (At participating hotels.)

Je me porte personnellement responsable du règlement total de cette note au cas où la compagnie, l'association ou son représentant désigné en refuserait le paiement. Les comptes en souffrance sont sujets à un intérêt de 1.5% par mois après un mois. (18,00% par année)
 J'ai accepté la livraison du journal The Globe and Mail. Si j'avais refusé, j'aurais pu obtenir un crédit à mon compte de 1,00\$ par jour (du Lundi au Vendredi) et de 2,00\$ le Samedi. (Dans les hôtels participants.)

Thank you for choosing to stay with Fairmont Hotels & Resorts
Merci d'avoir choisi les Hôtels Fairmont

TRANSACTION RECEIPT =

HELLIA CAB LTD.
TAXI ON LINE AT
HELLIACAB.CA
877 278 9999

CARD TYPE: CREDIT CARD
CARD NUMBER:

[REDACTED]

CARD TYPE VISA
DATE/TIME
10/30/15 08:50:23

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

FUEL \$ 21.33
TIP \$ 000.00
TAXES \$ 000.00
TOTAL \$ 1.07

CREDIT TAXI: \$ 22.40
TIP \$ 3.00
TOTAL \$ 25.40

TOTAL \$ 25.40

SIGNATURE

(Oct. 30, 2015 - \$25.40)-Taxi from Fairmont
Palliser Hotel to Southport
Attend: Benchmarking meetings

316 BRINDLEY ROAD SE
CALGARY AB T2A 1Z7

08:50:23 514.051500
08:50:23 4.290500
08:50:23 0.000000
08:50:23 0.000000
08:50:23 0.000000
08:50:23 0.000000
08:50:23 0.000000
08:50:23 0.000000
08:50:23 0.000000

08:50:23 [REDACTED]
08:50:23 [REDACTED]
08:50:23 [REDACTED]

Taxi amount: 28.50 [REDACTED]

Tax amount: 1.43 3
Tip amount: 5.00

TOTAL \$ 35.00 3

[REDACTED]
[REDACTED]
[REDACTED]

THANK YOU
877 278 9999
WWW.HELLIACAB.COM



(Oct. 30, 2015-\$35.00)-Taxi from Southport
to Fairmont Palliser Hotel

Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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 : Sharon Lehr	Reporting Period for the Month of : Oct-15
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DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
28-Oct-15	Direct Billing	Airline Ticket	Flight - Edmonton to Calgary and return Nov. 3 (Invoice Number 32186) Attended Benchmarking Meetings and Executive Leadership Team Retreat.	Marlin Travel	325.88
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in the Month					\$ 325.88

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch:

Agent:

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number:

Date:

October 8, 2015

Page:

Our Reference:

INVOICE

For

MS SHARON LEHR

Aç

Wednesday, October 28, 2015

 Air

AIR CANADA

From: EDMONTON INTL AB

To: CALGARY AB

Stops: 0 Arrival: 28Oct15

AIR CANADA E

SEAT 6C - LEHR/SHARON MS

TICKET NUMBER

Flight: 8137 G CLASS
08:00 AM Equipment: D8 (300 SERIES)
08:52 AM

Mile(s) Flown: 163

Tuesday, November 3, 2015

 Air

AIR CANADA

From: CALGARY AB

To: EDMONTON INTL AB

Stops: 0 Arrival: 03Nov15

AIR CANADA E

SEAT 6D - LEHR/SHARON MS

TICKET NUMBER

Flight: 8172 G CLASS
05:30 PM Equipment: D8 (300 SERIES)
06:24 PM

Mile(s) Flown: 163

Cost:

AIR CANADA WEB

250.92

Tax:

74.96

Ticket Total:

325.88

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: October 8, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	325.88
Less Credit Card Payments:	325.88
Credit / Balance Due To This Invoice:	0.00
Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED:VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.