

AHS Board and Executive Expense Report

Name: Dr Sharron Spicer

Title: Associate Chief Medical Officer, Physician Wellness, Diversity and Development

Location: Calgary

Expenses approved during the month of August 2023

						Trav	vel (1)				I					
Approved MMM-YY	Source Document	Purpose	Airfar	e	Meals	Accom	nodation	Oth Trav		otal avel	Professi Develop (2)		Ses Hosti Hosp	rking sions ng and itality 3)	Oth (4	
Aug-23	P-Card Expense Claim Direct Bill	Meetings Meetings Meetings							176	- 176 -				847		
Total			\$	- \$		- \$	-	\$	176	\$ 176	\$	-	\$	847	\$	-

Total for

the Month \$ 1,023

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

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense									
SPICER, SHARRON	Associate Chief Medical Officer, Physician Wellness, Diversity and Development	Calgary	\$ 1,023.15	1								
Expense Date	Business reason	Expense Location	Expense Type	Am		From Location	To Location	Justification		# of Attendees	Attendee Name(s)	Trip Distance
5/11/2023	May 11, 2023 Taxi from Uof A Hospital to Airport to return to Calgary participate on in person interview panel for Clnical Ethicist	AB - Other Zones	Taxi	\$		U of A Hospital	Edmonton Airport		1			
5/11/2023	Calgary Airport parking May 11 for flying(return) to Edmonton to participate inperson interview panel for Clinical Ethicist		Parking - Lot or Parkade	\$	30.45				1			
5/11/2023	May 11, 2023 Taxi from Edmonton Airport to Uof A Hospital to participate on in person interview panel for Clnical Ethicist	AB - Other Zones	Taxi	\$	71.30	Edmonton Airport	U of A Hospital		1			
5/31/2023	May 30, 23 lunch for planning retreat at Genesis Centre- first Physician Experience mtg in person since team expanded 2022	AB - Local	Working Session	\$	484.22				1	26	list of names attached with receipts	
5/31/2023	May 30, 23 room rental at Genesis Centre- first Physician Experience mtg in person since team expanded 2022		Working Session	\$	363.00				1	26	list of names attached with receipts	
Approver(s) for the claim	Approval Status	Approval Date										
BELANGER, FRANCOIS	Approve	31-Jul-23										

Calgary Airport Tel. 403-735-1500 TAX RECEIPT GST No: R122556194 EXIT No. 05/11/23 IN: 07:06 OUT: 05/11/23 22:10 DUR: 8 15: 04 PAID: \$ 30.45 (GST INCLUDED) ____ May 11 2023 22:10 TRANSACTION RECORD CREDIT

Card Number ******** Card Type : MASTERCARD Trans. Type : PURCHASE Card Entry : TAP_CHIP Auth # : Sequence # : Ref. # : Merchant ID : Terminal # : Amount \$CAD 38.45 PAYMENT_NETWORK:

MASTERCARD

AIRPORT TAXI SERVICE 4608 101 ST NW EDMONTON AB

Download our convenient app.



Approved

For GST# see \"Username\" above

Important:Retain this copy for your record



CO-OP TAXI LINE 10538 114 ST NW EDMONTON AB

Total	\$ 74.18
Amount Tip	\$ 64.60 \$ 9.68
Baich: 001	Clerk
Sequence:001836 Auth#	Response: 01-027
May 11,2023 MASTERCARD TID: 14019000	16:42:39 Entry: Chip (C)
Mm. 11.0002	10.10.00

Approved VERIFIED BY PIN

Merchant copy



Working Session Pre-Approval Request

In accordance with the <u>Travel, Hospitality & Working Session Expenses Policy #1122</u> this form									
must be pre-approved for working sessions estimated to cost \$500.00 or more, in accordance with the Delegation of Authority for Financial Commitments "Financial Authorization" Matrix.									
Select healthy food and di							Healthy Eating Environment		
policy (#1138). Refer to <u>Eat Smart Meet Smart</u> for planning.									
Details of Working Session Request									
Describe the purpose of the working session									
Opportunity for Physician Experience team to come together for first time since formation of the team. Objective of the day for 2023-24 planning to align the team goals with organzational and portolio priorities									
Name of Event						Date of	Request (dd-mmm-yyyy)		
Physician Experience Tea	m retreat					1-May-2	2023		
Event Lead (Name, Position,	Department)								
Dr. Sharron Spicer, Assoc	iate Chief I	Medical Officer,	Physician E	xperi	ience, F	Provinica	al Medical Affairs		
Location of Venue			Event Da	ate <i>(s)</i>)		Number of Attendees		
Genesis Centre			30-May-	23			30		
Guest Speaker(s) /Facilitat	ors	Title/Role		0	rganiza	ation			
using internal resources									
Proposed Budget									
Venue cost				\$313.00					
Meals				\$450.00					
Non- Alcoholic Beverages				\$125.00					
Other pro	ojector, scr	een		\$50.00					
GST (if applicable)						\$	50.00		
Total Planne	d Event B	udget		\$988.00					
Finance Code / Account	ing Distrib	ution							
Balancing Unit		ocation					onal Centre		
Eg. 101 Eg. 9000			_			-	00000000		
101 0000 71110106058					0106058				
Authorization									
Name			on/Title				DOA Level		
Dr. Francois Belanger		VP &	СМО				2		
Signature							Date (dd-mmm-yyyy)		
							02MAY2023		



Physician Experience Team Retreat May 30, 2023

0930-1015	Introductions
	Land Acknowledgement
	Team Structure and Org Chart
1015-1215	Team Adventure – <i>Marooned</i>
1215-1300	Lunch (provided)
1300-1410	Our Work
	Summary of 2022 Retreat
	Annual Report
	DWD Stream Priorities
	I&C Priorities
1410 – 1425	Break
1425-1530	Liberating Structures
	Wrap-Up

Physician Experience team

First	Last	Attending	Table
Dr. Sharron	Spicer	Ϋ́Υ	5
Rosalie	Krause	Y	3
Sapna	Chawla	Ŷ	1
Linette	McNamara	Y	5
Andrea	Kiernan	Y	4
Dr. Sara	Hall	Y	4
Jodi	Ploquin	Ϋ́	2
Karen	Hayes	Y	1
Sarah	Allen	Ŷ	5
Shalyn	Prasad	Y	3
Dr. Serena	Siow	N	
Dr. Florence	Obianyor	Y	2
Dr. Charlie	Chen	Y	1
Ashley	Farrelly	Y	1
Nana	Gyennin	Y	4
Tracey	Receveur	Y	4
Holly	Ljuden	Y	3
Heidi	Reid	N	
Amanda	McMahon	Y	4
Dr. Chip	Doig	Y	3
Bonny	Nelson	Y	5
Cheryl	Meriot	Y	4
Jennifer	Liber	N	
Karmin	Hovde	Y	2
Kim	Luciuk	N	
Kristy	lvans	Y	3
Molly	McCully	N	
Mia	Neudorf	N	
Sandra	Plupek	N	
Erin	Pajunen	Y	5
Danielle	Kesterke	Y	2
Jamie	Cramer	Y	1
Xina	Chrapko	Ν	
			20



Sales Invoice

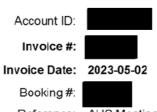
BN 81390 0941 RR00001

Genesis Centre

#10, 7555 Falconridge Blvd. NE Calgary AB T3J0C9 Canada

anada





Reference: AHS Meeting

Date	Times	Venue/Location	Units	Qty (Hr/Ea)	Rate	Total (Incl Tax)
		Food and Beverage Surcharge		1.00	\$25.00	\$25.00
May 2023						\$25.00
Tue 30 May	08:30:AM to 04:30:PM	Multi Purpose Rooms: Feature MPR		8.00	\$36.00	\$288.00
Tue 30 May	08:30:AM to 04:30:PM	Chair -3rd Party	32	1.00	\$0.00	\$0.00
Tue 30 May	08:30:AM to 04:30:PM	Projector & Screen	1	1.00	\$50.00	\$50.00
Tue 30 May	08:30:AM to 04:30:PM	Rectangular Tables (8') - Internal	2	1.00	\$0.00	\$0.00
Tue 30 May	08:30:AM to 04:30:PM	Round Table (5) - Internal	4	1.00	\$0.00	\$0.00
		Subtotal for: May 2023	8.00 Hrs			\$338.00

		_	S	ub Total	\$363.00
Payment Schedule	тот	AL Invoice	Qty (Hrs)	8.00	\$363.00
	Includes Tax of				
			Pai	d To Date	\$363.00
	2023-05-08	MASTERCA	RD	\$363.00	
			Balance Ou	tstanding	\$0.00

I made the arrangements with the Genesis Centre, the charges noted above were personally paid by Dr. Sharron Spicer via her personal Mastercard. I will not submit for reimbursement....

From: To: Subject: Date:

-

FW: Sunterra Receipt Wednesday, May 31, 2023 9:35:34 AM

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You are receiving this email com	munication from Sunterra Market	
	2	
Sunterra Receipt		
Dear Customer ,		
Your payment	has been completed.	
Surator	o Ovelity Faced Markets Inc.	
Sumen	a Quality Food Markets Inc. GST#: R892593856	
Payment Details	GS1#. R692595650	
Payment Status:	Paid/Reconciled	
Submitted Date:	5/25/2023 2:53:42 PM	
Delivery Date:	5/30/2023	
Payment ID:		
Payment Method:	Credit Card	
Credit Card Info:		
Credit Card Payment	Total: \$484.22	
Payment Date:	5/29/2023 3:27:21 PM	
Authorization #:		
Sunterra Invoice Num	bers:	

Email:

Thank you for your order! Your payment has been processed.

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Our mailing address is: 200, 1851 Sirocco Drive SW Calgary, AB T3H 4R5 Phone: 403-266-2820; Fax: 403-266-2557

SUNTERRA catering

BILL TO ALBERTA HEALTH SERVICES Spicer, Sharron

INVOICE

Tuesday, May 30, 2023 [KM - Keynote Market]

Shipping Address: 7555 Falconridge Blvd NE The Genesis Centre

Delivery Time: 11:45 am

Food/Service Items	Qty	Price	Total
Gourmet Entree Salad: Cajun Chicken and Avocado**PLS LABEL**INDIVIDUALLY PACKAGED**	5	11.99	59.95
Gourmet Entree Salad: Chicken Pad Thai**INCLUDE 1 WITH NO KALE**PLS LABEL**INDIVIDUALLY PACKAGED**	6	11.99	71.94
Gourmet Entree Salad: Chipotle Chicken and Tortilla**INCLUDE 1 WITH NO QUINOA**PLS LABEL**INDIVIDUALLY PACKAGED**	5	11.99	59.95
Gourmet Entree Salad: Quinoa Apple on Greens**PLS LABEL**INDIVIDUALLY PACKAGED**	3	11.99	35.97
Gourmet Entree Salad: Salmon and Goat Cheese**PLS LABEL**INDIVIDUALLY PACKAGED**	5	11.99	59.95
Gourmet Entree Salad: Southwestern Flank Steak and Corn**PLS LABEL**INDIVIDUALLY PACKAGED**	3	11.99	35.97
Gourmet Entree Salad: Sunterra Greenhouse Strawberry Kale and Goat Cheese**PLS LABEL**INDIVIDUALLY PACKAGED**	3	11.99	35.97
Signature Cookie Tray- Assorted	29	2.29	66.41
Disposables Requested	29	0.45	13.05
Napkins	29		
Forks	29		
Knives	29		
Spoons	29		
Plates	29		
Serving Utensils**TONGS**	7		

Delivery Charge	22.00

Subtotal	461.16	Service Charge	0.00
Tax	23.06		
Total Value	484.22		

Thank you for this opportunity to serve you.