

AHS Board and Executive Expense Report

Name: Tina Giesbrecht

Title: Corporate Secretary & Legal Counsel

Location: Calgary

Expenses approved during the month of September 2023

						Travel (1	.)					
Approved Source MMM-YY Docume		A	irfare	Mea	als	Accommoda	ıtion	Other Travel	otal ravel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
P-Card Expense C Sep-23 Direct B	aim Meetings		2,005				495		- - 2,500			
Total		\$	2,005	\$	-	\$	495	\$ -	\$ 2,500	\$ -	\$ -	\$ -

Total for

the Month \$ 2,500

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) Othe

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 pa d 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 appl cable receipts and back up must be attached.

Direct Bill Report

- Enter all tems related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodat ons, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to profess onal 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: Tina Giesbrecht Reporting Period for the Month of: Sep-23

YES

Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
12-Jul-23	Direct Billing	Airline Ticket	Roundtrip flight CAL-EDM incurred while attending an in person meeting regarding LAB Discussion on July 17, 2023, held at SSP, Edmonton. Cost effective method was used in selecting this flight as this was the best available option at booking time that worked for schedule.	Vision Travel DT Ontario-West Inc	\$661.45
20-Jul-23	Direct Billing	Airline Ticket	Roundtrip flight CAL-EDM incurred while attending the Wisdom Council-AHS Leadserhip in-person meeting at Edmonton River Cree Resort on July 28, 2023. Cost effective method was used in selecting this flight as this was the best available option at booking time that worked for schedule.	Vision Travel DT Ontario-West	\$683.25
8-Aug-23	Direct Billing	Airline Ticket	Roundtrip flight CAL-EDM incurred while attending the Executive Leadership Team In-Person Meeting on Aug 15, 2023 and the 2-day LAB Discussion meeting on Aug 16-17, 2023, held at AHS Edmonton Office. Cost effective method was used in selecting this flight as this was the best available option at booking time that worked for schedule.	Vision Travel DT Ontario-West Inc	\$660.25
17-Aug-23	Direct Billing	Hotel	Attending the Executive Leadership Team In-Person Meeting on Aug 15, 2023 and the 2- day LAB Discussion meeting on Aug 16-17, 2023, held at AHS Edmonton Off ce.	Matrix Hotel	\$328.97
29-Aug-23	Direct Billing	Hotel	Attending the Executive Leadership Team In-Person Meeting on Aug 29, 2023 held at AHS Edmonton Office.	Matrix Hotel	\$166.04
Total Paid in th	e Month				\$ 2,499.96



29-Sep-2023 Printed:

Vision Travel DT Ontario-West Inc. - HST# 723782728 700-251 Consumers Rd, Toronto, ON M2J 4R3 - Ph 416 487 5385

Alberta Health Services

North Tower

Edmonton AB T5J 3E4 Canada

Invoice Number: Issued Date:

12-Jul-2023 Agent:

GENERAL COUNSEL



Passenger Information

GIESBRECHT/KATHARINA MS

PNR Locator:





Departure:

Your Flight Selection

Ticket Number (s) / Confirmation Number (s) :

Monday 17-Jul-2023 7:00 am Calgary(YYC)

Arrival: Monday 17-Jul-2023 7:54 am Edmonton(YEG)

WESTJET(WS) Airline: Flight #: Class: Q Mileage: 163

Departure: Monday 17-Jul-2023 8:00 pm Edmonton(YEG) Calgary(YYC) Arrival: Monday 17-Jul-2023 8:58 pm

Airline: WESTJET(WS) Flight #: Class: Q Mileage: 163

Air Fare: \$545.20 **GST/HST:** \$0.00 Taxes: \$116.25 Total Air Fare: \$661.45

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card		\$661.45
		\$661.45

Sub Total (excl. GST): \$661.45 **GST Total:** \$0.00 Service Fee : \$0.00 Invoice Total: \$661.45 Amount Paid: \$661.45 \$0.00 Balance:

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Vision Travel DT Ontario-West Inc 9929 - 108th Street Edmonton AB T5K 1G8 833-692-4120

www.dt.ca

GST Reg: 723782728 RT 0001

Invoice/Itinerary

Passenger(s):

Invoice Issued:20 July 2023 Agency Ref. Sales Person Customer Number
Customer Ref.:N/A
GIESBRECHT/KATHARINA MS

ALBERTA HEALTH SERVICES 10030 107 STREET

EDMONTON AB

T5J 3E4

Disclaimer: It is your responsibility to carefully review this itinerary immediately upon receipt and

notify us if there are any discrepancies. Important Information Related To Your Travels:

For complete Canadian Government details for returning to or travelling to Canada – click here Please click here upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you continue to come back to this information regularly in advance of and during travel as requirements and restrictions could change.

AIR - Thu	ırsday, July	27 2023 (Flown)		Add To Calendar
Air Canad	la Flight	Economy Class		
Depart	Calgary, A	lberta Weather	Arrive	Edmonton, Alberta Weather
	Calgary In	ternational Airport		Edmonton International Airport
	01:10 PM	Thursday, July 27 2023		02:00 PM Thursday, July 27 2023
Duration:		0 hour(s) and 50 minute(s) No	n-stop	
Status:		Confirmed - Air Canada Bookir	ng Reference	e:
FF Numbe	r:	- GIESBRECH	IT/KATHARI	NA MS - please reconfirm at check-in
Online Che	eck In:	Available 24 hours prior - click h	<u>nere</u>	
E Upgrade	:	For Eligible Flight - Aeroplan M	lembers <u>click</u>	<u>here</u>
Baggage A	Allowance:	0 Piece(s)		
Remarks:		PLEASE CHECK IN WITH AIR	CANADA E	XPRESS JAZZ

AIR - Friday, July 28 2023 (Flown)				Add To Calendar
Air Canada	a Flight	Economy Class		
Depart	Edmonton, A	Alberta Weather	Arrive	Calgary, Alberta Weather
	Edmonton In	ternational Airport		Calgary International Airport
	06:15 PM Fr	iday, July 28 2023		07:08 PM Friday, July 28 2023
Duration:	0	hour(s) and 53 minute(s) Non-s	top	
Status:	C	Confirmed - Air Canada Booking	Reference:	
FF Number:	F Number: - GIESBRECHT/KATHARINA MS - please reconfirm at check-in			
Online Chec	Online Check In: Available 24 hours prior - click here			
E Upgrade:	Jpgrade: For Eligible Flight - Aeroplan Members <u>click here</u>			
Baggage Al	lowance: 0	Piece(s)		
Remarks:	F	LEASE CHECK IN WITH AIR C	ANADA EX	(PRESS JAZZ

Invoice Details					
Transaction Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Invoice Number:					
Air Canada	570.00	113.25	0.00	0.00	683.25
Totals:	570.00	113.25	0.00	0.00	683.25
			Total Credit Ca	rd Billing:	683.25
			Bal	ance Due:	0.00

Remarks

24 HOUR EMERGENCY TRAVEL ASSISTANCE
OUTSIDE REGULAR BUSINESS HOURS - MONDAY TO FRIDAY
A SERVICE FEE MAY APPLY FOR CALLS TO THIS SERVICE
WITHIN NORTH AMERICA - CALL 1-888-700-6063
OUTSIDE NORTH AMERICA - CALL COLLECT 1-514-855-4263
PLEASE QUOTE ACCESS CODE

RECOMMENDED CHECK-IN TIME IS AT LEAST 120 MINUTES
PRIOR TO DEPARTURE. AFTER CHECK-IN YOU MUST BE
AVAILABLE AT THE BOARDING GATE AT LEAST 60 MINUTES
PRIOR TO DEPARTURE OR YOU MAY BE DENIED BOARDING.
PLEASE ENSURE THAT YOU HAVE VALID GOVERNMENT ISSUED
PHOTO I.D. GATE ASSIGNMENTS AND DEPARTURE
ARRIVAL INFORMATION ARE SUBJECT TO CHANGE.
PLEASE CHECK MONITORS AT THE AIRPORT.
PLEASE RECONFIRM ALL FLIGHTS
IT IS YOUR RESPONSIBILITY TO VERIFY FLIGHT TIMES WITH
THE AIRLINE PRIOR TO YOUR DEPARTURE. SCHEDULE CHANGE

ENSURE ALL TRAVELLERS HAVE PROPER TRAVEL DOCUMENTS CHECK THIS WEBSITE FOR AIRPORT SECURITY INFO WWW.CATSA.GC.CA

MAY OCCUR AT ANY TIME WITHOUT NOTICE BY THE AIRLINE.

---AIRPORT SECURITY REVISIONS---

BAGGAGE ALLOWANCE-SPECIFIC SIZE AND WEIGHT

RESTRICTIONS VARY BETWEEN AIRLINES. EXCESS CHARGES

MAY APPLY. VISIT THE AIRLINES WEBSITE TO SEE THE

EXACT BAGGAGE RESTRICTIONS AND FEES.

MOST AIRLINE BAGGAGE LINKS ARE AVAILABLE BY VISITING WWW.DT.CA/BAGGAGE/

--- AIRPORT ARRIVAL TIMES FOR DOMESTIC FLIGHTS ---

DUE TO COVID 19-RELATED TRAVEL REQUIREMENTS

AIRPORTS ARE MUCH BUSIER THAN USUAL

CUSTOMERS FLYING WITHIN CANADA MUST NOW ARRIVE AT THE

AIRPORT AT LEAST 120 MINUTES PRIOR TO THEIR FLIGHT

TO ENSURE A SMOOTH AIRPORT EXPERIENCE.

FAILURE TO DO SO MAY CAUSE THEM TO MISS THEIR FLIGHT.

*****BAGGAGE CHECK IN FOR FLIGHTS WITHIN CANADA

WILL CLOSE 45 MINUTES PRIOR DEPARTURE.

WITH THE EXCEPTION OF FLIGHTS LEAVING

FROM TORONTO CITY AIRPORT YTZ-WHERE CHECK-IN

AND BAG DROP-OFF WILL REMAIN AVAILABLE UNTIL

20 MINUTES BEFORE DEPARTURE.

THIS IS AN ELECTRONIC TICKET VALID ONLY ON ISSUING AIRLINE PHOTO ID REQUIRED FOR CHECK IN.



29-Sep-2023 Printed:

Vision Travel DT Ontario-West Inc. - HST# 723782728 700-251 Consumers Rd, Toronto, ON M2J 4R3 - Ph 416 487 5385 TICO R50023501 - W50023502

Alberta Health Services

North Tower

Edmonton AB T5J 3E4 Canada

Invoice Number: Issued Date:

08-Aug-2023 Agent:

GENERAL COUNSEL



Passenger Information

GIESBRECHT/KATHARINA MS

PNR Locator:





Departure:

Your Flight Selection

Ticket Number (s) / Confirmation Number (s)

15-Aug-2023 8:55 pm Calgary(YYC) Tuesday

Arrival: Tuesday 15-Aug-2023 9:45 pm Edmonton(YEG)

Airline: AIR CANADA(AC) Flight #: Class: V Mileage: 163

Departure: Thursday 17-Aug-2023 2:40 pm Edmonton(YEG)

Arrival: Thursday 17-Aug-2023 3:33 pm Calgary(YYC)

AIR CANADA(AC) Airline: Flight # Class: V Mileage: 163

Air Fare: \$547.00 **GST/HST:** \$0.00 Total Air Fare: \$660.25 Taxes: \$113.25

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card		\$660.25
		\$660.25

Sub Total (excl. GST): \$660.25 **GST Total:** \$0.00 Service Fee : \$0.00 Invoice Total: \$660.25 \$660.25 Amount Paid: \$0.00 Balance:



AB Health Service PO Box 1600 Edmonton AB T5J 2N9 Canada

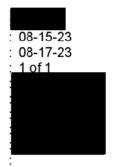


Company Name : Group Name :

Guest Name : Giesbrecht, Katharina Ms

COPY OF INVOICE

Room No.
Arrival
Departure
Page No.
Folio No.
Invoice No.
AR No.
Conf. No.
Cashier No.
Custom Ref.



Date	Description		Charges	Credits
08-15-23	Room Revenue		155.00	
08-15-23	Destination Marketing Fee		4.65	
08-15-23	Tourism Levy		6.39	
08-16-23	•		152.10	
08-16-23	Destination Marketing Fee		4.56	
08-16-23	Tourism Levy		6.27	
		Total Charges	328.97	

Total Credits	0.00
Balance	328.97

I agree that I am personally liable for payment of this account, and if this person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association.



AB Health Service PO Box 1600 **Edmonton AB T5J 2N9** Canada

COPY OF INVOICE

Room No. Arrival Departure Page No. Folio No. Invoice No. AR No.

08-28-23 08-29-23 1 of 1

Conf. No. Cashier No. Custom Ref.



Company Name **Group Name**

Guest Name : Giesbrecht, Katharina Ms

Date	Description		Charges	Credits
08-28-23	Room Revenue		155.00	
08-28-23	Destination Marketing Fee		4.65	
08-28-23			6.39	
		Total Charges	166.04	
		Total Credits		0.00
		Balance		166.04

I agree that I am personally liable for payment of this account, and if this person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association.