

Official Administrator and Executive Expense Report

Name Todd Gilchrist
Title VP, Human Resources
Location Edmonton
 Expenses submitted during the month of July 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)
Jul-15	Expense	Meetings		56	346	655	1,057			
Total			\$ -	\$ 56	\$ 346	\$ 655	\$ 1,057	\$ -	\$ -	\$ -

Total for the Month \$ 1,057

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 154
 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

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)

• Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system
 • Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system
 • If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 1-Jul-15 To 31-Jul-15
 Travel Period from: _____ To _____ (if applicable)
 Out-of-Province Travel No

Name: TODD GILCHRIST Position (Title): Vice President

Location: _____ Dept: _____ DOFA Level: _____ (if applicable) Union: _____ Business Phone: _____

Employee # (E-People): _____

SECTION E: FINANCE CODING & TOTAL CLAIM

CAPITAL PROJECT CODING ONLY → Project Number _____ Project Task Number _____
 Expenditure Organization _____ Expenditure Type _____

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3				
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total Expense
2A	101	0005	71105000026	\$1,056.33					
2B									
2C									
2D									
				\$1,056.33					

TOTAL REIMBURSEMENT

Total Section B	\$1,056.33
Total Section C&D	
Less Cash Advance	
TOTAL CLAIM	\$1,056.33

NOTE: This section auto fills from page 2A, 2B, 2C & 2D

NOTE: These fields do not automatically fill for Section C & D

SECTION F: AUTHORIZATION

I attest that I have read and understand the Travel, Hospitality & Working Session Expense Policy (1122) of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of this policy.
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above. [Travel, Hospitality and Working Session Expenses Policy - Document# 1122](#)

I, by signing this form, attest that I am compliant to all the above statements
 Employee Signature: [Signature] Date: AUG-12/15

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Approved By (PRINT ONLY): Vickie Kaminski DOFA Level: _____ Position #: _____ Phone: _____ Ext: _____
 Signature: [Signature] Title: President & CEO Date: Aug 14/15

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Approved By (PRINT ONLY): _____ DOFA Level: _____ Position #: _____ Phone #: _____ Ext: _____
 Signature: _____ Title: _____ Date: _____

Health and Personal information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 33(c) and 34(2) of the Freedom of Information and Protection of Privacy (FOIP) Act, respectively, for the purpose of administering AHS Procure to Pay program.

Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10030-107 St, North Tower, 10th Floor, Accounts Payable, Edmonton, AB T5J 3E4

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 0005 71105000026 Emp # (E-People) [REDACTED] Page 2A

If expenses incurred are for **multiple FC's** please use pages 2B,2C,2D (after pg3) as there should be one FC per page OR **one FC** required for the same FC use these additional pages. Enter total \$ amount on slip, **DO NOT** separate any taxes (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.

SECTION B: TRAVEL EXPENSES NOTE: If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C

Select from dropdown (column Prov) where expenses were incurred (Out of N.America = Inter!)
Ensure separate lines are used for claim items that differ in Province, US and Out of North America.

Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column, Further Explanation is REQUIRED in the "Rationale is Required" section on this page										
				Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)		If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)		
					Meal Allowance	Meal with Receipt	Airfare	Hotel	Taxi					
					Meal Type with value	Allowance	Meal Type	with receipt						
① 7-Jul-15	Meeting at Royal Alexandra Hospital with Edmonton HR Zone Team	AB - Local	Meeting	Yes								\$9.00		
② 15-Jul-15	Travel to Calgary to attend various meetings at Southport Tower	AB - Provinc	Meeting	Yes	LD-\$32.35	\$32.35				\$172.89				300.00
③ 16-Jul-15	Attendance at various meetings at Southport Tower, Calgary and return to Edmonton	AB - Provinc	Meeting	Yes	L-\$11.60	\$11.60						\$15.00		300.00
④ 23-Jul-15	Meeting at Alberta Health with Miin Alikhan	AB - Local	Meeting	Yes								\$10.00		
⑤ 29-Jul-15	Travel to Calgary to attend various meetings at Southport Tower	AB - Provinc	Meeting	Yes						\$172.89				300.00
⑥ 30-Jul-15	Attendance at various meetings at Southport Tower, Calgary and return to Edmonton	AB - Provinc	Meeting	Yes	L-\$11.60	\$11.60						\$15.00		300.00
SUBTOTALS						\$55.55				\$345.78		\$49.00		Total Kms 1200.00

<p>MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle → details of travel location to & from must be included above under the purpose of travel column Rates applicable \$0.505 per km for <u>under 5,000km/yr</u> or \$0.47 per km for <u>over 5,000km/yr</u> or <u>per Union Agreement</u></p> <p>Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3</p>	Enter \$0.505 km, \$0.47 km OR rate per Union Agreement <i>(see Mileage details to the left)</i>	\$0.505
	Mileage \$	\$606.00
	Travel \$ Subtotal	\$450.33
	Auto fills on page 1 - TOTAL TRAVEL \$	\$1,056.33

Rationale is Required for expenses that are not Cost Effective
(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)



①

LEAVE ON DASH - THIS SIDE UP

DETACH RECEIPT FROM TICKET

EXPIRATION DATE

EXPIRATION TIME

DATE ISSUED

TIME ISSUED

AMOUNT PAID

07/07/15 03:27 PM

07/07/15 01:27 PM \$ 9.00

AMOUNT PAID

\$ 9.00 76400000 01:27 PM

CREDIT CARD NUMBER

CC

Meeting at RAH
with Edm Zone
Team

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



2

DELTA

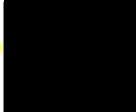
CALGARY SOUTH

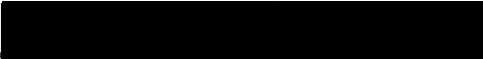
135 Southland Drive S.E. Calgary, Alberta, T2J 5X5
Tel: 403-278-5050 Fax: 403-225-5834

Attendance at
various meetings in
Calgary

AB HEALTH SERVICES
Mr Todd Gilchrist



Room: 
Folio:
Cashier:
Arrival: 07-15-15
Departure: 07-16-15

Date	Description	Additional Information	Charges	Credits
07-15-15	Room Charge		154.00	
07-15-15	DMF		4.62	
07-15-15	Room GST		7.93	
07-15-15	Tourism Levy		6.34	
07-16-15	Visa			172.89

GST Summary	
Registration No:	895126332
Room	7.93
F&B	0.00
Other	0.00
Total	7.93

Total	172.89	172.89
Balance Due	0.00	CDN

Guest Signature: _____

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.

PLACE ON DASH FACE UP PLACE ON DASH FACE UP PLACE ON DASH FACE UP

ALBERTA HEALTH SERVICES
SPT-1 GST R124072513
EXPIRES
17 JUL 15
07:09 AM PAID \$ 15.00C
ENTRY TIME 17 JUL 15 07:09 AM

PLACER SUR LE TABLEAU DE BORD CE CÔTÉ VISIBLE PLACER SUR LE TABLEAU DE BORD CE CÔTÉ VISIBLE PLACER SUR LE TABLEAU DE BORD CE CÔTÉ VISIBLE

*Parking at
Southport Tower
in Calgary*

Attestation of Lost Parking Receipt

This is to attest that I attended at meeting at Alberta Health with Miin Alikhan on July 23 and have lost my parking receipt in the amount of \$10.00.



Todd Gilchrist
Vice President, Human Resources

5

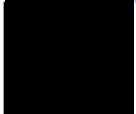
July 29+30
Attendance at
various meetings
in Calgary

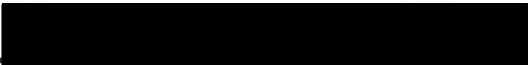


DELTA
CALGARY SOUTH

135 Southland Drive S.E. Calgary, Alberta, T2J 5X5
Tel: 403-278-5050 Fax: 403-225-5834

AB HEALTH SERVICES
Richard Gilchrist
Canada

Room: 
Folio:
Cashier:
Arrival: 07-29-15
Departure: 07-30-15

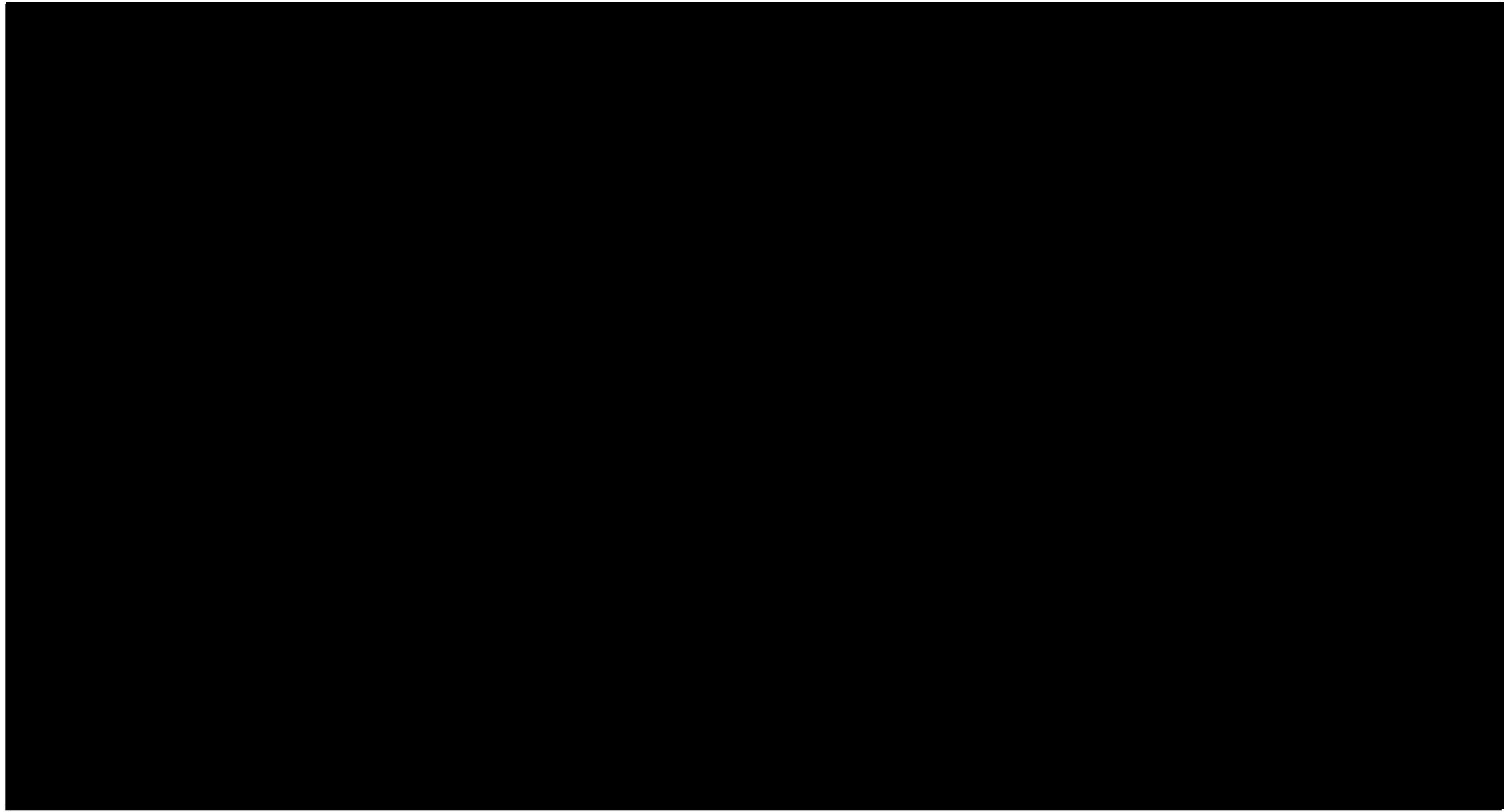
Date	Description	Additional Information	Charges	Credits
07-29-15	Room Charge		154.00	
07-29-15	DMF		4.62	
07-29-15	Room GST		7.93	
07-29-15	Tourism Levy		6.34	
07-30-15	Visa			172.89

GST Summary	
Registration No:	895126332
Room	7.93
F&B	0.00
Other	0.00
Total	7.93

Total	172.89	172.89
Balance Due	0.00	CDN

Guest Signature: _____

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PLACE ON DASH FACE UP PLACE ON DASH FACE UP PLACE ON DASH FACE UP
 ALBERTA HEALTH SERVICES
 SPT-1 GST R124072513
 EXPIRES
31 JUL 15
07:48 AM PAID \$ 15.00C
 [REDACTED] ME 30 JUL 15 07:48 AM
 PAGE 31
 PLACE SUR LE TABLEAU DE BORD CE CÔTÉ VISIBLE PLACE SUR LE TABLEAU DE BORD CE CÔTÉ VISIBLE PLACE SUR LE TABLEAU DE BORD CE CÔTÉ VISIBLE

⑥

Parking @
 Southport Tower
 in Calgary to
 attend various
 meetings