

AHS Board and Executive Expense Report

NameDr. Verna YiuTitlePresident & Chief Executive OfficerLocationEdmontonExpenses submitted during the month of December 2016

							Fravel (1)						
МММ-ҮҮ	Source Document	Purpose	Air	rfare	Meals	Асс	ommodatio	n	Other Travel	⁻ otal ravel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Dec-16	P-Card	Meetings					67	4	470	1,144			
Dec-16	Direct Billing	Meetings		561				-		561			
Total			\$	561	\$ -	\$	67	4 :	\$ 470	\$ 1,705	\$-	\$-	\$-
Total for the Month	\$ 1,705												
Maximum dai	ly single meal expens ly base hotel rate cla air travel in the mor		\$ \$ \$	- 200 -									

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.

P-Card details Online ® Cardholder Statement Report

YIU, VERNA			PRESIDENT AND CE	0						
Cardholder's	Name		Cardholder's Position/	Title	Billin	g Report	ing Peri	iod:	20/12	2/2016
OFFICE OF	THE PRES	IDENT AND	SEVENTH STREET P	LAZA				ĺ		
Cardholder's	Dept		Cardholder's Site/Loca	ation	Total	Stateme	nt Amo	unt		\$1,144.25
VERNA.YIU	@AHS.CA									
Cardholder's	e-mail add	ress			Last	6 digits c	f the P	-Card #:		
Statement c	f Transact	ions			en tet			· . ·	· · ·.	
Transaction Date	Trans ID	Merchant Nar	ne & Description	Trans Original Amount	Currency	Trans A	mount	GST	Freigh	Description
21/11/2018		ASSOCIATED C AND TAXICABS	AB/ALLIED, LIMOUSINES	41.91	CAD	1	41.91	2.00		Taxi: Calgary airport to Ranchman's C atlended University of Calgary Presider Round Table in Calgary
21/11/2016		CHECKER CAB	S LTD., LIMOUSINES AND	6.00	CAD	~	6.00	.29		Taxi: Ranchman's Club to holel: atlen University of Calgary President's Roun In Calgary
22/11/2016		TAXICAB\$	D, LIMOUSINES AND	26.40	CAD		26.40	1.26		Taxi: Hotel to Southport Tower - altend Exec Leadership meeting in Calgary
22/11/2016		TAXICABS	D, LIMOUSINES AND	61.00	CAD	\checkmark	61.00	2.90		Texi: Southport Tower to Calgary airpo atlended Exec Leaders meeting in Cal
22/11/2016		PARKING LOTS	ERNATION, AUTOMOBILE AND GARAGES	50.00	ĊAD		50.00	2.38	.00	Short Term Parking: EIA - attended Uc President's Roundtable and Exec Leac meeting in Calgary
22/11/2016		HOTELS, MOTE		313.23 \$224.70	CAD		313.23 ,	.00		Accommodation: allended the UofC President's Roundtable and Exec Lead mtgs in Calgary
30/11/2016		TAXICABS	D, LIMOUSINES AND	26.40	CAD	\checkmark	26.40	1,26		Taxi: hotel to Alberta Children's Hospit meeting with ACH Foundation
30/11/2016		AND TAXICABS	AB/ALLIED, LIMOUSINES	42.55	CAD	7	42.55	2.03		Taxi: International airport to hotel - atte meeting with ACH Foundation; Long R: Planning sassion, Calgary Zone; other
30/11/2016		CALGARY UNIT AND TAXICABS	ED CABS, LIMOUSINES	26.74	CAD	\checkmark	26,74	1.27	00.	Taxi: Della Holei to LeGermain hotei - altended Long Range Planning Sessio Calgary Zone
01/12/2016		CHECKER CAB	S LTD., LIMOUSINES AND	22.54	CAD	7	22.54	1.07		Taxi: Hotel to Peter Lougheed Centre f meeting
01/12/2018		TAXICABS	S LTD., LIMQÜSINËS AND	12.00	CAD	\checkmark	12.00	.57		Taxi: hotel to Stampede Park - attend / Foundation Candy Cane Gala, Calgary
01/12/2016		TAXICABS	S LTD., LIMOUSINES AND	41.63	CAD	\checkmark	41.63	1.98		Taxl: Pater Lougheed Centre to South Tower - allended several meetings
02/12/2016		AND TAXICABS	AB/ALLIED, LIMOUSINES	34.98	CAD	\checkmark	34.98	1.67		Taxi: hotel to Calgary airport - attended several meetings in Calgary
02/12/2016		HOTELS, MOTE		584.04 \$449.40	CAD		584.04	.00		Accommodation: attended several me n Calgary - Nov 30-Dec 2
02/12/2016		EDMONTON IN PARKING LOTS	ERNATION, AUTOMOBILE AND GARAGES	68.00	CAD	\checkmark	68.00	3.24	30,	Short Term Parking: EIA - attended se meetings in Calgary Nov 30-Dec 2
02/12/2016		EDM EPARK PA GOVERNMENT	(MACHINE	10.00	CAD	1	10.00	.48		Parking: Information meeting with City

Alberta Health

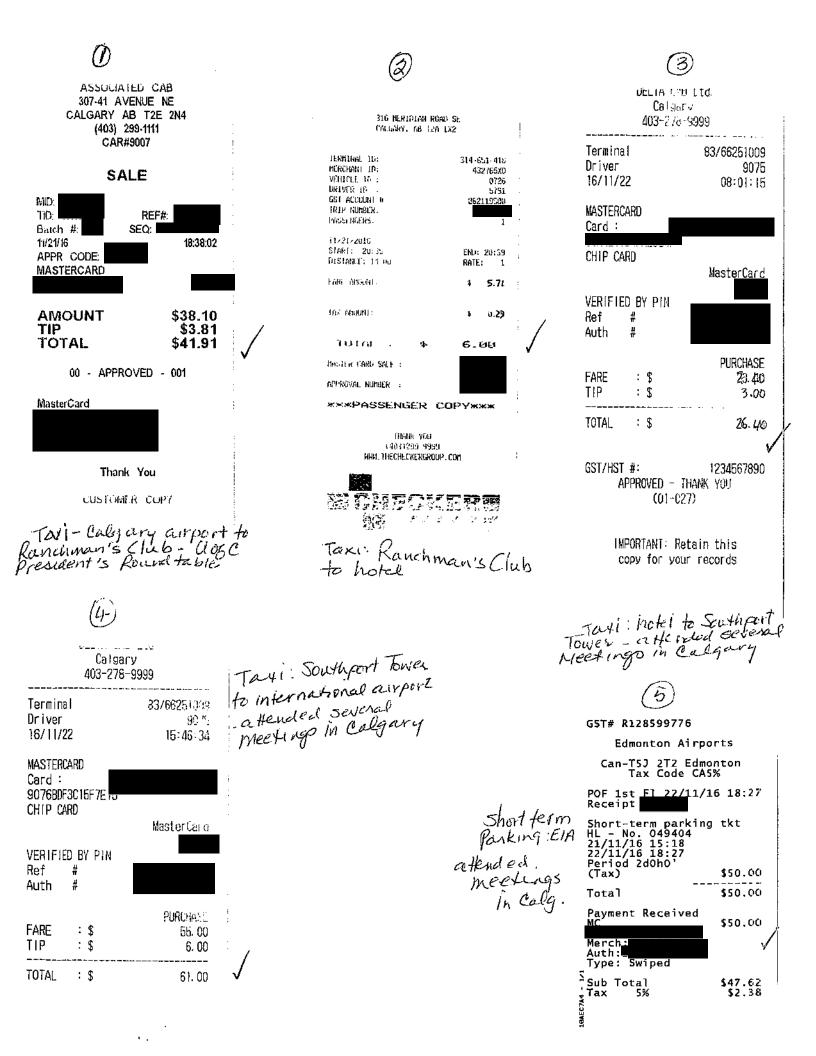
Services

#6 - Accommodation - reinbursed AHS \$88.53 by personal cheque attached V

#14 - Accommodation - reinbursed Atts \$ 134.64 by personal cheque attached.

P-Card details Online ® Cardholder Statement Report

Alberta Health		P-Card		
		details Online ®		
Services	Card	holder Statement Report		
Signatures				
Cardholder Designate (if Applicable)	<u>a se se internativalitada en seguina da actividad</u>	<u>na kaominin' de la construction de</u>		
By signing this statement				
Program User Guide and Training. I have alloca	iled this statement in BMO Online to the best of my ability i ted the transaction(s) to the proper cost centre.	in accordance to AHS Corporate Policies.		
Andrey Maisine	Ever Admin	ord.		
Name of Cardholder Designate	Cardholder Designate Position/Title			
the source	Dec. 22,2016			
Signature of Cardholder Designate	Date of Signature	-		
Cardholder				
By signing this statement				
expenses being claimed are in compliance with	Ivel, Hospitality and Working Session Expense Policy (112) such policy.	2)" of Alberta Health Services and confirm		
 I attest the expenses enclosed in this claim are objected by the second s	for valid business purposes for Alberta Health Services and	d that this claim has not been previously		
charged is attached.	alth Services or any other Organization. A personal cheque	for any personal expenses inadvertently		
 I attest that expenses submitted in this claim hat provided. 	ve been incurred by using a cost effective method, otherwi	se rationale and supporting analysis is		
YIU, VERNA	PRESIDENT AND CEO			
Name of Caronolder	Cardholder Position/Title			
	Dec 29, 2016			
Signature of Cardholder	Date of Signature			
Approver Designate (If Applicable)				
 By signing this statement I attest that I have read and understand the "Transmission" 	vel, Hospitality and Working Session Expense Policy (112	2)" of Alberta Health Services and confirm		
expenses being claimed are in compliance with	such policy.			
I attest the expenses enclosed in this claim are t	for valid business purposes for Alberta Health Services and	d that this claim has not been previously		
charged has been obtained.	Uberta Health Services or any other Organization. A person			
 I attest that expenses submitted in this claim has provided. 	ve been incurred by using a cost effective method, otherwi	se rationale and supporting analysis is		
Deborah Rhodes	VPC005001 9	-CFD		
Name of Approver Designate	Approver Designate Position/Title			
sha D	Jan 4,0017	/		
Signature of Approver Designate	Date of Signature	- 🗸		
Approve		· · · · · · · · · · · · · · · ·		
By sighting this statement				
 I attest that I have read and understand the "Tra expenses being claimed are in compliance with 	vel, Hospitality and Working Session Expense Policy (112) such policy.	2)" of Alberta Health Services and confirm		
,	for valid business purposes for Alberta Health Services and	d that this plains has not been providently		
claimed by the claimant or on their behalf from A	Werta Health Services or any other Organization. A person	nal cheque for personal expenses inadvertently		
 charged has been obtained. I attest that expenses submitted in this claim has 	ve been incurred by using a cost effective method, otherwi	se rationale and supporting analysis is		
provided.				
Linda thighes	Board Chair			
Name of Approver	Approver Position/Title	-		
Linda Ands	10m 5/17			
Signature of Approver	Date of Signature f	-		
Submit approved statement with attachments to Act	counts Payable:			
Attach:		Address:		
 Original (or scanned) itemized receipts with docum where receipts. 	ented business reasons including names of participants			
where required		Alberta Health Services Accounts Payable		
 Signed Cardholder Statement Report (or copies of And where applicable; 	electronic signatures if signatures are not on report)	7th Street Plaza		
 Copies of pre-approvals for travel 		10th Floor, North Tower, 10030-107 Street		
 Personal cheque payable to "Alberta Health Servic Return, refund and/or credit receipts 	a 5	Edmonton, AB T5J 3E4		
Disputes letter				
Business reasons for travel require detailed description	ntions – lockude where travelled to who attended (if			
meal), why travel was necessary and detailed expl				
Accounts Payable only:	anation of reason,			
Accounts Payable only:	anation of reason,	Date:		



DATE DESCRIPTION	RÉFÉRENCE	
INFORMATION INVOICE		
Group Name :		
A/R Number :		PO ;
Company Name :		Invoice :
Guest Name :		Page No. : 1 of 1
		Conf. No. :
		Departure : 22-11-16
CANADA		Arrival : 21-11-16
		Room No. :
Alberta Health Services		Time : <u>07:41</u> AM
Mr Verna Yiu		Date : 22-11-16

DATE	DESCRIPTION	REFERENCE		DEBIT	CREDIT	-
11-21-16	Room Charge			279.00 (3%) ⁸ .37	\$200 6.°°	
11-21-16	DMF - Destination Marketin	ıg		(22) 8,37	6.00	
	Fee			(510)	~	
11-21-16	Alberta Tourism Tax			(4%) 11.49	G . '	
11-21-16	GST			1 4 fe 14 200	10. 10	
11-22-16	MASTERCARD			(5), 14.37	313.23	
DMF		8.37	TOTAL	313.23	313.23	✓
GST: 84812 ATT	0796	14.37 11.49	SOLDE	0.00		•
ATT		11,49	SOLDE		CAD	
					\$ 224.70	

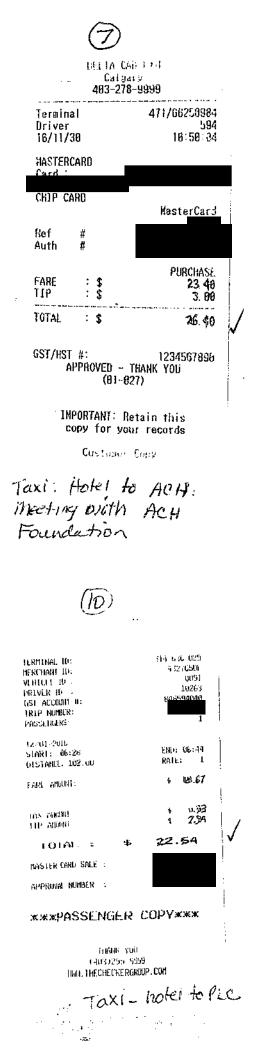
* AHS policy = \$200/day base mate . * Reimbursed Atts \$88,53 personal chaque by Accommodation: attended several Meeting

Like you, we know it's the little things that mean a lot. So, if you enjoyed your stay with us, please visit www.tripadvisor.com and share your Germain experience.

> 899 Centre Street SW Calgary (Alberta) T2G 1B8 TEL 403.264.8990 FAX 403.264.8991 1.877.362.8990 www.germaincalgary.com reservations@germaincalgary.com

g LE GERMAIN HÔTELS

4 0 M



ALLIED 307-41 A CALGARY (403) CA	ATED CAB LIMOUSIN VENUE NE AB T2E 2N4 299-1111 R#555 ALE REF#: SEQ: 09:09:22
MACTERCARD	
AMOUNT TIP TOTAL	\$37.00 \$5.55 \$42.55
00 - APP	ROVED - 001
MasterCard	
THA	NK YOU
	aleR com
Taxi: a hotel - att meetings	lirport to ended several in Calgory
Ē	
TERMINAL IN: MERCHANT ID: VEHICLE ID: LATIVER ID: USI ACCOUNT II: IRIP AUMERI: VASSERUERS:	314-651-428 43276581 0896 3996 856394431 1
1220122016 START: 17:43	END: 17:58
DISTANCE: 10 DA Fari Anount	RAIH: 1 \$ 9.62.
iax annart. The annarts	\$ U48 • 545 ∕
TOTAL: \$	\$ 2.00 12.00

MASTER CARD SALE :

REPROVAL NURBER :

PASSENGER COPY

HEALK YOU

14037200 3999

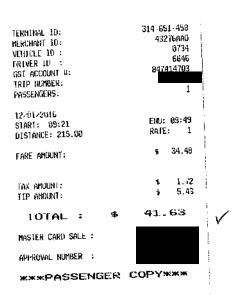
NNN. THECHECKERGROUP, COM

Taxi: hold to Stampale

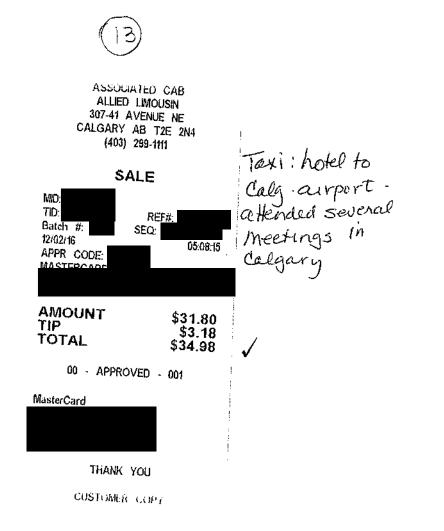


CUSTOMER COPY

Taxi: Delta Hoke to Legermain Hotel: attende Long Range Planning Session Calgary Lone

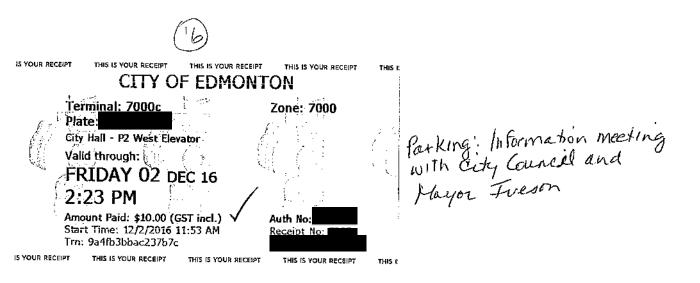


THANK YOU (403)259-9999 WWW. THECHECKERGROUP . COM Taxi: PLCto 1411202





Short term parking: EIA a Hended Several Meetings in Calgory





Date : 02-12-16

Time : 04:45 AM

Arrival : 30-11-16 Departure : 02-12-36

Page No. : 1 of 1

PO :

Room No. :

Conf. No.

Invoice :

Mr Verna Yiu Alberta Health Services

Alberta ficaltii Se

CANADA

Guest Name : Company Name : A/R Number : Group Name :

INVOICE

DATE	DESCRIPTION	RÉFÉRENCE		 DÉBIT	CRÉDIT
11-30-16	Room Charge			260-10	· \$200
11-30-16	DMF - Destination Marketing Fee			(3) 7.80	6,00
11-30-16	Alberta Tourism Tax			(4%) 10.72	
11-30-16	GST			(5%) 13.40	
12-01-16	Room Charge			260:10	^{\$} 200
12-01-16	DMF - Destination Marketing Fee			7.80	6.00
12-01-16	Alberta Tourism Tax			10.72	8. 70
12-01-16	GST			13.40	10.70
12-02-16	MASTERCARD			15.40	584.04
DMF	15.	60	TOTAL	584.04	584.04 🗸
GST: 84812	.0796 26.	80			
ATT	21,	44	SOLDE	0.00	CAD
					\$449.40

* Atts policy = \$200/day base rate * Reimburged Atts \$ 134.64 by personal cloque - Accommodation: a Hended Several Meetings in Calgary Nov 30. Dec 2.

Like you, we know it's the little things that mean a lot. So, if you enjoyed your stay with us, please visit www.tripadvisor.com and share your Germain experience.

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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:

Dr. Verna Yiu	Reporting Period for the Month of : Dec-16
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YES

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
19-Dec-2016			irline Ticket Airfare: Flight Edmonton to Ft. McMurray (return) on Dec 22 - attend meetings, tour with Deputy Minister of Health		560.96
	Direct Billing	Airline Ticket		Marlin Travel	
	Direct Billing	Airline Ticket		Marlin Travel	
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Fotal Paid in the	Month				\$ 560.96



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	· ······· · · · · · · · · · · · · · ·	Trip #: Booking Date: Client: Agent:	19 Dec 16 CARLEY WALLS
		File Locator:	

PASSENGERS: DR VERNA YIU

REFERENCE/ DESCRIF	TION			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				486.00	0.00	\$0.00	74.96	D.00	560.96 CAI
			Total:	486.00	0.00	0.00	74.96	0.00	560.96 CAI
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Payment			Amount 560.96 CAD
		12/13/2010					Total Pa	ayment:	560.96 CAL
·			<u> </u>		Bi	alance Du	e CAD Cui	тепсу	0.00 CAI
CORPORATE UNIT 10				Total GS	Т	0.00	Tota	al HST	\$0.00

REASON FOR TRAVEL SITE VISIT

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

ALBERTA HEALTH SERVICE ALBERTA HEALTH SERVICE 10030 - 107 STREET EDMONTON AB T5J 3E4		· ··· ·· · · · ·	· · ·	Trip #: Booking Date: Cilent: Agent:	19 Dec 16	
• 3 • •				File Locator:		
MY ITINERARY						
Passengers VERNA YIU		Citizenship Not Specified		red Travel Documents		
All passengers need to ensure well as for their return to Cana		ect documentation requirements ar	e met for entr	y to the applicable destina	tions as	
AIR						
Passengers: VERNA YIU		· .		Booking Date: File Locator/Tic	19 Dec 16 ket #:	I
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08380	EDMONTON INTL 22 Dec 16 8:15AM		FT. MCMURRAY 22 Dec 16 9:28AM	V/	
AIR CANADA	08385	FT. MCMURRAY 22 Dec 16 4:05PM		EDMONTON INTL 22 Dec 16 5:18PM	V/	

: