

Board and Executive Expense Report

Name Gord Winkel
Title AHS Board Member
Location

Expenses submitted during the month of February 2013

Travel (1)										
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
December 2012	Expense Claim	Committee of the Whole and Board Meeting	-	-	-	8	8			
January 2013	Expense Claim	Various meetings	-	118	207	66	391			
February 2013	Expense Claim	ERM Meeting	-	-	-	17	17			
Total			\$ -	\$ 118	\$ 207	\$ 91	\$ 416	\$ -	\$ -	\$ -

Total for the Month \$ 416

Maximum meal expense claimed in the month \$ 63 2 persons
 Maximum daily hotel rate claimed in the month \$ 184
 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.

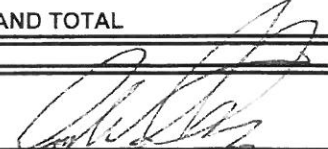
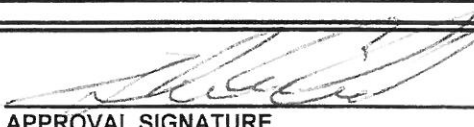
Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report

ALBERTA HEALTH SERVICES BOARD MEMBER REMUNERATION AND EXPENSE CLAIM

Name: Gord Winkel	(For Board Office Use Only) A/P Vendor ID#:
Phone #: XXXXXXXXXX	Travel Period Month: December 2012

DATE (DD/MM/YY)	DESCRIPTION (include purpose of trip, mode of travel, starting point, details of expenditure)	MEALS				ACCOM- MODATION	TRANSPORTA- TION (FLIGHT, CAR RENTAL, FUEL, PARKING, ETC.)	OTHER (ITEMIZE)	MILEAGE (KM)
		B	L	D	AMOUNT				
3/12/12	Human Resources Committee								
12/12/12	Committee of the Whole – Edmonton								
13/12/12	Committee of the Whole and Public Board Meeting - Edmonton					8.00 ✓			
TOTAL KMS									
APPLICABLE MILEAGE RATE @								50.5¢	
SUB-TOTAL <i>(carry forward to continuation sheet, where applicable)</i>					A	B	8.00	E	

FOR ACCOUNTS PAYABLE EXPENSE CODING		
Description	Coding	Amount
MEAL (A)	101.0005.71110300004.45000000	
TRAVEL EXPENSE (B+C+E)	101.0005.71110300004.62212000	8.00 ✓
OTHER (D)	101.0005.71110300004.41090000	
GRAND TOTAL		8.00 ✓

 CLAIMANT SIGNATURE _____ FEB 07 / 2013 DATE SUBMITTED	 APPROVAL SIGNATURE _____ Feb 25 / 13 DATE APPROVED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="3" style="text-align: center;">meals</td> <td style="text-align: center;">breakfast</td> <td style="text-align: right;">\$9.20</td> </tr> <tr> <td style="text-align: center;">lunch</td> <td style="text-align: right;">\$11.60</td> </tr> <tr> <td style="text-align: center;">dinner</td> <td style="text-align: right;">\$20.75</td> </tr> <tr> <td colspan="2" style="text-align: center;">Lodging per night</td> <td style="text-align: right;">\$20.15</td> </tr> <tr> <td colspan="2" style="text-align: center;">Per diem 24-hour</td> <td style="text-align: right;">\$7.35</td> </tr> </table>	meals	breakfast	\$9.20	lunch	\$11.60	dinner	\$20.75	Lodging per night		\$20.15	Per diem 24-hour		\$7.35
meals	breakfast	\$9.20													
	lunch	\$11.60													
	dinner	\$20.75													
Lodging per night		\$20.15													
Per diem 24-hour		\$7.35													
I hereby acknowledge that I have read the "Public Service Subsistence, Travel and Moving Expenses Regulation" and hereby confirm that the expenses claimed are in compliance with such regulation															

For payment please submit to the AHSB Office: 10101 Southport Road SW, Calgary, AB.
T2W 3N2, Attention: Lou DeCoste

Honoraria over...

PLACE FACE UP ON DASH

Impark Lot 57

Expiration Date/Time

EXP 06:00AM

DEC 13, 2012

Purchase Date/Time: 06:08pm Dec 12, 2012

Total Parking: \$7.61

Total gst: \$0.39

Total Due: \$8.00

Total Paid: \$8.00

Rate: \$8.00 - UNTIL 6 AM

Payment Type: Card

Ticket # 02093510

Auth #: 005929

S/N #: 100008460017

Setting: Lot 57

Mach Name: old Meter 2

GST #887315638RT0001

RECEIPT

Impark Lot 57

Expiration Date/Time: 06:00am Dec 13, 2012

Purchase Date/Time: 06:08pm Dec 12, 2012

Total Parking: \$7.61

Total gst: \$0.39

Total Due: \$8.00

Total Paid: \$8.00

MasterCard

Ticket # 02093510

Setting: Lot 57

Mach Name: old Meter 2

Rate: \$8.00 - UNTIL 6 AM

Payment Type: Card

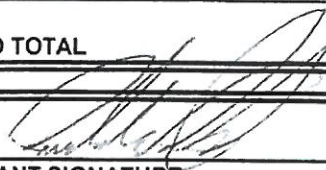
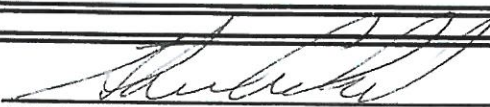
Auth #: 005929

RECEIPT
PARKING RECEIPT
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ALBERTA HEALTH SERVICES BOARD MEMBER REMUNERATION AND EXPENSE CLAIM

Name: Gord Winkel				(For Board Office Use Only) A/P Vendor ID#:					
Phone #: [REDACTED]				Travel Period Month: January 2013					
DATE (DD/MM/YY)	DESCRIPTION (include purpose of trip, mode of travel, starting point, details of expenditure)	MEALS				ACCOM- MODATION	TRANSPORTA- TION (FLIGHT, CAR RENTAL, FUEL, PARKING, ETC.)	OTHER (ITEMIZE)	MILEAGE (KM)
		B	L	D	AMOUNT				
14 Jan /13	Human Resources Committee								
16 Jan /13	Quality & Safety Committee								
29 Jan/13	Injury Prevention & Control Meeting with Dr. Megran/J. Talbot				81.90		20.00 ✓		
30 Jan/13	Committee of the Whole – Calgary	X 1930		X 621.60	82.10 ✓				
31 Jan/13	Committee of the Whole and Public Board Meeting – Calgary	X			35.97 ✓				
31 Jan/13	Hotel (Delta Calgary South)					206.58 ✓			
31/Jan/13	Parking Edmonton Int'l Airport						46.00 ✓		
TOTAL KMS									
APPLICABLE MILEAGE RATE @									50.5¢
SUB-TOTAL <i>(carry forward to continuation sheet, where applicable)</i>					A 117.87 418.07 ✓	B 206.58 ✓	66.00 ✓		E

FOR ACCOUNTS PAYABLE EXPENSE CODING		
Description	Coding	Amount
MEAL (A)	101.0005.71110300004.45000000	418.07 117.87
TRAVEL EXPENSE (B+C+E)	101.0005.71110300004.62212000	-206.58 272.58
OTHER (D)	101.0005.71110300004.41090000	-66.00
GRAND TOTAL		390.45 2140.65

CLAIMANT SIGNATURE  DATE SUBMITTED FEB 19 / 2013	APPROVAL SIGNATURE  DATE APPROVED Mar 5 / 13	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="3" style="text-align: center;">meals</td> <td style="text-align: center;">breakfast</td> <td style="text-align: right;">\$9.21</td> </tr> <tr> <td style="text-align: center;">lunch</td> <td style="text-align: right;">\$11.61</td> </tr> <tr> <td style="text-align: center;">dinner</td> <td style="text-align: right;">\$20.71</td> </tr> <tr> <td colspan="2" style="text-align: center;">Lodging per night</td> <td style="text-align: right;">\$20.11</td> </tr> <tr> <td colspan="2" style="text-align: center;">Per diem 24-hour</td> <td style="text-align: right;">\$7.31</td> </tr> </table>	meals	breakfast	\$9.21	lunch	\$11.61	dinner	\$20.71	Lodging per night		\$20.11	Per diem 24-hour		\$7.31
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	lunch	\$11.61													
	dinner	\$20.71													
Lodging per night		\$20.11													
Per diem 24-hour		\$7.31													
I hereby acknowledge that I have read the "Public Service Subsistence, Travel and Moving Expenses Regulation" and hereby confirm that the expenses claimed are in compliance with such regulation															

REMUNERATION AND EXPENSE CLAIM CONTINUATION SHEET

For payment please submit to the AHSB Office: 10101 Southport Road SW, Calgary, AB.
T2W 3N2, Attention: Lou DeCoste

LD



DELTA
CALGARY SOUTH

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

ALBERTA HEALTH SERVICES
Mr Gord Winkel
Canada

Room: 0371
Folio:
Cashier: 24
Arrival: 01-30-13
Departure: 01-31-13

Group: Alberta Health Services Board Office

Date	Description	Additional Information	Charges	Credits
01-30-13	Room Charge		* 184.00	
01-30-13	DMF		5.52	
01-30-13	Room GST		9.48	
01-30-13	Tourism Levy		7.58	

GST Summary	
Registration No: 895126332	
Room	9.48
F&B	0.00
Other	0.00
Total	9.48

Total	206.58	0.00
Balance Due	206.58	CDN

AHS GORD WINKEL
LOGGING

* Provincial Gov't Rate

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.

BELGIAN BEER CAFE
Edm.Airport
(780)

Server: [REDACTED] 01/30/2013
Table 44/1 6:22 AM
Guests: 0 20004

Large Juice	3.99
Classic Breakfast	11.99
Complete Subtotal	15.98
Subtotal	15.98
Tax	0.80
Total	16.78

Balance Due \$ 16.78

Thanks for dining with us!
Let us know how we did

[REDACTED]
GST # 884478363

AHS GORD WINKEL
BELGIAN BEER CAFE
2495 1000 AIRPORT RD.
EDMONTON AB

BREAKFAST

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2013 01/30
TIME 9576 06:24:16
CLERK ID 134
RECEIPT NUMBER
0820090007 001-100 006-0

PURCHASE AMOUNT \$15.78
TIP \$2.52
TOTAL

\$19.30

MASTERCARD
MASTERCARD

APPROVED

AUTH# 025414 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

ATRIUM CAFE & SKY
LIGHT LOUNGE

0220a TABLE 613 #Party 0
SvrCk: 11 20:43 01/30/13

ATRIUM CAFE

Separate checks: 1-of-2

1 HALIBUT & CHIPS 18.00
Sub Total: 18.00
GST : 0.90
Guest 1 TOTAL: 18.90

1 HALIBUT & CHIPS 18.00
2 NEW YORK CHEESECAKE, 1 lemon,
1 blueberry 16.00
Sub Total: 34.00
GST : 1.70
Guest 2 TOTAL: 35.70

Sub Total: 52.00
GST : 2.60
01/30 21:38 TOTAL: 54.60

TIP: _____

TOTAL: _____

ROOM #: _____

PRINT NAME: _____

SIGNATURE: _____

PLEASE PAY SERVER

GST#: 895126332 RT
JOIN US FOR SUNDAY BRUNCH 10am-2pm

HOW WAS OUR SERVICE TODAY?
LET US KNOW AND ENTER TO WIN \$1000 CASH!
Please go to www.dining.deltalistens.com
WE APPRECIATE YOUR FEEDBACK!
Ask your server for more information

AHS GORD WINKEL
DOW JOHNSON

0220

Server: [REDACTED] Rec: 46
01/30/13 21:36, Swiped i: 613 Term: 9

Duplicate Copy

Hospitality Inn SUPPER
135 Southland Drive
Calgary, AB
T2J 5X5

Jan 30 2013 09:36 pm Trans#00220

TRANSACTION RECORD

Card # : [REDACTED]
Card Entry: SWIPED
Acct : MASTERCARD
Trans type: PRE AUTHORIZATION

Amount : \$54.60
Tip : 7.00
Total : 62.60

Auth # : 035649
Sequence #: 0012220050
Terminal #: 66095916
Date : 13/01/30
Time : 21:36:48

01/027 APPROVED - THANK YOU

Cardholder Signature

Cardholder will pay card issuer
above amount pursuant
to Cardholder Agreement

AHS GORD WINKEL
DON JOHANSSON

ATRIUM CAFE & SKYLIGHT LOUNGE
135 SOUTHLAND DRIVE S.E.
CALGARY, AB

Term ID: 05219903 BREAKFAST

Purchase

MASTERCARD Entry Method: C

Amount: \$ 31.97
Tip: \$ 4.00

Total: \$ 35.97

2013/01/31 07:03:23

Seq #: 0010870010

Appr Code: 005316

Resp Code: 01/027

MASTERCARD

APPROVED
Thank You

Customer Copy

- IMPORTANT -
retain this copy for your records

ATRIUM CAFE & SKY
LIGHT LOUNGE

0013 TABLE 600 #Party 1

SvrCk: 2 6:42 01/31/13

ATRIUM CAFE

1 OATMEAL STEEL CUT 6.00
1 SIDE TOAST 3.00
1 BREAKFAST BUFFET -hot 17.95
1 REG. 2% MILK 3.50
Sub Total: 30.45
GST : 1.52
Guest 1 TOTAL: 31.97

Sub Total: 30.45
GST : 1.52
01/31 07:01 TOTAL: 31.97

TIP: 4.00

TOTAL: 35.97

ROOM #: _____

PRINT NAME: _____

SIGNATURE: _____

PLEASE PAY SERVER


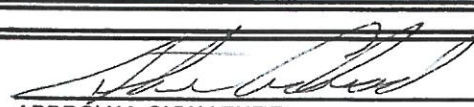
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ALBERTA HEALTH SERVICES BOARD MEMBER REMUNERATION AND EXPENSE CLAIM

Name: Gord Winkel				(For Board Office Use Only) A/P Vendor ID#:					
Phone #: XXXXXXXXXX				Travel Period Month: February 2013					
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		B	L	D	AMOUNT				
14 Feb/13	QSC Teleconference Dr. V. Yiu, Ronda White								
22/Feb/13	AHS ERM Mtg. (Enterprise Risk Mgmt.) V. Yiu , Ronda White)						17.00 7 th St. Plaza		
25/Feb/13	Human Resource Committee						(parking)		
27 Feb/13	Quality Safety Committee								
TOTAL KMS									
APPLICABLE MILEAGE RATE @								50.5¢	
SUB-TOTAL (carry forward to continuation sheet, where applicable)					A	B	C	D	E
							17.00		

FOR ACCOUNTS PAYABLE EXPENSE CODING		
Description	Coding	Amount
MEAL (A)	101.0005.71110300004.45000000	
TRAVEL EXPENSE (B+C+E)	101.0005.71110300004.62212000	17.00
OTHER (D)	101.0005.71110300004.41090000	
GRAND TOTAL		17.00

<p> CLAIMANT SIGNATURE</p> <p>MARCH 1 / 2013 DATE SUBMITTED</p>	<p> APPROVAL SIGNATURE</p> <p>MAR 8 / 13 DATE APPROVED</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="3" style="text-align: center;">meals</td> <td style="text-align: center;">breakfast</td> <td style="text-align: right;">\$9</td> </tr> <tr> <td style="text-align: center;">lunch</td> <td style="text-align: right;">\$11</td> </tr> <tr> <td style="text-align: center;">dinner</td> <td style="text-align: right;">\$20</td> </tr> <tr> <td colspan="2" style="text-align: center;">Lodging per night</td> <td style="text-align: right;">\$20</td> </tr> <tr> <td colspan="2" style="text-align: center;">Per diem 24-hour</td> <td style="text-align: right;">\$7</td> </tr> </table>	meals	breakfast	\$9	lunch	\$11	dinner	\$20	Lodging per night		\$20	Per diem 24-hour		\$7
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REMUNERATION AND EXPENSE CLAIM CONTINUATION SHEET

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T2W 3N2, Attention: Lou DeCoste

LD

PLACE ON DASH FACE UP

PLACE ON DASH FACE UP

PLACE ON DASH FACE UP

(SAME DAY 18h00)

Standard Parking 106 Street

Machine Web ID = LOT 106B

EXPIRES

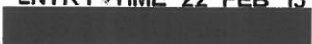
22 FEB

18:00

PAID

\$17.00C

ENTRY TIME 22 FEB 13 08:23



PLACER SUR LE TABLEAU DU BORD
CE CÔTÉ VISIBLE

PLACER SUR LE TABLEAU DU BORD
CE CÔTÉ VISIBLE

PLACER SUR LE TABLEAU
CE CÔTÉ VISIBLE

AHS
Enterprise
Risk Mgmt
RISK
ALGWT
SESSION
(Dr. V. Yiu
Ronda White)
H. Str. Plaza