

## **Board and Executive Expense Report**

Name Title Dr. Ruth Collins-Nakai AHS Board Member

Location

Expenses submitted during the month of Ocotber 2012

Source Date Document	Purpose	Aiı	rfare	M	leals	Acco	mmodation	Other Travel	Total Travel		rofessional evelopment (2)	S Ho:	Vorking lessions sting and ospitality (3)	ther
October 2012 Expense Claim Va	rious meetings							18	18					
Total		\$	-	\$		\$		\$ 18	\$ 18	-\$		\$	-	\$ 
Total for the Month \$ 18														
Maximum meal expense claimed in Maximum daily hotel rate claimed in Non economy air travel in the mon	n 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

1	Or Ruth Cell	-			1		STATE OF THE STATE OF	pard Office Use	STRY! AIP	vendor ID#:	
Phone #:							İ	Period Month:		tolier	adi
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)	MUEACE	
17/10/12	asc Velecon	В	L	D	AMOUN	Т					
18/10/12	AFC "					+					
22/10/12	HRC					1					
0/10/12	MA Dinner-parking	H	-	-		+		17.50			
1/10/12	AHS Pord Strat Pln. AHS CON	H	+	1		+					
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\$7.35

Per diem 24-hour

Expenses Regulation" and hereby confirm that the expenses claimed are in compliance with

DISPLAY THIS SIDE UP ON DASHBOARD

**DETACH RECEIPT FROM TICKET** 

EXPIRATION DATE

EXPIRATION TIME (X)

DATE ISSUED TIME ISSUED

AMOUNT PAID

\$ 17.50

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NON TRANSFERABLE

CREDIT CARD NUMBER LOT E-WEST CC

