

Official Administrator and Executive Expense Report

Name Barbara Burton
Title Official Administrator Committee Member
Location Edmonton
 Expenses submitted during the month of January 2014

Travel (1)										
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Feb-14	Expense Claim	Meetings	796	23		288	1,107			
Total			\$ 796	\$ 23	\$ -	\$ 288	\$ 1,107	\$ -	\$ -	\$ -

Total for the Month \$ 1,107

Maximum meal expense claimed in the month \$ 12
 Maximum daily 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) 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

AHS - AP Processing - Internal Use Only	
Voucher #	
Naming Convention:	
T4A/NR Applicable? - If yes, indicate line & amt	

OFFICIAL ADMINISTRATOR AND COMMITTEE MEMBER REMUNERATION AND EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION

Name:	Barbara Burton	Vendor# (if known)		Expense Period Month:	Jan/Feb 2014
Address:		City:	Edmonton	Province:	AB
Postal Code:		Country:		Phone #:	
Reason for Expense &/or Business Case					

SECTION 2: FINANCE CODING & TOTAL CLAIM

Description	Corp/BU/Or g	Location (if applicable)	Functional Centre/Primary	Expense/ Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	101	0005	71110300004	45000000	\$23.20
Travel Exp (B+C+E)	101	0005	71110300004	62212000	\$1,084.02
Other (D)	101	0005	71110300004	41090000	\$0.00
TOTAL PAYMENT					\$1,107.22

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

SECTION 3: AUTHORIZATION

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 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.

Claimant (Print Name)	Signature: I, by signing this form, attest that I am compliant with all the above statements	Date	Phone#
Barbara Burton		Feb 9/14	

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 Name)	Position Title/Program Group	Date	Phone#
Dr. John Cowell	Official Administrator	Feb. 24/14	
Signature: I, by signing this form, attest that I am compliant with all the above statements	DOFA Level	Position#	

- 1) All cheques and attachments will be mailed out by Accounts Payable. Cheques will NOT be pulled and returned to departments for mailing.
- 2) Non-compliant and incomplete/improperly authorized payment requisitions will be returned without processing.

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. For more information, questions or concern about the collection, use or disclosure of your health personal information, please contact Mark Paika, Director Accounts Payable at 780-735-0508 or email: Mark.Paika@albertahealthservices.ca

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

Carry forward from Section 1

Name:	Barbara Burton	Vendor# (if known)		Expense Period Month:	Jan/Feb 2014
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 above					

Carry forward from Section 1

Name:	Barbara Burton	Vendor# (if known)	Expense Period Month:	Jan/Feb 2014
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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 above

SECTION 4A: OFFICIAL ADMINISTRATOR & COMMITTEE MEMBER - TRAVEL EXPENSE CLAIM

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt) (A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)
			Allowance		With Receipt					
			Meal Type	Allowance	Meal Type	With Receipt				
29-Jan-14	Human Resources Advisory Committee Meeting		L-\$11.60	\$11.60						
29-Jan-14	Airfare from YEG to YYC and return for HR Advisory Committee Meeting							\$326.81		
29-Jan-14	Parking at YEG Airport to attend HR Advisory Committee Meeting							\$23.00		
29-Jan-14	Taxi fares in YYC to attend HR Advisory Committee Meeting							\$120.00		
5-Feb-14	Human Resources Advisory Committee Meeting		L-\$11.60	\$11.60						
5-Feb-14	Airfare from YEG to YYC and return for HR Advisory Committee Meeting							\$489.61		
5-Feb-14	Parking at YEG Airport to attend HR Advisory Committee Meeting							\$23.10		
5-Feb-14	Taxi fares in YYC to attend HR Advisory Committee Meeting							\$121.50		
Total: (amount auto fills to page 1)				\$23.20		\$0.00	\$0.00	\$1,084.02	\$0.00	0.00

OA COMMITTEE MEMBER Mileage Rate

0.505

Total Mileage

\$

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

Created: November 01, 2013

Rev 2 eff February 06, 2014

Air Canada <confirmation@aircanada.ca>

To: burtonshome@telus.net

Air Canada - 29-Jan: Edmonton - Calgary (booking ref: [REDACTED])

11 January, 2014 7:08 PM

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****

AIR CANADA 

Itinerary/Receipt

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

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Need a car in Calgary? Great rates and additional Aeroplan Miles. **AVIS** **Budget**

Booking Information

Booking Reference: [REDACTED]

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Main Contact:

Ms Barbara Joanne Burton

Mobile: [REDACTED]

Home: [REDACTED]

Customer Care

Air Canada

1-888-247-2262

Flight Arrivals and Departures

1-888-422-7533

Online Services

- **Manage** my booking online (view/change my booking; select seats*).
- **Select Seats**
- **Maple Leaf Lounge | Meal Vouchers | On My Way**
- **Alert me** of flight status changes directly to my mobile phone or email.

- **Flight Arrivals & Departures** - check online if my flight is on time.
- **Check-in online** and print my boarding pass.

* Can my booking be changed online?

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8139 ¹	Edmonton, Edmonton Int'l (YEG) Wed 29-Jan 2014 10:00	Calgary (YYC) Wed 29-Jan 2014 10:53	0	0hr53	DH3	Flex, G	
AC8160 ¹	Calgary (YYC) Wed 29-Jan 2014 18:30	Edmonton, Edmonton Int'l (YEG) Wed 29-Jan 2014 19:23	0	0hr53	DH3	Flex, G	

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Ms Barbara Joanne Burton : Adult (16+), Ticket Number: [REDACTED]

Air Canada - Aeroplan [REDACTED]

Meal Preference : **None**

Payment Card: [REDACTED]

Special Needs: **None**

Seat Selection: **None**

Purchase Summary

Fare Summary

Passenger Type	Adult
Air Transportation Charges	
Departing Flight - Flex	109.00
Return Flight - Flex	109.00
Surcharges	24.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	55.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	15.56
Air Travellers Security Charge (ATSC)	14.25
Total airfare and taxes before options (per passenger)	326.81
Number of passengers	1
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$326.81

Payment Information

Credit/Debit Card [REDACTED] - Amount paid: **\$326.81**

The following charges (tax inclusive) will appear on your credit or debit card statement:

- Air Canada: \$326.81 (Airfare - per ticket)

Ticket number(s): [REDACTED]

enRoute City Guide

* TRANSACTION RECEIPT *
Checker/Yellow Cabs
316 Meridian Road SE
Calgary, AB, T2A 1X2
403-299-9999

Taxi Service
TYPE: MasterCard
CARD: [REDACTED]
EXP: [REDACTED]
DATA: SWIPED
Terminal ID: [REDACTED]
Transaction Reference Number: [REDACTED]

DATE: 2014/01/29 17:05:03
AUTH: [REDACTED]
IFID: 10129853
DRV: 870
VEH: 135
GST: 125509356
Meter Start Time: 16:17:13
Meter Stop Time: 17:03:58
Distance: 29.7 Km

FARE 1: \$ 60.00
FLAT: \$ 0.00
TAX: \$ 2.50
TOTAL FARE: \$ 62.50
PAYMENT AMOUNT: \$ 62.50
TIP: \$ 7.50

TOTAL PAYMENT: \$ 60.00
Purchase Auth Complete
Cardholder Copy

ASSOCIATED CAB ALTA LTD
387 - 41 AVE NE (403) 299-1111
INSIST ON THE PROFESSIONALS

DATE: 2014/01/29
PICK-UP TIME: 11:04
DROP-OFF TIME: 11:28
TRIP ID: 8
LOCATION: 873888-45824183787
CAR NUMBER: [REDACTED]
CARD TYPE: [REDACTED]
CARD: [REDACTED]
EXPIRY: [REDACTED]
AUTH: [REDACTED]

FARE (\$): 52.98
EXTRA (\$): 0.00
SUBTTL (\$): 52.98

TIP (\$): 7.10

TOTAL (\$): 60-

SIGNATURE: [Signature]

FOR ONLINE TAXI BOOKINGS VISIT
OUR WEBSITE @ WWW.ASSOCIATEDCAB.CA

CUSTOMER'S COPY

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax Code CA5%

POF 1st FL 20/01/14 19:52
Receipt [REDACTED]

Short-term parking tkt
DL - No. 076486
29/01/14 08:46 -
30/01/14 08:45 -
Period 1d0h0'
(Tax) \$23.00

Total \$23.00

Payment Received
MC \$23.00

Type: Swiped

Sub Total \$21.90
Tax 5% 1.10

Air Canada <confirmation@aircanada.ca>

To: burtonshome@telus.net

Air Canada - 05-Feb: Edmonton - Calgary (booking ref: [REDACTED])

29 January, 2014 10:10 PM

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****

AIR CANADA 

Itinerary/Receipt

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

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in at any Air Canada check
in kiosk.



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Booking Information

Booking Reference: [REDACTED]

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Main Contact:

Ms Barbara Joanne Burton

Mobile: [REDACTED]

Home: [REDACTED]

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- **Alert me** of flight status changes directly to my mobile phone or email.

- **Flight Arrivals & Departures** - check online if my flight is on time.
- **Check-in online** and print my boarding pass.

* Can my booking be changed online?

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
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AC8156 ¹	Calgary (YYC) Wed 05-Feb 2014 17:30	Edmonton, Edmonton Int'l (YEG) Wed 05-Feb 2014 18:23	0	0hr53	DH4	Flex, W	

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Ms Barbara Joanne Burton : Adult (16+), Ticket Number: [REDACTED]			
Air Canada - Aeroplan :	[REDACTED]	Meal Preference :	None
Payment Card:	[REDACTED]	Special Needs:	None
Seat Selection:	None		

Purchase Summary

Fare Summary	
Passenger Type	Adult
Air Transportation Charges	
Departing Flight - <u>Flex</u>	187.00
Return Flight - <u>Flex</u>	167.00
<u>Surcharges</u>	24.00
Taxes, Fees and Charges	
<u>Canada Airport Improvement Fee</u>	55.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	22.36
<u>Air Travellers Security Charge (ATSC)</u>	14.25
Total airfare and taxes before options (per passenger)	469.61
Number of passengers	1
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$469.61

Payment Information

Credit/Debit Card [REDACTED] amount paid: **\$469.61**

The following charges (tax inclusive) will appear on your credit or debit card statement:

- Air Canada: \$469.61 (Airfare - per ticket)

Ticket number(s): [REDACTED]

enRoute City Guide

merchant Copy

* TRANSACTION RECEIPT *
Checker/Yellow Cabs
316 Meridian Road SE
Calgary, AB. T2A 1X2
403-299-9999

Taxi Service
TYPE: AMEX
CARD: [REDACTED]
EXP: [REDACTED]
DATA: [REDACTED]
Terminal ID: [REDACTED]
Transaction Reference
Number: 001977595725084
DATE: 2014/02/05 16:56:43
AUTH: [REDACTED]
IFID: [REDACTED]
DRV: 6674
VEH: 490
GST: 831008123
Meter Start Time:
16:22:24
Meter Stop Time:
16:55:31
Distance: 29.8 Km
FARE 1: \$ 52.90
FLAT: \$ 0.00
TAX: \$ 0.00
TOTAL FARE: \$ 52.90
PAYMENT AMOUNT: \$ 52.90
TIP: \$ 7.10
TOTAL PAYMENT: \$ 60.00
Purchase Auth Complete

ASSOCIATED CAB
404-35 AVENUE N E T2E2K7
CALGARY AB
932650000710

1111 PURCHASE 1111
02-05-2014 12:37:30
Acct # [REDACTED] S
Exp Date [REDACTED] Card Type AM
Name: BARBARA J BURTON

Trace # 880004
K22143180421

Inv [REDACTED] RRN 001002565
Auth [REDACTED]
Purchase \$54.50
Tip \$7.00
Total \$61.50

Retain this copy for your
records
Customer copy

www.associatedcab.ca
403-299-1111

EDMONTON AIRPORTS
GST # R128599776
VALET PARKING

02/05/2014 7:02PM 0002
000001#0041 SH/T B

PARKING \$22.00
NDSE ST \$22.00
GSTAX \$1.10

DEBIT/C \$23.10

IMPARK00020408A
INT'L AIRPORT SERVICE ROAD
EDMONTON, AB, T5J2T2
GST#: 00000000000000

TID: 102

SALE

Chequing
CHIP

02/05/2014 19:01:40 Inv#: 43105
Record#: 130030 Batch#: 036002
Retrieval#: 00000030
Trace: [REDACTED]

A000000277010 Interac
TVR 0000000000 TSI F800

Total: \$23.10

Auth Code: [REDACTED]
APPROVED

Customer copy