

## Board and Executive Expense Report

**Name** Carolyn Hoffman  
**Title** Acting SVP, Quality and Healthcare Improvement  
**Location** Edmonton  
 Expenses submitted during the month of January 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 to January 2013	Expense Claim	Various meetings				145	145			
November 2012 to January 2013	Direct Billing	Various presentations and meetings	1,003			302	1,305			
<b>Total</b>			\$ 1,003	\$ -	\$ -	\$ 447	\$ 1,450	\$ -	\$ -	\$ -

**Total for the Month** \$ 1,450

Maximum meal expense claimed in the month \$ -  
 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



**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: 7-Dec-12 To 30-Jan-13  
 Travel Period from: 7-Dec-13 To 30-Jan-13 (if applicable)  
 Out-of-Province Travel No

Name: Carolyn Hoffman Position (Title): Acting SVP, Quality & Healthcare Improvement  
 Location: Seventh Street Plaza Dept: QHI DOFA Level: 3b (if applicable) Union: OOS Business Phone #: Ext:   
 Employee # (E-People): Employee # (REQUIRED # prior to E-People migration):

**SECTION E: FINANCE CODING & TOTAL CLAIM**

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

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT		
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/ Expense	Total Expense	Total Section B	Total Section C&D	
2A	101	0006	71110600021	\$144.76						\$144.76		
2B												
2C												
2D												
				\$144.76								

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

\*\*User to enter Coding & \$ amounts

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

TOTAL CLAIM \$144.76

**SECTION F: AUTHORIZATION**

If applicable, print the name of the person (other than claimant) that prepared the claim along with phone number so if there are any questions contact can be easily made. Employee and approval signatures required as well as DOFA level (delegation of authority level) and Position # of the approver.

Claim Prepared by (PRINT ONLY): Candace Humenny Phone # Ext

I hereby acknowledge that I have read the "Travel, Hospitality and Working Session Expenses Policy" of Alberta Health Services and hereby confirm that the expenses claimed are in compliance with such policy. I hereby certify that the expenses listed above have not been previously claimed by me or on my behalf from Alberta Health Services or other organization.

Employee Signature: Date January 25, 2013

I hereby certify that I have reviewed the expenses and they are in accordance with the applicable policies (Policy #'s 1118, 1122). Approved claim form with receipts should be sent by the approver directly to Accounts Payable for processing.

Approved By (PRINT ONLY): Dr. Verne Ylin DOFA Level 2b Position # Phone # Ext  
 Signature: Title EVP & CMO, Quality & Medical Affairs Date JAN 25 13

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. For more information, question or concern about the collection, use or disclosure of your health and personal information, please contact Mark Palke, Director Accounts Payable at 780-735-0506 or email: Mark.Palke@albertahealthservices.ca

**EXPENSE CLAIM DETAILS**

Enter Finance Coding **101 • 0006 • 71110600021**      Emp # (E-People) \_\_\_\_\_      Emp # (prior to E-people) \_\_\_\_\_      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 if more lines are 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 menu (column Province) 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	Purpose of Travel 55 characters maximum ~length of shaded area	Province, US, or Out of N.America	What is travel related to?	Meal (Select type from dropdown)			Airfare Bus/LRT Parking	Hotel	Rental Car	Taxi	Fuel	Mileage (km)
				Type	w/receipt	w/o receipt or per diem						
12-Jan-13	Attend Executive Education Speaker Series	AB	Meeting				\$23.00			\$85.00		
12-Jan-13	Mileage to and from Edmonton airport	AB	Meeting									52.00
7-Dec-12	Parking at Red Arrow for Integrated Curriculum	AB	Meeting				\$10.50					
<b>SUBTOTALS</b>							\$33.50			\$85.00		Total Kms 52.00

<p align="center"><b>MEAL PER DIEM RATES</b></p> <p>B = Breakfast = \$9.20    L = Lunch = \$11.60    D = Dinner = \$20.75    A = ALL MEALS = \$41.55                  BL = Breakfast &amp; Lunch = \$20.80    BD = Breakfast &amp; Dinner = \$29.95    LD = Lunch &amp; Dinner = \$32.35</p>	Enter \$0.505 km, \$0.47 km OR rate per Union Agreement <i>(see Mileage details to the left)</i>	\$0.505
		Mileage \$
<p align="center"><b>MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle</b></p> <p>→ details of travel location to &amp; from must be included above under the purpose of travel column</p> <p>\$0.505 per km for under 5,000km/yr                  \$0.47 per km for over 5,000km/yr                  or per Union Agreement</p>	Travel \$ Subtotal	\$118.50
	Enter on page 1 TOTAL TRAVEL \$	\$144.76

**Note:** Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2s can be found at end of form

BEST WESTERN CEDAR PARK INN

5116 Gateway Blvd.  
Edmonton, AB T6H 2H4



(780) 434-7411

reservations@cedarparkinn.com

Registered To:

Parking (MUST be 0 Balance), PARK

Room # HOUSE ACCOUNT

Transfer To

Conf #

Arrival 12/07/12

Departure 12/07/12

Group

Room Type

Guests 0 / 0

Payment

Acct

Posting	Oper	AcctCo	Description	From	Reference	Amount
12/07/12	SAM	CH	PAYMENT CASH		PARKING #12514	\$10.50-
<b>Balance Due</b>						<b>\$10.50-</b>

Parking at Cedar Park Inn Red Arrow station in  
Edmonton to take bus to Calgary for the  
QHI Integrated Curriculum Development Forum

THE UNDERSIGNED GUEST AGREES TO PAY THE AMOUNT INDICATED ON THE BALANCE DUE PORTION OF THIS INVOICE. IF THE CHARGES ARE TO BE BILLED TO A THIRD PARTY, THE UNDERSIGNED AGREES TO BE PERSONALLY LIABLE FOR PAYMENT OF THE CHARGES IN THE EVENT THAT THE INDICATED THIRD PARTY, PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF SUCH CHARGES.

GST# 851767210RP0001

Signature \_\_\_\_\_





## Executive Expenses Report Direct Billing Summary

**Purpose of This Form:**

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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. hotel accommodation, airline tickets, car rental, hosting events and working sessions).
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all other expenses paid by AHS not mentioned above
- Copies of invoices and other relevant back up must be attached including approvals for working sessions/hosting events
- 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: Yes  No

**Name: Carolyn Hoffman, Acting SVP, QHI**
**Reporting Period for the Month of: November 2012 & January 2013**

Date	Payment Method	Category	Description/Purpose for Expense	Name of Vendor Paid	Amount Paid
2012-11-30	Direct Billing	Transportation	Present on Quality to Dept. of Medicine, University of Calgary	Marlin Travel	\$542.96
2012-12-07	Direct Billing	Transportation	Attend QHI Integrated Curriculum Development Forum (/w team)	Marlin Travel	\$150.96
2013-01-12	Direct Billing	Transportation	Attend Executive Education Speaker Series as co-sponsor	Marlin Travel	\$459.96
2012-01-30	Direct Billing	Transportation	Present to Committee of the	Marlin Travel	\$150.96

Presentation on Quality to  
the Department of  
Medicine at University of Calgary

MARLIN TRAVEL  
O-O PERCY HUNT TRAVELGROUP INC  
MAIN FLOOR, 9929 108TH ST.  
EDMONTON, AB T5K 1G8

BRANCH: N61107  
GST REG# 885101915  
PHONE: 780-425-8611

Attended with Dr. Verna Yiu  
and QHI Sr. Leader Team

TO: ALBERTA HEALTH SERVICES

YOUR REF : [REDACTED]  
LOCATOR : [REDACTED]  
OUR REF : ZCH0093635C  
AGENT : ASHLEY QUACH

I N V O I C E  
\*\*\* D U P L I C A T E \*\*\*

INV NO: 85392  
DATE: 27NOV12  
PAGE: 1

FOR: MS CAROLYN HOFFMAN

----- I T I N E R A R Y -----

\*\*\* AIR/RAIL/BUS \*\*\*

FROM	TO	CARRIER	FLT/CL	ST	DATE	DEPART	ARRIVE	MEALS	BAGS
EDMONTON INTL	CALGARY	AIR CANADA	8133 W	HK	30NOV	7:00A	7:52A		
		D8 (300 SERIE SEAT 03C							
CALGARY	EDMONTON INTL	AIR CANADA	8150 V	HK	30NOV	3:30P	4:22P		
		D8 (300 SERIE SEAT 03F							
		AIR CANADA E ONLY WINDOW SEATS REMAINING							

\*\*\* TOUR \*\*\*

BSP TASF DEPARTING FROM EDMONTON INTL ON 01JUL13 AT 12:00A  
TO EDMONTON INTL RET01JUL13 AT 12:00A  
1 PACKAGE TOUR  
FILE RETAINER

----- C O S T -----

AIR CANADA	TKT NO	AC	2523 903448	(INCL 64.96 TAX)	532.96
BSP TASF	TKT NO	954 0004 956042			10.00

\*\*\* SUB-TOTAL EXCLUDING GST/HST & APT 542.96

\*\*\* TOTAL CHARGES THIS INVOICE \*\*\* 542.96

PAYMENT BY [REDACTED] TKT 2523903448 532.96

PAYMENT BY [REDACTED] TKT 0004956042 10.00

\*\*\* BALANCE DUE THIS INVOICE \*\*\*\* 0.00

BALANCE DUE TO DATE 0.00

CONTINUED ON NEXT PAGE

**Candace Humenny**

**From:** Ashley Quach [ashley.quach@marlintravel.ca]  
**Sent:** Tuesday, November 27, 2012 4:40 PM  
**To:** Candace Humenny  
**Subject:** Travel Itinerary - Carolyn Hoffman - Nov 30

You can view or print your e-ticket at [www.viewtrip.com](http://www.viewtrip.com). Reservation number [REDACTED]

MARLIN TRAVEL - GOVERNMENT CENTRE  
OWNED AND OPERATED BY 101017690 SASK. LTD.  
9929 108TH ST - MAIN  
EDMONTON ALBERTA T5K 1G8  
PHONE: (780) 425-8611 FAX: (780) 426-5759  
BRANCH: N61107 GST REG NO. 885101915  
PNR LOC: ZN6CMO DATE: 27 NOV 2012  
AGENT: ASHLEY

TO:  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

FOR:  
HOFFMAN/CAROLYN MS  
[REDACTED]

--ITINERARY--

FROM	TO	CARRIER	FLT/CL	DATE	DEP	ARR	ST
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EDMONTON/INTL	CALGARY	AIR CANADA	8133 W	30 NOV 12	700A	752A	OK
NONSTOP							
EQUIPMENT:DH3							TRAVELLING TIME - :52
OPERATED BY:AIR CANADA EXPRESS							SEAT: 3C
AIRLINE LOCATOR: [REDACTED]							FREQ FLYER NBR: [REDACTED]
TICKET NUMBER 0142523903448							

CALGARY	EDMONTON/INTL	AIR CANADA	8150 V	30 NOV 12	330P	422P	OK
NONSTOP							
EQUIPMENT:DH3							TRAVELLING TIME - :52
OPERATED BY:AIR CANADA EXPRESS							SEAT: 3F
AIRLINE LOCATOR: [REDACTED]							FREQ FLYER NBR: [REDACTED]
ONLY WINDOW SEATS REMAINING							
TICKET NUMBER 0142523903448							

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 24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE [REDACTED] \*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\* PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU



QHI Integrated Curriculum Development  
Forum – met with QHI Sr. Leader team

MARLIN TRAVEL  
O-O PERCY HUNT TRAVELGROUP INC  
MAIN FLOOR, 9929 108TH ST.  
EDMONTON, AB T5K 1G8

BRANCH: N61107  
GST REG# 885101915  
PHONE: 780-425-8611

TO: ALBERTA HEALTH SERVICES

YOUR REF : [REDACTED]  
LOCATOR : [REDACTED]  
OUR REF : ZCH0093549C  
AGENT : ASHLEY QUACH

I N V O I C E  
\*\*\* D U P L I C A T E \*\*\*

INV NO: 85319  
DATE: 26NOV12  
PAGE: 1

FOR: MS CAROLYN HOFFMAN

----- I T I N E R A R Y -----

\*\*\* AIR/RAIL/BUS \*\*\*

FROM	TO	CARRIER	FLT/CL	ST	DATE	DEPART	ARRIVE	MEALS	BAGS
EDMONTON	CALGARY	RED ARROW	001 Y	GK	07DEC	6:15A	9:20A		
RED ARROW CONFIRMATION [REDACTED]									
EDMONTON CEDAR PARK TO CALGARY DOWNTOWN									
SEAT 2A									
CALGARY	EDMONTON	RED ARROW	002 Y	GK	07DEC	4:30P	7:35P		
RED ARROW CONFIRMATION [REDACTED]									
CALGARY DOWNTOWN TO EDMONTON CEDAR PARK									
SEAT 2B									

\*\*\* TOUR \*\*\*

BSP TASF DEPARTING FROM EDMONTON INTL ON 01JUL13 AT 12:00A  
TO EDMONTON INTL RET01JUL13 AT 12:00A  
1 PACKAGE TOUR  
RED ARROW CONFIRMATION [REDACTED]

----- C O S T -----

RED ARROW M	TKT NO RA7	973338	140.96
BSP TASF	TKT NO 954 0004 956002		10.00

\*\*\* SUB-TOTAL EXCLUDING GST/HST & APT 150.96

\*\*\* TOTAL CHARGES THIS INVOICE \*\*\* 150.96

PAYMENT BY [REDACTED] TKT 973338 140.96

PAYMENT BY [REDACTED] TKT 0004956002 10.00

\*\*\* BALANCE DUE THIS INVOICE \*\*\*\* 0.00

BALANCE DUE TO DATE 0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE  
ACCEPTED:.....DECLINED:.....

CONTINUED ON NEXT PAGE

# Candace Humenny

**From:** Ashley Quach [ashley.quach@marlintravel.ca]  
**Sent:** Thursday, December 06, 2012 12:50 PM  
**To:** Candace Humenny  
**Subject:** Travel Itinerary - Carolyn Hoffman - Dec 7 - seat update per Summer

MARLIN TRAVEL - GOVERNMENT CENTRE  
OWNED AND OPERATED BY 101017690 SASK. LTD.  
9929 108TH ST - MAIN  
EDMONTON ALBERTA T5K 1G8  
PHONE: (780) 425-8611  
BRANCH: N61107  
PNR LOC: SH53LS  
AGENT: ASHLEY

FAX: (780) 426-5759  
GST REG NO. 885101915  
DATE: 06 DEC 2012

TO:  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

FOR:  
HOFFMAN/CAROLYN MS

## --ITINERARY--

FROM	TO	CARRIER	FLT/CL	DATE	DEP	ARR	ST
EDMONTON	CALGARY	BUS		1 Y 07 DEC 12	615A	920A	OK
RED ARROW CONFIRMATION [REDACTED] EDMONTON CEDAR PARK TO CALGARY DOWNTOWN SEAT 3C							
TRAVELLING TIME - 3:05							

CALGARY	EDMONTON	BUS		2 Y 07 DEC 12	430P	735P	OK
RED ARROW CONFIRMATION [REDACTED] CALGARY DOWNTOWN TO EDMONTON CEDAR PARK SEAT 5A							
TRAVELLING TIME - 3:05							

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  
24 HOUR EMERGENCY HELP DESK  
WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292  
OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147  
PLEASE QUOTE ACCESS CODE [REDACTED]

\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU  
FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE  
DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS  
MAY BE YOUR RESPONSIBILITY

-----RED ARROW-----  
RESERVATION MAY BE CHANGED OR CANCELLED AT LEAST  
2 HOURS PRIOR TO DEPARTURE.

Attend Executive Education  
Speaker Series in Calgary

MARLIN TRAVEL  
O-O PERCY HUNT TRAVELGROUP INC  
MAIN FLOOR, 9929 108TH ST.  
EDMONTON, AB T5K 1G8

BRANCH: N61107  
GST REG# 885101915  
PHONE: 780-425-8611

TO: ALBERTA HEALTH SERVICES

YOUR REF : [REDACTED]  
LOCATOR : [REDACTED]  
OUR REF : ZCH0094840C  
AGENT : ASHLEY QUACH

INVOICE  
\*\*\* D U P L I C A T E \*\*\*

INV NO: 86434  
DATE: 04JAN13  
PAGE: 1

FOR: MS CAROLYN HOEFMAN

----- I T I N E R A R Y -----

\*\*\* AIR/RAIL/BUS \*\*\*

FROM	TO	CARRIER	FLT/CL	ST	DATE	DEPART	ARRIVE	MEALS	BAGS
EDMONTON INTL	CALGARY	AIR CANADA	8133 T	HK	12JAN	7:00A	7:53A		
		D8 (300 SERIE SEAT 03D							
CALGARY	EDMONTON INTL	AIR CANADA	8150 V	HK	12JAN	3:30P	4:24P		
		D8 (300 SERIE SEAT 03D							
		AIR CANADA E							

\*\*\* TOUR \*\*\*

BSP TASF DEPARTING FROM EDMONTON INTL ON 01SEP13 AT 12:00A  
TO EDMONTON INTL RET01SEP13 AT 12:00A  
1 PACKAGE TOUR  
FILE RETAINER

----- C O S T -----

AIR CANADA	TKT NO	AC	2524 147557	(INCL 64.96	TAX)	449.96
BSP TASF	TKT NO	954 0004 983318				10.00

*** SUB-TOTAL EXCLUDING GST/HST & APT	459.96
*** TOTAL CHARGES THIS INVOICE ***	459.96
PAYMENT BY [REDACTED] TKT 2524147557	449.96
PAYMENT BY [REDACTED] TKT 0004983318	10.00
*** BALANCE DUE THIS INVOICE ****	0.00
BALANCE DUE TO DATE	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE  
ACCEPTED:.....DECLINED:.....

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# Candace Humenny

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**From:** Ashley Quach [ashley.quach@marlintravel.ca]  
**Sent:** Friday, January 04, 2013 5:00 PM  
**To:** Candace Humenny  
**Subject:** Travel Itinerary - Carolyn Hoffman - Jan 12

You can view or print your e-ticket at [www.viewtrip.com](http://www.viewtrip.com). Reservation number [REDACTED]

MARLIN TRAVEL - GOVERNMENT CENTRE  
OWNED AND OPERATED BY 101017690 SASK. LTD.  
9929 108TH ST - MAIN  
EDMONTON ALBERTA T5K 1G8  
PHONE: (780) 425-8611 FAX: (780) 426-5759  
BRANCH: N61107 GST REG NO. 885101915  
PNR LOC: Z3B8CA DATE: 04 JAN 2013  
AGENT: ASHLEY

TO:  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

FOR:  
HOFFMAN/CAROLYN MS  
[REDACTED]

--ITINERARY--

FROM	TO	CARRIER	FLT/CL	DATE	DEP	ARR	ST
EDMONTON/INTL	CALGARY	AIR CANADA	8133 T	12 JAN 13	700A	753A	OK
NONSTOP							
EQUIPMENT:DH3		TRAVELLING TIME - :53					
OPERATED BY:AIR CANADA EXPRESS		SEAT: 3D					
AIRLINE LOCATOR: [REDACTED]		FREQ FLYER NBR: [REDACTED]					
TICKET NUMBER 0142524147557							
CALGARY	EDMONTON/INTL	AIR CANADA	8150 V	12 JAN 13	330P	424P	OK
NONSTOP							
EQUIPMENT:DH3		TRAVELLING TIME - :54					
OPERATED BY:AIR CANADA EXPRESS		SEAT: 3D					
AIRLINE LOCATOR: [REDACTED]		FREQ FLYER NBR: [REDACTED]					
TICKET NUMBER 0142524147557							

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 24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE [REDACTED]  
\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE

MARLIN TRAVEL  
O-O PERCY HUNT TRAVELGROUP INC  
MAIN FLOOR, 9929 108TH ST.  
EDMONTON, AB T5K 1G8

BRANCH: N61107  
GST REG# 885101915  
PHONE: 780-425-8611

TO: ALBERTA HEALTH SERVICES  
[REDACTED]

YOUR REF : [REDACTED]  
LOCATOR : [REDACTED]  
OUR REF : ZCH0095687C  
AGENT : ASHLEY QUACH

I N V O I C E  
\*\*\* D U P L I C A T E \*\*\*

INV NO: 87200  
DATE: 21JAN13  
PAGE: 1

FOR: MS CAROLYN HOFFMAN  
[REDACTED]

----- I T I N E R A R Y -----

\*\*\* AIR/RAIL/BUS \*\*\*

FROM	TO	CARRIER	FLT/CL	ST DATE	DEPART	ARRIVE	MEALS	BAGS
EDMONTON	CALGARY	RED ARROW	001 Y	GK 30JAN	6:15A	9:20A		
		RED ARROW CONFIRMATION [REDACTED]						
		EDMONTON CEDAR PARK TO CALGARY DOWNTOWN						
		SEAT 2A						
CALGARY	EDMONTON	RED ARROW	002 Y	GK 30JAN	4:30P	7:35P		
		RED ARROW CONFIRMATION [REDACTED]						
		CALGARY DOWNTOWN TO EDMONTON CEDAR PARK						
		SEAT 3B						

\*\*\* TOUR \*\*\*

BSP TASF DEPARTING FROM EDMONTON INTL ON 01SEP13 AT 12:00A  
TO EDMONTON INTL RET01SEP13 AT 12:00A  
1 PACKAGE TOUR  
RED ARROW CONFIRMATION [REDACTED]

----- C O S T -----

RED ARROW M	TKT NO	RA7	1004025		
BSP TASF	TKT NO	954 0004	991930		140.96
					10.00
*** SUB-TOTAL EXCLUDING GST/HST & APT					150.96
*** TOTAL CHARGES THIS INVOICE ***					150.96
PAYMENT BY	[REDACTED]	TKT	1004025		140.96
PAYMENT BY	[REDACTED]	TKT	0004991930		10.00
*** BALANCE DUE THIS INVOICE ****					0.00
BALANCE DUE TO DATE					0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE  
ACCEPTED:.....DECLINED:.....

CONTINUED ON NEXT PAGE

# Candace Humenny

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**From:** Ashley Quach [ashley.quach@marlintravel.ca]  
**Sent:** Thursday, January 24, 2013 10:50 AM  
**To:** Candace Humenny  
**Subject:** Travel Itinerary - Carolyn Hoffman - Jan 30

MARLIN TRAVEL - GOVERNMENT CENTRE  
OWNED AND OPERATED BY 101017690 SASK. LTD.  
9929 108TH ST - MAIN  
EDMONTON ALBERTA T5K 1G8  
PHONE: (780) 425-8611 FAX: (780) 426-5759  
BRANCH: N61107 GST REG NO. 885101915  
PNR LOC: RPFL50 DATE: 24 JAN 2013  
AGENT: ASHLEY

TO:  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

FOR:  
HOFFMAN/CAROLYN MS  
[REDACTED]

--ITINERARY--

FROM	TO	CARRIER	FLT/CL	DATE	DEP	ARR	ST
EDMONTON	CALGARY	BUS	1 Y	30 JAN 13	615A	920A	OK

TRAVELLING TIME - 3:05

RED ARROW CONFIRMATION [REDACTED]  
EDMONTON CEDAR PARK TO CALGARY DOWNTOWN  
SEAT 2A

CALGARY	EDMONTON	BUS	2 Y	30 JAN 13	630P	950P	OK
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TRAVELLING TIME - 3:20

RED ARROW CONFIRMATION [REDACTED]  
CALGARY DOWNTOWN TO EDMONTON CEDAR PARK  
SEAT 9A

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  
24 HOUR EMERGENCY HELP DESK  
WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292  
OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147  
PLEASE QUOTE ACCESS CODE [REDACTED]

\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU  
FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE  
DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS  
MAY BE YOUR RESPONSIBILITY

-----RED ARROW-----  
RESERVATION MAY BE CHANGED OR CANCELLED AT LEAST  
2 HOURS PRIOR TO DEPARTURE.