

Official Administrator and Executive Expense Report

Name Dr. Gerry Predy
Title Senior Medical Officer of Health
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)
Jan-14	Expense Claim	Meetings & Conferences	1,635			324	1,959			1,610
Total			\$ 1,635	\$ -	\$ -	\$ 324	\$ 1,959	\$ -	\$ -	\$ 1,610

Total for the Month \$ 3,569

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: 1-Jan-14 To 31-Jan-14

Travel Period from: To 9 applicable

Name: Dr. Geny Prody

Position (Title): Senior Medical Officer of Health

Location: Edmonton

Dept:

DOFA Level:

(if applicable)

Union:

Business Phone #:

Ext:

Employee # (E-People):

SECTION E: FINANCE CODING & TOTAL CLAIM

CAPITAL PROJECT CODING ONLY →

Project Number

Project Task Number

Expenditure Organization

Expenditure Type

Total - Section B: Travel - Pg 2

Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense
2A	101	0306	71552000133	\$1,532.93
2B	101	0306	71552000133	\$426.33
2C				
2D				
				\$1,959.26

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

Total - Section C&D: Other & Foreign Expenses - Pg 3

Bal Unit	Location	Functional Centre (FC)	Secondary/ Expense	Total Expense
101	0306	71552000133	66020000	\$1,000.00
101	0306	71552000133	61500010	\$610.20
				\$1,610.20

**User to enter Coding & \$ Amounts

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

TOTAL REIMBURSEMENT

Total Section B	\$1,959.26
Total Section C&D	\$1,610.20
Less Cash Advance	
TOTAL CLAIM	\$3,569.46

SECTION F: AUTHORIZATION

I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.

I attest the expenses evidenced 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.

Travel, Hospitality and Working Session Expense Policy - Document# 1122

I, by signing this form, attest that I am compliant to all the above statements.

Employee Signature:

Date

Feb. 3, 2014

I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.

I attest the expenses evidenced 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 claim form with receipts should be sent by the approver directly to Accounts Payable for processing.

Approved By (PRINT ONLY): Dr. Verna Yiu

DOFA Level

Position #

Phone #

Ext

I, by signing this form, attest that I am compliant to all the above statements.

Signature:

Title

VP Quality + CMO

Date

Feb 7 / 14

I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.

I attest the expenses evidenced 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 ONLY):

DOFA Level

Position #

Phone #

Ext

I, by signing this form, attest that I am compliant to all the above statements.

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.

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 0304 71542000133

Emp # (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 (column Prov) 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.

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 on this page

Date dd-mm-yy	Business Reason for Travel - Detailed Description Required (Include destination, who attended (if meal), why travel was necessary and detailed explanation of reason). A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.America where expenses incurred?	What is travel related to?	Cost Effective Method Used? Y/N	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi			
					Meal Type with value	Allowance	Meal Type	with receipt						
8-Jan-14	Travel from Coronation Plaza to SSP return for Influenza Meeting											\$18.00 ✓		18.00 ✓
10-Jan-14	Travel from Coronation Plaza to SSP return for COEC Meeting											\$26.00 ✓		18.00 ✓
14-Jan-14	Travel from Coronation to Telus return for Meeting with CMOH											\$7.50 ✓		16.00 ✓
14-Jan-14	Airfare Edmonton to Toronto Return for TOPH Convention								\$1,003.96 ✓					
18-Jan-14	Travel from Coronation Plaza to Hilton Garden Inn for Co-Management Meeting													12.00 ✓
20-Jan-14	Travel from Coronation Plaza to Telus return for RBS Meeting											\$7.50 ✓		16.00 ✓
22-Jan-14	Travel from Coronation Plaza to SSP return for COEC Meeting											\$18.00 ✓		18.00 ✓
23-Jan-14	Travel to Calgary/return Airfare								\$299.51 ✓		\$106.00 ✓			
SUBTOTALS									\$1,303.47		\$106.00	\$77.00		Total kms 92.00

MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle
→ details of travel location to & from must be included above under the purpose of travel column
Rates applicable \$0.506 per km for under 5,000km/yr or \$0.47 per km for over 5,000km/yr or per Union Agreement

Enter \$0.506 km, \$0.47 km OR rate per Union Agreement
(see Mileage details to the left)

\$0.506

Mileage \$ \$46.46

Travel \$ Subtotal \$1,488.47

Auto fills on page 1 - TOTAL TRAVEL \$ \$1,532.93

Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3

Rationale is Required for expenses that are not Cost Effective

(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

EXPENSE CLAIM DETAILS

Enter Finance Coding

101 0306

71552000133

Emp # (E-People)

Page

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 (column: Prov) where expenses were incurred (Out of N.America = Int'l)
Ensure separate lines are used for claim items that differ in Province, US and Out of North America.

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 on this page

Date dd-mm-yy	Business Reason for Travel - Detailed Description Required (Include destination, who attended (if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.America where expenses incurred?	What is travel related to?	Cost Effective Method Used? Y/N	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/ART/ Parking / Fuel	Per Diem Allowance	Mileage (km)	
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi				
					Meal Type with notes	Allowance	Meal Type	with receipt							
27-Jan-14	Alders Edmonton to Calgary return for Feb 25 meeting									\$331.01					
27-Jan-14	Travel from Corson to SSP return for Perinatal Meeting											\$15.00		16.00	
29-Jan-14	Travel from Corson to SSP return for STI Meeting											\$9.00		16.00	
30-Jan-14	Travel from Corson to SSP for Council of PH Physicians meeting											\$21.00		16.00	
31-Jan-14	Travel from Corson to SSP for Clinical Department of PH Physicians meeting											\$18.00		16.00	
SUBTOTALS										\$331.01			\$83.00		Total Km 64.00

MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle

→ details of travel location to & from must be included above under the purpose of travel column

Rates applicable \$0.506 per km for under 5,000km/yr or \$0.47 per km for over 5,000km/yr or per Union Agreement

Enter \$0.506 km, \$0.47 km OR rate per Union Agreement
(see Mileage details to the left)

\$0.505

Mileage \$

\$32.32

Travel \$ Subtotal

\$394.01

Auto file on page 1 - TOTAL TRAVEL \$

\$426.33

Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3

Rationale is Required for expenses that are not Cost Effective

(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

EXPENSE CLAIM DETAILS

If NOT claiming any expenses in Sections C or D, this page does NOT have to be submitted.

SECTION C: OTHER EXPENSES

Emp # (E-People)

Page 3

• Expenses to be claimed in this section include but are not limited to: Hospitality & Hosting, Working Sessions, Relocation, Continuing Education, Business Insurance, and miscellaneous expenses.

→ If expenses are for travel, gas, etc., go to Section B on pg 2.

• ALL "OTHER" expenses listed below MUST have a secondary expense code indicated

Subtotal "Other Expenses" for each functional centre separately and enter each subtotal into column "Section C Total" on page 1 Section E

Date dd-mm-yy	Business Reason for Expense - Detailed Description Required (include who attended-(if meal/hospitality), why expense was required, what expense was and pertaining to and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page					
		Std Unit	Location	Functional Centre	Secondary/ Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Y/N	Continuing Education Select type from dropdown menu (if applicable)	GST is ON this receipt, enter total amount in this column WITH GST	GST is NOT on this receipt, enter total amount in this column	TOTAL OTHER \$
31-Jan-14	CMPPA 2014	101	0305	71552000133	88020000	Yes		\$1,000.00		\$1,000.00 ✓
31-Jan-14	Registration for TOPH Conference March 31- April 2	101	0308	71552000133	81500010	Yes		\$610.20		\$610.20 ✓

SECTION D: FOREIGN CURRENCY

ONLY ENTER IN THIS SECTION IF AMOUNT NOT CONVERTED INTO CDN \$ (conversion not indicated on receipt/statement)
If foreign currency has been converted to CDN \$ on your receipt, enter expense in CDN \$ in either Section B or C as applicable.

Please click on the following link for the Bank of Canada exchange rate using the date of expense

[Bank of Canada Currency Converter](#)



Select foreign country in "From cell", and Canadian Dollar in "To cell"; Enter date of expense in both date cells then select convert which will give the exchange rate - enter this amount in exchange rate column

Date dd-mm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Secondary Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Y/N	Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page			
		Std Unit	Location	Functional Centre			Foreign Currency Amount	Currency Type	Exchange Rate	Canadian Value

Rationale is Required for expenses that are not Cost Effective

(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

Expenses Paid (Retain a copy for your records)

Do not include amounts paid by Alberta Health Services or reimbursed / reimbursable by another organization

- 3 of 3 -

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time
06:00 PM
JAN 08, 2014

Purchase Date/Time: 07:48am Jan 08, 2014
Total Parking: \$17.14
Total gst: \$0.86
Total Due: \$18.00
Total Paid: \$18.00
Ticket #: [REDACTED]
S/N #: [REDACTED]
Setting: Lot 256
Mach Name: Meter 1
Rate: \$18.00-EarlyBird
Payment Type: Card

Card [REDACTED] American Express
Auth #: [REDACTED]
GST #887315638RT0001

RECEIPT

IMPARK LOT 256
NO IN AND OUT PRIVILEGES
Expiration Date/Time: 06:00pm Jan 08, 2014
Purchase Date/Time: 07:48am Jan 08, 2014
Total Parking: \$17.14
Total gst: \$0.86
Total Due: \$18.00
Total Paid: \$18.00
Ticket #: [REDACTED]
Setting: Lot 256
Mach Name: Meter 1
Rate: \$18.00-EarlyBird
Payment Type: Card

Card [REDACTED] American Express
Auth #: [REDACTED]

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time
06:00 PM
JAN 10, 2014

Purchase Date/Time: 12:19pm Jan 10, 2014
Total Parking: \$24.76
Total gst: \$1.24
Total Due: \$26.00
Total Paid: \$26.00
Ticket #: [REDACTED]
S/N #: [REDACTED]
Setting: Lot 256
Mach Name: Meter 1
Rate: \$26.00-All Day
Payment Type: Card

Card [REDACTED] American Express
Auth #: [REDACTED]
GST #887315638RT0001

RECEIPT

IMPARK LOT 256
NO IN AND OUT PRIVILEGES
Expiration Date/Time: 06:00pm Jan 10, 2014
Purchase Date/Time: 12:19pm Jan 10, 2014
Total Parking: \$24.76
Total gst: \$1.24
Total Due: \$26.00
Total Paid: \$26.00
Ticket #: [REDACTED]
Setting: Lot 256
Mach Name: Meter 1
Rate: \$26.00-A/
Payment Type:

Card [REDACTED] American Express
Auth #: [REDACTED]

CITY OF EDMONTON
LIBRARY PARKADE
GST # 119326270 RT0001

Rept# 23396
01/14/14 08:34 LH 2 AH 40 Txn# [REDACTED]
01/14/14 07:16 In 01/14/14 08:34 Out
Tkt# [REDACTED]
Regular Rate \$ 7.14
Total Tax \$ 0.36
Total Fee \$ 7.50
CASH PAID \$ 7.50
Cash Tender \$ 22.50
Change Due \$ 15.00

THANK YOU
COME AGAIN

CITY OF EDMONTON
LIBRARY PARKADE
GST # 119326270 RT0001

Rept# [REDACTED]
01/20/14 11:07 LH 2 AH 40 Txn# 74582
01/20/14 09:39 In 01/20/14 11:07 Out
Tkt# [REDACTED]
Regular Rate \$ 7.14
Total Tax \$ 0.36
Total Fee \$ 7.50
CASH PAID \$ 7.50
Cash Tender \$ 22.50
Change Due \$ 15.00

THANK YOU
COME AGAIN

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time

06:00 PM
JAN 22, 2014

Purchase Date/Time: 08:36am Jan 22, 2014

Total Parking: \$17.14

Total gst: \$0.86

Total Due: \$18.00

Total Paid: \$18.00

Ticket #: [REDACTED]

S/N #: [REDACTED]

Setting: Lot 256

Mach Name: Meter 1

Rate: \$18.00-EarlyBird
Payment Type: Card

Card [REDACTED] American Express

Auth #: [REDACTED]
GST #887315638RT0001

RECEIPT

IMPARK LOT 256

NO IN AND OUT PRIVILEGES

Expiration Date/Time: 06:00pm Jan 22, 2014

Purchase Date/Time: 08:36am Jan 22, 2014

Total Parking: \$17.14

Total gst: \$0.86

Total Due: \$18.00

Total Paid: \$18.00

Ticket #: [REDACTED]

Setting: Lot 256

Mach Name: Meter 1

Rate: \$18.00-EarlyBird
Payment Type: Card

Card [REDACTED] American Express

Auth #: [REDACTED]

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time

10:13 AM
JAN 27, 2014

Purchase Date/Time: 07:43am Jan 27, 2014

Total Parking: \$14.29

Total gst: \$0.71

Total Due: \$15.00

Total Paid: \$15.00

Ticket #: [REDACTED]

S/N #: [REDACTED]

Setting: Lot 256

Mach Name: Meter 1

Rate: \$15.00 - 2.5 hrs
Payment Type: Card

Card [REDACTED] American Express

Auth #: [REDACTED]
GST #887315638RT0001

RECEIPT

IMPARK LOT 256

NO IN AND OUT PRIVILEGES

Expiration Date/Time: 10:13am Jan 27, 2014

Purchase Date/Time: 07:43am Jan 27, 2014

Total Parking: \$14.29

Total gst: \$0.71

Total Due: \$15.00

Total Paid: \$15.00

Ticket #: [REDACTED]

Setting: Lot 256

Mach Name: Meter 1

Rate: \$15.00 - 2.5 hrs
Payment Type: Card

Card [REDACTED] American Express

Auth #: [REDACTED]

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time

02:19 PM
JAN 29, 2014

Purchase Date/Time: 12:49pm Jan 29, 2014

Total Parking: \$8.57

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Ticket #: [REDACTED]

S/N #: [REDACTED]

Setting: Lot 256

Mach Name: Meter 1

Rate: \$9.00 -1.5 hrs
Payment Type: Card

Card [REDACTED] American Express

Auth #: [REDACTED]
GST #887315638RT0001

RECEIPT

IMPARK LOT 256

NO IN AND OUT PRIVILEGES

Expiration Date/Time: 02:19pm Jan 29, 2014

Purchase Date/Time: 12:49pm Jan 29, 2014

Total Parking: \$8.57

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Ticket #: [REDACTED]

Setting: Lot 256

Mach Name: Meter 1

Rate: \$9.00 -1.5 hrs
Payment Type: Card

Card [REDACTED] American Express

Auth #: [REDACTED]

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time

04:23 PM
JAN 30, 2014

Purchase Date/Time: 12:53pm Jan 30, 2014

Total Parking: \$20.00

Total gst: \$1.00

Total Due: \$21.00

Total Paid: \$21.00

Rate: \$21.00 - 3.5 hrs

Payment Type: Card

Ticket #:

S/N #:

Setting: Lot 256

Mach Name: Meter 1

Card American Express

Auth #:

GST #687315638RT0001

RECEIPT

IMPARK LOT 256

NO IN AND OUT PRIVILEGES

Expiration Date/Time: 04:23pm Jan 30, 2014

Purchase Date/Time: 12:53pm Jan 30, 2014

Total Parking: \$20.00

Total gst: \$1.00

Total Due: \$21.00

Total Paid: \$21.00

Rate: \$21.00 - 3.5 hrs

Payment Type: Card

Ticket #:

Setting: Lot 256

Mach Name: Meter 1

Card American Express

Auth #:

PLACE FACE UP ON DASH
IMPARK LOT 256
NO IN AND OUT PRIVILEGES

Expiration Date/Time

06:00 PM
JAN 31, 2014

Purchase Date/Time: 07:28am Jan 31, 2014

Total Parking: \$17.14

Total gst: \$0.86

Total Due: \$18.00

Total Paid: \$18.00

Rate: \$18.00-EarlyBird

Payment Type: Card

Ticket #:

S/N #:

Setting: Lot 256

Mach Name: Meter 1

Card American Express

Auth #:

GST #687315638RT0001

RECEIPT

IMPARK LOT 256

NO IN AND OUT PRIVILEGES

Expiration Date/Time: 06:00pm Jan 31, 2014

Purchase Date/Time: 07:28am Jan 31, 2014

Total Parking: \$17.14

Total gst: \$0.86

Total Due: \$18.00

Total Paid: \$18.00

Rate: \$18.00-EarlyBird

Payment Type: Card

Ticket #:

Setting: Lot 256

Mach Name: Meter 1

Card American Express

Auth #:

YELLOW CAB

780.462.3456

GST# _____

Date: 23.01.14

Amount: \$50.00

Driver: ADAY

Car#: [REDACTED]

From: 2211 Montiel Pl

To: DIR BRT

10135-31 Avenue, Edmonton, AB T6N 1C2



PRESTIGE CABS

780.462.4444

GST# _____

Date: 23/14

Amount: \$60

Driver: [Signature]

Car#: _____

From: [Signature]

To: [Signature]

10135-31 Avenue, Edmonton, AB T6N 1C2



Your booking is confirmed. Booking reference: [REDACTED]

An email booking confirmation has been sent to: gerry.predy@albertahealthservices.ca.

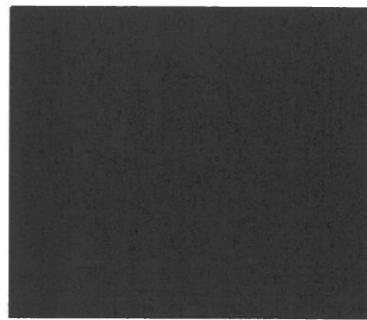
Use your booking reference to **retrieve your official Itinerary/Receipt at aircanada.com**.

Passengers Mr Gerald Nicholas Predy

Flight	From	To	Departure	Arrival
AC126	Edmonton (YEG)	Toronto (YYZ)	11:45 Sun 30-Mar 2014	17:29 Sun 30-Mar 2014
AC177	Toronto (YYZ)	Edmonton (YEG)	12:20 Wed 02-Apr 2014	14:31 Wed 02-Apr 2014

Airfare
Options
Taxes, fees & charges
Travel Insurance
Grand Total
Canadian dollars

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.



Booking Information

Booking Reference: [REDACTED]

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

Main Contact:

Mr Gerald Nicholas Predy
gerry.predy@albertahealthservices.ca
Mobile: [REDACTED]
Work: [REDACTED]

Customer Care

Air Canada
1-888-247-2262

Flight Arrivals and Departures
1-888-422-7533

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC126	Edmonton, Edmonton Int'l (YEG)	Toronto, Pearson Int'l (YYZ)	0	3hr44	321	Flex, V	F
	Sun 30-Mar 2014 11:45	Sun 30-Mar 2014 17:29 - Terminal 1					
AC177	Toronto, Pearson Int'l (YYZ)	Edmonton, Edmonton Int'l (YEG)	0	4hr11	320	Flex, V	F
	Wed 02-Apr 2014 12:20 - Terminal 1	Wed 02-Apr 2014 14:31					

F: Food for purchase on board. All Onboard Café purchases made on board Air Canada flights are payable only with Visa, MasterCard and American Express credit cards.

Passenger Information**1: Mr Gerald Nicholas Predy : Adult (16+), Ticket Number:** [REDACTED]Air Canada - Aeroplan : [REDACTED] Meal Preference: **None**Payment Card: [REDACTED] Special Needs: **None**Seat Selection: **AC126 12C (Preferred) Paid , AC177 12C (Preferred) Paid**Congratulations on your selection of a **Preferred seat**. Please read the **Terms and conditions**.**Purchase Summary****Fare Summary****Total charge for 1 adult****Air Transportation Charges**Departing Flight (Flex) **424.00**
(including surcharges)Return Flight (Flex) **394.00**
(including surcharges)

Options 72.00

Taxes, Fees and Charges 113.96

Total Airfare Charge 1003.96

Travel Insurance (declined) 0.00

Grand Total - Canadian dollars \$1003.96**Payment Information****Credit/Debit Card** [REDACTED] - Amount paid: [REDACTED]

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

- Air Canada: \$928.36 (Airfare - per ticket)
- Air Canada: \$75.60 (Advance Seat Selection - per ticket)

Ticket number(s): [REDACTED]

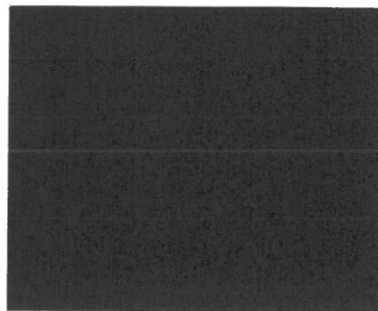
Fare Rules**Departing Flight** Edmonton (YEG) To Toronto (YYZ) - **Flex****Return Flight** Toronto (YYZ) To Edmonton (YEG) - **Flex****• Changes:**

- Prior to day of departure - **Change fee** per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
- **Same-day confirmed changes** at check-in or at the airport are permitted at a flat fee of \$75 CAD/USD per direction, per passenger (subject to availability). Same-day flights only.
- **Same-day standby** is available **only** to passengers travelling on a flight between Toronto and Montreal or Ottawa (connecting flights excluded), as well as to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
- Flights can only be used in sequence from the place of departure specified on the itinerary.

• Cancellations:

- Tickets are **non-refundable** and **non-transferable**.
- **Cancellations** can be made up to 45 minutes prior to departure.
- Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the

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.



Booking Information

Booking Reference: [REDACTED]

Customer Care

Air Canada
1-888-247-2262

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

Flight Arrivals and
Departures
1-888-422-7533

Main Contact:

Mr Gerald N Predy
gerry.predy@albertahealthservices.ca
Mobile: [REDACTED]
Work: [REDACTED]

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8171 ¹	Edmonton, Edmonton Int'l (YEG) Tue 25-Feb 2014 07:30	Calgary (YYC) Tue 25-Feb 2014 08:23	0	0hr53	DH3	Tango, T	
AC8154 ¹	Calgary (YYC) Tue 25-Feb 2014 17:00	Edmonton, Edmonton Int'l (YEG) Tue 25-Feb 2014 17:53	0	0hr53	DH3	Tango, S	

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Mr Gerald N Predy : Adult (16+), Ticket Number: [REDACTED]

Air Canada - Aeroplan : [REDACTED]

Meal Preference: None

Payment Card: [REDACTED]

Special Needs: None

Seat Selection: AC8171 1C (Preferred) Paid , AC8154 1C (Preferred) Paid

Congratulations on your selection of a Preferred seat. Please read the Terms and conditions.

Purchase Summary

Fare Summary

Total charge for 1 adult

Air Transportation Charges

Departing Flight (Tango) 91.00
(Including surcharges)

Return Flight (Tango) (including surcharges)	101.00
Options	54.00
Taxes, Fees and Charges	85.01
Total Airfare Charge	331.01
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$331.01

Payment Information

Credit/Debit Card [REDACTED] - Amount paid: **\$331.01**

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

- Air Canada: \$274.31 (Airfare - per ticket)
- Air Canada: \$56.70 (Advance Seat Selection - per ticket)

Ticket number(s): [REDACTED]

Fare Rules

Departing Flight Edmonton (YEG) To Calgary (YYC) - **Tango**

Return Flight Calgary (YYC) To Edmonton (YEG) - **Tango**

• Changes:

- Prior to day of departure - **Change fee** per direction, per passenger, is \$75 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
- **Same-day confirmed changes at check-in or at the airport** are subject to availability and are permitted only for same-day flights at a fee of \$75 CAD/USD per direction, per passenger.
- **Same-day standby** is available **only** to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
- Flights can only be used in sequence from the place of departure specified on the itinerary.

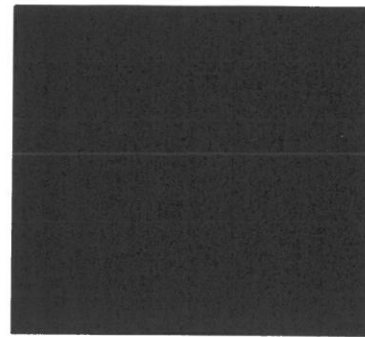
• Cancellations:

- Tickets are **non-refundable** and **non-transferable**.
- **Cancellations** can be made up to 45 minutes prior to departure.
- Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.
- Customers who **no-show** their flight will forfeit the fare paid.
- **Paid Advance Seat Selection** is available on Air Canada and Air Canada Express (operated by Jazz), subject to availability.
- Up to 24 hours after the purchase of a **new ticket**, Air Canada will cancel your ticket and provide a full refund without penalty.
- Flights operated by Air Canada: earn 25% Aeroplan Miles (Altitude Qualifying Miles) for flights within Canada and 50% Aeroplan Miles (Altitude Qualifying Miles) for flights between Canada and the U.S.
- Read complete fare rules applicable to this fare.

Baggage Allowance and Fees

Prepare your checked and carry-on baggage with the help of our Baggage Guide .

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.



Booking Information

Booking Reference: [REDACTED]

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

Main Contact:

Mr Gerald Nicholas Predy
gerry.predy@albertahealthservices.ca
Mobile: [REDACTED]
Work: [REDACTED]

Customer Care

Air Canada
1-888-247-2262

Flight Arrivals and Departures
1-888-422-7533

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8133 ¹	Edmonton, Edmonton Int'l (YEG) Thu 23-Jan 2014 07:00	Calgary (YYC) Thu 23-Jan 2014 07:53	0	0hr53	DH3	Tango, S	
AC8154 ¹	Calgary (YYC) Thu 23-Jan 2014 17:00	Edmonton, Edmonton Int'l (YEG) Thu 23-Jan 2014 17:53	0	0hr53	DH3	Tango, S	

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Mr Gerald Nicholas Predy : Adult (16+), Ticket Number: [REDACTED]

Air Canada - Aeroplan : [REDACTED] Meal Preference: **None**
Payment Card: [REDACTED] Special Needs: **None**
Seat Selection: [REDACTED] **(Preferred) Paid , AC8154 1C (Preferred) Paid**

Congratulations on your selection of a **Preferred seat**. Please read the **Terms and conditions**.

Purchase Summary

Fare Summary

Total charge for 1 adult

Air Transportation Charges

Departing Flight (Tango) **81.00**
(including surcharges)

Return Flight (Tango) (Including surcharges)	81.00
Options	54.00
Taxes, Fees and Charges	83.51
Total Airfare Charge	299.51
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$299.51

Payment Information

Credit/Debit Card [REDACTED] - Amount paid: **\$299.51**

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

- Air Canada: \$242.81 (Airfare - per ticket)
- Air Canada: \$56.70 (Advance Seat Selection - per ticket)

Ticket number(s): [REDACTED]

Fare Rules

Departing Flight Edmonton (YEG) To Calgary (YYC) - **Tango**

Return Flight Calgary (YYC) To Edmonton (YEG) - **Tango**

• Changes:

- Prior to day of departure - **Change fee** per direction, per passenger, is \$75 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
- **Same-day confirmed changes at check-in or at the airport** are subject to availability and are permitted only for same-day flights at a fee of \$75 CAD/USD per direction, per passenger.
- **Same-day standby** is available **only** to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
- Flights can only be used in sequence from the place of departure specified on the itinerary.

• Cancellations:

- Tickets are **non-refundable** and **non-transferable**.
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- Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.
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- Up to 24 hours after the purchase of a **new ticket**, Air Canada will cancel your ticket and provide a full refund without penalty.
- Flights operated by Air Canada: earn 25% Aeroplan Miles (Altitude Qualifying Miles) for flights within Canada and 50% Aeroplan Miles (Altitude Qualifying Miles) for flights between Canada and the U.S.
- Read complete fare rules applicable to this fare.

Baggage Allowance and Fees

Prepare your checked and carry-on baggage with the help of our Baggage Guide .

4391 Dr GERALD PREDY
 Suite 104 Main Floor West Tower
 14310-111 Ave NW
 Edmonton AB T5M 3Z7

DATE: December 1, 2013

MEMBER NUMBER: [REDACTED]

YOUR MEMBERSHIP FEE FOR THE PERIOD 01/01/2014 TO 12/31/2014.

Based on the membership information on the accompanying Membership Update.

REFERENCE	DATE	FEES	TAX	TOTAL
[REDACTED]	Jan-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Feb-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Mar-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Apr-2014	\$ 157.00	\$ 0.00	\$ 157.00
	May-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Jun-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Jul-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Aug-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Sep-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Oct-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Nov-2014	\$ 157.00	\$ 0.00	\$ 157.00
	Dec-2014	\$ 157.00	\$ 0.00	\$ 157.00
		\$ 1,884.00	\$ 0.00	\$ 1,884.00

TOTAL 2014 FEE:

\$ 1,884.00

*less
 C pd by AMR*

*884.00
 1000.00*

YOUR PAYMENT METHOD IS: Annual Pre-Authorized Debit.

Please do not send payment by cheque.

Dr GERALD PREDY
 Suite 104 Main Floor West Tower
 14310-111 Ave NW
 Edmonton AB T5M 3Z7

MEMBER NUMBER: [REDACTED]

TOTAL FEE: \$ 1,884.00

For Office Use Only:

DD 1DD



Knowledge to Action

March 31-April 2, 2014

Registration Statement

[Printer Friendly Version](#) | [Edit Current Registration](#)

If this is a '6 for 5' registration, please continue to register the remaining members of your group.
The group rate will be applied once all 6 members have been registered.

Invoice	Price
Three Day Registration - Early Bird Registration Rate - Monday - Tuesday - Wednesday	\$540.00
Sub-Total:	\$540.00
13% HST: (HST #: 80726 6861 RT0001)	\$70.20
Total:	\$610.20
Payments:	\$610.20
Balance Owning:	\$0.00

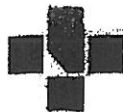
Session Selection		
Ontario's Immunization System Review: Findings and next steps toward improving immunization for Ontarians	Monday, March 31, 2014	3:30 PM - 5:00 PM
Addressing vaccine hesitancy through effective communication strategies	Monday, March 31, 2014	1:30 PM - 3:00 PM
Methods and tools for equity-integrated population health status reporting	Tuesday, April 1, 2014	3:30 PM - 5:00 PM
Electronic cigarettes: evidence, prevalence of use, and implications for public health practice and policy	Tuesday, April 1, 2014	1:30 PM - 3:00 PM
Quality Improvement: Four 15 Minute Presentations	Wednesday, April 2, 2014	11:00 AM - 12:30 PM
Leadership Development for Public Health Leaders: Why do it? What does it look like? How do you evaluate it?	Wednesday, April 2, 2014	9:00 AM - 10:30 AM

Meals	
Mon. Breakfast	
Mon. Morning Break	
Mon. Lunch	
Mon. Afternoon Break	
Tue. Breakfast	
Tue. Morning Break	
Tue. Lunch	
Tue. Afternoon Break	
Wed. Breakfast	

Transaction Summary					
ID	Amount	Method	Status	Type	Date
67	\$610.20	Credit Card	Approved	Purchase	01/27/2014

Registrant Details	
Registration ID	
Registration Date	1/27/2014 1:29:25 PM
Prefix	Dr
First Name	Gerry
Last Name	Preddy
Organization	Alberta Health Services
Billing Address	
City	Edmonton
Province/State	AB

Postal/Zip Code:	
Country:	Canada
Phone Number:	
Email:	gerry.predy@albertahealthservices.ca
Click here to have your email distributed to TOPHC partners	Yes
CC Email: (Email to which all communications will be copied)	
TOPHC Mentorship Program	
Would you like to mentor a student at TOPHC 2014? Or, are you a student and would like to connect with a health care professional? The program consists of mentors offering to meet with an assigned student to provide overall direction and advice. The topics can range from your current job, to career advice for the student, to your perspective on the TOPHC sessions, and anything in-between. If you agree, and are matched to a student, we will send you and the student an e-mail just before TOPHC so you can connect with each other at the event. We leave the scheduling to you.	
Would you like to:	None



Alberta Health Services

Travel Approval Form (Out-of Province Only) / Request for Advance

A. TRAVEL PARTICULARS

Out-of-Province: <input checked="" type="checkbox"/>	Advance Request: <input type="checkbox"/>	Destination: Toronto, ON
Name: Dr. Gerry Predy	Employee #: [REDACTED]	Report To: Dr. Verna Yiu
Department: PPAH	Office Location: Edmonton	Business Phone #: [REDACTED]
What former entity payroll systems is the employee currently being paid from? (Please ✓ one from below).		
<input type="checkbox"/> AADAC	<input type="checkbox"/> Calgary Health	<input type="checkbox"/> East Central
<input type="checkbox"/> Alberta Cancer Board	<input checked="" type="checkbox"/> Capital Health	<input type="checkbox"/> Northern Lights
<input type="checkbox"/> Alberta Mental Health Board	<input type="checkbox"/> Chinook	<input type="checkbox"/> Palliser Health
<input type="checkbox"/> Aspen	<input type="checkbox"/> David Thompson	<input type="checkbox"/> Peace Country
Finance Code/Accounting Distribution (if applicable):		
Corp/BU/Org (if applicable)	Location (if applicable)	Functional Centre/Primary
101	0306	71552000133
		Expense/Secondary Account
		62320000
Dates: From (day/month) 30/03 (year) 2014 to (day/month) 02/04 (year) 2014		
Purpose of Trip: Attendance at The Ontario Public Health Convention 2014		
Employee Signature: [Signature]		Date: Jan. 14, 2014
APPROVALS: (Sr. VP prior approval required for all Out-of-Province Travel) (Travel Advance Approval – Travel Policy Appendix A)		
Approved By: (please print) Dr. Verna Yiu	Title: VP Quality & CMO	Phone #: [REDACTED]
Signature: [Signature]		Date: Jan 15 2014
Approved By: (please print)	Title:	Phone #
Signature:		Date:

B. ESTIMATE OF EXPENSES ☐ Canadian Dollars ☐ US Dollars

Category	Description	Amount
1. Accommodation Charge	# 3 Nights at \$196	\$588.00
2. Meals		100.00
3. Registration	Early Bird Registration	540.00
4. Airfare or Other Travel Costs	Air Canada return	928.36
5. Other Expenses (please specify)	Taxi	150.00
Total Estimated Travel Costs		\$2,306.36

C. COMPLETE THIS SECTION IF YOU REQUIRE AN ADVANCE (only if amount required is \$500 or above)

Advance Amount (\$) Requested:	Date Required:
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- > If an advance is being requested the original approved Travel Approval Form should be forwarded to Accounts Payable 3 weeks prior to departure date, where possible.
- > All travel expenses must be approved in accordance to "Appendix A" of the Alberta Health Services Travel Policy.