Alberta Health Services

www.albertahealthservices.ca

Official Administrator and Executive Expense Report

Name Heather Toporowski
Title Senior Program Officer, Primary Care
Location Westlock
Expenses submitted during the month of June 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)**
Jun-14	P-Card	Meetings	697	20	983	359	2,059	200		-
Total			$ 697	$ 20	$ 983	$ 359	$ 2,059	$ 200	$ -	$ -

Total for the Month $ 2,259

Maximum daily single meal expense claimed in the month	$	9
Maximum daily base hotel rate claimed in the month	$	229
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

P-Card details Online ® Cardholder Statement Report

Instruction:

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

TOPOROWSKI, HEATHER
Cardholder's Name

~~LEAD, PROVINCIAL PRIMARY~~ Senior Program Officer
Cardholder's Position/Title

[redacted]
Cardholder's Dept

[redacted]
Cardholder's Site/Location

HEATHER.TOPOROWSKI@ALBERTAHEALTHSERVICES.CA
Cardholder's e-mail address

Billing Reporting Period: 20/06/2014

Total Statement Amount: $2,259.08

Last 6 digits of the P-Card #: [redacted]

Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description	
19/05/2014	[redacted]	RED ARROW EXPRESS LTD, BUS LINES	148.00	CAD	148.00	7.05		Busfar - Roundtable mtg - Calgary - Policy levers for Interfprofessional Team work in PHC	1
21/05/2014		EDO JAPAN - YYC, FAST-FOOD RESTAURANTS	8.59	CAD	8.59	.41		Supper - Roundtable meeting - Policy Levers for Interprofessinal Team PHC	2
21/05/2014		HMSHOST CALGARY AIRPOR, EATING PLACES, RESTAURANTS	4.19	CAD	4.19	.00	.00	Supper - Roundtable meeting - Calgary	4
21/05/2014		AIR CAN 0142134717340, AIR CANADA	470.66	CAD	470.66	.00	.00	Airfare - Obesity Planning Meeting	5
22/05/2014		BEST WESTERN CEDAR PAR, BEST WESTERN HOTELS	10.50	CAD	10.50	.50		Parking - Roundtable Meeting - calgary - Policy Levers for interprofesional team PHC	3
22/05/2014		DELTA CALGARY AIRPORT, DELTA HOTELS	189.73	CAD	189.73	.00		Accommodations - Roundtable mtg - Policy levers Interfprof PHC team	7
24/05/2014		VARSCONA HOTEL, LODGING HOTELS, MOTELS, RESORTS	138.18	CAD	138.18	6.58		Accommodations - Exed Ed ALP Presentations	6
26/05/2014		EXECUTIVE ROYAL HOTEL, LODGING HOTELS, MOTELS, RESORTS	140.61	CAD	140.61	6.70		Accommodations - Obesity Planning Meeting	8
26/05/2014		EDMONTON INTERNATION, AUTOMOBILE PARKING LOTS AND GARAGES	25.00	CAD	25.00	.00	.00	Parking - Obesity Planning Meeting	10
26/05/2014		ASSOCIATED CAB, LIMOUSINES AND TAXICABS	59.23	CAD	59.23	2.82		Cab Fare - Obesity Planning Meeting	11
27/05/2014		ALBERTA MEDICAL ASSOCI, ORGANIZATIONS, MEMBERSHIP	200.00	CAD	200.00	9.52		Registration - Physician Leads Forum	9
04/06/2014		ASSOCIATED CAB/ALLIED, LIMOUSINES AND TAXICABS	64.10	CAD	64.10	3.05	.00	Cab Fare - CCHL conference	12
12/06/2014		GEN HOSP OF EDM GREY N, HOSPITALS	6.93	CAD	6.93	.33		Lunch - PHC Team Member Mtg	13
12/06/2014		PRECISE PARKLINK INC, AUTOMOBILE PARKING LOTS AND GARAGES	14.25	CAD	14.25	.68		Parking - PHC Team Member meeting	14
16/06/2014		IMPARK00020256U, AUTOMOBILE PARKING LOTS AND GARAGES	23.00	CAD	23.00	1.10	.00	Parking - Mtgs - AHS WAve 3, PHC Senior Leadership, Peformance Agreement PHC, AHS Mandate, Performance Agreement - AH	15
17/06/2014		AIR CAN 0142135705021, AIR CANADA	226.93	CAD	226.93	.00	.00	Airfare - PCN Evolution Mtg	16
18/06/2014		DELTA CALGARY AIRPORT, DELTA HOTELS	257.09	CAD	257.09	.00		Accommodations - PCN Evolution Steering committee Meeting	18
18/06/2014		EDMONTON INTERNATION, AUTOMOBILE PARKING LOTS AND GARAGES	15.00	CAD	15.00	.00	.00	Parking - PCN Evolution Steering committee	19
19/06/2014		VARSCONA HOTEL, LODGING HOTELS, MOTELS, RESORTS	257.09	CAD	257.09	12.24		Accommodations - PCN Evolution Steering committee meeting	17

Alberta Health Services

P-Card details Online ® Cardholder Statement Report

Signatures

Cardholder Designate (if Applicable)

By signing this statement

- I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre

Jesse Raines — Name of Cardholder Designate

Exec Admin Support — Cardholder Designate Position/Title

Signature of Cardholder Designate

June 25/14 — Date of Signature

Cardholder

By signing this statement

- 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 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. A personal cheque for any personal expenses inadvertently charged is attached
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided

TOPOROWSKI, HEATHER — Name of Cardholder

~~EAB-PROVINCIAL PRIMARY~~ Senior Program Officer — Cardholder Position/Title

Signature of Cardholder

June 25/14 — Date of Signature

Approver Designate (if Applicable)

By signing this statement

- 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 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. A personal cheque for personal expenses inadvertently charged has been obtained
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided

Patricia Novotny — Name of Approver Designate

Exec. Admin. Asst. — Approver Designate Position/Title

Signature of Approver Designate

June 27, 2014 — Date of Signature

Approver

By signing this statement

- 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 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. A personal cheque for personal expenses inadvertently charged has been obtained
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided

Rick Tsime — Name of Approver

VP Province Wide Clinical Supports, Programs + Services — Approver Position/Title

Signature of Approver

6/26/14 — Date of Signature

Submit approved statement with attachments to Accounts Payable:

Attach:

- Original (or scanned) itemized receipts with documented business reasons including names of participants where required
- Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable
- Copies of pre-approvals for travel
- Personal cheque payable to "Alberta Health Services"
- Return, refund and/or credit receipts
- Disputes letter
- Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason

Address:

Alberta Health Services
Accounts Payable
7th Street Plaza
10th Floor, North Tower 10030-107 Street
Edmonton, AB T5J 3E4

Accounts Payable only:

Reference # _____ Reviewed by _____ Date _____

#1 Bus FARE. Round table Mtg Policy Levers for Interprofessional Team Work in Pik

Heather Toporowski E.R.

From: Red Arrow Reservations [itinerary@redarrow.ca]
Sent: Monday, May 19, 2014 1:50 PM
To: Heather Toporowski E.R.
Subject: Invoice

Invoice

Date: 2014-05-19

Bill To:

You can reach us at:

Website User

Order#	Ordered	Customer#	P.O.	Group Name	Departing	Returning	Sales Rep	Sales Agent
[redacted]	2014-05-19	[redacted]	-	-	2014-05-21	2014-05-22	-	Website User

Travellers:

Toporowski/Heather

Product	Details	Duration	Price Basis	Qty	Each	Billed
EDMCAL 15:30 YYC Assigned to: 04B	Departs Edmonton (EDMCEDAR / Best Western Cedar Park Inn) 2014-05-21 at 15:45 Arrives CALGARY (CALGARY INTERNATIONAL AIRPORT) 2014-05-21 at 19:05	3 hrs 20 mins	Adult	1	70.48	74.00
CALEDM 15:30 YYC	Departs CALGARY (CALGARY INTERNATIONAL AIRPORT) 2014-05-22 at 16:00 Arrives Edmonton (EDMCEDAR / Best Western Cedar Park Inn) 2014-05-22 at 19:20	3 hrs 20 mins	Adult	1	70.48	74.00

Payments Received:

Date	From	Reference	Amount
2014-05-19	Website User	[redacted]	148.00 CAD

Base Price:	140.96 CAD
Discounts:	0.00 CAD
Service Charges:	0.00 CAD
GST	7.04 CAD
Invoice Total:	148.00 CAD
Received:	148.00 CAD
Balance:	0.00 CAD

TERMS: DUE UPON RECEIPT
GST# BN139981476
If you wish to time change, date change, or cancel for a full refund - 30 minutes notice prior to A.M departures; 3 hours notice prior to P.M. departures must be given. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change.
Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. If you wish to change or cancel your booking, please contact our Central Reservation line at 1-800-232-1958.
**Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to

(#2) Supper - Roundtable Mtg
Policy Levers for Interprofessional Team/HC

(#4) Supper Roundtable Mtg - Calgary

(#2)

EDO JAPAN - YYC
42, 2000 AIRPORT RD NE
CALGARY AB

CARD [redacted]
CARD TYPE [redacted]
DATE 2014/05/21
TIME 1311 19:31:40
RECEIPT NUMBER
[redacted]

PURCHASE
TOTAL

$8.59

[redacted]

APPROVED
AUTH# [redacted] 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

HMSHOST
SECOND CUP
CALGARY INT'L AIRPORT

301234 [redacted]

CHK [redacted]
MAY21'14 7:35PM

TO GO

1 RTE FRUIT CUP	3.99
SUBTOTAL	3.99
TAX	0.20
AMOUNT PAID	4.19
[redacted]	4.19

--301234 Closed MAY21 07:35PM---

THANK YOU FOR YOUR BUSINESS!

TELL US ABOUT YOUR EXPERIENCE

JOHN VAN BESOUW
403-221-1779
JOHN.VANBESOUW@HMSHOST.COM

GST # 137512901

BEST WESTERN CEDAR PARK INN
5116 Gateway Blvd.
Edmonton, AB T6H 2H4

(780) 434-7411
reservations@cedarparkinn.com

#3 Parking Roundtable mtg - Calgary

Room # [redacted]
Transfer To

Conf #
Arrival 05/21/14
Departure 05/21/14
Group

Room Type
Guests 0 / 0

Payment
Acct

Registered To:

Parking (MUST be 0 Balance), PARK

,

Posting	Oper	AcctCo	Description	From	Reference	Amount
05/21/14	[redacted]	[redacted]	[redacted]		[redacted]	$10.50-

Balance Due	$10.50-

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.

EACH BEST WESTERN® BRANDED HOTEL IS INDEPENDENTLY OWNED AND OPERATED.

GST# 851767210RP0001

(#5) Welfare Diversity Planning mtg

Josie Raines

From: Air Canada [confirmation@aircanada.ca]
Sent: Wednesday, May 21, 2014 3:21 PM
To: Heather Toporowski E.R.
Subject: Air Canada - 26-May: Edmonton - Calgary (booking ref: [redacted])

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

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.

Scan this barcode to check in at any Air Canada check in kiosk.

Hotels in Calgary

Why book your hotel stay at aircanada.com?

Hotels provided by WWTMS.

- **Lowest price** guaranteed
- Great choice of hotels
- Aeroplan Mile offer exclusive to aircanada.com

Want travel insurance? Protect yourself and your family against unforeseen circumstances.

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

Booking Information

Booking Reference: [redacted]

Electronic Ticketing confirmed. This is your official itinerary/receipt.
Main Contact:
Mrs Heather Elizabeth Toporowski
heather.toporowski@albertahealthservices.ca
Mobile [redacted]
Home:
Work:
At destination: [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
[redacted]	**Edmonton, Edmonton Int'l (YEG)** Mon 26-May 2014 07:00	**Calgary (YYC)** Mon 26-May 2014 07:44	0	0hr44	[redacted]	Flex, Q	
[redacted]	**Calgary (YYC)** Mon 26-May 2014 14:30	**Edmonton, Edmonton Int'l (YEG)** Mon 26-May 2014 15:20	0	0hr50	[redacted]	Tango, S	

Operated by:
[redacted] Air Canada Express - Jazz

Passenger Information

1: Mrs Heather Elizabeth Toporowski : Adult (16+), Ticket Number: [redacted]

Air Canada - Aeroplan : [redacted]
Meal Preference : [redacted]
Payment Card: [redacted]
Special Needs: [redacted]
Seat Selection: [redacted]

Purchase Summary

Fare Summary

Passenger Type	Adult
Air Transportation Charges	
Departing Flight - Flex	**193.00**
Return Flight - Tango	**162.00**
Surcharges	24.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	55.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	22.41
Air Travellers Security Charge (ATSC)	14.25
Total airfare and taxes before options (per passenger)	**470.66**
Number of passengers	1
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	**$470.66**

Payment Information

[redacted] - Amount paid: **$470.66**
The following charges (tax inclusive) will appear on your credit or debit card statement:

Air Canada: $470.66 (Airfare - per ticket)

Ticket number(s): [redacted]

enRoute City Guide

Calgary

TOPOROWSKI HEATHER

FLEX ECONOMY/ECONOMIQUE FLEX

ETKT0142134717340

Frequent Flyer / Voyageur assidu
AC*A

Flight / Vol	From / De	Destination
[redacted] 26 MAY	EDMONTON-YEG	CALGARY

Boarding time / Heure d'embarquement **06:25** Gate / Porte **49B** Seat / Place [redacted]

Departure Time / Heure de départ **06:25** Remarks / Observations

Airline use / À usage interne [redacted]

AIR CANADA

A STAR ALLIANCE MEMBER
MEMBRE DU RÉSEAU STAR ALLIANCE

Boarding Pass | Carte d'accès à bord

TOPOROWSKI HEATHER

FLEX ECONOMY/ECONOMIQUE FLEX
ETKT [redacted]

Frequent Flyer/Voyageur assidu
AC*A

Flight/Vol	Date	From/De	Destination
[redacted]	26MAY	EDMONTON-YEG	CALGARY

Boarding Time/Heure d'embarquement **06:25** Gate/Porte **49** Seat/Place [redacted]

Departure Time/Heure de depart 07:00

Airline Use/A usage interne 0031 [redacted]

Boarding Pass | Carte d'accès à bord

TOPOROWSKI H

Cabin/Cabine
Y

Flight/Vol
AC [redacted]
CALGARY

Seat/Place
02D AISLE/COULOIR

Remarks/Observations

AIR CANADA

A STAR ALLIANCE MEMBER
MEMBRE DU RÉSEAU STAR ALLIANCE

TOPOROWSKI HEATHER

TANGO ECONOMY/ECONOMIQUE TANGO

ETKT [redacted]

Frequent Flyer / Voyageur assidu [redacted]

Flight / Vol	From / De	Destination
[redacted] 26 MAY	CALGARY	EDMONTON-YEG

Boarding time / Heure d'embarquement **13:55** Gate / Porte **N/A** Seat / Place [redacted]

Departure Time / Heure de départ 13:55 Remarks / Observations

Airline use / À usage interne [redacted]

Boarding Pass | Carte d'accès à bord

AIR CANADA

A STAR ALLIANCE MEMBER

MEMBRE DU RÉSEAU STAR ALLIANCE

(#6) Accommodations Exec Ed ALP Presentations

VARSCONA
hotel on whyte

Ms Heather Toporowski
[redacted]
Canada

Guest Name

Room Number: [redacted]
Arrival Date: 05-22-14
Departure Date: 05-23-14
Page No: 1 of 1

INFORMATION INVOICE
Folio No: [redacted]

05-23-14

Date	Description	Charges	Credits
05-22-14	Room Revenue	129.00	
05-22-14	Destination Marketing Fee - 3%	3.87	
05-22-14	Tourism Levy - 4%	5.31	
05-23-14	[redacted]		138.18
	Total	**138.18**	**138.18**
	Balance	**0.00**	

Signature:_____

I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #863128575 RT 0001

#7
Accommodations - Roundtable Mtg - Policy Levers Interprof PHC Team

DELTA
CALGARY AIRPORT

2001 Airport Road N.E., Calgary, Alberta, T2E 6Z8
Tel: 403-291-2600 Fax: 403-250-6121

UNIVERSITY OF CALGARY
Mrs Heather E Toporowski
[redacted]
Canada

Room: [redacted]
Folio:
Cashier:
Arrival: 05-21-14
Departure: 05-22-14

Group: UofC - AHS - project #[redacted]

Date	Description	Additional Information	Charges	Credits
05-21-14	Room Charge		169.00	
05-21-14	Room Destination Marketing Fee		5.07	
05-21-14	Room Tourism Levy		6.96	
05-21-14	Room GST		8.70	
05-22-14	[redacted]	[redacted]		189.73
		Total	189.73	189.73
		Balance Due	0.00 CDN	

GST Summary
Registration No: 846543619

Room	8.70
F&B	0.00
Other	0.00
Total	**8.70**

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.

EXECUTIVE ROYAL HOTEL
EDMONTON
8450 SPARROW DRIVE
LEDUC AB

CARD [redacted]
CARD TYPE [redacted]
DATE 2014 05 26
TIME 0078 05:06:16
CLERK ID 710
RECEIPT NUMBER [redacted]

PRE-AUTH COMPLETION
TOTAL
$140.61

[redacted]

APPROVED
AUTH# 231691 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

EDMONTON

#8
Accommodations
Obesity Planning
MED

(780) 986-1840
guestservices@royalinn.com
www.executivehotels.net
879535953RT0004

Room # [redacted]

Conf # [redacted]
Arrival 05/25/14
Departure 05/26/14

Room Type [redacted]
Guests 1 / 0

Payment Acct [redacted]

Description	From	Reference	Amount
ROOM CHRG REVENUE			$129.00
GST			$6.45
ALBERTA TOURISM LEVY			$5.16
PAYMENT MASTER CARD			$140.61-

Balance Due	$0.00

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.

X_____
GUEST SIGNATURE

_____
Signature

(#9.) Registrations Physician Leads Forum

ALBERTA MEDICAL ASSOCIATION
12230 106 Ave NW
Edmonton AB T5N 3Z1
T 780.482.2626
F 780.482.5445
TF 1.800.272.9680
amamail@albertadoctors.org
www.albertadoctors.org

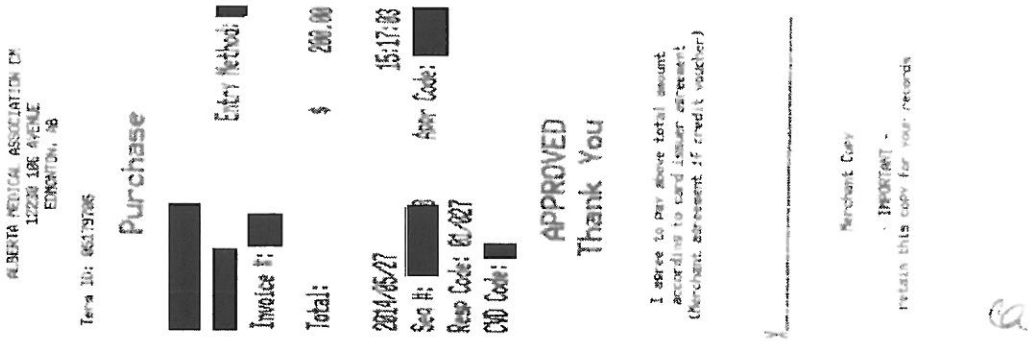
INVOICE

Bill to: Heather Toporwski
Alberta Health
[redacted]

PO Number: [redacted]
Payment Terms: Net 30
Due Date: 5/8/2014

Invoice Number: [redacted]
Invoice Date: 4/8/2014

Quantity	Description	Unit Price	Ext Price
1.00	Physician Leads Forum	$200.00	$200.00



PCN Physician Leads Forum
March 7 & 8, 2014
Edmonton Matrix Hotel
Registration Fee

Subtotal	$200.00
Gst	$0.00
Total	$200.00

GST# 122083538

ALBERTA MEDICAL ASSOCIATION
12230 106 Ave NW
Edmonton AB T5N 3Z1
T 780.482.2626
F 780.482.5445
TF 1.800.272.9680
amamail@albertadoctors.org
www.albertadoctors.org

INVOICE

Bill to: Heather Toporwski
Alberta Health
[redacted]

PO Number: [redacted]
Payment Terms: Net 30
Due Date: 5/8/2014

Invoice Number: [redacted]
Invoice Date: 4/8/2014

Quantity	Description	Unit Price	Ext Price
1.00	Physician Leads Forum	$200.00	$200.00

PCN Physician Leads Forum
March 7 & 8, 2014
Edmonton Matrix Hotel
Registration Fee

Subtotal	$200.00
Gst	$0.00
Total	$200.00

GST# 122083538

#10 Parking Obesity Planning mtg

GST# R126599776

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax CodeCA5%

Exit Lane 26/05/14 15:48
Receipt [redacted]

Short-term parking :kt
DL - No. [redacted]
26/05/14 06:12 -
27/05/14 06:11 -
Period 1d0h0'
(Tax) $25.00

Total $25.00

Payment Received
[redacted] $25.00
[redacted]

Sub Total $23.81
Tax 5% 1.19

#11 Cab Fare - Obesity Planning mtg

ASSOCIATED CAB
404-35 AVENUE N E T2E2K7
CALGARY AB
22142180

!!!! PURCHASE !!!!

05-26-2014 12:31:27
Acct # [redacted]
Exp Date [redacted] Card Type [redacted]
Name: HEATHER TOPOROWSKI
[redacted]

Trace # [redacted]

Inv. # [redacted]
Auth # [redacted] RRN 001001096

Purchase $51.50
Tip $7.73
Total $59.23

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

#12 Cab Fare CCHL Conference

ASSOCIATED CAB ALTA LTD
307 - 41 AVE NE (403) 299-1111
INSIST ON THE PROFESSIONALS

DATE: 2014/05/26
PICK-UP TIME: 08:03
DROP-OFF TIME: 08:33
TRIP ID: [redacted]
LOCATION: [redacted]
CAR NUMBER: [redacted]
CARD TYPE: [redacted]
CARD: [redacted]
EXPIRY: [redacted]
AUTH: [redacted]

FARE ($): 56.10
EXTRA ($): 0.00
SUBTTL ($): 56.10

TIP ($): 8.00

TOTAL ($): 64.10

SIGNATURE: _____

FOR ONLINE TAXI BOOKINGS VISIT
OUR WEBSITE@WWW ASSOCIATEDCAB CA

CUSTOMER'S COPY

(#13) lunch PHC Team Member Mtg

GENERAL HOSP OF EDM GREY
NUNS
11111 JASPER AVENUE
EDMONTON AB

CARD [redacted]
CARD TYPE [redacted]
DATE 2014/06/12
TIME 9708 13:01:47
RECEIPT NUMBER
[redacted]

PURCHASE
TOTAL
$6.93

[redacted]

APPROVED
AUTH# [redacted] 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

(#14) Parking PHC Team Member Mtg

[redacted]

LEAVE ON DASH - **THIS SIDE UP**

EXPIRATION DATE EXPIRATION TIME
13/06/14 11:07 AM

AMOUNT PAID
$14.25 76490000 11:07 AM

[redacted]

Alberta Health Services

CHARGES ARE FOR USE OF PARKING SPACE ONLY. ALBERTA HEALTH SERVICES ENDEAVOURS TO PROTECT THE PROPERTY OF ITS PATRONS BUT WILL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE TO CAR OR CONTENTS.
NON TRANSFERABLE

Alberta Health Services

DETACH RECEIPT FROM TICKET

DATE ISSUED TIME ISSUED AMOUNT PAID
12/06/14 11:07 AM $14.25

CREDIT CARD NUMBER
CC

[redacted]

Alberta Health Services

RECEIPT

~~11~~ (15)

Parking - ATLS Wave 3 mtg
PHC Senior Leadership mtg
Performance Agreement PHC mtg
ATLS Mandate mtg
Performance Agreement - AH

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

Expiration Date/Time

06:00 PM
JUN 16, 2014

Purchase Date/Time: 08:23am Jun 16, 2014
Total Parking: $21.90
Total gst: $1.10
Total Due: $23.00 Rate: $23 - Early Bird
Total Paid: $23.00 Payment Type: Card
Ticket [redacted]
S/N #: [redacted]
Setting: Lot 256
Mach Name: Meter 1

[redacted]
Auth #: [redacted]
GST #887315638RT0001

RECEIPT
IMPARK LOT 256
NO IN AND OUT PRIVILEGES
Expiration Date/Time: 06:00pm Jun 16, 2014
Purchase Date/Time: 08:23am Jun 16, 2014
Total Parking: $21.90
Total gst: $1.10
Total Due: $23.00 Rate: $23 - Early Bird
Total Paid: $23.00 Payment Type: Card
Ticket #: [redacted]
Setting: L
Mach Name: Meter 1

[redacted]
Auth #: [redacted]

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

AIR CANADA

Booking Reference: [redacted]

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

Main Contact:
Mrs Heather Elizabeth Toporowski
[redacted]
Mobile: [redacted]
Home: [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
[redacted]	Edmonton, Edmonton Int'l (YEG) Tue 17-Jun 2014 22:45	Calgary (YYC) Tue 17-Jun 2014 23:37	0	0hr52	[redacted]	Flex, V	

Operated by:
Air Canada Express - [redacted]

Passenger Information

1: Mrs Heather Elizabeth Toporowski : Adult (16+), Ticket Number: [redacted]

Aeroplan #: [redacted]
Payment Card: [redacted]
Seat Selection: [redacted]
Meal Preference: [redacted]
Special Needs: [redacted]

Purchase Summary

Fare Summary

Passenger Type	Adult
Air Transportation Charges	
Departing Flight - Flex	172.00
Surcharges	12.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	25.00
Canada Goods and Services Tax (GST/HST #100092287 RT0001)	10.81
Air Travellers Security Charge (ATSC)	7.12
Total airfare and taxes before options (per passenger)	226.93
Number of passengers	1
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	**$226.93**

Payment Information

[redacted] - Amount paid: **$226.93**
The following charges (tax inclusive) will appear on your credit or debit card statement:

- Air Canada: $226.93 (Airfare - per ticket)

Ticket number(s): [redacted]

Fare Rules

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

Flight Departure & Arrivals: http://www.aircanada.com/flightstatus
General conditions of carriage: http://www.aircanada.com/conditionsofcarriage
Information and Services http://www.aircanada.com/travelinfo

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TOPOROWSKI HEATHER

FLEX ECONOMY/ECONOMIQUE FLEX
ETK [redacted]

Frequent Flyer/Voyageur assidu [redacted]

Flight/Vol	Date	From/De	Destination
AC [redacted]	17JUN	EDMONTON-YEG	CALGARY

Boarding Time/Heure d'embarquement 22:10 Gate/Porte 49F Seat/Place [redacted]

Departure Time/Heure de depart 22:45

Airline Use/A usage interne 0012 [redacted]

Boarding Pass | Carte d'accès à bord

TOPOROWSKI H

Cabin/Cabine
Y

Flight/Vol
AC [redacted]
CALGARY

Seat/Place
[redacted] AISLE/COULOIR

Remarks/Observations

AIR CANADA
A STAR ALLIANCE MEMBER
MEMBRE DU RÉSEAU STAR ALLIANCE

(H 17) Accomodations - PCR Evolution SC Mtg

VARSCONA
hotel on whyte

Mrs Heather Toporowski
[redacted]
Canada

Guest Name

Room Number: [redacted]
Arrival Date: 06-18-14
Departure Date: 06-19-14
Page No: 1 of 1

INFORMATION INVOICE
Folio No: [redacted]

06-19-14

Date	Description	Charges	Credits
06-18-14	Room Revenue	229.00	
06-18-14	Destination Marketing Fee - 3%	6.87	
06-18-14	Tourism Levy - 4%	9.43	
06-18-14	Room GST - 5%	11.79	
06-19-14	[redacted]		257.09
	Total	**257.09**	**257.09**
	Balance	**0.00**	

Signature:_____

I agree that my liabilty for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #863128575 RT 0001

(#18)

Page: 1 of 1

Accommodations FCN
Evolution Steering Committee
mtg

DELTA
CALGARY AIRPORT
2001 Airport Road N.E., Calgary, Alberta, T2E 6Z8
Tel: 403-291-2600 Fax: 403-250-6121

AB HEALTH SERVICES
Mrs Heather E Toporowski
[redacted]
Canada

Room: [redacted]
Folio:
Cashier:
Arrival: 06-17-14
Departure: 06-18-14

Date	Description	Additional Information	Charges	Credits
06-17-14	Room Charge		229.00	
06-17-14	Room Destination Marketing Fee		6.87	
06-17-14	Room Tourism Levy		9.43	
06-17-14	Room GST		11.79	
06-18-14	[redacted]	[redacted]		257.09
		Total	257.09	257.09
		Balance Due	0.00 CDN	

GST Summary
Registration No: 846543619

Room	11.79
F&B	0.00
Other	0.00
Total	**11.79**

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.

#19

Parkeon PCN Evolution Steering Committee

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax CodeCA5%

Exit Lane 18/06/14 20:13
Receipt [redacted]

Short-term parking Exit
VP - No. 032541
17/06/14 21:01 -
18/06/14 21:00 -
Period 1d0h0'
Tax) $15.00

Total $15.00

Payment Received
MC [redacted] $15.00

Auth: [redacted]
Type:

Sub Total $14.29
Tax 5% 0.71