

## Board and Executive Expense Report

**Name** Kerry Bales  
**Title** SVP, Central Zone  
**Location** Red Deer  
 Expenses submitted during the month of October 2012

Travel (1)										
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
October 2012	Edmonton	Various meetings		7		18	25			
<b>Total</b>			\$ -	\$ 7	\$ -	\$ 18	\$ 25	\$ -	\$ -	\$ -

**Total for the Month** \$ 25

Maximum meal expense claimed in the month \$ 7  
 Maximum 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

**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

<u>BALES, KERRY</u> Cardholder's Name	<u>SENIOR VICE PRESIDENT</u> Cardholder's Position/Title	Billing Reporting Period: <u>20/10/2012</u>
<u>CENTRAL ZONE</u> Cardholder's Dept	<u>AHS MICHENER BEND</u> Cardholder's Site/Location	Total Statement Amount: <u>\$25.41</u>
<u>KERRY.BALES@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address	Last 6 digits of the P-Card #: <u>                    </u>	

Statement of Transactions								
Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
04/10/2012	297624824	MPARK00020161U, AUTOMOBILE PARKING LOTS AND GARAGES	9.00	CAD	9.00	.43	.00	Provincial Senior Leadership
16/10/2012	298503435	MCDONALD S #8165 Q04, FAST-FOOD RESTAURANTS	7.41	CAD	7.41	.35		Meeting with Minister Re: Sylvan Lake
16/10/2012	298503436	MPARK00020276U, AUTOMOBILE PARKING LOTS AND GARAGES	9.00	CAD	9.00	.43	.00	Meeting with Minister Re: Sylvan Lake

**AHS - Edmonton  
Accounts Payable  
NOV 15 2012  
RECEIVED**

Signatures:

Cardholder Designate (if Applicable)

By signing this statement

- I hereby certify that I have reviewed and reconciled this statement in BMO details 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.

[Signature]

Name of Cardholder Designate

[Signature]

Cardholder Designate Position/Title

[Signature]

Signature of Cardholder Designate

[Signature]

Date of Signature

Cardholder

By signing this statement

- I hereby certify that the P-Card issued to be was used for legitimate business purposes in accordance to AHS Corporate Policies and AHS P-Card Program User Guide.
- I acknowledge that the above Cardholder Designate has completed reviews and reconciliation in BMO details Online® on my behalf (if applicable).

[Signature]

Name of Cardholder

SENIOR VICE PRESIDENT

Cardholder Position/Title

[Signature]

Signature of Cardholder

[Signature]

Date of Signature

Approver Designate (if Applicable)

By signing this statement

- I hereby certify that I have reviewed and approved this statement in BMO details Online® in accordance to AHS Corporate Policies, Program User Guide and Training on behalf of a authorized approver.

[Signature]

Name of Approver Designate

Executive Admin. Coordinator

Approver Designate Position/Title

[Signature]

Signature of Approver Designate

[Signature]

Date of Signature

Approver

By signing this statement

- I hereby certify that the P-card issued to be was used for legitimate business purposes in accordance to AHS Corporate Policies and AHS P-Card Program User Guide and hereby approve the transactions as listed.
- I acknowledge that the above Approver Designate has completed reviews and approvals in BMO details Online® on my behalf (if applicable).

[Signature]

Name of Approver

[Signature]

Approver Position/Title

[Signature]

Signature of Approver

[Signature]

Date of Signature

Submit approved statement with attachments to Accounts Payable.

Attach:

- Original itemized receipts.
- 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 cheques payable to "Alberta Health Services"
- Return, refund and/or credit receipts
- Disputes letter

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 \_\_\_\_\_

City of Minister - Sylvan Lake

PLACE FACE UP ON DASH

Impark Lot 276

Expiration Date/Time

06:00 AM  
OCT 17, 2012

Purchase Date/Time: 02:17pm Oct 16, 2012

Total Parking: \$8.57

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Rate: \$9 - All Day  
Payment Type: Card

Ticket # 30059071

S/N #: 300010390833

Setting: Lot 276

Mach Name: Meter 1

GST #887315638RT0001

Auth #: 161749

RECEIPT

Impark Lot 276

Expiration Date/Time: 06:00am Oct 17, 2012

Purchase Date/Time: 02:17pm Oct 16, 2012

Total Parking: \$8.57

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Rate: \$9 - All Day  
Payment Type: Card

MasterCard

Ticket # 30059071

Setting: Lot 276

Mach Name: Meter 1

Auth #: 161749

Provincial Senior Leadership

PLACE FACE UP ON DASH

Impark Lot 161

Expiration Date/Time

EXP 06:00PM  
OCT 04, 2012

Purchase Date/Time: 08:27am Oct 04, 2012

Total Parking: \$8.57

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Rate: \$9 - Early Bird  
Payment Type: Card

Ticket # 72021590

S/N #: 100008460007

Setting: Lot 161

Mach Name: Meter 2

GST #887315638RT0001

RECEIPT

Impark Lot 161

Expiration Date/Time: 06:00pm Oct 04, 2012

Purchase Date/Time: 08:27am Oct 04, 2012

Total Parking: \$8.57

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Rate: \$9 - Early Bird  
Payment Type: Card

MasterCard

Ticket # 72021590

Setting: Lot 161

Mach Name: Meter 2

OR FREE! • SEE BACK MAKE IT A MEAL FOR FREE! • SEE BACK

City of Minister re:  
Sylvan Lake

Calgary Trail

10375 51 Avenue

Edmonton AB T6H 5H4

Store#: 3870 Tel#: 780-414-8865

Welcome to McDonald's

YOUR ORDER #1006qd1jbb

Time: 10/16/2012 18:20:51

Order # 80

ITEM	TOTAL
2 Cheeseburger	2.78
1 M French Fries	2.29
1 M Coke	1.99
Subtotal	7.06
Tax	0.35
Take Out Total	7.41
CREDIT CARD Charge	7.41
	0.00

GST #: 120907092