

## Board and Executive Expense Report

**Name** Kerry Bales  
**Title** SVP, Central Zone  
**Location** Red Deer  
 Expenses submitted during the month of November 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	P-Card	Various meetings		7		21	28			
<b>Total</b>			\$ -	\$ 7	\$ -	\$ 21	\$ 28	\$ -	\$ -	\$ -

**Total for the Month**      \$        28

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

*emailed to  
Public Disclosure Card  
Dec 4/12 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

BALES, KERRY Cardholder's Name	SENIOR VICE PRESIDENT Cardholder's Position/Title	Billing Reporting Period:	20/11/2012
CENTRAL_ZONE Cardholder's Dept	AHS MICHENER BEND Cardholder's Site/Location	Total Statement Amount:	\$27.91
KERRY.BALES@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address		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
26/10/2012	299567282	ROCKYVIEW GENERAL HQS, AUTOMOBILE PARKING LOTS AND	13.00	CAD	13.00	.62	.00	Parking - Mtg in Calgary for Budget
31/10/2012	299879097	MCDONALD S #8165 Q04, FAST-FOOD RESTAURANTS	7.41	CAD	7.41	.35	.00	Lunch - Meeting in Edm for Lamont Laundry
31/10/2012	299879098	IMPARK00020274A, AUTOMOBILE PARKING LOTS AND GARAGES	7.50	CAD	7.50	.36	.00	Parking for Mtg in Edmonton for Lamont Laundry

<b>Signatures</b>		
<b>Cardholder Designate (if Applicable)</b>		
By signing this statement: <ul style="list-style-type: none"> <li>• 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.</li> </ul>		
<u>Dawn Peterson</u> Name of Cardholder Designate	<u>Executive Associate</u> Cardholder Designate Position Title	
<u>[Signature]</u> Signature of Cardholder Designate	<u>Nov 21, 2012</u> Date of Signature	
<b>Cardholder</b>		
By signing this statement: <ul style="list-style-type: none"> <li>• 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</li> <li>• I acknowledge that the above Cardholder Designate has completed reviews and reconciliation in BMO details Online® on my behalf (if applicable)</li> </ul>		
<u>BALES, KERRY</u> Name of Cardholder	<u>SENIOR VICE PRESIDENT</u> Cardholder Position Title	
<u>[Signature]</u> Signature of Cardholder	<u>[Signature]</u> Date of Signature	
<b>Approver Designate (if Applicable)</b>		
By signing this statement: <ul style="list-style-type: none"> <li>• 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</li> </ul>		
<u>Kristina Russell</u> Name of Approver Designate	<u>EAC</u> Approver Designate Position Title	
<u>[Signature]</u> Signature of Approver Designate	<u>Nov 26 2012</u> Date of Signature	
<b>Approver</b>		
By signing this statement: <ul style="list-style-type: none"> <li>• 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</li> <li>• I acknowledge that the above Approver Designate has completed reviews and approvals in BMO details Online® on my behalf (if applicable)</li> </ul>		
<u>Chris Mazurkewich</u> Name of Approver	<u>EVP: COO</u> Approver Position Title	
<u>[Signature]</u> Signature of Approver	<u>Nov 27/12</u> Date of Signature	
<b>Submit approved statement with attachments to Accounts Payable:</b>		
<b>Attach:</b> <ul style="list-style-type: none"> <li>• Original itemized receipts</li> <li>• Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report)</li> </ul> <b>And where applicable:</b> <ul style="list-style-type: none"> <li>• Copies of pre approvals for travel</li> <li>• Personal cheque payable to "Alberta Health Services"</li> <li>• Return, refund and/or credit receipts</li> <li>• Disputes letter</li> </ul>	<b>Address:</b> Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor North Tower 10030-107 Street Edmonton, AB T5J 3E4	
<b>Accounts Payable only:</b>		
Reference # _____	Reviewed by _____	Date _____

ASH FACE UP

PLACE ON DASH FACE UP

PLACE ON DASH FACE UP

PLACE

ALBERTA HEALTH SERVICES

SPT-1 GST R124072513

EXPIRES

26 OCT 12

11:59 PM PAID \$ 13.00C

ENTRY TIME 26 OCT 12 01:31 PM

EXPIRES

26 OCT 12 11:59 PM

PAID \$ 13.00

RECEIPT SPACE 1

TABLEAU DE BORD  
VISIB. ?

PLACER SUR LE TABLEAU DE BORD  
DE CÔTÉ VISIBLE

PLACER SUR LE TABLEAU DE BORD  
DE CÔTÉ VISIBLE

PLACER SUR  
LE CÔTÉ VISIBLE

Parking for  
2013-2014 Budget Mtg  
in Calgary

IMPARK000202744  
10665 JASPER AVENUE  
EDMONTON, AB T5J3S9  
7804201976

MERCHANT ID: 976980051 TERM: 101

SALE

[REDACTED]

IMPARK000202744  
10665 JASPER AVENUE  
EDMONTON, AB T5J3S9  
7804201976

MERCHANT ID: 976980051 TERM: 101

SALE

[REDACTED]

MASTERCARD ENTRY METHOD: CHIP  
10/31/12 11:47:27  
IN #: 036905 APPR CODE: 134628  
BATCH #: 006601  
REF #: 005

AMOUNT \$7.50

PIN VERIFIED BY CARD ISSUER  
CARDHOLDER AGREES TO PAY ABOVE  
TOTAL AMOUNT IN ACCORDANCE WITH  
CARD ISSUER'S AGREEMENT  
MERCHANT AGREEMENT IF CREDIT HOLDER  
RETAIN THIS COPY FOR STATEMENT  
VERIFICATION

CARDHOLDER COPY

APPROVED

APPLICATION LABEL: MasterCard

AID: A000000041010

TUR: 00 00 00 00 00

01 02

===== TRANSACTION RECORD =====

Calgary Trail  
10375 51 Avenue  
Edmonton AB T6H 5H4

*McDonald's*

TYPE: PURCHASE

ACCT: MASTERCARD

\$ 7.41

CARD NUMBER: [REDACTED]  
DATE/TIME: 31-OCT-2012 11:08:21  
REFERENCE #: 68173630 0016601350 C  
AUTHOR. #: 140821  
ORDER #: 3100587

APP: MasterCard  
AID: A000000041010  
ARQC TVR: 0000008000  
ARQC: CBC8086E4AC9EA10  
TC/AAC: FC6CC800CC314A3  
VERIFIED BY PIN

01 APPROVED - THANK YOU 027

IMPORTANT - retain this copy for  
your records

\*\*\*\*\* CARDHOLDER COPY \*\*\*\*\*

*Quarter Panini - Cheese  
Meat.*

*KB.*

*Lunch - Kerry  
Bates*

*Lamont Laundry Meeting  
Edmonton*

FREE - SEE BACK MAKE IT A MEAL FOR FREE! - SEE BACK MAKE IT