

Board and Executive Expense Report

Name Mike Conroy
Title SVP, Edmonton Zone
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)
January 2013	Expense Claim	Various meetings	645	32		105	782			
Total			\$ 645	\$ 32	\$ -	\$ 105	\$ 782	\$ -	\$ -	\$ -

Total for the Month \$ 782

Maximum meal expense claimed in the month \$ 32
 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-13 To Jan 31 - 13
 Travel Period from: Jan 01-13 To Jan 31 - 13 (if applicable)
 Out-of-Province Travel

Name: Mike Conroy Position (Title): Senior Vice President
 Location: Edmonton - UAH Site Dept: Edmonton Zone DOFA Level: 3a (if applicable) Union: 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 Expenditure Type Project Task Number

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	71110100014	\$782.71						\$782.71		
2B												
2C												
2D												
				\$782.71								

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

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

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): Lois Facco 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 FEB 06 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): Chris Mazurkewich DOFA Level 2a Position # Phone # Ext
 Signature: Title EVP: COO Date Feb 8/13

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 Palka, Director Accounts Payable at 780-735-0506 or email mark.palka@albertahealthservices.ca

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 • 0006 • 71110100014 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'l).
 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						
14-Jan-13	Mtg with AB Health/D. Manual at Telus Plaza		Meeting				\$7.50					
16-Jan-13	Airfare to Vanc/BC to attend UBC EMBA Advisory Board		Meeting				\$645.31					
17-Jan-13	Taxi from Vanc Airport to Robson Square		Meeting	LD		\$32.35				\$36.55		
17-Jan-13	Return to Vanc Airport from Robson Square & YEG Pkg		N/A							\$38.00		
			N/A				\$23.00					
SUBTOTALS										\$74.55		Total Kms

MEAL PER DIEM RATES
 B = Breakfast = \$9.20 L = Lunch = \$11.60 D = Dinner = \$20.75 A = ALL MEALS = \$41.55
 BL = Breakfast & Lunch = \$20.80 BD = Breakfast & Dinner = \$29.95 LD = Lunch & Dinner = \$32.35

MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle
 → details of travel location to & from must be included above under the purpose of travel column
\$0.505 per km for under 5,000km/yr
\$0.47 per km for over 5,000km/yr
 or per Union Agreement

Enter \$0.505 km, \$0.47 km OR rate per Union Agreement (see Mileage details to the left)	
Mileage \$	
Travel \$ Subtotal	\$782.71
Enter on page 1 TOTAL TRAVEL \$	\$782.71

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

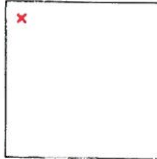
***** PLEASE DO NOT REPLY TO THIS E-MAIL *****



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 Vancouver

Book a hotel

Hotels provided by VWTMS

Why book your hotel stay at aircanada.com?

- 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 Vancouver? Great rates and additional Aeroplan Miles. **AVIS Budget**

Looking for ground transportation or attractions?

Booking Information

Booking Reference: [REDACTED]

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

Main Contact:
Mr Michael Conroy
[REDACTED]

Customer Care

Air Canada
1-888-247-2262
Flight Arrivals and Departures
1-888-422-7533

Vancouver 17 January 2013

UBC EMBA Advisory Board Meeting

Online Services

- [Manage](#) my booking online (view/change my booking; select seats*).
- [Request an upgrade](#)
- [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
AC239	Edmonton, Edmonton Int'l (YEG) Thu 17-Jan 2013 10:15	Vancouver, Vancouver Int'l (YVR) Thu 17-Jan 2013 10:56 - Terminal M	0	1hr41	E90	Tango Plus, V	
AC252	Vancouver, Vancouver Int'l (YVR) Thu 17-Jan 2013 22:30 - Terminal M	Edmonton, Edmonton Int'l (YEG) Fri 18-Jan 2013 00:57	0	1hr27	320	Tango Plus, V	

Passenger Information

1: Mr Michael Conroy : Adult (16+), Ticket Number: 0142116475659
 Air Canada - [REDACTED] Meal Preference : None
 Aeroplan : [REDACTED]
 Payment Card: [REDACTED] Special Needs: None
 Seat Selection: AC239 14D , AC252 13D

Purchase Summary

Fare Summary	Adult
Passenger Type	
Departing Flight - Tango Plus	259.00
Return Flight - Tango Plus	259.00
Surcharges	36.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	45.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	29.66
Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001)	2.40
Air Travellers Security Charge (ATSC)	14.25
Total airfare and taxes before options (per passenger)	645.31
Number of passengers	1
RBC Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$645.31



AUTHORIZATION NUMBER

MICHAEL CONROY

Valid and Expiry Date Checked

DATE	M / M	D / D	Y / Y
	01	17	13

TAXI LI # 109
NORTH VANCOUVER

DESCRIPTION	AMOUNT
	32.55
TIP	4.00
TOTAL	36.55

Customer Copy

VANCOUVER TAXI
790 CLARK DR
VANCOUVER, BC
604-871-1111

Term ID: 85129136

Purchase

Entry Method: 73503
 Amount: \$ 33.55
 Tax: \$ 4.00
 Total: \$ 38.55
 Date: 01/17/13 19:00
 Seq #: 0013490
 Appr Code: 046360
 Date: 01/02/13

*Parking. Meeting
w/ AH Donc Marie!*

IMPARK00020101A
0025 JASPER AVENUE
EDMONTON, AB T5J1S6
7804201976

GST# R128599770

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax CodeCA5%

Exit Lane 18/01/13 02:12
Receipt 030349

Short-term parking tkt
DL - No. 006325
17/01/13 08:50 -
18/01/13 08:49 -
Period 1d0h0'
(Tax) \$23.00

Total \$23.00

Payment Received
VISA \$23.00

Merch: 82005340013
Auth: 057848
Type: Swiped

Sub Total \$21.90
Tax 5% 1.10

046360 - 171

IT ID: 87169880093 TERM ID:

SALE

ENTRY METHOD

09:48:07

APPR CODE:

BATCH #:

REF #: 004

AMOUNT \$23.50

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

CARDHOLDER COPY

APPROVED

NOTIFICATION LABEL: Visa Credit

Credit
F9 AE FC BF 78
1 80 00
69 51 91 F8 78

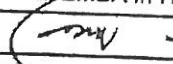
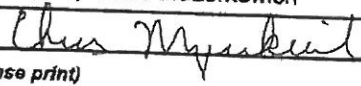
APPROVED
Thank You

Customer Copy

IMPORTANT:
in this copy for verification

HST 116495000

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: Vancouver, BC
Name: Mike Conroy		Employee #: [REDACTED]	Report To: Chris Mazurkewich
Department: SVP-EZ		Office Location: UAH Site	Business Phone #: [REDACTED]
What former entity payroll systems is the employee currently being paid from? (Please <input checked="" type="checkbox"/> one from below).			
<input type="checkbox"/> AADAC	<input type="checkbox"/> Calgary Health	<input type="checkbox"/> East Central	
<input type="checkbox"/> Alberta Cancer Board	<input 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	Expense/Secondary Account
101	0006	711101000014	
Dates: From (day/month) 17/01 (year) 2013 to (day/month) 17/01 (year) 2013			
Purpose of Trip: Member attendance at EMBA in Health Care Advisory Group Meeting (agenda attached)			
Employee Signature: 			Date: 02/01/13
APPROVALS: (Sr. VP prior approval required for all Out-of-Province Travel) (Travel Advance Approval - Travel Policy Appendix A)			
Approved By: (please print) Chris Mazurkewich		Title: EVP/COO	Phone #: [REDACTED]
Signature: 		Date: Jan 2/13	Phone #: [REDACTED]
Approved By: (please print)		Title:	Date:
Signature:			

B. ESTIMATE OF EXPENSES Canadian Dollars US Dollars

Category	Description	Amount
1. Accommodation Charge	# Nights at \$	
2. Meals	Lunch only	\$0.00
3. Registration	N/A	11.60
4. Airfare or Other Travel Costs	Approximate Cost	500.00
5. Other Expenses (please specify)	Airport Parking	25.00
Total Estimated Travel Costs		\$536.60

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

Advance Amount (\$) Requested:	Date Required:

- > 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.