

Board and Executive Expense Report

Name Patti Grier
Title Chief of Staff
Location Calgary
 Expenses submitted during the month of December 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)
November/ December 2012	P-Card	Various meetings			548	50	598			
November/ December 2012	Expense Claim	Mileage and meals for various meetings		30		344	374			
Total			\$ -	\$ 30	\$ 548	\$ 394	\$ 972	\$ -	\$ -	\$ -

Total for the Month \$ 972

Maximum meal expense claimed in the month \$ 21
 Maximum daily hotel rate claimed in the month \$ 149
 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>GRIER, PATTI</u> Cardholder's Name	<u>CHIEF OF STAFF</u> Cardholder's Position/Title	Billing Reporting Period:	<u>20/12/2012</u>
<u>BOARD OFFICE</u> Cardholder's Dept	<u>SOUTHPORT TOWER</u> Cardholder's Site/Location	Total Statement Amount:	<u>\$598.25</u>
<u>PATTI.GRIER@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address		Last 6 digits of the P-Card #:	<u>[REDACTED]</u>

Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
28/11/2012	302294777	MPARK00020383U, AUTOMOBILE PARKING LOTS AND GARAGES	26.00	CAD	26.00	1.24	.00	Parking - Quality & Safety -10030 107St NW Edmonton
29/11/2012	302470866	MPARK00020383U, AUTOMOBILE PARKING LOTS AND GARAGES	18.00	CAD	18.00	.86	.00	Parking - Audit & Finance 10030 107 St NW Edmonton
29/11/2012	302470867	THE WESTIN EDMONTON, WESTIN HOTELS	180.33	CAD	180.33	14.03	.00	Accommodation/Parking - Audit & Finance Nov 28 /12 Edmonton
30/11/2012	302470865	MPARK00030178U, AUTOMOBILE PARKING LOTS AND GARAGES	6.30	CAD	6.30	.30	.00	Mtg YMCA President & CEO 101 3 St SW Calgary
13/12/2012	303775790	THE WESTIN EDMONTON, WESTIN HOTELS	367.62	CAD	367.62	22.53	.00	Accommodations/Parking for 2 nights - Dec 11/12 AHS Bd mtgs

[Handwritten Signature]

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.

Name of Cardholder Designate

Cardholder Designate Position/Title

Signature of Cardholder Designate

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).

GRIER, PATTI

CHIEF OF STAFF

Name of Cardholder

Cardholder Position/Title

Signature of Cardholder

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.

PAULA FINNISON

EXECUTIVE ASSISTANT

Name of Approver Designate

Approver Designate Position/Title

Signature of Approver Designate

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).

Stephen Lockwood

Board Chair

Name of Approver

Approver Position/Title

Signature of Approver

Date of Signature

Attach approved receipts to 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 cheque 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

Accountability

Reference #: _____

Reviewed by: _____

Date: _____

TICKET VOID IF RE-SOLD

IMPARK
PHONE: 780-420-1976
DAILY RATE
Meter: LOT 383
Time: 12:05P NOV 28
Price: \$25.00
Card: [REDACTED]
Exp.: [REDACTED]
Expires:

PLACE THIS SIDE UP ON DASH

November 28, 2012
Quality & Safety Committee Meeting
Parking at AHS Corporate Office
10030 107 Street NW, Edmonton, AB

TICKET VOID IF RE-SOLD

6:00PM WED
NOV 28 12
GST NO. 887315638RT0001
INSTRUCTIONS ON BACK

PLACE THIS SIDE UP ON DASH

TICKET VOID IF RE-SOLD

IMPARK
PHONE: 780-420-1976
EARLY BIRD
Meter: LOT 383
Time: 7:53A NOV 29
Price: \$18.00
Card: [REDACTED]
Exp.: [REDACTED]
Expires:

PLACE THIS SIDE UP ON DASH

November 29, 2012
Audit & Finance Committee Meeting
Parking at AHS Corporate Office
10030 107 Street NW, Edmonton, AB

TICKET VOID IF RE-SOLD

6:00PM THU
NOV 29 12
GST NO. 887315638RT0001
INSTRUCTIONS ON BACK

PLACE THIS SIDE UP ON DASH

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

Miss Patti Grier

Canada

Email: PATTI.GRIER@ALBERTAHEALTH
SERVICES.CA

Page Number : 1

Guest Number: [REDACTED]

Folio ID : A

No. Of Guest: 1

Room Number : 1216

Room Rate : 139.00

Club Account: [REDACTED]

Invoice Nbr: 134842

Arrive Date: 28-NOV-12 16:48

Depart Date: 29-NOV-12

Information Invoice

Tax ID: 861336493RT0005
The Westin Edmonton 29-NOV-12 06:48 SUJIRAI

Date	Reference	Description	Charges	Credits
28-NOV-12	RT1216	Room Charge	139.00	
28-NOV-12	RT1216	GST	7.02	
28-NOV-12	RT1216	DMF	1.39	
28-NOV-12	RT1216	Tourism Levy	5.62	
28-NOV-12	RT1216	Parking Self	26.00	
28-NOV-12	RT1216	GST	1.30	
29-NOV-12	MC	Mastercard	-180.33	
		** Total	180.33	-180.33
		*** Balance	0.00	

November 28, 2012
AHS Board Meetings Edmonton
Accommodation/Hotel Self Parking

Continued on the next page

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

Miss Patti Grier

Canada

Email: PATTI.GRIER@ALBERTAHEALTH
SERVICES.CA

Page Number : 2

Guest Number: [REDACTED]

Folio ID : A

No. Of Guest: 1

Room Number : 1216

Room Rate : 139.00

Club Account: [REDACTED]

Invoice Nbr: 134842

Arrive Date: 28-NOV-12 16:48

Depart Date: 29-NOV-12

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

As a Starwood Preferred Guest you have earned at least 546 Starpoints for this visit G671021009

EXPENSE SUMMARY REPORT

Date	Room	GST	Tour Levy	Food\Bev	Phone	Other
28-NOV-12	139.00	7.02	5.62	0.00	0.00	28.69
Total	139.00	7.02	5.62	0.00	0.00	28.69

Date	Total	Payment
28-NOV-12	180.33	0.00
Total	180.33	0.00

RECEIPT

Stall # 4

Expiration Date/Time

03:43 PM

NOV 30, 2012

Purchase Date/Time: 01:43pm Nov 30, 2012

Total Parking: \$6.00

Total FEDERAL: \$0.30

Total Due: \$6.30

Total Paid: \$6.30

Ticket #: 00007663

Rate: 2 HOURS

Payment Type: Card

Setting: Lot 17B

Mach Name: Lot 17B-1

Auth #: 154435

GST REG #R102466000

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November 30, 2012
Meeting with YMCA President & CEO & AHS
President & CEO
Location: 101 3rd Street SW Calgary
Parking Receipt

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 780-426-3636 / 780-428-1454
 http://www.westin.com/edmonton



Ms Grier, Patti Page Number 1 Invoice Nbr 1000094408
 Alberta Health Services Guest Number [REDACTED] Arrive Date 12-10-2012
 [REDACTED] Folio ID A Depart Date 12-13-2012
 [REDACTED] No. Of Guest 1
 Room Number 908
 Club Account [REDACTED]
 Time 12-14-2

Event: December Board Meetings - Edmonton
 Dec 11 & 12 Accommodation & Parking
 Event: Judicial Inquiry - Edmonton
 Dec 10 Accommodation & Parking Personal Credit Card

Duplicate Invoice

Date	Reference	Description	Charges	Credits
12-10-2012	RT908	Room Charge	\$149.00	
12-10-2012	RT908	DMF	\$1.49	
12-10-2012	RT908	Tourism Levy	\$6.02	
12-10-2012	RT908	Parking Self	\$26.00	
12-10-2012	RT908	GST	\$1.30	
12-11-2012	RT908	Room Charge	\$149.00	
12-11-2012	RT908	DMF	\$1.49	
12-11-2012	RT908	Tourism Levy	\$6.02	
12-11-2012	RT908	Parking Self	\$26.00	
12-11-2012	RT908	GST	\$1.30	
12-12-2012	RT908	Room Charge	\$149.00	
12-12-2012	RT908	DMF	\$1.49	
12-12-2012	RT908	Tourism Levy	\$6.02	
12-12-2012	RT908	Parking Self	\$26.00	
12-12-2012	RT908	GST	\$1.30	
12-13-2012	VI	Visa		\$-156.51
12-13-2012	VI	Visa		\$-27.30
12-13-2012	MC	Mastercard		\$-367.62
12-14-2012	MC	Mastercard		\$-0.00
		** Total	\$551.43	\$-551.43
		** Balance	\$0.00	

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

EXPENSE SUMMARY REPORT
 Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
12-10-2012	\$149.00	\$0.00	\$6.02	\$0.00	\$0.00	\$28.79	\$183.81	\$0.00
12-11-2012	\$149.00	\$0.00	\$6.02	\$0.00	\$0.00	\$28.79	\$183.81	\$0.00
12-12-2012	\$149.00	\$0.00	\$6.02	\$0.00	\$0.00	\$28.79	\$183.81	\$0.00
12-13-2012	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-551.43
Total	\$447.00	\$0.00	\$18.06	\$0.00	\$0.00	\$86.37	\$551.43	\$-551.43

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
780-426-3636 / 780-428-1454
<http://www.westin.com/edmonton>



Ms Grier, Patti	Page Number	2	Invoice Nbr	1000094408
Alberta Health Services	Guest Number	[REDACTED]	Arrive Date	12-10-2012
[REDACTED]	Folio ID	A	Depart Date	12-13-2012
	No. Of Guest	1		
	Room Number	908		
	Club Account	[REDACTED]		
	Time	12-14-2012 04:20		

Duplicate Invoice

Your SPG Account [REDACTED] earned at least 1575 Starpoints. Get 10,000 more with the SPG Credit Card. spg.com/axpcard

I have received The Globe and Mail. If you wish to decline this paper you will be credited \$1.00 (Mon to Fri) and \$2.00 (Sat).

