

## Board and Executive Expense Report

**Name** Penny Rae  
**Title** SVP, Capital Management  
**Location** Calgary

Expenses submitted during the month of October 2012

			Travel (1)				Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel		
September/October 2012	P-Card	Travel for various meetings/conference	464		966	496	1,926		
September/October 2012	Expense Claim	Travel for various meetings/conference		106		488	594		
<b>Total</b>			\$ 464	\$ 106	\$ 966	\$ 984	\$ 2,520	\$ -	\$ -

**Total for the Month** \$ 2,520

Maximum meal expense claimed in the month \$ 21  
 Maximum daily 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



AHS - Edmonton  
Accounts Payable

NOV 05 2012

AHS - Edmonton  
Accounts Payable

NOV 16 2012

Q & C - Completed  
Initials *[Signature]*

**TRAVEL, HOSPITALITY & HOSTING EXPENSE CLAIM**

**SECTION A: Employee Details (for AHS Staff ONLY)**

Travel Period from: 27-Sep-12 to 12-Oct-12

- 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)

Name <i>Penny Rae</i>	Position (Title) SVP Capital Management	Employee # (E-People) [Redacted]	Employee # (Legacy) [Redacted]
Location Southport Tower, Calgary	Dept Capital Management	Union No	Business Phone # [Redacted] Ext [Redacted] Out-of-Province Travel

What is your former legacy region (prior to AHS consolidation)? Please click in cell and select from dropdown menu → East Central

**SECTION E: Finance Coding & Total Claim**

CAPITAL PROJECT CODING ONLY →	Project Number _____	Project Task Number _____
	Expenditure Organization _____	Expenditure Type _____

Total - Section B: Travel - Pg 2				
Pg	Bal Unit	Location	Functional Centre (FC)	Total
2A	101	0005	71110550009	\$594.08
2B				
2C				
2D				
				\$594.08

Total - Section C&D: Other & Foreign Expenses - Pg 3				
Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total

TOTAL REIMBURSEMENT	
Total Section B	\$594.08
Total Section C&D	
Less Cash Advance	
<b>TOTAL CLAIM</b>	<b>\$594.08</b>

\*\*User to enter Coding & \$ amounts

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) Dawn A. Rand Phone # 403-431150 Ext

I hereby acknowledge that I have read the "Travel, Hospitality and Hosting Expense 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 *[Signature]* Date 22-Oct-12

I hereby certify that I have reviewed the expenses and they are in accordance with the applicable policies (Policy #'s CF-03, CF-04). 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 # [Redacted] Phone # [Redacted] Ext

Signature *[Signature]* Title EVP & COO Date *Oct 25/12*

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





**YELLOW CAB** *CASH* 780-462-3456


GST# \_\_\_\_\_ GST #R100403070

Date: *4-10-12* Amount: *10.00*

Driver: *[Signature]* Car #: *360*

From: *Hotel*

To: *GRH*

 10135 - 31 Avenue, Edmonton, AB T6N 1C2

**Oct. 4 taxi from Coast Edmonton Plaza Hotel to the Glenrose for Energy Awareness Kickoff**

**YELLOW CAB** *CASH* 780-462-3456


GST# \_\_\_\_\_ GST #R100403070

Date: *03 10 12* Amount: *10*

Driver: *[Signature]* Car #: *73)*

From: \_\_\_\_\_

To: \_\_\_\_\_

 10135 - 31 Avenue, Edmonton, AB T6N 1C2

**Oct. 4 taxi from the Glenrose after the Energy Awareness Kick-off to the Coast Edmonton Plaza Hotel for the Provincial Senior Leaders Meeting**

**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>RAE, PENELOPE</u>	<u>SVP CAPITAL MANAGEMENT</u>	Billing Reporting Period:	<u>20/10/2012</u>
Cardholder's Name	Cardholder's Position/Title		
<u>CAPITAL MANAGEMENT</u>	<u>SOUTHPORT TOWER</u>	Total Statement Amount:	<u>\$1,926.10</u>
Cardholder's Dept	Cardholder's Site/Location		
<u>PENNY.RAE@ALBERTAHEALTHSERVICES.CA</u>		Last 6 digits of the P-Card #	<u>[REDACTED]</u>
Cardholder's e-mail address			

**Statement of Transactions**

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
21/09/2012	296461354	YELLOW CAB, LIMOUSINES AND TAXICABS	64.00	CAD	64.00	3.05	.00	Taxi fr Seventh St Plaza to EIA
25/09/2012	296650020	7561679 CANADA INC, LIMOUSINES AND TAXICABS	61.00	CAD	61.00	2.90		Taxi from Montreal Trudeau Airport to Hotel
25/09/2012	296745516	YELLOW CAB, LIMOUSINES AND TAXICABS	64.00	CAD	64.00	3.05	.00	Taxi fr Airport to Seventh St Plaza
25/09/2012	296745517	YELLOW CAB, LIMOUSINES AND TAXICABS	64.00	CAD	64.00	3.05	.00	Taxi fr Seventh St Plaza to EIA
26/09/2012	296745515	7561679 CANADA INC, LIMOUSINES AND TAXICABS	50.00	CAD	50.00	2.38		Taxi fr Intercontinental Hotel Montreal to Airport
26/09/2012	296929207	HOTEL INTERCONTINENTAL, INTERCONTINENTAL HOTELS	834.78	CAD	834.78	.00		Hotel - Presenting at CHES Montreal Conf.
26/09/2012	296929208	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	100.80	CAD	100.80	4.80	.00	Airport Parking while in Montreal
01/10/2012	297296495	AIR CAN 0142112938615, AIR CANADA	464.36	CAD	464.36	.00	.00	Airfare - Cgy/Edm Return Oct 3/4
04/10/2012	297625301	COAST EDMONTON PLAZA H, LODGING HOTELS, MOTELS, RESORTS	130.96	CAD	130.96	.00	.00	Hotel re Prov Sr Leaders Mtg.
04/10/2012	297625302	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	25.20	CAD	25.20	1.20	.00	Airport Parking Oct 3-4
09/10/2012	298009884	AIRPORT TAXI SERVICE, LIMOUSINES AND TAXICABS	59.00	CAD	59.00	2.81	.00	Taxi fr Coast Plaza to EIA
15/10/2012	298408651	PRECISE PARKLINK INC, AUTOMOBILE PARKING LOTS AND GARAGES	8.00	CAD	8.00	.36		Parking at RDRH

AHS - Edmonton  
Accounts Payable

NOV 05 2012

RECEIVED

AHS - Edmonton  
Accounts Payable

NOV - 6 2012

Q & C - Completed  
Initials 



Signatures		
<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 A. Rand</u> Name of Cardholder Designate	<u>Executive Assistant</u> Cardholder Designate Position/Title	
<u>Dawn A. Rand</u> Signature of Cardholder Designate	<u>Oct 22, 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>RAE, PENELOPE</u> Name of Cardholder	<u>SVP CAPITAL MANAGEMENT</u> Cardholder Position/Title	
<u>Pae</u> Signature of Cardholder	<u>Oct 22, 2012</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>Executive Admin Coordinator</u> Approver Designate Position/Title	
<u>K Russell</u> Signature of Approver Designate	<u>Oct 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 Mazurkewicz</u> Name of Approver	<u>EVP &amp; Co</u> Approver Position/Title	
<u>Chris Mazurkewicz</u> Signature of Approver	<u>Oct 26/12</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> And where applicable: <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: _____

PENELOPE RAE  
AB HEALTH SERVICES

**BARREL TAXI** (780) 489-7777  
**CHECKER** (780) 484-8888

Taxi on Sept. 13/12 from Seventh Street Plaza to the Edmonton International Airport after facilitating an all day Lean / Process Excellence Overview meeting with Contracting Procurement & Supply Management and Finance

GST # 100403070  
G.S.T. # 899 127 818  
FROM HATRIX HOT  
TO IAP  
PRINT NAME  
CUSTOMER'S SIGNATURE X *[Signature]*

ADMINISTRATION LINE: (780) 465-8500  
AUTH. NO. DRIVER UNIT NO. 8833  
TIME DAY 13 MO 09 YR 12  
0199037

FARE	58.00
INTL	
GRATUITY	6.00
TOTAL	64.00

CUSTOMER COPY

THE ISSUER OF THE CARD IDENTIFIED ON THIS ITEM IS AUTHORIZED TO PAY THE AMOUNT SHOWN AS TOTAL UPON PROPER PRESENTATION. I PROMISE TO PAY SUCH TOTAL TOGETHER WITH ANY OTHER CHARGES DUE THEREON SUBJECT TO AND IN ACCORDANCE WITH THE AGREEMENT COVERING THE USE OF SUCH CARD.

PENELOPE RAE  
AB HEALTH SERVICES

**J.P. LIMO**  
Tél.: (514) 952-3711

CLERK / COMMIS AUTH. NO. : N° D'AUT.

Valid and Expiry Date Check  
Vérification de la date de validation et de la date d'expiration  
DATE: 09/23/12

DESCRIPTION	AMOUNT / MONTANT
	55.00
G.S.T./T.P.S.	.
H.S.T./T.V.H.	.
P.S.T./T.V.P.	.
Q.S.T./T.V.Q.	.
TIP POURBOIRE	6.00
TOTAL	61.00

CUSTOMER COPY / COPIE DU CLIENT

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL together with any other charges due thereon subject to and in accordance with the agreement governing the use of such card.  
L'organisateur de la carte doit le numéro figure, ci-dessus est autorisé à payer le montant inscrit au TOTAL sur présentation conforme. Je m'engage à rembourser ledit montant ainsi que tous les frais s'y rapportant conformément aux conditions d'utilisation régissant l'usage de ladite carte.

CUSTOMER SIGNATURE / SIGNATURE DU CLIENT X *[Signature]*

5952043

Taxi on Sept. 23/12 from Montreal Trudeau Airport to the Intercontinental Hotel Montreal to present and attend the CHES 2012 Montreal Conference

PENELOPE RAE  
AB HEALTH SERVICES

**YELLOW** (780) 462-3456  
**PRESTIGE** (780) 462-4444  
ADMINISTRATION (780) 465-8500

Taxi on Sept. 17/12 from Edmonton International Airport to Seventh Street Plaza to attend the Capital Projects Senior Executive Committee meeting with the Province

G.S.T.#  
FROM *[Signature]*  
TO 1003-1071  
PRINT NAME  
CUSTOMER'S SIGNATURE X *[Signature]*

AUTH. NO. DRIVER UNIT NO.  
TIME DAY 17 MO 09 YR 12  
3556573

FARE	58.00
INTL	
GRATUITY	6.00
TOTAL	64.00

CUSTOMER COPY

THE ISSUER OF THE CARD IDENTIFIED ON THIS ITEM IS AUTHORIZED TO PAY THE AMOUNT SHOWN AS TOTAL UPON PROPER PRESENTATION. I PROMISE TO PAY SUCH TOTAL TOGETHER WITH ANY OTHER CHARGES DUE THEREON SUBJECT TO AND IN ACCORDANCE WITH THE AGREEMENT COVERING THE USE OF SUCH CARD.



CHARGE TO: [REDACTED] ACCOUNT NO. [REDACTED]

PENELOPE RAE  
AB HEALTH SERVICES

**YELLOW CAB** (780) 462-3456  
**PRESTIGE CABS** (780) 462-4444

Taxi on Sept. 17/12 from Seventh Street Plaza to the Edmonton International Airport after attending the Capital Projects Senior Executive Committee meeting with the Province

GST # 100403070

G.S.T.# [REDACTED]

FROM  
100 St. J. St.

TO  
[REDACTED]

PRINT NAME  
[REDACTED]

CUSTOMER'S SIGNATURE  
X [Signature]

ADMINISTRATION (780) 465-8500

AUTH. NO.	DRIVER	UNIT NO.
77		
TIME	DAY	MO. YR.
	17	12 12

4353278



FARE	58.00
INTL	
GRATUITY	6.00
TOTAL	64.00

CUSTOMER COPY

THE ISSUER OF THE CARD IDENTIFIED ON THIS ITEM IS AUTHORIZED TO PAY THE AMOUNT SHOWN AS TOTAL UPON PROPER PRESENTATION. I PROMISE TO PAY SUCH TOTAL TOGETHER WITH ANY OTHER CHARGES DUE THEREON SUBJECT TO AND IN ACCORDANCE WITH THE AGREEMENT COVERING THE USE OF SUCH CARD.

DO NOT WRITE ABOVE THIS LINE - NE RIEN ECRIRE AU-DESSUS DE CETTE LIGNE

PENELOPE RAE  
AB HEALTH SERVICES

EXPIRY DATE / DATE D'EXPIRATION	DATE OF PURCHASE / DATE D'ACHAT	AUTHORIZATION NUMBER / NO. D'AUTORISATION
CLEVER / COMMISS		
DEPT.-RAYON		

Taxi on Sept. 26/12 from InterContinental Montreal Hotel to Montreal - Trudeau Airport after presenting at and attending the CHES Montreal 2012 Conference

SALES DRAFT - FACTURE

5595519

DESCRIPTION	AMOUNT-MONTANT
	45.00
	5.00

CARDHOLDER'S SIGNATURE - SIGNATURE DU TITULAIRE  
CARDHOLDER WILL PAY TOTAL AMOUNT SHOWN TO CARD ISSUER ACCORDING TO CARDHOLDER AGREEMENT WITH CARD ISSUER.  
LE TITULAIRE S'ENGAGE A REMBOURSER L'EMETTEUR DE LA CARTE DU MONTANT TOTAL FIGURANT SUR CETTE FACTURE, CONFORMEMENT A LA CONVENTION REGISSANT L'UTILISATION DE LA CARTE.



TOTAL \$ 50.00

PLEASE RETAIN THIS COPY AS RECORD OF YOUR TRANSACTION / Veuillez conserver cette copie comme preuve de votre transaction

CUSTOMER COPY / COPIE DU CLIENT

RECEIPT

GST NO. R122556194

EXIT No. A3  
IN: 09/23/12 05:59  
OUT: 09/26/12 10:33  
DURATION: 3 04: 34  
PAID: \$ 102.80  
(GST INCLUDED)  
MASTERCARD

Calgary International Airport Parking from Sept. 23rd to 26th while attending and presenting at the CHES Montreal 2012 Conference

AUTH. CODE 123349  
REF. 5  
THANK YOU FOR YOUR VISIT





Ms Penny Rae

CA

N° de Chambre/  
Room Number : 1611

Date d'Arrivée/  
Arrival Date: : 23-09-12

Date de Départ/  
Departure : 26-09-12

Clients/  
Guests : 1

Tarif Journalier/  
Daily Rate : 229

Page de Pages/  
Page of Pages : 2 de / of 2

Date	Description	Montant/Charges	Paiements/Payments
	<b>Total:</b>	<b>834.78</b>	<b>834.78</b>
	<b>Solde / Balance:</b>		<b>0.00</b>
	<b>Montant Net / Net Amount:</b>		<b>702</b>
	TPS: Revenus Chambre / GST on Room Revenue:		35.55
	TVQ: Revenus Chambre / PST on Room Revenue:		70.92
	TPS: Nourriture & Boissons / GST on F&B:		0.00
	TVQ: Nourriture & Boissons / PST on F&B:		0.00
	TPS: Telephone / GST on Telephone:		0.00
	TVQ: Telephone / PST on Telephone:		0.00
	TPS: Autres / GST on Others:		0.75
	TVQ: Autres / PST on Others:		1.50

Signature: \_\_\_\_\_

N° Taxe / Tax #  
TPS/GST 844035584 RP0001  
TVQ/PST 1213205702 TQ0001

360, Rue Saint-Antoine Ouest, Montréal (Québec) Canada H2Y 3X4  
Tel: (514) 987 9900 Fax: (514) 847 8550  
montreal@ihg.com www.montreal.intercontinental.com



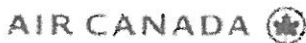
**Dawn Rand**

**From:** Penny Rae  
**Sent:** October 01, 2012 1:40 PM  
**To:** Dawn Rand  
**Subject:** FW: Air Canada - 03-Oct: Calgary - Edmonton (booking ref: L86ZAV) - seat selected

**Airfare from Calgary to Edmonton Return on October 3/4, 2012 to attend AHS's Provincial Senior Leaders Meeting in Edmonton on October 4th**

**From:** Air Canada [mailto:confirmation@aircanada.ca]  
**Sent:** October 01, 2012 13:37  
**To:** Penny Rae  
**Subject:** Air Canada - 03-Oct: Calgary - Edmonton (booking ref: L86ZAV) - seat selected

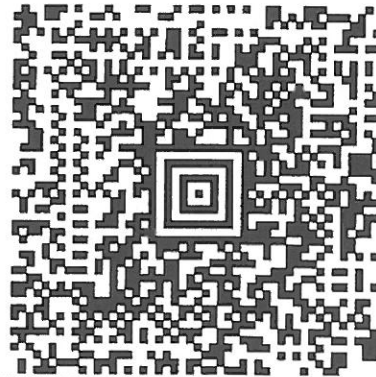
\*\*\*\*\* PLEASE DO NOT REPLY TO THIS E-MAIL \*\*\*\*\*



**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 Edmonton**

From (per night)      From (per night)      From (per night)

**\$200** CAD

**\$363** CAD

**\$104** CAD



The Sutton Place Hotel - Edmonton:  
★★★★★

The Fairmont Hotel Macdonald:  
★★★★★

Days Inn Edmonton Downtown:  
★★★★★

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- Great choice of hotels
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**Need a car in Edmonton?** Great rates and additional Aeroplan Miles. **AVIS Budget**

## Booking Information

Booking Reference: **L86ZAV**

### Customer Care

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

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

#### Main Contact:

Mrs Penelope J Rae  
penny.rae@albertahealthservices.ca  
Mobile: [REDACTED]  
Home: [REDACTED]  
Work: [REDACTED]  
At destination: [REDACTED]

#### Online Services

**Manage** my booking online (view/change my booking; select seats\*).  
**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
AC8369 <sup>2</sup>	Calgary (YYC) Wed 03-Oct 2012 20:55	Edmonton, Edmonton Int'l (YEG) Wed 03-Oct 2012 21:47	0	0hr52	DH3	Tango Plus, H	
AC8155 <sup>2</sup>	Edmonton, Edmonton Int'l (YEG) Thu 04-Oct 2012 18:00	Calgary (YYC) Thu 04-Oct 2012 18:52	0	0hr52	DH3	Tango, G	

Operated by:

<sup>2</sup> Air Canada Express - Jazz

## Passenger Information

1: Mrs Penelope J Rae : Adult (16+), Ticket Number: 0142112938615

Air Canada - [REDACTED] Meal Preference : None  
Aeroplan : [REDACTED]  
Payment Card: [REDACTED] Special Needs: None  
Seat Selection: AC8369 9C

## Purchase Summary

### Fare Summary

Passenger Type	Adult
Departing Flight - Tango Plus	212.00
Return Flight - Tango	142.00
Surcharges	24.00
<b>Taxes, Fees and Charges</b>	
Canada Airport Improvement Fee	50.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	22.11
Air Travellers Security Charge (ATSC)	14.25
Total airfare and taxes before options (per passenger)	464.36
Number of passengers	1



RBC Travel Insurance (declined)

0.00

**Grand Total - Canadian dollars**

**\$464.36**

The following charges (tax inclusive) will appear on your credit or debit card statement:

Air Canada: \$464.36 (Airfare - per ticket)

Ticket number(s): 0142112938615

## enRoute City Guide

### Edmonton

Sitting on the 53rd parallel, Edmonton is the most northern city in the Americas with a population of over one million. Though it does feel northerly, it doesn't feel particularly crowded, maybe because it straddles the North Saskatchewan River to create the largest urban green space in North America...

[▶ Read the complete guide](#)

[What do you think](#) of our new City Guide feature?



## Fare Rules

### Departing Flight Calgary (YYC) To Edmonton (YEG) - Tango Plus

- **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.
  - **Airport same-day changes** (subject to availability) are permitted at a flat fee of \$75 CAD/USD per direction, per passenger. Same-day flights only.
  - **Same-day standby** is not permitted, except for passengers travelling on a flight between Toronto and Montreal, or Toronto and Ottawa (connecting flights excluded).
  - Flights can only be used in sequence from the place of departure specified on the itinerary.
- **Cancellations:**
  - Tickets are **non-refundable** and **non-transferable**.
  - **Cancellations** can be made up to 45 minutes prior to departure.
  - Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.
  - Customers who **no-show** their flight will forfeit the fare paid.
- **Complimentary advance standard seat selection** on Air Canada and Air Canada Express (operated by Jazz), subject to availability.
- Earn 100% Air Canada Status Miles for Air Canada-operated flights.

### Return Flight Edmonton (YEG) To Calgary (YYC) - Tango

- **Changes:**
  - Prior to day of departure - **Change fee** per direction, per passenger, is \$75 CAD plus

RAE PENELOPE

ECONOMY/E TANGO PLUS  
ETKT0142112938615

Frequent flyer/Voyageur assidu  
AC\*A

Flight/Vol  
AC 8369 03OCT

From/De  
CALGARY

Destination  
EDMONTON-YEG

Boarding Time/Heure d'embarquement 20:20 Gate/Porte A02 Seat/Place 09C

Departure Time/Heure de depart 20:55

Airline Use/A usage interne 0019 KYC410

Boarding Pass | Carte d'accès à bord



RAE PENELOPE

ECONOMY/E TANGO  
ETKT0142112938615

Frequent flyer/Voyageur assidu  
AC\*A

Flight/Vol  
AC 8155 04OCT

From/De  
EDMONTON-YEG

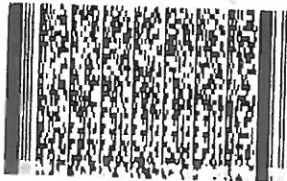
Destination  
CALGARY

Boarding Time/Heure d'embarquement 17:25 Gate/Porte 49 Seat/Place 02F

Departure Time/Heure de depart 18:00

Airline Use/A usage interne 0002 KYEG656

Boarding Pass | Carte d'accès à bord



RAE P

Cabin/Cabine  
Y

Flight/Vol  
AC 8155  
CALGARY

Seat/Place  
02F WINDOW/HUELOT

Remarks/Observations

AIR CANADA

MEMBER OF THE STAR ALLIANCE



10155 105th Street,  
 Edmonton, AB, T5J 1E2  
 Tel: (780) 423-4811 Fax: (780) 423-3204

**0911**

**Overnight stay at the Coast Edmonton  
 Plaza Hotel on October 3rd to attend the  
 Provincial Senior Leaders Meeting  
 on October 4th**

**Mrs Penny Rae**  
 10301 Southport Lane S.W.  
 Calgary AB T2W 1S7  
 CANADA

**Invoice**

Invoice date 10/4/2012  
 Invoice number 212102  
 Our reference [REDACTED]  
 Client Number [REDACTED]  
 GST Number 10103 5467 RT0020

Date	Description	Quantity	Unit Price	Total ()
10/3/2012	Room Charge	1	119.00	119.00
10/3/2012	GST Taxes	1	6.01	6.01
10/3/2012	Tourism Levy	1	4.76	4.76
10/3/2012	Destination Market Fee	1	1.19	1.19
<b>Total invoice</b>				<b>130.96</b>
<b>Total Paid</b>				<b>-130.96</b>
<b>Total Due</b>				<b>0.00</b>

Total GST 6.01

I agree that my liability for any charges incurred by me 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 of the full amount of these charges. Interest will be charged on any overdue balance.

**Signature X**

**RECEIPT**  
**GST NO. R122556194**

EXIT NO. A2  
 IN: 13/03/12 19:57  
 OUT: 13/04/12 19:03  
 DURATION: 0 23: 03  
 PAID: \$ 25.20  
 (GST INCLUDED)  
 MASTERCARD  
 AUTH. CODE 210327  
 REF. 43  
 THANK YOU FOR  
 YOUR VISIT

**Calgary International Airport Parking  
 from Oct. 3rd to 4th while attending  
 AHS's Provincial Senior Leaders Mtg.  
 in Edmonton**

Calgary International Airport Parkade

**AIRPORT TAXI**  
**(780) 690-7870**

4608 - 101 Street  
 Edmonton, Alberta  
 T6E 5G9

DATE OCT 04 2012  
 TIME 16:40  
 START 16:02  
 END 16:39  
 DRIVER 3114  
 CAR 240  
 FARE 54.00  
 SUBTOTAL 54.00  
 TIP 5.00  
 TOTAL 59.00

**Taxi on October 4th from the Coast  
 Edmonton Plaza Hotel where AHS's  
 Provincial Leaders Meeting was held to  
 the Edmonton International Airport**

MC  
 AUTH: 184054  
 TRANS. ID: 1189907

SIGNATURE

CUSTOMER'S SIGNATURE

**LEAVE ON DASH - THIS SIDE UP**

EXPIRATION DATE EXPIRATION TIME

16/10/12 08:23 AM

AMOUNT PAID

\$ 8.00 73250000 08:23 AM

**DETACH RECEIPT FROM TICKET**

DATE ISSUED TIME ISSUED AMOUNT PAID

15/10/12 08:23 AM \$ 8.00

CREDIT CARD NUMBER

CC

**Parking on October 15th at the Red Deer  
 Regional Hospital while attending a Use of  
 Force Stakeholders Meeting**

3967623



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

3967623



Alberta Health Services

**RECEIPT**