

Board and Executive Expense Report

Name Roman Cooney
Title SVP, Communications
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 2012	P-Card	Meeting	1,267				1,267			
November 2012	Expense Claim	Various meetings				85	85			
Total			\$ 1,267	\$ -	\$ -	\$ 85	\$ 1,352	\$ -	\$ -	\$ -

Total for the Month \$ 1,352

Maximum meal expense claimed in the month \$ -
 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

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>TURNER, COLLEEN</u> Cardholder's Name	<u>VICE PRESIDENT,</u> Cardholder's Position/Title	Billing Reporting Period: <u>20/11/2012</u>
<u>COMMUNICATIONS</u> Cardholder's Dept	<u>SOUTHPORT TOWER</u> Cardholder's Site/Location	Total Statement Amount: <u>\$3,504.03</u>
<u>COLLEEN.TURNER@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address		Last 6 digits of the P-Card #: XXXXXXXXXX

Statement of transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
06/11/2012	300526061	WESTJET 8380519856989, Westjet Airlines	10.50	CAD	10.50	✓ .00	.00	Seat Selection R. Cooney to Grande Prairie 1
08/11/2012	300528082	WESTJET 8382185519805, Westjet Airlines	308.83	CAD	308.83	✓ .00	.00	Roman Cooney flight re mtg w ED of Comms Office 2
08/11/2012	300691654	AIR CAN 0142114252128, AIR CANADA	947.23	CAD	947.23	✓ .00	.00	Roman Cooney return flight from Grande Prairie re mtg with ED of 3

g

pb

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).

TURNER, COLLEEN
 Name of Cardholder

 Signature of Cardholder

VICE PRESIDENT,
 Cardholder Position/Title

 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.

Ronan Cooney
 Name of Approver Designate

 Signature of Approver Designate

SVP
 Approver Designate Position/Title

 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).

Dr. Chris Eagle
 Name of Approver

 Signature of Approver

SVP President & CEO
 Approver Position/Title

 Date of Signature

Attachments

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

Accounts Payable only

Reference #: _____ Reviewed by: _____ Date: _____

copy

Page 1 of 2

Roman Cooney
Nov 8/12 -> Grande Prairie

Your reservation code is: ZVXFBS

View your itinerary at /

Sabre® Virtually There®

Total price

319.33 CAD

[view fare rules](#)

Departure Information



Depart:	Thursday, 08 November	WestJet
09:55 AM	Calgary, AB, CA (YYC)	Non-Stop / WS 0423
Arrive:	Thursday, 08 November	<u>flight info</u>
11:10 AM	Grande Prairie, AB, CA (YQU)	Seat(s): 09D

TOTAL

Base Fare: 244.00 CAD

Surcharges: 18.00 CAD

Canadian airport improvement fee(s): 25.00 CAD

Air travellers security charge: 7.12 CAD

other tax
50.12

Page 2 of 2

Canadian goods and services tax:	14.71 CAD
Regular Seat	10.00 CAD
Total Seat Taxes <input type="checkbox"/>	0.50 CAD
<hr/>	
Total:	319.33 CAD

308.83

Payment details

Amount paid with Credit Card 319.33 CAD

Guest information

1. CODNEY/ROMAN MR Adult

PRINT PAGE

MY RESERVATIONS

CHANGE TICKET
(S)

REFUND

308.23 ✓
 10.50 Seat ✓
 319.33 ✓
 Selection ✓
 2/8

Make sure your carry-on complies



As all carry-on baggage must pass through security, make sure your carry-on complies by following the instructions below. Remember, this can include things you might not consider, like shampoo, perfume, toothpaste and moisturizers.

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	Steps	Duration	Aircraft	Fare Type	Meal
AC8480	Grande Prairie (YQU) Thu 08-Nov 2012 15:55	Calgary (YYC) Thu 08-Nov 2012 17:26	0	1hr31	DH3	Latitude	B

Operated by:
Air Canada Express - Jazz

Passenger Information

1: Mr Roman Cobney : Adult (16+), Ticket Number: 0142114252128

Air Canada [redacted] Meal Preference : None
 Aeroplan : [redacted]
 Payment Card: [redacted] Special Needs: None
 Seat Selection: None

Purchase Summary

Fare Summary

	Adult
Passenger Type	857.00
Departing Flight - Latitude	18.00 ✓ other
Surcharges	
Taxes, Fees and Charges	
Canada Airport Improvement Fee	20.00 ✓
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	45.11 ✓ GST
Air Travellers Security Charge (ATSC)	7.12 ✓
Total airfare and taxes before options (per passenger)	947.23
Number of passengers	1
RBC Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$947.23 ✓ p/b

*Return flight
G.P. to Calgary
Nov 8, 2012
mtg @ E.D*

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

Air Canada: \$947.23 (Airfare - per ticket)

Ticket number(s): 0142114252128

Fare Rules

Departing Flight Grande Prairie (YQU) To Calgary (YYC) - Latitude

Changes:

- Changes are permitted and a change fee does not apply.
- Your total ticket price may increase if changes are made and the original fare you booked is no longer available, or if you call Air Canada Reservations, who may not have access to the original fare. Advance purchase may apply.
- Lower Latitude fares may be available only at aircanada.com for selected flights and dates. **Any changes not completed on aircanada.com may result in a higher Latitude fare** than would otherwise be available.
- Same-day standby** is permitted at no charge.



TRAVEL, HOSPITALITY & HOSTING EXPENSE CLAIM

SECTION A - Employee Details (for AHS Staff ONLY) Travel Period from: 1-Nov-12 to 12-Nov-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 Roman Cooney	Position (Title) SVP	Employee # (E-People)	Employee # (Legacy)
Location Edmonton	Dept Communications	Union n/a	Business Phone # Ext Out-of-Province Travel No
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					Total - Section C&D - Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT	
Pg	Bal Unit	Location	Functional Centre (FC)	Total	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total		
2A	101	0005	71130000000	\$84.95	101	0005	71130000000	62312000		Total Section B	\$84.95
2B										Total Section C&D	
2C										Less Cash Advance	
2D										TOTAL CLAIM	\$84.95 ✓
				\$84.95	**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) Kathy Board Phone # Ext

I hereby certify that the expenses listed above are in accordance to applicable policies and was incurred on Alberta Health Services business and have not been previously claimed by me or on my behalf from Alberta Health Services or other organization.

Employee Signature Date Jan 7/13

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) <i>Stephen Gould</i>	DOFA Level	Position #	Phone #	Ext
Signature <i>Stephen Gould</i>	Title	<i>EVP, People + Partners</i>	Date	<i>1/15/13</i>
Approved By (PRINT ONLY)	DOFA Level	Position #	Phone #	Ext
Signature	Title		Date	

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 • 0005 • 71130000000

Emp # (E-People) [REDACTED]

Emp # (Legacy) [REDACTED]

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 relocation, continuing education, business insurance), go to SECTION C**

Select from dropdown menu (column **Province**) where expenses were incurred (Out of N.America = Inter!).
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							
5-Nov-12	Mtg at SSP with Dr. Eagle						\$18.00						
6-Nov-12	Executive Committee mtg at SSP						\$18.00						
6-Nov-12	K.Williamson Comms Office U of A and T. Boulton						\$23.75						
8-Nov-12	Calgary airport parking Meet GP Comms Staff and ED						\$25.20						
SUBTOTALS													Total Kms

MEAL PER DIEM RATES
 B = Breakfast = \$10 L = Lunch = \$12 D = Dinner = \$21 A = ALL MEALS = \$43
 BL = Breakfast & Lunch = \$22 BD = Breakfast & Dinner = \$31 LD = Lunch & Dinner = \$33

Enter \$0.505 OR rate per Union Agreement	\$0.505
Mileage \$	
Travel \$ Subtotal	\$84.95
Enter on page 1 TOTAL TRAVEL \$	\$84.95

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

work from U of A Campus Office
DETACH RECEIPT FROM TICKET

DISPLAY THIS SIDE UP ON DASHBOARD

DATE ISSUED TIME ISSUED AMOUNT PAID
06/11/12 02:42 PM \$23.75

EXPIRATION DATE
06/11/12 07:27 PM

CREDIT CARD NUMBER
LOT C-1EST
UNIVERSITY OF ALBERTA
RECEIPT GST # R108102831

AMOUNT PAID
\$23.75 84960000 02:42 PM
UNIVERSITY OF ALBERTA
NON TRANSFERABLE
0222337

ON DASH FACE UP PLACE ON DASH FACE UP PLACE ON DASH FACE
(SAME DAY 18h00)
Standard Parking 107 Street
Machine Web ID = LOT 107 B
EXPIRES
05 NOV
18:00 PAID \$18.00C
ENTRY TIME 05 NOV 12 08:04
23694
PLACER SUR LE TABLEAU DU BORD CE CÔTÉ VISIBLE

PLACE ON DASH FACE UP PLACE ON DASH FACE UP PLACE ON DASH
(SAME DAY 18h00)
Standard Parking 107 Street
Machine Web ID = LOT 107 B
EXPIRES
06 NOV
18:00 PAID \$18.00C
ENTRY TIME 06 NOV 12 07:35
23759
PLACER SUR LE TABLEAU DU BORD CE CÔTÉ VISIBLE

RECEIPT
GST NO. R122556194

EXIT No. A2
IN: 11/08/12 08:49
OUT: 11/08/12 23:02
DURATION: 0 14: 13
PAID: \$ 25.20
(GST INCLUDED)
MASTERCARD
AUTH. CODE 060995
REF. 10
THANK YOU FOR YOUR VISIT

Calgary International Airport Parkade