

Board and Executive Expense Report

Name Dr. Verna Yiu
Title EVP & Chief Medical Officer, Quality & Medical Affairs
Location Edmonton
 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)
November 2012	Expense Claim	Various meetings			268	196	464			
November 2012	Direct Bill	Various meetings	510				510			
Total			\$ 510	\$ -	\$ 268	\$ 196	\$ 974	\$ -	\$ -	\$ -

Total for the Month \$ 974

Maximum meal expense claimed in the month \$ -
 Maximum daily hotel rate claimed in the month \$ 239
 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 & HOSTING EXPENSE CLAIM

SECTION A: Employee Details (for AHS Staff ONLY)

Travel Period from: _____ to _____

- 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 Dr. Verna Yiu Position (Title) EVP & CMO, Quality and Medical Affairs Employee # (E-People) Employee # (Legacy)
 Location 14th Floor, SSP Dept Quality and Medical Affairs Union Business Phone # Ext Out-of-Province Travel

What is your former legacy region (prior to AHS consolidation)?

Please click in cell and select from dropdown menu

SECTION E: Finance Coding & Total Claim

CAPITAL PROJECT CODING ONLY →

Project Number _____ Expenditure Organization _____ Project Task Number _____ Expenditure Type _____

Total - Section B: Travel - Pg 2				
Pg	Bal Unit	Location	Functional Centre (FC)	Total
2A	101	0000	71110000087	\$464.63
2B				
2C				
2D				
				\$464.63

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

TOTAL REIMBURSEMENT	
Total Section B	\$464.63
Total Section C&D	
Less Cash Advance	
TOTAL CLAIM	\$464.63

**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) Audrey Malone Phone # 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 Dec 3/12

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) Deborah Rhodes DOFA Level 2b Position # Phone # Ext

Signature Deborah Rhodes Title Acting CEO Date Dec. 7/12

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 Polka, Director Accounts Payable at 780-735-0303 or email: Mark.Polka@albertahealthservices.ca

EXPENSE CLAIM DETAILS

Enter Finance Coding

101 • 0000 • 71110000087

Emp # (E-People)

Emp # (Legacy)

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-mm-yy	Purpose of Travel \$5 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	receipt	no receipt or per diem						
① 7-Nov-12	Ground transportation - Southport to Westin Hotel		Meeting							\$35.00 ✓		
② 8-Nov-12	Ground transportation - Westin to Telus Convention Ctr		Meeting							\$10.00 ✓		
③ 8-Nov-12	Ground transportation - Telus Conv Ctr to Southport		Meeting							\$25.00 ✓		
④ 8-Nov-12	Ground transportation - Southport to Airport		Meeting							\$56.30 ✓		
⑤ 9-Nov-12	Edmonton International Airport parking		Meeting				\$50.00 ✓					
⑥ 29-Nov-12	Parking at Robbins Learning Pavilion - speaking at CCHL		Meeting				\$10.00 ✓					
⑦ 28-Nov-12	Parking at Sultan Hotel - attending the HQN meeting		Meeting				\$10.00 ✓					
8-Nov-12	Westin Hotel, Calgary		Meeting					\$288.33 ✓				
SUBTOTALS							\$70.00	\$288.33		\$128.30		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 \$0.685 OR rate per Union Agreement

Mileage \$

Travel \$ Subtotal \$464.63 ✓

Enter on page 1 TOTAL TRAVEL \$ 464.63 ✓

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

Meeting: Calgary physicians / Board Chair
at Southport.
Calgary Southport to airport

Thank You for choosing Southport to Westin

ASSOCIATED CAB

for all your transportation needs.

Visit our counter at the
Calgary International Airport
International arrival door.



Driver: RIZWAN Date: 2012/11/07
Car #: 1029 Amount: \$ 35.00
GST Included # _____

ASSOCIATED CAB ALTA LTD
387 - 41 AVE NE (483) 299-1111
INSIST ON THE PROFESSIONALS

DATE: 2012/11/08
PICK-UP TIME: 12:28
DROP-OFF TIME: 12:56
TRIP ID: 16287
LOCATION: 873888-45824183787
CAR NUMBER: 1848
CARD TYPE: VISA S
CARD: [REDACTED]
EXPIRY: **/**
AUTH: AP815399

FARE (\$): 51.38
EXTRA (\$): 0.88
SUBTTL (\$): 51.38

TIP (\$): 5.00

TOTAL (\$): 56.30

SIGNATURE: [Signature]

FOR ONLINE TAXI BOOKINGS VISIT
OUR WEBSITE @ WWW.ASSOCIATEDCAB.CA

ONE'S COPY

Westin to Telus convention
centre

* TRANSACTION RECEIPT *
Checker/Yellow Cabs
316 Meridian Road SE
Calgary, AB, T2A 1X2
403-299-9999

Welcome remarks @
IQ 2012: Inspiring
Quality in Continuing
care

TYPE: CASH
DATE: 2012/11/08 08:38:17

DRV : 8081
VEH : 705
GST : 844385666

Meter Start Time:
08:28:00
Meter Stop Time:
08:36:05
Distance:
1.1 Km

FARE 1: \$ 7.90
FLAT : \$ 0.00
TAX : \$ 0.00

TOTAL FARE: \$ 7.90

TIP: \$ 2.10

TOTAL PAYMENT: \$ 10.00

Telus to Southport - Checker Cab

Driver # _____	Car # <u>120</u>
To: _____	
From: _____	
Date: <u>NOV 8 2012</u>	Amount: <u>\$25</u>
GST# _____	

Attend a Review Release:
HSCA

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax CodeCA5%

POF 2nd Fl 08/11/12 15:09
Receipt 076572

Nested Parking
Short-term parking tkt
DL/EP - No. 037393
07/11/12 06:38 -
09/11/12 06:41 -
Period 2d0h4'
(Tax) \$50.00
Total \$50.00

Payment Received
VISA \$50.00

Merch: 82005340013
Auth: 041840
Type: Swiped

Sub Total \$47.62
Tax 5% 2.38

076572 - 51

2 day parking

Parking @ Int
airport for
2 days

speaking @ CCHL Speaker Series
 Robbins Learning Pavilion, Royal
 Alexandra Hospital

6

PLACE FACE UP ON DASH
 Impark Lot 1
 Expiration Date/Time
06:00 AM
NOV 28, 2012

Purchase Date/Time: 07:42pm Nov 27, 2012
 Total Parking: \$9.52
 Total amt: \$0.48
 Total Due: \$10.00 Rate: \$10.00 overnight
 Total Paid: \$10.00 Payment Type: Card
 Ticket #: 90022720
 SN #: 100008460001
 Setting: Lot 1
 Mach Name: Meter 1

Visa
 Auth #: 071486
 GST #887315538RT0001

RECEIPT
 Impark Lot 1

Expiration Date/Time: 06:00am Nov 28, 2012
 Purchase Date/Time: 07:42pm Nov 27, 2012
 Total Parking: \$9.52
 Total amt: \$0.48
 Total Due: \$10.00 Rate: \$10.00 overnight
 Total Paid: \$10.00 Payment Type: Card
 Ticket #: 90022720
 Setting: Lot 1
 Mach Name: Meter 1

Auth #: 071486, Visa

PARKING RECEIPT

PLACE FACE UP ON DASH
 Impark Lot 287
 Expiration Date/Time
EXP 01:21PM
NOV 28, 2012

7

Purchase Date/Time: 11:21am Nov 28, 2012
 Total Parking: \$9.52
 Total amt: \$0.48
 Total Due: \$10.00 Rate: \$10 - 2 HOURS
 Total Paid: \$10.00 Payment Type: Card
 Ticket #: 20461303
 SN #: 100008440041
 Setting: Lot 287
 Mach Name: Meter 1
 GST #887315538RT0001

RECEIPT
 Impark Lot 287

Expiration Date/Time: 01:21pm Nov 28, 2012
 Purchase Date/Time: 11:21am Nov 28, 2012
 Total Parking: \$9.52
 Total amt: \$0.48
 Total Due: \$10.00 Rate: \$10 - 2 HOURS
 Total Paid: \$10.00 Payment Type: Card
 Ticket #: 20461303
 Setting: Lot 287
 Mach Name: Meter 1

PARKING RECEIPT

HQN Meeting
 Sutton Place
 Hotel

The Westin Calgary
320 Fourth Ave SW
Calgary, AB T2P 2S6
403-266-1611 / 403-233-7471
http://www.starwood.com/



Yiu, Verna	Page Number	1	Invoice Nbr	1000100189
[REDACTED]	Guest Number	[REDACTED]	Arrive Date	11-07-2012
	Folio ID	A	Depart Date	11-08-2012
	No. Of Guest	1		
	Room Number	1004		
	Club Account	[REDACTED]		
	Time	12-03-2012 07:36		

Duplicate Invoice

Tax Identification 861336493RT0004

Date	Reference	Description	Charges	Credits
11-07-2012	RT1004	Room Charge	\$239.00	
11-07-2012	RT1004	Good And Services Tax	\$12.31	
11-07-2012	RT1004	Destination Marketing Fee	\$7.17	
11-07-2012	RT1004	Tourism Levy	\$9.85	
11-08-2012	VI	Visa		\$-268.33
		** Total	\$268.33	\$-268.33
		** Balance	\$0.00	

GST Summary

Room	12.31
Food & Beverage	0.00
Telephone	0.00
Other Revenue	0.00
	12.31

Vendor Number 861336493RT0004



Continued on the next page

Meetings in Calgary
Nov. 7 + 8

The Westin Calgary
320 Fourth Ave SW
Calgary, AB T2P 2S6
403-266-1611 / 403-233-7471
<http://www.starwood.com/>



Yiu, Verna	Page Number	2	Invoice Nbr	1000100189
[REDACTED]	Guest Number	[REDACTED]	Arrive Date	11-07-2012
	Folio ID	A	Depart Date	11-08-2012
	No. Of Guest	1		
	Room Number	1004		
	Club Account	[REDACTED]		
	Time	12-03-2012 07:36		

Duplicate Invoice

Signature _____

Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive and paid for by a third party vendor. The information will be used for public disclosure reporting.

Expenses Paid Directly to Third Party Vendors

AHS may have established accounts with certain vendors used to book travel and other expenses that are billed directly to AHS. Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund. It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. hotel accommodation, airline tickets, car rental, hosting events and working sessions.
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all other expenses paid by AHS not mentioned above
- Copies of invoices and other relevant back up must be attached including approvals for working sessions/hosting events
- Information will be used for reporting purposes only
- A personal cheque must be attached to cover expenses deemed ineligible
- Indicate whether you have expenses to report in this section for this reporting period: Yes No

Name: Dr. Verna Yiu	Reporting Period for the Month of: November 2012
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Date	Payment Method	Category	Description/Purpose for Expense	Name of Vendor Paid	Amount Paid
2012-11-07	Direct Billing	Other	Flight - Edmonton-Calgary return attending various meetings	Marlin Travel	\$509.96
	Choose One	Choose One			
	Choose One	Choose One			
	Choose One	Choose One			
	Choose One	Choose One			
Total Paid in the Month					\$509.96

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915
Branch: N61107
Agent: SANDRA KOPECK Tel: 780-425-8611

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB, T5J 3E4

Invoice Number: 84154
Date: October 30, 2012
Page: 1/3
Our Reference: ZCH0092195C V5J492
Your Reference: 101092371110101058

INVOICE

For
DR VERNA YIU

Wednesday, November 7, 2012

Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0
Seat(s): 05D
AIR CANADA E

Flight: 8381 V CLASS
08:00:AM Equipment: D8 (300 SERIES)
08:52:AM

Mile(s) Flown: 153

Hotel

Check In: 07Nov2012 12:00:AM
Check Out: 08Nov2012 12:00:AM
CALGARY AB
WESTIN
THE WESTIN CALGARY
320 4TH AVENUE SW,CALGARY
AB,T2P 2S6
CA
Tel: 4032661611
Fax: 4032337471
Confirmation: C135442433

Room(s) 1
1 Night(s)

SUPERIOR ONE KING BED
Rate: 239.00 CAD per Night
Guaranteed for late arrival

Thursday, November 8, 2012

- Meetings in Calgary: Nov 7/8
- Prov Practitioner Exec.
 - Calgary Physicians / Board Chair
 - Speaks at IQ 2012: Inspiring Quality in Continuing Care
 - HQCA Review Release

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB, T5J 3E4

Invoice Number: 84154
Date: October 30, 2012
Page: 2/3
Our Reference: ZCH0092195C V5J492
Your Reference: 101092371110101058

INVOICE

Thursday, November 8, 2012

 Air

AIR CANADA
From: CALGARY AB
To: EDMONTON INTL AB
Steps: 0
Seat(s): 06C
AIR CANADA E

Flight: 8148 S CLASS
02:30:PM Equipment: D8 (300 SERIES)
03:22:PM

Mile(s) Flown: 153

Saturday, June 1, 2013

 Tour

BSP TASF
From: EDMONTON INTL AB
To: EDMONTON INTL AB
FILE RETAINER

PACKAGE TOUR

Cost:

TKT-9540004920727

TKT- AC2523717226 E-TKT

10.00

435.00

Tax: 64.96

Ticket Total: 499.96

Total:

Grand Total: 509.96

Less Credit Card Payments: 509.96

Credit / Balance Due To This Invoice: 0.00

Total Balance Due: 0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED: VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.