

Official Administrator and Executive Expense Report

Name Dr. Verna Yiu
Title Vice President, Quality & Chief Medical Officer
Location Edmonton
 Expenses submitted during the month of March 2014

Travel (1)										
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Mar-14	P-Card	Meetings				369	369	30		
Mar-14	Expense Claim	Meetings				343	343			
Mar-14	Direct Bill	Meetings	1,173				1,173			
Total			\$ 1,173	\$ -	\$ -	\$ 712	\$ 1,885	\$ 30	\$ -	\$ -

Total for the Month \$ 1,915

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base 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

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: February-March 2014
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Date	Payment Method	Category	Description/Purpose for Expense	Name of Vendor Paid	Amount Paid
2014-02-05	Direct Billing	Other	Flight - Edmonton-Calgary (return) - various meetings	Marlin Travel	\$464.96
2014-02-21	Direct Billing	Other	Flight - Edmonton - Calgary (return) - various meetings	Marlin Travel	\$493.96
2014-03-12	Direct Billing	Other	Flight - Edmonton - Calgary - meeting with Dr. Cowell	Marlin Travel	\$214.48
	Choose One	Choose One			

	Choose One	Choose One			
Total Paid in the Month					\$1,173.40

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915
Branch: [REDACTED]
Agent: [REDACTED]

To: ALBERTA HEALTH SERVICES
[REDACTED]

Invoice Number: [REDACTED]
Date: March 5, 2014
Page: 1/2
Our Reference: [REDACTED]
Your Reference: [REDACTED]

INVOICE

For
DR VERNA YIU
AC [REDACTED]

Wednesday, March 12, 2014


 Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0
AIR CANADA E
AIR CANADA BOOKING REFERENCE [REDACTED]
SEAT 4D

Flight: 8135 W CLASS
08:00 AM Equipment: D8 (300 SERIES)
08:53 AM

Mile(s) Flown: 153

Monday, September 8, 2014

 Tour

BSP TASF
From: EDMONTON INTL AB
To: EDMONTON INTL AB
AIR CANADA CONFIRMATION [REDACTED]

12:00 AM PACKAGE TOUR
12:00 AM

Cost:

AIR CANADA WEB [REDACTED]
AIR CANADA WEB [REDACTED]

172.00

Tax: 32.48

Ticket Total: 204.48

TKT- [REDACTED]

10.00

To: ALBERTA HEALTH SERVICES



Invoice Number:



Date:

March 5, 2014

Page:

2/2

Our Reference:



Your Reference:

INVOICE

Total:

Grand Total:	214.48
Less Credit Card Payments:	214.48
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.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch:

Agent:

To: ALBERTA HEALTH SERVICES

Invoice Number:

Date:

February 18, 2014

Page:

1/2

Our Reference:

Your Reference:

INVOICE

For

DR VERA YIU

AC

Friday, February 21, 2014

 Air

AIR CANADA

From: EDMONTON INTL AB

To: CALGARY AB

Stops: 0

AIR CANADA E

AIR CANADA BOOKING REFERENCE

SEAT 3D

Flight: 8155

H CLASS

05:00 PM Equipment: D8 (300 SERIES)

05:53 PM

Mile(s) Flown: 153

 Air

AIR CANADA

From: CALGARY AB

To: EDMONTON INTL AB

Stops: 0 Arrival: 22Feb14

AIR CANADA E

AIR CANADA BOOKING REFERENCE

SEAT 2C

Flight: 8168

W CLASS

11:10 PM Equipment: D8 (300 SERIES)

12:03 AM

Mile(s) Flown: 153

Cost:

AIR CANADA WEB

414.00

Tax:

69.96

Ticket Total:

483.96

TKT

10.00

To: ALBERTA HEALTH SERVICES



Invoice Number:



Date:

February 18, 2014

Page:

2/2

Our Reference:



Your Reference:

INVOICE

Total:

Grand Total:	493.96
Less Credit Card Payments:	493.96
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.

CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL

1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT

1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0

OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]

Agent: [REDACTED]

To: ALBERTA HEALTH SERVICES
[REDACTED]

Invoice Number: [REDACTED]

Date:

February 4, 2014

Page:

1/2

Our Reference:

Your Reference: [REDACTED]

INVOICE

For

DR VERNA YIU

AC [REDACTED]

Wednesday, February 5, 2014

✈ Air

AIR CANADA

From: EDMONTON INTL AB

To: CALGARY AB

Stops: 0

Seat(s): 08C

AIR CANADA E

Flight: 8171

W CLASS

07:30 AM Equipment: D8 (300 SERIES)

08:23 AM

Mile(s) Flown: 153

✈ Air

AIR CANADA

From: CALGARY AB

To: EDMONTON INTL AB

Stops: 0

AIR CANADA E

Flight: 8152

Q CLASS

04:30 PM Equipment: D8 (300 SERIES)

05:23 PM

Mile(s) Flown: 153

✈ Air

AIR CANADA

From: CALGARY AB

To: EDMONTON INTL AB

Stops: 0

Seat(s): 07D

AIR CANADA E

Flight: 8154

Q CLASS

05:00 PM Equipment: D8 (300 SERIES)

05:53 PM

Mile(s) Flown: 153

To: ALBERTA HEALTH SERVICES

Invoice Number:

Date:

February 4, 2014

Page:

2/2

Our Reference:

Your Reference:

INVOICE

Wednesday, February 5, 2014

Wednesday, October 1, 2014

 **Tour**

BSP TASF

From: EDMONTON INTL AB

12:00 AM PACKAGE TOUR

To: EDMONTON INTL AB

12:00 AM

FILE RETAINER

Cost:

TKT-

10.00

TKT-

E-TKT

385.00

Tax:

69.96

Ticket Total:

454.96

Total:

Grand Total:

464.96

Less Credit Card Payments:

464.96

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.

CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL

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1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0

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EXPENSE CLAIM DETAILS

Enter Finance Coding		101 0000 71110000087	Emp # (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 (column Prov) where expenses were incurred (Out of N.America = Interl) Ensure separate lines are used for claim items that differ in Province, US and Out of North America.				Completion of the "Cost Effective Method Used" Column is REQUIRED . If you select "No" in this column, Further Explanation is REQUIRED in the "Rationale is Required" section on this page												
Date dd-mm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.Amer where expenses incurred?	What Is travel related to?	Cost Effective Method Used? Y/N	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)		
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi					
					Meal Type with value	Allowance	Meal Type	with receipt								
5-Feb-14	Travel to Edmonton International Airport: attend PPEC and Wisdom Council Meetings in Calgary (return)	AB	Meeting	Yes											116.00	✓
① 5-Feb-14	Taxi from Calgary Delta Airport Hotel to University of Calgary to attend Wisdom Council Meeting	AB	Meeting	Yes							\$44.00	✓				
② 5-Feb-14	Taxi from University of Calgary to International Airport: attended Wisdom Council Meeting	AB	Meeting	Yes							\$42.00	✓				
③ 5-Feb-14	Short Term Parking: Edmonton International Airport: attended PPEC and Wisdom Council Meetings in Calgary	AB	Meeting	Yes							\$23.00	✓				
21-Feb-14	Travel to Edmonton International Airport: Executive Education Program in Calgary (return)	AB	Educ	Yes											116.00	✓
28-Feb-14	Travel to Edmonton International Airport: Meeting with Dr. John Cowell in Calgary (return)	AB	Meeting	Yes											116.00	✓
12-Mar-14	Travel to Edmonton International Airport: Meeting with Dr. John Cowell in Calgary (return)	AB	Meeting	Yes											116.00	✓
SUBTOTALS											\$109.00				Total Kms 484.00	
MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle → details of travel location to & from must be included above under the purpose of travel column Rates applicable \$0.505 per km for under 5,000km/yr or \$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)		\$0.505				
										Mileage \$		\$234.32				
										Travel \$ Subtotal		\$109.00				
Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3										Auto fills on page 1 - TOTAL TRAVEL \$		\$343.32				
Rationale is Required for expenses that are not Cost Effective (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)																

ASSOCIATED CAB ALTA LTD
307 - 41 AVE NE (403) 299-1111
INSIST ON THE PROFESSIONALS

DATE: 2014/02/05
PICK-UP TIME: 11:53
DROP-OFF TIME: 12:21
TRIP ID: 0
LOCATION: 073000-45024103707
CAR NUMBER:
CARD TYPE:
CARD:
EXPIRY:
AUTH:

FARE (\$): 44.88
EXTRA (\$): 0.00
SUBTTL (\$): 44.88

TIP (\$):

TOTAL (\$):

SIGNATURE:

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

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax CodeCA5%

POF 1st Fl 05/02/14 17:56
Receipt

Short-term parking tkt
HL - No. 089500
05/02/14 06:28 -
06/02/14 06:27 -
Period 1d0h0'
(Tax) \$23.00

Total \$23.00

Payment Received
VISA \$23.00

Merch-82005340013
Auth
Type: Swiped

Sub Total \$21.90
Tax 5% 1.10

Taxi From
Calgary Delta
Hotel (Airport)
to University
of Calgary.
attend
Wisdom Council
Meeting.

(3)

Short term Parking
Edmonton International
Airport. attended
PPEC and Wisdom Council
meetings, Calgary

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

Taxi Service

TYPE:
CARD:
EXP :
DATA:SWIPED
TerminalID: 000015918730
DATE:2014/02/05 16:04:14
AUTH:
IFID: 10180925
DRV :
VEH :
GST : 860937646
Meter Start Time:
15:30:18
Meter Stop Time:
16:03:29
Distance: 19.1 Km

FARE 1: \$ 36.29
FLAT : \$ 0.00
TAX : \$ 1.81
TOTAL FARE: \$ 38.10
PAYMENT AMOUNT: \$ 38.10
TIP: \$ 3.90

TOTAL PAYMENT: \$ 42.00

Purchase Auth Complete
Cardholder Copy

Taxi From University of
Calgary to International
Airport: attended Wisdom
Council 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

YIU, VERNA

Cardholder's Name

VP QUALITY & CMO

Cardholder's Position/Title

Billing Reporting Period: 20/03/2014

QUALITY & MEDICAL AFFAIRS

Cardholder's Dept

SEVENTH STREET PLAZA

Cardholder's Site/Location

Total Statement Amount: \$399.00

VERNA.YIU@ALBERTAHEALTHSERVICES.CA

Cardholder's e-mail address

Last 6 digits of the P-Card #: [REDACTED]

Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
21/02/2014	343739557	CHECKER CABS LTD, LIMOUSINES AND TAXICABS	41.00	CAD	✓ 41.00	1.95		Taxi: Calgary International Airport to UofC - attend Executive Education Program
22/02/2014	343739558	EDMONTON INTERNATIONAL, AUTOMOBILE PARKING LOTS AND GARAGES	23.00	CAD	✓ 23.00	.00	.00	Short Term Parking: EIA - meeting at UofC - Executive Education Program
26/02/2014	344270885	ASSOCIATED CAB/ALLIED, LIMOUSINES AND TAXICABS	44.00	CAD	✓ 44.00	2.10	.00	Taxi: UofC to Calgary International Airport - meeting - Executive Education Program
26/02/2014	344270886	CHECKER CABS LTD, LIMOUSINES AND TAXICABS	55.00	CAD	✓ 55.00	2.62		Taxi: Southport to Calgary International Airport - meet with Official Administrator
26/02/2014	344270887	EDMONTON INTERNATIONAL, AUTOMOBILE PARKING LOTS AND GARAGES	23.00	CAD	✓ 23.00	.00	.00	Short Term Parking - EIA: meeting with Official Administrator in Calgary
06/03/2014	345082763	BUKSA STRATEGIC CONFER, BUSINESS SERVICES NOT ELSEWHERE CLASSIFIED	30.00	CAD	✓ 30.00	1.43		Registration: Health Policy Speaker Series - "Quality, Safety & Value in Healthcare"
07/03/2014	345267422	ASSOCIATED CAB/ALLIED, LIMOUSINES AND TAXICABS	58.00	CAD	✓ 58.00	2.76	.00	Taxi: Calgary Airport to Southport Tower - meet with Official Administrator
12/03/2014	345774509	CHECKER CABS LTD, LIMOUSINES AND TAXICABS	54.00	CAD	✓ 54.00	2.57		Taxi: Southport to Calgary airport - meet with Official Administrator
13/03/2014	345839068	ASSOCIATED CAB/ALLIED, LIMOUSINES AND TAXICABS	59.00	CAD	✓ 59.00	2.81	.00	Taxi: Calgary airport to Southport Tower - meeting with Official Administrator
14/03/2014	345774510	MPARK00020004U, AUTOMOBILE PARKING LOTS AND GARAGES	12.00	CAD	✓ 12.00	.00	.00	Parking: attend Alberta Medical Association event with AHS CEO

Signatures**Cardholder Designate (If Applicable)**

By signing this statement

- I hereby certify that I have reviewed and reconciled this statement in BMO 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.

Audrey Maione
Name of Cardholder Designate[Signature]
Signature of Cardholder DesignateExecutive Assistant
Cardholder Designate Position/TitleMar. 25/14
Date of Signature**Cardholder**

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

YIU, VERNA

[Signature]
Name of Cardholder
Signature of Cardholder

VP QUALITY & CMO

[Signature]
Cardholder Position/Title
Date of Signature**Approver Designate (If Applicable)**

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Susan Best
Name of Approver Designate[Signature]
Signature of Approver DesignateExec. Assistant
Approver Designate Position/TitleMarch 27, 2014
Date of Signature**Approver**

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Dr. Deborah Rhodes
Name of Approver[Signature]
Signature of ApproverActing CFO
Approver Position/TitleMarch 28, 2014
Date of Signature**Submit approved statement with attachments to Accounts Payable****Attach:**

- Original (or scanned) itemized receipts with documented business reasons including names of participants where required
- 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
- Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason.

Address:

Alberta Health Services
Accounts Payable
7th Street Plaza
10th Floor, North Tower, 10030-107 Street
Edmonton, AB T5J 3E4

Accounts Payable only

3
ASSOCIATED CAB ALTA LTD
307 - 41 AVE NE (403) 299-1111
INSIST ON THE PROFESSIONALS

DATE: 2014/02/21
PICK-UP TIME: 18:12
DROP-OFF TIME: 18:36
TRIP ID: 8
LOCATION: 873800-45024103707
CAR NUMBER: [REDACTED]
CARD TYPE: [REDACTED]
CARD: [REDACTED]
EXPIRY: [REDACTED]
AUTH: [REDACTED]

FARE (\$): 44.00
EXTRA (\$): 0.00
SUBTTL (\$): 44.00

TIP (\$): /

TOTAL (\$): 44.00

SIGNATURE: *Ver*

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

CUSTOMER'S COPY

Taxi:
Calgary Airport
to UofC, downtown
campus
- attend
Executive
Education Program

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

TYPE: Taxi Service
CARD: [REDACTED]
EXP: [REDACTED]
DATA: SWIPED
Terminal ID: 00001138678F
Transaction Reference
Number: [REDACTED]
DATE: 2014/02/21 21:36:10
AUTH: [REDACTED]
IFID: 10302339
DRV: [REDACTED]
VEH: [REDACTED]
GST: 876771516

FLAT : \$ 41.00
TAX : \$ 0.00
TOTAL FARE: \$ 41.00
PAYMENT AMOUNT: \$ 41.00
TIP: \$ 0.00

TOTAL PAYMENT: \$ 41.00
Purchase Auth Complete
Receipt for Cash

Taxi: UofC
downtown
campus to
Calgary
Airport -
attend
Executive
Education
Program

2
GST# R128599776

Edmonton Airports

Can-TSJ 2T2 Edmonton
Tax CodeCA5%

POF 1st FI 22/02/14 00:17
Receipt [REDACTED]

Short-term parking tkt
HL - No. 027903
21/02/14 16:02 -
22/02/14 16:01 -
Period 1d0h0'
(Tax) \$23.00

Total \$23.00

Payment Received
MC [REDACTED] \$23.00

Merch: 82005340013
Auth: [REDACTED]
Type: Swiped

Sub Total \$21.90
Tax 5% 1.10

Short term parking:
EIA
- attend Executive
Education Program
in Calgary, UofC
downtown campus.

(7)

ASSOCIATED CAB ALIA LTD
387 - 41 AVE NE (403) 299 1111
INSIST ON THE PROFESSIONALS

DATE: 2014/02/26
PICK-UP TIME: 11:11
DROP-OFF TIME: 12:14
TRIP ID: 8
LOCATION: 073000-45824103/07
CAR NUMBER: [REDACTED]
CARD TYPE: [REDACTED]
CARD: [REDACTED]
EXPIRY: [REDACTED]
AUTH: [REDACTED]
FARE (\$): 58.00
EXTRA (\$): 0.00
SUBTTL (\$): 58.00

TIP (\$): _____

TOTAL (\$): _____

SIGNATURE: _____

FOR ONLINE TAXI BOOKINGS VISIT
OUR WEBSITE WWW.ASSOCIATEDCABS.COM

CUSTOMER

*Taxi:
Calgary Airport
to Southport
Tower: meet
with Official
Administrator*

(4)

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

Taxi Service
TYPE: [REDACTED]
CARD: [REDACTED]
EXP: [REDACTED]
DATA: SWIPED
TerminalID: 00001592852B
Transaction Reference
Number: [REDACTED]
DATE: 2014/02/26 14:35:39
AUTH: [REDACTED]
IFID: 10338081
DRV: [REDACTED]
VEH: [REDACTED]
GST: 847392792
Meter Start Time:
14:08:46
Meter Stop Time:
14:35:03
Distance: 29.4 Km

FARE 1: \$ 48.29
FLAT : \$ 0.00
TAX : \$ 2.41
TOTAL FARE: \$ 50.70
PAYMENT AMOUNT: \$ 50.70
TIP: \$ 4.30

TOTAL PAYMENT: \$ 55.00
Purchase Auth Complete
Cardholder Copy

*Taxi:
Southport
Tower to
Calgary
Airport!
meet with
Official
Administrator*

(5)

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton
Tax CodeCA5%

POF 1st F1 26/02/14 16:40
Receipt [REDACTED]

Short-term parking tkt
HL - No. 039071
26/02/14 10:04 -
27/02/14 10:03 -
Period 1d0h0'
(Tax) \$23.00

Total \$23.00

Payment Received
MC \$23.00

Auth [REDACTED]
Type: Swiped

Sub Total \$21.90
Tax 5% 1.10

*short term
Parking: EIA
- meet with Official
Administrator in
Calgary*

6

Print | Email

*Health Policy Speaker Series presents:***Dr. Harvey V. Fineberg**
Quality, Safety and Value in Health Care*Presented by the Institute of Health Economics and Alberta Innovates - Health Solutions***Friday, March 14, 2014 | 7:30am - 9:00am**
Westin Edmonton | Breakfast IncludedINSTITUTE OF
HEALTH ECONOMICS
ALBERTA CANADAAlberta
Innovates
Health
SolutionsReceipt

Reference Number

Issued By

BUKSA Associates Inc.

Date Registered

Thursday, March 6, 2014

Statement Date

Thursday, March 6, 2014

Event

Health Policy Speaker Series

Event Details

The Westin Edmonton
10135 - 100 Street NW
Edmonton Alberta
Canada

Event Date

Friday, March 14, 2014

Selection

Ticket fee: Verna Yiu

Sub Total:

Cost

\$CAD30.00

\$CAD30.00

Total

\$CAD30.00

Billed To

Billing Company

Alberta Health Services

Name

Verna Yiu

Address Line 1

Address Line 2

City

US State

Billing Zip/Postal Code

Country

Canada

Email Address

⑥

Date	Transaction Type	
Thursday, March 6, 2014	Transaction Amount	\$CAD30.00
Thursday, March 6, 2014	Online Credit Card Payment [REDACTED]	\$CAD-30.00
	Balance	\$CAD0.00

Terms and Conditions

Your credit card statement will read "BUKSA Associates Inc." A receipt will be emailed to you upon completion of this form.

Cancellation Policy

No refunds will be issued for tickets purchased.

Receipt

BUKSA Associates Inc.
[REDACTED]

Health Policy Speaker Series
c/o BUKSA Strategic Conference Services
Email: SpeakerSeries@buksa.com

9
ASSOCIATED CAB ALTA LTD
387 - 41 AVE NE (403) 299-1111
INSIST ON THE PROFESSIONALS

DATE: 2014/03/12
PICK-UP TIME: 08:59
DROP-OFF TIME: 09:25
TRIP ID: 8
LOCATION: 977440-45024103707
CAR NUMBER: [REDACTED]
CARD TYPE: [REDACTED]
CARD: [REDACTED]
EXPIRY: [REDACTED]
AUTH: [REDACTED]
FARE (\$): 59.00
EXTRA (\$): 0.00
SUBTTL (\$): 59.00

TIP (\$): _____

TOTAL (\$): _____

SIGNATURE: _____

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

CUSTOMER'S COPY

Taxi: Calgary Airport
to Southport Tower -
meeting with Official
Administrator

8
* TRANSACTION RECEIPT *
Checker/Yellow Cabs
316 Meridian Road SE
Calgary, AB, T2A 1X2
403-299-9999

Taxi Service
TYPE: [REDACTED]
CARD: [REDACTED]
EXP: [REDACTED]
DATA: SWIPED
TerminalID: 00001591F35D
Transaction Reference
Number: [REDACTED]
DATE: 2014/03/12 11:26:27
AUTH: [REDACTED]
IFID: 10447398
DRV: [REDACTED]
VEH: [REDACTED]
GST: 838062677
Meter Start Time:
11:04:18
Meter Stop Time:
11:25:45
Distance: 29.6 Km
FARE 1: \$ 47.33
FLAT: \$ 0.00
TAX: \$ 2.37
TOTAL FARE: \$ 49.70
PAYMENT AMOUNT: \$ 49.70
TIP: \$ 4.30

TOTAL PAYMENT: \$ 54.00
Purchase Auth Compl. [REDACTED]
Cardholder Copy

Taxi: Southport Tower
to Calgary Airport -
meeting with
Official Administrator

10
PLACE FACE UP ON DASH

NO IN AND OUT PRIVILEGES
IMPARK LOT 4

Expiration Date/Time

11:00 PM
MAR 14, 2014

Purchase Date/Time: 05:24pm Mar 14, 2014

Total Parking: \$11.43

Total gst: \$0.57

Total Due: \$12.00

Total Paid: \$12.00

Ticket #: [REDACTED]

S/N #: 500012360968

Setting: Lot 4

Mach Name: Meter 1

Rate: \$12- until 11pm
Payment Type: Card

Card: [REDACTED] MasterCard

Auth #: [REDACTED]

GST #887315638RT0001

RECEIPT

NO IN AND OUT PRIVILEGES

Expiration Date/Time: 11:00pm Mar 14, 2014

Purchase Date/Time: 05:24pm Mar 14, 2014

Total Parking: \$11.43

Total gst: \$0.57

Total Due: \$12.00

Total Paid: \$12.00

Ticket #: [REDACTED]

Setting: Lot 4

Mach Name: Meter 1

Rate: \$12- until 11pm
Payment Type: Card

Card: [REDACTED] MasterCard

Auth #: [REDACTED]

Parking: Alberta
Medical Association
event with CEO