

## AHS Board and Executive Expense Report

**Name** Dr. Blair O'Neill  
**Title** ACMO Strategic Clinical Networks  
**Location** Edmonton

Expenses submitted during the month of March 2018

Travel (1)										
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Mar-18	Direct Billing	Meetings	2,048				2,048			
<b>Total</b>			\$ 2,048	\$ -	\$ -	\$ -	\$ 2,048	\$ -	\$ -	\$ -

**Total for the Month** \$ 2,048

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.

### 5) Remuneration, Allowances Reported in the Financial Statements

Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

## Expense Report Direct Bill Summary

### Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive or an AHS Board Member 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. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- 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

<b>Name :</b> Dr. Blair O'Neill	<b>Reporting Period for the Month of :</b> Mar-18
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
31-Jan-2018	Direct Billing	Airline Ticket	Travel to Calgary for PPEC F2F Meeting (Feb 7, 2018) Invoice # [REDACTED]	Marlin Travel	439.06
31-Jan-2018	Direct Billing	Airline Ticket	Change fee for Calgary PPEC meeting - needed to takes a flight back to the morning of meeting. [REDACTED]	Marlin Travel	150.00
6-Mar-2018	Direct Billing	Airline Ticket	Travel to Calgary for Choosing Wisely Alberta Symposium (March 7, 2018). Invoice # [REDACTED]	Marlin Travel	410.96
4-Oct-2017	Direct Billing	Airline Ticket	Change Fee for Choossing Wisely Meeting. Invoice # [REDACTED]	Marlin Travel	47.85
13-Oct-2017	Direct Billing	Airline Ticket	Change Fee for Choossing Wisely Meeting. Invoice [REDACTED]	Marlin Travel	75.00
<b>Total Paid in the Month</b>					<b>\$ 1,122.87</b>

## Expense Report Direct Bill Summary

### Purpose of This Form:

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

### Expenses Paid Directly to Third Party Vendors:

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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

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- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- 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

<b>Name :</b> Dr. Blair O'Neill	<b>Reporting Period for the Month of :</b> Mar-18
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
9-Mar-2018	Direct Billing	Airline Ticket	Travel to Calgary - Rent a Car to Drive to Banff to Present for the Fellowship Program (March 9, 2018 ) Invoice # [REDACTED]	Marlin Travel	440.96
19-Mar-2018	Direct Billing	Airline Ticket	Travel to Calgary for F2F Meetings with SMDs, meet with new Incoming ACMO. Attend Farewell Dinner and Senior Leaders Meeting the Next day. Invoice # [REDACTED]	Marlin Travel	433.96
19-Mar-2018	Direct Billing	Airline Ticket	Change Fee for Senior Leaders Meeting. Needed an earlier flight back for Clincial Service. Invoice # [REDACTED]	Marlin Travel	50.00
<b>Total Paid in the Month</b>					<b>\$ 924.92</b>



**Invoice**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 30 Jan 18 <b>Client:</b> [REDACTED] <b>Agent:</b> [REDACTED] <b>Agents email:</b> [REDACTED]@MARLINTRAVEL.CA <b>File Locator:</b> [REDACTED]
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**PASSENGERS:** DR BLAIR ONEILL

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	364.10	0.00	\$0.00	74.96	0.00	439.06 CAD
<b>Total:</b>	<b>364.10</b>	<b>0.00</b>	<b>0.00</b>	<b>74.96</b>	<b>0.00</b>	<b>439.06 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	01/30/2018		[REDACTED]	439.06 CAD
<b>Total Payment:</b>					<b>439.06 CAD</b>

**Balance Due CAD Currency 0.00 CAD**

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL SCN EXECUTIVE MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL  
 \*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\* PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*  
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----  
 ----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 30 Jan 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

<b>Passengers</b> BLAIR ONEILL	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 30 Jan 18
	<b>File Locator/Ticket #:</b> [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08155	EDMONTON INTL 06 Feb 18 6:30PM		CALGARY INTL 06 Feb 18 7:24PM	G/	
AIR CANADA	08146	CALGARY INTL 07 Feb 18 3:25PM		EDMONTON INTL 07 Feb 18 4:23PM	G/	



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Invoice

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #:
Booking Date: 01 Feb 18
Client:
Agent:
Agents email: @MARLINTRAVEL.CA
File Locator:

PASSENGERS: DR BLAIR ONEILL

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row: AIR CANADA Ticket #, 150.00, 0.00, \$0.00, 0.00, 0.00, 150.00 CAD. Total: 150.00, 0.00, 0.00, 0.00, 0.00, 150.00 CAD

Table with columns: PAYMENTS, Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row: 01/31/2018, 150.00 CAD. Total Payment: 150.00 CAD. Balance Due CAD Currency: 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SCN EXECUTIVE MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
\*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\* PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----
----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 01 Feb 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
BLAIR ONEILL	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 31 Jan 18					
	<b>File Locator/Ticket #:</b> [REDACTED]					
Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08133	EDMONTON INTL 07 Feb 18 6:50AM		CALGARY INTL 07 Feb 18 7:44AM	G/	
AIR CANADA	08144	CALGARY INTL 07 Feb 18 1:55PM		EDMONTON INTL 07 Feb 18 2:47PM	G/	



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Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 02 Feb 18 <b>Client:</b> [REDACTED] <b>Agent:</b> [REDACTED] <b>Agents email:</b> [REDACTED]@MARLINTRAVEL.CA <b>File Locator:</b> [REDACTED]
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PASSENGERS: DR BLAIR ONEILL

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	336.00	0.00	\$0.00	74.96	0.00	410.96 CAD
<b>Total:</b>	<b>336.00</b>	<b>0.00</b>	<b>0.00</b>	<b>74.96</b>	<b>0.00</b>	<b>410.96 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	02/02/2018		[REDACTED]	410.96 CAD
				Total Payment:	410.96 CAD
				<b>Balance Due CAD Currency</b>	<b>0.00 CAD</b>

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL EXECUTIVE SCN MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL  
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ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 02 Feb 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

<b>Passengers</b> BLAIR ONEILL	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 02 Feb 18
	<b>File Locator/Ticket #:</b> [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08155	EDMONTON INTL 06 Mar 18 6:30PM		CALGARY INTL 06 Mar 18 7:24PM	T/	
AIR CANADA	08225	CALGARY INTL 07 Mar 18 6:20PM		EDMONTON INTL 07 Mar 18 7:12PM	S/	



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Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 06 Mar 18 <b>Client:</b> [REDACTED] <b>Agent:</b> [REDACTED] <b>Agents email:</b> [REDACTED]@MARLINTRAVEL.CA  <b>File Locator:</b> [REDACTED]
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PASSENGERS: DR BLAIR ONEILL

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	47.85	0.00	\$0.00	0.00	0.00	47.85 CAD
AIR CANADA Ticket # [REDACTED]	75.00	0.00	\$0.00	0.00	0.00	75.00 CAD
<b>Total:</b>	<b>122.85</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>122.85 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	03/06/2018	[REDACTED]	[REDACTED]	47.85 CAD
	[REDACTED]	03/06/2018	[REDACTED]	[REDACTED]	75.00 CAD
				Total Payment:	122.85 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
REASON FOR TRAVEL EXECUTIVE SCN MEETING

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

\*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\*

\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\*

PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----

---AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 06 Mar 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

<b>Passengers</b> BLAIR ONEILL	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 06 Mar 18					
	<b>File Locator/Ticket #:</b> [REDACTED]					
<b>Airline</b>	<b>Flight</b>	<b>From</b>	<b>Terminal</b>	<b>To</b>	<b>Class/Seat</b>	<b>Stops</b>
AIR CANADA	08155	EDMONTON INTL 06 Mar 18 6:30PM		CALGARY INTL 06 Mar 18 7:24PM	T/	

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 06 Mar 18
	<b>File Locator/Ticket #:</b> [REDACTED]

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 06 Mar 18					
	<b>File Locator/Ticket #:</b> [REDACTED]					
<b>Airline</b>	<b>Flight</b>	<b>From</b>	<b>Terminal</b>	<b>To</b>	<b>Class/Seat</b>	<b>Stops</b>
AIR CANADA	08146	CALGARY INTL 07 Mar 18 3:25PM		EDMONTON INTL 07 Mar 18 4:23PM	H/	

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 06 Mar 18
	<b>File Locator/Ticket #:</b> [REDACTED]



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Invoice

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #:
Booking Date: 19 Feb 18
Client:
Agent:

File Locator:

PASSENGERS: DR BLAIR ONEILL

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row 1: AIR CANADA Ticket #, 366.00, 0.00, \$0.00, 74.96, 0.00, 440.96 CAD. Row 2: Total: 366.00, 0.00, 0.00, 74.96, 0.00, 440.96 CAD.

Table with columns: PAYMENTS, Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row 1: Invoice #, 02/16/2018, 440.96 CAD. Row 2: Total Payment: 440.96 CAD.

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL LEADERSHIP MEETING

\*\*\*\*\* AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 \*\*\*\*\* \*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\* PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 19 Feb 18  
Client: [REDACTED]  
Agent: [REDACTED]

File Locator: [REDACTED]

## MY ITINERARY

<b>Passengers</b> BLAIR ONEILL	<b>Citizenship</b> Not Specified	<b>Required Travel Documents</b> Not Specified
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All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

<b>Passengers:</b> BLAIR ONEILL	<b>Booking Date:</b> 16 Feb 18
	<b>File Locator/Ticket #:</b> [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08143	EDMONTON INTL 09 Mar 18 12:20PM		CALGARY INTL 09 Mar 18 1:21PM	T/	
AIR CANADA	08146	CALGARY INTL 11 Mar 18 3:25PM		EDMONTON INTL 11 Mar 18 4:23PM	T/	



A DIRECT TRAVEL® COMPANY

Invoice

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #:
Booking Date: 28 Feb 18
Client:
Agent:
Agents email: @MARLINTRAVEL.CA
File Locator:

PASSENGERS: DR BLAIR ONEILL

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row 1: AIR CANADA Ticket #, 358.40, 0.00, \$0.00, 74.96, 0.00, 433.36 CAD. Row 2: Total: 358.40, 0.00, 0.00, 74.96, 0.00, 433.36 CAD.

Table with columns: PAYMENTS, Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row 1: Invoice #, 02/27/2018, 433.36 CAD. Row 2: Total Payment: 433.36 CAD.

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SENIOR LEADERS MEETING

-----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 28 Feb 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
BLAIR ONEILL	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: BLAIR ONEILL	Booking Date: 27 Feb 18
	File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08139	EDMONTON INTL 19 Mar 18 10:45AM		CALGARY INTL 19 Mar 18 11:46AM	G/	
AIR CANADA	08225	CALGARY INTL 20 Mar 18 6:20PM		EDMONTON INTL 20 Mar 18 7:12PM	W/	



A DIRECT TRAVEL® COMPANY

Invoice

ALBERTA HEALTH SERVICES/ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [redacted]
Booking Date: 02 Mar 18
Client: [redacted]
Agent: [redacted]
Agents email: [redacted]@MARLINTRAVEL.CA
File Locator: TH1ZN8

PASSENGERS: DR BLAIR ONEILL

Table with columns: REFERENCE/ DESCRIPTION, FARE, HST/GST, PST, OTHER TAXES, PENALTY, TOTAL. Row 1: AIR CANADA Ticket # [redacted], 50.00, 0.00, \$0.00, 0.00, 0.00, 50.00 CAD. Row 2: Total: 50.00, 0.00, 0.00, 0.00, 0.00, 50.00 CAD.

Table with columns: PAYMENTS, Invoice #, Payment Date, Card Holder, Form of Payment, Amount. Row 1: [redacted], 03/01/2018, [redacted], [redacted], 50.00 CAD. Row 2: Total Payment: 50.00 CAD. Row 3: Balance Due CAD Currency 0.00 CAD.

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SENIOR LEADERS MEETING

-----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.
AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0
\*\*\*PLEASE REVIEW YOUR ITINERARY FOR ACCURACY\*\*\* PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY



ALBERTA HEALTH SERVICES/ALBERTA HEALTH SERVICES  
ALBERTA HEALTH SERVICES  
10030 - 107 STREET  
EDMONTON AB  
T5J 3E4

Trip #: [REDACTED]  
Booking Date: 02 Mar 18  
Client: [REDACTED]  
Agent: [REDACTED]  
Agents email: [REDACTED]@MARLINTRAVEL.CA  
File Locator: [REDACTED]

### MY ITINERARY

Passengers	Citizenship	Required Travel Documents
BLAIR ONEILL	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers:	BLAIR ONEILL	Booking Date:	01 Mar 18			
		File Locator/Ticket #:	[REDACTED]			
Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08139	EDMONTON INTL 19 Mar 18 10:45AM		CALGARY INTL 19 Mar 18 11:46AM	G/	
AIR CANADA	08146	CALGARY INTL 20 Mar 18 3:25PM		EDMONTON INTL 20 Mar 18 4:23PM	W/	