

AHS Board and Executive Expense Report

Name: Dr Brian Muir
Title: Zone Medical Director North Zone
Location: Grande Prairie
 Expenses approved during the month of January 2024

			Travel (1)						Working Sessions Hosting and Hospitality	
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	(3)	Other (4)
Jan-24	P-Card	Meetings			3,264	189	3,454			
Jan-24	Expense Claim	Meetings		637		3,107	3,744			
Jan-24	Direct Bill	Meetings	1,030			300	1,330			
Total			\$ 1,030	\$ 637	\$ 3,264	\$ 3,597	\$ 8,528	\$ -	\$ -	\$ -

**Total for
the Month** \$ 8,528

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 259
 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 Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
MUIR, BRIAN	Zone Medical Director North Zone	Grande Prairie	\$ 1,460.78								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/20/2023	In person physician meeting on Oct 20, 2023 in Hinton	AB - North Zone	Accommodations	\$ 107.91				1			
10/26/2023	Daily parking at hotel at Courtyard Marriott Edmonton	AB - Other Zones	Parking - Lot or Parkade	\$ 79.98				2			
10/26/2023	AHS/North Zone Primary Care Network Workshop on Oct 27, 2023 (required 2 nights)in Edmonton	AB - Other Zones	Accommodations	\$ 392.94				2			
11/1/2023	Calgary for CMO Retreat: Sustainable Leadership in a Complex Environment on Oct 30, 2023 (approval from Dr. Belanger)	AB - Other Zones	Accommodations	\$ 541.73				3			
11/14/2023	Bonnyville for in-person physician/MLA meeting in Bonnyville on Nov 14, 2023	AB - North Zone	Accommodations	\$ 130.24				1			
11/17/2023	Inperson meetings with physicians in Whitecourt and Cold Lake Nov 15 and 16, 2023	AB - Other Zones	Accommodations	\$ 207.98				2			
Approver(s) for the claim	Approval Status	Approval Date									
JAMIESON, PETER	Approve	15-Jan-24									



BCMI Inns Hinton (2166)

386 Smith St
Hinton, AB T7V 2A1
(780) 865-5099
hinton@bcminns.com

Account: [REDACTED]
Date: 10/20/23
Room: [REDACTED]
Arrival Date: 10/19/23
Departure Date: 10/20/23
Check In Time: 10/19/23 5:47 PM
Check Out Time:
Rewards Program ID:
You were checked in by: [REDACTED]
You were checked out by:
Total Balance Due: 107.91

MUIR, BRIAN P DR

Post Date	Description	Comment	Amount
10/19/23	Room Charge	[REDACTED] MUIR, BRIAN P DR	99.00
10/19/23	Goods & Services Tax		4.95
10/19/23	Tourism Levy		3.96
Folio Summary 10/19/23 - 10/19/23			
	Room Charge		99.00
	Goods & Services Tax		4.95
	Tourism Levy		3.96
Balance Due:			107.91

GST 104673280

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X _____

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 Marriott.com/YEGCY

B. Muir

Room: [REDACTED]
 Room Type: [REDACTED]
 Number of Guests: 1
 Rate: \$175.00

Clerk:

Arrive 26Oct23 Time: 07:50PM Depart: 28Oct23 Time: 11:00AM Folio Number: [REDACTED]

DATE	DESCRIPTION	CHARGES	CREDITS
26Oct23	Room Charge	175.00	
26Oct23	Marketing Fee	5.25	
26Oct23	Gst 831018205	9.01	
26Oct23	Tourism Levy	7.21	
26Oct23	Daily Parking	38.09	
26Oct23	Gst 831018205	1.90	
27Oct23	Room Charge	175.00	
27Oct23	Marketing Fee	5.25	
27Oct23	Gst 831018205	9.01	
27Oct23	Tourism Levy	7.21	
27Oct23	Daily Parking	38.09	
27Oct23	Gst 831018205	1.90	
28Oct23	Master Card		472.92
	Card # [REDACTED]		
	Amount: 472.92 Auth: [REDACTED]		
	This card was electronically swiped on 26Oct23		
	BALANCE:	0.00	

Summary of Taxes

Description	Tax
Gst Room	18.02
Hst Room	14.42

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 Calgary, AB T1Y 7K7
 Canada
 Tel: 403-984-5515



element
 BY WESTIN

Brian Muir

Page Number [REDACTED] Invoice Nbr [REDACTED]
 Guest Number [REDACTED]
 Folio ID [REDACTED]
 Arrive Date 28-OCT-23 16:01
 Depart Date 31-OCT-23
 No. Of Guest [REDACTED]
 Room Number [REDACTED]
 Marriott Bonvoy Number [REDACTED]

Tax Invoice

Tax ID: 835636788RT0001

Element CalgaryYYCEL OCT-31-2023 06:51 [REDACTED]

Date	Time	Reference	Description	Charges (CAD)	Credits (CAD)
28-OCT-23	03:01	RT801	Room Chrg - Govt/Military	189.00	
28-OCT-23	03:01	RT801	GST 5%	9.45	
28-OCT-23	03:01	RT801	Tourism Levy 4%	7.56	
29-OCT-23	02:49	RT801	Room Chrg - Govt/Military	144.00	
29-OCT-23	02:49	RT801	GST 5%	7.20	
29-OCT-23	02:49	RT801	Tourism Levy 4%	5.76	
30-OCT-23	03:01	RT801	Room Chrg - Govt/Military	164.00	
30-OCT-23	03:01	RT801	GST 5%	8.20	
30-OCT-23	03:01	RT801	Tourism Levy 4%	6.56	
31-OCT-23	06:51	MC	[REDACTED]		-541.73
			** Total	541.73	-541.73
			*** Balance	0.00	

Continued on the next page

Bonnyville Inn & Suites
#101-5401 43rd Street
Bonnyville, AB T9N 0B2

Fax: (780)826-6270
Email: fd@bestwesternbonnyville.com

Phone: (780)826-6226

Web: bestwesternbonnyville.com



Guest Charges

Best Western Rewards # : 6006637438145732

Folio #: [REDACTED] **Guest : Muir, Brian** Conf #: [REDACTED]
Room #: [REDACTED] BWR Tier : [REDACTED] CRS #: [REDACTED]
Payment Method : Credit Card Billing Reference : [REDACTED] CRS #2 [REDACTED]
Rate : 11/14/2023 Company : ALBERTA HEALTH SERVICES Arrival: 11/14/2023
\$119.49 [REDACTED] Departure: 11/15/2023

Date	Department	Reference	Voucher	Room	Charge	Credit	Balance
11/14/2023	Room Charge	Auto Posted		[REDACTED]	\$119.49		\$119.49
11/14/2023	Tourism Levy	Auto Posted		[REDACTED]	\$4.78		\$124.27
11/14/2023	Room GST	Auto Posted		[REDACTED]	\$5.97		\$130.24
11/15/2023	MasterCard	MC8718		[REDACTED]		\$130.24	\$0.00
						Balance	\$0.00

Tax Summary	
Room GST	\$5.97
Tourism Levy	\$4.78

Credit Card Payment

Payment Type: Credit Card Amount Paid: \$0.00
Account: [REDACTED] Approval Code:
Account Holder: MUIR/BRIAN Approval Amount: (\$130.24)

GST # 840673925

All payments must be made to Best Western Bonnyville Inn & Suites. This hotel is proudly managed by Mouallem Management Group.

I agree that my liability for all charges is not waived.

This hotel is independently owned and operated.

Guest Signature _____



Brian Muir	Folio No. :	11-17-23
[REDACTED]	A/R Number :	Room No. : [REDACTED]
[REDACTED]	Group Code :	Arrival : 11-15-23
[REDACTED]	Company : Alberta Health Services	Departure : 11-17-23
[REDACTED]	Membership No. : [REDACTED]	Conf. No. : [REDACTED]
[REDACTED]	Invoice No. : [REDACTED]	Rate Code : [REDACTED]
		Page No. : 1 of 1

Date	Description	Charges	Credits
11-15-23	*Accommodation		
11-15-23	Hospitality Tax 4%	99.99	
11-16-23	*Accommodation	4.00	
11-16-23	Hospitality Tax 4%	99.99	
11-17-23	MasterCard	4.00	
			207.98
	Total	207.98	207.98
	Balance	0.00	

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Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express & Suites
 201 Jennifer Heil Way
 Spruce Grove, AB T7X 0T3 GST#839627189RT0001
 Telephone: (780) 571-1101 Fax: (780) 571-3728
 This hotel is independently Owned and Operated by 1839016 Alberta Ltd.

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim								
MUIR, BRIAN	Zone Medical Director North Zone	Grande Prairie	\$ 1,858.02								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/21/2023	Inperson Executive Education in Calgary on Nov 22, 2023	AB - Other Zones	Accommodations	\$ 469.28				3			
11/21/2023	Parking at hotel for two nights in Calgary for Inperson Executive Education	AB - Other Zones	Parking - Lot or Parkade	\$ 94.50			only parking available at hotel is valet	2			
11/24/2023	Inperson physician meeting in Edson on November 23	AB - North Zone	Accommodations	\$ 173.31				1			
12/4/2023	Fort McMurray while having inperson physician meetings December 4-8	AB - North Zone	Accommodations	\$ 815.32				5			
12/7/2023	fuel receipt for fuel for car rental while in Fort McMurray	AB - Other Zones	Fuel-Travel and Car Rental	\$ 14.83				1			
12/9/2023	Hotel in Calgary overnight due to delay in flight then cancellation of flight at midnight, needed a place to stay for one night to catch new flight	AB - Other Zones	Accommodations	\$ 290.78			Hotel overnight in Calgary as flight was delayed then cancelled at midnight - needed to stay in hotel at airport for 6am flight next day	1			
Approver(s) for the claim	Approval Status	Approval Date									
JAMIESON, PETER	Approve	15-Jan-24									



MARRIOTT

CALGARY MARRIOTT DOWNTOWN

GUEST FOLIO

ROOM: [REDACTED] NAME: MUIR/BRIAN/DR RATE: 209.00 11/23/23 07:55 ACCT#: [REDACTED]
 TYPE: [REDACTED] ADDRESS: [REDACTED] PAYMENT: [REDACTED] MBV#: [REDACTED]
 ROOM CLERK: [REDACTED]

DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE
11/21	ROOM	209.00		
11/21	DM FEE	6.27	A	
11/21	GST ROOM	10.76	B	
11/21	T LEVY	8.61	I	
11/21	VALETPAR	45.00		
11/21	TAX	2.25	J	
11/22	ROOM	209.00		
11/22	DM FEE	6.27	A	
11/22	GST ROOM	10.76	B	
11/22	T LEVY	8.61	I	
11/22	VALETPAR	45.00		
11/22	TAX	2.25	J	
11/23	CCARD-MC			563.78
	SETTLED TO: MASTERCARD			
	AUTHORIZATION *****			
	APPROVED			
	Total: \$528.16 Card Type: MASTERCARD Card Entry: CHIP Acct: [REDACTED] Approval Code: [REDACTED]			
	PIN Verified			
	***** EMV AUTHORIZATION *****			

===== SUMMARY OF TAXES =====

DESCRIPTION	TAXED AMOUNT	TAX
A 3% DESTINATION MKT	.00	12.54
B 5% GST ROOM	.00	21.52
C 5% GST OTHER	.00	.00
I 4% TOURISM LEVY	.00	17.22
J 5% GST PARKING	.00	4.50
K 20% GROUP SC	.00	.00
L 5% GST OTHER	.00	.00
N GST BOT	.00	.00
P GST TCC	.00	.00
NET CHARGES	508.00	
TAX	55.78	
CREDITS	563.78	
FOLIO		.00

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MARRIOTT

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Signature X



11-24-23

Brian Muir [Redacted]	Folio No. :	[Redacted]	Room No. :	[Redacted]
	A/R Number :	[Redacted]	Arrival :	11-23-23
	Group Code :	[Redacted]	Departure :	11-24-23
	Company :	[Redacted]	Conf. No. :	[Redacted]
	Membership No. :	[Redacted]	Rate Code :	[Redacted]
	Invoice No. :	[Redacted]	Page No. :	1 of 1

Date	Description	Charges	Credits
11-23-23	*Accommodation	159.00	
11-23-23	AHT Tax - Room	6.36	
11-23-23	GST Tax - Room	7.95	
11-24-23	MasterCard [Redacted]		173.31
Total		173.31	173.31
Balance		0.00	

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Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

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B. Muir

Room: [REDACTED]

Room Type: [REDACTED]

Number of Guests: 1

Rate: \$187.00

Clerk:

Arrive: 04Dec23

Time: 06:16PM

Depart: 08Dec23

Time:

Folio Number: [REDACTED]

DATE	DESCRIPTION	CHARGES	CREDITS
04Dec23	Room Charge	187.00	
04Dec23	Gst 869371682 Rt0002	9.35	
04Dec23	Tourism Levy	7.48	
05Dec23	Room Charge	187.00	
05Dec23	Gst 869371682 Rt0002	9.35	
05Dec23	Tourism Levy	7.48	
06Dec23	Room Charge	187.00	
06Dec23	Gst 869371682 Rt0002	9.35	
06Dec23	Tourism Levy	7.48	
07Dec23	Room Charge	187.00	
07Dec23	Gst 869371682 Rt0002	9.35	
07Dec23	Tourism Levy	7.48	
08Dec23	Master Card		815.32

CARD #: [REDACTED]

AMOUNT: 815.32

Auth: [REDACTED]

This card was electronically swiped on 04Dec23

BALANCE: 0.00

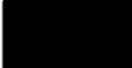
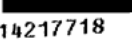
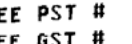
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CHEVRON
312 GREGOIRE DR.
FORT MCMURRAY, AB
T9H 3R2
780-743-5016

2023-12-07 15:47:54

STORE #: 
TRANS #: 
INVOICE NO: 
GST #: R714217718
PSTU #: SEE PST #
GSTU #: SEE GST #

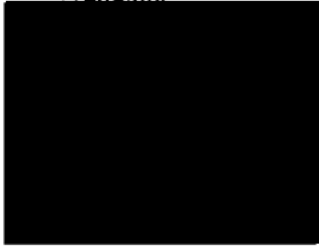
PUMP 3
REGULAR (87)
10.526L AT \$1.409/L

SALE \$ 14.83

GST INCLUDED \$ 0.71

TOTAL CAD\$ 14.83

PRE-AUTH COMPLETION
CARD TYPE: MC
MASTERCARD



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Dr Brian Muir

Room: [REDACTED]
Folio: [REDACTED]
Cashier: [REDACTED]
Arrival: 12-08-23
Departure: 12-09-23

Date	Description	Additional Information	Charges	Credits
12-08-23	Room Charge		259.00	
12-08-23	Rooms Destination Market Fee		7.77	
12-08-23	Rooms Tourism Levy		10.67	
12-08-23	Room GST	[REDACTED]	13.34	
12-09-23	Master Card	[REDACTED]		290.78

GST Summary	
Reg No: 741907497 RT0001	
Room	13.34
F&B	0.00
Other	0.00
Total	13.34

Total	290.78	290.78
Balance Due	0.00	CDN

Guest Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
MUIR, BRIAN	Zone Medical Director North Zone	Grande Prairie	\$ 134.97								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/15/2024	Visit with MLA and Mayor on January 16 in Lac La Biche	AB - North Zone	Accommodations	\$ 134.97				1			
Approver(s) for the claim	Approval Status	Approval Date									
JAMIESON, PETER	Approve	29-Jan-24									



CANALTA LAC LA BICHE
 9905 83 Ave, Lac la Biche T0A 2C0 CA
 7806234490
 canaltaclabiche@canalta.com

Date Range: Jan 15, 2024 - Jan 16, 2024

Tax ID : 894648450

Guest Folio

Confirmation Number - [REDACTED]

Primary Guest

Guest Name: MUIR, BRIAN P DR
 Address: [REDACTED]
 City, State, Zip Code: [REDACTED]
 Country: [REDACTED]

Stay Details

Check In Date
 Check Out Date
 Room
 Source
 Guests

Jan 15, 2024
 Jan 16, 2024
 NIK - 203
 SABRE
 1/0

Company Details

Name: Alberta Health Services
 Tax ID
 PO Number
 Account Name: Alberta Health Services
 Account Number

Other Details

Tax Invoice
 Tax Exemption: YES
 Tax Exempt Date: Jan 15, 2024
 Travel Agent Name: [REDACTED]

Date	Type	Description	Amount
Jan 15, 2024	Charge	ROOM RENT-TAX EXEMPTED	\$126.00
Jan 15, 2024	Tax	TOURISM LEVY	\$5.04
Jan 15, 2024	Tax	DESTINATION MARKETING FEE	\$3.78
Jan 15, 2024	Tax	TOURISM LEVY ON DMF	\$0.15
Jan 16, 2024	Payments	MASTER [REDACTED]	-\$134.97

Summary

Type	Amount
ROOM RENT	\$126.00
DESTINATION MARKETING FEE	\$3.78
GST	\$0.00
GST ON DMF	\$0.00
TOURISM LEVY	\$5.04
TOURISM LEVY ON DMF	\$0.15
CREDIT CARD	\$134.97
Folio Balance	\$0.00

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
MUIR, BRIAN	Zone Medical Director North Zone	Grande Prairie	\$ 2,617.70								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/9/2023	Meals per diems for inperson meetings on November 9 and 10 in Cold Lake and Bonnyville	AB - North Zone	Meals Per Diem	\$ 84.50				2			
11/9/2023	In person physician meetings on November 9th in Cold Lake then travel to Bonnyville for morning meeting		Mileage-Other	\$ 366.51	Grande Prairie	Cold Lake and Bonnyville		1			779.8
11/10/2023	In person physician meetings on November 10th in Bonnyville, St. Paul and Elk Point then back home to Grande Prairie		Mileage-Other	\$ 381.73	Bonnyville	St. Paul, Elk Point and back to Grande Prairie		1			812.2
11/14/2023	In person physician and MLA meetings in Bonnyville, Cold Lake, stay in Spruce Grove, Whitecourt	AB - North Zone	Meals Per Diem	\$ 148.00				4			
11/14/2023	In person physician/MLA meeting on Nov 14 Bonnyville		Mileage-Other	\$ 325.52	Grande Prairie	Bonnyville		1			692.6
11/15/2023	Inperson physician meeting, then to Spruce Grove for in person MLA meeting on the 17th in Whitecourt		Mileage-Other	\$ 182.69	Bonnyville	Cold Lake and Spruce Grove		1			388.7
11/17/2023	Travel to Whitecourt from Spruce Grove then to Grande Prairie after MLA meeting on November 17		Mileage-Other	\$ 216.81	Spruce Grove	Whitecourt then back to Grande Prairie		1			461.3
11/21/2023	Calgary for Executive Education Cohort 9 presentation on November 22		Mileage-Other	\$ 365.80	Grande Prairie	Calgary		1			778.3
11/21/2023	Travel in Calgary, Edson and back to Grande Prairie after in-person physician meetings	AB - Other Zones	Meals Per Diem	\$ 121.50				4			
11/23/2023	Travel from Calgary to Edson for inperson physician meeting on November 23		Mileage-Other	\$ 238.57	Calgary	Edson		1			507.6
11/24/2023	Inperson meeting in Grande Prairie		Mileage-Other	\$ 186.07	Edson	Grande Prairie		1			395.9
Approver(s) for the claim	Approval Status	Approval Date									
JAMIESON, PETER	Approve	15-Jan-24									

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
MUIR, BRIAN	Zone Medical Director North Zone	Grande Prairie	\$ 330.70								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
12/4/2023	Fort McMurray for inperson physician meetings December 4-8	AB - North Zone	Meals Per Diem	\$ 208.50				6			
12/11/2023	Roundtrip mileage on December 11 for presentation in Valleyview for Wildfire Recognition and Awards		Mileage-Other	\$ 122.20	Grande Prairie	Valleyview		1			260
Approver(s) for the claim	Approval Status	Approval Date									
JAMIESON, PETER	Approve	15-Jan-24									

AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
MUIR, BRIAN	Zone Medical Director North Zone	Grande Prairie	\$ 795.39								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/15/2024	Meeting on January 15 with Lac La Biche Mayor, then tour Lac La Biche Hospital with Operations on January 16		Mileage-Other	\$ 301.38	Grande Prairie	Lac La Biche		1			596.8
1/15/2024	Meetings on January 15 and 16 with MLA in Lac La Biche, Cold Lake and hospital tour with Operations in Lac La Biche	AB - North Zone	Meals Per Diem	\$ 74.00				2			
1/16/2024	Meeting on January 16 with MLA in Cold Lake then home to Grande Prairie		Mileage-Other	\$ 420.01	Lac La Biche	Cold Lake and Grande Prairie		1			831.7
Approver(s) for the claim	Approval Status	Approval Date									
JAMIESON, PETER	Approve	29-Jan-24									

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.
- Refer to Quick Reference Guide for: [Providing a Standard Business Reason\(s\)](#)
- 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**

Name :	Dr. Brian Muir	Reporting Period for the Month of :	Jan-24
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
23-Nov-2023	Direct Billing	Airline Ticket	Travel to Fort McMurray for in-person Physician meetings December 5-8, 2023 - limited flights available, had to transfer through Calgary	Vision Travel DT Ontario-West Inc	\$543.08
23-Nov-2023	Direct Billing	Airline Ticket	Flight home from Fort McMurray Travel (Dec 4-8, 2023), limited flights available, had to transfer through Calgary	Vision Travel DT Ontario-West Inc	\$487.01
28-Dec-2023	Direct Billing	Car Rental	Car rental for travel in Fort McMurray Dec 4-8, 2023	Enterprise Rent A Car Canada Company	\$300.37
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in the Month					\$1,330.46



Vision Travel DT Ontario-West Inc
 9929 - 108th Street
 Edmonton AB T5K 1G8
 833-692-4120

www.dt.ca
 GST Reg : 723782728 RT 0001

Invoice/Itinerary

Invoice: [REDACTED]
 Issued: 23 November 2023
 ALBERTA HEALTH SERVICES
 [REDACTED]

Agency Ref.: [REDACTED]
 Sales Person: [REDACTED]

Customer Number: [REDACTED]
 Customer Ref.: N/A
 Passenger(s): MUIR/BRIAN P DR

Disclaimer: It is your responsibility to carefully review this itinerary immediately upon receipt and notify us if there are any discrepancies.

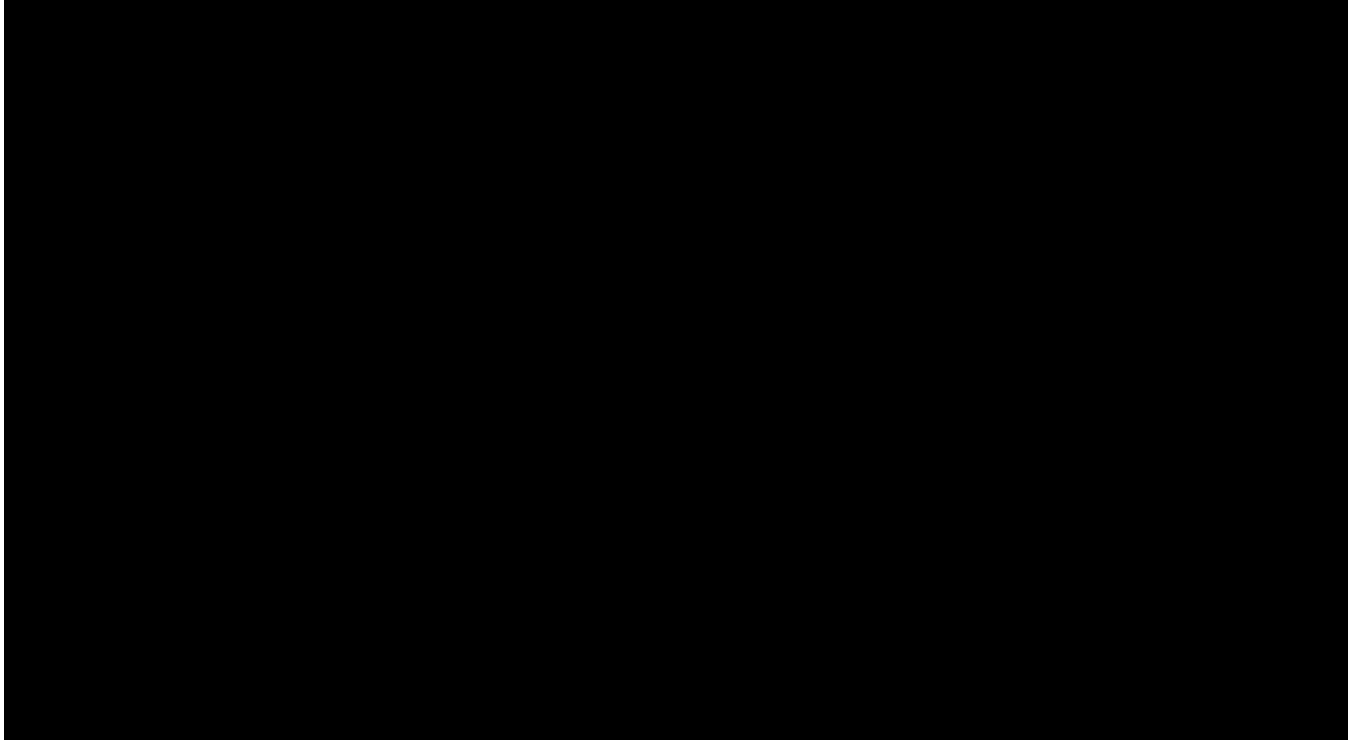
Important Information Related To Your Travels:

For complete Canadian Government details for returning to or travelling to Canada – click [here](#)
 Please [click here](#) upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you continue to come back to this information regularly in advance of and during travel as requirements and restrictions could change.

AIR - Monday, December 4 2023		Add To Calendar
WestJet Flight	[REDACTED] Economy Class	
Depart	Grande Prairie, Alberta Weather Grande Prairie Municipal Airport 12:20 PM Monday, December 4 2023	Arrive Calgary, Alberta Weather Calgary International Airport 01:42 PM Monday, December 4 2023
Duration:	1 hour(s) and 22 minute(s) Non-stop	
Status:	Confirmed - WestJet Booking Reference: [REDACTED]	
Operated By:	WESTJET ENCORE	
FF Number:	[REDACTED] - MUIR/BRIAN P DR - please reconfirm at check-in	
Online Check In:	Available 24 hours prior - click here	
Baggage Allowance:	1 Piece(s)	
Remarks:	ARR TERMINAL M PLEASE CHECK IN WITH WESTJET ENCORE	

AIR - Monday, December 4 2023		Add To Calendar
WestJet Flight	[REDACTED] Economy Class	
Depart	Calgary, Alberta Weather Calgary International Airport 03:35 PM Monday, December 4 2023	Arrive Fort McMurray, Alberta Weather Fort McMurray Airport 05:16 PM Monday, December 4 2023
Duration:	1 hour(s) and 41 minute(s) Non-stop	
Status:	Confirmed - WestJet Booking Reference: [REDACTED]	
Operated By:	WESTJET ENCORE	
FF Number:	[REDACTED] - MUIR/BRIAN P DR - please reconfirm at check-in	
Online Check In:	Available 24 hours prior - click here	
Baggage Allowance:	1 Piece(s)	
Remarks:	ARR TERMINAL M	

PLEASE CHECK IN WITH WESTJET ENCORE



Excursion / Tour - Monday, December 4 2023

Depart: Fort McMurray
Status: Confirmed

Invoice Details

Transaction	Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Invoice Number:	██████████					
WestJet	██████████	494.96	48.12	0.00	0.00	543.08
					Billed to: ██████████	
Totals:		494.96	48.12	0.00	0.00	543.08
				Total Credit Card Billing:		543.08
				Balance Due:		0.00

Remarks

24 HOUR EMERGENCY TRAVEL ASSISTANCE
OUTSIDE REGULAR BUSINESS HOURS - MONDAY TO FRIDAY
A SERVICE FEE MAY APPLY FOR CALLS TO THIS SERVICE
WITHIN NORTH AMERICA - CALL 1-888-700-6063
OUTSIDE NORTH AMERICA - CALL COLLECT 1-514-855-4263
PLEASE QUOTE ACCESS CODE ██████████

RECOMMENDED CHECK-IN TIME IS AT LEAST 120 MINUTES
PRIOR TO DEPARTURE. AFTER CHECK-IN YOU MUST BE
AVAILABLE AT THE BOARDING GATE AT LEAST 60 MINUTES
PRIOR TO DEPARTURE OR YOU MAY BE DENIED BOARDING.
PLEASE ENSURE THAT YOU HAVE VALID GOVERNMENT ISSUED
PHOTO I.D. GATE ASSIGNMENTS AND DEPARTURE
ARRIVAL INFORMATION ARE SUBJECT TO CHANGE.
PLEASE CHECK MONITORS AT THE AIRPORT.



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AIR - Friday, December 8 2023		Add To Calendar
WestJet Flight [REDACTED] Economy Class		
Depart	Fort McMurray, Alberta Weather Fort McMurray Airport 08:35 PM Friday, December 8 2023	Arrive Calgary, Alberta Weather Calgary International Airport 10:21 PM Friday, December 8 2023
Duration:	1 hour(s) and 46 minute(s) Non-stop	
Status:	Confirmed - WestJet Booking Reference: [REDACTED]	
Operated By:	WESTJET ENCORE	
FF Number:	[REDACTED] - MUIR/BRIAN P DR - please reconfirm at check-in	
Online Check In:	Available 24 hours prior - click here	
Baggage Allowance:	1 Piece(s)	
Remarks:	DEP TERMINAL M PLEASE CHECK IN WITH WESTJET ENCORE	

AIR - Friday, December 8 2023		Add To Calendar
WestJet Flight [REDACTED] Economy Class		
Depart	Calgary, Alberta Weather Calgary International Airport 11:20 PM Friday, December 8 2023	Arrive Grande Prairie, Alberta Weather Grande Prairie Municipal Airport 12:59 AM Saturday, December 9 2023
Duration:	1 hour(s) and 39 minute(s) Non-stop	
Status:	Confirmed - WestJet Booking Reference: [REDACTED]	
Operated By:	WESTJET ENCORE	
FF Number:	[REDACTED] - MUIR/BRIAN P DR - please reconfirm at check-in	
Online Check In:	Available 24 hours prior - click here	
Baggage Allowance:	1 Piece(s)	
Remarks:	DEP TERMINAL M	

PLEASE CHECK IN WITH WESTJET ENCORE

Invoice Details

Transaction	Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Invoice Number:	██████████					
WestJet	██████████	423.89	63.12	0.00	0.00	487.01
					Billed to: ██████████	
Totals:		423.89	63.12	0.00	0.00	487.01
				Total Credit Card Billing:		487.01
				Balance Due:		0.00

Remarks

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PHOTO I.D. GATE ASSIGNMENTS AND DEPARTURE
ARRIVAL INFORMATION ARE SUBJECT TO CHANGE.
PLEASE CHECK MONITORS AT THE AIRPORT.
PLEASE RECONFIRM ALL FLIGHTS
IT IS YOUR RESPONSIBILITY TO VERIFY FLIGHT TIMES WITH
THE AIRLINE PRIOR TO YOUR DEPARTURE. SCHEDULE CHANGE
MAY OCCUR AT ANY TIME WITHOUT NOTICE BY THE AIRLINE.

ENSURE ALL TRAVELLERS HAVE PROPER TRAVEL DOCUMENTS
CHECK THIS WEBSITE FOR AIRPORT SECURITY INFO
WWW.CATSA.GC.CA

---AIRPORT SECURITY REVISIONS---

BAGGAGE ALLOWANCE-SPECIFIC SIZE AND WEIGHT
RESTRICTIONS VARY BETWEEN AIRLINES. EXCESS CHARGES
MAY APPLY. VISIT THE AIRLINES WEBSITE TO SEE THE
EXACT BAGGAGE RESTRICTIONS AND FEES.

MOST AIRLINE BAGGAGE LINKS ARE AVAILABLE BY VISITING
WWW.DT.CA/BAGGAGE/

--- WS AIRPORT ARRIVAL TIMES ---

SEVERAL AIRPORTS ACROSS WESTJETS NETWORK ARE EXPERIENCING
AN INCREASE IN PROCESSING TIMES RESULTING IN LONG LINEUPS
THROUGH CHECK-IN AND SECURITY.

TO SUPPORT A STRESS-FREE AND SAFE JOURNEY
PLEASE ADVISE YOUR CLIENTS TO ARRIVE EARLY TO ENSURE
THEY HAVE PLENTY OF TIME BEFORE DEPARTURE.

AS A REMINDER THE RECOMMENDED CHECK-IN TIMES AS
OUTLINED ON WESTJET.COM ARE AS FOLLOWS

DOMESTIC TRAVEL ARRIVE 120 MINUTES BEFORE DEPARTURE
THIS IS AN ELECTRONIC TICKET VALID ONLY ON ISSUING AIRLINE
PHOTO ID REQUIRED FOR CHECK IN.

BOARDING PASS REQUIRED PRIOR TO ENTERING SECURITY.

YOUR AIRLINE FILE NUMBER IS ██████████



Federal GST# : 889365821

Consolidated Inv. #
Rental Agreement #
Bill Ref #
Invoice Date



28-Dec-2023

Bill To Information

ALBERTA HEALTH SERVICES
PO BOX 1600
EDMONTON, AB - T5J 2N9
CANADA

Rental Information

Reservation Number [REDACTED]
Driver: MUIR, BRIAN
Pickup Date/Time : 12/04/2023 17:44
Return Date/Time : 12/08/2023 17:40
Miles/kms : 77
Car Class : ICAR Requested Class : ICAR

Vehicle Information

Yr/Make/Model Unit # License No Beg/End/Distance
2022/CHRYSLER/300 [REDACTED] [REDACTED] 38406/38483/77

Rental Branch

FORT MCMURRAY AIRP-ODY
100 SNOWBIRD WAY
FORT MCMURRAY, AB - T9H 0G3

Return Branch

FORT MCMURRAY AIRP-ODY
100 SNOWBIRD WAY
FORT MCMURRAY, AB - T9H 0G3

Charge Detail

Description	Qty	Period	Rate	Amount
TIME & DISTANCE	4	DAY	57.00	228.00
			Sub Total	228.00
CUSTOMER FACILITY CHARGE 8/DAY	4	DAY	8.00	32.00
CONCESSION FEE RECOVERY 16.28 PCT		PERCENT	16.28	37.57
VLF REC 0.70/DAY	4	DAY	0.70	2.80
Total Charges (CAD)				300.37



Additional Information

Ext Bill Ref # 1 [REDACTED]

Remit Payment in CAD to	For Billing Inquiries	Payment Terms
ENTERPRISE RENT A CAR CANADA COMPANY P.O. BOX 9716 STATION A TORONTO ON M5W 1R6 Email Remit To: CanadianAR@em.com	Tel#: +1 8773121084 AskARCarada@em.com	Payment Due Within 30 days of invoice date. Late payments are subject to finance charge.

Individual line item charges such as rental rates for Time and Distance, percentage-based charges (e.g., sales taxes and fees or surcharges), and charges divided between multiple parties may be rounded up or down a whole cent to ensure that the charges equal the actual Total Amount Due and/or to avoid fractional cents.