

Official Administrator and Executive Expense Report

Name Colleen Turner
Title VP, Community Engagement & Communications (Acting)
Location Calgary
 Expenses submitted during the month of November 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)
Nov-14	P-Card	Meetings	419				419			
Nov-14	Expense Claim	Meetings				101	101			
Total			<u>\$ 419</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 101</u>	<u>\$ 520</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

Total for the Month \$ 520

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

Instruction:

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

<u>TURNER, COLLEEN</u> Cardholder's Name	<u>VICE PRESIDENT (ACTING)</u> Cardholder's Position/Title	Billing Reporting Period:	<u>20/11/2014</u>
<u>COMMUNITY ENGAGEMENT &</u> Cardholder's Dept	<u>SOUTHPORT TOWER</u> Cardholder's Site/Location	Total Statement Amount:	<u>\$419.21</u>
<u>COLLEEN.TURNER@ALBERTAHEALTHSERVICES.CA</u> Cardholder's e-mail address		Last 6 digits of the P-Card #	XXXXXXXXXX

Statement of Transactions

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
24/10/2014	368775908	WESTJET 8380616763197, Westjet Airlines	5.25	CAD	5.25	.00	.00	10-28-2014 Calgary to Edm ELT Mtg Seat selection
24/10/2014	368775909	WESTJET 8382102433715, Westjet Airlines	200.68	CAD	200.68	.00	.00	10-28-2014 Calgary to Edm flight re ELT Mtg
24/10/2014	368920946	AIR CAN 0142140579797, AIR CANADA	213.28	CAD	213.28	.00	.00	10-28-2014 - Return flight Edm to Calgary

Oct 28/14
Calgary/Edmonton

EKI MHG



Contact us Help Enter your search

1 of 2

Flights Vacations Deals Travel Info My WestJet Rewards

Itinerary confirmation

Thank you for choosing WestJet. You can find details about your booking below.

Your reservation code is [REDACTED]

Guest details

Colleen Turner

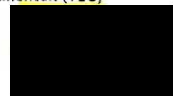
Flight

Calgary (YYC)-Edmonton (YEG)

WestJet FF

Ticket number

Seat



Air itinerary details

Calgary (YYC)
Tue Oct 28 2014, 7:40 AM
De Havilland Dash 8-400 Turboprop

Edmonton (YEG)
Tue Oct 28 2014, 8:45 AM

WS 3270
Operated by WESTJET ENCORE

Fare type: Flex
Non-stop

Pricing breakdown

Guest type	Base fare per guest	Air transportation charges per guest	Taxes, fees and charges per guest	Total fare per guest	Number of guests	Total fare
Adult	\$142.00	\$12.00	\$46.68	\$200.68	x 1	\$200.68 CAD

YYC-YEG: Flex fare type benefits

No fee for first checked bag

Second checked bag fee of \$25-29.50 CAD and excess checked baggage fee of \$75-88.50 CAD per eligible piece (for travel after October 28, 2014)

Second checked bag fee of \$20-23.60 CAD and excess checked baggage fee of \$50-59 CAD per eligible piece (for travel before October 29, 2014)

Lower change and cancellation fees

Total airfare: **\$200.68 CAD** ✓

Seats

Regular seat

WS 3270 YYC-YEG Seat 9C Colleen Turner

\$9.00 CAD + \$0.25 CAD tax

Total seats: **\$5.25 CAD** ✓

Earn WestJet dollars. Pay when you pick up your car. Book now.

Reserve now and pay when you pick up your vehicle.

All displayed quotes include taxes and fees. Click on the arrows to see other options.

Pick-up from: Edmonton (YEG) Tue Oct 28 2014, 9:15 AM

Drop-off to: Edmonton (YEG) Wed Oct 29 2014, 8:45 AM

Compact 2 Door,

Economy 4 Door,

Compact 5 Door,

Economy 2 Door,

<p>Automatic, AC</p>  <p>Automatic</p> <p>Total price \$97.90 CAD (includes taxes and fees) \$97.90 CAD/day</p> <p>SELECT</p> <p>Rate details</p>	<p>Automatic, AC</p>  <p>FF Budget</p> <p>Total price \$103.95 CAD (includes taxes and fees) \$103.95 CAD/day</p> <p>SELECT</p> <p>Rate details</p>	<p>Automatic, AC</p>  <p>FF Budget</p> <p>Total price \$103.95 CAD (includes taxes and fees) \$103.95 CAD/day</p> <p>SELECT</p> <p>Rate details</p>	<p>Automatic, AC</p>  <p>FF National</p> <p>Total price \$97.90 CAD (includes taxes and fees) \$97.90 CAD/day</p> <p>SELECT</p> <p>Rate details</p>
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WestJet Rewards members earn 1% back in WestJet dollars on car rentals booked at westjet.com.*
* WestJet dollars will be awarded on the cost of your rental before taxes, fees and charges.

Charged to MASTERCARD [REDACTED] **\$200.68 CAD**
 Charged to MASTERCARD [REDACTED] **\$5.25 CAD**
Total: \$205.93 CAD

Important details

WestJet permits one piece of carry-on baggage and one personal item on board. If you are on a flight operated by one of our partners, your allowance may be different - learn more. All carry-on baggage must pass through security. Make sure your carry-on complies and avoid having to surrender your personal items. Review what you can - and can't - take on your flight by visiting our restricted items info page or [cabin.gc.ca](#).



Your checked baggage allowance depends on the aircraft you are travelling on, the fare option purchased and the destination you are travelling to or from. You may be permitted additional items, or items that are overweight or oversized in checked baggage. For more details, please see [Checked and excess baggage](#).



Use [web check-in](#) to print your boarding pass and select your seat for free. This service is available as early as 24 hours (and up to 60 minutes) before your scheduled flight. Selecting some seats requires a fee.



Identification and travel documents required vary based on where you are travelling and may change based on your nationality. Visit our [ID requirements](#) section for more information.



Do you have a special need? For information on travelling with oxygen, assistive devices, or a service animal see [Guests with special needs](#).



We know how valuable your time is. To ensure we are able to depart and arrive as scheduled, please be sure you are through security and at your departure gate 30 minutes prior to your flight's scheduled departure time. If you arrive at the gate less than 10 minutes prior to departure and the aircraft is already boarded you will be denied boarding.

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Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



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Booking Information

Booking Reference: [REDACTED]

Customer Care

Air Canada
1-888-247-2262

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Flight Arrivals and Departures
1-888-422-7533

Main Contact:
Ms Colleen A Turner
collec [REDACTED]
Mobile: [REDACTED]
Home: [REDACTED]
Work: [REDACTED]



Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
ACB149 ¹	Edmonton, Edmonton Int'l (YEG) Tue 28-Oct 2014 15:00	Calgary (YYC) Tue 28-Oct 2014 15:52	0	0hr52	DH3	Flex, V	

Operated by:
¹ Air Canada Express - Jazz

Passenger Information

1: Ms Colleen A Turner - Adult (16+). Ticket Numbers: [REDACTED]

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

Purchase Summary

Fare Summary	Adult
Passenger Type	
Air Transportation Charges	
Departing Flight - Flex	154.00
Surcharges	12.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	10.16
Air Travellers Security Charge (ATSC)	7.12
Total airfare and taxes before options (per passenger)	213.28
Number of passengers	x 1
Total airfare, taxes and options	213.28
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$213.28

Payment Information

Credit/Debit Card [REDACTED] amount paid: \$213.28
The following charges will appear on your credit or debit card statement:

- Air Canada: \$213.28 (Airfare - per ticket)

Ticket number: [REDACTED]

Fare Rules

Departing Flight Edmonton (YEG) To Calgary (YYC) - Flex

Changes:

- Prior to day of departure - Change fee per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. Changes can be made up to 2 hours prior to departure.

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)

* 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)

Expense Date From: Oct. 15 To 28, 2014
 Travel Period from: _____ To _____ (MAY BE USED)
 Out-of-Province Travel

Name: Colleen Turner Position (Title): Acting VP, CE & Communications

Location: _____ Dept: _____ DOFA Level: _____ (applicable) Union: _____ Business Phone #: _____

Employee # (E-People): _____

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					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT		
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/ Expense	Total Expense	Total Section B	Total Section C&D	
2A	101	0005	7113000000	\$100.90						\$100.90		
2B												
2C												
2D												
				\$100.90								

NOTE: This section auto fills from page 2A, 2B, 2C & 2D

**User to enter Coding & \$ Amounts

NOTE: These fields do not automatically fill for Section C & D

SECTION F: AUTHORIZATION

I attest that I have read and understand the "Travel, Hospitality & Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of this 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.

I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Travel, Hospitality and Working Session Expenses Policy - Document# 1122

I, by signing this form, attest that I am compliant to all the above statements.

Employee Signature: [Signature] Date: Nov 24, 2013

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to this expense and confirm expenses being claimed are in compliance with such policies.

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.

I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Approved claim form with receipts should be sent by the approver directly to Accounts Payable for processing.

Approved By (PRINT ONLY): Deb Rhodes DOFA Level _____ Position # _____ Phone # _____

I, by signing this form, attest that I am compliant to all the above statements.

Signature: Deborah Rhodes Title: VP Corp Services + CFO Date: Dec. 11/14

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to this expense and confirm expenses being claimed are in compliance with such policies.

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.

I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Approved By (PRINT ONLY): _____ DOFA Level _____ Position # _____ Phone # _____ Ext _____

I, by signing this form, attest that I am compliant to all the above statements.

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.

Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10020-107 St, North Tower, 10th Floor, Accounts Payable, Edmonton, AB T6J 3E4

EXPENSE CLAIM DETAILS

Enter Finance Coding 101 0005 7113000000 Emp # (E-People) XXXXXXXXXX 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 = Inter!)
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-mmm-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? Yes/No	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							
28-Oct-14	Taxi from DT Edm to airport re ELT Mtg														
28-Oct-14	Parking at Calgary Airport														
15-Oct-14	Taxi from Hotel to Northlands Expo re Gianrose Fdn event.														
SUBTOTALS															Total Kms
										\$73.60	\$27.30				

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)

Mileage \$

Travel \$ Subtotal \$100.90

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 \$ \$100.90

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)

MOND SEDAN & LIMO SVC.
 780-814-4002
 MAIN OFFICE
 780-465-4002 1-877-465-4002
 EMAIL: mond@shaw.ca
 www.mond-limo.com

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G.S.T.	88212-7012	AUTH. NO.	DRIVER	UNIT No.
FROM:		TIME	DAY	MO. YR.
TO:		<input type="checkbox"/>	<input type="checkbox"/>	FARE 15.00
PRINT NAME:		<input type="checkbox"/>	<input type="checkbox"/>	INT'L
CUSTOMER'S NAME:		<input type="checkbox"/>	<input type="checkbox"/>	GRATUITY 2.00
X		<input type="checkbox"/>	<input type="checkbox"/>	TOTAL 17.00

THIS CARD IS VALID ONLY IF THIS ITEM IS AUTHORIZED TO PAY THE AMOUNT SHOWN AS TOTAL
 IN THE PRESENT TRANSACTION. I PROMISE TO PAY SUCH TOTAL TOGETHER WITH ANY OTHER CHARGES DUE
 HEREIN SUBJECT TO AND IN ACCORDANCE WITH THE AGREEMENT COVERING THE USE OF SUCH CARD.

CUSTOMER COPY

Confirmed - Only Claiming \$15.00 (not tip).

Calgary International Airport Parkade

THANK YOU FOR YOUR VISIT

RECEIPT
 GST NO. R122556194
 Airport parking

EXIT No. AS
 IN: 10/28/14 06:37
 OUT: 10/28/14 16:25
 DURATION: 0 09: 48
 PAID: \$ 27.30
 (GST INCLUDED)
 VISA

Co-op Taxi Line
 (780) 425-2525
 www.co-optaxi.com

Terminal [REDACTED]
 Driver 4509
 14/10/28 13:54:15

VISA [REDACTED]
 Card [REDACTED]
 VISA [REDACTED]
 CHIP CARD
 AID : A0000000031010
 TVR : 0000008000
 Ref [REDACTED]
 Auth [REDACTED]

	PURCHASE
FARE : \$	54.60
TIP : \$	4.00
<hr/>	
TOTAL : \$	58.60

Edm to Airport
 APPROVED - THANK YOU
 (01-027)

IMPORTANT: Retain a copy for your records

Customer Copy