

AHS Board and Executive Expense Report

Name Colleen Turner
Title VP Community Engagement & Communications
Location Edmonton

Expenses submitted during the month of February 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)
Feb-18	P-Card	Meetings			332	427	759	314		
Feb-18	Expense Claim	Meetings		103		335	438			
Feb-18	Direct Billing	Meetings	1,546				1,546			
Total			\$ 1,546	\$ 103	\$ 332	\$ 762	\$ 2,743	\$ 314	\$ -	\$ -

Total for the Month \$ 3,057

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 155
 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.

AHS Public Disclosure P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
TURNER, COLLEEN	VP Community Engagement & Communications	Calgary	\$ 1,073.48								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/23/2018	Overnight stay in Edmonton to attend ELT.	AB - Other Zones	Accommodations	\$ 166.04			Overnight stay in Edmonton to attend ELT.	1			
1/23/2018	Parking at YYC for return trip Calgary to Edmonton to attend ELT.	AB - Other Zones	Parking - Lot or Parkade	\$ 58.70			Parking at YYC for return trip Calgary to Edmonton to attend ELT.	1			
1/29/2018	Pick-up at YEG airport and drop off at office. Invoice dates include: Jan 15, 22 and 23 for total of \$130.00.	AB - Other Zones	Taxi	\$ 130.00	Edmonton Airport	Seventh Street Plaza	Pick-up at YEG airport and drop off at office. Invoice dates include: Jan 15, 22 and 23 for total of \$130.00.	2			
1/30/2018	Overnight stay in Edmonton to attend ELT and AH Orientation session.	AB - Other Zones	Accommodations	\$ 166.04			Overnight stay in Edmonton to attend ELT and AH Orientation session.	1			
2/1/2018	Renewal of ABC membership for 2018, annual fee.	AB - Other Zones	Membership Dues	\$ 314.00			Renewal of ABC membership for 2018, annual fee.	1			
2/3/2018	Transportation from airport to office/office to hotel. Billing dates include:	AB - Other Zones	Taxi	\$ 180.00	Edmonton Airport	Seventh Street Plaza	Transportation from airport to office/office to hotel. Billing dates include: Jan 29, 30, 31 and Feb 1.	4			
2/8/2018	Parking overnight for trip to Edmonton to attend various meetings (AHS CEO, EDs from Communications and budget).	AB - Other Zones	Parking - Lot or Parkade	\$ 58.70			Parking overnight for trip to Edmonton to attend various meetings (AHS CEO, EDs from Communications and budget).	1			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		16-Mar-18							

M
metterra
HOTEL ON WHYTE

Line #1

Colleen Turner
[REDACTED]

Room Number: [REDACTED]
Arrival Date: 01-22-18
Departure Date: 01-23-18
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No: [REDACTED]

02-06-18

Date	Description	Charges	Credits
01-22-18	Room	155.00	
01-22-18	Destination Marketing Fee - 3%	4.65	
01-22-18	Tourism Levy - 4%	6.39	
01-23-18	F&B Mastercard		166.04
Total		166.04	166.04
Balance		0.00	

Signature: _____

I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #105631154 RT 0009

Hand Receipts C. Turner

RECEIPT
GST NO. R122556194

Line # 2

TKT NO [REDACTED]
EXIT No. A2
IN: 01/22/18 12:46
OUT: 01/23/18 17:46
DURATION: 1 05: 00
PAID: \$ 58.70
(GST INCLUDED)
MASTERCARD

[REDACTED]

KEY [REDACTED]
THANK YOU FOR
YOUR VISIT

 FlyYYC

YYC CALGARY
INTERNATIONAL
AIRPORT

*Parking @ YYC for overnight trip to
Edmonton to attend EET meeting.*

Line #3 ✓

Diamond Executive Car Service

2628 43 Street
Edmonton, Alberta
T6L 5G1

Invoice

Date	Invoice #
2018-01-29	[REDACTED]

Invoice To
Colleen Turner

PAID
2018-01-29

P.O. No.	Terms	Project

Item	Date	Name	Description	Amount
Sedan	2018-01-15	Colleen Turner	Airport to Office	60.00
			Total	\$60.00
Phone #	E-mail	Web Site	Balance Due \$0.00	
(780) 914 4002	heera@shaw.ca	www.diamond-limo.com		

Invoice #3 ✓

Diamond Executive Car Service

2628 43 Street
Edmonton, Alberta
T6L 5G1

Invoice

Date	Invoice #
2018-01-29	██████████

Invoice To
Colleen Turner

PAID
2018-01-29

P.O. No.	Terms	Project

Item	Date	Name	Description	Amount
Sedan	2018-01-22	Colleen Turner	Airport to Metterra	55.00
Sedan	2018-01-23	Colleen Turner	Metterra to O ffice	15.00
			Total	\$70.00
Phone #	E-mail	Web Site	Balance Due \$0.00	
(780) 914 4002	hcera@shaw.ca	www.diamond-limo.com		

Dine #4

M
metterra
HOTEL ON WHYTE

Colleen Turner
[REDACTED]

Room Number: [REDACTED]
Arrival Date: 01-29-18
Departure Date: 01-30-18
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No: [REDACTED]

02-06-18

Date	Description	Charges	Credits
01-29-18	Room	155.00	
01-29-18	Destination Marketing Fee - 3%	4.65	
01-29-18	Tourism Levy - 4%	6.39	
01-30-18	F&B Mastercard		166.04
Total		166.04	166.04
Balance		0.00	

Signature: _____

I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #105631154 RT 0009

pCard

Line #5

Payment Receipt

International Association of Business Com...
155 Montgomery Street, Suite 1210
San Francisco CA 94104

Date 1/31/2018

Payment Method Master Card
Credit Card # [REDACTED]

Bill To
Colleen Turner
[REDACTED]

Date	Description	Org. Amount	Amount Due	Discount	Applied Amount
1/31/2018	Invoice # [REDACTED]	314.00	314.00		314.00
				Total	CAD314.00

Dine #6

Diamond Executive Car Service

2628 43 Street
Edmonton, Alberta
T6L 5G1

Invoice

Date	Invoice #
2018-01-31	██████████

Invoice To
Colleen Turner

PAID
2018-02-03

P.O. No.	Terms	Project

Item	Date	Name	Description	Amount
Sedan	2018-01-29	Colleen Turner	Airport to Metterra	55.00
Sedan	2018-01-30	Colleen Turner	Metterra to Airport	55.00
			Total	\$110.00
Phone #	E-mail	Web Site	Balance Due \$0.00	
(780) 914 4002	heera@shaw.ca	www.diamond-limo.com		

Dine#6

Diamond Executive Car Service

2628 43 Street
Edmonton, Alberta
T6L 5G1

Invoice

Date	Invoice #
2018-01-31	██████

Invoice To
Colleen Turner

PAID
2018-02-03

P.O. No.	Terms	Project

Item	Date	Name	Description	Amount
Sedan	2018-01-31	Colleen Turner	Airport to Metterra	55.00
Sedan	2018-02-01	Colleen Turner	Metterra to Office	15.00
			Total	\$70.00
Phone #	E-mail	Web Site	Balance Due \$0.00	
(780) 914 4002	heera@shaw.ca	www.diamond-limo.com		

GST/HST No.

882127012



Missing Receipt Attestation

Date of Expense: 2/8/2018

Vendor Name: Calgary International Airport

Vendor Address: 2000 Airport Road, Calgary

Expense Amount: \$58.70

Expense Details: Parking overnight for trip to Edmonton to attend various meetings (AHS CEO, Exec. Directors from Communications and budget).

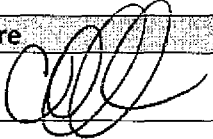
Circumstances as to why the receipt is missing:

Lost in transit.

I confirm that I have taken reasonable steps to obtain a copy of the original receipt.

I attest that this expense was incurred and relates to AHS business

I attest that this expense has not been claimed previously

Claimant Name	
Colleen Turner	
Position / Title	Site / Location
VP, Community Engagement & Communications	Calgary, Southport
Signature	Date
	2/26/2018

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
TURNER, COLLEEN	VP Community Engagement & Communications	Calgary	\$ 437.54								
1/31/2018	To YYC for overnight stay in Edmonton to attend AHS board meeting.		Mileage-Local-Home Zone	\$ 16.67	Home	Calgary International Airport	To YYC for overnight stay in Edmonton to attend AHS board meeting.	1			33
2/1/2018	To home from YYC following overnight stay in Edmonton to attend AHS board meeting.		Mileage-Local-Home Zone	\$ 16.67	Calgary International Airport	Home	To home from YYC following overnight stay in Edmonton to attend AHS board meeting.	1			33
2/1/2018	Breakfast prior to AHS board meeting while in Edmonton.	AB - Other Zones	Meals Per Diem	\$ 10.50			Breakfast prior to AHS board meeting while in Edmonton. Bfast \$10.50	1			
2/7/2018	To YYC for overnight stay in Edmonton to attend various meetings with AHS CEO, Exec. Directors from Comms and budget).		Mileage-Local-Home Zone	\$ 16.67	Home	Calgary International Airport	To YYC for overnight stay in Edmonton to attend various meetings with AHS CEO, Exec. Directors from Comms and budget).	1			33
2/7/2018	Dinner, 3:25pm flight to Edmonton for overnight stay to attend various meetings (Comms Staff and budget).	AB - Other Zones	Meals Per Diem	\$ 24.00			Dinner, 3:25pm flight to Edmonton for overnight stay to attend various meetings (Comms Staff and budget). Dinner \$24.00	1			
2/8/2018	Return trip to Foothills Medical Centre to attend Council of Chairs meeting via telehealth.		Mileage-Local-Home Zone	\$ 16.56	Home	Foothills Medical Centre	Return trip to Foothills Medical Centre to attend Council of Chairs meeting via telehealth.	1			32.8
2/8/2018	To home from YYC following overnight stay in Edmonton to attend various meetings (AHS CEO, EDs from Comms and budget).		Mileage-Local-Home Zone	\$ 16.67	Calgary International Airport	Home	To home from YYC following overnight stay in Edmonton to attend various meetings (AHS CEO, EDs from Comms and budget).	1			33
2/13/2018	Travel to Chinook Regional Hospital for 10:00 meeting with Zone Officer Katherine Chubbs.		Mileage-Local-Home Zone	\$ 217.96	Home	Chinook Regional Hospital, Lethbridge	Travel to and from Chinook Regional Hospital in Lethbridge for 10:00 meeting with Zone Officer Katherine Chubbs.	1			431.6

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
TURNER, COLLEEN	VP Community Engagement & Communications	Calgary	\$ 437.54									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
2/13/2018	Return drive to Chinook Regional Hospital at 7:00am for meeting at 10:00.	AB - Other Zones	Meals Per Diem	\$ 23.50			Depart for drive to Chinook Regional Hospital at 7:00am for meeting at 10:00. Lunch for return drive back to Calgary. Bfast \$10.50 Lunch \$13.00	1				
2/20/2018	To YYC for overnight stay in Edmonton to attend ELT and Foundation meetings.		Mileage-Local-Home Zone	\$ 16.67	Home	Calgary International Airport	To YYC for overnight stay in Edmonton to attend ELT and Foundation meetings.	1			33	
2/20/2018	Feb 20, 7:15am flight to Edmonton to attend ELT. Breakfast \$10.50 and dinner \$24.00.	AB - Other Zones	Meals Per Diem	\$ 34.50			Feb 20, 7:15am flight to Edmonton to attend ELT. Bfast \$10.50 Dinner \$24.00	1				
2/21/2018	Feb 21, Breakfast \$10.50 prior to ELT mtg.	AB - Other Zones	Meals Per Diem	\$ 10.50			Breakfast \$10.50	1				
2/21/2018	To home from overnight stay in Edmonton to attend ELT and Foundation meetings.		Mileage-Local-Home Zone	\$ 16.67	Calgary International Airport	Home	To home from overnight stay in Edmonton to attend ELT and Foundation meetings.	1			33	
Approver(s) for the claim		Approval Status		Approval Date								
YIU, VERNA		Approve		16-Mar-18								

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**

Name : Colleen Turner	Reporting Period for the Month of : Feb-18
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
5-Feb-2018	Direct Billing	Airline Ticket	Air travel was cancelled due to bad weather in Calgary.	Marlin Travel	492.26
7-Feb-2018	Direct Billing	Airline Ticket	Return trip to Edmonton for various staff and budget meetings.	Marlin Travel	485.61
13-Feb-2018	Direct Billing	Airline Ticket	Air travel needed to be revised due to an alternate meeting which required in-person attendance.	Marlin Travel	410.96
20-Feb-2018	Direct Billing	Airline Ticket	Return trip to Edmonton for ELT and Foundation meetings.	Marlin Travel	157.25
	Direct Billing				
Total Paid in the Month					\$ 1,546.08

Feb 5
 *Cancelled trip due
 to weather.



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 30 Jan 18 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED]
--	---

PASSENGERS: COLLEEN TURNER

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket: [REDACTED]	417.30	0.00	\$0.00	74.96	0.00	492.26 CAD
Total:	417.30	0.00	0.00	74.96	0.00	492.26 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	01/30/2018		[REDACTED]	492.26 CAD
Total Payment:					492.26 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
 REASON FOR TRAVEL AB CANCER FOUNDATION 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]

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
COLLEEN TURNER	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



Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08130	CALGARY INTL 05 Feb 18 7:15AM		EDMONTON INTL 05 Feb 18 8:13AM	W/	
AIR CANADA	08153	EDMONTON INTL 05 Feb 18 4:45PM		CALGARY INTL 05 Feb 18 5:39PM	W/	

Feb 7



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 30 Jan 18 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED]
--	--

PASSENGERS: COLLEEN TURNER

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket: [REDACTED]	410.65	0.00	\$0.00	74.96	0.00	485.61 CAD
Total:	410.65	0.00	0.00	74.96	0.00	485.61 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	01/30/2018		[REDACTED]	485.61 CAD
Total Payment:					485.61 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL MAZ EVENT

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. *****PLEASE NOTE CHECKIN TIMES*****

**DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

GOVERNMENT CENTRE
 MAIN FLOOR, 9929- 108TH ST, EDMONTON, AB T5K1G8
 TEL : 780 425 8611

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

Trip #: [REDACTED]
Booking Date: 30 Jan 18
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

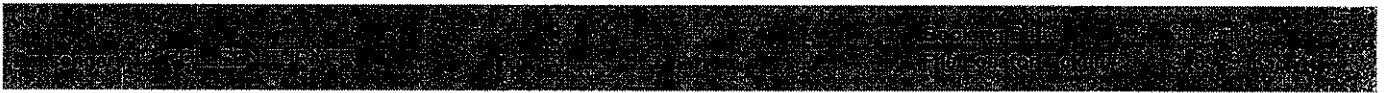
MY ITINERARY

Passengers	Citizenship	Required Travel Documents
COLLEEN TURNER	Not Specified	Not Specified

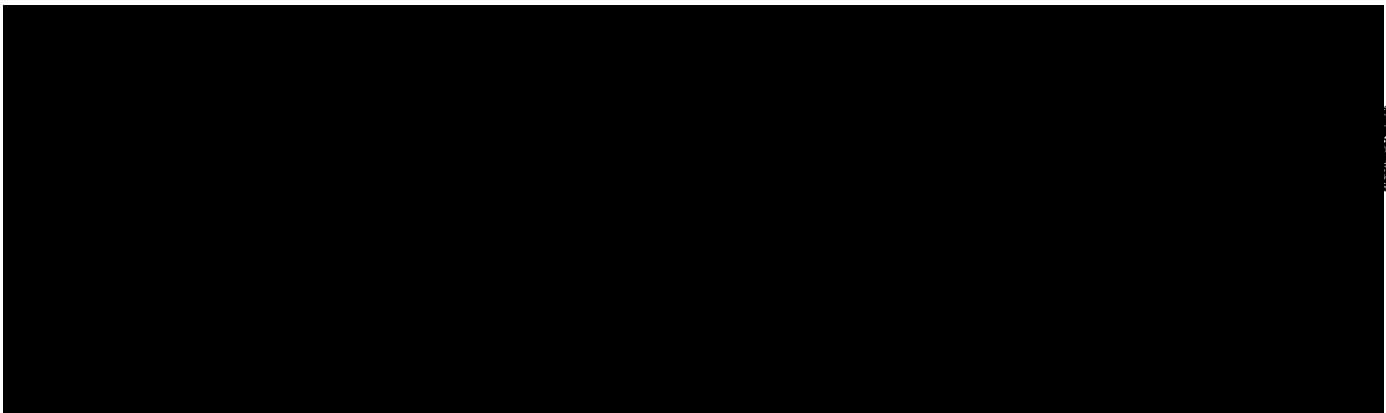
All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



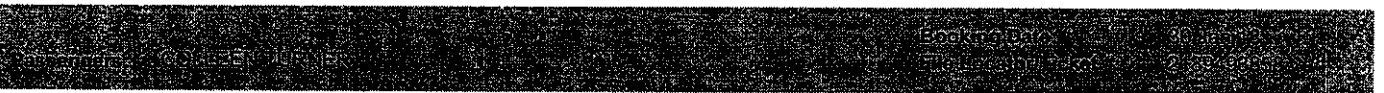
AIR



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



AIR



Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08153	EDMONTON INTL 08 Feb 18 4:45PM		CALGARY INTL 08 Feb 18 5:39PM	V/	

Flight cancelled - use credit

Feb 13



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 30 Jan 18 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED]
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PASSENGERS: COLLEEN TURNER

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
Total:	336.00	0.00	0.00	74.96	0.00	410.96 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	01/30/2018		[REDACTED]	410.96 CAD
Total Payment:					410.96 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101

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. *****PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS—CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

GOVERNMENT CENTRE
MAIN FLOOR, 9929- 108TH ST, EDMONTON, AB T5K1G8
Tel.: 780 425 8611

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

Trip #: [REDACTED]
Booking Date: 30 Jan 18
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
COLLEEN TURNER	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

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08130	CALGARY INTL 13 Feb 18 7:15AM		EDMONTON INTL 13 Feb 18 8:13AM	T/	
AIR CANADA	08149	EDMONTON INTL 13 Feb 18 3:25PM		CALGARY INTL 13 Feb 18 4:19PM	S/	

Vision

A DIRECT TRAVEL® COMPANY

Invoice

ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 15 Feb 18 Client: [REDACTED] Agent: [REDACTED] File Locator:
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PASSENGERS: COLLEEN TURNER

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	82.25	0.00	\$0.00	0.00	0.00	82.25 CAD
AIR CANADA Ticket # [REDACTED]	75.00	0.00	\$0.00	0.00	0.00	75.00 CAD
Total:	157.25	0.00	0.00	0.00	0.00	157.25 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	02/15/2018		[REDACTED]	82.25 CAD
		02/15/2018			75.00 CAD
				Total Payment:	157.25 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

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

Trip #: [REDACTED]
Booking Date: 15 Feb 18
Client: [REDACTED]
Agent: [REDACTED]

File Locator:

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
COLLEEN TURNER	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:	COLLEEN TURNER	Booking Date:	15 Feb 18
		File Locator/Ticket #:	[REDACTED]
From:	CALGARY INTL	Departing on:	20 Feb 18
To:		Returning on:	21 Feb 18



AIR

Passengers:	COLLEEN TURNER	Booking Date:	15 Feb 18
		File Locator/Ticket #:	[REDACTED]
From:	CALGARY INTL	Departing on:	20 Feb 18
To:		Returning on:	21 Feb 18