

AHS Board and Executive Expense Report

Name Glenda Yeates
Title AHS Board Member
Location Edmonton

Expenses submitted during the month of December 2016

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)
Dec-16	Expense Claim	Meetings		59	424	139	622			
Dec-16	Direct Billing	Meetings	931				931			
Total			\$ 931	\$ 59	\$ 424	\$ 139	\$ 1,553	\$ -	\$ -	\$ -

Total for the Month \$ 1,553

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 189
 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.

Employee # [REDACTED]

AHS - AP Processing - Internal Use Only	
Voucher #	
Naming Convention:	
T4A/NR Applicable? - If yes, indicate line & amt	

BOARD MEMBER EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION			
Name:	Glenda Yeates	Expense Period Month:	Oct & Dec 2016
Address:	[REDACTED]	City:	[REDACTED]
Province:	[REDACTED]	Postal Code:	[REDACTED]
Country:	Canada		
Reason for Expense	Return from attending Board Committee Meetings in Calgary - September 28-30, 2016. Attendance at Finance Committee Meeting on December 7th and Board Meetings on December 8, 2016 in Edmonton.		

SECTION 2: FINANCE CODING & TOTAL CLAIM					
Description	Corp/BU/Org	Location (If applicable)	Functional Centre/Primary	Expense/Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	101	0005	71110300000	45000000	\$58.50 ✓
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$563.42 ✓
Other (D)	101	0005	71110300000	41090000	\$0.00
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$621.92 ✓ <i>DT</i>

SECTION 3: AUTHORIZATION			
I attest that I have read and understand all applicable policies that pertain to these expenses, 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 Board 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 below.			
Claimant (Print Name)	Signature: I, by signing this form, attest that I am compliant to all the above statements	Date	Phone#
Glenda Yeates	<i>See att. email for approval</i>	Dec 23/16	[REDACTED]

I attest that I have read and understand all applicable policies of that pertain to these expenses, 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 Board 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 below.	
Approved by (Print Name)	Position Title/Program Group
Linda Hughes	Board Chair
Signature: I, by signing this form, attest that I am compliant with all the above statements	Date
<i>Linda Hughes</i>	Jan 5/17

Health and Personal information on this form is collected by AHS under the authority of section 20(b) of the I of Privacy (FOIP) Act, respectively, for the purpose

Deborah Rhodes
 Deborah Rhodes, VP Corporate Services & CFO
 Position #: [REDACTED] DOFA Level: [REDACTED] Date: *Jan 4, 2017*

For payment please
 14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: Jennifer Hamstra

Carry forward from Section 1

Name:	Glenda Yeates	Expense Period Month:	Oct & Dec 2016
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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 below

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal Allowance				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)		
			Within Canada		Outside Canada							
			Meal Type	Allowance	Meal Type	Allowance						
① 2-Oct-16	Taxi from Ottawa Airport to residence (attended Board Committee Meetings September 28-30, 2016 in Calgary).	Yes					\$34.72	✓				
② 6-Dec-16	Taxi to Ottawa Airport to attend Finance Committee and Board Meetings in Edmonton.	Yes					\$37.82	✓				
③ 6-Dec-16	Taxi from YEG to hotel.	Yes					\$63.25	✓				
④ 6-Dec-16	2 nights accommodation to attend Board Committee meetings.	Yes	D-\$24.00	\$24.00	✓		\$424.38	✓				
7-Dec-16	Breakfast per diem.	Yes	B-\$10.50	\$10.50	✓							
⑤ 8-Dec-16	ETS Fare from hotel to SSP to attend meetings.	Yes	D-\$24.00	\$24.00	✓		\$3.25	✓				
Total: (amount auto fills to page 1)			\$58.50	✓	\$0.00		\$424.38	✓	\$139.04	✓	\$0.00	0.00

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$ -
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For payment please submit to:

14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: Jennifer Hamstra

BLUE LINE TAXI
(613) 238-1111

Merchant ID: [REDACTED]
Driver ID: 5 [REDACTED]
Record Num.: [REDACTED]

Sale

Application Label: Visa Credit

ATD: [REDACTED]

VISA

Entry Method: Chip

Amount: \$ 30.39

Tip: \$ 4.33

Total: CAD\$ 34.72

2016/10/02 02:45:40

Resp Code: 00

Inv# [REDACTED]

Appr Code [REDACTED]

Approved: Online

Batch# [REDACTED]

Trn Ref #: [REDACTED]

Validation Code: [REDACTED]

BLUE LINE TAXI
(613) 238-1111

ORIGINAL ID:
PASSENGER ID:
VEHICLE ID:
PRINTER ID:

TRIP NUMBER:
PASSENGERS:

12/06/2016
START: 17:34

END: 17:35

TOTAL AMOUNT:

\$ 32.89

TIP AMOUNT:

\$ 4.93

TOTAL: \$ 37.82

NET SALE:

APPROVAL NUMBER:

PASSENGER COPY

CUSTOMER SERVICE 1-800-443-2812
INQUIRY@TAXITAB.COM
TAXITAB



CUSTOMER SERVICE 1-800-443-2812
INQUIRY@TAXITAB.COM

AIRPORT TAXI SERVICE
4608 101 ST.
(7808907070)
EDMONTON AB

CARD [REDACTED]

CARD TYPE

VISA

DATE

2016/12/06

TIME

0086 21:02:25

INVOICE # [REDACTED]

RECEIPT NUMBER [REDACTED]

PURCHASE

AMOUNT

\$55.00

TIP

\$8.25

TOTAL

\$63.25

Visa Credit

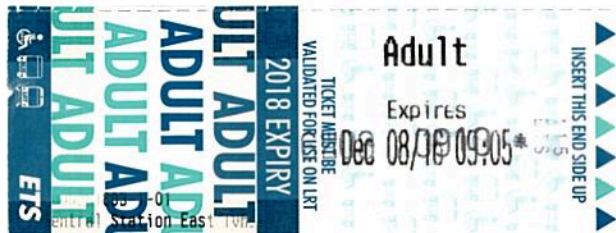
APPROVED

AUTH# [REDACTED]

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS



\$3.25

1

2

3

5

4

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

Glenda Yeates
Alberta Health Services Ii

Page Number : 1 Invoice Nbr: [REDACTED]
Guest Number: [REDACTED] Arrive Date: 06-DEC-16 21:09
Folio ID : A Depart Date: 08-DEC-16 07:07
No. Of Guest: 1
Room Number : [REDACTED]
Room Rate : 189.00
Club Account: [REDACTED]

Email: [REDACTED]

Tax Invoice

Tax ID: 815461330RT0001
The Westin Edmonton 08-DEC-16 07:07 [REDACTED]

Date	Reference	Description	Charges	Credits
06-DEC-16	[REDACTED]	Room Charge	189.00	
06-DEC-16	[REDACTED]	GST	9.73	
06-DEC-16	[REDACTED]	Destination Marketing Fee	5.67	
06-DEC-16	[REDACTED]	Tourism Levy	7.79	
07-DEC-16	[REDACTED]	Room Charge	189.00	
07-DEC-16	[REDACTED]	GST	9.73	
07-DEC-16	[REDACTED]	Destination Marketing Fee	5.67	
07-DEC-16	[REDACTED]	Tourism Levy	7.79	
08-DEC-16	[REDACTED]	Visa [REDACTED]		-424.38
		** Total	424.38	-424.38
		*** Balance	0.00	



FIND CLARITY, BOOST HAPPINESS - Like a gym membership for your mind,
Headspace gives you simple tools to feel happier, work smarter and sleep
Continued on the next page

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

Glenda Yeates
Alberta Health Services Ii

Page Number : 2 Invoice Nbr: [REDACTED]
Guest Number: [REDACTED] Arrive Date: 06-DEC-16 21:09
Folio ID : A Depart Date: 08-DEC-16 07:07
No. Of Guest: 1
Room Number : [REDACTED]
Room Rate : 189.00
Club Account: [REDACTED]

Email: [REDACTED]

As a Starwood Preferred Guest you have earned at least [REDACTED] Starpoints for
this visit [REDACTED]
Tell us about your stay. www.westin.com/reviews

EXPENSE SUMMARY REPORT

Date	Tour Levy	Other	Phone	Room	Payment	GST
Total						

Date	Total	Food\Bev
Total		

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 : Glenda Yeates	Reporting Period for the Month of : Dec-16
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
6-Dec-2016	Direct Billing	Airline Ticket	Flight from Ottawa to Edmonton, then return to Ottawa on December 8th; (Invoice # [REDACTED] to attend Board Meetings on December 7-8, 2016.	Marlin Travel	930.94
Total Paid in the Month					\$ 930.94



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 28 Nov 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: TIFFANY ASKE File Locator: [REDACTED]
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PASSENGERS: MS GLENDA YEATES

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	812.65	0.00	\$0.00	71.96	0.00	884.61 CAD
PRE PAID SEATS CAD Confirmation # [REDACTED]	23.73	0.00	\$0.00	0.00	0.00	23.73 CAD
AIR CANADA Ticket # [REDACTED]	22.60	0.00	\$0.00	0.00	0.00	22.60 CAD
Total:	858.98	0.00	0.00	71.96	0.00	930.94 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/28/2016		[REDACTED]	884.61 CAD
		11/28/2016			23.73 CAD
		11/28/2016			22.60 CAD
		Total Payment:			930.94 CAD

Balance Due CAD Currency 0.00 CAD

CORPORATE UNIT 101
REASON FOR TRAVEL AHS BOARD 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

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

Trip #: [REDACTED]
Booking Date: 28 Nov 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: TIFFANY ASKE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
GLENDAYEATES	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: GLENDAYEATES

Booking Date: 28 Nov 16
File Locator/Ticket #: [REDACTED]

From: OTTAWA INTL
To: EDMONTON INTL
Departing on: 06 Dec 16
Returning on: 08 Dec 16



AIR

Passengers: GLENDAYEATES

Booking Date: 28 Nov 16
File Locator/Ticket #: [REDACTED]

From: OTTAWA INTL
To: EDMONTON INTL
Departing on: 06 Dec 16
Returning on: 08 Dec 16



AIR

Passengers: GLENDAYEATES

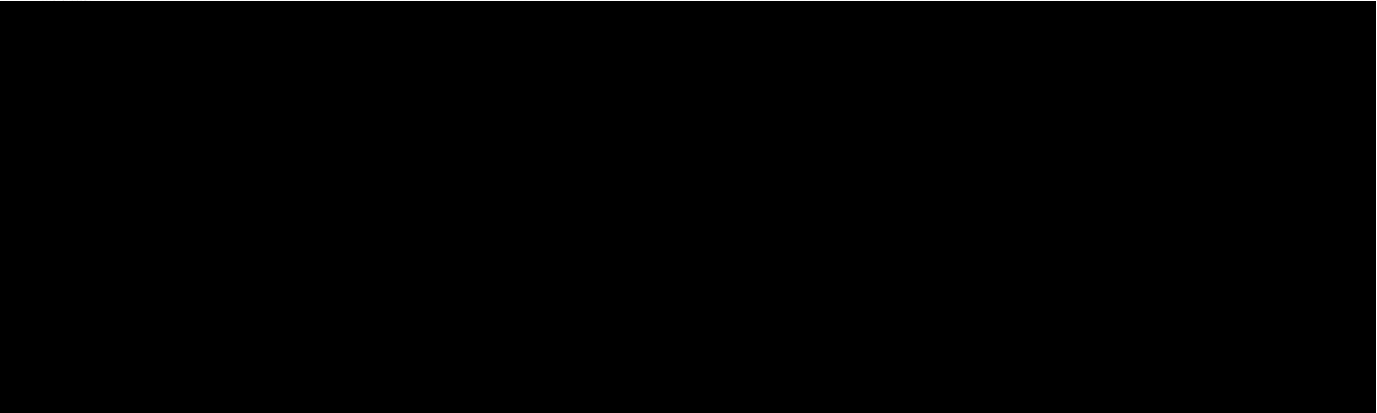
Booking Date: 28 Nov 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	00171	OTTAWA INTL 06 Dec 16 6:30PM		EDMONTON INTL 06 Dec 16 9:10PM	W/	

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

Trip #: [REDACTED]
Booking Date: 28 NOV 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: TIFFANY ASKE

File Locator: [REDACTED]



AIR

Passengers:		GLEENDA YEATES		Booking Date:	28 Nov 16	
				File Locator/Ticket #:	[REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	00178	EDMONTON INTL		TORONTO PEARSON	G/	
		08 Dec 16 3:55PM		08 Dec 16 9:35PM		
AIR CANADA	00470	TORONTO PEARSON		OTTAWA INTL	G/	
		08 Dec 16 10:30PM		08 Dec 16 11:36PM		