

AHS Board and Executive Expense Report

Name Glenda Yeates
Title AHS Board Member
Location Edmonton

Expenses submitted during the month of December 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)
Dec-18	P-Card	Meetings				66	66			
Dec-18	Expense Claim	Meetings		30	201	110	341			
Dec-18	Direct Billing	Meetings	292				292			
Total			\$ 292	\$ 30	\$ 201	\$ 176	\$ 699	\$ -	\$ -	\$ -

Total for the Month \$ 699

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 179
 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
Glenda Yeates	AHS Board Member	Edmonton	\$ 66.00

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
12/12/2018	Taxi SSP to YEG - Attended Private Board meeting in Edmonton on December 12, 2018		Taxi	\$ 66.00			Items charged to Executive Assistant's January 2019 P-Card on behalf of Glenda Yeates.	1			

Approver(s) for the claim	Approval Status	Approval Date
Signature kept on file	Approve	

ATS GROUP
4608 101 ST NW
7809897099
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2018/12/19
TIME 5378 10:04:00
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
TOTAL

\$721.00

MasterCard
[REDACTED]

From DR VERNA
① To Nov-1- Resi to EIA = \$65
② Time Nov-2- EIA to Resi = \$65
③ Date Nov-7- Resi to EIA = \$65
④ Trip Amount Nov-8- EIA to Resi = \$65
⑤ Driver Name Nov-13- EIA to Resi = \$65
⑥ Car Number Nov-21- SSP to EIA \$66
⑦ GST Nov-22- SSP to EIA = 66 - David & Glenda
⑧ Nov-22- EIA to SSP = \$66

From _____
To ⑨ - Nov-28- David Carpenter = SSP to EIA = 66
Time _____
Date Total = \$ 589
Trip Amount ⑩ Dec-12- Glenda Yeates-SSP to EIA = 66
Driver Name ⑪ Dec-12- David Carpenter = SSP to EIA = \$66
Car Number _____
GST Total = \$ 589 + 132 = \$ 721

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:	Dec-18
Address:	[REDACTED]	City:	[REDACTED]		
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Attended Private Board Meeting in Edmonton on December 12, 2018.				

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	\$29.95 ✓
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$310.93 ✓
Other (D)	101	0005	71110300000	41090000	\$0.00
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$340.88 ✓/pb

SECTION 3: AUTHORIZATION			
I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.			
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 attached email for approval.</i>	Jan 10, 2019	[REDACTED]

I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.	
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>[Signature]</i>	Jan. 16, 2019

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

Deborah Rhodes Jan. 14/19
Deborah Rhodes, VP Corporate Services & CFO
Position #: [REDACTED] DOFA Level [REDACTED]

For payment please submit to:

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:	Dec-18
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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

The Board Members follow the Government of Alberta (GOA) Travel, Meal and Hospitality Expenses Policy

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates (Appendix C for USA, Appendix D for International).

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt)(A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)	
			Allowance Within Canada		With Receipt or Allowance Outside Canada						
			Meal Type	Allowance	Meal Type	Amount					
11-Dec-2018	Taxi from residence to Ottawa Airport to attend Private Board Meeting on December 12, 2018 in Edmonton.	Yes					\$36.72 ✓				
11-Dec-2018	Taxi from YEG to hotel.	Yes					\$63.25 ✓				
11-Dec-2018	1 night accommodation to attend Private Board Meeting on December 12, 2018.	Yes	D-\$20.75	\$20.75	✓	\$200.96	✓				
12-Dec-2018	Breakfast per diem.	Yes	B-\$9.20	\$9.20	✓						
12-Dec-2018	Taxi from hotel to SSP.	Yes					\$10.00 ✓				
Total: (amount auto fills to page 1)			\$29.95	✓	\$0.00	\$200.96	✓	\$109.97	✓	\$0.00	0.00

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$ -
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BLUE LINE TAXI
(613) 238 - 1111

MINA ID:
CHART ID:
TOLL ID:
VEN ID:



PAGE:
SLIP:

1
0 END: 1

AMOUNT: \$ 3.

AMOUNT: \$

TOTAL : \$ **36.72** ✓

SALE :

CVL NUMBER :

PASSENGER COPY*

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



**GREATER EDMONTON TAXI
SERVICE**
10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]

CARD TYPE VISA

DATE 2018/12/11

TIME 1660 19:56:29

INVOICE # [REDACTED]

RECEIPT NUMBER [REDACTED]

[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

CAPITAL 780.423.2425

24.7 TAXI 780.442.4444

EDMTAXI.COM

GST 100403070

YELLOW CAB 780.462.3456
call or text your address to book your cab

GST# 8T1176011

Date: Dec. 12/2018 Amount: \$10.00 ✓

Driver: Catnet Car#: 399

From: KLESTIN

To: 10030-107ST

10135-31 Avenue, Edmonton, AB T6N 1C2



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

WESTIN®

HOTELS & RESORTS

MS GLENDA YEATES

Page Number : 1 Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 11-DEC-18 20:00
 Depart Date : 12-DEC-18 08:02
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Copy Invoice

Tax ID : 815461330RT0001
 The Westin Edm YEGWI JAN-08-2019 11:30 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
11-DEC-18	[REDACTED]	Room Chrg - Special Corp	179.00	
11-DEC-18	[REDACTED]	GST	9.22	
11-DEC-18	[REDACTED]	Tax Other	5.37	
11-DEC-18	[REDACTED]	Occupancy/Tourism Tax	7.37	
<hr/>				
12-DEC-18	[REDACTED]	Visa-		-224.96
** Total			224.96	-224.96
*** Balance			0.00	

KIDS EAT WELL AT WESTIN - Discover kids' meals that are as delicious as they are nutritious with the Westin Eat Well Menu for Kids, developed with Superchefs(TM) to make kids and parents happy. Learn more at westin.com/eatwell

Continued on the next page

224.96
 - 24.00 Restaurant charge
 applying per diem
 \$200.96 ✓

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-18
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
11-Dec-18	Direct Billing	Airline Ticket	Flight from Ottawa to Edmonton to attend the Private Board Meeting on December 12, 2018 (return flight to Ottawa will be January 14, 2019).	Vision Travel	\$292.22
[REDACTED]					
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	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					\$ [REDACTED]

\$292.22

From: [REDACTED]@visiontravel.ca>
Sent: Friday, December 21, 2018 3:47 PM
To: [REDACTED]
Subject: Invoice and Itinerary for YEATES/GLENDA MS - 11December18 - Vision Travel Locator: [REDACTED]



Vision Travel DT Ontario-West Inc
9929 - 108 St.
Edmonton, AB
T5K 1G8
(780) 425-8611 1-866-425-8611

www.visiontravel.ca
GST Reg : 723782728 RT 0001

Invoice/Itinerary

Invoice: [REDACTED] Agency Ref. [REDACTED] Customer Number: [REDACTED]
Issued: 06 October 2018 Sales Person [REDACTED] Customer Ref.: [REDACTED]

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

Passenger(s): YEATES/GLENDA MS

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

AIR - Tuesday, December 11 2018 (Flown) [Add To Calendar](#)

Air Canada Flight AC455 Economy Class

Depart	Ottawa, Ontario Weather	Arrive	Toronto, Ontario Weather
	Ottawa International Airport		Pearson International Airport
	02:00 PM Tuesday, December 11 2018		03:18 PM Tuesday, December 11 2018

Duration: 1 hour(s) and 18 minute(s) Non-stop
Status: Confirmed - Air Canada Booking Reference: [REDACTED]
FF Number: [REDACTED] YEATES/GLENDA MS - please reconfirm at check-in
Online Check In: Available 24 hours prior - [click here](#)
E Upgrade: For Eligible Flight - Aeroplan Members [click here](#)

Remarks: SEAT 13C - YEATES/GLENDA MS
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
ARR TERMINAL 1
PLEASE CHECK IN WITH AIR CANADA

AIR - Tuesday, December 11 2018 (Flown)[Add To Calendar](#)**Air Canada Flight AC171 Economy Class**

Depart Toronto, Ontario [Weather](#) **Arrive** Edmonton, Alberta [Weather](#)
 Pearson International Airport Edmonton International Airport
 04:20 PM Tuesday, December 11 2018 06:41 PM Tuesday, December 11 2018

Duration: 4 hour(s) and 21 minute(s) Non-stop
Status: Confirmed - Air Canada Booking Reference [REDACTED]
FF Number: [REDACTED] YEATES/GLENDA MS - please reconfirm at check-in
Online Check In: Available 24 hours prior - [click here](#)
E Upgrade: For Eligible Flight - Aeroplan Members [click here](#)

Remarks: SEAT 13C - YEATES/GLENDA MS
 AIR CANADA CONFIRMATION [REDACTED]
 TICKET NUMBER [REDACTED]
 DEP TERMINAL1
 PLEASE CHECK IN WITH AIR CANADA

HOTEL - Tuesday, December 11 2018[Add To Calendar](#)**The Westin Edmonton - [Map/Driving directions](#)**

Address 10135 100th Street Tel +1 (780) 426-3636
 Edmonton, AB T5J 0N7 Fax +1 (780) 428-1454

Check In/Check Out: Tuesday, December 11 2018 - Wednesday, December 12 2018
Status: Confirmed - Confirmation [REDACTED]
Est. Total Rate: CAD 200.48
Number of Rooms: 1
Cancellation Policy: CXL AFTR 09 DEC 2018 TM 16:00 PENALTY : 179.00
Additional Information: CC TO HOLD ONLY
Remarks: WI21ARR11DEC CXL:CXL AFTR 09 DEC 2018 TM 16:00 PENALTY : 179.00

Invoice Details

Transaction	Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Invoice Number	[REDACTED]					
Domestic Air	[REDACTED]	258.10	34.12	0.00	0.00	292.22
	Totals:	258.10	34.12	0.00	0.00	292.22
					Balance Due:	0.00