

AHS Board and Executive Expense Report

Name Gregory Cummings

Title Chief Zone Officer, North Zone

Location Westlock

Expenses submitted during the month of June 2018

							Trav	/el (1)							
	Source								Ot	her	Tot	al	Professional Development	Working Sessions Hosting and Hospitality	Other
MMM-YY	Document	Purpose	Airfa	are	Me	eals	Accom	modation	Tra	avel	Trav	vel	(2)	(3)	(4)
Jun-18 Jun-18 Jun-18	P-Card Expense Claim Direct Billing	Meetings Meetings Meetings		606		117		385		151		536 117 606			
Total			\$	606	\$	117	\$	385	\$	151	\$ 1	,259	\$ -	- \$ -	\$ -

Total for

the Month \$ 1,259

Maximum daily single meal expense claimed in the month \$ 24 Maximum daily base hotel rate claimed in the month \$ 139 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	Claimant Title	Claimant	Expense									
Name		Location	Claim Total									
CUMMINGS,	Chief Zone Officer, North Zone	Westlock	\$ 536.23									
GREGORY					1			1		•	1	
Expense Date	Business reason		Expense	Expense Type	Amount	From	То	Justification	# of	_	Attendee	Trip
			Location			Location	Location		days	Attendees	Name(s)	Distance
5/29/2018	Travel to Ottawa for CNRHN Exec		AB - Other	Accommodations	\$ 116.63			Travel to Ottawa for CNRHN Exec	1			
	Committee		Zones					Committee				
6/5/2018	Meeting with Deb Gordon in Edm	onton	AB - Other	Parking - Lot or	\$ 35.00			Meeting with Deb Gordon in Edmonton	1			
			Zones	Parkade								
6/6/2018	6/6/2018 Executive Education in Calgary		AB - Other	Car Rental	\$ 76.47			Executive Education in Calgary	1			
			Zones									
6/6/2018	Attend Executive Education in Ca	lgary	AB - Other	Parking - Lot or	\$ 14.70			Parking at U of C while attending the	1			
			Zones	Parkade				Executive Education Presentations.				
6/6/2018	Attend Executive Education in Ca	lgary	AB - Other	Parking - Lot or	\$ 25.00			Attend Executive Education in Calgary	1			
			Zones	Parkade								
6/6/2018	Attend Executive Education Prese	entations in	AB - Other	Accommodations	\$ 154.54	†		Attend Executive Education	1			
' '	Calgary		Zones					Presentations in Calgary				
6/8/2018	North Zone PCN Committee Mee	ting	AB - Other	Accommodations	\$ 113.89			North Zone PCN Committee Meeting	1			
		· ·	Zones									
Approver(s) fo	or the claim	Approval S	tatus	Approval Date		1	1		1	1	1	1
GORDON, DEB	BORAH A	Approve		10-Jul-18								





06-27-18

Folio No. Room No. : **Gregory Cummings** A/R Number Arrival 05-28-18 Departure 05-29-18 Invoice No Conf. No. Group Code Rate Code : Company Government Canada Page No. 1 of 1 Membership No.

Date	Description		Charges	Credits
05-28-18	*Accommodation		107.00	
05-28-18	GST - Room 5%		5.35	
05-28-18	Tourism Levy 4%		4.28	
05-29-18	MasterCard			116.63
your accou	for staying with us! Qualifying points for this stay will automatically be credited to nt. Please tell us about your stay by writing a review here -	Total	116.63	116.63
www.ihgrev	wardsclub.com/review. We look forward to welcoming you back soon.	Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liablity 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.



PARKING RECEIPT

RECEIPT

Rental Agreement Number Vehicle Number:

YOUR INFORMATION

CUMMINGS, GREGORY, MR

BUDGET DISC

CALGARY HEALTH REGION PAYMENT METHOD:

MASTER

YOUR RENTAL

Picked up: YYC

Date/Time: JUN 05, 2018@08:57PM

Returned: YYC

Date/Time JUN 06, 2018@02 26PM Veh Group:

Full-Size Veh Charged: Full-Size

Vehicle: HYUNDAI SONATA GL

Odometer Out: 20701 Odometer In 20743 Fuel Reading, 7/8

YOUR VEHICLE CHARGES

MINIMUM CHARGE 44.00 YOUR TIME AND MILEAGE: 44.00

YOUR TAXABLE FEES

y man that the	
GST TAX **15 61% FEE FTP SR\$ 0 75DY* CFC VEH LIC FEE	3.61 9.03 .75 6.00 2.29
YOUR SUBTOTAL TAXABLE SUBTOT PST . COO%	62.07 .00
YOUR NON TAXABLE ITEMS FUEL SERVICE	10.79

TOTAL CHARGES 76.47 **NET CHARGES** CAD 76.47 YOUR TOTAL DUE: 0.00

PAID ON MASTER **CONCESSION RECOVERY FEE *FTP SUR \$ 5.25 MAX

THANK YOU FOR RENTING WITH BUDGET

GST NO 104285754rt0001

For inquiries or e-receipt visit WWW.BUDGET.COM



G:T# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton Tax Code CA5%

Exit Lane 06/06/18 16:44 Receipt

Short-Term Parking Mastercard Daily Lot 05/06/18 17:49 06/06/18 16:44 Period 1d0h0' (Tax)

Payment Received

Total

\$25.00

\$25.00

\$25.00

Auth: Sub Total Ťεκ

\$23.81 \$1.19



Impark Lot 02-256



Expiration Date/Time

05, 2018

Purchase Date/Time: 12:02pm Jun 05. 2018 Total Parking: \$33.33 Total GS": \$1.67

Total Due: \$35.00 Total Paid: \$35.00 Ticket

S/N # Setting: Lot 256 Mach Name: Meter 1

MasterCard

Auth #:

PARKING RECEIPT

Rate: \$35- All Day

Payment Type: Card

gst #887315638RT0006 NO IN AND OUT PRIVILEGES

> or call 403-226-1550 The state of the s





06-06-18

Gregory Cummings Folio No. Room No. A/R Number Arrival 06-05-18 Group Code Departure : 06-06-18 Company Alberta Health Services Conf. No. Membership No. : Rate Code: Invoice No. Page No. : 1 of 1

Date	Description		Charges	Credits					
06-05-18	*Guest Room	*Guest Room							
06-05-18	CTR 2%		2.78						
06-05-18	Provincial Tourism Levy 4%	5.67							
06-05-18	GST 5%	7.09							
06-06-18	MasterCard			154.54					
your accou	for staying with us! Qualifying points for this stay will automatically be credited to nt. Please tell us about your stay by writing a review here - www.ing.com/reviews.	Total	154.54	154.54					
AAS TOOK LO	rward to welcoming you back soon.	Balance	0.00						

GST#823593942

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.







06-08-18

Gregory Cummings	Folio No.	:	Room No. :
	A/R Number	:	Arrival : 06-07-18
	Group Code	:	Departure : <u>06-08-18</u>
	Company	: Alberta Health Services	Conf. No. :
	Membership No.	o. :	Rate Code:
	Invoice No.	:	Page No. : 1 of 1
			· · · · · · · · · · · · · · · · · · ·

Date	Description		Charges	Credits
06-07-18	*Accommodation		104.49	
06-07-18	G.S.T.		5.22	
06-07-18	Tourism Levy		4.18	
06-08-18	Manual - MasterCard			113.89
your accou	for staying with us! Qualifying points for this stay will automatically be credited to nt. Please tell us about your stay by writing a review here - www.ihg.com/reviews.	Total	113.89	113.89
We look fo	rward to welcoming you back soon.	Balance	0.00	

Guest Signature:	

I have received the goods and / or services in the amount shown heron. I agree that my liablity 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.



June 29, 2018

Public Expense Disclosure Department 10th Floor, 7th Street Plaza 10030-107 Street Edmonton, AB T5J 3E4

Attention: Public Disclosure

RE: Lost Receipt: \$14.70

I hereby attest that this expense is related to my employment with AHS, as I attended the Executive Education Presentations in Calgary. The charge is for the parking expense at the University of Calgary, where event was held on June 6th, and receipt was unfortunately forgotten in the rental vehicle.

I declare that the above statement is true and accurate and I trust this information will suffice.

Sincerely,

Gregory Cummings Chief Zone Officer

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
CUMMINGS, GREGORY	Chief Zone Officer, North Zone	Westlock	\$ 117.00									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/5/2018	Executive Education in Cal	gary	AB - Other Zones	Meals Per Diem	\$ 24.00			Executive Education in Calgary Dinner \$24.00	1			
6/6/2018	Executive Education in Cal	gary	AB - Other Zones	Meals Per Diem	\$ 34.50			Executive Education in Calgary Bfast \$10.50 Dinner \$24.00	1			
6/7/2018	North Zone PCN Committee in Leduc		AB - Other Zones	Meals Per Diem	\$ 24.00			North Zone PCN Committee in Leduc Dinner \$24.00	1			
6/8/2018	North Zone PCN Committe	ee in Leduc	AB - Other Zones	Meals Per Diem	\$ 34.50			North Zone PCN Committee in Leduc Bfast \$10.50 Dinner \$24.00	1			
Approver(s) fo	or the claim	Approval Sta	tus	Approval Date				<u> </u>		ı		

28-Jun-18

Approve

GORDON, DEBORAH A



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 yo	u nave expenses to report in this section		re5		
Name :	Gregory Cummings	Reporting Period for the	Month of :	Jun-18	

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amour	nt Paid
29-May-2018	Direct Billing	Airline Ticket	June 5th Flight to Calgary for Executive Education (Air Canada Ticket	Marlin Travel		336.96
15-Jun-2018	Direct Billing	Airline Ticket	July 5th Flight to Grande Prairie for OHS Meeting with Deb Gordon. (Air Canada Ticket #	Marlin Travel		268.96
Total Paid in the	Month				\$	605.92



Invoice

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

Booking Date: 29 May 18

Client:
Agent:

Agent Phone:

Phone: 780 425 8611

File Locator:

PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION	REFERENCE/ DESCRIPTION				HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				262.00	0.00	\$0.00	74.96	0.00	336.96 CAD
			Total:	262.00	0.00	0.00	74.96	0.00	336.96 CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount
		05/25/2018							336.96 CAD
							Total Pa	ayment:	336.96 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
BOOKING METHOD NUTRAVEL
REASON FOR TRAVEL EXECUTIVE EDUCATION

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

Trip #: 29 May 18 **Booking Date:** Client: Agent:

Agent Phone:

780 425 8611

File Locator:

MY ITINERARY

Required Travel Documents Passengers Citizenship

GREGORY CUMMINGS 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

Booking Date: GREGORY CUMMINGS File Locator/Ticket #: Passengers:

25 May 18

Stops

Flight **Airline** Terminal Class/Seat AIR CANADA 08155 **EDMONTON INTL** CALGARY INTL W/

05 Jun 18 8:00PM 05 Jun 18 8:52PM





AIR

Booking Date: 25 May 18 **GREGORY CUMMINGS** File Locator/Ticket #: Passengers:

Airline Flight Terminal Class/Seat Stops

Ŵ/ AIR CANADA 08152 CALGARY INTL EDMONTON INTL

06 Jun 18 4:40PM 06 Jun 18 5:30PM



Invoice

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



PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION				FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	
AIR CANADA Ticket #				204.00	0.00	\$0.00	64.96	0.00	268.96 CAD	
			Total:	204.00	0.00	0.00	64.96	0.00	268.96 CAD	
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	Payment			Amount	
		06/15/2018							268.96 CAD	
					Total Payment:		268.96 CAD			
									0.00 0.15	

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101 BOOKING METHOD NUTRAVEL

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



MY ITINERARY

 Passengers
 Citizenship
 Required Travel Documents

 GREGORY CUMMINGS
 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:	GREGORY CUMMING	S	Booking Date: File Locator/Ticket #:	15 Jun 18		
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08367	EDMONTON INTL 05 Jul 18 8:45PM		GRANDE PRAIRIE 05 Jul 18 9:58PM	A/	
AIR CANADA	08366	GRANDE PRAIRIE 06 Jul 18 4:20PM		EDMONTON INTL 06 Jul 18 5:30PM	A/	