

Official Administrator and Executive Expense Report

Name Dr. Kathryn Todd

Title Vice President, Research Innovation & Analytics

Location Edmonton

Expenses submitted during the month of November 2014

			Travel (1)					
Source Date 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	940			24	964			262
Total	\$ 940	\$ -	\$ -	\$ 24	\$ 964	\$ -	\$ - 9	\$ 262

Total for

the Month \$ 1,226

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



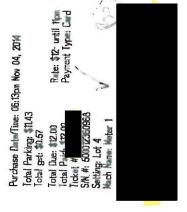
Instruction Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement Cardholder AND Approver's signatures required where indicated below TODD, KATHRYN VICE PRESIDENT Cardholder's Name Cardholder's Position/Title Billing Reporting Period: 20/11/2014 RESEARCH, INNOVATION & SEVENTH STREET PLAZA Cardholder's Dep Cardholder's Site/Location Total Statement Amount: \$1,225.68 KATHRYN.TODD@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address Lest 6 digits of the P-Card #:

Trunsection Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans	Amount	GST	Freigh Description
03/11/2014	369713823	VISTAPR*VistaPrint.ca, MISCELLANEOUS PUBLISHING AND PRINTING	* 261.93	CAD	1	261.93	12.47	.0/ Research, innovation & Analytics Team Xmar Cards
04/11/2014	389631661	MPARKU0020004U, AUTOMOBILE PARKING LOTS AND GARAGES	<i>9</i> 12.00	CAD	1	12.00	.57	.00,3 king - A. IS Me ting
14/11/2014	371288936	AR CAN 0142141382008, AIR CANADA	939.75	CAD	1	939.75	46.50	.00 CANCELLED credit on File - Fight from YEG to YOW (Ottawa) for the VPR Meeting
19/11/2014	371542352	ADV PARKINGO0000004U, AUTOMOBILE PARKING LOTS AND GARAGES	3 12.00	CAD	1	12.00	.57	.00Parking - Health Research & Innovation Collaboratory Meeting (HRIC)





RUN DATE: 12/05/2014



Proprietary and Confidential
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RUN DATE: 12/05/2014

P-Card details Online ® Cardholder Statement Report

	Signatures		
	Cardholder Designate (if Applicable) By signing this statement I hereby certify that I have reviewed and reconc Program User Guide and Training. I have alloca	illed this statement in BMO Online to the best of my ability is ted the transaction(s) to the proper cost centre.	in accordance to AHS Corporate Policies.
	NonWE ARJOLD Name of Compiler Designate	Cardholder Designete Position/Title	र्थंडाडर-
	Signature of Cardholder Designate	Date of Signature	-
	expenses being claimed are in compliance with I attest the expenses enclosed in this claim are	avel, Hospitality and Working Session Expense Policy (112) such policy. for valid business purposes for Alberta Health Services and alth Services or any other Organization. A personal cheque	d that this claim has not been previously
	charged is attached.	ve been incurred by using a cost effective method, otherwise	
	TODD, KATHRYN	VICE PRESIDENT Cardholder Position/Title	•
	x Nathur lado		
_	Signature of Carolicides	Date of Signature	
	Approver Designate (if Applicable) By signing this statement I attest that I have read and understand the "Tra expenses being claimed are in compliance with	evel, Hospitality and Working Session Expense Policy (1122 such policy.	2)* of Alberta Health Services and confirm
	claimed by the claiment or on their behalf from A charged has been obtained.	for valid business purposes for Alberta Health Services and Alberta Health Services or any other Organization. A person we been incurred by using a cost effective method, otherwise	nal chaque for personal expenses inadvertently
	Susan Best Name of Approver Designate	Approver Designate Position/Title	ant
	Signature of Approver Designate	Date of Signature	-
	Approver By signing this statement		The state of the s
		ivel, Hospitality and Working Session Expense Policy (1122 such policy.	2)* of Alberta Health Services and confirm
	claimed by the claimant or on their behalf from A charged has been obtained. I attest that expenses submitted in this claim has	for valid business purposes for Alberta Health Services and Alberta Health Services or any other Organization. A persor we been incurred by using a cost effective method, otherwise	nal cheque for personal expenses inadvertently
	Deborah Rhodes	VP Corp Service	s «CFO
	Name of Approver	Approver Position/Title	
	Robert Arcdas Signature of Approver	Dec 10 14 Date of Signature	-
	Submit approved statement with attachments to Acr	counts Psyable:	
	Attach: Original (or scanned) itemized receipts with docum where required	ented business reasons including names of participants	Address: Alberta Health Services
	 Signed Cardholder Statement Report (or copies of And where applicable: Copies of pre-approvals for travel Personal cheque payable to "Alberta Health Service" 		Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4
	 Return, refund and/or credit receipts Disputes letter 		
	 Business reasons for travel require detailed descripmeal), why travel was necessary and detailed explanation. 		
	Accounts Payable only:		
	Reference #:	Reviewed by:	Date:

From: Sent:

Vistaprint [VistaPrint-cc@vistaprint.com]
Wednesday, November 05, 2014 11:06 PM
Yvonne Arnold
vatinvoicearchive@vistaprint.com
Vistaprint Canadian Tax Invoice
VistaPrint-cc@vistaprint.com

To:

Cc: Subject: Signed By:





Add Vistaprint to your address book

My Account

Tax Invoice

Vistagrint Netherlands, B.V.

Hudsonweg 8 5928 LW Vento, The Netherlands

Tax

Bill To:

Kathiya Todd

Ship To:

Kathryn Todd

•>====================================	Description of Supplies	Quantity	Net Amount	Tax %	Shipping Costs	Total
,	Designer Collection - Chr	100	\$80.99	5%	\$3,94	\$84,93
2	Full Colour Inside Printi	100	\$0.00	5%	\$0.00	\$0.00
3	Fail - Not Selected	100	\$0.00	5%	\$0.00	\$0.00
4	Premium Glossy	100	\$0.00	5%	\$0.00	\$9.00
5	PDF Proof	001	\$0.00	5%	\$0,00	\$0.00
5	Designer Collection - Clyr	1.00	580,99	5 %	\$3.91	\$84.90
7	Full Colour Inside Printi	100	\$0.00	5%	\$0.00	\$0.00
8	Fell - Not Selected	100	\$0.00	5%	\$0.50	\$0.00

9	Premium Glossy	100	50.00	5%	\$0.00	\$0.00
10	Small Sticker - Circle	240	\$37.00	5%	\$1.48	\$38.48
11	Remove Branding	240	\$0.00	5%	\$0.00	\$0.00
12	Matt Sticker Stock	240	\$0.00	5%	\$0.00	50.00
13	White Envelopes	100	50.00	5%	\$1.22	\$1.22
					Subtotal	\$209.53
					5.00% GST	\$10.48
					Total	\$220.03

Note: Vistaprint Tax invoices are provided per shipment. For a complete order view, please refer to your Order Confirmation empil.

Need Help? Click here for our online Help Page or to contact us. Please do NOT click reply to this message as this is an unmonitored address.

From: Sent: To: Vistaprint [VistaPrint-cc@vistaprint.com] Thursday, November 06, 2014 1:44 AM

Yvonne Arnold

Cc: Subject: Signed By: vatinvoicearchive@vistaprint.com Vistaprint Canadian Tax Invoice

VistaPrint-cc@vistaprint.com





Add Visteprint to your adapts book

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* * * * * * * * * * * * * * * * * * *	Description of	Quantity	Net Amount	Tax %	Shipping Costs	Total
	Supplies	Quantity	Net Amount	Tax %	Shipping Costs	Total
1.		Quantity 200	Net Amount	Tax % 5%	Shipping Costs	
1.	Supplies	· · · · · · · · · · · · · · · · · · ·				
	Supplies	· · · · · · · · · · · · · · · · · · ·				
1.	Supplies Closest to C6 Envelopes (200	\$37.49	5%	\$2.44	\$39.93
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	Supplies Closest to C6 Envelopes (200	\$37.49	5%	\$2,44 \$0,00	\$39.93 \$6.00
	Supplies Closest to C6 Envelopes (200	\$37.49	5%	\$2,44 \$0,00 Subtotal	\$39.93 \$0.00 \$39.93

Note: Vistagrint Tax invoices are provided per shipment. For a complete order view, please refer to your Order Confirmation entell.

Head Help? <u>Click here</u> for our online Help Page or to contact us. Please do NOT click reply to this message as this is an unmonitored address.

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.





Booking Information

AIR CANADA (*)

Booking Reference:

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

Main Contact: Ms Kathryn Todd

kath es.ca

Mob Hon

Customer Care

Air Canada 1-888-247-2262

Flight Arrivals and Departures 1-888-422-7533

Canalled of

Flight Itinerary

Flight	From	То	Stops	Duration	Alrcraft	Upgrade status
AC192	Edmonton, Edmonton Int'l (YEG) Tue 02-Dec 2014 11:05	Ottawa, Ottawa Int'l (YOW) Tue 02-Dec 2014 17:01	0	3hr56	E90	(.m .)
AC143	Ottawa, Ottawa Int'i (YOW) Wed 03-Dec 2014 17:40	Edmonton, Edmonton Int'i (YEG) Wed 03-Dec 2014 20:20	0	4hr40	E90	: - :

Passenger Information

1: Ms Kathryn Todd : Adult (16+), Ticket Numbe

Air Canada - Aeropla Payment Card:

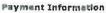
Meal Preference: Special Needs:

Low fat meal None

Seat Selection: AC192 17C , AC143 25C

Purchase Summary

Fare Summary	
Passenger Type	Adult
Air Transportation Charges	
Base Fare	780.00
Surcharges	46.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	53.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	43.51
Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001)	2.99
Air Travellers Security Charge (ATSC)	14.25
Total airfare and taxes before options (per passenger)	939.75
Number of passengers	x 1
Total airfare, taxes and options	939.75
Grand Total - Canadian dollars	\$939.75



Credit/Debit Ca Amount paid: \$939.75

The following char on your credit or debit card statement:

Air Canada: \$939.75 (Airfare - per ticket)

Ticket number(s

Fare Rules

Departing Flight Edmonton (YEG) To Ottawa (YOW) - Flex

Raturn Flight Ottawa (YOW) To Edmonton (YEG) - Flex