

AHS Board and Executive Expense Report

Name Dr. Kathryn Todd

Title VP System Innovations & Programs

Location Edmonton

Expenses submitted during the month of June 2018

							Travel (1)							
													Working Sessions		
MMM-YY	Source Document	Purpose	A	irfare	Mea	ıls	Accommod	ation	Othe Trave		Total Travel	Professional Development (2)	Hosting and Hospitality (3)	Other (4)	
Jun-18 Jun-18 Jun-18	P-Card Expense Claim Direct Billing	Meetings Meetings Meetings		2,008				231		102 228	102 459 2,008	45			
Total			\$	2,008	\$	-	\$	231	\$	330	\$ 2,569	\$ 45	\$ -	\$	Ξ

Total for

the Month \$ 2,614

Maximum daily single meal expense claimed in the month \$ 24 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.

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									
TODD, KATHRYN	VP System Innovations & Programs	Edmonton	\$ 146.70									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location		# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/1/2018	Parking at YEG - PEA Lunched	on in Calgary	AB - Local	Parking - Lot or Parkade	\$ 25.00			YEG Parking to attend the PEA Award Luncheon in Calgary	1			
6/6/2018	Cab to YEG A/P from home		AB - Local	Taxi	\$ 76.70	Home	YEG Airport	Cab to YEG to attend the AHS Exec Educ Program Cohort #6 in Calgary	1			
6/11/2018	Breakfast Meeting "The Power Potential of Data"	er and	AB - Local	Conference Fees	\$ 45.00			To attend the AHIA Breakfast Meeting "The Power and Potential of Data"	1			
Approver(s)	for the claim	Approval Sta	ntus	Approval Date			•	•	•		•	•
YIU. VERNA		Approve		5-Jul-18	1							



Alberta Health Industry Association

Box 3345, Fort Saskatchewan, AB T8L 2T3 Phone: (780) 997- 0051 Fax: (780) 997-0052 E-mail: ahia@shaw.ca Web Site: www.ahia.ca

BREAKFAST MEETING NOTICE

Wednesday, June 13, 2018 7:00 – 9:00 am

Royal Mayfair Golf and Country Club, 9450 Groat Rd., Edmonton, AB T6G 2T5

"The Power and Potential of Data"

Dr. Lawrence Richer

Interim Divisional Director-Pediatric Neurology Director-NACTRC Associate Dean, Clinical and Translational Research Associate Director, WCHRI

Tim Murphy

Vice President, Health, Alberta Innovates

Lawrence Richer MD, MSc is a Professor in the Department of Pediatrics, University of Alberta, Associate Dean Clinical Research and Director of the Northern Alberta Clinical Trials and Research Center (NACTRC). He also serves as the Associate Director of the Women and Children's Health Research Institute (WCHRI), provincial co-lead for the Pragmatic Clinical Trials platform within the Alberta SPOR SUPPORT Unit (AbSPORU), and interim Divisional Director for Pediatric Neurology. He is a Pediatric Neurologist with clinical and research interests in the treatment of headache and disorders of the autonomic nervous system. As Associate Dean, Clinical Research and Director of NACTRC he has a broad commitment to maximizing the use of health data to improve patient outcomes through research, to optimizing research administration processes, and to enhancing support for innovation in clinical trials. As Associate Director at WCHRI, he is leading the development of a clinical trials unit and data coordinating center for KidsCAN Trials — a national pediatric clinical trials network.

Tim Murphy has more than 25 years of senior executive leadership experience in the health care sector. Currently, he is the Vice President, Health at Alberta Innovates and prior to this role, he was the Vice President, Provincial Platforms and SPOR. Prior to joining Alberta Innovates, Tim established an independent consulting practice and worked with clients such as: the CHILD Foundation, the Institute for Health System Transformation and Sustainability, and the Movember Foundation. His other roles include being the inaugural Senior Vice President at the Michael Smith Foundation for Health Research (MSFHR)- a provincial research organization based in Vancouver, and 10 years in senior management positions with two comprehensive Academic Oncology Centres- Princess Margaret Hospital (1992-1997) and the British Columbia Cancer Agency (1997-2002). Tim holds a Bachelor of Science Degree, Life Sciences from Queen's University (1989); a Masters of Health Administration from the University of Toronto (1992); and, a Masters of Business Administration from Queen's University (2006). In 2007, he received his Certified Management Accountant (CMA) designation.

Program

7 am - Coffee & Networking, 7:30 am - Breakfast, 8:00 am - Speaker, 8:45 - Questions, 9:00 - Adjournment Please register by Tuesday, **June 12, 2018** by returning the form below with payment to the AHIA Office.

BREAKFAST MEETING – Wednesday, June 13, 2018
NAME:Kathryn Todd
COMPANY: Alberta Health Services
ADDRESS:14 th Fl., North Tower 10030 -107 St_Edm ABPOSTAL CODE_T5J 3E4
AMOUNT PAID:\$45 PHONE:FAX:
EMAIL ADDRESS:
BLE LOW AND DATE
PLEASE SELECT: Breakfast Meeting – Members - \$35.00 Non-Members - \$45.00X Please make cheques payable to AHIA: Cheque Number

Please send completed form with payment to: Box 3345, Fort Saskatchewan, AB T8L 2T3 E-mail: ahia@shaw.ca Questions? PH: (780)997-0051 Fax: (780) 997-0052

Please note that because attendance numbers have to be provided in advance, AHIA must invoice anyone who registers but does not attend.

Dress Requirement: Business casual. Jeans are allowed if they are clean with no rips. Cell phones can only be used in designated phone rooms.

ATS GROUP 4608 101 ST NW 7809897099 EDMONTON AB

CARD TYPE MASTERCARD
DATE 2018/06/06
TIME 0834 05:26:27
INVOICE #
RECEIPT NUMBER

PURCHASE
AMOUNT \$65.00
TIP \$11.70

\$76.70

MasterCard

TOTAL

APPROVED

AUTH# THANK TOO

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton Tax Code CA5%

P3 North F 01/06/18 19:18 Receipt

Short-term parking tkt
DL - No. 002513
01/06/18 07:24
01/06/18 19:18
Period 1d0h0'
(Tax) \$25.00
Total \$25.00

Payment Received \$25.00

Merch:
Auth
Type: Swiped

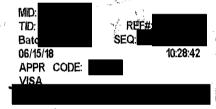
Sub Total \$23.81 Tax 5% \$1.19

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
TODD, KATHRYN	VP System Innovations & Programs	Edmonton	\$ 170.98									
Expense Date	Business reason		Expense Location	Expense Type		From Location	To Location	Justification		# of Attendees	Attendee Name(s)	Trip Distance
6/15/2018	To attend the DON SCN Core Co Meeting in Calgary	ommittee	AB - Local	Taxi	\$ 48.50		Foothills Hospital	To attend the DON SCN meeting in Calgary	1			
6/15/2018	To attend the DON SCN Core Co Meeting in Calgary	ommittee	AB - Local	Taxi	\$ 76.70	YEG Airport	Home	To attend the DON SCN Core Committee Meeting in Calgary	1			
6/15/2018	To attend the DON SCN Core Co Meeting in Calgary	ommittee	AB - Local	Taxi		Foothills Hospital		To attend the DON SCN Core Committee Meeting in Calgary	1			
Approver(s) fo	r the claim	Approval St		Approval Date					-			
YIU. VERNA		Approve		12-Jul-18								

ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111
CAR#1182

SALE



AMOUNT \$41.10 TIP \$7.40 TOTAL \$48.50

00 - APPROVED - 001

VISA CREDIT

THANK YOU

CUSTOMER COPY

ASSOCIATED CAB ALLIED LIMOUSIN 307-41 AVENUE NE CALGARY AB T2E 2N4 (403) 299-1111 CAR#69

SALE



AMOUNT \$38.80 TIP \$6.98 TOTAL \$45.78

00 - APPROVED - 001

VISA CREDIT

THANK YOU

CUSTOMER COPY

ATS GROUP 4608 101 ST NW 7809897099 EDMONTON AB

CARD TYPE VISA

DATE 2018/06/15

TIME 0604 17:44:12

INVOICE #

RECEIPT NUMBER

PURCHASE

AMOUNT \$65.00

TIP \$11.70

TOTAL

\$76.70

VISA CREDIT

THANK YOU



APPROVED AUTH#

CARDHOLDER COPY

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Tota	ı								
TODD, KATHRYN	VP System Innovations & Programs	Edmonton	\$ 288	63								
Expense Date	Business reason		Expense	Expense Type	Amount	From	То	Justification	# of	# of	Attendee	Trip
			Location			Location	Location		days	Attendees	Name(s)	Distance
6/18/2018	Accommodations to attend Co on June 19th	nnect Care	AB - Local	Accommodations	\$ 231.63			Accommodations to attend Connect Care on June 19th	1			
6/18/2018	Parking at Hotel		AB - Local	Parking - Lot or Parkade	\$ 20.00			Parking at Hotel night of June 18th.	1			
6/18/2018	Drove to Calgary - left YEG at 2	2:30pm	AB - Local	Meals Per Diem	\$ 24.00			Dinner \$24.00	1			
6/19/2018	Connect Care Event		AB - Local	Meals Per Diem	\$ 13.00			Lunch \$13.00	1			
Approver(s) for th	ne claim	Approval St	atus	Approval Date		•	•	•		•		
YIU, VERNA		Approve		23-Aug-18	7							

Connect Care



Ms. Kathryn Todd

Canada

INFORMATION INVOICE

Company Name

: Alberta Health Services

Group

A/R Number

Room Number

Arrival Date

Departure Date

Folio Number

Confirmation

Cashier

Page

19-06-18

18-06-18

19-06-18

1 of 1

GST No.: 894582667RT0001

		331.113.1	33 13323371113331	.0 00 .0
Date	Description		# Charges	Credits
18-06-18	Kensington Riverside Inn		212.00	200.00
18-06-18	Service & Marketing Fee		10.60	1 . 2016
18-06-18	Alberta Tourism Levy		8.90	1325
18-06-18	Nightly Parking		20.00	1
18-06-18	GST		12.13	1
			7	
		Total	407.58	407.58
Room GS1	Γ 12.13	Balance	0.00	CAD
F&B GST	0.00			
Other GST	0.00	\$231.63 Accommodations 20.00 Parking		
Total GST	12.13			

I agree that I am personally liable for the final disposition and payment of any services rendered or goods supplied by The Kensington Riverside Inn and further authorize the use of my credit card to facilitate full payment. I accept responsibility in the event the indicated third-party, company or association fails to render full payment of this account, and also for any loss or damage to the premises or its contents.

Guest Signature:			
•	 	 	



Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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 	ave expenses to report in this sect	tion for this reporting period: YES
Name :	Kathryn Todd	Reporting Period for the Month of: Jun-18

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
05-Jun-18	Direct Billing	Airline Ticket	Flight to Calgary to attend the President's Excellence Award Lunch	Marlin Travel	578.96
05-Jun-18	Direct Billing	Airline Ticket	Flight to Calgary to attend the AHS Executive Educ Program ALP	Marlin Travel	450.96
13-Jun-18	Direct Billing	Airline Ticket	Flight to Calgary to attend the SCN DON Core Committee Meeting	Marlin Travel	217.74
15-Jun-18	Direct Billing	Airline Ticket	nt CHANGE from Calgary to attend the SCN DON Core Committee Mee	Marlin Travel	228.48
15-Jun-18	Direct Billing	Airline Ticket	nt CHANGE from Calgary to attend the SCN DON Core Committee Mee	Marlin Travel	270.83
18-Jun-18	Direct Billing	Airline Ticket	Flight to Calgary to attend Connect Care Kick off	Marlin Travel	261.33
Total Paid in th	ne Month				\$ 2,008.30





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

Booking Date: 04 Jun 18

Client:
Agent:
Agents email:

File Locator:

PASSENGERS: KATHRYN TODD

REFERENCE/ DESCRIPTION	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAI	L
AIR CANADA Ticket				504.00	0.00	\$0.00	74.96	0.00	578.96	CAD
			Total:	504.00	0.00	0.00	74.96	0.00	578.96	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Payment			Amount	;
		06/04/2018							578.96	CAD
							Total Pa	ayment:	578.96	CAD
		. !!			В	alance Du	e CAD Cur	rency	0.00	CAD
CORPORATE UNIT 101 REASON FOR TRAVEL A	LIO EVECUTIV	E EDUCATION D	D00244	Total GS	Т	0.00	Tota	al HST	\$0.00	i

Trip #:

Booking Date: 04 Jun 18

Client:
Agent:
Agents email:

File Locator:

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
KATHRYN TODD	Not Specified	Not Specified
All passengers need to ensure that correct document	ation requirements are met	or entry to the applicable destinations as
well as for their return to Canada		



Passengers: KATHRYN To	ODD					ooking Date: le Locator/Ticket #:	90 May 18	
Airline	Flight	From	•	Terminal	То		Class/Seat	Stops
AIR CANADA	08226	EDMONTON IN	TL		CALGARY	INTL	H/	
		01 Jun 18 9:00	AM		01 Jun 18	9:52AM		
AIR CANADA	08152	CALGARY INTL 01 Jun 18 4:40			EDMONTO 01 Jun 18		U/	





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

Trip #: **Booking Date:** 04 Jun 18 Client: Agent: Agents email: File Locator:

PASSENGERS: KATHRYN TODD

REFERENCE/ DESCRIPTION	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	L
AIR CANADA Ticket #				376.00	0.00	\$0.00	74.96	0.00	450.96	CAD
			Total:	376.00	0.00	0.00	74.96	0.00	450.96	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Payment	<u>: </u>		Amount	:
		06/04/2018							450.96	CAD
							Total Pa	ayment:	450.96	CAD
					В	alance Du	e CAD Cu	rrency	0.00	CAD
CORPORATE UNIT 101				Total G	ST TE	0.00	Tota	al HST	\$0.00	ı
REASON FOR TRAVEL A	HS EXECUTIV	E EDUCATION P	ROGRAM ACTION I	FARNING PRO	IF					

STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS 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

Trip #:

Booking Date: 04 Jun 18

Client:
Agent:
Agents email:

File Locator:

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
KATHRYN TODD	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



Passengers: KATHRYN T	ODD				Booking Date: File Locator/Ticket #:	30 May 18	
Airline	Flight	From		Terminal	То	Class/Seat	Stops
AIR CANADA	08133	EDMONTO	N INTL		CALGARY INTL	V/	
		06 Jun 18	6:55AM		06 Jun 18 7:47AM		
AIR CANADA	08150	CALGARY 06 Jun 18			EDMONTON INTL 06 Jun 18 4:30PM	V/	





ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 Trip #:
Booking Date: 1
Client:
Agent:
Agents email:

File Locator:



PASSENGERS:

KATHRYN TODD

EFERENCE/ DESCRIPTION			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	
WESTJET Ticket #				168.26	0.00	\$0.00	49.48	0.00	217.74 C
AIR CANADA Ticket #		• • • • • • • • • • • • • • • • • • • •		233.35	0.00	\$0 .00	37.48	0.00	270.83 C
			Total:	401.61	0.00	0.00	86.96	0.00	488.57 C
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	f Payment			Amount
		06/13/2018							217.74 C
		06/13/2018							270.83 C
							Total Pa	yment:	488.57 C
7.		· · · · · · · · · · · · · · · · · · ·			Ва	alance Du	e CAD Cur	rency	0.00 C

Total GST

0.00

Total HST

\$0.00

CORPORATE UNIT 101

REASON FOR TRAVEL DIABETES OBESITY AND NUTRITION SCN MEETING

Trip #:
Booking Date: 15 Jun 16
Client:
Agent:
Agents email:
File Locator:

MY ITINERARY

	Passengers
Ě	KATHRYN TODD

Citizenship

Required Travel Documents

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



all littles								
Passengers: KATHRYN T	ODD					Booking Date File Locator/Ticket#:	13 Jun 18	
Airline	Flight	From		Terminal	To		Class/Seat	Stops
WESTJET	03256	CALGARY	INTL		EDMON.	TON INTL	Q/	
		15 Jun 18	5:15PM		15 Jun 1	8 6:07PM		
Passengers: KATHRYNT	ODD					Booking Date File Locator/Ticket #:	49 lim 49	





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

Booking Date: 15 Jun 18

Client:
Agent:
Agents email:

File Locator:

PASSENGERS: KATHRYN TODD

REFERENCE/ DESCRIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #		191.00	0.00	\$0.00	37.48	0.00	228.48 CAD
	Total:	191.00	0.00	0.00	37.48	0.00	228.48 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Pay	ment	Amount
		06/15/2018	-			228.48 CAD
					Total Payment:	228.48 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101

REASON FOR TRAVEL RETURNING HOME FROM EXECUTIVE MEETING

Trip #:

Booking Date: 15 Jun 18

Client: Agent:
Agents email:

File Locator:

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
KATHRYN TODD	Not Specified	Not Specified
 All passengers need to ensure that correct documents well as for their return to Canada	ation requirements are met f	or entry to the applicable destinations as



Passengers: KATHRYN T	ODD			Booking Date: File Locator/Tick	15 Jun 18 set#:	
Airline	Flight	From	Terminal	То	Class/Seat	Stops
AIR CANADA	08150	CALGARY INTL		EDMONTON INTL	H/	
		15 Jun 18 3:40PM		15 Jun 18 4:30PM		





ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 Trip #: Booking Date: Client: Agent: Agents email:

File Locator:

19 Jun 18

PASSENGERS:

KATHRYN TODD

REFERENCE/ DESCRIPTI	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAI	L
AIR CANADA Ticket		·	• • • • • • • • • • • • • • • • • • • •	223.85	0.00	\$0.00	37.48	0.00	261.33	CAD
			Total:	223.85	0.00	0.00	37.48	0.00	261.33	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	of Payment			Amount	
		06/18/2018							261.33	CAD
							Total Pa	yment:	261.33	CAD
					E	Balance Du	e CAD Cui	rency	0.00	CAD
CORPORATE UNIT 101				Total G	ST	0.00	Tota	al HST	\$0.00	ı

CORPORATE UNIT 101

REASON FOR TRAVEL CONNECT CARE SESSION

Trip #:

Booking Date: 19 Jun 18

Client:
Agent:
Agents email:

File Locator:

MY ITINERARY

Passengers
KATHRYN TODD

Citizenship

Required Travel Documents

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



Passengers: KATHRYN T	ODD				Booking Date File Locator/Ticket#	18 Jun 18	
Airline	Flight	From	•	Terminal	То	Class/Seat	Stops
AIR CANADA	08150	CALGARY II	NTL		EDMONTON INTL	H/	
		19 Jun 18 3	3:40PM		19 Jun 18 4:30PM		