

## AHS Board and Executive Expense Report

**Name** Dr. Kathryn Todd  
**Title** VP System Innovations & Programs  
**Location** Edmonton  
 Expenses submitted during the month of July 2018

			Travel (1)					Working Sessions Hosting and Hospitality		
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Hosting and Hospitality (3)	Other (4)
Jul-18	P-Card	Meetings				481	481			
Jul-18	Direct Billing	Meetings	496				496			
<b>Total</b>			\$ 496	\$ -	\$ -	\$ 481	\$ 977	\$ -	\$ -	\$ -

**Total for the Month** \$ 977

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.

### 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	\$ 480.92									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
6/19/2018	To attend Connect Care Launch	AB - Local	Taxi	\$ 76.70	YEG Airport	Home	Cab from YEG Airport to Home	1				
6/19/2018	To attend Connect Care Launch	AB - Local	Taxi	\$ 36.11	Confernece Centre	YYC Airport	Cab for Deb Gordon & Kathryn	1				
6/25/2018	Cab to attend SLT at EDM Airport	AB - Local	Taxi	\$ 77.00	Home	YEG Airport	Cab to attend SLT at EDM Airport. Receipt misplaced, attestation attached.	1				
7/9/2018	Meetings in Calgary	AB - Local	Taxi	\$ 76.70	YEG Airport	Home	Meetings in Calgary	1				
7/9/2018	Meetings in Calgary	AB - Local	Taxi	\$ 61.01	YYC Airport	Southport	Meetings in Calgary	1				
7/9/2018	Meetings in Calgary	AB - Local	Taxi	\$ 76.70	Home	YEG Airport	Meetings in Calgary	1				
7/9/2018	Meetings in Calgary	AB - Local	Taxi	\$ 76.70	Southport	YYC Airport	Meetings in Calgary	1				
Approver(s) for the claim		Approval Status		Approval Date								
YIU, VERNA		Approve		10-Aug-18								

ATS GROUP  
4608 101 ST NW  
7809897099  
EDMONTON AB

CHECKER/YELLOW CAB  
316 MERIDIAN ROAD SE  
CALGARY, AB T2A 1X2

ATS GROUP  
4608 101 ST NW  
7809897099  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/07/09  
TIME 3652 06:22:37  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

Merchant ID: 432L7651  
Driver ID: 20007  
Record Num: [REDACTED]

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/06/19  
TIME 9541 17:52:22  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

Sale

Application Label: MasterCard

PURCHASE  
AMOUNT \$65.00  
TIP \$11.70  
TOTAL

ATD [REDACTED]  
MASTERCARD Entry Method: Chip  
Amount: \$ 31.40  
Tip: \$ 4.71

PURCHASE  
AMOUNT \$65.00  
TIP \$11.70  
TOTAL

\$76.70

\$76.70

MasterCard

MasterCard

APPROVED

AUTH# [REDACTED]  
THANK YOU

APPROVED

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

GST 13880 1212 RT0001

GST 13880 1212 RT0001

DESCRIPTION: -----

THANK YOU  
(403)299-9999  
WWW.THECHECKERGROUP.COM

CARDHOLDER COPY

RETAIN THIS COPY FOR STATEMENT  
VERIFICATION

316 MERIDIAN ROAD SE  
CALGARY, AB T2A 1X2

TERMINAL ID: [REDACTED]  
MERCHANT ID: [REDACTED]  
VEHICLE ID: [REDACTED]  
DRIVER ID: [REDACTED]  
GST ACCOUNT #: [REDACTED]  
TRIP NUMBER: 16374967  
PASSENGERS: 1

06/19/2018  
START: 14:05  
DISTANCE: 190.00  
END: 14:22  
RATE: 1

FARE AMOUNT: \$ 29.90

TAX AMOUNT: \$ 1.50  
TIP AMOUNT: \$ 4.71

TOTAL : \$ 36.11

MASTER COPY

Pcard Attestation

One taxi receipt for \$77.00 on June 25, 2018 was misplaced.

This expense was incurred for AHS business and was not previously claimed.

Kathryn Todd, Vice President  
System Innovations & Programs

Aug 1, 2018

Date

ASSOCIATED CAB  
ALLIED LIMOUSIN  
307-41 AVENUE NE  
CALGARY AB T2E 2N4  
(403) 299-1111  
CAR#1573

BLACK SEDAN INC.  
1608 MARLYN WAY NE  
CALGARY AB T2A 3K7  
(403) 608 5777

ATS GROUP  
4608 101 ST NW  
7809897099  
EDMONTON AB

SALE

SALE

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2018/07/09  
TIME 6030 20:08:08  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE  
AMOUNT \$65.00  
TIP \$11.70  
TOTAL

\$76.70

MID: [REDACTED]  
TID: [REDACTED] REF: [REDACTED]  
Batch # [REDACTED] SEQ: [REDACTED]  
07/09/18  
APPR CODE: [REDACTED]  
MASTERCARD  
[REDACTED] \*\*\*

REF: [REDACTED]  
Batch # [REDACTED] SEQ: [REDACTED]  
07/09/18  
APPR CODE: [REDACTED]  
MASTERCARD  
[REDACTED] \*\*\*

AMOUNT \$65.00  
TIP \$11.70  
TOTAL \$76.70

00 - APPROVED - 001

MasterCard  
AID: [REDACTED]  
TVR: [REDACTED]  
TSI: [REDACTED]

CUSTOMER COPY

AMOUNT \$51.70  
TIP \$9.31  
TOTAL \$61.01

00 - APPROVED - 001

MasterCard  
AID: [REDACTED]  
TVR: [REDACTED]  
TSI: [REDACTED]

THANK YOU

CUSTOMER COPY

MasterCard  
[REDACTED]

APPROVED

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

## 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 expenses to report in this section for this reporting period: YES

<b>Name :</b> Kathryn Todd	<b>Reporting Period for the Month of :</b> Jul-18
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DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
03-Jul-18	Direct Billing	Airline Ticket	Flight to Calgary for staff meetings with Direct Reports	Marlin Travel	496.06
	Direct Billing				
	Direct Billing				
	Direct Billing				
	Direct Billing				
	Direct Billing				
<b>Total Paid in the Month</b>					<b>\$ 496.06</b>



1

**Invoice**

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

Trip #: [REDACTED]  
 Booking Date: 04 Jul 18  
 Client: [REDACTED]  
 Agent: [REDACTED]

File Locator: [REDACTED]

**PASSENGERS:** KATHRYN TODD

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	421.10	0.00	\$0.00	74.96	0.00	496.06 CAD
<b>Total:</b>	<b>421.10</b>	<b>0.00</b>	<b>0.00</b>	<b>74.96</b>	<b>0.00</b>	<b>496.06 CAD</b>

**PAYMENTS**

Invoice #	Payment Date	Card Holder	Form of Payment	Amount
[REDACTED]	07/03/2018	[REDACTED]	[REDACTED]	496.06 CAD
<b>Total Payment:</b>				<b>496.06 CAD</b> ✓

**Balance Due CAD Currency 0.00 CAD**

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101  
 REASON FOR TRAVEL FACE TO FACE MEETINGS

\*\*\*\*\* 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: 04 Jul 18  
Client: [REDACTED]  
Agent: [REDACTED]  
File Locator: [REDACTED]

**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



AIR

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08139	EDMONTON INTL 09 Jul 18 8:00AM		CALGARY INTL 09 Jul 18 8:58AM	Q/	
AIR CANADA	08164	CALGARY INTL 09 Jul 18 6:35PM		EDMONTON INTL 09 Jul 18 7:29PM	Q/	

Passengers: KATHRYN TODD

Booking Date: 03 Jul 18  
File Locator/Ticket #: [REDACTED]