

# AHS Board and Executive Expense Report

Name	Linda Hughes
Title	AHS Board Chair
Location	Edmonton
Expenses sub	mitted during the month of October 2016

						Trav	vel (1)							
МММ-ҮҮ	Source Document	Purpose	Ai	rfare	Meals	Accom	nodation	Other Travel		Total Fravel	Professiona Developmer (2)	al Ho	Working Sessions osting and lospitality (3)	Other (4)
Oct-16	Direct Billing	Meetings		340						340				
Total			\$	340	\$	- \$	_	\$	- \$	340	\$	- \$	-	\$
Total for the Month	\$ 340													
	ly single meal expens ly base hotel rate cla	se claimed in the month imed 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

Non economy air travel in the month

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.



# **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 : Linda Hughes	Reporting Period for the Month of : Sep-16	
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
27-Sep-2016	Direct Billing	Airline Ticket	Flight to Calgary to attend Board Meetings on September 27-30, 2016 (Invoice <b>Calgary III</b> ). Flight cancelled and joined meetings via videoconference. Credit will be used for a future flight.	Marlin Travel	340.26
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	20 20
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	91 1
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	-
Total Paid in the	Month				\$ 340.26



## **Trip Statement**

	Total:	265.30	0.00	0.00	74.96	0.00	340.26	C/
AIR CANADA Ticket #		265.30	0.00	\$0.00	74.96	0.00	340.26	CA
REFERENCE/ DESCRIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	
PASSENGERS: MS LINDA H	UGHES		File Loc		RANCE			
ALBERTA HEALTH SERVICE "SUITE 800, NORTH TOWER" 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	3		Booking I Cl Client Pho Client E	Date: 1 lient: one # Email:	7 Sep 16 IFFANY AS	SKE		

PAYMENTS

Invoice #	Payment Date Card Holder	Form of Payment	Amount
	09/16/2016		340.26 CAD
		Total Payme	nt: 340.26 CAE

Balance Due CAD Currency

0.00 CAD

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

ALBERTA HEALTH SERVICES	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Trip #:	13.0
"SUITE 800, NORTH TOWER"		Booking Date:	17 Sep 16
10030-107 ST		Client:	
EDMONTON, AB T5J 3E4		Client Phone #	
CANADA		Client Email:	
		Agent:	TIFFANY ASKE
		File Locator:	
	Chinanabia		
Passengers	Citizenship	Required Travel Documents	
LINDA HUGHES	Not Specified	Not Specified	
All passengers need to ensure that correct of	documentation requirements ar	e met for entry to the applicable destination	ons as
vell as for their return to Canada			
vell as for their return to Canada			

				Booking	) Date:	16 Ser	<u>o 16</u>
Passengers: LIN	IDA HUGHES			File Loc	ator/Ticket #:		
Airline	Flight	From	Terminal	То	Class	Seat	Stops
AIR CANADA	08155	EDMONTON INTL 27 Sep 16 7:30PM		CALGARY INTL 27 Sep 16 8:26PM	G		
AIR CANADA	08150	CALGARY INTL 30 Sep 16 3:25PM		EDMONTON INTL 30 Sep 16 4:15PM	G		•••••