

AHS Board and Executive Expense Report

Name Nancy Guebert
Title Chief Program Officer Cancer Control Alberta
Location Calgary
 Expenses submitted during the month of October 2017

Travel (1)

| MMM-YY | Source Document | Purpose | Airfare | Meals | Accommodation | Other Travel | Total Travel | Professional Development (2) | Working Sessions Hosting and Hospitality (3) | Other (4) |
|--------------|-----------------|----------|---------|-------|---------------|--------------|--------------|------------------------------|--|-----------|
| Oct-17 | P-Card | Meetings | | | 887 | 576 | 1,463 | | | |
| Oct-17 | Direct Billing | Meetings | 391 | | | | 391 | | | |
| Total | | | \$ 391 | \$ - | \$ 887 | \$ 576 | \$ 1,854 | \$ - | \$ - | \$ - |

Total for the Month \$ 1,854

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 189
 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 | | | | | | | | |
|---------------------------|---|-------------------|--------------------------|-----------|------------------|---------------------|--|-----------|----------------|------------------|---------------|
| GUEBERT, NANCY COLLEEN | Chief Program Officer, Cancer Control Alberta | Calgary | \$ 1,462.72 | | | | | | | | |
| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
| 9/20/2017 | Attend in CCA Leadership and QSO Meetings | AB - Local | Accommodations | \$ 368.26 | | | 2 nights accommodation to attend 3 days of in person meetings | 2 | | | |
| 9/20/2017 | Attend CCA Leadership and QSO mtgs 3 days in Edmonton | AB - Local | Taxi | \$ 75.90 | YEG Airport | Sunlife offices | Taxi from YEG airport to meetings at Sunlife office | 1 | | | |
| 9/22/2017 | Attend CCA Leadership and QSO mtgs in YEG | AB - Local | Taxi | \$ 55.20 | 7th Street Plaza | YEG Airport | Taxi from 7th St Plaza to YEG airport | 1 | | | |
| 9/22/2017 | Attend CCA Leadership and QSO mtgs in YEG | AB - Local | Parking - Lot or Parkade | \$ 29.35 | | | Parking at YYC airport while attending mtgs in YEG | 1 | | | |
| 9/25/2017 | Attend SCN/CCA Planning Session in YEG | AB - Local | Taxi | \$ 75.90 | YEG Airport | Westin Hotel | Taxi from YEG airport to Westin Hotel | 1 | | | |
| 9/25/2017 | Attend SCN/CCA Planning Session in YEG | AB - Local | Accommodations | \$ 212.19 | | | Overnight stay required due to time of next day meetings | 1 | | | |
| 9/26/2017 | Attend SCN/CCA Planning Session in YEG | AB - Local | Parking - Lot or Parkade | \$ 58.70 | | | Parking at YYC airport during YEG meetings | 1 | | | |
| 9/26/2017 | Attend SCN/CCA Planning Session in YEG | AB - Local | Taxi | \$ 75.90 | Sunlife Office | YEG Airport | Taxi from Sunlife meeting location to YEG airport | 1 | | | |
| 10/2/2017 | Attend Senior Leaders Meeting In Enoch | AB - Local | Taxi | \$ 79.35 | YEG Airport | River Cree Marriott | Taxi from YEG airport to Senior Leaders meeting venue in Enoch | 1 | | | |
| 10/2/2017 | Attend Town Hall & Tour in GrandePrairie | AB - North Zone | Taxi | \$ 27.60 | GP Airport | GP Hospital | Taxi from GrandePrairie airport to hospital | 1 | | | |
| 10/2/2017 | Attend Town Hall & Tour in GrandePrairie | AB - North Zone | Taxi | \$ 18.17 | GP Hospital | GP Airport | Taxi from GrandePrairie hospital to airport | 1 | | | |
| 10/2/2017 | Attend Town Hall & Tour in GrandePrairie | AB - North Zone | Accommodations | \$ 150.44 | | | Overnight stay required due to flight options | 1 | | | |
| 10/3/2017 | Attend Town Hall in GP and Snr Leaders mtg in Enoch | AB - Local | Parking - Lot or Parkade | \$ 79.70 | | | Parking during meetings in GrandePrairie and Enoch, AB | 1 | | | |

AHS Public Disclosure P-Card

| Claimant Name | Claimant Title | Claimant Location | Expense Claim Total | | | | | | | | | |
|---------------------------|---|-------------------|---------------------|-----------|---------------|-------------|---|-----------|----------------|------------------|---------------|--|
| GUEBERT, NANCY COLLEEN | Chief Program Officer, Cancer Control Alberta | Calgary | \$ 1,462.72 | | | | | | | | | |
| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance | |
| 10/4/2017 | Attend Senior Leaders Meetings | AB - Local | Accommodations | \$ 156.06 | | | Overnight stay due to start time of meetings and flight options | 1 | | | | |
| Approver(s) for the claim | | Approval Status | Approval Date | | | | | | | | | |
| BELANGER, FRANCOIS | | Approve | 26-Oct-17 | | | | | | | | | |

1. Taxi & Parking Receipts

①

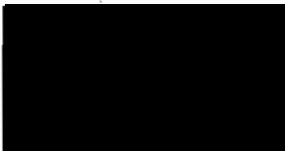
SEPT 20TH - 22ND (NTES IN EDMONTON - PROVINCIAL PRACTICES, CCA ED, CCOC, CCF TBCC & QSO)

PCARD
PRESTIGE TRANSPORTATION
10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2017/09/20
TIME 0937 09:23:28
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE AMOUNT \$66.00
TIP \$9.90
TOTAL \$75.90

MasterCard



APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

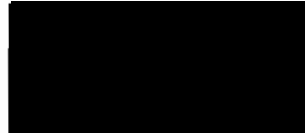
PRESTIGE 780.463.5000
GOPRESTIGE.CA
GST 862184769

PCARD
AIRPORT TAXI SERVICE
4608 101 ST.
(7808907070)
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2017/09/22
TIME 5290 13:18:05
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE AMOUNT \$48.00
TIP \$7.20
TOTAL \$55.20

MasterCard



APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

RECEIPT
GST NO. R122556194

PCARD
TKT NO: [REDACTED]
EXIT No. A5
IN: 09/22/17 06:26
OUT: 09/22/17 16:34
DURATION: 0 10:08
PAID: \$ 29.35
(GST INCLUDED)
MASTERCARD [REDACTED]

REF. [REDACTED]
THANK YOU FOR YOUR VISIT

FlyYYC

YYC CALGARY INTERNATIONAL AIRPORT

③ PARKING @ YYC AIRPORT

① YES AIRPORT → SUNLIFE

② SSP → YES AIRPORT

SEPT 20-22 (MTGS IN EDMONTON) - PROVINCIAL PRACTICE,
CCA ED, CCAC, CCF TBC & QSO

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert
Alberta Health Services li

Page Number : 1 Invoice Nbr : [REDACTED]
Guest Number : [REDACTED]
Folio ID : [REDACTED]
Arrive Date : 20-SEP-17 19:54
Depart Date : 22-SEP-17 07:57
No. Of Guest : 1
Room Number : [REDACTED]
Club Account : [REDACTED]

Tax Invoice

Tax ID : 815461330RT0001
The Westin Edmonton SEP-22-2017 08:00 [REDACTED]

| Date | Reference | Description | Charges (CAD) | Credits (CAD) |
|-----------|------------|---------------------------|---------------|---------------|
| 20-SEP-17 | [REDACTED] | Room Charge | 164.00 | |
| 20-SEP-17 | [REDACTED] | GST | 8.45 | |
| 20-SEP-17 | [REDACTED] | Destination Marketing Fee | 4.92 | |
| 20-SEP-17 | [REDACTED] | Tourism Levy | 6.76 | |
| 21-SEP-17 | [REDACTED] | Room Charge | 164.00 | |
| 21-SEP-17 | [REDACTED] | GST | 8.45 | |
| 21-SEP-17 | [REDACTED] | Destination Marketing Fee | 4.92 | |
| 21-SEP-17 | [REDACTED] | Tourism Levy | 6.76 | |
| 22-SEP-17 | [REDACTED] | Mastercard [REDACTED] | | -368.26 |

Approve EMV Receipt for MC [REDACTED] PIN Verified
Application Label: MasterCard

** Total 368.26 -368.26
*** Balance 0.00

Continued on the next page

TAXI & PARKING RECEIPTS

SEPT 25-26TH (EDMONTON MBS - CANCER DRUG EVALUATION,
2:1 DONNA/NANCY, CANCER SCN/CEA
PLANNING SESSION)

PRESTIGE TRANSPORTATION
10135 31 AVE NW
EDMONTON AB

PRESTIGE TRANSPORTATION
10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2017/09/25
TIME 0532 18:40:33
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2017/09/26
TIME 2441 15:30:46
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$66.00
TIP \$9.90
TOTAL
\$75.90

PURCHASE
AMOUNT \$66.00
TIP \$9.90
TOTAL
\$75.90

MasterCard
[REDACTED]

MasterCard
[REDACTED]

RECEIPT
GST NO. R122556194

TKT NO [REDACTED]
POF: C52
IN: 09/25/17 15:21
OUT: 09/26/17 18:15
PAID: \$ 58.70
DURATION: 1 02: 54
(GST INCLUDED)

MASTERCARD
[REDACTED]

YOU HAVE 10 MIN.
TO EXIT

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



PRESTIGE 780.463.5000
GOPRESTIGE.CA
GST 862184769

PRESTIGE 780.463.5000
GOPRESTIGE.CA
GST 862184769

③ PARKING @
YYC AIRPORT

① YES → WESTIN

② SUNLIFE → YES

ACCOMMODATIONS
SEPT 25-26TH

(EDMONTON MTGS - CANCER DRUG EVALUATION,
2:1 DONNA/NANCY, CANCER SCN/CEA PLANNING
SESSION)

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert

Page Number : 1 Invoice Nbr : [REDACTED]
Guest Number : [REDACTED]
Folio ID : [REDACTED]
Arrive Date : 25-SEP-17 18:43
Depart Date : 26-SEP-17 07:01
No. Of Guest : 1
Room Number : [REDACTED]
Club Account : [REDACTED]

Information Invoice

Tax ID : 815461330RT0001
The Westin Edmonton SEP-26-2017 03:51 [REDACTED]

| Date | Reference | Description | Charges (CAD) | Credits (CAD) |
|-------------|------------|---------------------------|---------------|---------------|
| 25-SEP-17 | [REDACTED] | Room Charge | 189.00 | |
| 25-SEP-17 | [REDACTED] | GST | 9.73 | |
| 25-SEP-17 | [REDACTED] | Destination Marketing Fee | 5.67 | |
| 25-SEP-17 | [REDACTED] | Tourism Levy | 7.79 | |
| SEP-26-2017 | [REDACTED] | Mastercard | | -212.19 |

Approve EMV Receipt for MC [REDACTED] IN Verified [REDACTED]
Application Label:MasterCard

** Total 212.19 -212.19
*** Balance -0.00

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert

| | | | | | |
|--------------|---|------------|-------------|---|------------|
| Page Number | : | 2 | Invoice Nbr | : | [REDACTED] |
| Guest Number | : | [REDACTED] | | | |
| Folio ID | : | [REDACTED] | | | |
| Arrive Date | : | 25-SEP-17 | 18:43 | | |
| Depart Date | : | 26-SEP-17 | 07:01 | | |
| No. Of Guest | : | 1 | | | |
| Room Number | : | [REDACTED] | | | |
| Club Account | : | [REDACTED] | | | |

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

KIDS EAT WELL AT WESTIN - Discover kids' meals that are as delicious as they are nutritious with the Westin Eat Well Menu for Kids, developed with Superchefs(TM) to make kids and parents happy. Learn more at westin.com/eatwell

As a Starwood Preferred Guest you have earned at least [REDACTED] Starpoints for this visit [REDACTED]

Tell us about your stay. www.westin.com/reviews

8

TAXI & PARKING RECEIPTS
OCT 1-3 (GRAND PRAIRIE TOWN
HALL & TOUR
PLUS SENIOR LEADERS
MTG)

GREATER EDMONTON TAXI
SERVICE
10135 31 AVE NW
EDMONTON AB

③ YES AIRPORT TO
ENOCH MARRIOTT

MOSES CAB SERVICE
9831 92 AVE STE 9E
GRANDE PRAIRIE, AB. T8V
780-978-5450

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2017/10/02
TIME 0157 18:52:26
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

SALE

PURCHASE
AMOUNT \$69.00
TIP \$10.35
TOTAL \$79.35

J # 000001

Batch #: [REDACTED] REF#: [REDACTED]
10/02/17 11:13:13
APPR CODE: [REDACTED]
Trace: 3

MasterCard
[REDACTED]

AMOUNT \$15.80
TIP \$2.37
TOTAL \$18.17

RECEIPT
GST NO. R122556194

APPROVED

APPROVED

TXT NO: [REDACTED]
EDIT NO. A2
IN: 10/01/17 18:07
OUT: 10/03/17 19:47
DURATION: 2 01: 40
PAID: \$ 79.70
(GST INCLUDED)
MASTERCARD
[REDACTED]

MasterCard
[REDACTED]

AUTH# [REDACTED]
THANK YOU

REF. [REDACTED]
THANK YOU FOR
YOUR VISIT

THANK YOU / MERCI
CUSTOMER COPY

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456
BARREL TAXI 780.489.7777
EDMTAXI.COM
GST 100403070

FlyYYC YYC CALGARY INTERNATIONAL AIRPORT

① GRAND PRAIRIE → HOSPITAL

RECEIPT FOR TAXI FARE PO#: 27.80
DATE: 10/02/2017 AMOUNT: \$ 27.80
FROM: GP Hospital
TO: Airport
DRIVER: [REDACTED] CAR #: 237
CUSTOMER: [REDACTED]
SIGNATURE: [REDACTED]
Ride with Confidence 223 9804 - 100 Ave.
Grande Prairie, AB T8V 0T8

④ PARKING AT
YYC AIRPORT

② GP HOSPITAL → AIRPORT

Pomeroy Lodging LP o/a GP Pomeroy Hotel

GST #855473310 RT0014

11633 100th Street

Grande Prairie, AB T8V 3Y4

Telephone: (780)532-5221 Fax: (780)532-5441

9

Oct 02, 2017

9:25 am

Ms. Nancy Guebert

Folio # [REDACTED]
 Room Number [REDACTED]
 Rate: \$134.00
 Pay Method [REDACTED]

Arrival Date: Sunday, October 01, 2017
 Departure Date: Monday, October 02, 2017

Member #: [REDACTED]

| Date | Department | Reference | Voucher | Room | Debit | Credit |
|-----------|--------------|------------|---------|------------|----------|----------|
| 10/1/2017 | ROOM CHARGE | [REDACTED] | | [REDACTED] | \$134.00 | |
| 10/1/2017 | G.S.T - ROOM | [REDACTED] | | [REDACTED] | \$6.70 | |
| 10/1/2017 | HOTEL TAX | [REDACTED] | | [REDACTED] | \$5.36 | |
| 10/1/2017 | D.M.F. FEE | [REDACTED] | | [REDACTED] | \$4.02 | |
| 10/1/2017 | G.S.T - ROOM | [REDACTED] | | [REDACTED] | \$0.20 | |
| 10/1/2017 | HOTEL TAX | [REDACTED] | | [REDACTED] | \$0.16 | |
| 10/2/2017 | MASTERCARD | [REDACTED] | | [REDACTED] | | \$150.44 |

POMEROY HOTEL GRANDE
 PRAIRIE
 11633 CLAIRMONT RD
 GRANDE PRAIRIE AB

| Tax Summary | |
|-------------|--------|
| G.S.T - ROO | \$6.90 |
| D.M.F. FEE | \$4.02 |
| HOTEL TAX | \$5.52 |

I agree that my liability for all charges is not waived

Signature _____

Balance:

CARD [REDACTED]
 CARD TYPE MASTERCARD
 DATE 2017/10/02
 TIME 0355 09:26:16
 CLERK ID [REDACTED]
 INVOICE # [REDACTED]
 RECEIPT NUMBER [REDACTED]

PRE-AUTH COMPLETION
 TOTAL
\$150.44

MasterCard
 [REDACTED]

APPROVED

AUTH# [REDACTED]
 THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
 COPY FOR YOUR RECORDS

*ACCOMMODATION IN
 GRANDE PRAIRIE FOR
 TOWN HALL & HOSPITAL
 TOUR*

10

GUEST FOLIO

Edmonton Marriott at River Cree Resort • 300 East Lapotac Blvd., Enoch, AB T7X 3Y3 Canada • 780.484.2121 • Marriott.com/YEGMC



Room Name **Rate** **Depart Time** **ACCT#** **GROUP**
 [REDACTED] **SUEBERT/N** **139.00** **10/03/17 11:00** [REDACTED] [REDACTED]
CK **Type** **Arrive Time**
211 **10/02/17 19:00**

| Room Clerk | Address | Payment | RWD# |
|------------|---------|---------|------------|
| | | | [REDACTED] |

| DATE | REFERENCE | CHARGES | CREDITS | BALANCE DUE |
|-------|-----------|----------|---------|-------------|
| 10/02 | GP ROOM | 1 139.00 | | |
| 10/02 | GST | 1 7.16 | A | |
| 10/02 | TRSMLEVY | 1 5.73 | B | |
| 10/02 | DMF FEE | 1 4.17 | C | |
| 10/03 | MC CARD | | | \$156.06 |

TO BE SETTLED TO: MASTERCARD CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT, PLEASE CALL THE FRONT DESK, OR PRESS "MENU" ON YOUR TV REMOTE CONTROL TO ACCESS VIDEO CHECK-OUT.

----- SUMMARY TAXES & FEES -----

| DESCRIPTION | TAXED AMOUNT | TAX |
|------------------------|--------------|------|
| A ROOM GST | .00 | 7.16 |
| B TOURISM LEVY | .00 | 5.73 |
| D 5% GST TAX | .00 | .00 |
| E 5% GST TAX | .00 | .00 |
| F 5% GST TAX-30 | .00 | .00 |
| G 5% GST TAX-70 | .00 | .00 |
| H 5% GST TAX-10 | .00 | .00 |
| I 5% GST INCLUSIVE TAX | .00 | .00 |
| J WFB TAX | .00 | .00 |
| K TOURISM LEVY | .00 | .00 |

| | | | |
|-------------|-------|---------|--------|
| NET CHARGES | TAX | CREDITS | FOLIO |
| 143.17 | 12.89 | .00 | 156.06 |

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO: [REDACTED] SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

Your Rewards points/miles earned on your eligible earnings will be credited to your account. Check your Rewards Account Statement for updated activity.

* ACCOMMODATION BOOKED BY MARLIN FOR SUB LEADERS MRS.

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts owing to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X _____

To secure your next stay, go to marriott.com

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 : Nancy Guebert | Reporting Period for the Month of : Sep 21 2017 to Oct 20, 2017 |
|-----------------------------|--|

| DD-MMM-YYYY | Payment Method | Category | Description/Purpose of the Expense | Name of Vendor | Amount Paid |
|--------------------------------|----------------|----------------|---|----------------|------------------|
| 05-Oct-17 | Direct Billing | Airline Ticket | Travel YYC to YEG to attend Quality Summit (Trip was cancelled on Oct 30th due to unforeseen circumstances and credit is on file with Marlin Travel for \$391.56) | Marlin Travel | 391.56 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total Paid in the Month | | | | | \$ 391.56 |



Invoice

| | |
|--|---|
| ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 | Trip #: [REDACTED] Booking Date: 05 Oct 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED] |
|--|---|

PASSENGERS: MS NANCY GUEBERT

| REFERENCE/ DESCRIPTION | FARE | HST/GST | PST | OTHER TAXES | PENALTY | TOTAL |
|--------------------------------|---------------|-------------|-------------|--------------|-------------|-------------------|
| AIR CANADA Ticket # [REDACTED] | 316.60 | 0.00 | \$0.00 | 74.96 | 0.00 | 391.56 CAD |
| Total: | 316.60 | 0.00 | 0.00 | 74.96 | 0.00 | 391.56 CAD |

| PAYMENTS | Invoice # | Payment Date | Card Holder | Form of Payment | Amount |
|----------|------------|--------------|-------------|-----------------|------------|
| | [REDACTED] | 10/05/2017 | | [REDACTED] | 391.56 CAD |
| | | | | Total Payment: | 391.56 CAD |

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SITE VISITS

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

***** 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 -----

----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS. -----

****PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

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

Trip #: [REDACTED]
Booking Date: 05 Oct 17
Client: [REDACTED]
Agent: [REDACTED]
File Locator: [REDACTED]

MY ITINERARY

| Passengers | Citizenship | Required Travel Documents |
|---------------|---------------|---------------------------|
| NANCY GUEBERT | 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: NANCY GUEBERT

Booking Date: 10/05/2017
File Locator/Ticket #: [REDACTED]

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|------------------------------------|----------|------------------------------------|-------|------|-------|
| AIR CANADA | 08130 | CALGARY INTL 10/31/2017 7:15AM | | EDMONTON INTL 10/31/2017 8:13AM | G | | |
| AIR CANADA | 08149 | EDMONTON INTL 10/31/2017 3:25PM | | CALGARY INTL 10/31/2017 4:19PM | G | | |