

Official Administrator and Executive Expense Report

Name	Penny Rae
Title	Chief Information Officer
Location	Calgary
Expenses	submitted during the month of Aug 2014

							Travel (1)				ļ		
Date	Source Document	Purpose	А	irfare	Me	eals	Accommodation	Other Travel	Tot	al Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
		Meetings		949						949			
Aug-1	4 Expense Claim	Meetings				62				62			
Total			\$	949	\$	62	\$ -	\$	- \$	1,011	\$ -	\$ -	\$

Maximum daily single meal expense claimed in the month	\$ 21
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



P-Card details Online ® Cardholder Statement Report

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Statement o		ona		Senters.		11.12.10		
	Trans ID	Merchant Name & Description	Trans Original	Currency	Trans	Amount	GST	FreighDescription
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P-Card details Online ® Cardholder Statement Report

Signatures		
Cardholder Designate (if Applicable)		
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Program User Guide and Training, I have a	conciled this statement in BMO Online to the best of my abilit illocated the transaction(s) to the proper cost centre.	y in accordance to AHS Corporate Policies
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Name of Capenoider Designate	Cardholder Designate Position/Title	
Saun Ana	nd tuquet de	2014
Signature of Cardholder Designate	Date of Signature	1
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 I attest that I have read and understand the 	"Travel, Hospitality and Working Session Expense Policy (11 with such policy	22)" of Alberta Light Province and an E-
	the bach pondy.	
 I attest the expenses enclosed in this claim 	are for valid business purposes for Alberta Health Services a	nd that this claim has not been previously
charged is attached.	Health Services or any other Organization. A personal chequ	te for any personal expenses inadvertently
 I attest that expenses submitted in this clair 	n have been incurred by using a cost effective method, other	vice relievels and successful to the state
provided RAE, PENELOPE		wise rationale and supporting analysis is
Name or Cardholder	CHIEF INFORMATION OFFICER	
PL.	Cerdholder Position/Title	
ane_	tuquet as	6,2014
Signature of Carditolder	Date of Signature	
Approver Designate (if Applicable)		
By signing this statement		
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expenses being claimed are in compliance	with such policy.	22) of Alberta Health Services and confirm
 I attest the expenses enclosed in this claim 	are for valid business purposes for Alberta Health Services ar	1
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provided.	have been incurred by using a cost effective method, otherw	rise rationale and supporting analysis is
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Signature of Approver	Date of Signature	20
work approved statement with attachments to		
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Attach:	and a state of the	Address:
where required	umented business reasons including names of participants	
		Alberta Health Services
 Signed Cardholder Statement Report (or copies And where applicable; 	of electronic signatures if signatures are not on report)	Accounts Payable
Copies of pre-approvals for travel		7th Street Plaza 10th Floor, North Tower, 10030-107 Street
 Personal cheque payable to "Alberta Health Ser 	vices"	Edmonton, AB T5J 3E4
 Return, refund and/or credit receipts 		
 Disputes letter 		
 Business reasons for travel require detailed des mach why travel 	criptions ~ include where travelled to, who attended (If	
meal), why travel was necessary and datailed ex	planation of reason.	
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	Reviewed by:	Date:

RUN DATE: 08/22/2014

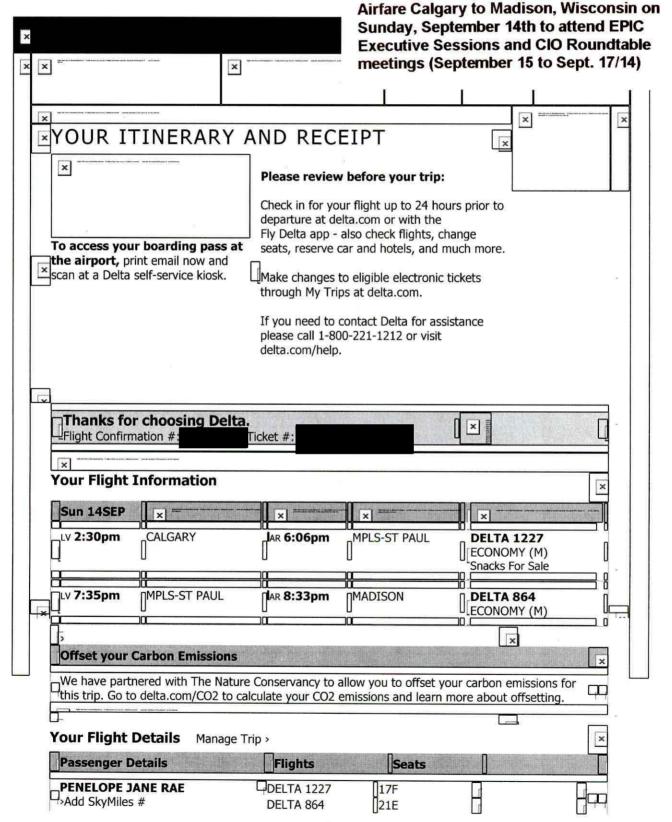
Alberta Health Services

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PAGE NO: 2

Dawn Rand

From: Sent: To: Subject: Delta Air Lines [DeltaAirLines@e.delta.com] August 06, 2014 2:16 PM Penny Rae PENELOPE J CALGARY 14SEP14



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/NONREFUNDAE	BLE/CHANGE FEE MAY AI	PPLY				
This ticket is non-refundable unless issued at a fully refundable fare. Some fares may not allow changes. If allowed, any change to your itinerary may require payment of a change fee and increased fare. Failure to appear for any flight without notice to Delta will result in cancellation of your remaining reservation.						
	Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply and are displayed in the sections below.					
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Baggage Fees				
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Airline Rule Origin Applied	Destination	× Baggage	×	Tax XTotal

Sun 14 Sep	2014				a and a strend at the second		
DELTA	YYC	MSP		\$25 FIRST	\$35 SECOND	50.00	\$60.00
DELTA	MSP	MSN		FREE	FREE	\$0.00	\$0.00
Visit de	lta.com fo	r details on t	baggage emb	argos that m	ay apply to y	our itinerary.	\$60.00

1:On Delta-operated flights, you may carry on one bag and a small personal item free of charge. Carry-on allowances may differ and fees may apply for flights operated by carriers other than Delta. Contact the operating carrier for detailed carry-on limitations and charges.

BusinessElite/First/Business Class weight allowance reverts to 50 lbs for all checked bags beyond the regular free allowance. Travelers to/from Key West, Florida are limited to one checked bag.

At the time of check in with Delta for Delta-marketed and Delta-operated flight(s) (including Delta connection), SkyMiles Medallion® members, SkyTeam Elite & Elite Plus and active US Military personnel are eligible for fee waivers and other benefits. For more details, visit delta.com/baggage.

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A standard checked bag with Delta may be up to 50 lbs and 62 linear inches (per piece). Additional fees apply for oversize, overweight, and/or additional pieces of checked baggage. Please review Delta's baggage guidelines for details. Weight and size restrictions may vary when checking baggage on carriers other than Delta. Contract the operating carrier for detailed checked baggage allowances. You must be checked in at the gate by the applicable check-in deadlines or your reservation may be cancelled. Please review Delta's check-in requirement guidelines for details. Check-in requirements vary by airline, so if your ticket includes travel on other airlines, please check with the operating carrier on your ticket.

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Air transportation on Delta and the Delta Connection[®] carriers is subject to Delta's conditions of carriage. They include terms governing for example:

- Limits on our liability for personal injury or death of passengers, and for loss, damage of delay of goods and baggage.
- Claim restrictions including time periods within which you must file a claim or bring action against us.
- Our right to change terms of the contract.
- Check-in requirements and other rules established when we may refuse carriage.
- Our rights and limits of our liability for delay of failure to perform service, including schedule change,

Page 1 of 3

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OP	TRAVELI	NG WITH US	SKYMILES®	Search		(0)

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Flight Confirmation Number:

YOUR PURCHASE IS COMPLETE. THANKS FOR CHOOSING DELTA.

WHAT'S NEXT

Now that you've finished booking your trip:

- Your e-Tickets, confirmations, receipts, and flight notifications will be emailed to you at penny.rae@albertahealthservices.ca.
 Obtain your receipt for Trip Extras purchased by selecting Email Receipts below. If you purchased a Delta 24 Hour Wi-Fi Pass your receipt will be sent from Gogo[®].
- Visit My Trips to access your itinerary, manage your flight online and purchase Trip Extras.
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Email Receipts Get Notifications Add to Calendar INT CONFIRMATION OUTBOUND Sun, 14 Sep 2014 | 2:30PM YYC to 8:33PM MSN | 1-Stop | DL 1227 , DL 864 -Show Details 2:30PM YYC 8:33PM MSN 1-Stop 5 hr 03 min DL 1227 Economy (M) MSP 1h 29m Layover DL 864 Economy (M) **Complete Delta Air Lines Baggage Information**

In-Flight services and amenities may vary and are subject to change.

PASSENGER DETAILS

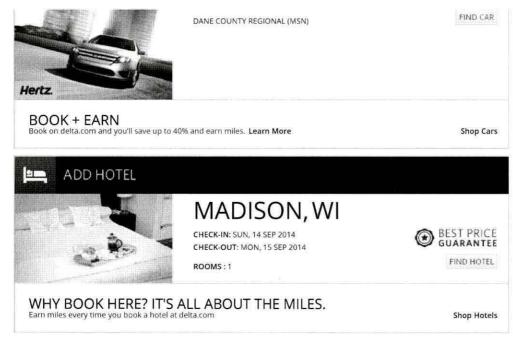
From	То	Seat Assignment	(e.g.Wheelchair)	Trip Extras
Calgary, AB (YYC)	Minneapolis/St Paul, MN (MSP)	17F Change Seats	Add/Edit	
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¹On Delta operated flights, you may carry on one bag and a small personal item at no charge. Carry-on allowances may differ and fees may apply for flights operated by carriers other than Delta. Contact the operating carrier for detailed carry-on limitations and

charges.



https://www.delta.com/booking/verifyPurchase.do;jsessionid=WGkFnroAlkcW69s?dispa... 2014-08-06



PAYMENT INFORMATION

Contact	Billing Information	Payee
Telephone numbers	Payment Type	Mrs. Penelope Rae

Designed	TO A CALE OF COMPANY	-		
Passenger	Total Fare	Trip Extras	Total	
Mrs. Penelope Jane Rae	C\$711.94 (CAD)	\$0.0 (USD)	C\$711.94 (CAD)+ \$0.0 (USD)	

TOTAL AMOUNTS CHARGED

Flight:	C\$711.94 (CAD)
Trip Extras:	\$0.00 (USD)1
Trip Protection:	C\$0.00 (CAD)

Total amount charged:

C\$711.94 (CAD) + \$0.00 (USD)¹

Currency Calculator

¹You will automatically be billed in USD for your trip additions.



†↓ Log in To My Delta	Sign Up Now
Not Me SkyMiles#, Email or	Licornamo
Skymiles#, Email of	Username
Password or PIN	



Out of Province Travel Approval

· All travel expenses must be approved in accordance to "Appendix A" of the Alberta Health Services

Travel Policy

Employee Information First Name Last Name First Name Employee Number Penny Rae Bhone Number Reports To Department Office Location Unformation Technology Quarry Park, Calgary Travel Details Purpose of Trip Attendance at the annual EPIC User Group meetings in Madison, Wisconsin (September 14th to September 17th) Destination From To To Madison, Wisconsin 14-Sep-2014 Finance Coding / Accounting Distribution Control Centre / Primary Project Coding Fronce Travel Expense Org Project Coding Out of Province Travel Expense Org Estimate of Expenses Out of Province Travel 101.0005.71125000127 Category Description Amount Accomodation Charge \$128.07 x 3 nights x (1.0970) exchange rate \$421.44 Stife.20 Stife.20 Stife.20 Stife.20 Chifer Expenses (please specify) Aiirport Parking, baggage charges, etc. \$166.20 Currency Coh Usb OrtHER \$2,307.82 Total Estima	 Pre-Approval fr 	orm MUST b	e attached t	to the actual expense	claim							
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Health and Personal information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 33(c) and 34(2) of the Freedom of Information and Protection of Privacy (FOIP) Act, respectively, for the purpose of administering AHS Procure to Pay program.



Dawn Rand

From:	noreply@itinerary.westjet.com on behalf of WestJet Airlines [noreply@itinerary.westjet.com]
Sent:	August 18, 2014 1:04 PM
To:	Penny Rae
Subject:	Reservation Confirmation

Seat Selection on Flight from Edmonton to Calgary on August 20th after attending (1) Quarterly Business Review with Oracle (2) IT Direct Reports / Managers Meeting

Flight from Edmonton to Calgary on August 20th after attending (1) Quarterly Business Review with Oracle (2) IT Direct Reports / Managers Meeting

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Booking	Confirm	ation								
Your reservatio	on code is			E-mail: penny.rae@albertahealthservices.ca						
	rmation on f	lying with WestJet, including bagga	ge fees, please visit <u>Travel Info</u>	2						
Guest										
Mrs. Penelope	Rae	Flight WestJet FF Ticket Number Seat	Edmonton (YEG)-Calgary	(YYC)						
Air Itine	rary Det	ails								
WS3207 Ec		Edmonton, CA Wed 20 Aug, 2014 04:35 PM	Calgary, CA Wed 20 Aug, 2014 05:28 PM		Fare type: Flex Non-stop					
Fare brea	kdown									
Guest type	Base fare per guest		Taxes, fees and charges per guest	Total fare per guest	Number of guests	Total fare				
adult	CAD 172.00	CAD 12.00	CAD 48.18	CAD 232.18	x 1 -	CAD 232.18				
Tax detail	s				Total airfare	: CAD 232.18				

Rate code	Description	Amount
XG	Goods and Services Tax (GST)	CAD 11.06
CA	Air Travellers Security Charge (ATSC)	CAD 7.12
SQ	Airport Improvement Fee (AIF)	CAD 30.00
	Total taxe	s: CAD 48.18

Fare family benefits

YEG-YYC: Flex Seat Sale Benefits

- One complimentary checked bag *
- Fully refundable if cancelled within 24 hours of booking **
- Advanced seat selection \$5-34.50 *
- \$50-57.50 itinerary change fee + applicable fare difference
- \$50-57.50 name change fee
- \$50-57.50 cancellation fee, balance credited toward future WestJet flight purchases ~

- * Not applicable on flights operated by our airline partners
- ** Excluding flights departing within 24 hours of booking
- ~ Non-refundable to original form of payment

Seats			
Regular seat	WS 3207 YEG - YYC Seat 6A Mrs Penelope Rae	\bigcap	CAD 5.00 + CAD 0.25 Tax
·		62	Total Seats: CAD 5.25
Total			
Charged to M	ASTERCARD	(3)	CAD 232.18
Charged to M	ASTERCARD		CAD 5.25
Total			CAD 237.43
WestJet o	ffers		

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- Terms and conditions of carriage, baggage allowances, baggage fees and service fees may differ significantly if you are travelling on one of our <u>airlines partners</u>; it is important to familiarize yourself with the terms and conditions of the airline operating the flight. To view the baggage allowances and fees of our code-share partners, visit our <u>code-share baggage e</u> info page.
- <u>Positive identification</u> is required at check-in. Please ensure the name on the reservation matches the identification for the guest prior to check in.
- Please check in a minimum of 90 minutes prior to scheduled departure for flights within Canada, and 2 hours prior for international flights and flights to the United States.
- Guests are required to be through security and at their departure gate 30 minutes prior to the scheduled departure of their flight.
- Failure to show up for the first flight segment of a scheduled round trip or multi-segment reservation will result in the cancellation of the return segment or remaining segments. The fare paid for these segments will be forfeited and compensation will not be issued.
- For detailed information on your flight visit:
 - Fares, taxes and fees (For change/cancel guidelines, baggage fees, service fees and other taxes and fees)
 - o Baggage allowances (Carry-on, checked, sporting goods, restricted items)
 - Seat selection (How it works, changing your seat and more)
 - Inflight services (Buy on board, up! magazine and more)
 - o <u>Inflight entertainment</u> for information on our live seatback television.
- Carbonzero and WestJet have teamed up to provide you the opportunity to help reduce the effects of climate change and mitigate the greenhouse gas emissions associated with air travel through the <u>purchase of carbon offsets</u>.
- We appreciate hearing about your experience with us. If you would like to provide us with feedback, please see our <u>contact</u> <u>us</u> page and select the give feedback tab. You may also send us a letter at: WestJet Campus, Attention Guest Relations, 22 Aerial Place N.E. Calgary, Alberta Canada T2E 3J1.

Important Legal Notice

Terms and Conditions

Contact Information

If you have questions about your reservation, call WestJet at 1-888-937-8538 (1-888-WESTJET) and have the itinerary number ready. Thank you for choosing WestJet.

WESTJEI	T Bez			RAE/PE 20AUG1	
20AUG	14 FLTS WS	3207	GATE: 4	91 FL	
RAE/PENELO	PE		PNR	SEO	
EDMON	TON, AB	4:35PM	KS YEG	DEPs	YEG
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BOARDING PA CARTE D'EME	ASS		LECTRONIC/ELEC	TRONIQUE UECT	LET DEWADDS

Westjet flight was cancelled due to mechanical difficulties. Credit to be issued by Westjet which will show on next P-Card Statement

New flight booked with Air Canada which will be shown on next P-Card Statement. Alberta Health Services

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

SECTION	A: EMPLO	YEE DETAILS (for AHS Staff C	NLY)	100		and the second	and the second	and the line of the second second	10 - 53
Indical	e N/A in the E	d) and Employee # (i mployee # (E-People loyee and your payro) if your payroll has	not migrat	ed to the New	New E-People payroll system E-People payroll system e # (E-People)		Expense Date From Travel Period from Dut-of-Province Tr	: 19-Aug-14 To 20-	20-Aug-14 Aug-14 (* applicable)
Name: Per						Position (Title):	Chief Information (Officer		and the second
Location:	Quarry Park		Dept: Information	n Technolog	DOFA Leve	il: applicable)	Union:	Busine	ss Phon	Ext:
Employee #	F (E-People):				A CONTRACTOR OF A					Party and a second
SECTION	E: FINANC	E CODING & TO	TAL CLAIM				ale de la companya d La companya de la comp			Anodesian accession and a sec-
CAPITAL	PROJECT	ODING ONLY →	Project N Expenditure	All and the second s	ion	······································		Task Number xpenditure Type		
	Total - Se	ction B: Travel -	Pg 2		Total - S	ection C&D: Other & Fore	ign Expenses -	Pg 3	TOTAL REIMBU	DOCHENT
Pg Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/ Expense	Total Expense	Total Section B	\$62.30
2A 101	0005	71125000069	\$62.30	11					Total Section C&D	
2B				1		· · · · · · · · · · · · · · · · · · ·			Less Cash Advance	
2C 2D									TOTAL CLAIM	\$62.30
NOTE: 1	'his section au	to fills from page 2A	\$62.30 , 28, 2C & 2D			er to enter Coding & \$ Amoun These fields do not automatical		& D		ph
SECTION P	AUTHOR	ZATION			and the second second					
I attest the expenses I eitest that expenses I, by signing this fe	encirced in this clean a submitted in this clean km, attest that I am con Employee SI	re for valid business purposes for have been incurred by using a con optiont to all the above statements GRATUPE:	Alberts Health Services and the d effective method attraction of Alace	d the claun has not shenals and suppor	been providually slatme ting analysis is provided	nnar, being clatmed are in compliance with 4	or any other Organization. Litty and Working Session B Date 25-Aug-		t# 1122	
i attest the rapenses	enclosed in this claim a		Alberta Health Bervices and the	t this cleim has act	been previously cleane	d by the claimant or on their behalf from Albert's Healt	Services or any other Organizat	ton Approved	claim form with receipts should be sent by t	he
	Y (PRINT ONLY			donate and suppor	ang angysis is provided	DOFA Level				
l, by signing the fo	nd, effect that I am con Signatu	pliant to all the above statements	John	ah I	Incolas	Title VPCorpSer	vices + CFO	(Acting)	Date Sept-31	14
						nses being claimed are in compliance with such policy		Ð		
		e to: yand business purposes (c/ /				d by the claimant or on their bohalf from Alberta Healt above	Bervices or any other Organizat	ion		
	Y (PRINT ONLY					DOFA Level	Position #		Phone #	Ext
1, by signing this for	ni, eltest that i are com Signatur	plant to all the above statements	March and			Title			Date	

Health and Personal Information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 33(c) and 34(2) of the Freedom of Information and Protection of Privacy (FOIP) Act, respectively, for the purpose of administering AHS Procure to Pay program

EXPENSE CLAIM DETAILS

	Enter Finance Coding 101 0005	7112500			Emp # (E-	People)								
if expense	s incurred are for multiple FC's please use pages 21 on slip, <u>DO NOT</u> separate any taxes (eq. GST). Se	B,2C,2D (after pg3) a	s there sh			9 08	if more and		the the serve			•	Page 2A
	AND A DESCRIPTION OF A	and any it		os are no	required in	uns secuon	as me	ay are pre-de	termined by t	he system.			iai pages, i	Enter total
SECTION	B: IRAVEL EXPENSES NOTE: If expent	ses do not fi	all into these ca	stegories suc	ch as Hospitality,	Working Ses	sion, Re	location, Contin	uing Education, E	lusiness Insuran	ce go to SECT	ION C		
Select from dro Ensure seperal	pdown (column Prov) where expenses were incurred (Out of N.Ar te lines are used for claim items that differ in Province, US and Out	madon - Into						7			Contraction of the local division of the loc	an a gala an Alberta an Alberta		
	Business Reason for Travel - Detailed Description	Prov, US,			Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column, Further Explanation is REQUIRED in the "Rationale is Required" section on this page									
Date dd-mmm-yy	Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason)	Out of N.Amer	What is travel	Cost Effective	Meai ((Allowance	ORR	lecelpt)	If amount be policy limit	eing claimed i stated in App	s above the pendix "A"	Rental Car/		-
	A description of just "Meeting" will be returned for clarification	where expenses incurred?	related to?	Mathod Used? Y/N	Meal All Meal Type with	Allowance	Most	with Receipt	Airfare	onale is requir		Bus/LRT/ Parking /	Per Diem Allowance	Mileage (km)
19-Aug-14	Carpool to Edmonton after all day meeting in Red Deer in order to attend Quarterly Business Review Mig and IT DR/Mgrs Meeting in	AB	Meeting	Yes	Velue D-\$20.75		Туре		Aniara	Hotel	Taxi	Fuel		
	Edm.		mooning	198	0-320.75	\$20.75	\checkmark							
20-Aug-14	Meats in Edmonton on August 20th while attending Quarterly Business Review Meeting with Oracle and IT Direct Reports/Managers Meeting	AB	Meeting	Yes	A-\$41.55	\$41.55	V	/						
	SUBTOTALS		<u> </u>			\$62,30								Total Kms
	MILEAGE - Business Kilomet	re Rate for	Personally-	Owned Ve	hicia	-	I IIII	- Reference and	Enter Si	0.505 km, \$0.4	7 km OR rat	e per Union	Accomment	
	 details of travel location to & from must be Rates applicable \$0.505 per km for <u>under 6.000km/vr</u> 	e included	above under	the purpose	a of travel colu	mn Aoreement					(See M	lileage details	to the left)	\$0,505
		10.00				is division from					and the second		Mileage \$	
Note	: Total will auto fill into pg 1, Section E, if form compl	leted elect	tronically - A	dditional	pg 2's can be	e found afte	r Page	3		Auto	fills on near	Travel	\$ Subtotal	\$62.30
Rationale	s Required for expenses that are not Cost Eff		-				1			HULU	the on balle	T- TOTAL	INAVEL 3	90%.30
Any analy	sis supporting the method to assess cost effor	ectivenes	s should	be attacl	hed to the c	laim form	<u>)</u>							

documentation) prior to the flight, during the flight and in taxis to and from the airport.