

# **AHS Board and Executive Expense Report**

Name Richard Dicerni
Title AHS Board Member

**Location** Edmonton

Expenses submitted during the month of September 2017

							Travel (1)						
											Professional	Working Sessions Hosting and	
MMM-YY	Source Document	Purpose	Airfa	are	Me	als	Accommodat	ion	Other Travel	otal avel	Development (2)	Hospitality (3)	Other (4)
Sep-17 Sep-17	Expense Claim Direct Bill	Meetings Meetings		883		41	1	76	181	1,105 176			
Total			\$	883	\$	41	\$ 1	76	\$ 181	\$ 1,281	\$ -	\$ -	\$ -

Total for

the Month \$ 1,281

Maximum daily single meal expense claimed in the month \$ 21 Maximum daily base hotel rate claimed in the month \$ 164 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 - AP Pr	ocessing - Internal Use Only	
Vouch	er#	
Naming Cor	nvention:	

# **BOARD MEMBER EXPENSE CLAIM FORM**

SECTION 1: PAYEE INFORMATION											
Name:	Richard [	Dicerni						Expense Month:	e Period	Sep-17	
Address:					Cit	y:					
Province:				Postal Code:			Country		Canada		
Reason for Expense Attendance at Human Resources Committee Meeting in Edmonton on September 13, 2017.											
SECTION	SECTION 2: FINANCE CODING & TOTAL CLAIM										
Description		Corp/BU/O	<u>Location</u> (If applicable)	<u>Functional</u> <u>Centre/Prim</u>		Expe Cy Seconda		10000	Total (Note: This column will a		l auto fill)
Meals (A)		101	0005	7111	0300000		4500	0000		\$41.50	/
Travel Exp	Travel Exp (B+C+E) 101		0005	7111		6221	2000		\$1,063.67	/	
Other (D) 101		0005	7111030000		) 	41090000			\$0.00	,  2  ,	
	TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE \$1,105.17 /										
	SECTION 3: AUTHORIZATION										
l attest that I	have read an	d understand a	II applicable policies tha	t pertain to these expe	enses, and co	onfirm expenses	being clai	med are ii	n complianc	e with such polic	cies.
			n are for valid business r any other Organizatior	56 - 50	ealth Service	es Board and tha	at this clair	n has not	been previo	ously claimed by	me or on
l attest that e	xpenses subn	nitted in this cl	aim have been incurred	by using a cost effectiv	ve method, c	therwise ration	ale and su	pporting a	analysis is pr	ovided below.	
Claimant (P	100		3 8 8	signing this form, attest that	- 8			Date		Phone#	
Richard D	icerni		Seea	H. email.	forap	probal		N90	F.10610.		
l attest that I	have read an	d understand a	II applicable policies of t	hat pertain to these ex	kpenses, and	confirm expens	ses being c	laimed ar	e in complia	nce with such po	olicies.
l attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.											
attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided below.											
Approved by (Print Name)  Linda Hughes  Position Title/Program Group  Board Chair											
Signature:	by signing this	form, attest that I	am compliant with all the ab	ove statements					Date √√ - :	20/17	
Health and Pers	ealth and Personal information on this form is collected by AHS under the authority of section 20(b) of the Health Information of Privacy (FOIP) Act, respectively, for the purpose of administering										

For payment please subm Deborah Rhodes, VP Corporate Services & CFO Position #: DOFA Level:

14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmc

Created: November 01, 2013 Rev 11 eff April 07, 2017

Carry fo	Carry forward from Section 1						
Name:	Richard Dicerni	Expense Period Month:	Sep-17				

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 below

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

#### SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

The Board Members follow the Government of Alberta (GOA) Travel, Meal and Hospitality Expenses Policy

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates (Appendix C for USA, Appendix D for International).

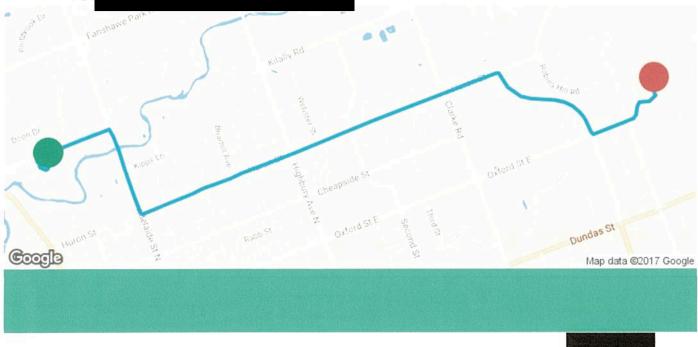
			Meal (A	llowand	e OR Re	ceipt)(A)				
<u>Date</u>	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method	Allowa Within C		Allowan	eceipt <u>or</u> ce Outside nada	Accom- modation	<u>Transportation</u> (Flight, Car Rental, Fuel, Parking, Taxi)	Other (Itemize) (D)	Mileage km (E)
	point, details of expenditure,	used?	Meal Type	Allow- ance	Meal Type	<u>Amount</u>	(6)	(C)	(6)	
12-Sep-2017	Taxi (Uber) to London, ON Airport.	Yes						• \$21.21	/	
12-Sep-2017	Flight from London, ON to Edmonton to attend HR Committee meeting on September 13, 2017.	Yes						• \$466.83	<b>V</b>	
12-Sep-2017	Taxi from YEG to hotel.	Yes	D-\$20.75	\$20.75	1			າ \$60.00	/	
13-Sep-2017	Taxi from hotel to SSP.	Yes						ç \$14.40	V	
13-Sep-2017	Taxi from SSP to YEG.	Yes	D-\$20.75	\$20.75	/			ງ \$55.30	<b>✓</b>	
13-Sep-2017	Flight from Edmonton to Ottawa.	Yes						s \$415.93	<b>/</b>	
13-Sep-2017	Taxi from Ottawa airport to residence.	Yes						a \$30.00	<b>√</b>	
									/	
	Total: (amount auto fills to	page 1)		\$41.50	$\checkmark$	\$0.00	\$0.00	\$1,063.67 🗸	\$0.00	0.00

BOARD MEMBER Mileage Rate 0.505 Total Mileage s

From: Uber Receipts uber.canada@uber.com Subject: Your Tuesday afternoon trip with Uber

Date: Sep 12, 2017, 4:34:28 PM

To:



\$21.21

Thanks for choosing Uber, Richard

September 12, 2017 | uberX

04:11pm | 04:34pm |

You rode with Naser

11.62

00:22:40

uberX

kilometers

Trip time

Car



# Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada.

Please bring your itinerary-receipt to the airport.

### Main Contact Information

**Booking reference:** 

Name:

Mr Richard Dicerni

E-mail:

Payment:

Customer Care Air Canada Reservations 1-888-247-2262

Air Canada Flight Information

1-888-422-7533

International Reservations

Alert me of flight changes Flight notification

# Flight Itinerary

Flight	From	То	Aircraft	Cabin (Booking class)	Status
AC8652	London (ON) (YXU)	Toronto Pearson (YYZ)	DH1	Economy (W)	Confirmed
Operated by:	Tue 12-Sept 2017	Tue 12-Sept 2017			
Air Canada Express- Jazz	17:45	18:27 - TERMINAL T1			
Seat number(s) requ	ested: 1C				
AC173	Toronto Pearson (YYZ)	Edmonton International (YEG)	320	Economy (W)	Confirmed
	Tue 12-Sept 2017	Tue 12-Sept 2017			
	19:25 - TERMINAL T1	21:34			
	ested: 12C				

# **Passenger Information**



466.83

Passenger: 1

Mr Richard Dicerni

Ticket number:

Frequent Flyer Pgm:

Air Canada Aeroplan

Program number:

### **Purchase Summary**

# Passenger: 1 Ticket number

Date of issue08-Aug 2017Fare Amount in Canadian dollars:387.00(including navigational & other charges)387.00Taxes, Fees & Charges5Air Travellers Security Charge (CA)7.12Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001) (RC)53.71Airport Improvement Fee - Canada (SQ)19.00

#### **Total Fare in Canadian dollars:**

Ticket particularities: AC ONLYF/NONREF/CHGE FEE

-BG:AC

\*Fare calculation:

12SEP17YXU AC X/YTO AC YEA Q23.00R364.00CAD387.00 END ROE1.00

Canadian tax registration numbers:

XG Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)

RC Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001)

XQ Canada Quebec Sales Tax (QST #1000-043-172 TQ1991)

#### Fare Rules Summary

- · Voluntary changes to your itinerary may require the payment of additional fees and fare upgrades.
- If you are travelling on a non-refundable ticket, Air Canada will be unable to make exceptions in the event of an unexpected trip
  cancellation or medical emergency. We recommend the purchase of travel insurance.
- · Tickets are non transferable.
- Seat selection charges are per passenger and apply to each individual one-way flight segment in your itinerary. Flight segments are identified by a change in flight number, with each new flight number representing a flight segment. Taxes are not included.
- Please note that you may be moved from your selected seat without notice in the event of an involuntary schedule or airport
  change (e.g. flight disruption, cancellation), to accommodate a passenger with a disability, or for any other reason that requires
  Air Canada to move you prior to departure or during the flight. If you are moved from your seat for one of these reasons, you
  may request a refund for your seat charges. We invite you to read additional terms and conditions related to seat selection

Please read important information and notices regarding Air Canada's general conditions of carriage.

### **Baggage Information**

Please see below for details on the bags you plan on checking at the baggage counter.

SERVICE
10135 31 AVE NW
EDMONTON AB

CARD TYPE AMEX
DATE 2017/09/12
TIME 2340 22:02:25
INVOICE #
RECEIPT NUMBER

PURCHASE
AMOUNT \$55.00
7 1P \$5.00
TOTAL

GREATER EDMONTON TAX
SERVICE
10135 31 AVE NW
EDMONTON AB

CARD TYPE AME AME A 2017/09/13 TIME 5077 07:54:46 NVOICE # RECEIPT NUMBER

\$14.40

\$12.40

\$2.00

SERVICE
10135 31 AVE NW
EDMONTON AB

CARD TYPE AIMEX
DATE 2017/09/13
TIME 2465 11:51:25
INVOICE #
RECEIPT NUMBER

PURCHASE
AMOUNT \$49.80
TIP \$5.50

\$55.30

AMERICAN EXPRESS

# APPROVED

THANK YOU

ARDHOLDER COPY

COPY FOR YOUR RECORDS

CAPITAL 780.423.2425 24.7 TAXI 780.442.4444 EDMIA-I.COM GST 100403070



# **APPROVED**

AUTH# THANK YOU

MOUNT

OTAL

IP

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.345 BARREL TAX! 780.489.77



# APPROVED

AUTH# THANK

CARDHOLDER COPY

COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456
BARREL TAXI 780.489.7777
EDMTAXI.COM
GST 100403070





# Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada.

Please bring your itinerary-receipt to the airport.

#### Main Contact Information

Booking reference

Name:

Mr Richard Dicerni

E-mail:

Payment:

**Customer Care** Air Canada Reservations 1-888-247-2262

Air Canada Flight Information

1-888-422-7533

International Reservations

Alert me of flight changes

Flight notification

Flight Itinerary

Obtain revised receipt & charge

To Aircraft Cabin Status From Flight (Booking class) E90 Confirmed AC364 Edmonton International (YEG) Ottawa (YOW) Economy (G)

Wed 13-Sept 2017

Wed 13-Sept 2017

07:00

12:43

Seat number(s) requested:

#### Passenger Information

Passenger: 1

Mr Richard Dicerni

Ticket number:

Frequent Flyer Pgm:

Air Canada Aeroplan

Program number:

**Purchase Summary** 

Passenger: 1 Ticket number

Date of issue

Fare Amount in Canadian dollars:

09-Aug 2017

359.00



(including navigational & other charges)

Taxes, Fees & Charges

Air Travellers Security Charge (CA) Canada Goods and Services Tax (GST/HST #10009-2287 RT0001) (XG) Airport Improvement Fee - Canada (SQ)

7.12 19.81 30.00

415.93

#### Total Fare in Canadian dollars:

Ticket particularities: AC ONLYF/NONREF/CHGE FEE -BG:AC

\*Fare calculation:

13SEP17YEA AC YOW Q23.00R336.00CAD359.00 END ROE1.00

Canadian tax registration numbers:

XG Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)

RC Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001)

XQ Canada Quebec Sales Tax (QST #1000-043-172 TQ1991)

#### Fare Rules Summary

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- Tickets are non transferable.
- Seat selection charges are per passenger and apply to each individual one-way flight segment in your itinerary. Flight segments are identified by a change in flight number, with each new flight number representing a flight segment. Taxes are not included.
- Please note that you may be moved from your selected seat without notice in the event of an involuntary schedule or airport change (e.g. flight disruption, cancellation), to accommodate a passenger with a disability, or for any other reason that requires Air Canada to move you prior to departure or during the flight. If you are moved from your seat for one of these reasons, you may request a refund for your seat charges. We invite you to read additional terms and conditions related to seat selection

Please read important information and notices regarding Air Canada's general conditions of carriage.

#### **Baggage Information**

Please see below for details on the bags you plan on checking at the baggage counter.

Baggage Information for: Richard Dicerni

Air Canada baggage rules apply. 1st bag: Complimentary

For flight(s): AC364 2nd bag: 35.00 CAD + taxes\* per direction

Max. weight per bag: 23 KG (50 lb) Max. linear dimensions: 158 CM (62 in)

<sup>\*</sup> For travel within Canada or between Canada and the United States, a Canadian tax of \$3.00 CAD may apply to bags fees. For travel between Canada or the United States and Mexico, the Dominican Republic and Barbados, an applicable local sales tax of \$4.00 CAD may apply to bag fees. For all other itineraries to/from Mexico, the Dominican Republic and Barbados as well as itineraries to/from South America, an applicable local sales tax of \$21.00 CAD may apply to bag fees. All above tax amounts are based on the maximum applicable tax amounts per itinerary type. Actual amounts may vary and will be charged in the currency



# **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 subother see have assessed assest in this costing for this costing of

•	indicate whether you have expenses to report in this section for this reporting period:	YES

Name:	Richard Dicerni	Reporting Period for the Month of: Sep-17

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
12-Sep-2017	Direct Billing	Hotel	One night accommodation to attend Human Resources Committee Meeting on September 13, 2017 in Edmonton.	Other	175.68
	Direct Billing	Choose from Drop-down List		Other	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	5
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	5
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	5
Total Paid in the	Month				\$ 175.68

The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7

Canada

Tel: 780-426-3636 Fax: 780-428-1454

WESTIN

HOTELS & RESORTS

Invoice Nbr

Richard Dicerni

Page Number :
Guest Number :
Folio ID :
Arrive Date :
Depart Date :

12-SEP-17 22:09 13-SEP-17 14:01

No. Of Guest : 1

Club Account AR Account

Room Number

Copy Invoice

Tax ID: 815461330RT0001

The Westin Edmonton OCT-11-2017 14:55

Date Poference	Description	Charges (CAD)
12-SEP-17	Room Charge	164.00
12-SEP-17	Destination Marketing Fee	4.92
12-SEP-17	Tourism Levy	6.76
13-SEP-17	American Express	

PIN Verified

-175.68

Credits (CAD)

Approve EMV Receipt for AX

Application Label: AMERICAN EXPRESS

Continued on the next page