

# **AHS Board and Executive Expense Report**

Name Robert Hawes

**Title** Chief Program Officer Finance

**Location** Calgary

Expenses submitted during the month of August 2018

							Travel (1)										
														Working			
														Sessions			
										_			ofessional	Hosting an			
	Source	_						Oth			otal	De	velopment	Hospitality	<b>'</b>	Other	
MMM-YY	Document	Purpose	Airfar	<del>)</del>	Meals		Accommodation	Trav	vel	Tr	avel		(2)	(3)		(4)	
A 10	Francisco Obstan				0.1	_			20		105						
Aug-18	Expense Claim	Meetings			8!	5			20		105						
Aug-18	Direct Billing	Meetings					341		275		616						
Total			\$	-	\$ 8	5	\$ 341	\$	295	\$	721	\$	-	\$	- \$		-

Total for

the Month \$ 721

Maximum daily single meal expense claimed in the month \$ 24 Maximum daily base hotel rate claimed in the month \$ 159 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 Expense Claims**

Claimant Name		Claimant Location	Expense Claim Total									
HAWES, ROBERT	Chief Program Officer, Finance	Calgary	\$ 105.00									
Expense Date	Business reason		Expense	Expense Type	Amount	_	То	Justification		# of	Attendee	1
			Location			Location	Location		days	Attendees	Name(s)	Distance
8/7/2018	To attend staff meeting in Edmor	nton	AB - Other	Parking - Lot or	\$ 10.00			To travel to Edmonton via Red Arrow, parking in	1			
			Zones	Parkade				lot.				
8/7/2018	To attend staff meetings and AHS Meeting	S Board	AB - Other Zones	Meals Per Diem	\$ 24.00			To attend staff meetings and AHS Board Meeting. Accommodation & Red Arrow direct billed. Dinner \$24.00	1			
8/8/2018	To attend staff meetings and AHS Meeting	S Board	AB - Other Zones	Meals Per Diem	\$ 37.00			To attend staff meetings and AHS Board Meeting. Accommodation & Red Arrow direct billed. Lunch \$13.00 Dinner \$24.00	1			
8/30/2018	To attend Labour Relations Meet Edmonton.	ing in	AB - Other Zones	Parking - Lot or Parkade	\$ 10.00			To attend Labour Relations Meeting in Edmonton, travel via Red Arrow, parked in lot.	1			
8/31/2018	To attend Labour Relations Meet	ing	AB - Other Zones	Meals Per Diem	\$ 24.00			To attend Labour Relations Meeting in person. Dinner \$24.00	1			
Approver(s) fo	or the claim	Approval	Status	Approval Date		•	•			•	•	•

RHODES, DEBORAH

Approve

5-Sep-18

From:

Robert Hawes

Sent:

August 08, 2018 6:56 PM

To:

Subject:

FW: Red Arrow Itinerary/Receipt

attached is parking. you should have bus.

the matrix should have been emailed to email on file as requested on check out. I didn't get it so hope you did. per dierm T dinner, W lunch & dinner.

From: Red Arrow Reservations [itinerary@redarrow.ca]

Sent: August 7, 2018 6:00 PM

To: Robert Hawes

Subject: Red Arrow Itinerary/Receipt



# ITINERARY/RECEIPT

2018-08-07

You can reach us at:

Red Arrow - CNS

Central Reservations: 1-800-

232-1958

sales@redarrow.ca

ROBERT HAWES	

ORDER# ORDERED CUSTOMER#	ROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
2018-08-	m Chin	2018-08-07	2018-08-08		

Travellers:

HAWES/ROBERT

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
Parking Per Day	2 days	Per Day Parking	1	\$ 9.52	\$ 10.00
2018-08-07 until 2018-08-08 (2 days)					

Payments Received	<b>Base Price:</b>	\$ 9.52
DATE GUEST REFERENCE AMOUNT	Discounts:	\$ 0.00

2018-08- 07	customer: ROBERT HAWES	Visa	\$ 10.00	Service Charges:	\$ 0.00
				GST:	\$ 0.48
				Invoice Total:	\$ 10.00
				Payments Received:	\$ 10.00
				Balance Due:	\$ 0.00

# PLEASE NOTE THAT A PAPER TICKET IS NOT REQUIRED FOR CHECK-IN. PLEASE CHECK IN 15 MINUTES PRIOR TO DEPARTURE

TERMS: DUE UPON RECEIPT GST# BN139981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to time change, date change, or cancel for a full refund – 30 minutes notice prior to A.M departures; 3 hours notice prior to P.M. departures must be given. December 15 - January 5 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. \*\*Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices\*\* \*\*Red Arrow reserves the right to check l.D. or perform carry-on baggage checks at any time\*\* Corporate Billing Accounts: Payment due 30 days after completion of trip.

If you wish to change or cancel your booking, please contact a Passenger Experience Representative at 1-800-232-1958

Thank you for booking with Red Arrow Motorcoach. We appreciate your business!

Our Core Values: Safety | Customer Service | Resourcefulness | Integrity | Positive Attitude | Team Work | Loyalty | Accountability | Respect | Dedication

From:

Robert Hawes

Sent:

August 31, 2018 5:06 PM

To:

Subject:

iwa: Red Arrow Itinerary/Receipt

Robert Hawes, CA Chief Program Officer Finance

# Begin forwarded message:

From: Red Arrow Reservations < itinerary@redarrow.ca>

Date: August 30, 2018 at 6:14:36 PM MDT

To: Robert Hawes

Subject: Red Arrow Itinerary/Receipt



# ITINERARY/RECEIPT

2018-08-3

You can reach us a

ROBERT HAWES

Red Arrow -

Central Reservations: 1-800 232-195

sales@redarrow.c

ORDER# ORDERED CUSTOMER#	P.O. GROUNAM	DEPARTING	RETURNING	SALES SALES REP AGENT
2018-08-		2018-08-30	2018-08-31	DAWN

Travellers:

### HAWES/ROBERT

PRODUCT DESCRIPTION DURATION OCCUPANCE	
PRODUCT DESCRIPTION DURATION OCCUPANCE	Year Chi Yali - Mada
	E RESERVE TO THE RESERVE TO THE PROPERTY OF TH

\$ 10.0

				Base Price:	\$ 9.52
				Discounts:	\$ 0.00
Payments <b>K</b>	Received			Service Charges:	\$ 0.00
DATE	GUEST	REFERENCE	AMOUNT	GST:	\$ 0.48
2018-08- 30	customer: ROBERT HAWES	Visa	\$ 10.00	Total:	\$ 10.00
				Payments Received:	\$ 10.00
				Balance	\$ 0.00

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TERMS: DUE UPON RECEIPT GST# BN139981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to time change, date change, or cancel for a full refund – 30 minutes notice prior to A.M departures; 3 hours notice prior to P.M. departures must be given. December 15 - January 5 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. \*\*Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit <a href="www.redarrow.ca">www.redarrow.ca</a> or view the policy posted on our information boards at our Ticket Offices\*\* \*\*Red Arrow reserves the right to check I.D. or perform carry-on baggage checks at any time\*\* Corporate Billing Accounts: Payment due 30 days after completion of trip.

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# **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	er you nave expenses to report in this s	ection for this reporting period:	YES	
Name :	Robert Hawes	Reporting Period for the	e Month of: Aug-18	

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
7-Aug-2018	Direct Billing	Other Transportation	Red Arrow Return, Calgary to Edmonton return	Marlin Travel	137.52
7-Aug-2018	Direct Billing	Hotel	Matrix reservation one night	Marlin Travel	170.32
30-Aug-2018	Direct Billing	Other Transportation	Red Arrow Return, Calgary to Edmonton return for Labour Relations Meetings	Marlin Travel	137.52
30-Aug-2018	Direct Billing	Hotel	Matrix reservation one night for Labour Relations Meetings	Marlin Travel	170.32
Total Paid in the	Month	1			\$ 615.68



# Invoice

ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON, AB T5J 3E4 CANADA Trip #:

Booking Date: 16 Aug 18

Client:
Agent:

File Locator:

PASSENGERS:

ROBERT HAWES

REFERENCE/ DESC	RIPTION			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	L
RED ARROW Confirmation #  HOTEL MISC VOUCHERS Confirmation #				137.52	0.00	\$0.00	0.00	0.00	137.52 CA	CAE
			159.00	0.00	\$0.00	0.00	0.00	159.00	CAD	
			Total:	296.52	0.00	0.00	0.00	0.00	296.52	CAE
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	of Pavment			Amount	
		08/01/2018						= 00	137.52	CAD
							Total Pa	yment:	137.52	CAD
					В	alance Du	e CAD Cur	rency	159.00	CAE
						Pay	ment Due	Date:	16 Au	ıg 18
				Total GS	ST.	0.00	Tota	I HST	\$0.00	

ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON, AB T5J 3E4 CANADA

Trip #: **Booking Date:** Client: Agent:



File Locator:

To:

# MY ITINERARY

Passengers ROBERT HAWES Citizenship

**Required Travel Documents** 

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



# **RED ARROW**

**Booking Date:** Passengers: **ROBERT HAWES** File Locator/Ticket #: Class/Seat Airline **Flight** From **Terminal** Stops VISTARA AIRLINES CALGARY INTL **EDMONTON INTL** 07 Aug 18 6:45PM 07 Aug 18 10:15PM



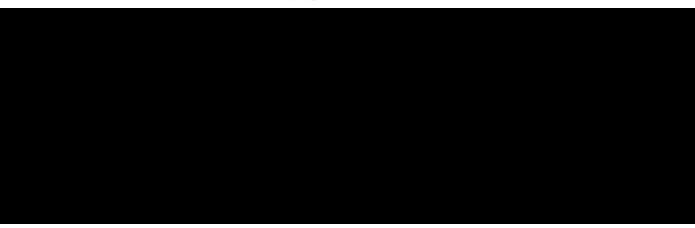
# **RED ARROW**

**Booking Date:** 01 Aug 18 **ROBERT HAWES** File Locator/Ticket #: Passengers: 07 Aug 18

**RED ARROW** 

From: City

Room Type: Svc Type Occupancy





AB Health Services Accounts Payable



Guest Name: Hawes, Robert A Cost Centre: 101.0005.71115000025

AHS Contact:

Room No. Arrival Departure

Folio No.

: 08-07-18 : 08-08-18

: 08-08-18 :





### INVOICE

Date	Description		Charges	Credits
08-07-18	Room Revenue		159.00	
08-07-18	Destination Marketing Fee		4.77	
08-07-18	Tourism Levy		6.55	
		Total Charges	170.32	
		Total Credits	170.32	0.00
				0.00
		Balance		170.32

Page No. 1 of 1

# ALBERTA HEALTH SERVICES - VISION TRAVEL 10030 107 STREET

EDMONTON, AB T5J3E4

Corporate Sales

ORDER#	ORDERED	CUSTOMER#	P.O.	GROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
	2018-08- 17				2018-08- 30	2018-08-31	-	Website User

Travellers:

# Hawes/robert

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
CALEDM 18:30 YYC.	3 hrs 30 mins	Adult	1	\$ 72.38	\$ 68.76
Assigned to: 04A Departs Calgary (CGYNORTH / CNS					
304 35 Ave NE) at 18:45 on 2018-08-30.					
Arrives Edmonton (EDMTO / ETO					
10014 104 St) at 22:15 on 2018-08-30. (3					
hrs 30 mins)					

ECEXP 16:30.

3 hrs 5 mins

Adult

1

\$ 72.38

\$ 68.76

Assigned to: 05A

Departs Edmonton (EDMTO / ETO 10014 104 St) at 16:30 on 2018-08-31. Arrives Calgary (CGYNORTH / CNS 304 35 Ave NE) at 19:35 on 2018-08-31.

(3 hrs 5 mins)

<b>Payments</b>	Received
1 ayıncıns	necereu

DATE	GUEST	REFERENCE	AMOUNT
2018-08-	Robert	MasterCard	\$ 137.52
_17	Hawes		\$ 137.32

<b>Base Price:</b>	\$ 144.76
Discounts:	\$ 7.24
Service Charges:	\$ 0.00
Invoice Total:	\$ 137.52
Payments Received:	\$ 137.52
Balance Due:	\$ 0.00



**Robert A Hawes** 

Room No.

•

Arrival

: 08-30-18

Departure Date

: 08-31-18

Folio No. Conf. No.

P.O. No.

Company Name: AHS - Vision/Marlin Travel

Group Name:

# INVOICE

Date	Description	Charges	Credits
08-30-18	Room Revenue	159.00	
08-30-18	Destination Marketing Fee	4.77	
08-30-18	Tourism Levy	6.55	
08-31-18	Visa		178.51
09-07-18	VISa		-8.19
	Refund		

 Total Charges
 170.32

 Total Credits
 170.32

 Balance
 0.00

Merchant ID Transaction ID Approval Code Approval Amount

178.51

Merchant ID Transaction ID Approval Code Approval Amount

-8.19

Credit Card #

Capture Method
Transaction Amount

Swiped 178.51

Credit Card #

Capture Method Transaction Amount Manual -8.19

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