

Official Administrator and Executive Expense Report

Name Dr. Rollie Nichol
Title Associate Chief Medical Leadership, Workforce & Medical Affairs
Location Calgary

Expenses submitted during the month of December 2014

Travel (1)										
Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Dec-14	P-Card	Meetings	1,414		184		1,598			
Dec-14	Expense	Meetings	818	167	1,082	218	2,285			134
Total			\$ 2,232	\$ 167	\$ 1,266	\$ 218	\$ 3,883	-	-	\$ 134

Total for the Month \$ 4,017

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ 194
 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.

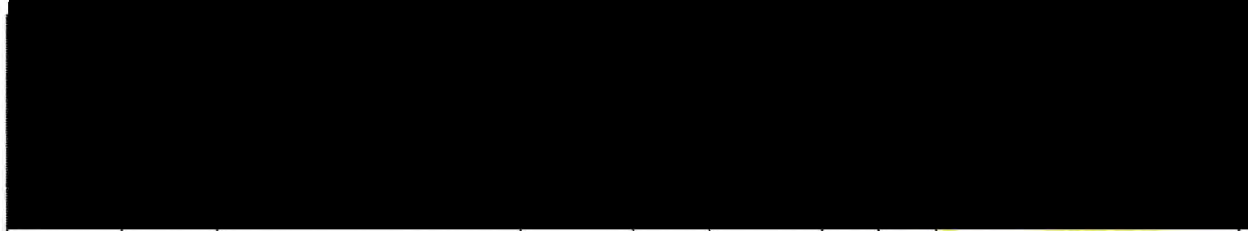
Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report

Instruction:

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

RAMSTEAD, DEBRA Cardholder's Name	EXECUTIVE ASSISTANT Cardholder's Position/Title	Billing Reporting Period: 20/12/2014
PROVINCIAL MEDICAL AFFAIRS Cardholder's Dept	CALGARY SOUTHPORT Cardholder's Site/Location	Total Statement Amount: \$7,390.12 \$1598.21
DEBRA.RAMSTEAD@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address	Last 6 digits of the P-Card #: XXXXXXXXXX	

Statement of Transactions									
Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description	
19/11/2014	371766737	AIR CAN , AIR CANADA	190.18	CAD	190.18	.00	.00	R. Nichol Sponsorship Mtg Edmonton Dec 16	1
[REDACTED]									
24/11/2014	372308388	AIR CAN , AIR CANADA	224.83	CAD	224.83	.00	.00	R. Nichol mtg cancelled. Credit issued for flight	3
24/11/2014	372308389	AIR CAN , AIR CANADA	213.28	CAD	213.28	.00	.00	R. Nichol mtg cancelled. Credit issued for flight YYC to YEG	4
24/11/2014	372308390	AIR CAN , AIR CANADA	15.75	CAD	15.75	.00	.00	R. Nichol AHS Change Management Strategy mtg cancelled due to winter storm. Seat selection	5
[REDACTED]									
25/11/2014	372516246	AIR CAN AIR CANADA	190.18	CAD	190.18	.00	.00	R. Nichol attend PPEC and Clinical Asst. Negotiations Edmonton Dec 3	8
25/11/2014	372516247	AIR CAN AIR CANADA	190.18	CAD	190.18	.00	.00	R. Nichol PPEC and Clinical Asst. Negotiations Dec 3 Edmonton	11
25/11/2014	372516248	AIR CAN AIR CANADA	15.75	CAD	15.75	.00	.00	R. Nichol PPEC and Clinical Asst. Negotiations Dec 3 Edmonton seat selection	9
[REDACTED]									
04/12/2014	373330305	AIR CAN AIR CANADA	-15.75	CAD	-15.75	.00	.00	R Nichol PPEC and Clinical Assistants Negotiations Edm Dec 3 credit seat selection fee	10
[REDACTED]									
12/12/2014	374415893	AIR CAN , AIR CANADA	284.68	CAD	284.68	.00	.00	R. Nichol Sponsorship Mtg CPSA/AMA Edmonton Dec 16	21
[REDACTED]									



24
25
26
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30

17/12/2014	374871294	AIR CAN	AIR CANADA	52.50	CAD	52.50	00	OCR Nichol Sponsorship Mtg Edm Jan 6
17/12/2014	374871295	AIR CAN	AIR CANADA	52.50	CAD	52.50	00	OCR Nichol Sponsorship Mtg Jan 6 Edmonton
18/12/2014	374871296	THE WESTIN EDMONTON, WESTIN HOTELS		184.13	CAD	184.13	27.62	OCR Nichol Sponsorship Meeting Dec 16 Edmonton

Signatures

Cardholder Designate (if Applicable)

By signing this worksheet:

- I certify that I have read and understand the Terms, Conditions and Spending Policies (11/27) of Alberta Health Services and certify that the amount being charged on this card complies with such policy.

Signature: _____ Date: _____

Cardholder

By signing this statement:

- I certify that I have read and understand the Terms, Conditions and Spending Policies (11/27) of Alberta Health Services and certify that the amount being charged on this card complies with such policy.
- I certify that all expenses charged on this card are for the valid business purposes for Alberta Health Services and that the card has not been used for any other purpose, including but not limited to:
- Personal expenses
- Travel that is not required for business and has been funded by a non-Health Services department
- Other

Signature: D. Namstead Date: 19 Dec 2014

Approver Designate (if Applicable)

By signing this worksheet:

- I certify that I have read and understand the Terms, Conditions and Spending Policies (11/27) of Alberta Health Services and certify that the amount being charged on this card complies with such policy.
- I certify that all expenses charged on this card are for the valid business purposes for Alberta Health Services and that this card has not been used for any other purpose, including but not limited to:
- Personal expenses
- Travel that is not required for business and has been funded by a non-Health Services department
- Other

Signature: _____ Date: _____

Approver

By signing this statement:

- I certify that I have read and understand the Terms, Conditions and Spending Policies (11/27) of Alberta Health Services and certify that the amount being charged on this card complies with such policy.
- I certify that all expenses charged on this card are for the valid business purposes for Alberta Health Services and that this card has not been used for any other purpose, including but not limited to:
- Personal expenses
- Travel that is not required for business and has been funded by a non-Health Services department
- Other

Signature: Dr. Verma Hing Date: Dec 29/14

Bank approved statement (with attachments to Accounts Payable)	
<p>Attach:</p> <ul style="list-style-type: none"> Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) Original cardholder statement (with signature and date) 	<p>Address:</p> <p>Alberta Health Services Accounts Payable 200 Street Plaza Calgary, Alberta, Canada T2C 5G8</p>
<p>Accounts Payable only:</p>	

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



R. Nichol Sponsorship Mtg
Edmonton Dec 16, 2014
Airfare YYC to YEG

Booking Information

Booking Reference: [REDACTED]

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Main Contact:
Mr Rowland Nichol
debra_ramstead@albertahealthservices.ca
Mobile: [REDACTED]
Home: [REDACTED]
Work: [REDACTED]

Customer Care

Air Canada
1-888-247-2262

Flight Arrivals and Departures
1-888-422-7533

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8856 ¹	Calgary (YYC) Mon 15-Dec 2014 19:00	Edmonton, Edmonton Int'l (YEG) Mon 15-Dec 2014 19:55	0	0hr55	DH3	Flex, G	

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Mr Rowland Nichol : Adult (16+), Ticket Number: [REDACTED]

Air Canada - Aeroplan [REDACTED] Meal Preference: None
Payment Card: [REDACTED] Special Needs: None
Seat Selection: AC8856 5C

Purchase Summary

Fare Summary

Passenger Type	Adult
Air Transportation Charges	
Departing Flight - Flex	132.00
Surcharges	12.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	9.06
Air Travellers Security Charge (ATSC)	7.12
Total airfare and taxes before options (per passenger)	190.18
Number of passengers	x 1
Total airfare, taxes and options	190.18
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$190.18

Payment Information

Credit/Debit Card [REDACTED] - Amount paid: \$190.18

The following charges (tax inclusive) will appear on your credit or debit card statement:

- Air Canada: \$190.18 (Airfare - per ticket)

Ticket number(s): [REDACTED]

Fare Rules

Departing Flight Calgary (YYC) To Edmonton (YEG) - Flex

- Changes:

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



Booking Information

Booking Reference: [REDACTED]
 Electronic Ticketing confirmed. This is your official itinerary/receipt.
 Main Contact:
 Mr Rowland Nichol
 debra_ramstead@albertahealthservices.ca
 Mobil [REDACTED]
 Home [REDACTED]
 Work [REDACTED]

Customer Care
 Air Canada
 1-888-247-2262
 Flight Arrivals and Departures
 1-888-422-7533

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8145 ¹	Edmonton, Edmonton Int'l (YEG) Fri 28-Nov 2014 16:30	Calgary (YYC) Fri 28-Nov 2014 17:22	0	0hr52	DH3	Flex, Q	

Operated by:
¹ Air Canada Express - Jazz

Passenger Information

1: Mr Rowland Nichol : Adult (16+), Ticket Number: [REDACTED]
 Air Canada - Aeroplan [REDACTED] Meal Preference: None
 Payment Card: [REDACTED] Special Needs: None
 Seat Selection: AC8145 1C (Preferred) Paid

Congratulations on your selection of a Preferred seat. Please read the Terms and conditions.

Purchase Summary

Fare Summary	
Passenger Type	Adult
Air Transportation Charges	
Departing Flight - Flex	165.00
Surcharges	12.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	10.71
Air Travellers Security Charge (ATSC)	7.12
Total airfare and taxes before options (per passenger)	224.83
Number of passengers	x 1
Total airfare, taxes and options	224.83
Seat Selection	
Mr Rowland Nichol	
AC8145: 1C - Preferred Seat (Aisle)	15.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	0.75
Total including airfare, taxes, options and seat selection charges:	240.58
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$240.58

R. Nichol AHS Change Management Strategy mtg cancelled due to winter storm
 Credit issued for flight.

[REDACTED] EG to YYC

3

R. Nichol AHS Change Management Strategy mtg cancelled due to winter storm
 Credit issued for flight.

[REDACTED] YEG to YYC Seat Selection

5

Payment Information


Credit/ [REDACTED] - Amount paid: \$240.58
 The following charges (tax inclusive) will appear on your credit or debit card statement:
 • Air Canada: \$224.83 (Airfare - per ticket)
 • Air Canada: \$15.75 (Advance Seat Selection - for passenger 1)

Ticket number [REDACTED]

Fare Rules

Departing Flight Edmonton (YEG) To Calgary (YYC) - Flex

- **Changes:**
 - Prior to day of departure - **Change fee** per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
 - **Same-day confirmed changes** at check-in or at the airport are permitted at a flat fee of \$75 CAD/USD per direction, per passenger (subject to availability). Same-day flights only.
 - **Same-day standby** is available **only** to passengers travelling on a flight between Toronto and Montreal or Ottawa (connecting flights excluded), as well as to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
 - Flights can only be used in sequence from the place of departure specified on the itinerary.
 - **Cancellations:**
 - Tickets are **non-refundable** and **non-transferable**.
 - **Cancellations** can be made up to 45 minutes prior to departure.
 - Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.
 - Customers who **no-show** their flight will forfeit the fare paid.
 - **Complimentary advance standard seat selection** on Air Canada and Air Canada Express (operated by Jazz), subject to availability.
 - Up to 24 hours after the purchase of a **new ticket**, Air Canada will cancel your ticket and provide a full refund without penalty.
 - Flights operated by Air Canada: earn 100% Aeroplan Miles (Altitude Qualifying Miles)
 - Read complete fare rules applicable to this fare.
-

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[Offset now](#) | [Learn more](#)

Debra Ramstead

From: Air Canada [confirmation@aircanada.ca]
Sent: November 24, 2014 1:54 PM
To: Debra Ramstead
Subject: Air Canada - 28-Nov: Calgary - Edmonton (booking ref: [REDACTED] - seat selected

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****



Itinerary/Receipt

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

[Scan this barcode to check in at any Air Canada check in kiosk.](#)



Access your personalized Air Canada travel information

[View your travel planner>](#)

Booking Information

Booking Reference [REDACTED]

Customer Care
Air Canada
1-888-247-2262
Flight Arrivals and Departures
1-888-422-7533

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Main Contact:

Mr Rowland Nichol
debra_ramstead@albertahealthservices.ca
Mobi [REDACTED]
Home [REDACTED]
Work [REDACTED]

Online Services

Manage my booking online (view/change my booking; select seats*).

Select Seats

Maple Leaf Lounge | Meal Vouchers | On My Way

Alert me of flight status changes directly to my mobile phone or email.

Flight Arrivals & Departures - check online if my flight is on time.

Check-in online and print my boarding pass.

* [Can my booking be changed online?](#)

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8132 ¹	Calgary (YYC) Fri 28-Nov 2014 07:30	Edmonton, Edmonton Int'l (YEG) Fri 28-Nov 2014 08:22	0	0hr52	DH3	Flex, V	

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Mr Rowland Nichol : Adult (16+), Ticket Number [REDACTED]
Air Canada - [REDACTED] Meal Preference : **None**
Aeroplan : [REDACTED]
Payment Card: [REDACTED] Special Needs: **None**
Seat Selection: **AC8132 5D**

Purchase Summary

Fare Summary

Passenger Type	<u>Adult</u>
Air Transportation Charges	
Departing Flight - <u>Flex</u>	154.00
<u>Surcharges</u>	12.00
Taxes, Fees and Charges	
<u>Canada Airport Improvement Fee</u>	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	10.16
<u>Air Travellers Security Charge (ATSC)</u>	<u>7.12</u>
Total airfare and taxes before options (per passenger)	213.28
Number of passengers	<u>x 1</u>
Total airfare, taxes and options	213.28
Travel Insurance (declined)	<u>0.00</u>
Grand Total - Canadian dollars	\$213.28

Payment Information

Credit/Debit Card [REDACTED] - Amount paid: \$2
The following charges (tax inclusive) will appear on your credit c

R. Nichol AHS Change Management Strategy
Mtg cancelled Nov 28. Flight not required
Credit iss [REDACTED]

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Air Canada: \$213.28 (Airfare - per ticket)

Ticket numb [REDACTED]

Fare Rules

Departing Flight Calgary (YYC) To Edmonton (YEG) - **Flex**

- **Changes:**
 - Prior to day of departure - **Change fee** per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
 - **Same-day confirmed changes** at check-in or at the airport are permitted at a flat fee of \$75 CAD/USD per direction, per passenger (subject to availability). Same-day flights only.
 - **Same-day standby** is available **only** to passengers travelling on a flight between Toronto and Montreal or Ottawa (connecting flights excluded), as well as to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
 - Flights can only be used in sequence from the place of departure specified on the itinerary.
- **Cancellations:**
 - Tickets are **non-refundable** and **non-transferable**.
 - **Cancellations** can be made up to 45 minutes prior to departure.
 - Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original

Passenger Information

1: Mr Rowland Nichol : Adult (16+), Ticket Number: [REDACTED]

Air Canada - [REDACTED] Meal Preference : **None**
 Aeroplan : [REDACTED]
 Payment Card: [REDACTED] Special Need R. Nichol Attend PPEC and Clinical Asst.
 Seat Selection: AC8132 1C (**Preferred**) Paid Negotiations
 Edmonton Dec 3, 2014

Purchase Summary

Fare Summary

Passenger Type	Adult
Air Transportation Charges	
Departing Flight - <u>Flex</u>	132.00
<u>Surcharges</u>	12.00
Taxes, Fees and Charges	
<u>Canada Airport Improvement Fee</u>	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	9.06
<u>Air Travellers Security Charge (ATSC)</u>	7.12
Total airfare and taxes before options (per passenger)	190.18
Number of passengers	x 1
Total airfare, taxes and options	190.18

Seat Selection

Mr Rowland Nichol	
AC8132: 1C - <i>Preferred</i> Seat (Aisle)	15.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	0.75
Total including airfare, taxes, options and seat selection charges:	205.93
Travel Insurance (declined)	0.00

Grand Total - Canadian dollars **\$205.93**

Payment Information

Credit/Debit Card [REDACTED] - Amount paid: **\$205.93** [REDACTED] 14
 The following charges (tax inclusive) will appear on your credit or debit [REDACTED] YYC to YEG Credit seat

Air Canada: \$190.18 (Airfare - per ticket)
 Air Canada: \$15.75 (Advance Seat Selection - for passenger 1)
 R. Nichol Attend PPEC and Clinical Asst.
 Negotiations
 Edmonton Dec 3, 2014

Ticket number [REDACTED] [REDACTED] YYC to YEG Seat selection

Fare Rules

Departing Flight Calgary (YYC) To Edmonton (YEG) - **Flex**

Changes:

- Prior to day of departure - **Change fee** per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
- **Same-day confirmed changes** at check-in or at the airport are permitted at a flat fee of \$75 CAD/USD per direction, per passenger (subject to availability). Same-day flights only.
- **Same-day standby** is available **only** to passengers travelling on a flight between Toronto and Montreal or Ottawa (connecting flights excluded), as well as to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.



R. Nichol PPEC and Clinical Asst. Negotiations
 December 3, 2014 Edmonton
 [Redacted] YEG to YYC

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Booking Information

Booking Reference: [Redacted]
 Electronic Ticketing confirmed. This is your official itinerary/receipt.
 Main Contact:
 Mr Rowland Nichol
 d: [Redacted]@aircanada.com
 M: [Redacted]
 H: [Redacted]
 W: [Redacted]

Customer Care
 Air Canada
 1-888-247-2262
 Flight Arrivals and Departures
 1-888-422-7533

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8153 ¹	Edmonton, Edmonton Int'l (YEG) Wed 03-Dec 2014 18:00	Calgary (YYC) Wed 03-Dec 2014 18:53	0	0hr53	DH4	Flex, W	

Operated by:
¹ Air Canada Express - Jazz

Passenger Information

1: Mr Rowland Nichol : Adult (16+), Ticket Number [Redacted]
 Air Canada - Aeroplan [Redacted] Meal Preference: None
 Payment Card: [Redacted] Special Needs: None
 Seat Selection: AC8153 8D

Purchase Summary

Fare Summary	Adult
Passenger Type	
Air Transportation Charges	
Departing Flight - Flex	132.00
Surcharges	12.00
Taxes, Fees and Charges	
Canada Airport Improvement Fee	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	9.06
Air Travellers Security Charge (ATSC)	7.12
Total airfare and taxes before options (per passenger)	190.18
Number of passengers	x 1
Total airfare, taxes and options	190.18
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$190.18

Payment Information

Credit/Debit Card [Redacted] - Amount paid: \$190.18
 The following charges (tax inclusive) will appear on your credit or debit card statement:
 • Air Canada: \$190.18 (Airfare - per ticket)

Ticket [Redacted]

Fare Rules

Departing Flight Edmonton (YEG) To Calgary (YYC) - Flex
 • Changes:

Debra Ramstead

R. Nichol Sponsorship Mtg CPSA/AMA
Edmonton Dec 16, 2014

YEG to YYC

21

From: Air Canada [confirmation@aircanada.ca]
Sent: December 12, 2014 12:18 PM
To: Debra Ramstead
Subject: Air Canada - 16-Dec: Edmonton - Calgary (booking re - seat selected

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****



Itinerary/Receipt

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

Scan this barcode to check in at any Air Canada check in kiosk.



Access your personalized Air Canada travel information

View your planner >

Booking Information

Booking Reference: [Redacted]

Customer Care
Air Canada
1-888-247-2262
Flight Arrivals and Departures
1-888-422-7533

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Main Contact:

Mr Rowland Nichol
debra.ramstead@albertahealthservices.ca

Mo [Redacted]

Ho [Redacted]

Wo [Redacted]

Online Services

Manage my booking online (view/change my booking; select seats*).

Select Seats

Maple Leaf Lounge | Meal Vouchers | On My Way

Alert me of flight status changes directly to my mobile phone or email.

Flight Arrivals & Departures - check online if my flight is on time.

Check-in online and print my boarding pass.

* Can my booking be changed online?

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type	Meal
AC8147 ¹	Edmonton, Edmonton Int'l (YEG) Tue 16-Dec 2014	Calgary (YYC) Tue 16-Dec 2014	0	0hr53	DH4	Flex, U	

14:00

14:53

Operated by:

¹ Air Canada Express - Jazz

Passenger Information

1: Mr Rowland Nichol : Adult (16+), Ticket Number [REDACTED]

Air Canada - [REDACTED] Meal Preference : **None**
 Aeroplan :
 Payment Card: [REDACTED] Special Needs: **None**
 Seat Selection: **AC8147 2A**

Purchase Summary

Fare Summary

	<u>Adult</u>
Passenger Type	
Air Transportation Charges	
Departing Flight - <u>Flex</u>	222.00
<u>Surcharges</u>	12.00
Taxes, Fees and Charges	
<u>Canada Airport Improvement Fee</u>	30.00
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	13.56
<u>Air Travellers Security Charge (ATSC)</u>	7.12
Total before options (per passenger)	284.68
Number of passengers	x 1
Total with options	284.68
Travel Insurance (declined)	0.00
Grand Total - Canadian dollars	\$284.68

Payment Information

Credit/Debit Card [REDACTED] Amount paid: **\$284.68**
 The following charges (tax inclusive) will appear on your credit or debit card statement:

Air Canada: \$284.68 (Airfare - per ticket)

Ticket number [REDACTED]

Fare Rules

Departing Flight Edmonton (YEG) To Calgary (YYC) - **Flex**

- **Changes:**
 - Prior to day of departure - **Change fee** per direction, per passenger, is \$50 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
 - **Same-day confirmed changes** at check-in or at the airport are permitted at a flat fee of \$75 CAD/USD per direction, per passenger (subject to availability). Same-day flights only.
 - **Same-day standby** is available: on flights between Toronto and Montreal or Ottawa, on flights between Calgary, Edmonton and Vancouver, as well as on flights between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) or Newark (EWR) airports (connecting flights excluded).
 - Flights can only be used in sequence from the place of departure specified on the itinerary.

• **Cancellations:**


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 Rowland Nichol
E-mail: DEBRA.RAMSTEAD@ALBERTAHEALTHSERVICES.CA
Form of payment: 

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

Air Canada Flight Information
 1-888-422-7533

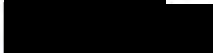
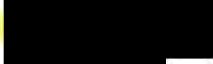
[International Reservations](#)

[Alert me of flight changes](#)
[Flight notification](#)


Flight Itinerary

Flight	From	To	Aircraft	Cabin (Booking class)	Status
AC8138	Calgary (YYC)	Edmonton International (YEG)	DH4	Economy (Q)	Confirmed
<i>Operated by:</i>	Tue 06-Jan 2015	Tue 06-Jan 2015			
<i>Air Canada</i>	10:30	11:25			
<i>Express- Jazz</i>					


Passenger Information

Passenger 1
Name: Mr Rowland Nichol
Frequent Flyer Pgm: Air Canada Aeroplan
Ticket number: 
Program number: 

Purchase Summary

Passenger: 1 Tick 

Date of issue 17-Dec 2014
Fare Amount in Canadian dollars: 177.00
(including navigational & other charges)
Taxes, Fees & Charges

R. Nichol Sponsorship Mtg
 January 6, 2015 Edmonton
 YYC to YEG

change fee

28

Combined Taxes *see fare calculation below (XT)

PD

Total Fare in :

No Additional
collection

Options

Change fee in Canadian dollars	50.00
Canada Goods and Services Tax (GST/HST #10009-2287) (XG)	2.50

Ticket particularities:
AC ONLY/NON-REF/CHGE FEE

**Fare calculation:*
06JAN15YYC AC YEA Q12.00R165.00CAD177.00 END ROE1.00 PD7.12CA
10.71XG30.00SQ
Canadian tax registration numbers:
XG Canada Goods and Service Tax (GST) #10009-2287
RC Canada Harmonized Sales Tax (HST) #10009-2287
XQ Quebec Sales Tax (QST) #1000-043-172

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 and name changes are not permitted.
- Advance seat assignments are not guaranteed and may be changed without notice. If your pre-assigned seat is unavailable, we will try to accommodate you in a comparable seat in the same class of service and will refund any applicable refundable fees.

Please read important information and notices regarding Air Canada's [general conditions of carriage](#).

Important Information & Conditions

Please review this itinerary/receipt and should you have any questions, please call 1-888-247-2262 within 24 hours of receipt.

Before You Go: A 'To-Do' List

All passengers are advised to view the [Travel documentation](#) and US Secure Flight Program for important information on documents and identification required for travel.

Travel Insurance

Canadian Residents - RBC Travel Insurance Company offers Canadian travellers an easy way to purchase travel insurance. Whether you're traveling by yourself or with your family, it's important to get protection against the high cost of medical expenses, trip cancellation or other unforeseen circumstances. Residents of Canada can purchase travel insurance from RBC Travel Insurance Company via www.aircanada.com/insurance or by calling 1-866-530-6021. To make sure you get the best possible protection, purchase insurance prior to your departure.

U.S. Residents - CSA Travel Protection offers American travellers an easy way to purchase travel insurance. Whether you're traveling by yourself or with your family, it's important to get protection against the high cost of medical expenses, trip cancellation or other unforeseen circumstances. Residents of the United States can purchase travel insurance from CSA Travel Protection via www.aircanada.com/us/en/insurance or by calling 1-866-473-3315. To make sure you get the best possible protection, purchase insurance prior to your departure.

Comments, Compliments and Complaints

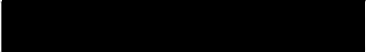
Would you like to comment on a past travel experience? Your comments, compliments and complaints will help us improve the services we offer. Send us an e-mail (aircanada.com/customerrelations) or write to us at: Air Canada - Customer Relations, PO Box 64239, RPO Thorndcliffe, Calgary, AB, Canada T2K 6J7.

Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada.
Please bring your itinerary-receipt to the airport.

Main Contact Information

Booking ref: 

Name: Mr Rowland Nichol
E-mail: DEBRA.RAMSTEAD@ALBERTAHEALTHSERVICES.CA
Form of 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	To	Aircraft	Cabin (Booking class)	Status
AC8161	Edmonton International (YEG)	Calgary (YYC)	DH3	Economy (V)	Confirmed
<i>Operated by:</i>	Tue 06-Jan 2015	Tue 06-Jan 2015			
<i>Air Canada Express- Jazz</i>	18:30	19:26			

Passenger Information

Passenger 1
Name: Mr Rowland Nichol
Frequent Flyer Pgm: Air Canada Aeroplan
Ticket number: 
Program number: 

Purchase Summary

Passenger: 1 Ticket number: 

Date of issue: 17-Dec 2014
Fare Amount in Canadian dollars: 166.00
(including navigational & other charges)
Taxes, Fees & Charges

R. Nichol Sponsorship Mtg
 January 6, 2015 Edmonton
 change fee  YEG to YYC

Combined Taxes *see fare calculation below (XT)

PD

Total Fare in :

No Additional
collection

Options

Change fee in Canadian dollars

50.00

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

2.50

Ticket particularities:

AC ONLY/NON-REF/CHGE FEE

***Fare calculation:**

06JAN15YEA AC YYC Q12.00R154.00CAD166.00 END ROE1.00 PD7.12CA

10.16XG30.00SQ

Canadian tax registration numbers:

XG Canada Goods and Service Tax (GST) #10009-2287

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

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

Fare Rules Summary

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U.S. Residents - CSA Travel Protection offers American travellers an easy way to purchase travel insurance. Whether you're traveling by yourself or with your family, it's important to get protection against the high cost of medical expenses, trip cancellation or other unforeseen circumstances. Residents of the United States can purchase travel insurance from CSA Travel Protection via www.aircanada.com/us/en/insurance or by calling 1-866-473-3315. To make sure you get the best possible protection, purchase insurance prior to your departure.

Comments, Compliments and Complaints

Would you like to comment on a past travel experience? Your comments, compliments and complaints will help us improve the services we offer. Send us an e-mail (aircanada.com/customerrelations) or write to us at: Air Canada - Customer Relations, PO Box 64239, RPO Thorndcliffe, Calgary, AB, Canada T2K 6J7.

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
780-426-3636
<http://www.westin.com/edmonton>



Nichol Rowland

Page Number [REDACTED] Invoice Number [REDACTED]
Guest Number [REDACTED] 50 Arrive Date 12-17-2014
Folio ID [REDACTED] Depart Date 12-17-2014
No. Of Guest 1
Room Number

Duplicate Invoice

Date	Reference	Description	Charges	Credits
12-17-2014	A/R Trans	Transfer to A/R	\$184.13	
12-17-2014	MC	Mastercard		\$-184.13
		** Total	\$184.13	\$-184.13
		** Balance	\$0.00	

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food\Bev	Phone	Other	Total	Payment
12-17-2014	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$184.13	\$184.13	\$-184.13
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$184.13	\$184.13	\$-184.13

Thank you for choosing Starwood Hotels We look forward to welcoming you back soon! Tell us about your stay. www.westin.com/reviews

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

BETTER BALANCE - The soothing scent of White Tea revitalizes and uplifts from the moment you step through our doors. Enhance any environment by taking our signature scent home with you. Learn more at westin.com/store

R. Nichol Sponsorship Mtg
December 16, 2014 Accommodation

30

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)

* Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system
 * Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system
 * If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 28-Nov-14 To 31-Dec-14
 Travel Period from: 28-Nov-14 To 31-Dec-14
 Out-of-Province Travel

Name: Rowland Nichol Position (Title): Assoc. Chief Medical Officer, Office of the VP Quality and
 Location: Dept: CMO/Medical Affairs DOFA Level: Union: Business Phone #: Ext:
 Employee # (E-People):

SECTION E: FINANCE CODING & TOTAL CLAIM

CAPITAL PROJECT CODING ONLY → Project Number Expenditure Organization Project Task Number Expenditure Type


Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT		
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/ Expense	Total Expense	Total Section B	Total Section C&D	
2A	101	0000	71110000012	\$207.30	101	0005	71110500065	62340001	\$1,119.86	\$1,164.68	\$1,119.86	
2B	101	0005	71110500063	\$957.38								
2C												
2D												
				\$1,164.38					\$1,119.86			


NOTE: This section auto fills from page 2A, 2B, 2C & 2D

**User to enter Coding & \$ Amounts

NOTE: These fields do not automatically fill for Section C & D

SECTION F: AUTHORIZATION

Employee Signature:  Date: 31 Dec 2014

Approved By (PRINT ONLY): Dr. Verna Yiu DOFA Level: Position #: Phone #: Ext: Signature:  Title: VP Quality + CMO Date: Dec 31/14

EXPENSE CLAIM DETAILS

Enter Finance Coding <u>101 0000 71110000012</u>			Emp # (E-People) _____			Page 2A								
<p><i>If expenses incurred are for multiple FC's please use pages 2B,2C,2D (after pg3) as there should be one FC per page OR if more lines are required for the same FC use these additional pages. Enter total \$ amount on slip, DO NOT separate any taxes (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.</i></p>														
SECTION B: TRAVEL EXPENSES				<p>NOTE: If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C</p>										
<p>Select from dropdown (column Prov) where expenses were incurred (Out of N.America = Inter!) Ensure separate lines are used for claim items that differ in Province, US and Out of North America.</p>				<p>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</p>										
Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required <small>(include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification</small>	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)		If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)		
					Meal Allowance		Meal with Receipt		Airfare				Hotel	Taxi
					Meal Type with value	Allowance	Meal Type	with receipt						
27-Nov-14	PLP Retreat Uof C	AB - Provinc	Meeting	Yes						\$10.00		20.00		
1-Dec-14	Chronic Disease Management Meeting	AB - Local	Meeting	Yes						\$9.00		15.00		
2-Dec-14	Attend Lab Negotiations at PLC	AB - Provinc	Meeting	Yes						\$10.00		19.00		
3-Dec-14	Attend PPEC and Clinical Assistant Negotiations Edmonton	AB - Provinc	Meeting	Yes	L-\$11.60	\$11.60				\$26.25				
5-Dec-14	Attend Prov MA Development Session	AB - Provinc	Conf	Yes	B-\$9.20	\$9.20				\$26.25		30.00		
15-Dec-14	Attend Sponsorship meeting Edmonton CPSA office	AB - Provinc	Meeting	Yes								30.00		
16-Dec-15	Attend Sponsorship meeting in Edmonton at CPSA	AB - Provinc	Meeting	Yes			D	\$21.18		\$26.25				
SUBTOTALS						\$20.80		\$21.18			\$107.75		Total Kms 114.00	
<p>MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle → details of travel location to & from must be included above under the purpose of travel column Rates applicable \$0.505 per km for <u>under 5,000km/yr</u> or \$0.47 per km for <u>over 5,000km/yr</u> or per Union Agreement</p>							<p>Enter \$0.505 km, \$0.47 km OR rate per Union Agreement (see Mileage details to the left)</p>			\$0.505				
							Mileage \$		\$57.57					
<p>Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3</p>							Travel \$ Subtotal		\$149.73					
							Auto fills on page 1 - TOTAL TRAVEL \$		\$207.30					
<p>Rationale is Required for expenses that are not Cost Effective (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)</p>														

EXPENSE CLAIM DETAILS

*If **NOT** claiming any expenses in Sections C or D, this page does **NOT** have to be submitted.*

SECTION C: OTHER EXPENSES	Emp # (E-People)	Page 3
----------------------------------	------------------	---------------

• **Expenses to be claimed in this section include but are not limited to:** Hospitality & Hosting, Working Sessions, Recruitment, Relocation, Continuing Education, Business Insurance, and miscellaneous expenses.
 → If expenses are for travel, gas, etc., go to Section B on pg 2.
 • ALL "OTHER" expenses listed below MUST have a secondary/expense code indicated!

*****Subtotal "Other Expenses" for each functional centre separately and enter each subtotal into column "Section C Total" on page 1 Section E*****

Date dd-mmm-yy	Business Reason for Expense - Detailed Description Required (include who attended-(if meal/Hospitality), why expense was required, what expense was and pertaining to and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page.					
		Bal Unit	Location	Functional Centre	Secondary/Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Yes/No	Continuing Education Select type from dropdown menu (if applicable)	GST is ON till slip/receipt, enter total amount in this column WITH GST	GST is NOT on till slip/receipt, enter total amount in this column	TOTAL OTHER \$

SECTION D: FOREIGN CURRENCY ONLY ENTER IN THIS SECTION IF AMOUNT NOT CONVERTED INTO CDN \$ (conversion not indicated on receipt/statement)
If foreign currency has been converted to CDN \$ on your receipt, enter expense in CDN \$ in either Section B or C as applicable.

Please click on the following link for the Bank of Canada exchange rate using the date of expense: [Bank of Canada Currency Converter](#) → Select foreign country in 'From cell', and Canadian Dollar in 'To cell'; Enter date of expense in both date cells then select convert which will give the exchange rate - enter this amount in exchange rate column

Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Secondary/Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Yes/No	Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page.			
		Bal Unit	Location	Functional Centre			Foreign Currency Amount	Currency Type	Exchange Rate	Canadian Value
6-Dec-14	IHI Conference Orlando, Florida shuttle from airport to hotel	101	0006	71110500063	62314001	Yes	\$33.00	USD	1.1423	\$37.70
11-Dec-14	IHI Conference Orlando, Florida Accommodation	101	0006	71110500063	62314001	Yes	\$938.15	USD	1.1535	\$1,082.16

Rationale is Required for expenses that are not Cost Effective
 (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

Expenses Paid (Retain a copy for your records)
 Do not include amounts paid by Alberta Health Services or reimbursed / reimbursable by another organization
 - 3 of 3-

EXPENSE CLAIM DETAILS

Enter Finance Coding <u>101 0006 71110500063</u>	Emp # (E-People) _____	Page 2B
---	-------------------------------	----------------

*If expenses incurred are for **multiple FC's** please use pages 2B, 2C, 2D (after pg3) as there should be one FC per page **OR** if **more lines** are required for the same FC use these additional pages. Enter total \$ amount on slip, **DO NOT separate any taxes** (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.*

SECTION B: TRAVEL EXPENSES **NOTE:** If expenses **do not** fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C

Select from dropdown (column **Prov**) where expenses were incurred (Out of N.America = Inter'l)
 Ensure separate lines are used for claim items that differ in Province, US and Out of North America.

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	Business Reason for Travel - Detailed Description Required <small>(include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification</small>	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Cost Effective Method Used? Yes/No	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi			
					Meal Type with value	Allowance	Meal Type	with receipt						
6-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes	D-\$20.75	\$20.75								
7-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes	D-\$20.75	\$20.75								
8-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes	D-\$20.75	\$20.75								
9-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes	D-\$20.75	\$20.75								
10-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes	D-\$20.75	\$20.75								
11-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes	BL-\$20.80	\$20.80								
6-Dec-14	IHI Conference Orlando, Florida	US	Conf	Yes					\$817.68					30.00
SUBTOTALS						\$124.55			\$817.68					Total Kms 30.00

MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle
 → details of travel location to & from must be included above under the purpose of travel column
 Rates applicable **\$0.505** per km for under 5,000km/yr or **\$0.47** per km for over 5,000km/yr or per Union Agreement

Enter \$0.505 km, \$0.47 km OR rate per Union Agreement <small>(see Mileage details to the left)</small>	\$0.505
Mileage \$	\$15.15
Travel \$ Subtotal	\$942.23
Auto fills on page 1 - TOTAL TRAVEL \$	\$957.38

Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3

Rationale is Required for expenses that are not Cost Effective
(Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

P THIS IS YOUR RECEIPT **P** THIS IS YOUR RECEIPT **P** THIS IS YOUR RECEIPT
 Parking stall expires when:
 Vehicle vacates stall or at 23:59
 University Of Calgary/Art Parkade
 No overnight parking ART-06
SPACE
1418
 ENTRY TIME 27 NOV 14 07:54 AM
 Paid \$10.00C

R. Nichol Attend Physician Learning Program
 Retreat at UofC
 November 27, 2014 Parking

YOUR EPT **P** THIS IS YOUR RECEIPT **P** THIS IS YOUR RECEIPT **P** THIS IS YOUR RECEIPT **P** THIS IS YOUR RECEIPT
 University of Calgary/Art Parkade P1A
 Parking stall expires if vehicle vacates stall or at time below
 No overnight parking P1A
SPACE **106**
 Expires at **08:34** PM
 DEC 01
 Paid 9.00\$ DEC 01 at 06:34 PM
SPACE **106**
 08:34 PM
 DEC 01
 Paid 9.00\$
RECEIPT

R. Nichol Attend Chronic Disease Management
 Session
 November 30, 2014 Parking

RECEIPT
GST NO. R122556194

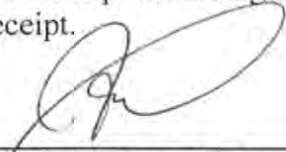
EXIT No. A1
 IN: 12/03/14 06:59
 OUT: 12/03/14 19:18
 DURATION: 0 12: 19
 PAID: \$ 26.25
 (GST INCLUDED)
 VISA

REF.
 THANK YOU FOR
 YOUR VISIT

R. Nichol Attend PPEC and Clinical Assistants
 Negotiations Edmonton
 December 3, 2014 Parking YYC

December 2, 2014 PLC Parking – No receipt issued \$10.00

This expense was incurred and related to AHS business and has not been claimed previously. The receipt is missing as the ticket machine was not functioning properly and did not dispense a receipt.



Dr. Rollie Nichol

R. Nichol Lab Negotiations PLC
December 2, 2014
Parking - Missing receipt \$10.00

RECEIPT
GST NO. R122556194

EXIT No. A5
IN: 12/05/14 06:48
OUT: 12/05/14 18:02
DURATION: 0 11: 14
PAID: \$ 26.25
(GST INCLUDED)
VISA

REF.
THANK YOU FOR
YOUR VISIT

Calgary International Airport Parkade

Low [High] 2014-12-09 1.1422 CAD [0.8755 USD]
Average 2014-12-05 — 2014-12-11 1.1467 CAD [0.8721 USD]
High [Low] 2014-12-11 1.1535 CAD [0.8669 USD]

Date	1 USD -> CAD	1 CAD -> USD
2014-12-05	1.1423	0.8754
2014-12-08	1.1472	0.8717
2014-12-09	1.1422	0.8755
2014-12-10	1.1482	0.8709
2014-12-11	1.1535	0.8669



RECEIPT

SHUTTLE

ROUND TRIP

2 ADULTS 0 CHILDREN

MARRIOTT @ LAKE BRYAN CT YARD

CREDIT CARD 66.00
12/06/2014 05:15 PM

CALL 24 HOURS IN ADVANCE!
PHONE: (407) 423-5566

ACCT# AUTH#

ZONE 4

A1D1

002-261-039

R. Nichol IFI Conference Orlando, Florida
 December 6-10, 2014
 Shuttle one fare 33(US) Bank of Canada
 exchange rate 5Dec2014 1.1423 (USD-CAD)



NICHOL/ROWLAND/DR 169.00 12/11/14
 Room Name Rate Depart Time ACCT# GROUP
 ALBERTA HEALTH SERVI 16 12/06/14 18:29
 Type Arrive Time
 49

MRW#:

Room Clerk	Address	Payment			
DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE	
12/06	ROOM	3364, 3 169.00			
12/06	ROOM TAX	3364, 3 9.69		A	
12/06	OCC TAX	3364, 3 8.94		B	
12/07	ROOM	3364, 3 169.00			
12/07	ROOM TAX	3364, 3 9.69		A	
12/07	OCC TAX	3364, 3 8.94		B	
12/08	ROOM	3364, 3 169.00			
12/08	ROOM TAX	3364, 3 9.69		A	
12/08	OCC TAX	3364, 3 8.94		B	
12/09	ROOM	3364, 3 169.00			
12/09	ROOM TAX	3364, 3 9.69		A	
12/09	OCC TAX	3364, 3 8.94		B	
12/10	ROOM	3364, 3 169.00			
12/10	ROOM TAX	3364, 3 9.69		A	
12/10	OCC TAX	3364, 3 8.94		B	
12/11	VS CARD		\$938.15		

TO BE SETTLED TO: VISA CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT VILLAGE! TO EXPEDITE YOUR CHECK-OUT, PLEASE CALL OR STOP BY THE FRONT DESK. AGAIN, THANK YOU FOR CHOOSING MARRIOTT!

----- SUMMARY OF TAXES -----

DESCRIPTION	TAXED AMOUNT	TAX
H MARRIOTT REW ST TAX	.00	.00
I MARRIOTT REW LOC TAX	.00	.00
K MARKET TAX	.00	.00
L PARKING FEE TAX	.00	.00
M CY BISTRO	.00	.00
N BISTRO TAX	.00	.00
O FOOD COURT TAX	.00	.00
P BANQUETS TAX	.00	.00
NET CHARGES	938.15	.00
		.00
		938.15

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
 ROLLIE.NICHOL@ALBERTAHEALTHSERVICES.CA
 SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

R. Nichol IFI Conference Orlando, Florida
 December 6-10, 2014
 Accomodaton 938.15(US) Bank of Canada
 exchange rate 10Dec14 1.1482 (USD-CAD)

This statement is your final receipt. You have agreed to pay in cash or by personal check or to your. The amount shown is the net amount if by opposite any credit card entry in the reference column. The credit card company will bill you (the usual manner) if for any reason the credit card company does not bill you directly. In the event payment is not made within 25 days after checkout, you will owe us interest on the amount due (including all charges) at the rate of 1% per month (ANNUAL RATE 12%) or the maximum allowed by law, plus the reasonable cost of collection including attorney fees.



Itinerary confirmation

Thank you for choosing WestJet. You can find details about your booking below.

Your reservation code is:

Guest details

Mr Rowland Nichol	Flight	Calgary (YYC)-Orlando (MCO), Orlando (MCO)-Calgary (YYC) WestJet FF Ticket number Seat	YYC-MCO	MCO-YYC
Mrs Laretta Pereles	Flight	Calgary (YYC)-Orlando (MCO), Orlando (MCO)-Calgary (YYC) WestJet FF Ticket number Seat	YYC-MCO	MCO-YYC

* You may not select a seat at this time. Seat selection will be available in the 'Manage bookings' section of your WestJet profile, during online check-in, or at the airport.

Air itinerary details

Calgary (YYC) Sat Dec 6 2014, 9:55 AM Boeing 737-700	Orlando (MCO) Sat Dec 6 2014, 4:46 PM	WS 1414 WestJet	Fare type: Flex Non-stop
Orlando (MCO) Thu Dec 11 2014, 5:39 PM Boeing 737-800	Calgary (YYC) Thu Dec 11 2014, 9:20 PM	WS 1415 WestJet	Fare type: Econo Non-stop

Pricing breakdown

Guest type	Base fare per guest	Air transportation charges per guest	Taxes, fees and charges per guest	Total fare per guest	Number of guests	Total fare
Adult	\$658.98	\$15.00	\$142.80	\$816.78	x 2	\$1,633.56 CAD

YYC-MCO: Flex fare type benefits

One complimentary checked bag *

Fully refundable if canceled 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.

MCO-YYC: Econo fare type benefits

One complimentary checked bag *

Fully refundable if canceled within 24 hours of booking **

Advanced seat selection - \$5-34.50 *

\$75-86.25 Itinerary change fee + applicable fare difference

\$75-86.25 name change fee

\$75-86.25 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.

Total airfare: **\$1,633.56 CAD**

Charged to VISA : \$1,633.56 CAD

Important details

WestJet permits one piece of carry-on baggage and one personal item on board. If you are on a flight operated by one of our partners, your allowance may be different - learn more. All carry-on baggage must pass through security. Make sure your carry-on complies and avoid having to surrender your personal items. Review what you can - and can't - take on your flight by visiting our restricted items info page or c.ca/wj.ca.



Your checked baggage allowance depends on the aircraft you are travelling on, the fare option purchased and the destination you are travelling to or from. You may be permitted additional items, or items that are overweight or oversized in checked baggage. For more details, please see [Checked and excess baggage](#).



Use web check in to print your boarding pass and select your seat for free. This service is available as early as 24 hours (and up to 60 minutes) before your scheduled flight. Selecting some seats requires a fee.



Identification and travel documents required vary based on where you are travelling and may change based on your nationality. Visit our [ID requirements section](#) for more information.



Do you have a special need? For information on travelling with oxygen, assistive devices, or a service animal see [Galleries with special needs](#).



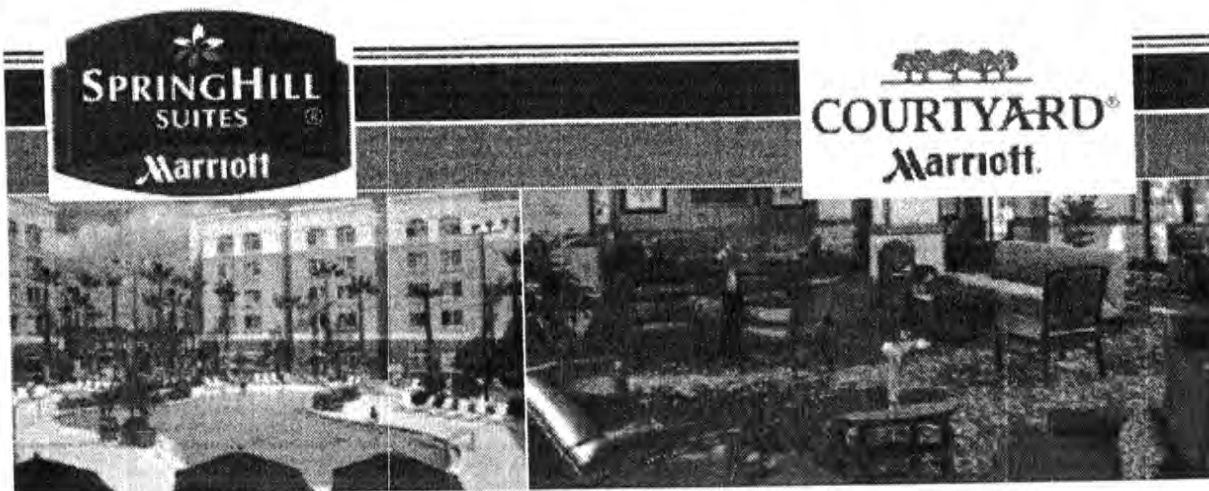
We know how valuable your time is. To ensure we are able to depart and arrive as scheduled, please be sure you are through security and at your departure gate 30 minutes prior to your flight's scheduled departure time. If you arrive at the gate less than 10 minutes prior to departure and the aircraft is already boarded you will be denied boarding.

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Rollie Nichol

From: The Marriott Village at Lake Buena Vista Team [groupcampaigns@pkghlrss.com]
Sent: June 24, 2014 11:17 AM
To: Rollie Nichol
Subject: The Marriott Village at Lake Buena Vista Reservation Confirmation



Dear Rowland,

We are pleased to confirm your reservations for the IHI- Institute of Healthcare improvement at the SpringHill Suites Orlando Lake Buena Vista in the Marriott Village. The entire staff of the SpringHill Suites Orlando Lake Buena Vista in the Marriott Village is looking forward to your arrival.

Below is a summary of your booking and room information. Should your travel plans change and you need to make changes to your reservation, please [click here](#) or call -

We look forward to welcoming you to the SpringHill Suites Orlando Lake Buena Vista in the Marriott Village.

- The Staff of the SpringHill Suites Orlando Lake Buena Vista in the Marriott Village

Reservation Details

Online
Confirmation
Number:
Date Booked: 24-Jun-2014
Reservation
Name: Rowland Nichol
Arrival Date: 06-Dec-2014
Departure
Date: 11-Dec-2014
Room Type: Standard Room, 1 King & Sofabed
Special
Requests:
Number of 1

Rooms:
Number of
Guests: 2

	Date	Guest(s)	Status	Rate
	06-Dec-2014	2	Confirmed	169.00
	07-Dec-2014	2	Confirmed	169.00
	08-Dec-2014	2	Confirmed	169.00
	09-Dec-2014	2	Confirmed	169.00
	10-Dec-2014	2	Confirmed	169.00

Nightly Rate
& Status:

Additional Guest	Rate
Second Guest	0.00
Third Guest	0.00
Fourth Guest	0.00
Fifth Guest	0.00

Total
Charges: 845.00

Tax
Disclosure: Room Rates shown do not include 6.00% Occupancy Tax Per Night and 6.50% Room Tax Per Night (subject to change). Total charges presented on the website will include all room fees and taxes.

Cancel
Policy: Cancellations made after 6:00 PM on the day of arrival will forfeit one night's room and tax.

Promotional Email Unsubscribe

We respect your privacy. If you do not wish to receive offers from the Marriott.com and/or Marriott Rewards, please go to <https://www.marriott.com/profile/email/unsubscribeRedirect.mi?uniqueId=0>.

Please do not reply to this message to unsubscribe as we will be unable to process your request. If you prefer to contact us or unsubscribe by mail, please send your request to the postal address below. Please remember to include your name and email address so that we can process your request.

Internet Customer Care - Unsubscribe
1818 North 90 Street
Omaha, Nebraska
68114-1315 USA

Please allow 10 business days for processing. If you unsubscribe from promotional email we will continue to send important, time sensitive transactional Marriott messages - like confirmation email - when you make reservations, use Marriott Rewards points, etc.

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26th Annual National Forum on Quality Improvement in Health Care

Orlando World Center Marriott
8701 World Center Drive, Orlando, Florida

Rollie Nichol (rollie.nichol@albertahealthservices.ca)

Order Number:



Rowland Nichol, MD, MBA, CEC

Associate Chief Medical Officer
Alberta Health Services
Calgary, Canada

Sun Sessions

Storytelling: Harnessing the Power of Patient and Family Experiences

Mon Sessions

ENROLLMENT CLOSED: The Micro/Meso/Macrosystem Improvement - BIG RO

Tue Sessions

Keynote 1: Maureen Bisognano and Derek Feeley
Network Insights for Health Care Improvement

Including Patients: Codesigning the Patient Experience

A Management Leadership and Board Roadmap to High-Reliability Health Care

Keynote 2: Atul Gawande

Wed Sessions

Keynote 3: Robin Roberts

Engaging Frontline Staff in Real-time Improvement

High-Impact Leadership

Keynote 4: Don Berwick

Sun

L20

1:00PM- 4:30PM

Crystal Ballroom: Salon K-M

Mon

M8

8:30AM- 4:00PM

Grand Ballroom: Salon 7

Tue

K1

8:00AM- 9:00AM

Cypress Ballroom: Ballroom 3

A4

9:30AM-10:45AM

Crystal Ballroom: Salon K-M

B16

11:15AM-12:30PM

Grand Ballroom: Salon 4-6

C2

1:30PM- 2:45PM

Crystal Ballroom: Salon D

K2

3:15PM- 4:15PM

Cypress Ballroom: Ballroom 3

Wed

K3

8:00AM- 9:00AM

Cypress Ballroom: Ballroom 3

D19

9:30AM-10:45AM

Crystal Ballroom: Salon N

E3

11:15AM-12:30PM

Crystal Ballroom: Salon H

K4

1:30PM- 2:30PM

Cypress Ballroom: Ballroom 3

Important Messages

To access complimentary wireless internet: (1) Select "View available wireless networks" and connect to the "IHIFORUM" wireless network. (2) Open a new web browser and type "ihi.org" into the address bar. You will be redirected to a Marriott webpage. (3) Enter "IH126FORUM" as the Meeting Passcode and click "Submit". Please note that the passcode is case sensitive.

Session Handouts

To access materials for your sessions, [click here](#), or follow these steps:

1. Go to www.ihi.org and click on the link at the top of the screen labeled, "Log In/Register"
2. After logging in, click on the "My IHI" link at the top of the screen
3. Click on "My Enrollments and Certificates" in the left menu
4. Click the "Materials/Handouts" link under 26th Annual National Forum on Quality Improvement in Health Care
5. Paper handouts will not be provided; please print those that you would like and bring them with you

Registration Card Folding Instructions

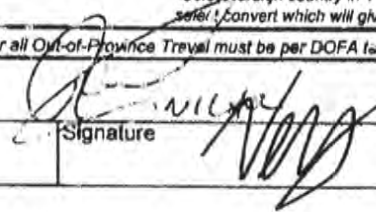
1. Print your name badge on 8.5" x 11" paper (Standard Letter)
2. Hold the paper lengthwise with the name badge in the upper right hand corner
3. Fold the paper in half vertically along the dotted line between the event title and the IHI logo
4. Fold the paper in half horizontally below your session selections
5. Fold again in half, horizontally above your session selections



Scan to download the IHI Onsite app for this meeting! Or visit the App store or Google Play marketplace and search "IHI Onsite".

Out of Province Travel Approval

- All travel expenses must be approved in accordance to "Appendix A" of the Alberta Health Services Travel Policy
- Pre-Approval form **MUST** be attached to the actual expense claim

Employee Information						
First Name Rollie	Last Name Nichol	Employee Number n/a				
Phone Number		Reports To VP Quality & Chief Medical Officer				
Department Office of the CMO & Medical Affairs		Office Location Calgary				
Travel Details						
Purpose of Trip IHI National Forum						
Destination Orlando		From 6-Dec-2014	To 11-Dec-2014			
Finance Coding / Accounting Distribution						
Corp/BU/Org		Location / Site		Functional Centre / Primary		
Project Coding						
Project	Task	Expense Type			Expense Org	
Estimate of Expenses						
Category	Description					Amount
Accommodation Charge	5 nights @ \$235 USD/night + taxes & fees					\$1,300.00
Meals	6 days @ \$41.55 CA					\$250.00
Registration	Pre-Conference (\$450 + \$650), Conference (\$1100) USD					\$2,400.00
Airfare	Round Trip Airfare CA					\$700.00
Taxi/Rental Car/Fuel/Parking/Bus/I.RT	Round Trip Taxi CA					\$120.00
Other Expenses (please specify)						
Currency <input checked="" type="checkbox"/> Cdn <input type="checkbox"/> USD <input type="checkbox"/> OTHER						\$4,770.00
Total Estimated Travel Costs		*Bank of Canada Currency Converter		Exchange Rate	\$0.00	Cdn\$ \$4,770.00
*Select foreign country in 'From cell', and Canadian Dollar in 'To cell'. Enter date of expense in both date cells then select / convert which will give the exchange rate						
Approvals (Pre-approvals for all Out-of-Province Travel must be per DOFA table)				authorization table		
Employee Signature 				Date (dd-Mon-yyyy)	Phone Number	
Approved by (Print Name) Verna Yiu		Signature		Date (dd-Mon-yyyy) 26-Jun-14	Phone Number	
Title VP Quality & Chief Medical Officer				Position Number	DOFA Level	
Approved by (Print Name)				Signature	Date (dd-Mon-yyyy)	Phone Number
Title				Position Number	DOFA Level	

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.

THE WESTIN EDMONTON
Share Restaurant
GST# 861336493RT0005

213 1

35/1 5320 GST 1
15DEC'14 9:48PM

1		7.50
1 Share Burger		16.00
No Choice		
S.S. Fries		
MUSH/BLUE CH		
* SPEC PREP *		

FOOD	16.00
	7.50
Tax	1.18
Total Due	\$24.68

Gratuity: _____

Total : 28.68

Room # _____

Name Print _____

Signature _____

RECEIPT
GST NO. R122556194

EXIT No. A1
IN: 12/15/14 18:10
OUT: 12/16/14 15:52
DURATION: 0 21: 42
PAID: \$ 26.25
(GST INCLUDED)
VISA

REF.
THANK YOU FOR
YOUR VISIT

Calgary International Airport Parkade

R. Nichol Sponsorship Mtg Edmonton
December 16, 2014
Parking YYC

R. Nichol Sponsorship Mtg Edmonton
December 16, 2014
Supper - \$21.18 (28.68-7.50)

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 780-426-3636
<http://www.westin.com/edmonton>



Dr Nichol, Rowland Page Number 1 Invoice Nbr
 Guest Number Arrive Date 12-15-2014 21:40
 Folio ID Depart Date 12-16-2014 12:00
 No. Of Guest 1
 Room Number

Information Invoice

Date	Reference	Description	Charges	Credits
12-15-2014		Share Lounge	\$28.68	
12-16-2014	VI	Visa		\$-28.68
		** Total	\$28.68	\$-28.68
		** Balance	\$0.00	

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.

EXPENSE SUMMARY REPORT
 Currency: CAD

Date	Room	GST	Tour Levy	Food\Bev	Phone	Other	Total	Payment
12-15-2014	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28.68	\$28.68	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28.68	\$28.68	\$0.00

As a Starwood Preferred Guest you have earned at least 57 Starpoints for this visit AXXXX6918

Thank you for choosing Starwood Hotels We look forward to welcoming you back soon! Tell us about your stay. www.westin.com/reviews

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

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

Continued on the next page

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
780-426-3636
<http://www.westin.com/edmonton>



Dr Nichol, Rowland	Page Number	2	Invoice Nbr	
	Guest Number		Arrive Date	12-15-2014 21:40
	Folio ID		Depart Date	12-16-2014 12:00
	No. Of Guest	1		
	Room Number			

Information Invoice

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)

Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the new E-People payroll system
 Indicate NA in the Employee # (E-People) if your payroll has not migrated to the new E-People payroll system
 If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Code From: 25 Nov 14 To: 31 Dec 14
 Travel Period from: _____ To: _____
 Out-of-Province Travel: _____

Name: Rowland Meyer Position (Title): Assoc. Chief Medical Officer, Office of the VP Quality and
 Location: 3rd Floor Southport Calgary Dept: CMO/Medical Affairs DOFA Level: _____ Union: _____ Business Phone #: _____ Ext: _____
 Employee # (E-People): _____


SECTION E: FINANCE CODING & TOTAL CLAIM


CAPITAL PROJECT CODING ONLY → Project Number: _____ Project Task Number: _____
 Expenditure Organization: _____ Expenditure Type: _____


Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT	
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary Expense	Total Expense		
2A	101	0000	7115000012		101	0000	7115000012	04020000	\$133.99	Total Section B	
2B										Total Section C&D	\$133.99
2C										Less Cash Advance	
2D										TOTAL CLAIM	\$133.99

NOTE: This section also fills from page 2A, 2B, 2C & 2D. **User to enter Coding & S Amounts \$133.99
 NOTE: These fields do not automatically fill in Section C & D. NOTE: These fields do not automatically fill in Section C & D

SECTION F: AUTHORIZATION

Employee Signature:  Date: 31 Dec 2014

Approved By (PRINT ONLY): Dr. Verita Kler DOFA Level: _____ Position #: _____ Phone #: _____
 Signature:  Title: VP Quality + CMO Date: Jan 7/14

Approved By (PRINT ONLY): William Hodjas DOFA Level: _____ Position #: _____ Phone #: _____
 Signature:  Title: _____ Date: 27 Dec 14

TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)

- Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system
- Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system
- If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 20-Nov-14 To 5-Dec-14
 Travel Period from: _____ To _____ (if applicable)
 Out-of-Province Travel

Name: Rowland Nichol Position (Title): Assoc. Chief Medical Officer, Office of the VP Quality and
 Location: Southport Calgary Dept: CMO/Medical Affairs DOFA Level: _____ (if applicable) Union: _____ Business Phone #: _____ Ext: _____
 Employee # (E-People): _____

SECTION E: FINANCE CODING & TOTAL CLAIM

CAPITAL PROJECT CODING ONLY → Project Number _____ Project Task Number _____
 Expenditure Organization _____ Expenditure Type _____

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT	
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total Expense	Total Section B	Total Section C&D
2A	101	0000	71110000012		101	0000	71110000012	64020000	\$133.99		\$133.99
2B											
2C											
2D											
									**User to enter Coding & \$ Amounts	\$133.99	
NOTE: This section auto fills from page 2A, 2B, 2C & 2D									NOTE: These fields do not automatically fill for Section C & D		

SECTION F: AUTHORIZATION

I attest that I have read and understand the "Travel, Hospitality & Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with the principles and mandatory requirements of this policy.
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above [Travel, Hospitality and Working Session Expenses Policy - Document# 1122](#)

By signing this form, attest that I am compliant to all the above statements
 Employee Signature: _____ Date: 31 Dec 2014

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above. Approved claim form with receipts should be sent by the approver directly to Accounts Payable for processing.

Approved By (PRINT ONLY): Dr. Verna Yiu DOFA Level _____ Position # _____ Phone # _____ Ext _____
 Signature: _____ Title _____ Date _____

I attest that I have read and understand all applicable policies of Alberta Health Services that pertain to these expenses, and confirm expenses being claimed are in compliance with such policies.
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.
 I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided above.

Approved By (PRINT ONLY): William Hondas DOFA Level _____ Position # _____ Phone # _____ Ext _____
 Signature: _____ Title Sr. Program Officer, Medical Affairs Date 21-Nov-04

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.
 Please send completed claim form (with receipts and other required backup) to: Alberta Health Services 10030-107 St, North Tower, 10th Floor, Accounts Payable, Edmonton, AB T5J 3E4

EXPENSE CLAIM DETAILS

*If **NOT** claiming any expenses in **Sections C or D**, this page does **NOT** have to be submitted.*

SECTION C: OTHER EXPENSES	Emp # (E-People)	Page 3
----------------------------------	-------------------------	---------------

• **Expenses to be claimed in this section include but are not limited to:** Hospitality & Hosting, Working Sessions, Recruitment, Relocation, Continuing Education, Business Insurance, and miscellaneous expenses
 → If expenses are for travel, gas, etc., go to Section B on pg 2.
 • ALL "OTHER" expenses listed below MUST have a secondary/expense code indicated!

*****Subtotal "Other Expenses" for each functional centre separately and enter each subtotal into column "Section C Total" on page 1 Section E*****

Date dd-mmm-yy	Business Reason for Expense - Detailed Description Required (include who attended-(if meal/Hospitality), why expense was required, what expense was and pertaining to and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page					
		Bal Unit	Location	Functional Centre	Secondary/ Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Yes/No	Continuing Education Select type from dropdown menu (if applicable)	GST is ON till slip/receipt, enter total amount in this column WITH GST	GST is NOT on till slip/receipt, enter total amount in this column	TOTAL OTHER \$
10-Dec-14	Rogers Wireless services - Dr. R. Nichol October2014	101	0000	71110000012	64020000	Yes			\$133.99	\$133.99

SECTION D: FOREIGN CURRENCY ONLY ENTER IN THIS SECTION IF AMOUNT NOT CONVERTED INTO CDN \$ (conversion not indicated on receipt/statement)
If foreign currency has been converted to CDN \$ on your receipt, enter expense in CDN \$ in either Section B or C as applicable

Please click on the following link for the Bank of Canada exchange rate using the date of expense: [Bank of Canada Currency Converter](#) → Select foreign country in 'From cell', and Canadian Dollar in 'To cell'; Enter date of expense in both date cells then select convert which will give the exchange rate - enter this amount in exchange rate column

Date dd-mmm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Finance Coding			Secondary/ Expense eg. 41000000 (8 characters)	Cost Effective Method Used? Yes/No	Completion of the "Cost Effective Method Used" Column is REQUIRED. If you select "No" in this column or the amount being claimed exceeds the Policy limit stated in "Appendix A", Further Explanation is REQUIRED in the "Rationale is Required" section on this page			
		Bal Unit	Location	Functional Centre			Foreign Currency Amount	Currency Type	Exchange Rate	Canadian Value

Rationale is Required for expenses that are not Cost Effective
 (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)

Expenses Paid (Retain a copy for your records)
 Do not include amounts paid by Alberta Health Services or reimbursed / reimbursable by another organization
 - 3 of 3-

ROWLAND NICHOL

Account Summary

Account Number:
Invoice Number:
Invoice Date: Dec 10, 2014

Total: **\$136.79**
Charged to your credit card on or after Dec 25, 2014

Your last bill

Previous balance 113.94
Payment(s) p.2 -113.94

\$ Balance from your last bill (including taxes): **\$0.00**

Any payments we received and processed after December 12, 2014 will show on your next bill.

Your current bill

 Wireless p.4 136.79

Total current bill (including taxes): **\$136.79**

For online and other payment options, see page 2. **Total:** **\$136.79**



Other Rogers services available to you

- Magazines
- Long Distance
- Messaging

R. Nichol Personal cell phone used for AHS business until AHS cell phone delivered 136.79 less personal charges (2.80) deducted from wireless usage. Total claim 133.99

Still have questions?
Visit www.rogers.com or see **Contact us** on page 2.



Your account number:
Total amount due: **\$136.79**

Thank you !
Your Rogers bill is paid by pre-authorized charge to your credit card.
You don't need to make any additional payments.

*0016091

ROWLAND NICHOL



05503417135503417131412120000136790000000000000000000000000004

06 20 1 900

96