

AHS Board and Executive Expense Report

Name Dr. Rollie Nichol
Title ACMO Medical Leadership, Workforce & Medical Affairs
Location Calgary
 Expenses submitted during the month of September 2019

Travel (1)

MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Sep-19	Expense Claim	Meetings		37		124	161			
Sep-19	Direct Billing	Meetings				92	92			
Total			\$ -	\$ 37	\$ -	\$ 216	\$ 253	\$ -	\$ -	\$ -

Total for the Month \$ 253

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ -
 Non economy air travel in the month \$ -

1) Travel expenses

Includes local and out of province/country travel expenses. Other travel includes items such as taxis, parking mileage, car rental and other expenses related to travel.

2) Professional Development

Includes conference, seminar and course registration fees and material

3) Hosting and Hospitality expenses

Hospitality and Hosting expenses may be incurred to advance AHS' mission, vision and values. For example, may include working lunches with staff and prospective employees meetings with government officials, dignitaries, public interest groups, donors other public or private organizations.

4) Other

Other expenses include expenses incurred in the normal course of business that are required for work purposes. May include small item technology purchases, books, etc.

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 Title	Claimant Location	Expense Claim Total									
NICHOL, ROWLAND	ACMO, Medical Leadership, Workforce & Medical Affairs	Calgary	\$ 161.59									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
9/12/2019	Fuel for renatal car -Physician Workforce Planning Presentation UofA	AB - Other Zones	Fuel-Travel and Car Rental	\$ 48.35				1				
9/12/2019	Parking - Physician Workforce Planning Presentation UofA	AB - Other Zones	Parking - Lot or Parkade	\$ 20.25				1				
9/12/2019	Physician Workforce Planning Presentation UofA. Parked at UofA and took transit to Faculty of Medicine	AB - Other Zones	Bus Transportation	\$ 3.50				1				
9/12/2019	Physician Workforce Planning Presentation UofA. Parked at UofA and took transit to Faculty of Medicine	AB - Other Zones	Bus Transportation	\$ 3.50				1				
9/12/2019	Meals - Physician Resource Planning Presentation UofA	AB - Other Zones	Meals Per Diem	\$ 37.00				1				
9/13/2019	Parking at ACH - Regional Pediatrician Workforce Planning Launch Meeting	AB - Other Zones	Parking - Lot or Parkade	\$ 13.50				1				
9/13/2019	Fuel for renatal car -Banff Symposium Practice Based Remediation. Panel member	AB - Other Zones	Fuel-Travel and Car Rental	\$ 20.34				1				
9/19/2019	Mileage from SPTT to ACH - Regional Pediatrician Workforce Planning Launch Meeting		Mileage-Local-Home Zone	\$ 15.15	Southport Tower	Alberta Children's		1			30	
Approver(s) for the claim		Approval Status		Approval Date								
BELANGER, FRANCOIS		Approve		25-Sep-19								

North Hill Gas Bar
540 - 16TH Ave NE
Calgary Alberta
(403) 299-4277
GST# R100730894

Member # [REDACTED]

Pump Litres Price/L
8 49.892 \$0.969
Product Amount
Regular \$48.35

Total \$48.35

GST (Inc Pumps) \$2.30

Purchase
VISA

DATE: 09/12/2019
TIME: 20:04:53
REF: [REDACTED]
TERM: [REDACTED]
AUTH: [REDACTED]
RESP: [REDACTED]

VISA CREDIT

APPROVED THANK YOU

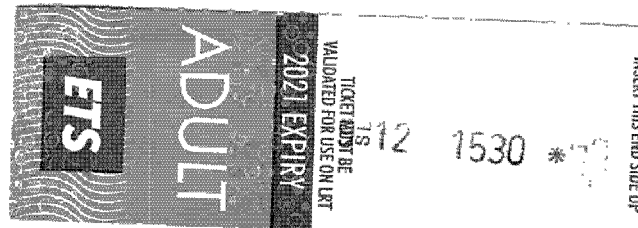
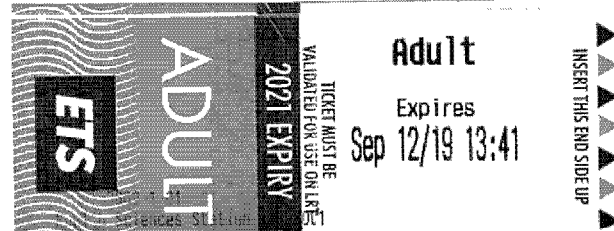
IMPORTANT:
retain this copy
for your records

CUSTOMER COPY

Store # [REDACTED]
Receipt # [REDACTED]

Members now earn
8 cents per litre

UNIVERSITY OF ALBERTA HOSPITAL
114ST UNDERGROUND PUBLIC LOT
MACHINE ID# 1002
Rcpt# [REDACTED]
09/12/19 16:29 L# 3 A# 1 Txn# [REDACTED]
09/12/19 12:01 In 09/12/19 16:29 Out
TkL# 734190
UAH Fee #2 \$ 20.25
Total Fee \$ 20.25
VISA \$ 20.25
Approval No [REDACTED]
Reference No [REDACTED]
Change Due \$ 0.00
PARKING RATES ARE GST EXEMPT
COMMENTS - EMAIL US :
parkingedmonton@ahs.ca



TRANSACTION RECORD

Calgary Co-op
Montgomery Gas Bar
4608 16th Avenue NW
Calgary Alberta
(403) 299-2602
GST# R100730894

Member # [REDACTED]

Pump Litres Price/L
6 19.765 \$1.029
Product Amount
Regular \$20.34

Total \$20.34

GST (Inc Pumps) \$0.97

Purchase
MASTERCARD

DATE: 09/13/2019
TIME: 14:41:05
REF: [REDACTED]
TERM: [REDACTED]
AUTH: [REDACTED]
RESP: [REDACTED]

MASTERCARD

TVR: [REDACTED]
TST: [REDACTED]
UNIDENTIFIED BY PIN

ad - Thank you

IMPORTANT:
retain this copy
for your records
CUSTOMER COPY

Store # [REDACTED]
Receipt # [REDACTED]

Members now earn
8 cents per litre
with every purchase.
Guaranteed!

RECEIPT
Alberta Children's
Hospital

License Plate Number



Expiration Date/Time

04:08 PM
SEP 19, 2019

Purchase Date/Time: 01:08pm Sep 19, 2019

Total Due: \$13.50 Rate: \$13.50 - 3 Hours

Total Paid: \$13.50 Pmt Type: CC (Swipe)

Tick:

S/N:

Setting: ACH Network

Mach Name: CA-ACH-007

Visa

Auth #

www.ahs.ca

Do Not Place On Dash

Expense Report Direct Bill Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive or an AHS Board Member and paid for by a third party vendor. The information will be used for Public Disclosure reporting.

Expenses Paid Directly to Third Party Vendors:

AHS may have established accounts with certain vendors used to book travel and other expenses that are billed directly to AHS. Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund. It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- Information will be used for reporting purposes only.
- A personal cheque must be attached to cover expenses deemed ineligible.
- Indicate whether you have expenses to report in this section for this reporting period: YES

Name : Rollie Nichol	Reporting Period for the Month of : Sep-19
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
12-Sep-2019	Direct Billing	██████████	Presentation Physician Workforce Planning University of Alberta and Banff Symposium Practice Based Remediation	Vision Travel	\$91.86
	Direct Billing	Airline Ticket		Vision Travel	
	Direct Billing	Airline Ticket		Vision Travel	
	Direct Billing	Airline Ticket		Vision Travel	
	Direct Billing	Airline Ticket		Vision Travel	
Total Paid in the Month					\$ 91.86

From: [REDACTED]
Sent: Monday, September 16, 2019 3:31 PM
To: [REDACTED]
Subject: Fwd: ENTERPRISE RENTAL AGREEMENT 71BPCH

Caution - This email came from an external address and may contain unsafe content. Ensure you trust this sender before opening attachments or clicking any links in this message.

From: Customerservice@enterprise.com
To: "Nichol Rowland" [REDACTED]
Sent: Monday, September 16, 2019 11:53:23 AM
Subject: ENTERPRISE RENTAL AGREEMENT 71BPCH

ENTERPRISE RENT A CAR, 1036 - 9 AVENUE SW, CALGARY, AB T2P1L9 (403) 212-5232

RENTAL AGREEMENT REF#
 [REDACTED]

RENTER
 NICHOL, ROWLAND

DATE & TIME OUT
 12/09/2019 08:58 AM
DATE & TIME IN
 13/09/2019 12:00 PM

BILLING CYCLE
 24-HOUR

VEH #1 2019 NISN QASH S4W
 VIN [REDACTED]
 LIC [REDACTED]
 KM DRIVEN 584

RATE SOURCE ACCOUNT
 ALBERTA HEALTH SERVICES

BILL TO ACCOUNT
 ALBERTA HEALTH SERVICES
 ATTN: UNKNOWN
 PO BOX 1600
 EDMONTON, AB T5T2N9

CLAIM INFO
 101000071110000012
 INSURED: 101000071110000012

SUMMARY OF CHARGES

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	12/09 - 13/09	1	DAY	\$43.00	\$43.00
TIME & DISTANCE	13/09 - 13/09	3	HOUR	\$14.19	\$42.57
REFUELING CHARGE	12/09 - 13/09				\$0.00
Subtotal:					\$85.57
Taxes & Surcharges					
GOODS AND SERVICES TAX	12/09 - 13/09			5%	\$4.37
VEHICLE LICENSE FEE RECOVERY	12/09 - 13/09	2	DAY	\$0.96	\$1.92
Total Charges:					\$91.86
Bill-To / Deposits					
ALBERTA HEALTH SERVICES					
TIME & DISTANCE	12/09 - 13/09	1	DAY		
REFUELING CHARGE	12/09 - 13/09				
GOODS AND SERVICES TAX	12/09 - 13/09		PERCENT	5%	
VEHICLE LICENSE FEE RECOVERY	12/09 - 13/09	2	DAY		
Subtotal:					-\$91.86
Total Amount Due					\$0.00

PAYMENT INFORMATION

AMOUNT PAID **TYPE** **CREDIT CARD NUMBER**