

AHS Board and Executive Expense Report

Name Sharon Lehr
Title Chief Program Officer Operational Best Practices
Location Edmonton

Expenses submitted during the month of June 2017

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)
Jun-17	Expense Claim	Meetings		87	311	286	684			
Jun-17	Direct Billing	Meetings	893				893			
Total			\$ 893	\$ 87	\$ 311	\$ 286	\$ 1,577	\$ -	\$ -	\$ -

Total for the Month \$ 1,577

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 145
 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									
LEHR, SHARON	Chief Program Officer, Operational Best Practices	Edmonton	\$ 683.53									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
3/23/2017	Attended OBP Resource Team Meetings - North Zone	AB - North Zone	Parking - Lot or Parkade	\$ 29.35			Parking YYC Airport for flight to Edmonton to attend OBP meeting in Westlock.	1				
4/28/2017	Attended OBP Resource Team Meeting - RGH	AB - Local	Parking - Lot or Parkade	\$ 14.25			Parking at RGH - OBP Meeting with Site Leadership	1				
5/30/2017	Attended OBP Resource Team Meetings	AB - North Zone	Taxi	\$ 31.90	Home	YYC Airport	Taxi to YYC Airport for flight to Edmonton to attend OBP Resource Team Meetings in North Zone & Edmonton Zone	1				
5/30/2017	Attended OBP Resource Team meetings	AB - North Zone	Meals Per Diem	\$ 37.00			Meals while in Edmonton to attend OBP Resource Team Meetings - North Zone & Edmonton Zone Lunch \$13.00 Dinner \$24.00	1				
5/30/2017	Attended OBP Resource Team Meetings	AB - North Zone	Accommodations	\$ 310.64			Accommodations for two nights (May 30 & 31) to attend OBP Resource Team Meetings - North Zone and Edmonton Zone	2				
5/31/2017	Attended OBP Resource Team meetings	AB - North Zone	Meals Per Diem	\$ 37.00			Meals while in Edmonton to attend OBP Resource Team Meetings - North Zone & Edmonton Zone Lunch \$13.00 Dinner \$24.00	1				
6/1/2017	Attended OBP Resource Team Meetings - North Zone & Edmonton Zone	AB - North Zone	Meals Per Diem	\$ 13.00			Meals while in Edmonton to attend OBP Resource Team Meetings - North Zone & Edmonton Zone Lunch \$13.00	2				
6/1/2017	Attended OBP Resource Team Meetings - North Zone & Edmonton Zone	AB - Local	Taxi	\$ 47.19	YYC Airport	Home	Taxi from YYC Airport to Home - OBP Meeting Resource Team Meetings - North Zone & Edmonton Zone	1				

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
LEHR, SHARON	Chief Program Officer, Operational Best Practices	Edmonton	\$ 683.53

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/5/2017	Attended OBP Resource Team Meeting - Central Zone		Mileage-Other	\$ 80.30	Home	Red Deer Regional Hospital	Mileage from Calgary to Red Deer to attend OBP Resource Team Meeting - Central Zone	1			159
6/5/2017	Attended OBP Resource Team Meeting - Central Zone	AB - Other Zones	Parking - Lot or Parkade	\$ 8.50			Parking at Red Deer Regional Hospital - OBP Resource Team Meeting - Central Zone	1			
6/7/2017	Attended OBP Resource Team Meeting - Calgary Zone	AB - Local	Parking - Lot or Parkade	\$ 14.25			Parking at South Health Campus to attend OBP Resource Team Meeting.	1			
6/9/2017	Attended Budget Meeting - Calgary Zone	AB - Other Zones	Parking - Lot or Parkade	\$ 14.25			Parking at South Health Campus to attend Calgary Zone Budget Meeting	1			
6/20/2017	Attended Senior Leadership Meeting in Edmonton	AB - North Zone	Taxi	\$ 45.90	YYC Airport	Home	Taxi from YYC Airport to Home - Attended Senior Leadership Meeting in Edmonton	1			

Approver(s) for the claim	Approval Status	Approval Date
RHODES, DEBORAH	Approve	6-Jul-17

RECEIPT
GST NO. R122556194

TAXI
 POF: A123
 IN: 23/03/17 07:59
 OUT: 23/03/17 23:42
 PAID: \$ 29.95
 DURATION: 2 12: 43
 (GST INCLUDED)

REF.
 YOU HAVE 12 MIN.
 TO EXIT

YYC CALGARY INTERNATIONAL AIRPORT

*Parking - YYC AIRPORT
 Flight to Edmonton to
 attend OBP meeting
 - North Zone*

ASSOCIATED CAB
 ALLIED LIMOUSIN
 307-41 AVENUE NE
 CALGARY AB T2E 2N4
 (403) 299-1111
 CAR#99
 Wayne Gretzky

SALE

MID: [REDACTED]
 TID: [REDACTED]
 Batch #: [REDACTED]
 05/30/17
 APPR CODE: [REDACTED]
 VISA [REDACTED]

AMOUNT \$42.90
 TIP \$4.29
 TOTAL \$47.19

00 - APPROVED - 001

Visa Credit

THANK YOU

CUSTOMER COPY

*Taxi - YYC Airport to Home
 - OBP Resource Team meeting - North & Edmonton Zone*

Alberta Health Services
 RECEIPT
 ENTRY DATE/TIME: 23/04/17 11:40
 PAY DATE/TIME: 23/04/17 15:35
 PARK DUE: 10:00:00
 05/30/17
 APPROVED BY: [REDACTED]
 05/30/17 10:00
 LGID: 11111111
 VISA

REF. [REDACTED]

 * Parking Rates *
 * Are GST Exempt *

 * Please Exit *
 * Site Within *
 * 15 Minutes *
 * After Payment *
 * Is Made *

 * No Exit *
 * Privileges *

 * Managed by *
 * Alberta *
 * Health Services *

 * Have Questions *
 * Or Concerns? *
 * Call Us *
 * 403 943 3725 *

*Parking - RGH - OBP meeting
 with Site leadership*

ASSOCIATED CAB
 ALLIED LIMOUSIN
 307-41 AVENUE NE
 CALGARY AB T2E 2N4
 (403) 299-1111
 CAR#1009

SALE

MID: [REDACTED]
 TID: [REDACTED]
 Batch #: [REDACTED]
 05/30/17
 APPR CODE: [REDACTED]
 VISA [REDACTED]

AMOUNT \$29.00
 TIP \$2.90
 TOTAL \$31.90

00 - APPROVED - 001

Visa Credit

THANK YOU

CUSTOMER COPY

*Taxi to YYC Airport - Flight to Edmonton
 - OBP Resource Team meetings
 North Zone & Edmonton Zone*

RECEIPT

Red Deer
 Regional Hospital

License Plate Number

Expiration Date/Time

08:09 AM
JUN 06, 2017

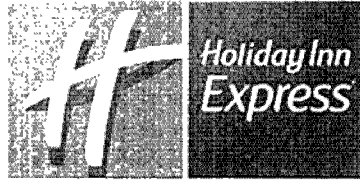
Purchase Date/Time: 08:09am Jun 05, 2017
 Total Due: \$8.50 Rate: VALU-RATE 24HR/\$8.50
 Total Paid: \$8.50 Payment Type: Card
 Ticket #: [REDACTED]
 SIN #: [REDACTED]
 Setting: Red Deer
 Mach Name: CE-RDRH-023

Visa

Auth #: [REDACTED]

DO NOT PLACE ON DASH

*Parking - OBP Resource
 Team Meeting - Central Zone*



06-01-17

Sharon Lehr	Folio No. :	Room No. :
[Redacted]	A/R Number :	Arrival : 05-30-17
	Group Code :	Departure : 06-01-17
	Company : Government Canada	Conf. No. : [Redacted]
	Membership No. : [Redacted]	Rate Code : [Redacted]
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
05-30-17	*Accommodation	145.00	
05-30-17	Marketing Fee	4.35	
05-30-17	AB Tourism Levy	5.97	
05-31-17	*Accommodation	145.00	
05-31-17	Marketing Fee	4.35	
05-31-17	AB Tourism Levy	5.97	
Total		310.64	0.00
Balance		310.64	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____
 I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Hotel Receipt to attend DBP Resource Team Meetings - North & Edmonton Zones

Holiday Inn Express Downtown
 Edmonton 10010 - 104 Street
 Canada T5J 0Z1 Edmonton, AB
 Telephone: (780) 423-2450 Fax: (780) 426-6090
 OGST #896724515
www.hiexdowntown.com

RECEIPT ⑦

Alberta Health Services
South Campus
RECEIPT
ENTRY DATE/TIME:
07.06.17 07:57
EXIT DATE/TIME:
07.06.17 12:22
PARK-DUR.: HRS:MIN
2:04:25

AMOUNT:
14.25
METHOD OF PAYMENT::
VISA



Parking - OBP Resource Team meeting - Calgary Zone

Alberta Health Services
South Campus
RECEIPT

ENTRY DATE/TIME:
09/06/17 07:35
PAY DATE/TIME:
09/06/17 10:43
PARK-DUR.: HRS:MIN
0:03:00

ALLOWED EXIT TO:
10.06.17 07:50
PAID: \$ 14.25
VISA

REF.

* Parking Rates *
* Are GST Exempt *

* Please Exit *
* Site Within *
* 15 Minutes *
* After Payment *
* Is Made *

* No In/Out *
* Privileges *

* Managed by *
* Alberta *
* HealthServices *

* Have Questions *
* Or Concerns? *
* Call Us *
* 403-956-1090 *

Parking - Calgary Zone Budget meeting

ASSOCIATED CAB ⑨
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111
CAR#1647

SALE

MID: [REDACTED]
TID: [REDACTED] REF# [REDACTED]
Batch [REDACTED] SEQ [REDACTED]
06/20/17 19.38.52
APPR CODE [REDACTED]
VISA

AMOUNT \$40.90
TIP \$5.00
TOTAL \$45.90

00 - APPROVED - 001

Visa Credit
[REDACTED]

THANK YOU

CUSTOMER COPY

Tax - V4C Airport to Home - Senior Leaders Meeting

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 : Sharon Lehr	Reporting Period for the Month of : Jun-17
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
23-Mar-2017	Direct Billing	Airline Ticket	Flight - Calgary to Edmonton & return - Operational Best Practice Presentation to North Zone .	Marlin Travel	418.16
30-May-2017	Direct Billing	Airline Ticket	Flight - Calgary to Edmonton & return - Operational Best Practice Resource Team Orientation Meeting - Part II to North Zone .	Marlin Travel	379.21
1-Jun-2017	Direct Billing	Airline Ticket	Change fee to return on earlier flight.	Marlin Travel	96.00
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in the Month					\$ 893.37



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 21 Mar 17 Client: [REDACTED] Agent: [REDACTED] Agents email: [REDACTED]@MARLINTRAVEL.CA File Locator: [REDACTED]
--	--

PASSENGERS: MS SHARON LEHR

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	343.20	0.00	\$0.00	74.96	0.00	418.16 CAD
Total:	343.20	0.00	0.00	74.96	0.00	418.16 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	03/20/2017			0.00 CAD
	[REDACTED]	03/20/2017		[REDACTED]	418.16 CAD
Total Payment:					418.16 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SITE VISIT WESTLOCK

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****
 ***** PLEASE REVIEW YOUR ITINERARY FOR ACCURACY *****
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----
 ----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES
ALBERTA HEALTH SERVICES
10030 - 107 STREET
EDMONTON AB
T5J 3E4

Trip #: [REDACTED]
Booking Date: 21 Mar 17
Client: [REDACTED]
Agent: [REDACTED]
Agents email: [REDACTED]@MARLINTRAVEL.CA
File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
SHARON LEHR	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

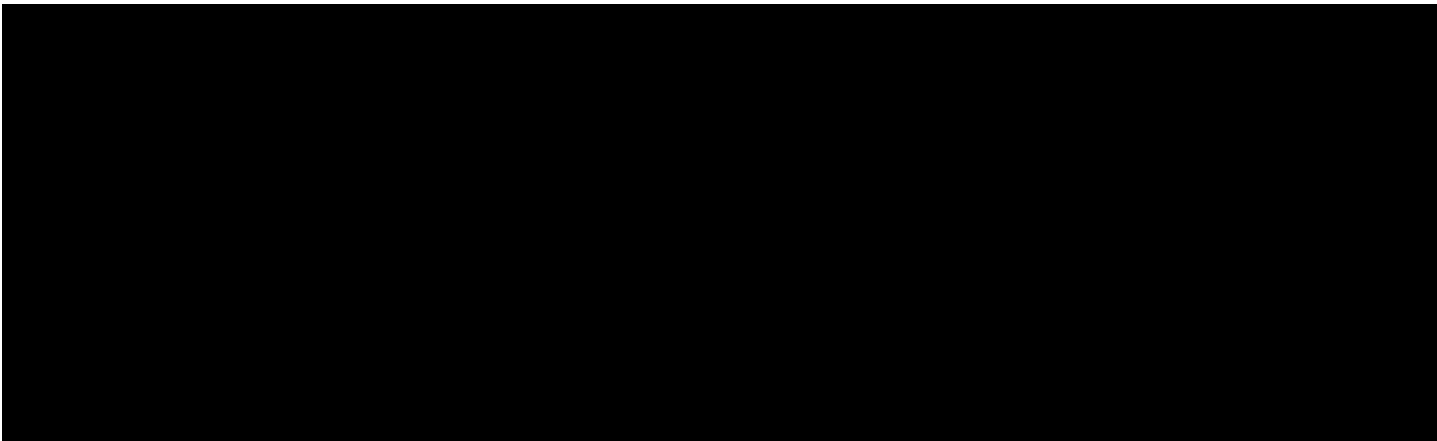


AIR

Passengers: SHARON LEHR

Booking Date: 03/20/2017
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08134	CALGARY INTL		EDMONTON INTL	V		
		03/23/2017 9:05AM		03/23/2017 9:57AM			
AIR CANADA	08173	EDMONTON INTL		CALGARY INTL	V		
		03/23/2017 7:10PM		03/23/2017 8:04PM			





Invoice

ALBERTA HEALTH SERVICES SHARON LEHR 10030 - 107 STREET EDMONTON AB CA T5J3E4	Trip #: [REDACTED] Booking Date: 25 May 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED]
---	---

PASSENGERS: MS SHARON LEHR

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	304.25	0.00	\$0.00	74.96	0.00	379.21 CAD
Total:	304.25	0.00	0.00	74.96	0.00	379.21 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	05/25/2017		[REDACTED]	379.21 CAD
Total Payment:					379.21 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL OPERATIONAL BEST PRACTICE TEAM ORIENTATION PROGRAM MEE

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****
 ***** PLEASE REVIEW YOUR ITINERARY FOR ACCURACY *****
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY
 ***** FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW
[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/traveldoc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. *****
 ***** PLEASE NOTE CHECKIN TIMES *****
 **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

GOVERNMENT CENTRE
 MAIN FLOOR, 9929- 108TH ST, EDMONTON, AB T5K1G8
 Tél.: 780 425 8611
 GST REG# 88510191

ALBERTA HEALTH SERVICES
SHARON LEHR
10030 - 107 STREET
EDMONTON AB
CA
T5J3E4

Trip #: [REDACTED]
Booking Date: 25 May 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
SHARON LEHR	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



AIR

Passengers: SHARON LEHR

Booking Date: 05/25/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08134	CALGARY INTL		EDMONTON INTL	V		
		05/30/2017 8:00AM		05/30/2017 8:50AM			



AIR

Passengers: SHARON LEHR

Booking Date: 05/25/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08155	EDMONTON INTL		CALGARY INTL	W		
		06/01/2017 8:00PM		06/01/2017 8:52PM			



Invoice

ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 01 Jun 17 Client: [REDACTED] Agent: [REDACTED] File Locator:
---	--

PASSENGERS: MS. SHARON LEHR

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA ONLINE Confirmation # [REDACTED]	75.00	0.00	\$0.00	0.00	0.00	75.00 CAD
AIR CANADA ONLINE Confirmation # [REDACTED]	21.00	0.00	\$0.00	0.00	0.00	21.00 CAD
Total:	96.00	0.00	0.00	0.00	0.00	96.00 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	06/01/2017		[REDACTED]	75.00 CAD
	[REDACTED]	06/01/2017		[REDACTED]	21.00 CAD
				Total Payment:	96.00 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

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

Trip #: [REDACTED]
Booking Date: 01 Jun 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator:

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
SHARON LEHR	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



AIR

Description: FARE DIFFERENCE	Booking Date: 06/01/2017
Passengers: SHARON LEHR	File Locator/Ticket #: [REDACTED]

From: EDMONTON INTL **Departing on:** 06/01/2017
To: **Returning on:**



AIR

Description: CHANGE FEE	Booking Date: 06/01/2017
Passengers: SHARON LEHR	File Locator/Ticket #: [REDACTED]

From: EDMONTON INTL **Departing on:** 06/01/2017
To: **Returning on:**