

AHS Board and Executive Expense Report

Name Dr. Stafford Dean
Title Chief Analytics Officer & Senior Program Officer Analytics (DIMR)
Location Calgary
 Expenses submitted during the month of May 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)
May-17	P-Card	Meetings				99	99			
May-17	Expense Claim	Meetings			156	327	483			
May-17	Expense Claim	Meetings				25	25			
Total			\$ -	\$ -	\$ 156	\$ 451	\$ 607	\$ -	\$ -	\$ -

Total for the Month \$ 607

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 139
 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 P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
DEAN, STAFFORD	Chief Analytics Officer & Senior Program Officer Analytics (DIMR)	Calgary	\$ 99.25									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
4/19/2017	AEC Meeting at SPT	AB - Other Zones	Parking - Lot or Parkade	\$ 13.50			AEC Meeting at SPT	1				
4/21/2017	IHOT Meeting FMC	AB - Other Zones	Parking - Lot or Parkade	\$ 11.25			Parking - IHOT Meeting FMC	1				
4/21/2017	ALP Session	AB - Other Zones	Parking - Lot or Parkade	\$ 13.50			ALP Session	1				
4/24/2017	Presenting - Calgary Zone Clinical Department Head Meeting	AB - Other Zones	Parking - Lot or Parkade	\$ 9.00			Presenting - Calgary Zone Clinical Department Head Meeting	1				
4/24/2017	Working at FMC am before first meeting with the Calgary Zone Clinical Department Heads	AB - Other Zones	Parking - Lot or Parkade	\$ 9.00			Working at FMC am before first meeting with the Calgary Zone Clinical Department Heads	1				
4/26/2017	Heart Failure Outcomes Improvement Team	AB - Other Zones	Parking - Lot or Parkade	\$ 11.25			Heart Failure Outcomes Improvement Team	1				
5/17/2017	Parking for 3M meeting participants	AB - Other Zones	Parking - Lot or Parkade	\$ 10.00			Parking for 3M meeting participants	1				
5/17/2017	Meeting with Physicians from the Pain Program - RRDC	AB - Other Zones	Parking - Lot or Parkade	\$ 6.75			Meeting with Physicians from the Pain Program - RRDC	1				
5/18/2017	ELT Session	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00			Stafford Presenting to ELT	1				
Approver(s) for the claim		Approval Status		Approval Date								
TODD, KATHRYN		Approve		1-Jun-17								

RECEIPT
Foothills
Medical Centre
Lot 6 - North

License Plate Number



Expiration Date/Time

04:37 PM
APR 21, 2017

Purchase Date/Time: 01:44pm Apr 21, 2017
Total Due: \$11.25 Rate: \$11.25 - 2 Hr 30 Min
Total Paid: \$11.25 Payment Type: Card
Ticket # [Redacted]
S/N # [Redacted]
Setting: Lot 06 - North
Mach Name: CA-FMC-0609

[Redacted] MasterCard Auth #: [Redacted]
www.ahs.ca
Do Not Place On Dash

RECEIPT
Foothills
Medical Centre
Lot 6 - North

License Plate Number



Expiration Date/Time

02:07 PM
APR 21, 2017

Purchase Date/Time: 11:07am Apr 21, 2017
Total Due: \$13.50 Rate: \$13.50 - 3 Hours
Total Paid: \$13.50 Payment Type: Card
Ticket # [Redacted]
S/N # [Redacted]
Setting: Lot 06 - North
Mach Name: CA-FMC-0609

[Redacted] MasterCard Auth #: [Redacted]
www.ahs.ca
Do Not Place On Dash

RECEIPT
Foothills
Medical Centre
Lot 8A - East

License Plate Number



Expiration Date/Time

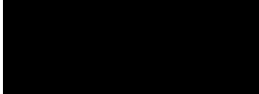
06:34 PM
APR 19, 2017

Purchase Date/Time: 03:34pm Apr 19, 2017
Total Due: \$13.50 Rate: \$13.50 - 3 Hours
Total Paid: \$13.50 Payment Type: Card
Ticket # [Redacted]
S/N # [Redacted]
Setting: Lot 08A - East
Mach Name: CA-FMC-0801

[Redacted] MasterCard Auth #: [Redacted]
www.ahs.ca
Do Not Place On Dash

RECEIPT
Richmond Road
Diagnostic and
Treatment Centre

License Plate Number



Expiration Date/Time

12:21 PM
MAY 17, 2017

Purchase Date/Time: 10:51am May 17, 2017
Total Due: \$6.75 Rate: \$6.75 - 1 Hr 30 Min
Total Paid: \$6.75 Payment Type: Card
Ticket # [Redacted]
S/N # [Redacted]
Setting: RRDTC Network
Mach Name: CA-RRD-005

[Redacted] MasterCard Auth #: [Redacted]
www.ahs.ca
Do Not Place On Dash

RECEIPT
Foothills
Medical Centre
Lot 8A - East

License Plate Number



Expiration Date/Time

11:59 AM
APR 24, 2017

Purchase Date/Time: 09:59am Apr 24, 2017
Total Due: \$9.00 Rate: \$9.00 - 2 Hours
Total Paid: \$9.00 Payment Type: Card
Ticket # [Redacted]
S/N # [Redacted]
Setting: Lot 08A - East
Mach Name: CA-FMC-0801

[Redacted] MasterCard Auth #: [Redacted]
www.ahs.ca
Do Not Place On Dash

RECEIPT
Foothills
Medical Centre
Lot 8A - East

License Plate Number



Expiration Date/Time

11:58 AM
APR 24, 2017

Purchase Date/Time: 09:58am Apr 24, 2017
Total Due: \$9.00 Rate: \$9.00 - 2 Hours
Total Paid: \$9.00 Payment Type: Card
Ticket # [Redacted]
S/N # [Redacted]
Setting: Lot 08A - East
Mach Name: CA-FMC-0801

[Redacted] MasterCard Auth #: [Redacted]
www.ahs.ca
Do Not Place On Dash

2100 1st Ave SW
 Calgary, AB T2W 4X8
 403-213-9708

 ADVICE: 17:14:49
 DATE: 17:17:13
 PARK: 17:17:13
 0:02:25

 ALLOWED: 17:17:00

 SALES: \$ 11.25
 MCH: 15:0000



 * Marking Rates *
 * 15 Min *

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

 * 12:00:00 *
 * Privileges *

 * Managed by *
 * Alberta *
 * HealthReview *

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

RECEIPT
Southland Park IV
 Southport Tower

License Plate Number

Expiration Date/Time

11:24 AM
MAY 19, 2017

Purchase Date/Time: 11:24am May 18, 2017 *
 Total Due: \$15.00 Rate: \$15.00 - 24 Hours
 Total Paid: \$15.00 Payment Type: Card
 Ticket #:
 S/N #:
 Setting: SPT Wireless
 Mach Name: CA-SPT-001

MasterCard
 Auth #:
 www.ahs.ca
 DO NOT PLACE ON DASH

MORGUARD INVESTMENTS
 - PA
 10201 SOUTHPORT RD SW
 CALGARY AB T2W4X8
 4032139708

SALE

MID:
 TID: REF#:
 Batch 13
 05/17/17
 APPR CODE:
 MASTERCARD

AMOUNT \$11

APPROVED

MasterCard

THANK YOU
 PLEASE COME AGAIN

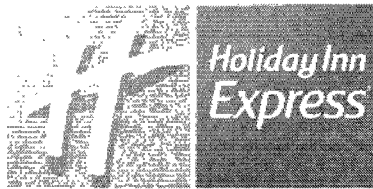
CUSTOMER COPY

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
DEAN, STAFFORD	Chief Analytics Officer & Senior Program Officer Analytics (DIMR)	Calgary	\$ 483.16

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/8/2017	Meetings with Alberta Health & Alberta Innovates Health Solutions.	AB - Other Zones	Accommodations	\$ 170.06			Meetings with Alberta Health & Alberta Innovates Health Solutions.	1			
5/8/2017	Meetings with Alberta Health & Alberta Innovates Health Solutions.		Mileage-Other	\$ 313.10	Calgary Return	Edmonton Return	Meetings with Alberta Health & Alberta Innovates Health Solutions.	1			310

Approver(s) for the claim	Approval Status	Approval Date
TODD, KATHRYN	Approve	1-Jun-17



05-09-17

Stafford Dean	Folio No. :	Room No. :
[REDACTED]	A/R Number :	Arrival : 05-08-17
	Group Code :	Departure : 05-09-17
	Company : Government Canada	Conf. No. : [REDACTED]
	Membership No. : PC [REDACTED]	Rate Code : [REDACTED]
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
05-08-17	Parking	14.00	
05-08-17	*Accommodation	139.00	
05-08-17	Marketing Fee	4.17	
05-08-17	GST #87857 8491 RT0002	7.16	
05-08-17	AB Tourism Levy	5.73	
05-09-17	MasterCard [REDACTED]		170.06
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.		Total	170.06
		Balance	0.00

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 agrée 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.

Holiday Inn Express Downtown
 Edmonton10010 - 104 Street
 Canada T5J 0Z1 Edmonton, AB
 Telephone: (780) 423-2450 Fax: (780) 426-6090
 0GST #896724515
www.hiexdowntown.com

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
DEAN, STAFFORD	Chief Analytics Officer & Senior Program Officer Analytics (DIMR)	Calgary	\$ 25.00

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
5/16/2017	Paid for Parking -Scott Davis for 3m/AH meeting (Stafford required to be at SPT for ELT / ECC	AB - Other Zones	Parking - Lot or Parkade	\$ 10.00			Paid for Parking -Scott Davis for 3m/AH meeting (Stafford required to be at SPT for ELT / ECC	1			
5/16/2017	Meeting at SPT - ELT / ECC Steering Committee	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00			Meeting at SPT - ELT / ECC Steering Committee	1			

Approver(s) for the claim	Approval Status	Approval Date
TODD, KATHRYN	Approve	8-Jun-17

MORGUARD INVESTMENTS
- PA
10201 SOUTHPORT RD SW
CALGARY AB T2W4X8
4032139708

SALE

MID: [REDACTED]
TID: [REDACTED] REF#: [REDACTED]
Batch #: [REDACTED] 10:05:57
05/16/17
APPR CODE: [REDACTED]
MASTERCARD

AMOUNT \$10.00

APPROVED

MasterCard
[REDACTED]

THANK YOU
PLEASE COME AGAIN

CUSTOMER COPY

RECEIPT
Southland Park IV
Southport Tower

License Plate Number
[REDACTED]

Expiration Date/Time

09:28 AM
MAY 17, 2017

Purchase Date/Time: 09:28am May 16, 2017
Total Due: \$15.00 Rate: \$15.00 - 24 Hours
Total Paid: \$15.00 Payment Type: Card
Ticket [REDACTED]
S/N # [REDACTED]
Setting: SPT Wireless
Mach Name: CA-SPT-001

[REDACTED] MasterCard

Auth #: [REDACTED]

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