

### **AHS Board and Executive Expense Report**

NameDr. Stafford DeanTitleChief Analytics OfficerLocationCalgaryExpenses submitted during the month of September 2018

						Tra	avel (1)						
МММ-ҮҮ	Source Document	Purpose	Airfa	re	Meals	Accor	nmodation	Other Travel	Total Travel	ofessional velopment (2)	9 Ho	Vorking Sessions sting and ospitality (3)	Other (4)
Sep-18	Expense Claim	Meetings					756	696	1,452				
Total			\$	-	\$ -	\$	756	\$ 696	\$ 1,452	\$ -	\$	-	\$ -
Total for the Month	\$ 1,452												
Maximum da	ily single meal expense	e claimed in the month	\$	-									

having any single mean expense claimed in the month	Ψ	
Maximum daily base hotel rate claimed in the month	\$	259
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

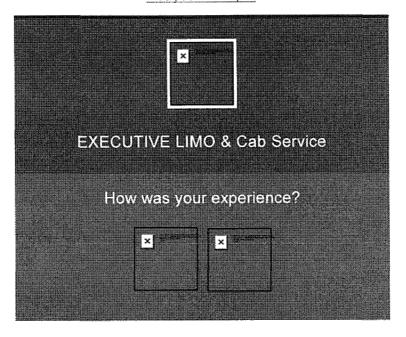
Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

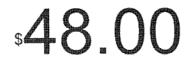
# AHS Public Disclosure Expense Claims

	Claimant Title	Claimant Location	Expense Claim									
Name DEAN, STAFFORD	Chief Analytics Officer	Calgary	<b>Total</b> \$ 735.24									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification		# of Attendees	Attendee Name(s)	Trip Distance
9/11/2018	HAS 2018		AB - Other Zones	Taxi	\$ 63.08	Airport	Little America Hotel	HAS 2018 - Taxi from Airport to Hotel	1			
9/13/2018	HAS 2018		AB - Other Zones	Accommodations	\$ 584.11			HAS 2018 - Accommodations - Little America Hotel	2			
9/13/2018	HAS 2018		AB - Other Zones	Parking - Lot or Parkade	\$ 88.05			Parking at the Calgary Airport	3			
Approver(s) fo	or the claim	Approval S	tatus	Approval Date			1	•			1	
TODD, KATHR	YN	Approve		21-Sep-18								

From: Sent: To: Subject: EXECUTIVE LIMO & Cab Service via Square <receipts@messaging.squareup.com> Tuesday, September 11, 2018 5:09 PM Stafford Dean Receipt from EXECUTIVE LIMO & Cab Service

Now when you shop at sellers who use Square, your receipts will be delivered automatically. Not your receipt?







Custom Amount	\$40.00
Purchase Subtotal Tip	\$40.00 \$8.00
Total	\$48.00
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EXECUTIVE LIMO & Cab Service

Last Location

MasterCarc Swipe)	Sep 11
	2018
STAFFORD DEAN	at 5.08
	PM
	Auth
	code:

Square Just Got More Rewarding Your favorite businesses may send you news and rewards via Square. Learn more and update preferences.

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		AMERICA		09-13-18
Stafford Dean			Room No.	
Stanoru Dean		SALT LAKE CITY	Arrival	: 09-11-18
			Departure	: 09-13-18
			Page No.	: 1 of 1
			Folio No.	:
INVOICE			Conf. No.	:
Membership No.			Cashier No.	:
A/R Number	:		User ID	:
Group Code	-		Invoice No.	:
Company Name	:			

Date	Description	Additional Information	Charges	Credits
09-11-18	Room Charge		199.00	20000000000000000000000000000000000000
09-11-18	Taxes Room Tax		12.08	
09-11-18	Taxes State Sales Tax		13.63	
09-12-18	Room Charge		199.00	
09-12-18	Taxes Room Tax		12.08	
09-12-18	Taxes State Sales Tax		13.63	
09-13-18	Mastercard Payment			449.42
		Total	449.42	449.42
		Balance		0.00
		\$584.11 CAD		

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 association fails to pay for any part of the full amount of these charges.

Guest Signature:



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# AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
DEAN, STAFFORD	Chief Analytics Officer	Calgary	\$ 196.20									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location			# of Attendees	Attendee Name(s)	Trip Distance
9/14/2018	Taxi From Bus drop off to SSP		AB - Other Zones	Taxi	\$ 19.60	Downtown Edm		SIP Team Meeting - Taxi From Bus drop off to SSP	1			
9/14/2018	SIP Team Meeting in Edmonto	n	AB - Other Zones	Bus Transportation	\$ 157.00			SIP Team Meeting in Edmonton	1			
9/14/2018	SIP Team Meeting		AB - Other Zones	Taxi	\$ 19.60	SSP		SIP Team Meeting - Taxi from SSP to Bus pick up location	1			
Approver(s) fo	or the claim	Approval S	tatus	Approval Date			•	•	•			
TODD, KATHRY	YN	Approve		21-Sep-18								

GREATER EDMONTON TAXI SERVICE 10135 31 AVE NW EDMONTON AB	GREATER EDMONTON TAXI SERVICE 1013531AVENW EDMONTON AB
CARD CARD TYPE MASTERCARD DATE 2018/09/14 TIME 0418 09:17:29 INVOICE # RECEIPT NUMBER PURCHASE TOTAL \$19.80	CARD TYPE MASTERCARD DATE 2018/09/14 TIME 0631 13:57:31 INVOICE # RECEIPT NUMBER PURCHASE TOTAL \$19.60
CAPITAL ONE	CAPITAL ONE
APPROVED	APPROVED
AUTH# THANK YOU	AUTH# THANK YOU
CARDHOLDER COPY	CARDHOLDER COPY
IMPORTANT - RETAIN THIS	IMPORTANT - RETAIN THIS

IMPORIAN COPY FOR YOUR RECORDS COPY FOR YOUR RECORDS

BARREL TAXI 780.489.7777 BARREL TAXI 780.489.7777 EDMTAXI.COM GST 100403070

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YELLOW CAB 780.462.3456 YELLOW CAB 780.462.3456 EDMTAXI.COM GST 100403070

From:	Red Arrow Reservations <itinerary@redarrow.ca></itinerary@redarrow.ca>
Sent:	Friday, September 14, 2018 5:55 AM
То:	Stafford Dean
Subject:	Red Arrow Itinerary/Receipt
	ITINERARY/RECEIPT
processory	

2018-09-14

You can reach us at:

Website User

### Corporate Sales

ORDER# ORDERED CUSTOMER#	P.O. GROUP NAME	DEPARTING	RETURNING	SALES REP	, SALES AGENT
2018-09- 14	PARKING	2018-09- 14	2018-09-14		Website User

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Travellers:

Dean/Stafford

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
<b>Parking Per Day</b> 2018-09-14 (1 day)	1 day	Per Day Parking	1	\$ 4.76	\$ 5.00
<b>CEEXP 06:00.</b> Assigned to: 08A Departs Calgary (CGYNORTH / CNS 304 35 Ave NE) at 06:15 on 2018-09-14. Arrives Edmonton (EDMTO / ETO 10014 104 St) at 09:20 on 2018-09-14. (3 hrs 5 mins)	3 hrs 5 mins	Adult	1	\$ 72.38	\$ 76.00
EDMCAL 14:00 YYC. Assigned to: 03C Departs Edmonton (EDMTO / ETO 10014 104 St) at 14:00 on 2018-09-14.	3 hrs 50 mins	Adult	1	\$ 72.38	\$ 76.00

# Arrives Calgary (CGYNORTH / CNS 304 35 Ave NE) at 17:50 on 2018-09-14. (3 hrs 50 mins)

				<b>Base Price:</b>	\$ 149.52
				<b>Discounts:</b>	\$ 0.00
Payments R	eceived GUEST	REFERENCE	AMOUNT	Service Charges:	\$ 0.00
2018-09-		MasterCard	AMOUNT S	GST:	\$ 7.48
14	Stafford Dean	MasterCard	152.00	Invoice Total:	\$ 157.00
2018-09- 14	Dean/Stafford	Cash	\$ 5.00	Payments Received:	\$ 157.00
				Balance Due:	\$ 0.00

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

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

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

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

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

# AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense ( Total	Claim										
DEAN, STAFFORD	Chief Analytics Officer	Calgary	\$ 52	20.62										
Expense Date	Business reason		Expense Location		Expense Type	An			To Location	Justification	-	# of Attendees	Attendee Name(s)	Trip Distance
9/17/2018	ELT Offsite Meeting in Edmon 18/18	ton Sept			Mileage-Other	\$	154.03	Calgary	Edmonton	ELT Offsite Meeting in Edmonton Sept 18/18	1			305
9/18/2018	ELT Offsite Meeting in Edmon 18/18	ton Sept			Mileage-Other	\$	154.03	Edmonton	Calgary	ELT Offsite Meeting in Edmonton Sept 18/18	1			305
9/18/2018	ELT Offsite Meeting in Edmon 18/18	ton Sept	AB - Othe Zones	er	Accommodations	\$	172.06			ELT Offsite Meeting in Edmonton Sept 18/18	1			
9/18/2018	ELT Offsite Meeting in Edmon 18/18	ton Sept	AB - Othe Zones	er	Parking - Lot or Parkade	\$	40.50			ELT Offsite Meeting in Edmonton Sept 18/18	1			
Approver(s) fo	or the claim	Approval S	tatus		Approval Date			1						
TODD, KATHR	YN	Approve			21-Sep-18									



		9	09-19-18
Stafford Dean	Folio No.	Room N	p. :
	A/R Number :	Arrival	: 09-17-18
	Group Code :	Departur	e : 09-18-18
	Company : Alberta Health Services	Conf. No	). : [
	Membership No. :	Rate Co	de :
	Invoice No.	Page No	. : 1 of 1

Date	Description	Charges	Credits	
09-17-18	Parking IHG	i dhadhinadh	16.00	
09-17-18	*Accomodation		139.00	
09-17-18	Marketing Fee		4.17	
09-17-18	GST #87857 8491 RT0002		7.16	
09-17-18	AB Tourism Levy		5.73	
09-18-18	MasterCard			172.06
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	172.06	172.06
		Balance	0.00	

### Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liablity 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.

Holiday Inn Express Downtown Edmonton10010 - 104 Street Canada T5J 0Z1 Edmonton, AB Telephone: (780) 423-2450 Fax: (780) 426-6090 0GST #878578491 RT0002 www.hiexdowntown.com

