

AHS Board and Executive Expense Report

Name Dr. Ted Braun
Title VP & Medical Director Central & Southern Alberta
Location Calgary
 Expenses submitted during the month of July 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)
Jul-17	P-Card	Meetings			344	(22)	322			
Jul-17	Direct Billing	Meetings	383				383			
Total			\$ 383	\$ -	\$ 344	\$ (22)	\$ 705	\$ -	\$ -	\$ -

Total for the Month \$ 705

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 164
 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								
BRAUN, TED	VP & Medical Director, Central & Southern Alberta	Calgary	\$ 321.49								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
6/15/2017	Reimbursement for overcharge for parking	AB - Other Zones	Accommodations	-157.5			Reimbursement for overcharge for parking.	1			
6/19/2017	Accommodations while in Edmonton for Succession planning and ELT	AB - Other Zones	Accommodations	184.13			Accommodations while in Edmonton for Succession planning and ELT.	1			
6/20/2017	Parking at the Calgary Airport while in Edmonton for Succession planning and ELT.	AB - Local	Parking - Lot or Parkade	58.7			Parking at the Calgary Airport while in Edmonton for Succession planning and ELT.	1			
6/22/2017	Parking at the UofC down town location while attending the AHS Executive Education Program.	AB - Local	Parking - Lot or Parkade	17.85			Parking at the UofC down town location while attending the AHS Executive Education Program.	1			
7/12/2017	Accommodations while in Edmonton for ELT	AB - Other Zones	Accommodations	159.61			Accommodations while in Edmonton for ELT.	1			
7/12/2017	Parking at the Calgary Airport while in Edmonton for ELT	AB - Local	Parking - Lot or Parkade	58.7			Parking at the Calgary Airport while in Edmonton for ELT	1			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		31-Jul-17							

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Theodore Braun

Page Number : 1 Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 14-JUN-17
 Depart Date : 14-JUN-17
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Tax Invoice

Tax ID : 815461330RT0001
 The Westin Edmonton JUN-21-2017 11:30 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
14-JUN-17	[REDACTED]	-ADJ Parking Self		-150.00
14-JUN-17	[REDACTED]	-ADJ GST		-7.50
14-JUN-17	[REDACTED]	Mastercard-[REDACTED]	157.50	
** Total			157.50	-157.50
*** Balance			0.00	

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Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Theodore Braun

Page Number : 1 Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 19-JUN-17 18:41
 Depart Date : 20-JUN-17 07:28
 No. Of Guest : 1
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Copy Invoice

Tax ID : 815461330RT0001
 The Westin Edmonton JUL-26-2017 11:26 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
19-JUN-17	[REDACTED]	Room Charge	164.00	
19-JUN-17	[REDACTED]	GST	8.45	
19-JUN-17	[REDACTED]	Destination Marketing Fee	4.92	
19-JUN-17	[REDACTED]	Tourism Levy	6.76	
20-JUN-17	[REDACTED]	Mastercard [REDACTED]		-184.13

Approve EMV Receipt for MC - [REDACTED] PIN Verified
 [REDACTED]
 Application Label:MasterCard

** Total 184.13 -184.13
 *** Balance -0.00

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RECEIPT
GST NO. R122556194

TKT NO: [REDACTED]
POF: AS
IN: 06/19/17 06:09
OUT: 06/20/17 19:18
PAID: \$ 58.70
DURATION: 1 13: 09
(GST INCLUDED)

MASTERCARD
[REDACTED]

REF.
YOU HAVE 10 MIN.
TO EXIT



RECEIPT
GST NO. R122556194

TKT NO: [REDACTED]
EXIT No. A1
IN: 07/11/17 06:11
OUT: 07/12/17 21:21
DURATION: 1 15: 10
PAID: \$ 58.70
(GST INCLUDED)

MASTERCARD
[REDACTED]

REF.
THANK YOU FOR
YOUR VISIT



DISPLAY TICKET ON DASH

Expiration Date/Time

06:00 PM
JUN 22, 2017

Purchase Date/Time: 08:43am Jun 22, 2017

Total Parking: \$17.00

Total FEDERAL: \$0.85

Total Due: \$17.85

Total Paid: \$17.85

Ticket

IN #

Setting: Lot 274

Auth Name: Lot 274-1

Rate: EARLY BIRD
Payment Type: Card

[REDACTED] MasterCard

Auth # [REDACTED]

GST REG #R102466000

RECEIPT

Expiration Date/Time: 06:00pm Jun 22, 2017

Purchase Date/Time: 06:43am Jun 22, 2017

Total Parking: \$17.00

Total FEDERAL: \$0.85

Total Due: \$17.85

Total Paid: \$17.85

Ticket

Setting: Lot 274

Auth Name: Lot 274-1

Rate: EARLY BIRD
Payment Type: Card

[REDACTED] MasterCard

Auth #: [REDACTED]

PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT





DR Theodore Braun

Room Number: [REDACTED]
Arrival Date: 07-11-17
Departure Date: 07-12-17
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No: [REDACTED]

07-26-17

Date	Description	Charges	Credits
07-11-17	Room Revenue	149.00	
07-11-17	Destination Marketing Fee - 3%	4.47	
07-11-17	Tourism Levy - 4%	6.14	
07-12-17	Mastercard [REDACTED]		159.61
Total		159.61	159.61
Balance		0.00	

Signature: _____

I agree that my liability for all charges 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 or the full amount of these charges. G.S.T. #105631154 RT 0008

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 : Dr. Ted Braun	Reporting Period for the Month of : Jul-17
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
7-Jul-2017	Direct Billing	Airline Ticket	Flight from Calgary to Edmonton and return to attend ELT.	Marlin Travel	383.01
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	-
	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					\$ 383.01



Invoice

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

Trip #: [REDACTED]
 Booking Date: 06 Jul 17
 Client: [REDACTED]
 Agent: [REDACTED]
 File Locator: [REDACTED]

PASSENGERS: DR THEODORE BRAUN

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	308.05	0.00	\$0.00	74.96	0.00	383.01 CAD
Total:	308.05	0.00	0.00	74.96	0.00	383.01 CAD

PAYMENTS

Invoice #	Payment Date	Card Holder	Form of Payment	Amount
[REDACTED]	07/06/2017			0.00 CAD
[REDACTED]	07/06/2017		[REDACTED]	383.01 CAD
Total Payment:				383.01 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
 REASON FOR TRAVEL EXECUTIVE MEETINGS

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. -----
 ****PLEASE NOTE CHECKIN TIMES***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

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

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

Trip #: [REDACTED]
Booking Date: 06 Jul 17
Client: [REDACTED]
Agent: [REDACTED]
File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
THEODORE BRAUN	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: THEODORE BRAUN

Booking Date: 07/05/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08130	CALGARY INTL 07/11/2017 7:00AM		EDMONTON INTL 07/11/2017 7:54AM	V		



AIR

Passengers: THEODORE BRAUN

Booking Date: 07/05/2017

File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08155	EDMONTON INTL 07/12/2017 8:00PM		CALGARY INTL 07/12/2017 8:52PM	W		