

AHS Board and Executive Expense Report

Name: Dr. Albert Harmse

Title: Zone Medical Director North Zone (Acting)

Location: St. Paul

Expenses approved during the month of July 2020

					Travel (1)						
Approved Source MMM-YY Document	Purpose	Airfare		Meals	Accommodatio	on	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Jul-20 Expense Claim I	Meetings Meetings Meetings			74	31	.2	626	- 1,012 -			
Total		\$	- \$	74	\$ 31	.2 \$	626	\$ 1,012	\$ -	\$ -	\$ -

Total for

the Month \$ 1,012

Maximum daily single meal expense claimed in the month \$ 24 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.

Car allowance 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								
Dr. Albert Harmse	Zone Medical Director North Zone (Acting)	St. Paul	\$ 1,012.32								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	_	# of Attendees	Attendee Name(s)	Trip Distance
6/14/2020	Workforce planning meeting June 15 & 16, 2020		Meals Per Diem	\$ 13.00				1			
6/14/2020	Workforce planning meeting June 15 & 16, 2020		Mileage	\$ 313.10	St. Paul	GP		1			620
6/14/2020	Workforce planning meeting June 15 & 16, 2020		Accommodation	\$ 156.06				1			
6/14/2020	Workforce planning meeting June 15 & 16, 2020		Meals Per Diem	\$ 24.00				1			
6/15/2020	Workforce planning meeting June 15 & 16, 2020		Accommodation	\$ 156.06				1			
6/15/2020	Workforce planning meeting June 15 & 16, 2020		Meals Per Diem	\$ 24.00				1			
6/16/2020	Workforce planning meeting June 15 & 16, 2020		Meals Per Diem	\$ 13.00				1			
6/16/2020	Workforce planning meeting June 15 & 16, 2020		Mileage	\$ 313.10	GP	St. Paul		1			620
Approver(s) for the claim	Approval Status	Approval Date			•	1	1		1		-1

9-Jul-20

Francois Belanger

Approve

PHCC Partnership o/a GP Pomeroy Hotel

GST #720259688 RT0001 11633 100th

Street Prairie, AB T8V 3Y4

Phone:

(780)532-5221

Fax:

(780)532-5441

E-mail:

fd@pomeroyhotelgp.com

Website: www.pomeroyhotel.dom/grande-

prairie

Guest Charges

Folio #: Room #: Guest: HARMSE, ALBERT DR

Conf #: CRS #:

Payment Method : Credit Card

Company:

PROVINCIAL GOVERNMENT

Arrival:

6/14/2020

Rate:

6/14/2020

\$139.00

Departure: 6/16/2020

Date	Department	Reference	Voucher	Room	Charge	Credit	Balance
6/14/2020	ROOM CHARGE	Auto Posted Rate: GOVT		514	\$139.00		\$139.00
6/14/2020	G.S.T - ROOM	Auto Posted Rate: GOVT		514	\$6.95		\$145.95
6/14/2020	G.S.T - ROOM	Auto Posted Rate: GOVT		514	\$0.21		\$146.16
6/14/2020	HOTEL TAX	Auto Posted Rate: GOVT		514	\$5.56		\$151.72
6/14/2020	HOTEL TAX	Auto Posted Rate: GOVT		514	\$0.17		\$151.89
6/14/2020	D.M.F. FEE	Auto Posted Rate: GOVT		514	\$4.17		\$156.06
6/15/2020	ROOM CHARGE	Auto Posted Rate: GOVT		514	\$139.00		\$295.06
6/15/2020	G.S.T - ROOM	Auto Posted Rate: GOVT		514	\$6.95		\$302.01
6/15/2020	G.S.T - ROOM	Auto Posted Rate: GOVT		514	\$0.21		\$302.22
6/15/2020	HOTEL TAX	Auto Posted Rate: GOVT		514	\$5.56		\$307.78
6/15/2020	HOTEL TAX	Auto Posted Rate: GOVT		514	\$0.17		\$307.95
6/15/2020	D.M.F. FEE	Auto Posted Rate: GOVT		514	\$4.17		\$312.12
6/16/2020	VISA	VI		514		\$312.12	\$0.00
		•		Balance			\$0.00

Credit Card Payment

Payment Type:

Credit Card

Amount Paid:

\$312.12

Account: Account Holder:

HARMSE/ALBERT

Approval Code: Approval Amount:

(\$312.12)

I agree that my liability for all charges is not waived.

Guest Signature