

AHS Board and Executive Expense Report

Name Dr. Brenda Hemmelgarn

Title AHS Board Vice-Chair

Location Calgary

Expenses approved during the month of May 2020

			Travel (1)					Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel			
May-20	P-Card Expense Claim	Meetings					-			
	Direct Billing	Meetings				87	87			
		Meetings					-			
Total			\$ -	\$ -	\$ -	\$ 87	\$ 87	\$ -	\$ -	\$ -

Total for the Month \$ 87

Maximum daily single meal expense claimed in the month \$ -

Maximum daily base hotel rate claimed in the month \$ -

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 - AP Processing - Internal Use Only

Voucher #

Naming Convention:

T4/ANR Applicable? - If yes, indicate line & amt

BOARD MEMBER EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION					
Name:	Brenda Hemmelgarn	Expense Period Month:	Feb-20		
Address:	[REDACTED]	City:	[REDACTED]		
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Attended Board Meeting and Public Board Meeting on February 27, 2020 in Calgary.				

SECTION 2: FINANCE CODING & TOTAL CLAIM					
Description	Corp/BU/Org	Location (if applicable)	Functional Centre/Primary	Expense/Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	101	0005	71110300000	45000000	\$0.00
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$86.60
Other (D)	101	0005	71110300000	41090000	\$0.00
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$86.60

SECTION 3: AUTHORIZATION			
I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.			
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.			
I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided below.			
Claimant (Print Name)	Signature: I, by signing this form, attest that I am compliant to all the above statements	Date	Phone#
Brenda Hommelgarn	[REDACTED]	Apr 2/20	[REDACTED]

I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.	
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.	
I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided below.	
Approved by (Print Name)	Position Title/Program Group
David Weyant, Q.C.	Board Chair
Signature: I, by signing this form, attest that I am compliant with all the above statements	Date
See attached email for approval.	May 11, 2020

Health and Personal Information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 33(c) and 34(2) of the Freedom of Information and Protection of Privacy (FOIP) Act, respectively, for the purpose of administering AHS Procure to Pay program

For payment please submit to:
14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: Jennifer Hamstra

Carry forward from Section 1

Name:	Brenda Hemmelgarn	Expense Period Month:	Feb-20
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Completion of the "cost effective method used" Column is required. If you select "No" in this column, Further Explanation is Required in the "Rationale is Required" section below

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

The Board Members follow the Government of Alberta (GOA) Travel, Meal and Hospitality Expenses Policy

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates (Appendix C for USA, Appendix D for International).

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt)(A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)
			Allowance Within Canada		With Receipt or Allowance Outside Canada					
			Meal Type	Allowance	Meal Type	Amount				
26-Feb-2020	Parking at YEG to travel to Calgary for Board Meeting and Public Board Meeting on February 27, 2020.	Yes					\$50.00			
26-Feb-2020	Taxi from UofC to hotel.	Yes					\$36.60			
Total: (amount auto fills to page 1)			\$0.00		\$0.00	\$0.00	\$66.60	\$0.00	0.00	

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$ -
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Booking [REDACTED] Parking Confirmation

1 message

Airport Parking [REDACTED]
To: [REDACTED]

Mon, Feb 24, 2020 at 10:35 PM

Edmonton International Airport Parking
Easy Parkade booking confirmation



We recommend you print this page or take note of the reference number indicated below. In the unlikely event that there are any problems with your payment, our parking staff can use your reference number as proof of payment.

Your Booking Confirmation

Reference Number: [REDACTED]

Purchased on: 24 Feb 2020



Dear Dr Hemmelgarn:

Thank you for choosing Easy Parkade at Edmonton International Airport. We have processed your payment and your booking details are below.

Have a question? Call 780- 890- 8527

Your Booking		Reference Number: [REDACTED]
Car Park:	Easy Parkade	
Entry:	10:00 on Wednesday, 26 February 2020	
Exit:	23:59 on Thursday, 27 February 2020	
License Plate:	[REDACTED]	
<hr/>		
Payment Details		
Booking Rate:	50.00	
GST @ 5%:	\$2.38 (CAD GST)	
Total:	50.00	
Credit Card Number:	XXXXXXXXXXXX [REDACTED]	
Access Card Number:	XXXXXXXXXXXX [REDACTED]	



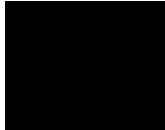
*Airport parking
Edmonton*

UofC to Hotel

Checker Taxi
316 Meridian Rd SE
Calgary, AB
T2A 1X2
(403) 299-9999
www.thecheckergroup.com

Feb 26, 20 17:33

Car#
Driver#
Driver Tax#
Booking#



From:
2020-02-26 5:07:13 PM

To:
2020-02-26 5:31:13 PM

Flagfall	\$3.80
Fare	\$27.80
Extras	\$0.00
Total + Tips	\$36.60
Subtotal	\$31.60

Tip	\$5.00
Card Charged	\$36.60
Tax	\$1.50

Approval

Card No ***** (C)
 Entry Mode t
 Auth ID
 MID
 TID
 Mode Issuer
 AID
 TVR
 IAD
 TSI
 ARC
 Visa Credit

Verified by PIN
2020-02-26 5:33:10 PM

Thank you for using Checker
Taxi!
