

AHS Board and Executive Expense Report

Name Brian Vaasjo
Title AHS Board Member
Location Edmonton

Expenses approved during the month of June 2022

			Travel (1)						Working Sessions Hosting and Hospitality		
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	(3)	Other (4)	
	P-Card	Meetings					-				
	Expense Claim	Meetings					-				
Jun-22	Direct Billing	Meetings					-			143	
Total			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 143	

**Total for
the Month** \$ 143

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.

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.

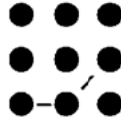
It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

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 : Brian Vaasjo	Reporting Period for the Month of : Jun-22
----------------------------	---

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
2-Jun-22	Direct Billing	Other	Institute of Corporate Directors - Board Membership Fee - Aug 01-22 to Jul 31-23	Institute of Corporate Directors	\$142.86
Total Paid in the Month					\$ 142.86



Invoice

ICD Member

██████████ ██████████
Alberta Health Services
14th Floor, Seventh Street Plaza
10030-107 Street NW, North Tower
Edmonton AB T5J 3E4

Billing Date	ICD Member
2-Jun-2022	██████████

Code	Item	From	To	Amount
FEE_BRDSEC	Board Membership / Adhésion globale du C. A.	1-Aug-2022	31-Jul-2023	2,000.00
			Total Billing	2,000.00

Please make cheque payable to "Institute of Corporate Directors" and remit to the above address. Remember to include your Member ID with your payment. You can also make your membership payment online by logging into www.icd.ca.

14 Memberships =
\$2000/14 is
\$142.86 per
membership fee

Additional Personal Information

Work Phone: ██████████ Chapter: ██████████
Home Phone: ██████████ Home Address: ██████████
Cell Phone: ██████████
Language: English ██████████
Email: ██████████

Please take a moment to review and confirm that your mailing and additional personal information is up-to-date and accurate. Please fax any updates and changes to us at 416-593-0636, or simply go online to update your member profile at www.icd.ca.

Thank you for your membership!

