

Official Administrator and Executive Expense Report

Name Catherine MacNeill

Title Corporate Secretary - Acting

Location Calgary

Expenses submitted during the month of August 2015

					Trave	l (1)						
Month-Year	Source Document	Purpose	Airfare	Meals	Accommod	ation	her avel	Tota	l Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Aug-15 Aug-15	Expense Claim Direct Billing	Meetings Meetings		130		326	403 141		859 141			
Total			\$ -	\$130	\$	326	\$ 544	\$	1,000	\$ -	\$ -	\$ -

Total for the \$ 1,000

Maximum daily single meal expense claimed in the month \$ 40 Maximum daily base hotel rate claimed in the month \$ 145 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
	Acting Corporate Secretary,Office of the Official		
MACNEILL, CATHERINE	Administrator	Calgary	858.89

Expense Date			Expense Type	Amount	From Location	To Location	 # of days		Attendee Name(s)	Trip Distance
8/19/2015	Breakfast while attending Audit & Risk and Finance Committee Meetings		Meals Per Diem	9.20			1			
8/12/2015		AB - Other Zones		15.00			1			
8/11/2015	Dinner in Edmonton	AB - Other Zones	Meals - Dinner	40.00			1	1	Catherine MacNeill	
8/12/2015	Travel from Quality and Safety Committee Meeting	AB - Other Zones		10.00			1			
8/12/2015	Hotel in Edmonton	AB - Other Zones					1			
8/12/2015	Meals while attending Quality & Safety Committee Meeting		Meals Per Diem	20.80			1			

Expense Date	Business reason		Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees		Trip Distance
8/18/2015	Travel to Edmonton	AB - Other	Taxi	35.00				1			
	for Risk & Audit and	Zones									
	Finance Committee										
	Meetings										
0/10/2015	Diamenta Educates	AD Other	Nasis	27.72				1	1	Cath ania a	
8/18/2015	Dinner in Edmonton		Meals -	37.73				1	1		
		Zones	Dinner							MacNeill	
8/19/2015	Lunch in Edmonton	AB - Other	Meals -	22.58				1	1	Catherine	
		Zones	Lunch							MacNeill	
8/19/2015	Hotel in Edmonton	AB - Other	Accommo	162.79				1			
		Zones	dations								
8/19/2015			Taxi	40.00				1			
	Risk and Finance	Zones									
	Committee										
8/12/2015	Meetings		N 4:1	151 50	Edmonton	Calaani		1			200
8/12/2015			Mileage	151.50	Eamonton	Calgary		1			300
	Edmonton for Quality and Safety										
	Committee Meeting										
	Committee Meeting										
8/11/2015	Travel to Edmonton		Mileage	151.50	Calgary	Edmonton		1			300
	for Quality & Safety										
	Committee Meeting										
Approver(s) for the claim		Approval Sta		Approval Date							
W	/ALJI-SHIVJI, SALIMAH		Approve	24-Aug-15							

Tellow cas	780.462.3456
GST#	
Date: Aug - 12/2015	Amount: \$ 15:00
Driver:	Car#:
From: Wester 10	lef .
To:	
10135-31 Avenue, Edmonton, AB T6N 1C2	Ġ.

SSP >> WESTON

YELLOW CAB 10135 31 AVENUE NU EDMONTON AB T6H-1C2 780-462-3456

Ierm Id:412478LU Item #:1691 Interac PURCHASE Op Id:969900 Card #:

AID:A0000002771010

00 APPROVED 001

Chequina AMOUNT

CAD\$10.00

Ref. Auth.	#	
Resp.	"Code: 08	
išî:	6888	

BOOK ON LINE AT EDMTAXI.COM THANK YOU FOR BEING OUR GUEST

GST 100403070

Date: 2015/08/12 | Time: 18:54:16 Response: AUTH

CUSTOMER COPY

Dinner

Westin Edmonton 10135 100 St NW Edmonton, AB T5J 0N7 (780) 426-3636 GST#861336493RT0005

910790002				

CHK	TBL	GST		
mcneil				
	11 AUG'15 18:58 PM			

1 Side Organic Green Salad	9.00
1 Club Sandwich	17.00
1 Diet Coke	3.00
1 Delivery Charge	5.00
Subtotal	\$34.00
Service Charge	\$5.10
GST	\$1.96
Total Due	\$41.06

GRATUITY:
TOTAL:
ROOM #:
PRINT NAME:
STGNATURE



later alobaltivity.com 1879room

The Westin Edmonton 10135 100 St Edmonton, AB T5J 0N7

Canada

Tel: 780-426-3636 Fax: 780-428-1454

Catherine Macneill

Page Number :-Guest Number: Folio ID : No. Of Guest:

Axrive Date: 11-AUG-15 18:24 Depart Date: 12-AUG-15 11:15

Invoice Nbr:

Room Number :

Room Rate : 145.00

Club Account:

Tax Invoice

Tax ID: 815461330RT0001

The Westin Edmonton 12-AUG-15 11:15



Date	Reference	Description	Charges	Credits
11-AUG-15		In Room Dining	41.06> 1	real
11-AUG-15		Room Charge	145.00	
11-AUG-15		GST	7.47	11779
11-AUG-15		Destination Marketing Fee	4.35	162.79
11-AUG-15		Tourism Levy	5.97	
12-AUG-15		Mastercard		-203.85
		** Total	203.85	-203.85
		*** Balance	0.00	

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> _Continued on the next page_

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Luna. Aug 19



Tb1 Chk Aug19'15 11:	Gst 12AM ***
1 SOFT DRINK	3.50
1 CAMEMBERT	15.00
1 ADD BRIOCHE	3.00
Subtotal	21.50
21.50 GST Percent	1.08
Amount Due 2:	2 .58

Mayfair	PHONE: 255-6555 Home 221-Taxi (8294) 1-888-995-6555
Calg Fare Amount: <u>40 · 6</u>	ary, Alberta O Date: 1906.19/15
То:	From:
Car No:	Driver: _:
THANK YOU I	OR RIDING WITH US

ASSOCIATED CAB for all your transportation needs. Visit our counter at the Calgary International Airport international arrival door. Driver Car # GST Included.

	Matrix Hot MZ Lounge 10640-100 Ave GST # 866344	nue 18302	
Check:	yes and yes see any god see that yes see her see see y	Guests:	-
****************	08/18/2015 08:	051	-
1 PARPPAR 1 FRUIT S	SALAD Ty Charge	10.00 13.00 6.00 2.00 4.93	
Subtota G.S.T. Service Total	Chra	29.00 1.80 6.93 \$37.73	
GRATUITY _		mangani dalah menganakan dan perjadah menganjakan	
TOTAL			
Signature _			
Guest Name			
Room #		and the same of th	



Mrs Catherine Macneill

The desired Machine

Guest Name

Room Number:

Arrival Date:

08-18-15

Departure Date:

08-19-15

Page No. 1 of 1

INFORMATION INVOICE

Folio No:

08-19-15

Date	Description	Via de la constante de la cons	Charges Credits
08-18-15	Room Service	Room: : CHECK#	37.73 > med
08-18-15	Room Revenue		145.00
08-18-15	Destination Marketing Fee - 3%		4.35
08-18-15	Tourism Levy - 4%		$\frac{4.35}{5.97}$ > 162.7
08-18-15	Room GST - 5%		7.47
08-19-15	Refreshment Centre - Water	1	1.05
08-19-15	Mastercard		201.57
		Total	201.57 201.57
		Balance	0.00

Signature:

I agree that my liability for all charges is not waived and agree to be held personally hable 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. #866344302 RT 0001



Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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	
Na	ame :	Catherine Macneill		Reporting Period for the	e Month of :	Aug-15	

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount	Paid
14-Aug-15	Direct Billing	Other Transportation	Red Arrow from Calgary to Edmonton (August 18) and Return (August 19)	Marlin Travel	1	140.96
	Direct Billing	Choose from Drop-down List		Marlin Travel		1
	Direct Billing	Choose from Drop-down List		Marlin Travel		-
	Direct Billing	Choose from Drop-down List		Marlin Travel		-
	Direct Billing	Choose from Drop-down List		Marlin Travel		i
Total Paid in the Month					\$ 1	140.96

MARLIN TRAVEL O-O PERCY HUNT TRAVELGROUP INC MAIN FLOOR, 9929 108TH ST.

EDMONTON, AB T5K 1G8 **GST Reg#:** 885101915

Branch: Agent:

To: ALBERTA HEALTH SERVICES

SUITE 800, NORTH TOWER

10030-107 ST **EDMONTON AB CA T5J 3E4**

Invoice Number:

Date: Page:

Our Reference:

August 14, 2015

Mile(s) Flown: 163

INVOICE

CATHERINE MACNEILL

Tuesday, August 18, 2015

≼ Air

OTHER TRAVEL Flight: 001 ECONOMY CLASS

From: CALGARY 04:30 PM AB To: **EDMONTON** AB07:50 PM

0 **Arrival:** 18Aug15



To: ALBERTA HEALTH SERVICES SUITE 800, NORTH TOWER

10030-107 ST EDMONTON AB CA T5J 3E4 **Invoice Number:**

Date:

August 14, 2015

Page: 2/2

Our Reference:

INVOICE

Wednesday, August 19, 2015

≼ Air

OTHER TRAVEL Flight: 002 ECONOMY CLASS

 From:
 EDMONTON
 AB
 12:30 PM

 To:
 CALGARY
 AB
 03:50 PM

03:50 PM **Mile(s) Flown:** 163

Stops: 0 Arrival: 19Aug15

RED ARROW CONFIRMATION

EDMONTON DOWNTOWN TO CALGARY DOWNTOWN

SEAT 6A

Cost:
RED ARROW MOTORCOAC
Total:

Grand Total: 140.96

Less Credit Card Payments: 140.96
Credit / Balance Due To This Invoice: 0.00
Total Balance Due: 0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE ACCEPTED:.....DECLINED:.....

DOCUMENTATION REQUIRED: VALID PASSPORT... VISA..TOURIST CARD.. ... PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER...... PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.

GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL 24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL 1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT

CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY

1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0

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