

Official Administrator and Executive Expense Report

Name Catherine MacNeill
Title Corporate Secretary - Acting
Location Calgary

Expenses submitted during the month of October 2015

| Travel (1) | | | | | | | | | | |
|--------------|-----------------|----------|---------|--------|---------------|--------------|--------------|------------------------------|--|-----------|
| Month-Year | Source Document | Purpose | Airfare | Meals | Accommodation | Other Travel | Total Travel | Professional Development (2) | Working Sessions Hosting and Hospitality (3) | Other (4) |
| Oct-15 | Expense Claim | Meetings | | 62 | 155 | 82 | 299 | | | |
| Sep-15 | Expense Claim | Meetings | | 162 | 326 | 368 | 856 | | | |
| Oct-15 | Direct billing | Meetings | 134 | | | | 134 | | | |
| Total | | | \$ 134 | \$ 162 | \$ 326 | \$ 368 | \$ 1,289 | \$ - | \$ - | \$ - |

Total for the Month \$ 1,289

Maximum daily single meal expense claimed in the month \$ 40
 Maximum daily base hotel rate claimed in the month \$ 159
 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 |
|------------------------|------------------------------|-------------------|---------------------|
| MACNEILL, CATHERINE | Corporate Secretary - Acting | Calgary | 856.65 |

| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
|----------------------------------|---|------------------------|----------------|----------------------|---------------|-------------|---------------------|-----------|----------------|--------------------|---------------|
| 9/16/2015 | Attendance at Finance and Audit & Risk Committee Meetings | AB - Other Zones | Meals - Dinner | 39.25 | | | | 1 | 1 | Catherine MacNeill | |
| 9/16/2015 | Travel to Edmonton for Committee | AB - Other Zones | Taxi | 20.00 | | | | 1 | | | |
| 9/17/2015 | Hotel in Edmonton | AB - Other Zones | Accommodations | 163.51 | | | | 1 | | | |
| 9/17/2015 | Travel to attend Finance and Audit & Risk Committee Meetings | AB - Other Zones | Taxi | 10.00 | | | | 1 | | | |
| 9/17/2015 | Attendance at Finance and Audit & Risk Committee Meetings | | Meals Per Diem | 41.55 | | | B/F, Lunch & Dinner | 1 | | | |
| 9/17/2015 | Return travel from Committee Meetings | AB - Other Zones | Taxi | 35.00 | | | | 1 | | | |
| 9/29/2015 | Attendance at Human Resources and Quality & Safety Committee Meetings | AB - Other Zones | Meals - Dinner | 40.00 | | | | 1 | 1 | Catherine MacNeill | |
| 9/29/2015 | Attendance at Human Resources and Quality & Safety Committee Meetings | | Mileage | 151.50 | Calgary | Edmonton | | 1 | | | 300 |
| 9/30/2015 | Attendance at Human Resources and Quality & Safety Committee Meetings | | Mileage | 151.50 | Edmonton | Calgary | | 1 | | | 300 |
| 9/30/2015 | Attendance at Human Resources and Quality & Safety Committee Meetings | | Meals Per Diem | 41.55 | | | B/F, Lunch & Dinner | 1 | | | |
| 9/30/2015 | Hotel in Edmonton | AB - Other Zones | Accommodations | 162.79 | | | | 1 | | | |
| Approver(s) for the claim | | Approval Status | | Approval Date | | | | | | | |
| SIMPKIN, VIVIAN | | Approve | | 2-Dec-15 | | | | | | | |

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



Catherine Macneill

Page Number : [REDACTED] Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : [REDACTED]
 Arrive Date : 09-SEP-15 20:15
 Depart Date : 10-SEP-15 07:30
 No. Of Guest : [REDACTED]
 Room Number : [REDACTED]
 Club Account : [REDACTED]

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 10-SEP-15 07:40 MMCGREER

| Date | Reference | Description | Charges (CAD) | Credits (CAD) |
|-----------|------------|-------------------------------|----------------|-----------------------|
| 09-SEP-15 | [REDACTED] | In Room Dining | meal < 39.25 ✓ | |
| 09-SEP-15 | [REDACTED] | -ADJ Guest Incentive Programs | | have receipt -15.00 ✓ |
| 09-SEP-15 | [REDACTED] | Room Charge | 159.00 ✓ | |
| 09-SEP-15 | [REDACTED] | GST | 8.19 ✓ | |
| 09-SEP-15 | [REDACTED] | Destination Marketing Fee | 4.77 ✓ | |
| 09-SEP-15 | [REDACTED] | Tourism Levy | 6.55 ✓ | |
| 10-SEP-15 | [REDACTED] | In Room Dining | meal < 31.40 ✓ | |
| 10-SEP-15 | [REDACTED] | Mastercard | | -234.16 |
| | | ** Total | 249.16 | -249.16 |
| | | *** Balance | 0.00 | |

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at westin.com/newbalance

Continued on the next page

234.16
 - 39.25
 - 31.40

 163.51

Dinner

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



macnell
9 SEP '15 20:27 PM

| | |
|-------------------|-------|
| 1 Club Sandwich | 17.00 |
| 1 Side Jus | 2.00 |
| 1 K-Ice Cream | 5.50 |
| 1 Diet Coke | 3.00 |
| 1 Delivery Charge | 5.00 |

| | |
|----------------|---------|
| Subtotal | \$32.50 |
| Service Charge | \$4.88 |
| GST | \$1.87 |

Total Due **\$39.25**

GRATUITY: _____

TOTAL: _____

ROOM #: _____

PRINT NAME: _____

SIGNATURE: _____



<http://globaltmy.com:1079/room>

ALLIED BLACK Home → Y4C
LIMO & TAXI
Try our **ON-DEMAND** Taxi app
Connecting you Directly with your Driver
alliedblack.com

Driver: [Redacted] Date: 09/09/15
Car #: 598 Amount: 20.00
GST Included # _____

YELLOW CAB 780.462.3456
Westin → SSP

GST# _____
Date: 10-09-2015 Amount: \$10.00
Driver: [Redacted] Car#: 361
From: Westin Hotel
To: 107-10030
10135-31 Avenue, Edmonton, AB T6N 1C2

Thank You for Choosing -Y4C → Home

CALGARY CAB 24 Hour City Wide Service & Out of Town Service

Drive: [Redacted] Date: SEP-10-15
Car #: 1289 Amount: 35.00
GST Included # _____



Catherine Macneill



Room Number: [Redacted]
Arrival Date: 09-22-15
Departure Date: 09-23-15
Page No: 1 of 1

Guest Name

INFORMATION INVOICE

Folio No:

09-23-15

| Date | Description | Charges | Credits |
|----------------|---------------------------------------|---------------|-------------|
| 09-22-15 | Room Service Room# 0502 : CHECK# 1188 | 49.25 | |
| 09-22-15 | Room Revenue | 145.00 | |
| 09-22-15 | Destination Marketing Fee - 3% | 4.35 | |
| 09-22-15 | Tourism Levy - 4% | 5.97 | |
| 09-22-15 | Room GST - 5% | 7.47 | |
| Total | | 212.04 | 0.00 |
| Balance | | 212.04 | |

*> Dinner-only claimed \$40
\$162.79*

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. #866344302 RT 0001

Dinner

Matrix Hotel
MZ Lounge
10640-100 Avenue
GST # 866344302

only claimed \$49⁰⁰

Check # [REDACTED]

09/22/2015 07:34PM

| | | |
|---|--------------------|----------------|
| 1 | CHICKEN WINGS | 14.00 |
| 1 | MATRIX HOUSE SALAD | 10.00 |
| 1 | FRUIT SALAD | 6.00 |
| 1 | FRIES | 6.00 |
| 1 | POP | 2.38 |
| | Delivery Charge | 2.00 |
| | Grat 17% | 6.52 |
| | Subtotal | 38.38 |
| | G.S.T. | 2.35 |
| | Service Chrg | 8.52 |
| | Total Due | \$49.25 |

GRATUITY _____

TOTAL _____

Signature _____

Guest Name _____

Room # _____

AHS Public Disclosure Expense Claims

| Claimant Name | Claimant Title | Claimant Location | Expense Claim Total |
|---------------------|------------------------------|-------------------|---------------------|
| MACNEILL, CATHERINE | Corporate Secretary - Acting | Calgary | 298.37 |

| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
|---------------------------|---|------------------|----------------------------------|---------------|---------------|-------------|---------------|-----------|----------------|--------------------|---------------|
| 10/22/2015 | Attend Corporate Services Leadership Team Retreat | AB - Other Zones | Parking - Lot or Parkade-Service | 8.50 | | | | 1 | | | |
| 10/27/2015 | Travel to attend OA Committee Meeting | AB - Other Zones | Taxi | 35.00 | | | | 1 | | | |
| 10/27/2015 | Attend OA Committee Meeting | AB - Other Zones | Meals - Dinner | 40.00 | | | | 1 | 1 | Catherine MacNeill | |
| 10/28/2015 | Travel to attend OA Committee Meeting | AB - Other Zones | Taxi | 38.00 | | | | 1 | | | |
| 10/28/2015 | Attend OA Committee Meeting | AB - Other Zones | Meals - Lunch | 12.35 | | | | 1 | 1 | Catherine MacNeill | |
| 10/28/2015 | Attend OA Committee Meeting | | Meals Per Diem | 9.20 | | | Breakfast | 1 | | | |
| 10/28/2015 | Hotel in Edmonton | AB - Other Zones | Accommodations | 155.32 | | | | 1 | | | |
| Approver(s) for the claim | | Approval Status | | Approval Date | | | | | | | |
| SIMPKIN, VIVIAN | | Approve | | 2-Dec-15 | | | | | | | |

LEAVE ON DASH - THIS SIDE UP

DETACH RECEIPT FROM TICKET

EXPIRATION DATE

EXPIRATION TIME

DATE ISSUED

TIME ISSUED

AMOUNT PAID

23/10/15 08:53 AM

22/10/15 08:53 AM \$ 8.50

AMOUNT PAID

\$ 8.50 73280000 08:53 AM

CREDIT CARD NUMBER

CC

8096361

Alberta Health Services



ALBERTA HEALTH SERVICES ARE FOR USE OF PARKING SPACE ONLY. ALBERTA HEALTH SERVICES ENDEAVOURS TO PROTECT THE PROPERTY OF ITS PATRONS BUT WILL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE TO CAR OR CONTENTS.

NON TRANSFERABLE

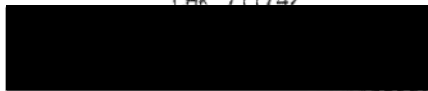


RECEIPT

Lunch Oct. 28^r

Starbucks Coffee Canada #4857
10001 - 107th Street
Edmonton, AB T5J 1J1

CHK 711742



| | |
|--------------------|---------|
| Toffee Cookie | 2.25 |
| Rasp Pom Refresher | 3.25 |
| Fruit&Cheese Plate | 3.25 |
| cash | 20.00 |
| Subtotal | \$11.75 |
| GST 5% | \$0.59 |
| Rounding | \$0.01 |
| Total | \$12.35 |
| Change Due | \$7.65 |

Check Closed
10/28/2015 11:36 AM

GST: 86585 3535

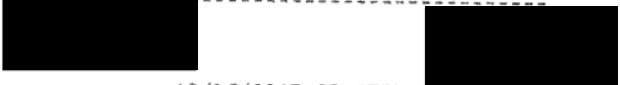
New members get a FREE DRINK!
Join our loyalty program
Sign up for email rewards
Visit Starbucks.ca/rewards
Or download our app
At Participating Stores

Dinner Oct 27^r

Matrix Hotel
MZ Lounge
10640-100 Avenue
GST # 866344302

only
claim
\$40.00

9 IN ROOM



10/27/2015 08:17PM

| | | |
|---|--------------------|----------------|
| 1 | MATRIX BURGER | 17.00 |
| 1 | MATRIX HOUSE SALAD | 10.00 |
| 1 | FRUIT SALAD | 6.00 |
| | Delivery Charge | 2.00 |
| | Grat 17% | 5.61 |
| | Subtotal | 36.61 |
| | G.S.T. | 1.83 |
| | Service Chrg | 7.61 |
| | Total Due | \$42.64 |

GRATUITY _____

TOTAL _____

Signature _____

Guest Name _____

Room # _____

Red Arrow → Home

ASSOCIATED CAB
404-35 AVENUE N.E. T2E2N7
CALGARY AB
T2E2N7
22143180

PURCHASE

10-27-2015 15:56:33

Acct # [REDACTED]
Exp Date [REDACTED]

Name: CATHERINE MACNEILL
A0000000041010 MasterCard

Trace [REDACTED]

Inv. # [REDACTED]
Auth # [REDACTED] RRN 001001203

Total \$38.00

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

Home → Red Arrow

ASSOCIATE:
404 AVENUE N.E. T2E2N7
CALGARY AB
T2E2N7
22143180

PURCHASE

10-27-2015 15:56:33

Acct # [REDACTED]
Exp Date [REDACTED]

Name: CATHERINE MACNEILL
A0000000041010 MasterCard

Trace [REDACTED]

Inv. # [REDACTED]
Auth # [REDACTED] RRN 001001212

Total \$35.00

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

www.associatedcab.ca
403-299-1111

Catherine Macncill

Room Number: [REDACTED]
 Arrival Date: 10-27-15
 Departure Date: 10-28-15
 Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No:

| Date | Description | Charges | Credits |
|----------------|--------------------------------|------------------------------|---------------|
| 10-27-15 | Room Service [REDACTED] | 42.64 meal | |
| 10-27-15 | Room Revenue [REDACTED] | 145.00 | |
| 10-27-15 | Destination Marketing Fee - 3% | 4.35 | |
| 10-27-15 | Tourism Levy - 4% | 5.97 | |
| 10-28-15 | Room Service [REDACTED] | 3.00 Not Claiming | |
| 10-28-15 | Mastercard [REDACTED] | | 200.96 |
| Total | | 200.96 | 200.96 |
| Balance | | 0.00 | |

200.96
 - 3.00
 - 42.64

 155.32

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. #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

| | |
|----------------------------------|---|
| Name : Catherine MacNeill | Reporting Period for the Month of : Oct-15 |
|----------------------------------|---|

| DD-MMM-YY | Payment Method | Category | Description/Purpose of the Expense | Name of Vendor | Amount Paid |
|--------------------------------|----------------|----------------------------|---|----------------|------------------|
| 27-Oct-15 | Direct Billing | Other Transportation | Red Arrow from Calgary to Edmonton (October 27) and Return (October 28) to attend OA Advisory Committee Meeting | Marlin Travel | 133.92 |
| | 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 | - |
| | Direct Billing | Choose from Drop-down List | | Marlin Travel | - |
| Total Paid in the Month | | | | | \$ 133.92 |

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915
Branch: N61107
Agent: MEA MOORE Tel: 780-425-8611

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: October 26, 2015
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For

MS CATHERINE MACNEILL

Tuesday, October 27, 2015

 **Air**

OTHER TRAVEL

Flight: 101

ECONOMY CLASS

From: CALGARY AB

04:30 PM

To: EDMONTON AB

07:50 PM

Mile(s) Flown: 163

Stops: 0 **Arrival:** 27Oct15

RED ARROW ORDER NUMBER [REDACTED]
DOWNTOWN ARRIVE DOWNTOWN
[REDACTED]

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: October 26, 2015
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Wednesday, October 28, 2015

 Air

OTHER TRAVEL Flight: 202 ECONOMY CLASS
From: EDMONTON AB 12:30 PM
To: CALGARY AB 03:50 PM Mile(s) Flown: 163
Stops: 0 Arrival: 28 [REDACTED]
RED ARROW ORDER NUMBER [REDACTED]
DEPART DOWNTOWN ARRIVE DOWNTOWN
SEAT 2C - NO SINGLE SEATS AVAILABLE

| | | |
|-------------------|------------|--------|
| Cost: | | |
| RED ARROW MOTORCO | [REDACTED] | 133.92 |
| Total: | | |

Grand Total: 133.92
Less Credit Card Payments: 133.92
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.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
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
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.