

AHS Board and Executive Expense Report

Name Catherine MacNeill
Title: Corporate Secretary & Legal Counsel
Location Calgary
 Expenses submitted during the month of April 2019

| | | | Travel (1) | | | | | Professional Development (2) | Working Sessions Hosting and Hospitality (3) | Other (4) |
|--------------|-----------------|----------|------------|--------|---------------|--------------|--------------|------------------------------|--|-----------|
| MMM-YY | Source Document | Purpose | Airfare | Meals | Accommodation | Other Travel | Total Travel | | | |
| Apr-19 | Expense Claim | Meetings | | 130 | 341 | 137 | 608 | | | |
| Apr-19 | Direct Billing | Meetings | 275 | | | | 275 | | | |
| Total | | | \$ 275 | \$ 130 | \$ 341 | \$ 137 | \$ 883 | \$ - | \$ - | \$ - |

Total for the Month \$ 883

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

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 Public Disclosure Expense Claims

| Claimant Name | Claimant Title | Claimant Location | Expense Claim Total | | | | | | | | |
|---------------------------|---|-------------------|---------------------|-----------|---------------|-------------|---------------|-----------|----------------|------------------|---------------|
| MACNEILL, CATHERINE | Corporate Secretary & Legal Counsel | Calgary | 607.74 | | | | | | | | |
| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
| 4/9/2019 | Travel to Edmonton for AHS Board Committee Meetings | AB - Local | Taxi | \$ 33.10 | Red Arrow | Home | | 1 | | | |
| 4/9/2019 | To attend AHS Board Committee Meetings in Edmonton | AB - Other Zones | Meals Per Diem | \$ 24.00 | | | | 1 | | | |
| 4/10/2019 | To attend AHS Board Committee Meetings in Edmonton | AB - Other Zones | Meals Per Diem | \$ 47.50 | | | | 1 | | | |
| 4/10/2019 | Travel to Edmonton for AHS Board Committee Meetings | AB - Local | Taxi | \$ 34.40 | Red Arrow | Home | | 1 | | | |
| 4/10/2019 | To attend AHS Board Committee Meetings in Edmonton | AB - Other Zones | Accommodations | \$ 170.32 | | | | 1 | | | |
| 4/24/2019 | Travel to Edmonton for AHS Board Meetings | AB - Local | Taxi | \$ 34.08 | Home | Red Arrow | | 1 | | | |
| 4/24/2019 | Travel to Edmonton for AHS Board Meetings | AB - Other Zones | Meals Per Diem | \$ 24.00 | | | | 1 | | | |
| 4/25/2019 | Travel to Edmonton for AHS Board Meetings | AB - Other Zones | Meals Per Diem | \$ 34.50 | | | | 1 | | | |
| 4/25/2019 | Travel to Edmonton for AHS Board Meetings | AB - Other Zones | Accommodations | \$ 170.32 | | | | 1 | | | |
| 4/25/2019 | Travel to Edmonton for AHS Board meetings | AB - Local | Taxi | \$ 35.52 | Red Arrow | Home | | 2 | | | |
| Approver(s) for the claim | | Approval Status | Approval Date | | | | | | | | |
| GIESBRECHT, TINA | | Approve | 1-May-19 | | | | | | | | |

Home → Red Arrow

ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111
Car#959

SALE

Batch #: [REDACTED] REF#: [REDACTED]
04/09/19 SEQ: [REDACTED] 16.12.19
APPR CODE: [REDACTED]
MASTERCARD
[REDACTED]

AMOUNT \$27.60
TIP \$5.50
TOTAL \$33.10

00 - APPROVED - 001

MasterCard
[REDACTED]

THANK YOU
CUSTOMER COPY

Red Arrow → Home

DELTA CAB Ltd.
Calgary
403-273-9399

Terminal 1264/66250998
Driver 2974
19/04/10 20:15:55

MASTERCARD
Card : [REDACTED]
D7C414357E2C9FBF
CHIP CARD

MasterCard
E800

VERIFIED BY PIN
Ref # [REDACTED]
Auth # [REDACTED]

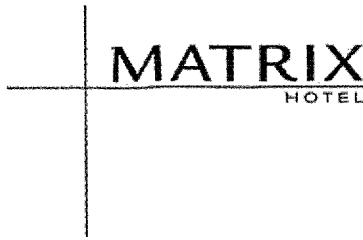
FARE : \$ 28.80
TIP : \$ 5.60

TOTAL : \$ 34.40

GST/HST #: 1234567890
APPROVED - THANK YOU
(01-027)

IMPORTANT: Retain this
copy for your records

Merchant Copy



MS Catherine Macneill

Room No. [Redacted]
Arrival : 04-09-19
Departure Date : 04-10-19
Folio No. [Redacted]
Conf. No. [Redacted]
P.O. No. :

Company Name: AB Health
Group Name:

INFORMATION INVOICE

| Date | Description | Charges | Credits |
|----------------------|---------------------------|---------|-------------|
| 04-09-19 | Room Revenue | 159.00 | |
| 04-09-19 | Destination Marketing Fee | 4.77 | |
| 04-09-19 | Tourism Levy | 6.55 | |
| 04-09-19 | Mastercard | | 204.36 |
| Total Charges | | 204.36 | |
| Total Credits | | | 204.36 |
| Balance | | | 0.00 |

Handwritten notes: } ✓
(34.04)
170.32

Home → Red Arrow

ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111
CAR#127

SALE

MID: [REDACTED]
TID: [REDACTED] REF# [REDACTED]
Batch #: 141 SEQ: [REDACTED]
04/24/19 16:07:45
APPR CODE: [REDACTED]
MASTERCARD [REDACTED]

AMOUNT \$28.40
TIP \$5.68
TOTAL \$34.08

00 - APPROVED - 001

MasterCard
[REDACTED]

THANK YOU
CUSTOMER COPY

Red Arrow → Home

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

TERMINAL ID: [REDACTED]
MERCHANT ID: [REDACTED]
VEHICLE ID: [REDACTED]
DRIVER ID: [REDACTED]
GST ACCOUNT #: [REDACTED]
TRIP NUMBER: [REDACTED]
PASSENGERS: 1

04/25/2019
START: 20:09 END: 20:29
DISTANCE: 142.00 RATE: 1

FARE AMOUNT: \$ 28.19

TAX AMOUNT: \$ 1.41
TIP AMOUNT: \$ 5.92

TOTAL : \$ 35.52

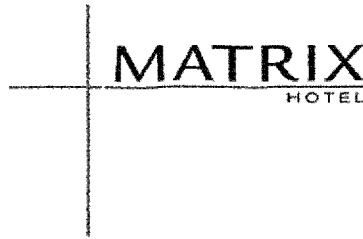
MASTER CARD SALE : [REDACTED]

APPROVAL NUMBER : [REDACTED]

PASSENGER COPY

THANK YOU
CALL 299 9559
WWW.THECHECKERGROUP.COM





MS Catherine Macneill

Room No. [REDACTED]
Arrival : 04-24-19
Departure Date : 04-25-19
Folio No. [REDACTED]
Conf. No. [REDACTED]
P.O. No. [REDACTED]

Company Name: AHS - Vision/Marlin Travel
Group Name:

INFORMATION INVOICE

| Date | Description | Charges | Credits |
|----------------------|---------------------------|---------|---------|
| 04-24-19 | Room Revenue | 159.00 | |
| 04-24-19 | Destination Marketing Fee | 4.77 | |
| 04-24-19 | Tourism Levy | 6.55 | |
| 04-25-19 | Mastercard | | 208.08 |
| Total Charges | | 208.08 | |
| Total Credits | | | 208.08 |
| Balance | | | 0.00 |

(37.76)

170.32.
Page No. 1 of 1

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 : Apr-19 |
|----------------------------------|---|

| DD-MMM-YY | Payment Method | Category | Description/Purpose of the Expense | Name of Vendor | Amount Paid |
|--------------------------------|----------------|----------------------------|---|----------------|------------------|
| 09-Apr-19 | Direct Billing | Other Transportation | Red Arrow from Calgary to Edmonton and Return (April 10) to attend AHS Board Committee Meetings | Marlin Travel | 137.52 |
| 24-Apr-19 | Direct Billing | Other Transportation | Red Arrow from Calgary to Edmonton and Return (April 25) to attend AHS Board Meetings | Marlin Travel | 137.52 |
| | 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 | | | | | \$ 275.04 |

From: Red Arrow Reservations <itinerary@redarrow.ca>
Sent: Monday, December 03, 2018 12:32 PM
To: [REDACTED]
Subject: Red Arrow Itinerary/Receipt

Follow Up Flag: Follow up
Flag Status: Flagged

INVOICE



2018-12-03

You can reach us at:

ALBERTA HEALTH SERVICES - VISION TRAVEL
 10030 107 STREET
 EDMONTON , AB T5J 3E4

Corporate Sales

| ORDER# | ORDERED | CUSTOMER# | P.O. | GROUP NAME | DEPARTING | RETURNING | SALES REP | SALES AGENT |
|------------|------------|------------|------|------------|------------|------------|-----------|--------------|
| [REDACTED] | 2018-12-03 | [REDACTED] | | | 2019-04-09 | 2019-04-10 | - | Website User |

Travellers:

MacNeill/Catherine

| PRODUCT DESCRIPTION | DURATION | OCCUPANCY | QTY | PRICE/UNIT | BILLED |
|--|---------------|-----------|-----|------------|----------|
| CEEXP 16:30. Assigned to: 12A Departs Calgary (CALTO / CTO 205 9 Ave SE) at 16:30 on 2019-04-09. Arrives Edmonton (EDMTO / ETO 10014 104 St) at 19:50 on 2019-04-09. (3 hrs 20 mins) | 3 hrs 20 mins | Adult | 1 | \$ 72.38 | \$ 68.76 |
| ECEXP 16:30. Assigned to: 12A Departs Edmonton (EDMTO / ETO 10014 104 St) at 16:30 on 2019-04-10. Arrives Calgary (CALTO / CTO 205 9 | 3 hrs 20 mins | Adult | 1 | \$ 72.38 | \$ 68.76 |

Ave SE) at 19:50 on 2019-04-10. (3 hrs
20 mins)

Payments Received

| DATE | GUEST | REFERENCE | AMOUNT |
|------------|-------------------------|--------------------------|-----------|
| 2018-12-03 | ALBERTA HEALTH SERVICES | MasterCard [REDACTED] | \$ 137.52 |

Base Price: \$ 144.76

Discounts: \$ 7.24

Service Charges: \$ 0.00

Invoice Total: \$ 137.52

Payments Received: \$ 137.52

Balance Due: \$ 0.00

**PLEASE NOTE THAT A PAPER TICKET IS NOT REQUIRED FOR CHECK-IN.
PLEASE CHECK IN 15 MINUTES PRIOR TO DEPARTURE**

TERMS: DUE UPON RECEIPT GST# BN139981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to time change, date change, or cancel for a full refund – 30 minutes notice prior to A.M. departures; 3 hours notice prior to P.M. departures must be given. All Camrose Departures require 30 minutes notice. December 14 - January 4 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. **Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices** **Red Arrow reserves the right to check I.D. or perform carry-on baggage checks at any time** Corporate Billing Accounts: Payment due 30 days after completion of trip.

If you wish to change or cancel your booking, please contact a Passenger Experience Representative at 1-800-232-1958.

Thank you for booking with Red Arrow Motorcoach. We appreciate your business!

Our Core Values: Safety | Customer Service | Resourcefulness | Integrity | Positive Attitude | Team Work | Loyalty | Accountability | Respect | Dedication

From: Red Arrow Reservations <itinerary@redarrow.ca>
Sent: Friday, March 29, 2019 2:27 PM
To: [REDACTED]
Subject: Red Arrow Itinerary/Receipt

INVOICE



2019-03-29

You can reach us at:

ALBERTA HEALTH SERVICES - VISION TRAVEL
10030 107 STREET
EDMONTON , AB T5J 3E4

Corporate Sales

| ORDER# | ORDERED | CUSTOMER# | P.O. | GROUP NAME | DEPARTING | RETURNING | SALES REP | SALES AGENT |
|------------|------------|------------|------|------------|------------|------------|-----------|--------------|
| [REDACTED] | 2019-03-29 | [REDACTED] | | | 2019-04-24 | 2019-04-25 | - | Website User |

Travellers:

MacNeill/Catherine

| PRODUCT DESCRIPTION | DURATION | OCCUPANCY | QTY | PRICE/UNIT | BILLED |
|--|---------------|-----------|-----|------------|----------|
| CEEXP 16:30. Assigned to: 03C Departs Calgary (CALTO / CTO 205 9 Ave SE) at 16:30 on 2019-04-24. Arrives Edmonton (EDMTO / ETO 10014 104 St) at 19:50 on 2019-04-24. (3 hrs 20 mins) | 3 hrs 20 mins | Adult | 1 | \$ 72.38 | \$ 68.76 |
| ECEXP 16:30. Assigned to: 03B Departs Edmonton (EDMTO / ETO 10014 104 St) at 16:30 on 2019-04-25. Arrives Calgary (CALTO / CTO 205 9 Ave SE) at 19:50 on 2019-04-25. (3 hrs 20 mins) | 3 hrs 20 mins | Adult | 1 | \$ 72.38 | \$ 68.76 |

Base Price: \$ 144.76

Discounts: \$ 7.24

Service Charges: \$ 0.00

Invoice Total: \$ 137.52

Payments Received: \$ 137.52

Balance Due: \$ 0.00

Payments Received

| DATE | GUEST | REFERENCE | AMOUNT |
|------------|--|--------------------------|-----------|
| 2019-03-29 | ALBERTA HEALTH SERVICES - VISION TRAVEL Services | MasterCard [REDACTED] | \$ 137.52 |

**PLEASE NOTE THAT A PAPER TICKET IS NOT REQUIRED FOR CHECK-IN.
PLEASE CHECK IN 15 MINUTES PRIOR TO DEPARTURE**

TERMS: DUE UPON RECEIPT GST# BN139981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to time change, date change, or cancel for a full refund – 30 minutes notice prior to A.M. departures (prior to time of originating departure point); 3 hours notice prior to P.M. departures (prior to time of originating departure point) must be given. All Camrose Departures require 30 minutes notice. December 14 - January 4 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. **Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices** **Red Arrow reserves the right to check I.D. or perform carry-on baggage checks at any time** Corporate Billing Accounts: Payment due 30 days after completion of trip.

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