

AHS Board and Executive Expense Report

Name Catherine MacNeill

Title: Corporate Secretary & Legal Counsel

Location Calgary

Expenses submitted during the month of July 2019

						Travel (1)					
ммм-үү	Source Document	Purpose	Airfare	Meals	Acc	commodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Jul-19 Jul-19	Expense Claim Direct Billing	Meetings Meetings		6	50	170	67 138	297 138			
Total			\$ -	\$ 6	50 \$	170	\$ 205	\$ 435	\$ -	\$ -	\$ -

Total for

the Month \$ 435

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	\$ 296.62									
Expense Date	Business reason		Expense Location	Expense Type		From Location	To Location	Justification		# of Attendees	Attendee Name(s)	Trip Distance
7/24/2019	Taxi from Home to Red Arrow to travel to Ed Board Meeting	lmonton for AHS	AB - Local	Taxi	\$ 32.40	Home	Red Arrow		1			
7/24/2019	Meals attending AHS Board meeting in Edmonton		AB - Other Zones	Meals Per Diem	\$ 24.00				1			
7/25/2019	Meals attending AHS Board meeting in Edmonton		AB - Other Zones	Meals Per Diem	\$ 34.50				1			
7/25/2019	Accommodations while in Edmonton to attend AHS Board meeting		AB - Other Zones	Accommodations	\$ 170.32				1			
7/25/2019	Taxi from Red Arrow to Home after returning from Edmonton for AHS Board Meeting		AB - Local	Taxi	\$ 35.40	Red Arrow	Home		1			
Approver(s) for	r the claim	Approval Status	•	Approval Date		•	•	•		•	•	•
GIESBRECHT, T	INA	Approve		12-Aug-19								

Home -> Red Arrow

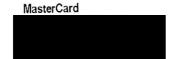
ASSOCIATED CAB ALLIED LIMOUSIN 307-41 AVENUE NE CALGARY AB T2E 2N4 (403) 299-1111 CAR#127

SALE

MID TID:	REF#: SEQ:
Batch #: 07/24/19	16:01:21
APPR CODE	*
MASTERCARD	

AMOUNT	\$27.00
TIP	\$5.40
TÖTAL	\$32.40

00 - APPROVED - 001



THANK YOU

CUSTOMER COPY

RED Arraw -> Home

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

Jul 25, 19 20:28

Car#	
Driver#	
Driver Tax#	
Booking#	

From: 2019-07-25 8:06:28 PM

To: 2019-07-25 8:26:52 PM

Flagfall	\$3.80
Fare	\$25.60
Extras	\$0.00
Flat Rate	\$0.00
Tip	\$6.00
Total + Tip	\$35.40
Subtotal	\$29.40
Tip	\$6.00
Card Charged	\$35.40
Tax	\$1.40

Approval
Card No
Entry Mode
Auth ID

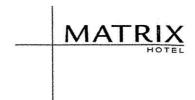
Mode

Issuer

MasterCard

Verified by PIN 2019-07-25 8:28:13 PM

Thank you for using Checker Taxi!



Catherine Macneill

Room No.

: 07-24-19

Arrival

Departure

: 07-25-19

Folio No.

Conf. No.

Custom Ref. :

Cashier No. :

Company Name: AB Health

Group Name:

INFORMATION INVOICE

Date	Description	Charges	Credits
			l
07-24-19	Room Revenue	159.00	
07-24-19	Destination Marketing Fee	4.77	
07-24-19	Tourism Levy	6.55	
07-24-19	Mastercard		200.73
	Total Charg	ges 200.73	

Total Charges Total Credits

200.73

Balance

0.00

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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 wheth	ier you have expenses to report in th	is section for this reporting period:		YES
Name :	Catherine MacNeill	Reporting Period for th	ne Month of :	Jul-19

DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
24-Jul-19	Direct Billing		Red Arrow from Calgary and return (July 25) to Edmonton to attend AHS Board Meeting	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	
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Fotal Paid in th	e Month				\$ 137.52

Subject:

FW: Red Arrow Itinerary/Receipt



ITINERARY/RECEIPT

2019-06-18

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
	2019-06- 18			Orandaria Cristologia	2019-07- 24	2019-07-25		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 2019-07-24. Arrives Edmonton (EDMTO / ETO 10014 104 St) at 19:50 on 2019-07-24. (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 2019-07-25. Arrives Calgary (CALTO / CTO 205 9 Ave SE) at 19:50 on 2019-07-25. (3 hrs 20 mins)	3 hrs 20 mins	Adult	1	\$ 72.38	\$ 68.76
Payments Pagginad			D	n :	D 14476

Payments ReceivedBase Price: \$ 144.76DATEGUESTREFERENCEAMOUNTDiscounts: \$ 7.24

2019- 06-18	ALBERTA HEALTH SERVICES	MasterCard	\$ 137.52	Service Charges:	\$ 0.00
				Invoice Total:	\$ 137.52
				Payments Received:	\$ 137.52
				Balance	\$ 0.00

Due:

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 oginating 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.

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