

AHS Board and Executive Expense Report

Name David Weyant
Title AHS Board Chair
Location Calgary

Expenses approved during the month of July 2020

MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Travel (1)										
Jul-20	P-Card	Meetings					-			
Jul-20	Expense Claim	Meetings			172	141	313			
Jul-20	Direct Billing	Meetings					-			
Total			\$ -	\$ -	\$ 172	\$ 141	\$ 313	\$ -	\$ -	\$ -

Total for the Month \$ 313

Maximum daily single meal expense claimed in the month

Maximum daily base hotel rate claimed in the month \$ 153

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 - AP Processing - Internal Use Only	
Voucher #	
Naming Convention:	
T4A/NR Applicable? - If yes, indicate line & amt	

BOARD MEMBER EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION					
Name:	David Weyant			Expense Period Month:	Jun-20
Address:			City:	Calgary	
Province:	AB	Postal Code:		Country:	Canada
Reason for Expense	Attended the Minister/DM Meeting and a Meeting with Minister Shandro and other government representatives on June 10, 2020 in Edmonton.				

SECTION 2: FINANCE CODING & TOTAL CLAIM					
Description	Corp/BU/Org	Location (If applicable)	Functional Centre/Primary	Expense/Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	101	0005	71110300000	45000000	\$0.00
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$313.03
Other (D)	101	0005	71110300000	41090000	\$0.00
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$313.03

SECTION 3: AUTHORIZATION			
I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.			
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization.			
I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided below.			
Claimant (Print Name)	Signature: I, by signing this form, attest that I am compliant to all the above statements	Date	Phone#
David Weyant, Q.C.	<i>See attached email for approval</i>	July 13, 2020	

I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.	
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization.	
I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided below.	
Approved by (Print Name)	Position Title/Program Group
<i>[Signature]</i>	Minister of Health
Signature	Date
<i>[Signature]</i>	July 20/20

Health and Personal Information on this form is collected by AHS under the authority of section 20(b) of the Health Information Act (HIA) and sections 33(c) and 34(2) of the Freedom of Information and Protection of Privacy (FOIP) Act, respectively, for the purpose of administering AHS Procure to Pay program.

For payment please submit to:

14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: Jennifer Hamstra

July 16, 2020

Colleen Purdy, CPA, CMA

Vice President, Corporate Services & Chief Financial Officer
Rev 12 eff Jun 25, 2018

Carry forward from Section 1

Name:	David Weyant	Expense Period Month:	Jun-20
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Completion of the "cost effective method used" Column is required. If you select "No" in this column, Further Explanation is Required in the "Rationale is Required" section below

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

The Board Members follow the Government of Alberta (GOA) Travel, Meal and Hospitality Expenses Policy

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates (Appendix C for USA, Appendix D for International).

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt) (A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)
			Allowance Within Canada		With Receipt or Allowance Outside Canada					
			Meal Type	Allowance	Meal Type	Amount				
9-Jun-2020	Rental Car to drive to Edmonton to attend meetings with the Minister and other government representatives on June 10, 2020.	Yes					\$94.98			
9-Jun-2020	Fuel for rental car.	Yes					\$30.48			
9-Jun-2020	One night accommodation to attend meetings in Edmonton.	Yes				\$187.57				
Total: (amount auto fills to page 1)			\$0.00		\$0.00	\$187.57	\$125.46	\$0.00	0.00	

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$	-
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Our File: [REDACTED]

July 17, 2020

Honourable Tyler Shandro, Q.C
Minister of Health
423 Legislature Building
10800 97 Avenue NW
EDMONTON AB T5K 2B6

Dear Minister Shandro:

Expenses – AHS Board Chair – June 2020

Please find attached my expenses for June 2020 for your review and approval. I have provided a summary below for your reference:

Expenses	Costs
June 10, 2020 – Attended meetings with Minister Shandro and other government and AHS representatives in Edmonton.	
Car Rental	\$ 94.98
Fuel for Rental Car	\$ 30.48
Hotel (1 night accommodation)	\$187.57
June Expenses	\$313.03

Once signed please return in the envelope provided.

Sincerely,



David Weyant, Q.C.
Board Chair

att.

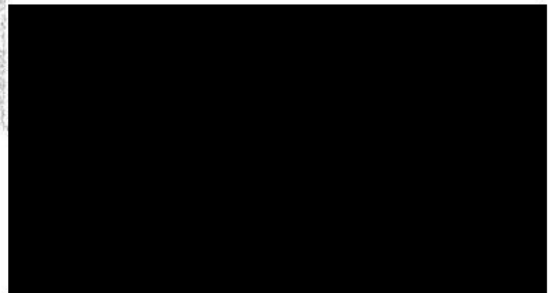
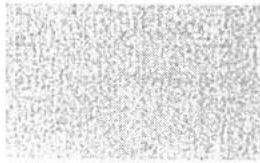
Approved By: [Signature]	
[REDACTED]	July 20, 2020
Honourable Tyler Shandro, Q.C. Minister of Health	Date



RA #: [REDACTED]

Renter: WEYANT, DAVID

2020-06-11 10:35:29



[REDACTED]
 MR DAVID T WEYANT
 [REDACTED]
 CALGARY, AB [REDACTED]

Payment due date Jul 3, 2020
 Total minimum payment [REDACTED]
 Current minimum payment [REDACTED]

Borrowers on this account:
 MR DAVID T WEYANT

New balance = [REDACTED]
 Credit limit [REDACTED]
 Credit available [REDACTED]

This statement covers transactions posted to your account during the Statement Period.

Transactions since your last statement

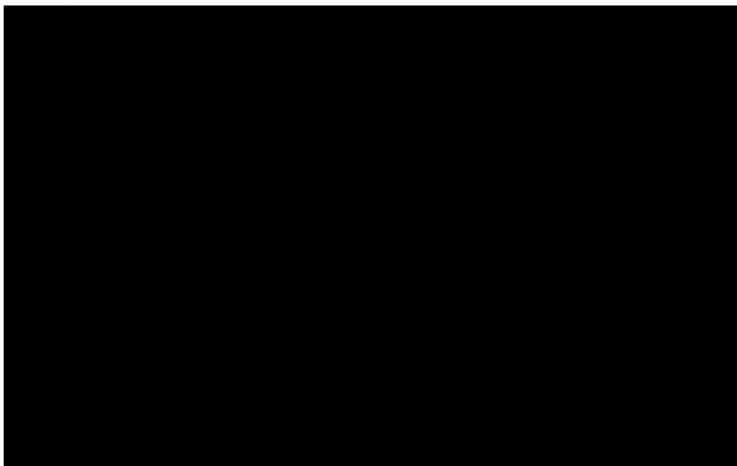
TRANS. REF. #	POST DATE	DATE	DETAILS	AMOUNT(\$)
MR DAVID WEYANT				
001	Jun 9	Jun 12	RETROCAN-100 - 6701 HWY 5 PONOKA AB	30.48
002	Jun 9	Jun 12	WESTIN WESTIN HOTELS EDMONTON AB	187.57
003	Jun 11	Jun 12	ENTERPRISE CANADA CSOB CALGARY AB	94.98
SUB-TOTAL CREDITS				\$0.00
SUB-TOTAL DEBITS				\$313.03

Interest Information
 Annual interest rates as of statement date:
 Cash advances [REDACTED]
 Purchases [REDACTED]

Fuel \$30.48

Interest charges

Cash advances/cheques	\$0.00
Special rate offers	\$0.00
Purchases	\$0.00



The Westin Edmonton
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 Edmonton, AB T5J 0N7
 Canada
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HOTELS & RESORTS

DAVID WEYANT

Page Number : 1 Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : A
 Arrive Date : 09-JUN-20 22:13
 Depart Date : 10-JUN-20 14:21
 No. Of Guest : 1
 Room Number : [REDACTED]
 Marriott Bonvoy Number : [REDACTED]

Copy Tax Invoice

Tax ID : 815461330RT0001
 The Westin Edm [REDACTED] JUN-11-2020 04:30 9999

Date	Reference	Description	Charges (CAD)	Credits (CAD)
09-JUN-20	[REDACTED]	Rm Chrg - AAA	153.04	
09-JUN-20	[REDACTED]	GST	7.88	
09-JUN-20	[REDACTED]	DMF	4.59	
09-JUN-20	[REDACTED]	Tour Levy	6.31	
09-JUN-20	[REDACTED]	Parking Self	15.00	
09-JUN-20	[REDACTED]	GST	0.75	
10-JUN-20	[REDACTED]	Visa [REDACTED]		-187.57

Approve EMV Receipt for VI - [REDACTED] PIN Verified

TC: [REDACTED]

** Total 187.57 -187.57
 *** Balance 0.00

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Continued on the next page

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



DAVID WEYANT

Page Number : 2 Invoice Nbr : [REDACTED]
 Guest Number : [REDACTED]
 Folio ID : A
 Arrive Date : 09-JUN-20 22:13
 Depart Date : 10-JUN-20 14:21
 No. Of Guest : 1
 Room Number : [REDACTED]
 Marriott Bonvoy Number : [REDACTED]

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
06-09-2020	153.04	7.88	6.31	0.00	0.00	20.34	187.57	0.00
06-10-2020	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-187.57
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Total	153.04	7.88	6.31	0.00	0.00	20.34	187.57	-187.57

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