

AHS Board and Executive Expense Report

Name Glenda Yeates
Title AHS Board Member
Location Edmonton
 Expenses approved during the month of May 2020

Travel (1)										
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
May-20	P-Card Expense Claim	Meetings					-			
May-20	Direct Billing	Meetings		71		209	280			
May-20	Direct Billing	Meetings	81				81			
Total			\$ 81	\$ 71	\$ -	\$ 209	\$ 361	\$ -	\$ -	\$ -

**Total for
the Month** \$ 361

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ -
 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.

Employee # 01141124

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:	Glenda Yeates			Expense Period Month:	Feb-20
Address:	[REDACTED]		City:	[REDACTED]	
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Attended Board Meeting and Public Board Meeting on February 27, 2020 in Calgary.				

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	\$41.50
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$129.99
Other (D)	101	0005	71110300000	41090000	\$10.25
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$181.74

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#
Glenda Yeates	Please see attached email for approval.	April 02/20	[REDACTED]

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
David Weyant, Q.C.	Board Chair
Signature: I, by signing this form, attest that I am compliant with all the above statements	Date
See attached email for approval.	May 11, 2020

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

Carry forward from Section 1			
Name:	Glenda Yeates	Expense Period Month:	Feb-20

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				
26-Feb-2020	Use of personal vehicle from residence to Ottawa airport to travel to Calgary for Board Meetings on February 27, 2020.	Yes						\$10.25		
26-Feb-2020	Taxi from YYG to hotel.	Yes					\$65.67			
26-Feb-2020	Dinner per diem.	Yes	D-\$20.75	\$20.75						
27-Feb-2020	Dinner per diem.	Yes	D-\$20.75	\$20.75						
29-Feb-2020	Taxi from daughters residence in Calgary to YYG.	Yes					\$31.28			
29-Feb-2020	Taxi from Ottawa Airport to residence.	Yes					\$33.04			
Total: (amount auto fills to page 1)			\$41.50		\$0.00	\$0.00	\$129.99	\$10.25	0.00	

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$ -
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ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111
CAR#1871

SALE

REF#: [REDACTED]
Batch #: [REDACTED] SEQ: [REDACTED]
02/26/20 19:07:21
APPR CODE: [REDACTED]
VISA
***** [REDACTED] **/**

AMOUNT	\$57.10
TIP	\$8.57
TOTAL	\$65.67

00 - APPROVED - 001

Visa Credit
AID: [REDACTED]
TVR: [REDACTED]
TSt: [REDACTED]

THANK YOU

Checker Taxi
315 Meridian Rd SE
Calgary, AB
T2A 1A2
(403) 299-9999
www.thecheckergroup.com

Feb 19, 20 08:44

Card
Drivers
Driver Tax
Bookings

From:

2020-02-26 8:27:38 AM

To:

2020-02-29 8:41:43 AM

Flagfall	\$3.80
Fare	\$23.40
Extras	\$0.00
Total + Tips	\$31.28
Subtotal	\$27.20

Tip	\$4.08
Card Charged	\$31.28
Tax	\$1.30

Approval

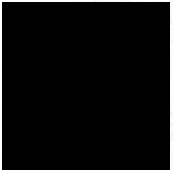
Card No ***** (C)
Entry Mode
Auth ID
MID
TID
Mode Issuer
AID
TVR
IAD
TSI
ARC
Visa Credit

Verified by PIN
2020-02-29 8:44:33 AM

Thank you for using Checker
Taxi!

BLUE LINE TAXI
(613) 238 - 1111

TERMINAL ID:
MERCHANT ID:
VEHICLE ID :
DRIVER ID :



TRIP NUMBER:
PASSENGERS: 1

02/29/2020
START: 16:43 END: 16:43

FARE AMOUNT: \$ 28.73

TIP AMOUNT: \$ 4.31

TOTAL : \$ 33.04

VISA SALE : **** [REDACTED]

APPROVAL NUMBER : [REDACTED]

PASSENGER COPY

CUSTOMER SERVICE 1-800-443-2812
INQUIRY@TAXITAB.COM
TAXITAB





Employee # 01141124

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:	Glenda Yeates			Expense Period Month:	Mar-20
Address:	[REDACTED]		City:	[REDACTED]	
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Attended Quality & Safety Committee Meeting on March 11, 2020 in Calgary.				

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	\$29.95
Travel Exp (B+C+E)	101	0005	71110300000	62212000	\$68.60
Other (D)	101	0005	71110300000	41090000	\$0.00
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$98.55

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#
Glenda Yeates	<i>Please see attached email for approval</i>	April 10, 2020	[REDACTED]

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.	
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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
David Weyant, Q.C.	Board Chair
Signature: I by signing this form, attest that I am compliant with all the above statements	Date
<i>See attached email for approval.</i>	May 11, 2020

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

[REDACTED]

April 03, 2020

Created Nov 12 Rev 12 eff. Robert Hawes, Interim VP Corporate Services & CFO

Carry forward from Section 1

Name:	Glenda Yeates	Expense Period Month:	Mar-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)

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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				
8-Mar-2020	Taxi from residence to Ottawa Airport to travel to Calgary to attend the Quality & Safety Committee Meeting on March 11, 2020.	Yes					\$35.25			
11-Mar-2020	Breakfast and Dinner per diems.	Yes	BD-\$29.95	\$29.95						
26-Mar-2020	Taxi from Ottawa Airport to residence.	Yes					\$33.35			
Total: (amount auto fills to page 1)			\$29.95		\$0.00	\$0.00	\$68.60	\$0.00	0.00	

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$ -
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BLUE LINE TAXI
(613) 238-1111

TERMINAL ID: [REDACTED]
MERCHANT ID: [REDACTED]
VEHICLE ID: [REDACTED]
DRIVER ID: [REDACTED]

TRIP NUMBER:
PASSENGERS: 1

03-06-2020
START: 09:30 END: 10:30

FARE AMOUNT: \$ 30.65

TIP AMOUNT: \$ 4.60

TOTAL : \$ 35.25

VISA SALE : [REDACTED]

APPROVAL NUMBER : [REDACTED]

PASSENGER COPY

CUSTOMER SERVICE 1-800-442-2812
INDUSTRYTAXITAB.COM
TAXITAB



\$35.25

BLUE LINE TAXI
(613) 238 - 1111

Merchant ID: [REDACTED]

Driver ID: [REDACTED]

Record Num.: [REDACTED]

Sale

Application Label: Visa Credit

XXXXXXXXXXXX [REDACTED]

AID: [REDACTED]

VISA Entry Method: Chip

Amount: \$ 29.00

Tip: \$ 4.35

Total: CAD\$ 33.35

2020/03/26 14:57:54

Resp Code: 00
[REDACTED]

Inv#: [REDACTED]

Appr Code: [REDACTED]

Apprvd: Online

Batch#: [REDACTED]

TRN Ref #:

[REDACTED]

Validation Code:

[REDACTED]

DESCRIPTION:

Expense Report Direct Bill Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive or an AHS Board Member 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

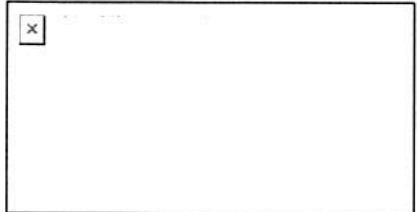
- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- 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 : Glenda Yeates	Reporting Period for the Month of : May-20
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
26-Mar-20	Direct Billing	Choose from Drop-down List	Note - return flight changed to fly from Calgary, instead of Vancouver, to Ottawa due to pandemic. Flight on the 28th cancelled by A/C flight changed to March 26th, only charged for additional fare. XXXXXXXXXX	Vision Travel	\$80.80
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Other Transportation		Choose from Drop-down List	
Total Paid in the Month					\$ 80.80

[Redacted]

From: [Redacted]
Sent: Wednesday, March 18, 2020 1:21 PM
To: [Redacted]
Subject: Invoice and Itinerary for YEATES/GLENDA MS - 08March20 - Vision Travel Locator: [Redacted]
Attachments: E-Ticket Receipt 1 - [Redacted] - March 8 2020 [Redacted] E-Ticket Receipt 2 - [Redacted] - March 8 2020 [Redacted]



Vision Travel DT Ontario-West Inc
9929 - 108 St.
Edmonton, AB
T5K 1G8
1-833-692-4120 1-866-425-8611

www.visiontravel.ca
GST Reg : 723782728 RT 0001

Invoice/Itinerary

Invoice: [Redacted]
Issued: 18 March 2020

Agency Ref.: [Redacted]
Sales Person: [Redacted]

Customer Number: [Redacted]
Customer Ref.: [Redacted]

ALBERTA HEALTH SERVICES
10030 107 STREET
EDMONTON AB
T5J 3E4

Passenger(s): YEATES/GLENDA MS

Disclaimer: It is your responsibility to carefully review this itinerary immediately upon receipt and notify us if there are any discrepancies.

Air Passenger Protection Regulations:

As of July 15, 2019, airlines will be required to meet new obligations concerning communication, denied boarding, tarmac delay, baggage and the transportation of musical instruments. For more information visit : <https://rppa-appr.ca>

AC : <https://www.aircanada.com/ca/en/aco/home/legal/conditions-carriage-tariffs.html>

AIR - Sunday, March 8 2020 (Flown) [Add To Calendar](#)

Air Canada Flight AC451 Economy Class

Depart Ottawa, Ontario [Weather](#) **Arrive** Toronto, Ontario [Weather](#)
Ottawa International Airport Pearson International Airport
12:00 PM Sunday, March 8 2020 01:12 PM Sunday, March 8 2020

Duration: 1 hour(s) and 12 minute(s) Non-stop
Status: Confirmed - Air Canada Booking Reference: [REDACTED]
FF Number: [REDACTED] - YEATES/GLENDA MS - please reconfirm at check-in
Online Check In: Available 24 hours prior - [click here](#)
E Upgrade: For Eligible Flight - Aeroplan Members [click here](#)

Remarks: PLEASE CHECK IN WITH AIR CANADA
ARR TERMINAL1

AIR - Sunday, March 8 2020 (Flown) [Add To Calendar](#)

Air Canada Flight AC145 Economy Class

Depart Toronto, Ontario [Weather](#) **Arrive** Calgary, Alberta [Weather](#)
Pearson International Airport Calgary International Airport
02:00 PM Sunday, March 8 2020 04:17 PM Sunday, March 8 2020

Duration: 4 hour(s) and 17 minute(s) Non-stop
Status: Confirmed - Air Canada Booking Reference: [REDACTED]
FF Number: [REDACTED] - YEATES/GLENDA MS - please reconfirm at check-in
Online Check In: Available 24 hours prior - [click here](#)
E Upgrade: For Eligible Flight - Aeroplan Members [click here](#)

Remarks: PLEASE CHECK IN WITH AIR CANADA
DEP TERMINAL1

AIR - Thursday, March 26 2020 [Add To Calendar](#)

Air Canada Flight AC394 Economy Class

Depart Calgary, Alberta [Weather](#) **Arrive** Ottawa, Ontario [Weather](#)
Calgary International Airport Ottawa International Airport
10:30 AM Thursday, March 26 2020 04:17 PM Thursday, March 26 2020

Duration: 3 hour(s) and 47 minute(s) Non-stop
Status: Confirmed - Air Canada Booking Reference: [REDACTED]
FF Number: [REDACTED] - YEATES/GLENDA MS - please reconfirm at check-in
Online Check In: Available 24 hours prior - [click here](#)
E Upgrade: For Eligible Flight - Aeroplan Members [click here](#)

Remarks: SEAT [REDACTED]

Invoice Details						
Transaction	Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Additional Collection:		65.80	15.00	0.00	0.00	80.80
Vendor ACSEAT		26.25	0.00	0.00	0.00	26.25
ACSEAT						
				Billed to: CA		
Totals:		92.05	15.00	0.00	0.00	107.05
Total Credit Card Billing:						26.25
Balance Due:						0.00

\$80.80 charged to AHS for change in flight due to COVID-19

Remarks

PLEASE REVIEW YOUR ITINERARY FOR ACCURACY
PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU
FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE
DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS
MAY BE YOUR RESPONSIBILITY

24 HOUR EMERGENCY TRAVEL ASSISTANCE
OUTSIDE REGULAR BUSINESS HOURS - MONDAY TO FRIDAY
A SERVICE FEE MAY APPLY FOR CALLS TO THIS SERVICE
WITHIN NORTH AMERICA - CALL 1-888-700-6063
OUTSIDE NORTH AMERICA - CALL COLLECT 1-514-855-4263
EMAIL 24HRSERVICE-MNL AT VISIONTRAVEL.CA
PLEASE QUOTE ACCESS CODE 2ECO

RECOMMENDED CHECK-IN TIME IS AT LEAST 90 MINUTES
PRIOR TO DEPARTURE. AFTER CHECK-IN YOU MUST BE
AVAILABLE AT THE BOARDING GATE AT LEAST 60 MINUTES
PRIOR TO DEPARTURE OR YOU MAY BE DENIED BOARDING.
PLEASE ENSURE THAT YOU HAVE GOVERNMENT-ISSUED
PHOTO I.D. GATE ASSIGNMENTS AND DEPARTURE
ARRIVAL INFORMATION ARE SUBJECT TO CHANGE.
PLEASE CHECK MONITORS AT THE AIRPORT.
PLEASE RECONFIRM ALL FLIGHTS
IT IS YOUR RESPONSIBILITY TO VERIFY FLIGHT TIMES WITH
THE AIRLINE PRIOR TO YOUR DEPARTURE. SCHEDULE
CHANGES OR FLIGHT CANCELLATIONS MAY OCCUR AT ANY
TIME WITHOUT NOTICE BY THE AIRLINE

ENSURE ALL TRAVELLERS HAVE PROPER TRAVEL DOCUMENTS
CHECK THIS WEBSITE FOR AIRPORT SECURITY INFO
WWW.CATSA.GC.CA

---AIRPORT SECURITY REVISIONS---
BAGGAGE ALLOWANCE-SPECIFIC SIZE AND WEIGHT
RESTRICTIONS VARY BETWEEN AIRLINES. EXCESS CHARGES
MAY APPLY. VISIT THE AIRLINES WEBSITE TO SEE THE
EXACT BAGGAGE RESTRICTIONS AND FEES.
MOST AIRLINE BAGGAGE LINKS ARE AVAILABLE BY VISITING
WWW.VISIONTRAVEL.CA/BAGGAGE/

*****CHECK-IN AND BAGGAGE ACCEPTANCE FOR *****
FLIGHTS WITHIN CANADA WILL CLOSE 45 MINUTES PRIOR
DEPARTURE. WITH THE EXCEPTION OF FLIGHTS LEAVING
FROM TORONTO CITY AIRPORT YTZ-WHERE CHECK-IN
AND BAG DROP-OFF WILL REMAIN AVAILABLE UNTIL
20 MINUTES BEFORE DEPARTURE.
THIS IS AN ELECTRONIC TICKET VALID ONLY ON ISSUING AIRLINE
PHOTO ID REQUIRED FOR CHECK IN.
BOARDING PASS REQUIRED PRIOR TO ENTERING SECURITY.
YOUR AIRLINE FILE NUMBER IS

.....
FOR MORE INFORMATION ON CANADAS CANNABIS ACT EFFECTIVE
17 OCTOBER 2018 AND HOW IT RELATES TO TRAVEL PLANS PLEASE VISIT
TRAVEL.GC.CA/TRAVELLING/CANNABIS-AND-INTERNATIONAL-TRAVEL