

AHS Board and Executive Expense Report

Name Heidi Overguard
Title AHS Board Member
Location Sundre
 Expenses approved during the month of March 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)
	P-Card	Meetings					-			
	Expense Claim	Meetings					-			
Mar-20	Direct Billing	Meetings			165		165			
Total			\$ -	\$ -	\$ 165	\$ -	\$ 165	\$ -	\$ -	\$ -

**Total for
the Month** \$ 165

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 154
 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.

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 : Heidi Overguard	Reporting Period for the Month of : Mar-20
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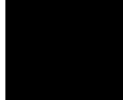
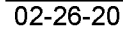
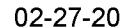
DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
26-Feb-20	Direct Billing	Hotel	One night accommodation to attend Board Meeting and Public Board Meeting on February 27, 2020 in Calgary.	Other	\$164.96
	Direct Billing	Choose from Drop-down List		Choose 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					\$ 164.96



DELTA
CALGARY SOUTH


135 Southland Drive S.E Calgary, Alberta, T2J 5X5
Telephone: 403-278-5050 Fax: 403-225-5834

Alberta Health Services
Alberta Health Services
PO BOX 1600
EDMONTON AB T5J 2N9
Canada

Room: 
Folio: 
Cashier: 
Arrival: 02-26-20
Departure: 02-27-20

Overguard, Heidi

A/R Invoice: 
A/R Account: 

Date	Description	Additional Information	Charges	Credits
02-26-20	Room Charge		154.00	
02-26-20	DMF		4.62	
02-26-20	Tourism Levy		6.34	
02-26-20	Rooms - GST		7.93	
03-19-20	GST Exempt- 120903		-7.93	

GST Summary	
Registration No: 895126332	
Room	7.93
F&B	0.00
Other	10.96
Total	18.89

Total	164.96	0.00
Balance Due	164.96	CDN

Guest Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.