

AHS Board and Executive Expense Report

Name Dr. Jack Regehr

Title Zone Medical Director South Zone

Location Chinook

Expenses submitted during the month of February 2019

				Travel (1)											
ммм-үү	Source Document	Purpose	Airfare		Meals	Accommodation			Other Travel		otal ravel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)	
Feb-19 Feb-19	P-Card Expense Claim	Meetings Meetings					599		436		599 436				
Total			\$	- \$	-	\$	599	\$	436	\$	1,035	\$ -	· \$ -	\$ -	

Total for

the Month \$ 1,035

Maximum daily single meal expense claimed in the month \$ - Maximum daily base hotel rate claimed in the month \$ 184

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 P-Card

Claimant	Claimant Title	Claimant	Expense									
Name		Location	Claim Total									
REGEHR,	ZMD, South Zone	Chinook	\$ 598.83									
JACK												
Expense Date	Business reason		Expense	Expense Type	Amount	From	То	Justification	# of	# of	Attendee	Trip
			Location			Location	Location		days	Attendees	Name(s)	Distance
2/12/2019	Attend PPEC and COEC	meetings	AB - Other	Accommodations	\$ 243.33			Difference between valet parking and self	1			
	in Calgary		Zones					parking is \$5.00. Due to the lateness of				
								arrival, this is justified when time and				
								safety are taken into consideration.				
2/13/2019	Accommodations in M	agrath to	AB - Other	Accommodations	\$ 355.50				2			
	attend Sr Leadership P	rogram	Zones									
	Residency #2 in Magra	th										
Approver(s) for the claim Approval Status		Status	Approval Date		-			-	-			
BELANGER, FRANCOIS Approve			4-Apr-19									
]								



CALGARY AIRPORT IN-TERMINAL

2001 Airport Road NE, Calgary, Alberta T2E 6Z8

Tel: 403-291-2600 Fax: 403-250-8722

Dr Jack Regehr

Room: Folio: Cashier:

Arrival: Departure: 02-12-19 02-13-19

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PPEC/COEC

Date	Description	Addition	nal Information	Charges	Credits		
02-12-19	Room Charge	111000011111111111111111111111111111111		184.00	ничинично го обсосооми нитт.п		
02-12-19	Rooms Destination Mar	eting Fee		5.52			
02-12-19	Rooms Tourism Levy			7.58			
02-12-19	Rooms GST			9.48			
02-12-19	Valet Parking			35.00			
02-12-19	Parking GST			1.75			
02-13-19	Master Card				243.33		
GST Sun	nmary		Total	243.33	243.33		
Registration No:740990726 Room 9.48			Balance Due	0.00 CD	N		
F&B	0.00						
Other	1.75						
Total	11.23						

Difference between valet parking and self parking is \$5.00. Due to the lateness of arrival, this is justified when time and safety are taken into consideration.



03-20-19

Jack Regehr Folio No. Room No. : A/R Number Arrival : 02-13-19 Group Code Departure : 02-15-19 Company **Direct Travel** Conf. No. Membership No.: Rate Code: G.S.T # 894823004RT000 Page No. : 1 of 1

Date	Description		Charges	Credits
02-13-19	*Accommodation		169.99	
02-13-19	Tourism Levy		6.80	
02-13-19	2 % CTR		3.40	
02-13-19	GST 5% 89482-3004		8.67	
02-14-19	*Accommodation		149.99	
02-14-19	Tourism Levy		6.00	
02-14-19	2 % CTR		3.00	
02-14-19	GST 5% 89482-3004		7.65	
02-15-19	MasterCard			355.50
	_	Total	355.50	355,50
		Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

AHS Public Disclosure Expense Claims

Claimant Name		Claimant Location	Expense Claim Total							
REGEHR, JACK	ZMD, South Zone	Chinook	\$ 436.32							
Expense Date	pense Date Business reason		Expense Location	Expense Type		From Location	To Location	# of days	# of Attendees	Trip Distance
2/12/2019	Travel to Calgary - Attend PPEC and Sr. Leadership Program Residency #2			Mileage-Other	\$ 266.64	Magrath	Calgary	1		528
2/25/2019	Attend Community Conversations in Medicine Hat			Mileage-Local- Home Zone	\$ 169.68	Lethbridge	Medicine Hat	1		336
Approver(s) for the claim Approval Stat		Status	Approval Date							
BELANGER, FRANCOIS Approve			4-Apr-19							