

AHS Board and Executive Expense Report

Name: Janice Stewart

Title: Chief Zone Officer, Central Zone

Location: Red Deer

Expenses approved during the month of January 2023

						T	ravel (1)							
Approved MMM-YY	Source Document	Purpose	Air	fare	Meals	Acco	ommodation	her ivel	otal avel	Professional Development (2)	н	Working Sessions losting and lospitality (3)	Othe	
Jan-23 Jan-23	P-Card Expense Claim Direct Bill	Meetings Meetings Meetings		24			156	6	162 24 -					
Total			\$	24	\$	- \$	156	\$ 6	\$ 186	\$	- \$	5 -	\$	_

Total for

the Month \$ 186

Maximum daily single meal expense claimed in the month \$ 24
Maximum daily base hotel rate claimed in the month \$ 139
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.

Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant	Expense Claim	Ī							
		Location	Total								
STEWART, JANICE D	Chief Zone Officer, Central Zone	Red Deer	\$ 156.06								
Expense Date	Business reason	Expense	Expense Type	Amount	From	То	Justification	# of	# of	Attendee	Trip
		Location			Location	Location		days	Attendees	Name(s)	Distance
12/7/2022	Speaking on behalf of AHS Central Zone Leadership at	AB - Local	Accommodations	\$156.06				1			
	the launch of the Bachelor of Nursing Program in										
	Wainwright - December 6 to December 7										
Approver(s) for the	Approval Status	Approval Date									
claim			J								
GORDON, DEBORAH	Approve	23-Jan-23									



RAMADA WAINWRIGHT

1510 27TH ST WAINWRIGHT AB T9W 0A4 CA

> Phone: 780-842-5010 Fax: 780-842-5166

Folio (Detailed)

Name:

STEWART, JANICE D MS

Confirmation Number: ACCOUNT/ INVOICE#:

Room:

Room Type:

\$139.00 + \$17.06 Tax

Nights: 1

Guests: 1/0

Rate Plan: Arrival:

2022-12-06 (Tue)

Daily Rate: Departure:

2022-12-07 (Wed)

MC - MASTERCARD GTD:

XXXX XXXX XXXX

Room Rate:

2022-12-06 (Tue) - 2022-12-06 (Tue) \$139,00 + \$17.06 Tax per night.

Date	Code	Description	Amount	Balance
2022-12-06	RM	ROOM CHARGE	\$139.00	\$139.00
2022-12-06	TAX 4	GST ON DMF	\$0.21	\$139.21
2022-12-06	TAX 5	HOTEL LEVEY ON DMF	\$0.17	\$139.38
2022-12-06	TAX1	GST TAX	\$6.95	\$146.33
2022-12-06	TAX2	DMF TAX	\$4.17	\$150.50
2022-12-06	TAX3	HOTEL LEVEY TAX	\$5.56	\$156.06
2022-12-07	MC	MC (9128)	-\$156.06	\$0.00

Summari

Tạx	F&B	Other	CÇ	Cash	DB
\$17.06	\$0.00	\$0.00	-\$156.06	\$0.00	\$0.00
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Guest Signature:		
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AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant	Expense Claim									
		Location	Total									
STEWART, JANICE D	Chief Zone Officer, Central Zone	Red Deer	\$ 24.00									
Expense Date	Business reason	Expense	Expense Type	Amount		From	То	Justification	# of	# of	Attendee	Trip
		Location				Location	Location		days	Attendees	Name(s)	Distance
12/7/2022	Speaking at Rural Launch Celebration in Wainwright	AB - Local	Meals Per Diem	\$ 2	24.00				1			
Approver(s) for the	Approval Status	Approval Date										
claim			J									
GORDON, DEBORAH	Approve	23-Jan-23										

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant	Expense Claim								
		Location	Total								
STEWART, JANICE D	Chief Zone Officer, Central Zone	Red Deer	\$ 6.25								
Expense Date	Business reason	Expense	Expense Type	Amount	From	То	Justification	# of	# of	Attendee	Trip
		Location			Location	Location		days	Attendees	Name(s)	Distance
12/14/2022	In person meeting at Red Deer Hospital with Dr. Francois	AB - Local	Parking - Lot or	\$ 6.25				1			
	Belanger to discuss Red Deer Hospital Surgical Plan		Parkade								
Approver(s) for the	Approval Status	Approval									
claim		Date									
GORDON, DEBORAH A	Approve	10-Jan-23									

RECEIPT Red Deer Regional Hospital

License Plate Number

Expiration Date/Time

Purchase Date/Time: 05:27pm Dec 14, 2022 Total Due: \$6.25 Rate: \$6.25 = 2 Hr 30 Min Total Paid: \$6.25 Pmt Type: CC (Swipe) Ticket I S/N :: Setting: Red Deer Public Mach Name:

MasterCard

Auth #:

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