

AHS Board and Executive Expense Report

Name Jitendra Prasad

Title Chief Program Officer, Contracting, Procurement & Supply Management

Location Edmonton

Expenses submitted during the month of October 2017

							Travel (1)								
MMM-YY	Source Document	Purpose	Air	fare	ı	Meals	Accommoda	tion	Other Travel		Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Oth (4	
Oct-17 Oct-17	Expense Claim Direct Billing	Meetings Meetings		689					24	0	240 689				14
Total			\$	689	\$	_	\$	-	\$ 24	0 \$	929	\$ -	\$ -	\$	14

Total for

the Month \$ 943

Maximum daily single meal expense claimed in the month \$ - 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.

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
PRASAD, JITENDRA	Chief Program Officer, Contracting, Procurement & Supply Management	Edmonton	\$ 254.41									
Expense Date	Business reason		Expense Location	Expense Type	Amount	From Location	To Location	Justification		# of Attendees	Attendee Name(s)	Trip Distance
6/15/2017	Attended All-day City of Edmon Summit	ton Health	AB - Local	Parking - Lot or Parkade	\$ 35.00				1			
9/5/2017	Attended meeting with Dr. Sad	owski U of A	AB - Local	Parking - Lot or Parkade	\$ 5.50				1			
9/19/2017	Attended Benefits Realization N Calgary	Meeting in	AB - Other Zones	Taxi	\$ 54.01	Calgary Airport	Rockyview Hospital		1			
9/24/2017	SCAN Health Global Networking	g Conference	United States	Taxi	\$ 50.00				1			
9/28/2017	SCANH Health Global Networki	ng Conference	United States	Taxi	\$ 50.00				1			
10/19/2017	Attended AHS Benefits Realizat Calgary	ion Meeting in	AB - Local	Taxi	\$ 46.00	Residence	Edmonton Airport		1			
10/23/2017	Attended CPSM All-Day Training	S	AB - Other Zones	Internet Usage	\$ 6.95				1			
10/23/2017	Attended CPSM All-Day Meetin	g	AB - Local	Internet Usage	\$ 6.95				1			
Approver(s) f	for the claim	Approval Statu	S	Approval Date	1			•	ı			

RHODES, DEBORAH

Approve

31-Oct-17

Impark Lot 383

Expiration Date/Time

06:00 AM JUN 15, 2017

Purchase Date/Time: 07:45am Jun 14, 2017

Total Parking: \$33.33

Total GST: \$1.67

Total Due: \$35.00 Total Paid: \$35,00 Rate: \$40 - All Day + Evg Payment Type: Card

SKING RESERT . PARKING RECEIPT

PARMING RECEIPT

Ticket S/N #

Setting: Lot 383 Mach Name: Meter 1

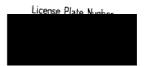


gst #887315638RT0005 NO IN AND OUT PRIVILEGES

ed all-day Health

Mtg with Tov. Sadowski, U OI N. Accessories RAP

University of Alberta



Expiration Date/Time

06:02 PM SEP 05, 2017

Purchase Date/Time: 05:02pm Sep 05, 2017

Total Due: \$5.50 Total Paid: \$5.50

Rate: Hr Increment @ \$5.50 Payment Type: Card

Ticket S/N #:

Setting: Lot C

Mach Name: Lot C South

Visa

Auth A

GST #R108102831

RKING RECEIPT PARKING RECEIPT

September 19 2017 altersed Benezics Resignation meg in Calgary

Takes to the Board of the State of the State

10135 31 AVE NW EDMONTON AB

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2017/09/19
TIME 0602 04:57:25
INVOICE #

RECEIPT NUMBER

PURCHASE

AMOUNT \$41.00 TIP \$5.00 TOTAL

\$46.00

INTERAC



APPROVED

AUTH# THANK YOU

HANK TOO

CARDHOLDER COPY

YELLOW CAB 780 462 3456 BARREL TAX1 780 489 7777 EDMTAXI.COM GST 100403070 ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111
CAR#366

SALE

MID: REF#: SEQ: 07:21:12

Batch # SEQ: 07:21:12

APPR CODE:

AMOUNT \$49.10 TIP \$4.91 TOTAL

00 - APPROVED - 001 chies Many myword

THANK YOU

CUSTOMER COPY

Cosi from Calgary Birpor lo Rockyview Hospital

Loci dom residence Edm. Intt. Dipor



Missing Receipt Attestation

Date of Expense: 9/24/2017

Vendor Name: Supply Chain Advancement Network in Health

Vendor Address: 401 Sunset Ave, Windsor Ontario N9B 3P4

Expense Amount: \$100.00

Expense Details: Incurred taxi fare of \$50.00 each way from the St. Louis International Airport to the Drury Plaza Hotel, St. Louis Chesterfield, US. Attended a SCAN Health Inaugural Global Networking Conference.

Circumstances as to why the receipt is missing:

Receipts has been misplaced and unable to obtain copy as it was an international travel.

I confirm that I have taken reasonable steps to obtain a copy of the original receipt.

I attest that this expense was incurred and relates to AHS business

I attest that this expense has not been claimed previously

Claimant Name		
Jitendra Prasad		
Position / Title	Site / Location	***************************************
Chief Program Officer, CPSM]
Signature	Date	
Jan J	10/26/2017	
//		

From:

Jitendra Prasad

Sent:

Monday, October 23, 2017 10:54 PM

To:

Subject:

Fwd: Here's Your Gogo Receipt - Check Out Your Purchase Details! - Order #

Sent from my Samsung device

----- Original message -----

From: Gogo <gogo@e.gogoair.com>

Date: 2017-10-23 11:46 PM (GMT-05:00)

To: Jitendra Prasad

Subject: Here's Your Gogo Receipt - Check Out Your Purchase Details! - Order

Purchase Details - Order #

To ensure you receive emails from Gogo, add gogo@e.gogoair.com to your email address book.

Mobile device | Web browser

My Account | Contact Us



Thanks for your purchase!

You can view your purchase history at any time by visiting My Account. For more information about Gogo, visit our Privacy Policy and Terms of Use.

Receipt Info

Customer: Jitendra Prasad

Email Address

Order

Date: 10/24/2017 PDT

Product

Quantity

Price

30-Minute Pass

1

\$6.95 CAD

GST: \$0.35 CAD

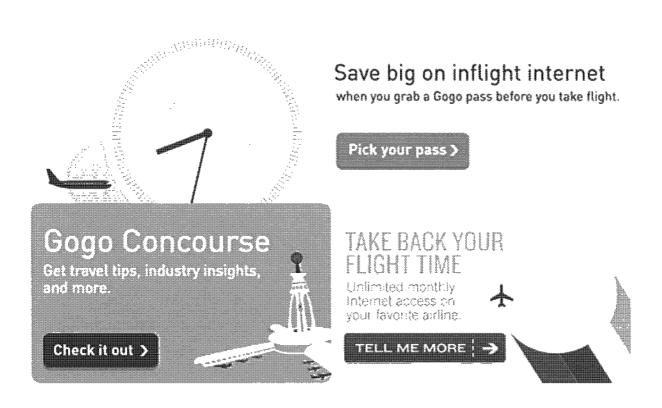
Total: \$7 30 CAD

How to get online, in air.









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This email was sent to because you have made a Gogo purchase. If you would like to change your email preferences or unsubscribe, please click here.

From:

Jitendra Prasad

Sent:

Monday, October 23, 2017 9:16 PM

To:

Subject:

FW: Here's Your Gogo Receipt - Check Out Your Purchase Details! - Order #

From: Gogo [mailto:gogo@e.gogoair.com] Sent: Monday, October 23, 2017 9:09 PM

To: Jitendra Prasad

Subject: Here's Your Gogo Receipt - Check Out Your Purchase Details! - Order

Purchase Details - Order#

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Mobile device | Web browser

My Account | Contact Us



Thanks for your purchase!

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Receipt Info

Customer: Jitendra Prasad

Email Address:

Order #:

Date: 10/24/2017 PDT

Product

Quantity

Price

30-Minute Pass

1

\$6.95 CAD

Payment Info GST: \$0.35 CAD

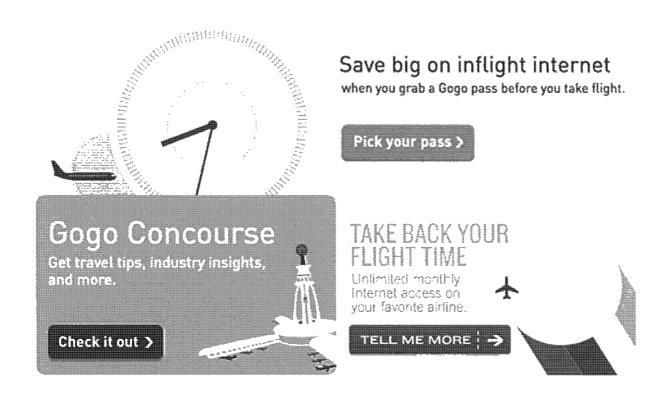
Total: \$7.30 CAD

How to get online, in air.









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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 wheth 	ner you have expenses to report in this section	n for this reporting period:	Yes	
Name :	Jitendra Prasad	Reporting Period for the	Month of: September 21 t	o October 20, 2017

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
23-Oct-2017	Direct Billing	Airline Ticket	Invitation to present at GHX meeting October 24 - required extension to original HealthPRO flight of Ocober 25. Flight changed to depart Edmonton October 23 to Toronto . Change fee and additional fare	Marlin Travel	135.00
23-Oct-2017	Direct Billing	Airline Ticket	Required to attend CPSM CLM all-day meeting and a Joint Calgary Zone leadership meeting. Changed flight to depart from Calgary PM then on to Toronto. Change fee	Marlin Travel	100.00
23-Oct-2017	Direct Billing	Airline Ticket	Planned to drive to Calgary October 23 but fleet vehicles not available. Hence required flight from Edmonton to Calgary AM. Additional fare and change fee	Marlin Travel	122.50
12-Sep-2017	Direct Billing	Airline Ticket	Booked trip to attend HealthPRO meeting - Travel CANCELLED to attend CIS Meeting in Edmonton. Ticket transferred to to HealthPRO meeting October 25 to October 27.	Marlin Travel	131.96
19-Sep-2017	Direct Billing	Airline Ticket	Rescheduled travel to HealthPRO meeting October 25 to October 27 using Ticket transferred from September 12. Change fee.	Marlin Travel	200.00
Total Paid in the Month					



ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 Trip #:

Booking Date: 26 Sep 17

Client:
 Agent:
Agents email:

File Locator:

PASSENGERS: MR JITENDRA PRASAD

REFERENCE/ DESCRIPT	ION			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	L
AIR CANADA Ticket				100.00	0.00	\$0.00	0.00	0.00	100.00	CAE
AIR CANADA Ticket				35.00	0.00	\$0.00	0.00	0.00	35.00	CAD
			Total:	135.00	0.00	0.00	0.00	0.00	135.00	CAE
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	Payment			Amount	
		09/25/2017							100.00	CAD
		09/25/2017							35.00	CAD
							Total Pa	ayment:	135.00	CAD
<u> </u>					В	alance Du	e CAD Cui	rrency	0.00	CAE

Total GST

Total HST

0.00

CORPORATE UNIT 101
REASON FOR TRAVEL HEALTHPRO

\$0.00



MY ITINERARY

 Passengers
 Citizenship
 Required Travel Documents

 JITENDRA PRASAD
 Not Specified
 Not Specified

10/27/2017 2:00PM

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

	JITENDRA PRA	CAD			Booking Date:		09/25/2	2017
Passengers:	JITENDRA PRA	SAD			File Locator/Ticl	ket#:		
Airline	Flight	From	Terminal	То	CI	ass	Seat	Stops
AIR CANADA	00172	EDMONTON INTL 10/23/2017 3:20PM		TORONTO PEARS 10/23/2017 8:58P		Α		
					Booking Date:		09/25/2	2017
Passengers:	JITENDRA PRA	SAD			File Locator/Ticl	ket #:		
Airline	Flight	From	Terminal	То	CI	ass	Seat	Stops
AIR CANADA	00172	EDMONTON INTL 10/23/2017 3:20PM		TORONTO PEARS 10/23/2017 8:58P		Α		
					Booking Date:		09/25/2	2017
Passengers:	JITENDRA PRA	SAD			File Locator/Ticl	ket #:	à	
Airline	Flight	From	Terminal	То	CI	ass	Seat	Stops
AIR CANADA	00169	TORONTO PEARSON 10/27/2017 2:00PM		EDMONTON INTL 10/27/2017 4:09P	М	Α		
					Booking Date:		09/25/2	2017
Passengers:	JITENDRA PRAS	SAD			File Locator/Tick	ket#:		
Airline	Flight	From	Terminal	То	CI	ass	Seat	Stops
AIR CANADA	00169	TORONTO PEARSON		EDMONTON INTL		Α		

10/27/2017 4:09PM



ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 Trip #:

Booking Date:
Client:
Agent:
Agents email:

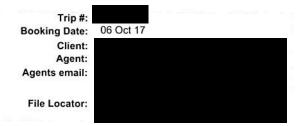
File Locator:

PASSENGERS: MR JITENDRA PRASAD

REFERENCE/ DESCRIPTI	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	27
AIR CANADA Ticket #				100.00	0.00	\$0.00	0.00	0.00	100.00	CAD
			Total:	100.00	0.00	0.00	0.00	0.00	100.00	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form o	f Payment			Amount	
		10/04/2017							100.00	CAD
							Total Pa	yment:	100.00	CAD
					В	alance Du	e CAD Cur	rency	0.00	CAD
				Total GS	ST.	0.00	Tota	al HST	\$0.00	

CORPORATE UNIT 101
REASON FOR TRAVEL HEALTHPRO

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL



MY ITINERARY

 Passengers
 Citizenship
 Required Travel Documents

 JITENDRA PRASAD
 Not Specified
 Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers:	JITENDRA PRAS	SAD			Booking Date: File Locator/Ticket #:		2017
Airline	Flight	From	Terminal	То	Class	Seat	Stops
AIR CANADA	00154	CALGARY INTL 10/23/2017 7:15PM		TORONTO PEARSON 10/24/2017 12:57AM	К		
AIR CANADA	00169	TORONTO PEARSON 10/27/2017 2:00PM		EDMONTON INTL 10/27/2017 4:09PM	Α		



ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 Trip #:

Booking Date: 20 Oct 17

Client:
Agent:
Agents email:

File Locator:

PASSENGERS: MR JITENDRA PRASAD

REFERENCE/ DESCRIPTI	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #				47.50	0.00	\$0.00	0.00	0.00	47.50 CAD
AIR CANADA Ticket #	• •			75.00	0.00	\$0.00	0.00	0.00	75.00 CAE
			Total:	122.50	0.00	0.00	0.00	0.00	122.50 CAE
PAYMENTS	Invoice #	Payment Date	Card Holder		Form of	Pavment	r 2		Amount

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
		10/20/2017			47.50 CAD
		10/20/2017			75.00 CAD
				Total Payment	: 122.50 CAD

Balance Due CAD Currency

0.00 CAD

Total GST

0.00

Total HST

\$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL CPSM MEETING



MY ITINERARY

 Passengers
 Citizenship
 Required Travel Documents

 JITENDRA PRASAD
 Not Specified
 Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: JITENDRA PRASAD

Booking Date: 10/20/2017
File Locator/Ticket #:

Airline Flight From Terminal To Class Seat Stops

AIR CANADA 08133 EDMONTON INTL CALGARY INTL V 10/23/2017 7:40AM 10/23/2017 8:37AM

Passengers: JITENDRA PRASAD

Booking Date: 10/20/2017
File Locator/Ticket #:

Airline Flight From Terminal To Class Seat Stops

 Airline
 Flight
 From
 Terminal
 To
 Class
 Seat
 Stops

 AIR CANADA
 08133
 EDMONTON INTL 10/23/2017
 CALGARY INTL 7:40AM
 V
 V
 V



ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET **EDMONTON AB** T5J 3E4

Trip #: **Booking Date:**

Client: Agent: Agents email:

20 Jul 17

File Locator:

PASSENGERS: MR JITENDRA PRASAD

REFERENCE/ DESCRIPTION		FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket #		458.00	0.00	\$0.00	69.96	0.00	527.96 CAD
AIR CANADA Ticket #		42.00	0.00	\$0.00	0.00	0.00	42.00 CAD
	Total:	500.00	0.00	0.00	69.96	0.00	569.96 CAD

PAYMENTS	Invoice #	Payment Date Card Holder	Form of Payment		Amount
		07/19/2017			569.96 CAD
			Tot	tal Payment:	569.96 CAD

Balance Due CAD Currency 0.00 CAD

Payment Due Date:

20 Jul 17

Total GST

0.00

Total HST

\$0.00

CORPORATE UNIT 101 REASON FOR TRAVEL HEALTHPRO

Claiming only \$131.96

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ... 1 888 342 3292 OUTSIDE OF TOLL FREE AREA 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 -----AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

Trip #:

Booking Date: 20 Jul 17

Client: Agent:
Agents email:

File Locator:

File Locator/Ticket #:

MY ITINERARY

Passengers Citizenship Required Travel Documents

JITENDRA PRASAD Not Specified Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: JITENDRA PRASAD

Passengers: JITENDRA PRASAD

Airline Flight From Terminal To Class/Seat Stops

AIR CANADA 00162 EDMONTON INTL TORONTO PEARSON A/

AIR CANADA 00162 EDMONTON INTL TORONTO PEARSON A/
12 Sep 17 7:10AM 12 Sep 17 12:48PM

Booking Date: 19 Jul 17

Booking Date: 19 Jul 17

Passengers: JITENDRA PRASAD File Locator/Ticket #:

Airline Flight From Terminal To Class/Seat Stops

AIR CANADA 00169 TORONTO PEARSON EDMONTON INTL A/
15 Sep 17 2:00PM 15 Sep 17 4:09PM

Passengers: JITENDRA PRASAD

Booking Date: 19 Jul 17
File Locator/Ticket #:



ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET **EDMONTON AB** T5J 3E4

Trip #: Booking Date: Client: Agent: Agents email:



PASSENGERS: MR JITENDRA PRASAD

REFERENCE/ DESCRIPTION	ON			FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL	
AIR CANADA Ticket #				200.00	0.00	\$0.00	0.00	0.00	200.00	CAD
			Total:	200.00	0.00	0.00	0.00	0.00	200.00	CAD
PAYMENTS	Invoice #	Payment Date	Card Holder		Form	n of Payment			Amount	, .
		09/11/2017							200.00	CAD
							Total Pa	ayment:	200.00	CAD
(Balance Due CAD Currency			0.00	CAE
				Total G	ST	0.00	Tota	al HST	\$0.00	

CORPORATE UNIT 101 REASON FOR TRAVEL HEALTHPRO

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL ************************ AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS 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 ----------AIR CANADA RULES------TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

Trip #:

Booking Date: 14 Sep 17

Client: Agent:
Agents email:

File Locator:

MY ITINERARY

 Passengers
 Citizenship
 Required Travel Documents

 JITENDRA PRASAD
 Not Specified
 Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers:	JITENDRA PRASAD				oking Date: e Locator/Ticket #:	09/11/2017	
Airline	Flight	From	Terminal	То	Class	Seat	Stops
AIR CANADA	00162	EDMONTON INTL 10/25/2017 7:10AM		TORONTO PEARSON 10/25/2017 12:48PM	I A		
AIR CANADA	00169	TORONTO PEARSON 10/27/2017 2:00PM		EDMONTON INTL 10/27/2017 4:09PM	Α		