

## Official Administrator and Executive Expense Report

**Name** Ronda White  
**Title** Chief Audit Executive, Internal Audit & Enterprise Risk Management  
**Location** Edmonton  
 Expenses submitted during the month of December 2014

### Travel (1)

Date	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
	P-Card	Meetings	11			102	112			
	Expense Claim	Meetings		42		35	77			
<b>Total</b>			\$ 11	\$ 42	\$ -	\$ 137	\$ 189	\$ -	\$ -	\$ -

**Total for the Month** \$ 189

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.

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

**Instructions:**

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

<b>WHITE, RONDA</b> Cardholder's Name	<b>CHIEF AUDIT EXECUTIVE</b> Cardholder's Position/Title	Billing Reporting Period:	<u>20/12/2014</u>
<b>INTERNAL AUDIT &amp; ERM</b> Cardholder's Dept	<b>FOCUS BUILDING</b> Cardholder's Site/Location	Total Statement Amount:	<u>112,40</u>
<b>RONDA.WHITE@ALBERTAHEALTHSERVICES.CA</b> Cardholder's e-mail address		Last 6 digits of the P-Card #:	

**Statement of Transactions**

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
19/11/2014	371765728	WESTJET 8360817042519, WestJet Airlines	10.50	CAD	✓ 10.50	.50	.00	R. White - WestJet east section to secure landing on Dec. 1/14 flight (Absence in Calgary to conduct ERM Director Interviews) ①
28/11/2014	372072890	MPARK00020282U, AUTOMOBILE PARKING LOTS AND GARAGES	9.00	CAD	✓ 9.00	.45	.00	R. White Parking to attend Covenant AFAC Nov. 24/14 ②
01/12/2014	373110186	EDMONTON INTERNATIONAL, AUTOMOBILE PARKING LOTS AND GARAGES	25.00	CAD	✓ 25.00	1.16	.00	R. White Parking at Edm. International Airport for travel to Calgary on Dec. 1/14 to conduct ERM Director Interviews ③
02/12/2014	373330291	ASSOCIATED CAB/ALLIED, LIMOUSINES AND TAXICABS	67.60	CAD	✓ 67.90	3.22	.00	R. White (1104 from Calgary Airport to Southport Tower Dec. 1/14 to attend meetings and conduct ERM Director Interviews ④

**Signatures**
**Cardholder Designate (If Applicable)**

By signing this statement

- I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies, Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre.

Audra Hunter Holt  
Name of Cardholder Designate

Executive Assistant  
Cardholder Designate Position/Title

  
Signature of Cardholder Designate

Dec. 18, 2014  
Date of Signature

**Cardholder**

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

WHITE, RONDA  
Name of Cardholder

CHIEF AUDIT EXECUTIVE  
Cardholder Position/Title

  
Signature of Cardholder

Dec. 18 / 2014  
Date of Signature

**Approver Designate (If Applicable)**

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Susan Best  
Name of Approver Designate

Executive Assistant  
Approver Designate Position/Title

  
Signature of Approver Designate

Dec. 23, 2014  
Date of Signature

**Approver**

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Deborah Rhodes  
Name of Approver

VP Corp Services & CFO  
Approver Position/Title

  
Signature of Approver

Dec. 30/14  
Date of Signature

**Submit approved statement with attachments to Accounts Payable:**
**Attach:**

- Original (or scanned) itemized receipts with documented business reasons including names of participants where required
- Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report)
- And where applicable:
  - Copies of pre-approvals for travel
  - Personal cheque payable to "Alberta Health Services"
  - Return, refund and/or credit receipts
  - Disputes letter
  - Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason.

**Address:**

 Alberta Health Services  
Accounts Payable  
7th Street Plaza  
10th Floor, North Tower, 10030-107 Street  
Edmonton, AB T5J 3E4

**Accounts Payable only:**

Reference #: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_



**eTicket Receipt**

**Prepared For**  
**WHITE/RONDA MS**

WESTJET RESERVATION CODE

ISSUE DATE

14Nov2014

TICKET NUMBER

ISSUING AIRLINE

WESTJET

ISSUING AGENT

WestJet/G5S

①  
 See page 2.

**Itinerary Details**

TRAVEL DATE	AIRLINE	DEPARTURE	ARRIVAL	OTHER NOTES
01Dec	WESTJET WS 104	EDMONTON INTL AB, CANADA  Time 7:45am	CALGARY INTL AB, CANADA  Time 8:43am	Class ECONOMY Seat Number 06F - (PAID) Conf: Baggage Allowance NIL Booking Status OK TO FLY Fare Basis GA14 Not Valid Before 01 DEC Not Valid After 01 DEC
01Dec	WESTJET WS 3291	CALGARY INTL AB, CANADA  Time 6:25pm	EDMONTON INTL AB, CANADA  Time 7:23pm	Class ECONOMY Seat Number 06D - (PAID) Conf: Baggage Allowance 1PC Booking Status OK TO FLY Fare Basis QA Not Valid Before 01 DEC Not Valid After 01 DEC

**Payment/Fare Details**

Form of Payment

CREDIT CARD - MASTERCARD :

Endorsement / Restrictions

NONREF - FEE FOR CHG/CXL

Fare Calculation Line

YEA WS YYC89.00WS YEA142.00CAD231.00END

Fare

CAD 231.00

**Taxes/Fees/Carrier-Imposed Charges**

**CAD 14.25 CA1 (AIR TRAVELLERS SECURITY CHARGE)**

**CAD 16.46 XG (GOODS AND SERVICES TAX (GST))**

**CAD 60.00 SQ (AIRPORT IMPROVEMENT FEE (AIF))**

**CAD 24.00 YQI (OTHER AIR TRANSPORTATION CHARGES)**

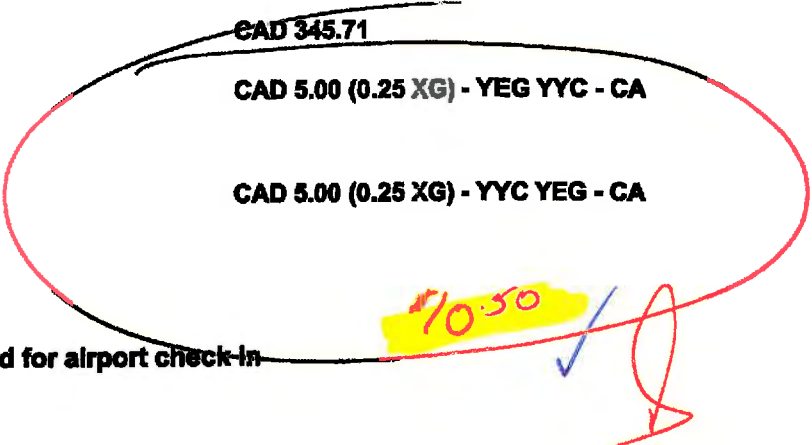
**Total Fare**

**CAD 345.71**

**Additional Fees not Included In Fare**

**CAD 5.00 (0.25 XG) - YEG YYC - CA**

**CAD 5.00 (0.25 XG) - YYC YEG - CA**



**Positive Identification required for airport check-in**

**Notice:**

**Thank you for choosing WestJet**

**QST # 1202807956TQ0001**

**GST # 866112535**

- We look forward to welcoming you on board your upcoming WestJet flight.
- Terms and conditions of carriage, baggage allowances, baggage fees and service fees may differ significantly if you are travelling on one of our airline partners; it is important to familiarize yourself with the terms and conditions of the airline operating the flight. To view the baggage allowances and fees of our code-share partners, visit our code-share baggage Info page.
- Positive identification is required at check-in; ensure the name on the reservation matches the guest's identification before departing for the airport. Make sure you have the proper identification and travel documents for each country on your itinerary as the documents you use on your departure may not be sufficient upon your return. The law is the law, and we'd hate it if you were unable to board your flight.
- Please check in a minimum of 90 minutes prior to scheduled departure for flights within Canada, and 2 hours prior for international flights and flights to the United States.
- Guests are required to be through security and at their departure gate 30 minutes prior to the scheduled departure of their flight.
- Should you miss the first flight on your booking, or fail to show up for another flight on a multi-segment booking, you'll lose your seat on remaining flights and the fare, fees, charges and taxes will not be refunded.
- For more information on your flight with WestJet visit travel info or go directly to the most common searches:
  - Fares, taxes and fees (Change/cancel guidelines, baggage fees, service fees and other taxes and fees)

- Baggage allowances (Carry-on, checked, sporting goods , restricted items)
  - ID requirements (For adults, children and infants on domestic, transborder and international flights)
  - Seat selection (How it works, changing your seat and more)
  - Inflight services (Buy on board, up! magazine and more)
  - Inflight entertainment (Channel line-up, and pay-per-view movies and TV programs)
- We appreciate hearing about your experience with us. If you would like to provide us with feedback, please see our contact us page and select the give feedback tab. You may also send us a letter at: WestJet Campus, Attention Guest Relations, 22 Aerial Place N.E. Calgary, Alberta Canada T2E 3J1.



Important Legal Notices



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Covenant AFIC

RECEIPT  
IMPARK LOT 262  
NO IN AND OUT PRIVILEGES

License Plate Number

PPT836

Expiration Date/Time

01:01 PM  
NOV 24, 2014

Purchase Date/Time: 08:31am Nov 24, 2014

Total Parkings: \$8.67

Total gst: \$0.43

Total Due: \$9.00

Total Paid: \$9.00

Ticket #: 07640981

SN #: 600013361286

Setting: Lot 262

Mach Name: Meter 2

Rate: \$9 - 4.5 Hours  
Payment Type: Card

MasterCard

Auth #: 103255

GST #887315636RT0001  
IMPARK LOT 262

RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton  
Tax Code CA5%

POF 1st Fl 01/12/14 19:25  
Receipt 057222

Short-term parking tkt

DL - No. 016756

01/12/14 06:39

02/12/14 06:38

Period 1d0h0'

(Tax) \$25.00

Total \$25.00

Payment Received  
MC \$25.00

Type: Swiped

Sub Total \$23.81  
Tax 5% \$1.19

Parking airport

ASSOCIATED CAB ALTA LTD  
387 - 41 AVE NE (403) 299-1111  
INSIST ON THE PROFESSIONALS

DATE: 2014/12/01  
PICK-UP TIME: 08:53  
DROP-OFF TIME: 09:32  
TRIP ID: B  
LOCATION: 073000-45024103707  
CAR NUMBER: 1216  
DRIVER: 721845  
CARD TYPE: HC  
CARD:  
EXPIRY: \*\*/\*\*  
AUTH: 113221

FARE (\$): 59.98  
EXTRA (\$): 0.00  
SUBTTL (\$): 59.98

TIP (\$): 8.00

TOTAL (\$): 67.90

SIGNATURE: \_\_\_\_\_

FOR ONLINE TAXI BOOKINGS VISIT  
OUR WEBSITE WWW.ASSOCIATEDCAB.CA

CUSTOMER'S COPY

Calgary Airport to  
SPPT

## TRAVEL, HOSPITALITY & WORKING SESSION EXPENSE CLAIM

**SECTION A: EMPLOYEE DETAILS (for AHS Staff ONLY)**

- Enter employee # (old) and Employee # (E-People) if your payroll has migrated to the New E-People payroll system
- Indicate N/A in the Employee # (E-People) if your payroll has not migrated to the New E-People payroll system
- If you are a new employee and your payroll is E-People you will only have an Employee # (E-People)

Expense Date From: 21-Nov-14 To 18-Dec-14  
 Travel Period from: \_\_\_\_\_ To \_\_\_\_\_ (if applicable)  
 Out-of-Province Travel  No

Name: WHITE, Ronda Position (Title): Chief Audit Executive  
 Location: Edmonton Dept: Internal Audit DOFA Level: \_\_\_\_\_ (if applicable) Union: \_\_\_\_\_ Business Phone #: \_\_\_\_\_ Ext: \_\_\_\_\_  
 Employee # (E-People): \_\_\_\_\_

**SECTION E: FINANCE CODING & TOTAL CLAIM**

CAPITAL PROJECT CODING ONLY → Project Number \_\_\_\_\_ Expenditure Organization \_\_\_\_\_ Project Task Number \_\_\_\_\_ Expenditure Type \_\_\_\_\_

Total - Section B: Travel - Pg 2					Total - Section C&D: Other & Foreign Expenses - Pg 3					TOTAL REIMBURSEMENT	
Pg	Bal Unit	Location	Functional Centre (FC)	Total Expense	Bal Unit	Location	Functional Centre (FC)	Secondary/Expense	Total Expense		
2A	101	0006	71110700000	\$76.90						Total Section B	\$76.90
2B										Total Section C&D	
2C										Less Cash Advance	
2D										<b>TOTAL CLAIM</b>	<b>\$76.90</b>
				<b>\$76.90</b>	**User to enter Coding & \$ Amounts						

NOTE: This section auto fills from page 2A, 2B, 2C & 2D

NOTE: These fields do not automatically fill for Section C & D

**SECTION F: AUTHORIZATION**

I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.  
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services 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 above.

Travel, Hospitality and Working Session Expenses Policy - Document# 1122

I, by signing this form, attest that I am compliant to all the above statements  
 Employee Signature: R White Date: Dec 18/14

I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.  
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services 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 above.

Approved claim form with receipts should be sent by the approver directly to Accounts Payable for processing.

Approved By (PRINT ONLY): Deborah Rhodes DOFA Level \_\_\_\_\_ Position # \_\_\_\_\_ Phone # \_\_\_\_\_ Ext \_\_\_\_\_  
 Signature: Deborah Rhodes Title: VP Corporate Services & CFO Date: Dec 22/14

I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.  
 I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services 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 above.

Approved By (PRINT ONLY): \_\_\_\_\_ DOFA Level \_\_\_\_\_ Position # \_\_\_\_\_ Phone # \_\_\_\_\_ Ext \_\_\_\_\_  
 Signature: \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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.



**EXPENSE CLAIM DETAILS**

Enter Finance Coding **101 0006 71110700000**

Emp # (E-People) \_\_\_\_\_

Page **2A**

*If expenses incurred are for multiple FC's please use pages 2B,2C,2D (after pg3) as there should be one FC per page OR if more lines are required for the same FC use these additional pages. Enter total \$ amount on slip, DO NOT separate any taxes (eg. GST). Secondary/Expense codes are not required in this section as they are pre-determined by the system.*

**SECTION B: TRAVEL EXPENSES**

**NOTE:** If expenses do not fall into these categories such as Hospitality, Working Session, Relocation, Continuing Education, Business Insurance go to SECTION C

Select from dropdown (column Prov) where expenses were incurred (Out of N.America = Inter)  
Ensure separate lines are used for claim items that differ in Province, US and Out of North America.

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 on this page

Date dd-mm-yy	Business Reason for Travel - Detailed Description Required (include destination, who attended-(if meal), why travel was necessary and detailed explanation of reason) A description of just "Meeting" will be returned for clarification	Prov, US, or Out of N.Amer where expenses incurred?	What is travel related to?	Cost Effective Method Used? Y/N	Meal (Allowance OR Receipt)				If amount being claimed is above the policy limit stated in Appendix "A" rationale is required			Rental Car/ Bus/LRT/ Parking / Fuel	Per Diem Allowance	Mileage (km)	
					Meal Allowance		Meal with Receipt		Airfare	Hotel	Taxi				
					Meal Type with value	Allowance	Meal Type	with receipt							
1-Dec-14	Mileage - Travel from Home to Edmonton International Airport (Travel to Calgary Dec. 1/14 to attend IAS/ERM meetings and to conduct ERM Director Interviews)		Meeting	Yes										35.00	✓
1-Dec-14	Meal Allowance while in Calgary to meet with IAS/ERM team and to conduct ERM Director Interviews		Meeting	Yes	A-\$41.55	\$41.55	✓								
1-Dec-14	Mileage - Travel to International Airport to Home (Travel to Calgary Dec. 1/14 to attend IAS/ERM meetings and to conduct ERM Director Interviews)		Meeting	Yes										35.00	✓
<b>SUBTOTALS</b>						\$41.55								Total Kms 70.00	

**MILEAGE - Business Kilometre Rate for Personally-Owned Vehicle**  
 → details of travel location to & from must be included above under the purpose of travel column  
 Rates applicable \$0.505 per km for under 5,000km/yr or \$0.47 per km for over 5,000km/yr or per Union Agreement

Note: Total will auto fill into pg 1, Section E, if form completed electronically - Additional pg 2's can be found after Page 3

Enter \$0.505 km, \$0.47 km OR rate per Union Agreement (see Mileage details to the left)	\$0.505
Mileage \$	\$35.35
Travel \$ Subtotal	\$41.55
Auto fills on page 1 - TOTAL TRAVEL \$	\$78.90

**Rationale is Required for expenses that are not Cost Effective**  
 (Any analysis supporting the method to assess cost effectiveness should be attached to the claim form)



**Directions to Edmonton International Airport,  
Edmonton, AB**  
35.0 km – about 29 mins



**St NW & 100 Ave NW, Edmonton, AB**

- 
- |   |                             |
|---|-----------------------------|
| 1. Head east on <b>100 Ave NW</b> toward <b>155 St NW</b><br>About 1 min  | go 800 m<br>total 800 m     |
| 2. Turn right onto <b>149 St NW</b><br>About 4 mins   | go 2.8 km<br>total 3.6 km   |
| 3. Keep left at the fork, follow signs for <b>Whitemud Drive E</b> and merge onto <b>AB-2 S</b><br>About 7 mins                               | go 8.9 km<br>total 12.4 km  |
| 4. Take the <b>AB-2 S</b> exit toward <b>Red Deer/Calgary Trail/Gateway Boulevard/99 Street</b>   | go 300 m<br>total 12.8 km   |
| 5. Continue onto <b>Whitemud Dr NW/AB-2</b>   | go 71 m<br>total 12.8 km    |
| 6. Turn right onto <b>Calgary Trail NW/AB-2 S</b> (signs for <b>Alberta 2/Red Deer</b> )<br>Continue to follow <b>AB-2 S</b><br>About 13 mins | go 19.1 km<br>total 32.0 km |
| 7. Take exit <b>522</b> toward <b>Edmonton/Nisku/Business Park/10th Avenue</b>  | go 650 m<br>total 32.6 km   |
| 8. Keep right at the fork, follow signs for <b>Edmonton</b>   | go 450 m<br>total 33.1 km   |
| 9. Slight right onto <b>Airport Rd</b><br>About 2 mins  | go 1.6 km<br>total 34.7 km  |
| 10. Continue straight   | go 29 m<br>total 34.7 km    |
| 11. Continue straight<br>Destination will be on the right<br>About 1 min  | go 300 m<br>total 35.0 km   |



**Edmonton International Airport, Edmonton, AB**

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Map data ©2014 Google

Directions weren't right? Please find your route on [maps.google.ca](https://maps.google.ca) and click "Report a problem" at the bottom left.