

# **Acute Care Alberta Board and Executive Expense Report**

Name: Holly Mackin
Title: Executive Lead
Location: Edmonton

Expenses posted during the month of July 2025

					Travel (1)					
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodatio	Other n Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
	P-Card	Meetings					_			
Jul-25	Expense Claim					62	2 62			
Jul-25	•	Meetings			178					
		Total by category	\$ -	\$ -	- \$ 178	3 \$ 214	1 \$ 392	<u> </u>	\$ -	\$ -

Total posted for

the Month \$ 392

Maximum daily single meal expense posted in the month \$ - Maximum daily base hotel rate posted in the month \$ 167 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 membership dues, small item technology purchases, books, etc.

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

# **ACA Executive Expenses Report Expenses**

Claimant Name	Claimant Title	Claimant	Expense Claim Total								
		Location									
MACKIN, HOLLY	Executive Lead	Edmonton	\$ 61.65								
Expense Date	Business reason	Expense	Expense Type	Amount	From	То	Justification	# of	# of	Attendee	Trip
		Location			Location	Location		days	Attendees	Name(s)	Distance
5/29/2025	Leadership Retreat in Calgary	AB - Other	Fuel-Travel and Car Rental	\$ 16.37				1			
		Zones									
5/30/2025	Leadership Retreat in Calgary	AB - Other	Fuel-Travel and Car Rental	\$ 28.56			Receipt not provided,	1			
		Zones					confirmed a valid business				
							expense and not previously				
							claimed				
5/31/2025	Leadership Retreat in Calgary	AB - Other	Fuel-Travel and Car Rental	\$ 16.72				1			
		Zones									
Approver(s) for the claim	Approval Status	Approval Date				•					•

DIAMOND, DAVID S

Approve

16-Jul-25

TRANSACTION RECORD

ESSO 7-ELEVEN 37833

45 GASOLINE ALLEY E RED DEER COU AB T4E 1B1

ESSO EXPRESS PAY

2025-05-29 08:41:02

TRANS #: STATION#:

GST #: R119335453

PUMP 2 EREG \$ 16.37 11.456L AT \$1.429/L

GST INCLUDED \$ 0.78 TOTAL : CAD\$ 16.37

TYPE: PURCHASE

UISA

\*\*\*\*\*

REFERENCE #:

INVOICE NO:

UISA CREDIT

**UERIFIED BY PIN** 

01/027 APPROVED THANK YOU

TRANSACTION RECORD

PETRO-CANADA 188 CROWFOOT WAY N CALGARY ALBERTA T3G4C8 (483)-288-9853

GST #: 855530911

PAYPOINT: TERMINAL: INUDICE NO:

2025-05-31 08:54:43

PUMP 6 REGULAR 13.279L AT \$1.259/L

Fuel sales \$ 16.72

GST INCLUDED \$0.80

TOTAL \$16.72

UISA \$16.72

Type: PURCHASE

UISA

REFERENCE #:

INVOICE NO:

AUTH #:

UISA CREDIT

....

UERIFIED BY PIN

G1/G27 APPROVED THANK YOU



# **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 ACA 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:**

ACA may have established accounts with certain vendors used to book travel and other expenses that are billed directly to ACA.

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. ACA 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 ACA 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 ACA 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.
- Refer to Quick Reference Guide for: <u>Providing a Standard Business Reason(s)</u>
- A personal cheque must be attached to cover expenses deemed ineligible.

Indicate whether you have	e expenses to report in this section for	this reporting period:	YES	
Name :	Holly Mackin	Reporting Period for the Month of	Jul-25	

Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
30-May-2025	Direct Billing	Hotel	Stayed in Edmonton for the leadership retreat on May 29th, checked out on the 30th.	Matrix Hotel	\$177.84
20-Jun-2025	Direct Billing	Car Rental	Drove to Edmonton for work related leadership retreat that happened May 29th & 30th, 2025	Enterprise Rent-A-Car	\$152.28
	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	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in the Month					



Alberta Health Services
Accounts Payable
P.O. Box 1600
Edmonton AB T5K 1G8

Canada

Company Name : Group Name :

Guest Name : Mackin, Holly

COPY OF INVOICE

Room No. : 05-29-25
Departure : 05-30-25
Page No. : 1 of 1

Folio No.
Invoice No.
AR No.
Conf. No.
Cashier No.
Custom Ref.



Date	Description		Charges	Credits
05-29-25	Package Revenue		167.00	
05-29-25	Destination Marketing Fee		4.57	
05-29-25	Tourism Levy		6.27	
		Total Charges	177.84	
		Total Credits		0.00
		Balance		177.84

I agree that I am personally liable for payment of this account, and if this person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association.



Federal GST#: 889365821

## Consolidated Inv. # Rental Agreement # Bill Ref # Invoice Date

20-Jun-2025

### Bill To Information

ALBERTA HEALTH SERVICES PO BOX 1600 STN MAIN EDMONTON, AB - T5J 2N9 CANADA

# Rental Information

Reservation Number
Driver: MACKIN, HOLLY

Pickup Date/Time: 05/28/2025 17:53 Return Date/Time: 05/31/2025 09:01

Miles/kms: 635 Car Class: CFAR

Requested Class: ICAR

Vehicle InformationYr/Make/ModelUnit #License NoBeg/End/Distance2025/NISN/KICP12443/13078/635

#### Rental Branch

CALGARY NORTHWEST 155 CROWFOOT WAY NW CALGARY, AB - T3G 3P7

#### Return Branch

CALGARY NORTHWEST 155 CROWFOOT WAY NW CALGARY, AB - T3G 3P7

Charge Detail				
Description	Qty	Period	Rate	Amount
TIME & DISTANCE	3	DAY	50.00	150.00
			Sub Total	150.00
VEHICLE LICENSE FEE RECOVERY	3	DAY	0.76	2.28
	Total Charge	s (CAD)	•	152.28

## Additional Information

Remit Payment in CAD to	For Billing Inquiries	Payment Terms
ENTERPRISE RENT A CAR CANADA COMPANY P.O. BOX 9716	Tel#: +1 8773121084	Payment Due Within 30 days of invoice date.
STATION A	AskARCarada@em.com	
TORONTO ON M5W 1R6	The state of the s	Late payments are subject to finance charge.
Email Remit To: CanadianAR@em.com		