

AHS Board and Executive Expense Report

Name: Sandy Edmonstone
Title: AHS Board Member
Location: Calgary

Expenses approved during the month of January 2024

			Travel (1)					Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel			
	P-Card	Meetings					-			
Jan-24	Expense Claim	Meetings		216		1,159	1,376			
Jan-24	Direct Bill	Meetings	735		385		1,120			
Total			\$ 735	\$ 216	\$ 385	\$ 1,159	\$ 2,495	\$ -	\$ -	\$ -

Total for the Month \$ 2,495

Maximum daily single meal expense claimed in the month \$ 27

Maximum daily base hotel rate claimed in the month \$ 359

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 - AP Processing - Internal Use Only	
Voucher #	
Naming Convention:	
T4A/NR Applicable? - If yes, indicate line & amt	

BOARD MEMBER EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION					
Name:	Sandy Edmonstone			Expense Period Month:	Nov-23
Address:	[REDACTED]		City:	[REDACTED]	
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Meetings in Edmonton, attended Premier and Minister of Health's Press Conference announcing the refocusing (November 7-8, 2023); Board Meeting (November 13-14, 2023) and November 22, 2023 Board Meeting.				

SECTION 2: FINANCE CODING & TOTAL CLAIM					
Description	Corp/BU/Org	Location (if applicable)	Functional Centre/Primary	Expense/ Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	\$145.45
Travel Exp (B+C+E)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	\$920.79
Other (D)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	\$40.30
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$1,106.54

SECTION 3: AUTHORIZATION - Note: Electronic or digital signatures are not accepted			
I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.			
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board 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 below.			
Claimant (Print Name)	Signature: I, by signing this form, attest that I am compliant to all the above statements	Date	Phone#
Sandy Edmonstone	[REDACTED]	Dec 14, 2023	

I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.	
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board 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 below.	
Approved by (Print Name)	Position Title/Program Group
Dr. Lyle Oberg	Executive Chair
Signature: I, by signing this form, attest that I am compliant with all the above statements	Date
[REDACTED]	December 28, 2023

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.

[REDACTED] December 14, 2023
Michael Lam, Acting VP Corporate Services & CFO Date

For payment please submit to:

14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: [REDACTED]

Carry forward from Section 1

Name:	Sandy Edmonstone	Expense Period Month:	Nov-23
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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 below

Rationale is Required for expenses that are not Cost Effective: (supporting analysis and documentation must be attached to this form)

SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

The Board Members follow the [Government of Alberta \(GOA\) Travel, Meal and Hospitality Expenses Policy](#)
 Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates ([Appendix C for USA](#), [Appendix D for International](#)).

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt)(A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)
			Allowance Within Canada		With Receipt or Allowance Outside Canada					
			Meal Type	Allowance	Meal Type	Amount				
7-Nov-2023	Mileage from residence to Edmonton to attend Premier and Minister of Health's Press Conference; return on Nov 8, 2023.	Yes	BL-\$20.80	\$20.80					602	
7-Nov-2023	Accommodation expense, no receipt.	Yes						\$20.15		
8-Nov-2023	Breakfast and lunch per diems.	Yes	BL-\$20.80	\$20.80						
13-Nov-2023	Mileage from residence to Edmonton to attend Board Meeting and return on Nov 14, 2023.	Yes	BLD-\$41.55	\$41.55					602	
13-Nov-2023	Accommodation expense, no receipt.	Yes						\$20.15		
14-Nov-2023	Parking to attend Board Meeting at SSP.						\$4.38			
14-Nov-2023	Daily per diems.	Yes	BLD-\$41.55	\$41.55						
22-Nov-2023	Mileage from residence to Edmonton and return to attend Board Meeting.	Yes							602	
22-Nov-2023	Parking to attend Board Meeting at SSP.	Yes					\$4.38			
22-Nov-2023	Dinner per diem.	Yes	D-\$20.75	\$20.75						
Total: (amount auto fills to page 1)				\$145.45		\$0.00	\$0.00	\$8.76	\$40.30	1,806.00

BOARD MEMBER Mileage Rate	0.505	Total Mileage	\$ 912.03
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AHS - AP Processing - Internal Use Only	
Voucher #	
Naming Convention:	
T4A/NR Applicable? - If yes, indicate line & amt	

BOARD MEMBER EXPENSE CLAIM FORM

SECTION 1: PAYEE INFORMATION					
Name:	Sandy Edmonstone			Expense Period Month:	Dec-23
Address:	[REDACTED]		City:	[REDACTED]	
Province:	[REDACTED]	Postal Code:	[REDACTED]	Country:	Canada
Reason for Expense	Attended Board Meeting and Board Orientation in Edmonton on December 11, 2023.				

SECTION 2: FINANCE CODING & TOTAL CLAIM					
Description	Corp/BU/Org	Location (If applicable)	Functional Centre/Primary	Expense/Secondary Acct	Total (Note: This column will auto fill)
Meals (A)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	\$71.00
Travel Exp (B+C+E)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	\$198.11
Other (D)	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	\$0.00
TOTAL AMOUNT PAYABLE BY ACCOUNTS PAYABLE					\$269.11

SECTION 3: AUTHORIZATION - Note: Electronic or digital signatures are not accepted			
I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.			
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board 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 below.			
Claimant (Print Name)	Signature: I, by signing this form, attest that I am compliant to all the above statements	Date	Phone#
Sandy Edmonstone	[REDACTED]	Dec 21, 2023	

I attest that I have read and understand the Government of Alberta's Travel, Meal and Hospitality Expenses Policy, and confirm expenses being claimed are in compliance with such policy to the best of my understanding and belief.	
I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services Board 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 below.	
Approved by (Print Name)	Position Title/Program Group
Dr. Lyle Oberg	Executive Chair
Signature: I, by signing this form, attest that I am compliant with all the above statements	Date
[REDACTED]	January 08, 2024

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.

[REDACTED] January 02, 2024
 Michael Lam, Acting VP Corporate Services & CFO Date

For payment please submit to:

14th Floor, North Tower, Seventh Street Plaza, 10030 - 107 St, Edmonton AB T5J 3E4, Attention: XXXXXXXXXX

Carry forward from Section 1

Name:	Sandy Edmonstone	Expense Period Month:	Dec-23
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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 below

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SECTION 4A: BOARD MEMBER - TRAVEL EXPENSE CLAIM

The Board Members follow the [Government of Alberta \(GOA\) Travel, Medical and Hospitality Expenses Policy](#)

Note: For meal allowances outside Canada, the GOA policy redirects to the National Joint Council (NJC) travel directive for rates ([Appendix C for USA](#), [Appendix D for International](#)).

Date	Description: (include purpose of trip, mode of travel, starting point, details of expenditure)	Cost Effective method used?	Meal (Allowance OR Receipt)(A)				Accommodation (B)	Transportation (Flight, Car Rental, Fuel, Parking, Taxi) (C)	Other (Itemize) (D)	Mileage km (E)
			Allowance Within Canada		With Receipt or Allowance Outside Canada					
			Meal Type	Allowance	Meal Type	Amount				
10-Dec-2023	Taxi from residence to YYC. To travel to Edmonton for Board Meeting and Orientation.	Yes					\$27.88			
10-Dec-2023	Lunch per diem.	Yes	L-\$17.00	\$17.00						
10-Dec-2023	Taxi from YEG to Fairmont Hotel.	Yes					\$38.32			
10-Dec-2023	Dinner per diem.	Yes	D-\$27.00	\$27.00						
11-Dec-2023	Taxi from hotel to SSP.	Yes					\$8.17			
11-Dec-2023	Taxi from SSP to YEG.	Yes					\$51.74			
11-Dec-2023	Dinner per diem.	Yes	D-\$27.00	\$27.00						
11-Dec-2023	Taxi fro YYC to residence.	Yes					\$72.00			



Total CA\$27.88
December 10, 2023

Thanks for tipping, Greatest

Here's your updated Sunday
morning ride receipt.



Total **CA\$27.88**

Trip fare	CA\$26.25
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Subtotal	CA\$26.25
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Booking Fee <input type="checkbox"/>	CA\$3.00
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Airport Recovery Surcharge	CA\$4.00
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TNC fee recovery surcharge	CA\$0.45
----------------------------	----------

Tips	CA\$2.60
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Promotion	-CA\$10.11
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GST	CA\$1.69
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Payments



Sandy Canada ● [Redacted]
12/10/23 12:11 PM

CA\$27.88

[Visit the trip page](#) for more information, including invoices (where available)

[Switch Payment Method](#)

[Download PDF](#)

You rode with [Redacted]

4.97 Rating

Has passed a multi-step safety screen

TNDL License Number:

Please call 3-1-1 with any Compliments/Concerns

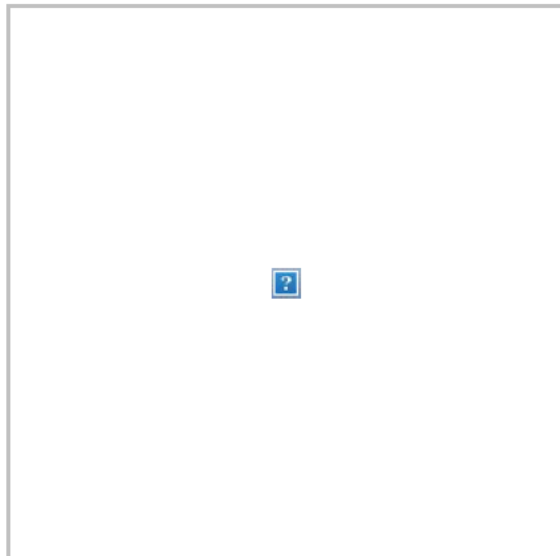
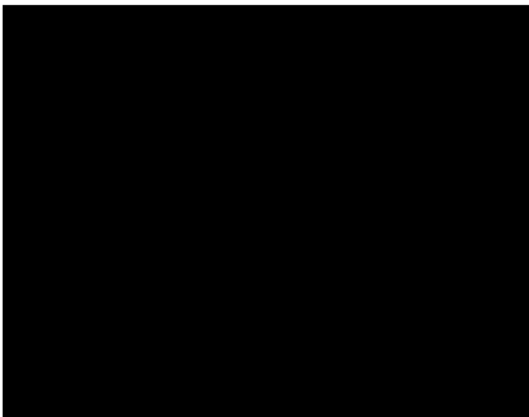


Every rideshare trip in Calgary is insured for a covered auto accident by Economical Insurance.

[Learn more](#)

UberX

21.18 kilometers | 23 min





Total CA\$38.32
December 10, 2023

Thanks for tipping, Greatest

Here's your updated Sunday
afternoon ride receipt.



Total **CA\$38.32**

Trip fare CA\$38.27

Subtotal CA\$38.27

Booking Fee CA\$2.00

Airport drop-off fee / Airport pick-up fee CA\$3.25

Tips CA\$3.50

Promotion **-CA\$10.88**

GST CA\$2.18

Payments



Sandy Canada ●●● [REDACTED]
12/11/23 12:38 AM

CA\$34.82



Sandy Canada ● [Redacted]
12/11/23 6:32 AM

CA\$3.50

[Visit the trip page](#) for more information, including invoices (where available)

[Switch Payment Method](#)

[Download PDF](#)

You rode with [Redacted]

4.99 Rating

Has passed a multi-step safety screen

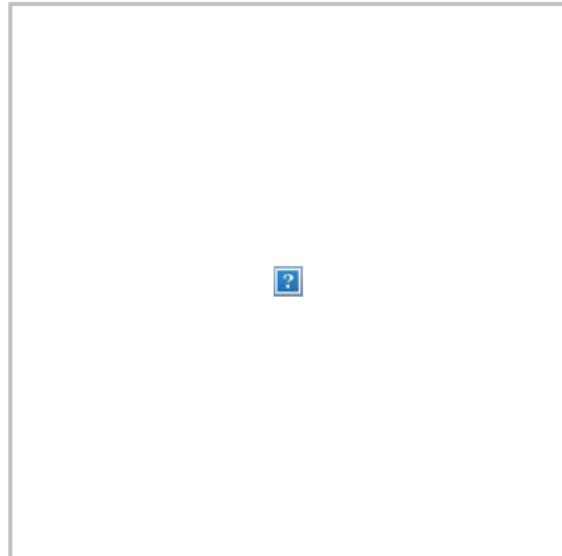
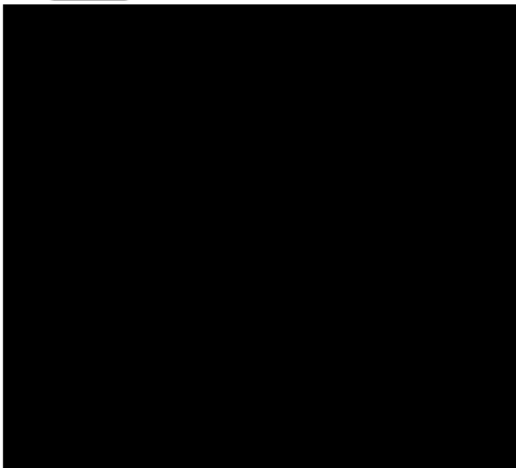


Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more](#)

UberX

30.97 kilometers | 32 min





Total CA\$51.74
December 11, 2023

Thanks for tipping, Greatest

Here's your updated Monday
afternoon ride receipt.



Total

CA\$51.74

Trip fare	CA\$39.25
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Subtotal	CA\$39.25
----------	-----------

Booking Fee <input type="checkbox"/>	CA\$2.00
--------------------------------------	----------

Airport drop-off fee / Airport pick-up fee	CA\$3.25
--	----------

Per-Trip Fee	CA\$0.30
--------------	----------

Tips	CA\$4.70
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GST	CA\$2.24
-----	----------

Payments



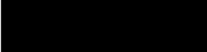
Sandy Canada ●●● [REDACTED]
12/11/23 6:28 PM

CA\$51.74

[Visit the trip page](#) for more information, including invoices (where available)

[Switch Payment Method](#)

[Download PDF](#)

You rode with 

4.99 Rating

Has passed a multi-step safety screen

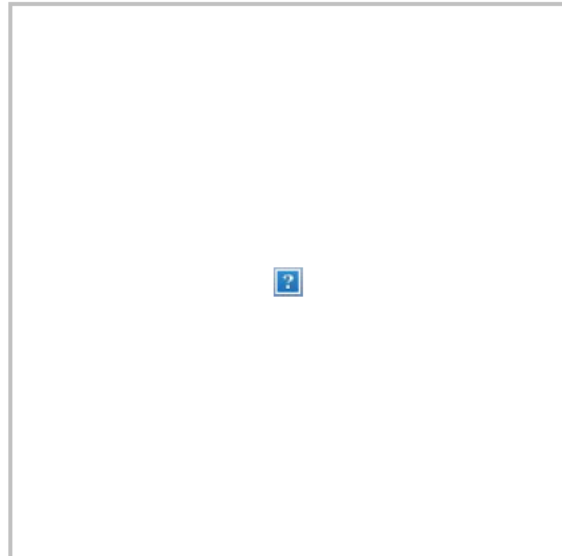
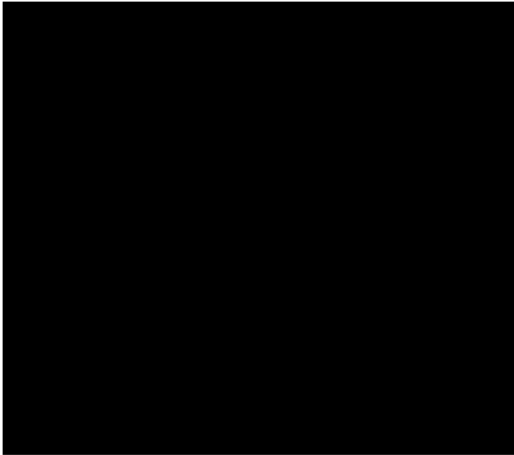


Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more](#)

UberX

31.31 kilometers | 40 min



[Report lost item](#)

[Contact support](#)

[My trips](#)

TRANSACTION RECORD
GREATER EDMONTON TAXI SERVICE
10135 31 AVE NW
EDMONTON AB

Purchase

Dec 11, 2023 06:30:14
VISA *****
Invoice # [REDACTED]
TID: [REDACTED] Entry: Tap EMV (H)
Sequence: [REDACTED]
Auth: [REDACTED] Response: [REDACTED]
Batch: [REDACTED]

Amount \$7.10
Tip \$1.07

Total \$8.17

[REDACTED] VISA CREDIT

Approved
Signature Not Required

Important: Retain this copy for your record
Cardholder copy



NEW TAXI APP
For your next on Demand
or prearranged Taxi Ride

*YYC to House
AHS*



associatedcab.ca

Driver _____ Date Dec 11/23
Car # _____ Amount \$72.00
GST Included # _____
Pick up _____ Drop off _____

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.
- Refer to Quick Reference Guide for: [Providing a Standard Business Reason\(s\)](#)
- A personal cheque must be attached to cover expenses deemed ineligible.
- Indicate whether you have expenses to report in this section for this reporting period: **YES**

Name : Sandy Edmonstone	Reporting Period for the Month of : Jan-24
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
8-Dec-2023	Direct Billing	Airline Ticket	Flight from Calgary to Edmonton to attend Board Meeting and Board Orientation session on December 11, 2023 and return	Vision Travel DT Ontario-West Inc	\$735.25
10-Dec-2023	Direct Billing	Hotel	Attend Board Meeting and Board Orientation session on December 11, 2023. No Standard rooms available at time of booking	Fairmont Hotel MacDonald	\$435.98
10-Dec-2023	Direct Billing	Hotel	Attend Board Meeting and Board Orientation session on December 11, 2023. No Standard rooms available at time of booking	Fairmont Hotel MacDonald	-\$51.42
	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					\$ 1,119.81



Vision Travel DT Ontario-West Inc
9929 - 108th Street
Edmonton AB T5K 1G8
833-692-4120

www.dt.ca
GST Reg : 723782728 RT 0001

Invoice/Itinerary

Invoice: [REDACTED]
Issued: 08 December 2023

Agency Ref.: [REDACTED]
Sales Person: [Kristen VanRoijen](#)

Customer Number: [REDACTED]
Customer Ref.: N/A

ALBERTA HEALTH SERVICES
[REDACTED]
[REDACTED]

Passenger(s): EDMONSTONE/SANDY L

Disclaimer: It is your responsibility to carefully review this itinerary immediately upon receipt and notify us if there are any discrepancies.

Important Information Related To Your Travels:

For complete Canadian Government details for returning to or travelling to Canada – click [here](#)

Please [click here](#) upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you continue to come back to this information regularly in advance of and during travel as requirements and restrictions could change.

AIR - Sunday, December 10 2023		Add To Calendar
Air Canada Flight [REDACTED]	Economy Class	
Depart	Calgary, Alberta Weather Calgary International Airport 12:35 PM Sunday, December 10 2023	Arrive Edmonton, Alberta Weather Edmonton International Airport 01:32 PM Sunday, December 10 2023
Duration:	0 hour(s) and 57 minute(s) Non-stop	
Status:	Confirmed - Air Canada Booking Reference: [REDACTED]	
Operated By:	AIR CANADA EXPRESS - JAZZ	
FF Number:	[REDACTED] - EDMONSTONE/SANDY L - please reconfirm at check-in	
Online Check In:	Available 24 hours prior - click here	
Baggage Allowance:	0 Piece(s)	
Remarks:	PLEASE CHECK IN WITH AIR CANADA EXPRESS JAZZ	

AIR - Monday, December 11 2023		Add To Calendar
Air Canada Flight [REDACTED] Economy Class		
Depart	Edmonton, Alberta Weather Edmonton International Airport 06:15 PM Monday, December 11 2023	Arrive Calgary, Alberta Weather Calgary International Airport 07:13 PM Monday, December 11 2023
Duration:	0 hour(s) and 58 minute(s) Non-stop	
Status:	Confirmed - Air Canada Booking Reference: [REDACTED]	
Operated By:	AIR CANADA EXPRESS - JAZZ	
FF Number:	[REDACTED] - EDMONSTONE/SANDY L - please reconfirm at check-in	
Online Check In:	Available 24 hours prior - click here	
Baggage Allowance:	0 Piece(s)	
Remarks:	PLEASE CHECK IN WITH AIR CANADA EXPRESS JAZZ	

Invoice Details						
Transaction	Document / Booking Number	Base Fare	Other Tax	GST/HST	QST	Total
Invoice Number:	[REDACTED]					
Air Canada	[REDACTED]	622.00	113.25	0.00	0.00	735.25
					Billed to: [REDACTED]	
Totals:		622.00	113.25	0.00	0.00	735.25
					Total Credit Card Billing:	735.25
					Balance Due:	0.00

Fairmont

HOTEL MACDONALD

10065 100 Street NW
 Edmonton, AB, T5J 0N6
 Tel: 780-424-5181
 Fax: 780-429-6481
 G.S.T. Registration # 846543619

Alberta Health Services
 P.O.Box 1600
 Edmonton AB T5J 2N9
 Canada

Room
 Folio #
 Cashier #
 Reference #
 A/R #:
 Invoice #



Guest Name : Sandy Edmonstone
 Group Name :

Arrival : 12-10-23
 Departure : 12-11-23
 Page # : 1 of 1

Date	Description	Additional Information	Charges	Credits
12-10-23	Package Charge		407.00	
12-10-23	Room - Destination Marketing Fee		12.21	
12-10-23	Room - GST		20.96	
12-10-23	Room - AB Tourism Levy		16.77	

GST Summary		Total Charges	456.94	
Room	20.96	Total Credits		0.00
F&B	0.00			
Other	0.00			
Total	20.96	Balance		456.94

GST short paid,
 total invoice paid=
 \$435.98

Thank you for choosing Fairmont Hotel Macdonald
 To provide feedback about your stay, please contact [Redacted]
 We also invite you to share memories of your experience on our community forum - visit fairmontmoments.com

For information or reservations, visit us at
www.fairmont.com or call Fairmont Hotels & Resorts
 from: United States or Canada 1 800 441 1414

Pour information et réservations visitez notre web
 au www.fairmont.com ou téléphoner au Hôtels
 Fairmont de: États-Unis ou Canada 1 800 441
 1414

I agree that my liability for this bill is not waived, and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of or the full amount of these charges. Overdue balance subject to a surcharge at the rate of 1.5% per month after one month. (18.00% per annum.) I have accepted delivery of The Globe and Mail. Had I refused, I would have been eligible for a \$1.00 (Mon-Fri) and \$2.00 (Sat.) credit to my account. (At participating hotels.)

Je me porte personnellement responsable du règlement total de cette note au cas où la compagnie, l'association ou son représentant désigné en refuserait le paiement. Les comptes en souffrance sont sujets à un intérêt de 1,5% par mois après un mois. (18,00% par année) J'ai accepté la livraison du journal The Globe and Mail. Si j'avais refusé, j'aurais pu obtenir un crédit à mon compte de 1.00\$ par jour (du lundi au vendredi) et de 2.00\$ le samedi. (Dans les hôtels participants.)

Thank you for choosing to stay at Fairmont Hotel Macdonald

Fairmont

HOTEL MACDONALD

10065 100 Street NW
 Edmonton, AB, T5J 0N6
 Tel: 780-424-5181
 Fax: 780-429-6481
 G.S.T. Registration # 846543619

Alberta Health Services
 P.O.Box 1600
 Edmonton AB T5J 2N9
 Canada

Room
 Folio #
 Cashier #
 Reference #
 A/R #:
 Invoice #



Guest Name : Sandy Edmonstone
 Group Name :

Arrival : 12-10-23
 Departure : 12-11-23
 Page # : 1 of 1

Date	Description	Additional Information	Charges	Credits
12-11-23	Room Adjustment	Adjusting rate to \$359+tax	-48.00	
12-11-23	Room - Destination Marketing Fee		-1.44	
12-11-23	Room - GST		-2.47	
12-11-23	Room - AB Tourism Levy		-1.98	

GST Summary		Total Charges	-53.89	
Room	-2.47	Total Credits		0.00
F&B	0.00			
Other	0.00			
Total	-2.47	Balance		-53.89

GST not included,
 adjustment=
 \$51.42

Thank you for choosing Fairmont Hotel Macdonald
 To provide feedback about your stay, please contact [Redacted]
 We also invite you to share memories of your experience on our community forum - visit fairmontmoments.com

For information or reservations, visit us at
www.fairmont.com or call Fairmont Hotels & Resorts
 from: United States or Canada 1 800 441 1414

Pour information et réservations visitez notre web
 au www.fairmont.com ou téléphoner au Hôtels
 Fairmont de: États-Unis ou Canada 1 800 441
 1414

I agree that my liability for this bill is not waived, and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of or the full amount of these charges. Overdue balance subject to a surcharge at the rate of 1.5% per month after one month. (18.00% per annum.) I have accepted delivery of The Globe and Mail. Had I refused, I would have been eligible for a \$1.00 (Mon-Fri) and \$2.00 (Sat.) credit to my account. (At participating hotels.)

Je me porte personnellement responsable du règlement total de cette note au cas où la compagnie, l'association ou son représentant désigné en refuserait le paiement. Les comptes en souffrance sont sujets à un intérêt de 1,5% par mois après un mois. (18,00% par année) J'ai accepté la livraison du journal The Globe and Mail. Si j'avais refusé, j'aurais pu obtenir un crédit à mon compte de 1.00\$ par jour (du lundi au vendredi) et de 2.00\$ le samedi. (Dans les hôtels participants.)

Thank you for choosing to stay at Fairmont Hotel Macdonald