

## President & Chief Executive Officer Expense Reporting Template

Period: April 1, 2025 - May 22, 2025				
CEO Name: Dr. Lynn Stevenson Health Authority: Fraser Health				
Category (all conference related costs identified in separate category below):	Amount Reimbursed: (Rounded to Nearest \$)	Date:	Purpose:	Origin/Destination/Location:
Accommodation (list separately, insert lines as needed) <sup>1</sup>				
Air, Ferry, Other Travel (list separately, insert lines as needed) <sup>1,3</sup>				
Conferences (List separately and list all expenses if applicable, insert lines as needed) <sup>1</sup>				
Other Expenses (list separately, insert lines as needed) <sup>1</sup>				
Other Amounts Recovered (list separately, insert lines as needed) <sup>2</sup>				
Mileage, Parking, and Tolls (total year to date)				
Mileage	\$0			
Parking	\$0			
Tolls	\$0			
Taxis/Public Transit	\$0			
Meals (total year to date)	\$0			
<b>Total</b>	<b>\$0</b>			

**Notes:**

- 1 - Identify date and duration of stay, purpose, city and gross cost and/or amount reimbursed, as appropriate.
- 2 - Identify any expense items reimbursed by any organization external to the reporting health authority, identify date, duration of stay, purpose, etc. for each reimbursement.
- 3 - Includes car rentals and ferry reservation fees.
- 4 - Quarterly reporting end dates for fiscal 2025/26 are: Q1, May 22nd; Q2, Aug 14th; Q3, Nov 6th; and Q4, March 31st (Post Audit). HAs to post reports by 4 weeks of end date, except Q4 to be posted June 29th.
- 5 - Vehicle/transportation allowance excluded from this summary as it is reported in health authority Executive Compensation Disclosure reporting requirements.

President & Chief Executive Officer Expense Reporting Template

Period: April 1, 2025 - May 22, 2025				
CEO Name: Dr. Victoria Lee Health Authority: Fraser Health				
Category (all conference related costs identified in separate category below):	Amount Reimbursed: (Rounded to Nearest \$)	Date:	Purpose:	Origin/Destination/Location:
Accommodation (list separately, insert lines as needed) <sup>1</sup>				
Air, Ferry, Other Travel (list separately, insert lines as needed) <sup>1,3</sup>				
Conferences (List separately and list all expenses if applicable, insert lines as needed) <sup>1</sup>				
Other Expenses (list separately, insert lines as needed) <sup>1</sup>	\$1,080	4/24/2025	Royal College of Physicians and Surgeons of Canada (2025/2026 Membership fee)	
Other Amounts Recovered (list separately, insert lines as needed) <sup>2</sup>				
Mileage, Parking, and Tolls (total year to date)				
Mileage	\$0			
Parking	\$0			
Tolls	\$0			
Taxis/Public Transit	\$0			
Meals (total year to date)	\$0			
Total	\$1,080			

Notes:

1 - Identify date and duration of stay, purpose, city and gross cost and/or amount reimbursed, as appropriate.

2 - Identify any expense items reimbursed by any organization external to the reporting health authority, identify date, duration of stay, purpose, etc. for each reimbursement.

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