



ANNUAL REPORT

2025-26

eHealth
Saskatchewan 



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Letter of Transmittal



Norman O'Neill

CHAIR, BOARD OF DIRECTORS

Regina, Saskatchewan

The Honourable Jeremy Cockrill
Minister of Health

Dear Minister Cockrill,

It's my honour to submit eHealth Saskatchewan's annual report for the fiscal year ending March 31, 2026.

This document outlines eHealth's business activities and includes audited financial statements for the 2025-26 fiscal year. This report also highlights eHealth's progress and achievements during the year and demonstrates the organization's commitment to improving patient care in Saskatchewan through connected health care, accessible to everyone, everywhere.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Norman O'Neill', written in a cursive style.

Norman O'Neill
Chair, Board of Directors
eHealth Saskatchewan

Message from the CEO



Davin Church

CHIEF EXECUTIVE OFFICER

In 2025-26, eHealth Saskatchewan marked another year of ensuring providers have secure, reliable access to the technology they need to provide health care when and where patients need it.

This year more than ever partnership and teamwork guided us as we strengthened ties and formalized processes with our partners. We worked closely with our partners as we developed a new five-year strategic roadmap that supports health system priorities. We entered conversations with open ears and open minds, and came away with a plan that organizes our work around what matters most:

- Patient access and outcomes
- Partnership and innovation
- Service availability
- Service excellence and capacity management

Our roadmap also shifts how we talk about ourselves at eHealth. As a relatively new Treasury Board Crown Corporation we've been focused on growth: growing our services, capabilities and resources. Recently, the conversation has shifted to our maturity as the province's largest IT services provider, building on the foundation we've established to improve the service and support patients and providers have come to rely on.

A new strategic roadmap doesn't change what we do, but it allows us to re-focus our efforts, matching our work to the goals and priorities of the health system. The highlights and updates in this report reflect the focus areas in our roadmap as well as our continued work to use technology to enable access to care for patients and give providers more time and tools to deliver that care. Page 8 highlights accomplishments from the year, and the subsequent pages delve deeper into how those achievements make health care better for patients and providers alike.

Access to information is key and it's eHealth's job to make sure information is secure and available. In 2025-26, this included adding clinical documents to MySaskHealthRecord and growing the list of records available to clinicians through the province-wide database they use to view patient information. Other efforts included testing artificial intelligence through pilot projects, including one that facilitates notetaking during appointments so doctors can better focus on conversations with patients.

We also continued to bolster the significant infrastructure that keeps health system IT running to ensure clinical and administrative platforms remain secure and reliable. Everything we did was guided by a simple but profound philosophy: putting patients first.

I'm proud to say for the third year in a row eHealth has been named one of Saskatchewan's Top Employers. Each day I'm impressed by my colleagues here. No matter what their role or title, everyone shares a common commitment to making health care work well for patients and providers. As our strong employee engagement results show, Saskatchewan residents can be assured that there's a team of over 800 with their best interests at heart.

I am, as always, grateful for the support of our health system partners. It's never been more evident that we're stronger together. I look forward to continuing to build our established relationships for the benefit of Saskatchewan residents and health care providers.

A handwritten signature in black ink, appearing to read 'Davin Church'.

Davin Church
Chief Executive Officer
eHealth Saskatchewan

Message from the Board Chair



Norman O'Neill

CHAIR, BOARD OF DIRECTORS

In 2025-26, eHealth continued to support patients, providers and health system partners, managing day-to-day information technology (IT) requirements while building and managing the resources and infrastructure that support health care now and into the future.

This past year, the Board and I were pleased to see the delivery of a new five-year roadmap for the organization. To build it, the leadership team at eHealth led collaborative and open conversations with representatives across the health sector to ensure the organization's priorities align with those of the health system. Those conversations also highlighted shared challenges and identified ways to work together to overcome hurdles. The resulting roadmap represents common values and priorities, and establishes long term goals for eHealth that support the vision our partners have for health care in Saskatchewan.

Alongside its progress on big-picture ideas, eHealth continued to meet the daily challenges of planning and managing the IT that underpins health care in this province. From setting up accounts and technology for new hires to providing quick and effective solutions in urgent situations, eHealth shows up each day to ensure the reliability, stability and security of hundreds of clinical and administrative systems and millions of records.

Throughout this annual report, you'll find statistics and spotlights that illustrate the scope of work eHealth manages on behalf of the health system. But numbers don't fully capture the dedication and innovation of the people who work there. The 2025 wildfire season provided a snapshot of just how responsive and supportive eHealth is. As evacuees were settling into an evacuation centre in Saskatoon, teams rushed to equip a temporary clinic with the technology you'd find in a typical health care setting, from computers and printers to a strong network connection for accessing patient records and important clinical applications. To ensure seamless health care delivery, eHealth's Registries team provided evacuees with proof of coverage letters so a health card left behind wasn't a hurdle to getting care.

The Board and I were proud to see that eHealth was named a Saskatchewan top employer for the third year in a row and equally pleased to see employee engagement scores that exceeded industry benchmarks across the board in 2025. It's clear employees appreciate that working at eHealth provides an opportunity to truly make a difference, one patient, one clinical application, one lab test result, one network connection at a time. That engagement makes all the difference.

On behalf of the Board, I'd like to thank the leadership and employees at eHealth for everything they do to serve Saskatchewan citizens. eHealth is truly a remarkable organization, and it's an honour to work closely with you.

A handwritten signature in black ink, appearing to read 'Norman O'Neill', written in a cursive style.

Norman O'Neill
Chair, Board of Directors
eHealth Saskatchewan

Authority and Mandate

eHealth Saskatchewan is a Treasury Board Crown Corporation. Our Orders in Council outline our objectives, purpose and powers. We are subject to orders or directives by the Treasury Board.

Key roles of eHealth, driven by our mandate, include:

- consolidate all information technology (IT) services provided by former Saskatchewan health regions, Saskatchewan Cancer Agency and 3sHealth into a single service provided by eHealth
- lead Saskatchewan Electronic Health Record planning and strategy
- administer and operate *The Vital Statistics Act* and *The Change of Name Act*
- administer and operate the health registration registry (Person Health Registration System)

- procure, implement, own, operate or manage other health information systems
- enter into agreements or arrangements to market IT or expertise to other governments, international agencies, commercial or non-profit organizations

eHealth provides technology services to provincial health partners, including Saskatchewan Health Authority, Saskatchewan Cancer Agency, Health Quality Council, the Ministry of Health, 3sHealth, Athabasca Health Authority and private practice community providers, including physicians, pharmacists and allied health professionals.

As of March 31, 2026, eHealth had 820 employees in 20 communities in Saskatchewan.

eHealth manages, refreshes and supports IT assets in 433 locations across the health system. We also administer Vital Statistics and health card registries and manage MySaskHealthRecord, an online platform that gives citizens access to their health information.

eHealth operates in Treaty 2, 4, 5, 6, 8 and 10 territory and the homeland of the Métis. The facilities and services we support provide health care to the Nakota, Nehiyaw, Nehinaw, Nehitaw, Nahkawe, Dakota, Dene, Lakota and Métis people of Saskatchewan.

eHealth is committed to fostering and maintaining respectful relationships with First Nations and Métis people.

Governance

Corporate Vision, Mission and Values



VISION

Connected health care, accessible to everyone, everywhere.

MISSION

We collaborate to transform health care through the use of information and innovative technology.



VALUES

Excellence, integrity, teamwork, courage, resilience and collaboration.



Board of Directors

The eHealth Board of Directors is appointed by Order in Council in accordance with *The Crown Corporations Act*, 1993. The Board fulfills its governance role by overseeing and providing direction to the Chief Executive Officer (CEO) and all individuals who report directly to the CEO about the conduct of the business, affairs and effective management of eHealth.

The Board is accountable to, and reports to, the Minister of Health. The Board acts in the best interests of eHealth and is responsible for its stewardship on behalf of the public, including but not limited to, promoting the organization's vision, mission, values, objectives and purposes, as well as ensuring good governance.



Norman O'Neill

CHAIR, BOARD OF DIRECTORS



Susan Carani



Brent Hebert

A photograph of a healthcare professional, likely a nurse or doctor, wearing a blue medical gown and a stethoscope. She is looking down at a device, possibly a patient monitor or a piece of medical equipment. In the background, another person is visible, slightly out of focus. The image has a blue and green color overlay.

2025-26 PROGRESS AND HIGHLIGHTS

Year in Review

- Recognized for the third year in a row as one of Saskatchewan's top employers by the editors of *Canada's Top 100 Employers*.
- Achieved an impressive 92 per cent response rate on the 2025 employee engagement survey, a significant increase from 59 per cent in 2023. Engagement rose from 56.5 per cent to 66.1 per cent, surpassing the industry benchmark of 60.7 per cent, with scores improving across all areas.
- Developed and implemented a new five-year strategic roadmap in collaboration with health system partners to ensure we work together toward shared goals.
- Advanced the use of AI to realize efficiencies and free up time for higher value work, including piloting a tool that supports note taking, allowing providers to be more fully engaged in their conversations with patients.
- Continued to empower 753,000+ (as of March 31, 2026) Saskatchewan residents with a MySaskHealthRecord account by populating more than one million clinical documents in MySaskHealthRecord so patients are more informed.
- Provided 79,000+ health system users with the IT services they require to deliver care, including responsive support when help is needed with consistent call response times of under a minute.
- Expanded the health data available in the provincial provider portal (eHR Viewer) by adding information such as surgical booking details and pediatric clinical documents.
- Onboarded five recovery treatment centres to the Mental Health and Addictions Information System (Estevan, Regina and Saskatoon as well as two facilities in North Battleford), giving more providers access to information to improve co-ordination of care and reporting.
- Continued planned improvements and upgrades to IT infrastructure throughout the province, so phones, routers, wireless connections, data centres and other key connections work well.
- Onboarded more facilities (in Watrous, Lanigan, Wadena and Wynyard) to the Laboratory Information System, improving ability for patients and providers to access lab results electronically.
- Rapidly deployed technology services for a temporary clinic and enabled emergency proof of health coverage for evacuees during wildfire response efforts.
- Health Registries handled 273,000+ health card applications and updates throughout the year, ensuring Saskatchewan residents have proof of health coverage and access to care.



eHealth's strategic roadmap outlines our long-term vision, desired outcomes, and the strategic moves required to achieve them. Our roadmap and focus areas were developed in consultation with health sector partners and identify how our work supports their success as well as how we work together to ensure patients and providers have the tools and information they need for the best possible health outcomes.

FOCUS: Patient Access and Outcomes

Enable seamless, patient- and clinician-centric digital health experiences with real-time data access, improved outcomes and reduced wait times.

What will be accomplished: Expand access and improve efficiency for patients and providers.

eHealth shares a common guiding principle with the health system partners we support: the patient comes first. The right technology has to be available to ensure people can access the right care in the right place at the right time. Working with our partners, we align expertise and resources to strengthen care delivery, improve access, and empower patients.

Information to enable informed care

Ready and reliable access to health records helps clinicians deliver informed care and support patients in making decisions that lead to the best possible outcomes.

In 2025-26, eHealth continued to enhance and expand eHR Viewer, the secure site providers use to access patient information. Improvements this year included:

- Adding surgical booking information
- Making records from the Regina Urgent Care Centre available
- Improving capabilities for flagging sensitive documents
- Adding information related to recreation therapy, difficult airway alerts, spine pathway and pediatric documentation

An upgrade and expansion of the application used to manage operating rooms across the province helped improve patient access to surgery. The changes enhanced workflows and reduced wait times by optimizing resources, improving scheduling and enhancing communication.

In 2025-26, eHealth teams maintained stable operations for imaging platforms, ensuring consistent availability even as system use remained high, minimizing delays in care and ensuring providers can quickly access the results they need to provide informed care. This included:

- The Radiology Information System, which handles approximately 80,000 exam orders and results each month, ensuring results are available when needed

- Image storage and viewing systems, giving clinicians secure, 24/7 access to support timely diagnosis and treatment
- The radiology dictation system, ensuring radiologists could complete reports for all medical imaging exams without delay

Other work focused on modernization and long-term sustainability for province-wide drug and pharmacy systems used to manage medication in community and acute care settings. This included a database migration and overall upgrades to improve performance and security. Millions of prescriptions and other services are tracked and managed in the system each year, enabling clinicians and pharmacists to access comprehensive profiles for Saskatchewan residents.

Empowering patients with information

Patients armed with access to their health information can take a more active role in their care. They arrive at appointments with well-informed questions and ready to work with providers to make decisions that lead to the best possible outcomes. System enhancements in 2025-26 gave patients even more access to information.

This included expansion of the system that supports direct referrals to a specific specialist provider as well as pooled referrals that connect patients with the provider who can see them soonest. Keeping both types of referrals in one system minimizes confusion and delays in getting patients matched with the right specialist. The system supported nearly 62,000 referrals throughout the year, a 42 per cent increase over the previous year. Specialties added in 2025-26 include:

- Saskatoon Neurology
- Saskatoon Obstetrics and Gynecology
- Provincial Neurosurgery

With the addition of clinical documents like discharge summaries, consults and diagnostic reports, more than

90 per cent of patient care reports available digitally to providers can now be viewed by patients through their MySaskHealthRecord account. More than one million of these documents were added this past year. Practitioners are already noticing that making more information available has overall benefits to care. Patients arrive at appointments well informed, making office visits an even better use of time.

Co-ordinating care across the province

In 2025-26, we added five recovery treatment centres (with 212 recovery beds) to the Mental Health and Addictions Information System (MHAIS), supporting more than 800 clients accessing mental health services. MHAIS houses records from community mental health, inpatient mental health, and recovery-oriented treatment services, providing a consistent platform for charting, care co-ordination and provincial reporting across service settings.

This year, eHealth and health system partners began the complex implementation of a single, province-wide home care information system. The new system will establish standardized provincial approaches to client intake, assessment, care planning, scheduling and billing. This foundational work is critical to maintaining consistency, improving reporting transparency, decreasing administrative burden for frontline staff, and enabling future integration with other provincial clinical systems.

eHealth worked with partners to expand the Laboratory Information System to four additional communities (Watrous, Lanigan, Wadena and Wynyard) in 2025-26 while continuing to standardize the system province wide for easy access to lab results. Improvements ensure a growing number of health care centres are connected to the system, minimizing the need for repeat lab tests and the wait for results.

SPOTLIGHT

Using technology to improve organ donation

A new digital solution for organ donation processes in Saskatchewan is improving efficiency, data quality and interprovincial co-ordination. It features integrated workflows that present information about available organs to providers in a familiar format, making for safer, more efficient review. National reporting enables secure sharing of donation offers with other provinces, so donations reach patients who need them.

BY THE NUMBERS

Access to personal health information

MySaskHealthRecord gives people in Saskatchewan secure online access to their lab results, imaging, prescriptions, and more. This helps patients stay informed and take a more active role in their health.

- Growth: up 5% to 753,439 accounts in 2025-26

Most viewed pages 2025-26	Views
Lab test results	5,794,512
Medical imaging	2,704,174
Clinical visit history	2,587,431
Prescriptions and pharmacy services	1,169,058
Clinical documents	1,119,499

Helping providers see the whole picture

The Electronic Health Record (eHR) Viewer gives authorized health care providers a complete view of a patient's history regardless of where care is delivered. This supports safer care, especially in emergencies.

2025-26 monthly averages:

14,058

Active users

229,605

Medical imaging reports accessed

3,285,366

Lab results accessed

51,138

Immunization records accessed

340,839

Clinical documents accessed

Supporting organ donation decisions

The Organ and Tissue Donor Registry makes it easy for residents to record their decision to be a donor, giving others the gift of life. In 2025-26:

34,282

Total organ donors registered

2,489

New organ donors registered

FOCUS: Partnership and Innovation

Fostering transparent collaboration and a culture of co-creation with health system partners and the frontline staff to spark new digital solutions and transform health care delivery.

What will be accomplished: Digital health partnership governance to establish priorities, identify innovations, and launch pilots that prepare us for the future. Benefits realization is transparent and aligned with system priorities.

eHealth provides behind-the-scenes support to those on the frontlines of health care. Our goals, values and priorities align with theirs, and our efforts underpin their ability to provide care when and where it's needed. Our work to introduce innovative solutions and advances in health care technology ensures providers have the time and resources they need to focus on their patients. Our success relies on the relationships we've built with our sector partners.

Data driven research and decision-making

Through our participation in the Health Research Data Platform-Saskatchewan, eHealth maintains a data repository that gives researchers secure access to perform analysis. In 2025-26, eHealth supported researchers leveraging funding from the Saskatchewan Centre for Patient Oriented Research and the Canadian Institutes of Health Research, helping advance research that informs better patient care. Recent research includes a study on improving care for chronic pain management and another on how health care settings impact patient health outcomes.

Adopting AI to support care

In 2025-26, eHealth advanced the use of artificial intelligence (AI) through pilot initiatives. This includes the use of a tool that facilitates note taking during medical appointments in primary health care in partnership with Canada Health Infoway and health system partners. Providers use the tool to support their work; it drafts notes that clinicians then review and edit to ensure accuracy. Participating clinicians say the benefits include reduced documentation burden, improved patient interaction, and measurable time savings.

The adoption of AI tools in health care is governed by clinical, technical and privacy experts in partnership with patients. This ensures appropriate safeguards are in place to confidently leverage AI tools to provide better care.

SPOTLIGHT

Partnering with communities to offer virtual care

In 2025-26, eHealth supported further advancement of virtual care services through partnerships with the Virtual Health Hub and the Saskatchewan Health Authority. This work supported virtual care delivery across rural, remote and Indigenous communities, connecting patients to clinical expertise and specialized care without travel. Through the partnership, we continue to identify and add new options to support patients across the province.

BY THE NUMBERS

Engaged employees, top employer

eHealth was named a Saskatchewan Top Employer for the third year in a row. This recognition helps us attract and retain skilled, dedicated employees.

Our 2025 employee engagement survey showed eHealth employees are engaged and understand the unique roles they play to deliver on our goals. Scores exceeded the national benchmark on every question.

- **92%** of employees completed the survey
- Overall engagement score was **66%** (6% above the national benchmark)
- More than **75%** feel patients, providers and citizens value what we do
- Employees want to stay at eHealth: **87%** expect to be here in a year
- **84%** say their individual contributions are important to our success
- **84%** say they're part of a team working towards a shared goal

FOCUS: Service Availability

Build a secure, scalable, and resilient digital health infrastructure to support future growth.

What will be accomplished: Renewed and funded critical IT infrastructure plan, matured cybersecurity and disaster recovery programs, and reduced system downtimes for critical services.

Modernizing and stabilizing information technology in 433 locations across the province is an ongoing process. eHealth regularly upgrades equipment and infrastructure to ensure technology and information is always there when and where providers and patients need it. Our teams are focused on building a reliable and sustainable IT environment that's scalable for current and future requirements as well as providing the day-to-day support required to minimize disruptions. As technological innovations advance and cybersecurity needs evolve, eHealth is building the technical foundations our partners can rely on now and in the future.

Better care thanks to better technology

Reliable IT infrastructure is critical to ensuring applications, communications, information, and the countless technologies that enable health care are always available. Reduced technical disruptions and modernized core systems mean clinicians spend less time managing technology and more time focused on patient care.

Ongoing work has strengthened system resilience, improved clinical workflows, and contributed to better patient outcomes and experiences across the health system. For example:

- In emergency and acute care settings, clinicians can quickly and reliably access lab results, imaging and electronic health records, enabling faster diagnosis and treatment decisions.
- Nurses and physicians can document and retrieve patient information at the bedside in real time, reducing delays, thanks to improved wireless connectivity.
- Upgraded communication systems ensure clear, dependable co-ordination between care teams, particularly during critical situations.

- Enhanced IT infrastructure across both urban and rural sites helps ensure more equitable access to consistent, high-quality care, regardless of location.

In 2025-26, eHealth enhanced tools used by specialists in areas such as neurology, ophthalmology, cardiology and audiology. Ongoing improvements like these support specialized care and ensure providers have the tools they need to provide and co-ordinate the best care possible. For example, enhancements to sleep studies allow clinicians to review data and monitor sleep activity in real time, enabling quick diagnosis and treatment.

Modern IT infrastructure means health care teams experience fewer outages, faster system response times, and more consistent access to patient information, directly supporting safer and more timely care. eHealth made a significant capital investment in 2025-26. By the end of the year, teams completed 84 per cent of the planned IT capital work, with the remainder of the budgeted equipment purchased and ready to implement in the next fiscal year. Multiple data centre, server and storage capacity upgrades are part of the ongoing improvements. This work strengthens reliability, security and performance of critical systems that clinicians rely on every day.

eHealth maintains disaster recovery playbooks for all critical systems, with regular testing requirements established to validate our capability to recover these systems. Structured governance and continuous improvement strengthen readiness and help ensure essential health care services remain resilient, minimizing impacts to patients and care delivery.

Supporting health sector projects

In 2025-26, eHealth provided IT infrastructure planning, design, procurement and implementation support for hospital, long-term care and urgent care centre construction in several communities across the province.

Well-planned and reliable IT infrastructure supports consistent access to hardware, software and applications to ensure providers have access to the information and resources they need to provide care.

Keeping systems and information secure

We continue to evolve our security operating model so protections can keep pace with growth and innovation without creating barriers to service delivery. Patients and providers rely on eHealth to ensure information, networks and systems are secure. In 2025-26, eHealth:

- Expanded monitoring and alerting capabilities to address cyber risks in real time
- Expanded incident response plans and scenarios to ensure readiness to respond effectively to those risks
- Expanded how we use automation and standardized security processes to improve consistency, reduce manual effort, and support a scalable, sustainable security program
- Conducted 95 security assessments to confirm essential security controls are in place for new clinical and administrative applications and services, as well as major upgrades to existing ones

BY THE NUMBERS

A year of IT infrastructure updates

What does one year of IT infrastructure updates and improvements look like? Plenty of new equipment, including:

64

network switches

2,900

wireless access points to improve connectivity

150+

phones to keep providers in contact

64

routers to keep information flowing

275+

system migrations and remediations to improve reliability and stability

46

site assessments to determine future needs

Technical support

eHealth supports a complex technical environment that includes:

433

network locations

100,000+

active network connections for computers and clinical technology

79,536

user accounts

69,542

email accounts

20,000+

phones

45 million+

phone calls

1,000+

phone menus to better direct patient and provider inquiries

485

applications used in the delivery of care

5,216

servers to keep it all functional and connected

SPOTLIGHT

Security assessments to support AI implementation

eHealth completed about a dozen assessments to securely enable AI capabilities in clinical and corporate workflows. For example, AI is increasingly used in clinical settings to reduce administrative burden and give providers more time for patient care. eHealth is also exploring how to leverage AI to quickly detect — and prevent — security threats.

FOCUS: Service Excellence and Capacity Management

Deliver consistent, high quality digital health services, optimize resources, and improve patient flow and citizen expectations.

What will be accomplished: Improve service delivery. Reduce impact of technical issues on partners. Create visibility into system capacity to make better decisions.

Reliable, responsive information technology operations are essential for delivering safe, effective, and timely care. For our partners to provide the right care, in the right place at the right time, they need consistent access to the full capabilities and capacity of the technology at their disposal. Digital services and supports should create efficiency and improve patient flow, resulting in better access and outcomes. By streamlining services, standardizing support, and modernizing tools, eHealth ensures clinical teams can stay focused on what matters most: caring for patients.

Investing in future health care supports

Health care is always evolving, and IT supports and services need to stay one step ahead. Anticipating and preparing for future needs is part of our long-term planning to support administrative and clinical work across the health system.

In 2025-26, eHealth teams continued updates to IT applications that keep offices on schedule and in contact. Upgrades included email and a standardized online meeting and chat tool to enable more consistent, secure communication across the health system. It also included the introduction of AI tools that complement the use of those applications, establishing a secure and well governed foundation for enterprise AI adoption.

Our investments in applications and other technical supports in 2025-26 included implementing a multi-year project to standardize how surgical procedures requiring anesthesia are documented province-wide. We also introduced an electronic patient record system designed specifically to give emergency medical services the ability to access and create records.

eHealth also supported the establishment of modernized security systems, including closed-circuit television (CCTV) and access control platforms, laying the foundation for secure, scalable provincial solutions and enabling the move of more than 500 cameras to eHealth supported systems. We also updated more than 7,000 mobile devices with improved applications that strengthen security, support off-site work, and align device management with modern standards. Providing care when and where it's needed relies on devices that connect and work safely from anywhere.

eHealth supports the technology and IT systems behind Improving Value in Health Care, an initiative led by the Ministry of Health that compiles clinical and financial data from across the province. We enable automated data delivery into shared tools so our partners can determine patient-level costing and benchmarking to support informed decisions that improve value in health care.

Reliable supports for uninterrupted care

eHealth supports more than 79,000 users of administrative and clinical applications across the health system. When something isn't working as expected, responsive technical support ensures IT issues don't mean lost patient time for clinicians.

In 2025-26, our Service Desk team maintained its service standards even as call volumes increased, with 85 percent of calls answered in under 60 seconds, and most email tickets addressed within 24 hours. Minimizing disruptions helps providers return to patient care faster.

Establishing reliable Service Desk support regardless of location helps ensure consistency and strengthen provider confidence in the systems that support their work. In 2025-26, this included:

- Moving our service management and ticketing systems toward a single platform, enabling teams to focus on urgent clinical issues and restore system access quickly
- Moving call centre operations to a single platform with standardized training to ensure faster, more effective resolution of issues that impact patient care

BY THE NUMBERS

Reliable IT to support personalized care

Saskatchewan's health sector relies on standard office technology to keep facilities and clinics running smoothly. eHealth provides on-site and remote support for:

22,000

desktops and devices

10,089

printers

7,650

mobile devices

6,300

virtual desktops

In 2025-26, the team received:

322,000+

support calls

477,000+

service tickets



Health Registries and Vital Statistics

Health Registries continued to play a critical role in supporting Saskatchewan residents by providing timely access to health coverage, registering major life events, and issuing foundational identity documents. Building on significant service improvements achieved in recent years, the team sustained reduced service backlogs throughout 2025–26 and maintained stable turnaround times for high-impact services.

Quality improvement in client service delivery

eHealth continued to make improvements to strengthen training and support to help teams consistently meet client needs and expectations. After introducing call recording in the previous year, we implemented screen recording tools to support coaching, consistency, and continuous improvement for front-line staff, with the goal of improving accuracy and client experience.

BY THE NUMBERS

Health registries

April 1, 2025 – March 31, 2026

New health cards issued	126,806
Health card information updates processed	147,044

Vital statistics

Reported for the 2025 calendar year in accordance with Vital Statistics Legislative Reporting Guidelines:

Births	13,438
Deaths	10,939
Marriages	4,769
Stillbirths	52
Total events	29,198

SPOTLIGHT

Ensuring access to care in emergencies

During the 2025-26 wildfire season, eHealth's Registries team ensured citizens could continue to access health care during an extremely stressful time. The team fast-tracked services for residents who urgently required health cards. This included issuing temporary coverage letters for evacuees to ensure access to publicly funded care during a high stress time.



A woman with long dark hair, wearing a white lab coat over a dark top and a necklace, is looking down at a document she is holding. The document has the 'eHealth' logo and some text on it. The background is a blurred office or clinical setting. The entire image is overlaid with a green-to-blue gradient.

2025-26 FINANCIAL STATEMENTS

Management's Responsibilities

The accompanying financial statements included in the Annual Report for the year ended March 31, 2026, are the responsibility of management.

Management has prepared these financial statements in accordance with the Canadian public sector accounting standards, consistently applied using management's best estimates and judgments where appropriate.

The eHealth Saskatchewan Board of Directors is responsible for overseeing the business affairs of the corporation and also has the responsibility for approving financial statements. The Board fulfills these responsibilities by reviewing financial information prepared by management and discussing the relevant matters with management and external auditors.

Management maintains a system of internal controls to ensure the integrity of information that forms the basis of the financial statements. The internal controls provide reasonable assurance that transactions are recorded and executed in compliance with legislation and required authority; that assets are properly safeguarded; and that reliable records are maintained.

The Provincial Auditor of Saskatchewan has audited the financial statements.

Her report to the members of the Legislative Assembly precedes the financial statements.



Davin Church
Chief Executive Officer



John Billington
VP, Corporate Services and
Chief Financial Officer



INDEPENDENT AUDITOR'S REPORT

To: The Members of the Legislative Assembly of Saskatchewan

Opinion

We have audited the financial statements of eHealth Saskatchewan, which comprise the statement of financial position as at March 31, 2026, and the statement of operations, statement of change in net financial assets and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of eHealth Saskatchewan as at March 31, 2026, and the results of its operations, changes in its net financial assets, and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of eHealth Saskatchewan in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards for Treasury Board's approval, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing eHealth Saskatchewan's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate eHealth Saskatchewan or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing eHealth Saskatchewan's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of eHealth Saskatchewan's internal control.



PROVINCIAL AUDITOR
of Saskatchewan

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on eHealth Saskatchewan's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause eHealth Saskatchewan to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control identified during the audit.

Regina, Saskatchewan
June 29, 2026

Tara Clemett, CPA, CA, CISA
Provincial Auditor
Office of the Provincial Auditor

Statement 1

**eHealth Saskatchewan
Statement of Financial Position
As At March 31
(\$000s)**

	<u>2026</u>	<u>2025</u>
Financial Assets		
Due from General Revenue Fund (Note 3)	\$ 40,038	\$ 22,309
Receivable from Ministry of Health	1,342	1,968
Other Accounts Receivable	21,789	17,019
	<u>63,169</u>	<u>41,296</u>
Liabilities		
Accounts Payable & Accrued Liabilities	15,014	11,772
Accrued Salaries & Benefits	3,442	2,561
Accrued Vacation	1,802	1,694
Deferred Revenue (Note 9)	4,660	1,336
	<u>24,918</u>	<u>17,363</u>
Net Financial Assets (Statement 3)	<u>\$ 38,251</u>	<u>\$ 23,933</u>
Non-financial Assets		
Tangible Capital Assets (Note 6)	29,103	25,694
Prepaid Assets	19,075	21,503
Inventory	2,757	3,328
	<u>50,935</u>	<u>50,525</u>
Accumulated Surplus (Statement 2)	<u>\$ 89,186</u>	<u>\$ 74,458</u>

Contractual Obligations (Note 8)

(See accompanying notes to financial statements)

Statement 2

**eHealth Saskatchewan
Statement of Operations
For the year ended March 31, 2026
(\$000s)**

	<u>Budget</u> (Note 4)	<u>2026</u>	<u>2025</u>
Revenue			
Ministry of Health Funding			
General Revenue Fund Grant	\$ 171,793	\$ 171,793	\$ 163,036
Other Ministry of Health	3,000	38,671	34,913
Recoveries / Other	38,456	38,105	25,925
Total Revenue	<u>213,249</u>	<u>248,569</u>	<u>223,874</u>
Expenses			
Amortization (Note 6)	7,000	7,623	5,889
Digital Services	173,683	175,808	163,038
Corporate Services	33,531	39,060	33,362
Board, Executive & Security Office	12,026	11,350	11,844
Total Expenses (Schedule 1)	<u>226,240</u>	<u>233,841</u>	<u>214,133</u>
Annual Surplus/Deficit (Statement 3)	\$ (12,991)	\$ 14,728	\$ 9,741
Accumulated Surplus, at beginning of year	<u> </u>	<u>74,458</u>	<u>64,717</u>
Accumulated Surplus, at end of year (Statement 1)		<u><u>\$ 89,186</u></u>	<u><u>\$ 74,458</u></u>

(See accompanying notes to financial statements)

eHealth Saskatchewan
Statement of Change in Net Financial Assets
For the year ended March 31, 2026
(\$000s)

	<u>Budget</u> (Note 4)	<u>2026</u>	<u>2025</u>
Annual Surplus (Statement 2)	\$ (12,991)	\$ 14,728	\$ 9,741
Acquisition of Tangible Capital Assets (Note 6)	(12,018)	(11,032)	(9,464)
Amortization of Tangible Capital Assets (Note 6)	7,000	7,623	5,889
	<u>(5,018)</u>	<u>(3,409)</u>	<u>(3,575)</u>
(Acquisition)/Use of Prepaid Assets	(4,000)	2,428	(6,679)
Use of Inventory	2,000	571	2,302
	<u>(2,000)</u>	<u>2,999</u>	<u>(4,377)</u>
(Decrease) Increase in Financial Assets	\$ (20,009)	\$ 14,318	\$ 1,789
Net Financial Assets, beginning of year	<u>23,933</u>	<u>23,933</u>	<u>22,144</u>
Net Financial Assets, end of year (Statement 1)	<u><u>\$ 3,924</u></u>	<u><u>\$ 38,251</u></u>	<u><u>\$ 23,933</u></u>

(See accompanying notes to financial statements)

Statement 4

**eHealth Saskatchewan
Statement of Cash Flows
For the year ended March 31, 2026
(\$000s)**

	2026	2025
Cash Flows from Operating Activities		
Cash Receipts	\$ 247,749	\$ 219,563
Cash Paid To Suppliers And Others	(218,988)	(224,371)
Cash received from Operating Activities	<u>28,761</u>	<u>(4,808)</u>
 Cash Flows From Capital Activities		
Purchase Of Tangible Capital Assets (Note 6)	(11,032)	(9,464)
Cash paid in Capital Activities	<u>(11,032)</u>	<u>(9,464)</u>
 Cash Flows From Financing Activities		
Net Change in Obligations Under Capital Leases	-	(35)
Cash Paid in Financing Activities	<u>-</u>	<u>(35)</u>
 Net (Decrease)/Increase In Due From General Revenue Fund	\$ 17,729	\$ (14,307)
 Due From General Revenue Fund, Beginning Of The Year	22,309	36,616
 Due From General Revenue Fund, End Of The Year (Statement 1)	<u>\$ 40,038</u>	<u>\$ 22,309</u>

(See accompanying notes to financial statements)

eHealth Saskatchewan
Notes to the Financial Statements
for the Year ended March 31, 2026
(\$000s)

1. Description of Business

Saskatchewan Health Information Network (SHIN) was established as a Treasury Board Crown Corporation by Order in Council 581/1997 under the provisions of *The Crown Corporations Act, 1993* (Act) effective August 19, 1997.

SHIN was renamed to eHealth Saskatchewan by Order in Council 734/2010.

eHealth Saskatchewan (eHealth) was created to design, implement, own, operate, and manage a provincial health information network. eHealth's purpose is to foster the development of the health information technology sector, to foster re-engineering of health delivery processes and to protect health information as a strategic resource.

As a Crown entity, eHealth is not subject to income and property taxes from the federal, provincial, and municipal levels of government.

2. Significant Accounting Policies

Pursuant to standards established by the Public Sector Accounting Board (PSAB) and published by Chartered Professional Accountants (CPA) Canada, eHealth is classified as an other government organization. eHealth uses Canadian public sector accounting standards to prepare its financial statements. A statement of remeasurement gains and losses has not been presented in these financial statements because all financial instruments' carrying value approximates their fair value. The following principles are considered to be significant:

a) The Basis of Accounting

The financial statements are prepared on the accrual basis of accounting.

b) Revenue

Government transfers are recognized as revenue in the period the transfer is authorized and any eligibility criteria are met. Other revenue is recognized in the year received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

c) Expenses

Expenses represent the cost of resources consumed for operations during the year. Expenses include provision for the amortization of tangible capital assets.

d) Employee Future Benefits

i) Pension Plans - Employees of eHealth participate in one of the following pension plans:

Defined Benefit Plans - Employees participate in the Saskatchewan Healthcare Employees Pension Plan (SHEPP) or the Regina CIVIC Employees Superannuation and Benefit Plan (CIVIC). eHealth's financial obligation to the plans is limited to making the required payments according to the agreements.

Defined Contribution Plan - Employees participate in the Public Employees' Pension Plan (PEPP) which is administered by Plannera Pension and Benefits (Plannera). eHealth's financial obligation to the plan is limited to making the required payments to this plan according to the PEPP agreement.

ii) Disability income plan - Employees of eHealth participate in several disability income plans to provide wage-loss insurance due to disability. eHealth follows post-employment benefits accounting for its participation in the plans. Accordingly, eHealth expenses all contributions it is required to make in the year.

iii) Accumulated sick leave benefit liability - eHealth provides sick leave benefits for employees that accumulate but do not vest. eHealth recognizes a liability and an expense for sick leave in the period in which employees render services in return for the benefits.

e) Tangible Capital Assets

Tangible capital assets are recorded at cost and are amortized over their useful life. Leased assets are amortized over the life of the lease. Normal maintenance and repairs are expensed as incurred. During development, these assets are recorded based on their percentage of completion and are disclosed as work in progress system development. Amortization is recorded, commencing with the quarter after the assets are placed into service, on a straight-line basis at the annual rates set out below:

Hardware, Software & System Development costs	20% to 33%
Office Furniture & Leasehold Improvements	10% to 20%

f) Non-financial assets

Tangible capital and other non-financial assets are accounted for as assets because they can be used to provide services in future periods. These assets do not normally provide resources to discharge liabilities unless they are sold.

g) Measurement Uncertainty

The preparation of financial statements in accordance with Canadian public sector accounting standards requires management to make estimates and assumptions that affect the reported amount of financial assets and liabilities and disclosure of contingencies and contractual obligations at the date of the financial statements and the reported amount of revenues and expenses during the reporting period. These estimates are reviewed periodically, and, as adjustments become necessary, such adjustments are reported in earnings in the period in which they become known. Significant items that require estimates include amortization and accrued liabilities.

h) Financial instruments

Financial instruments consist of cash (due from the General Revenue Fund), accounts receivable, accounts payable, and accrued liabilities, including accrued salaries and vacation payable.

These instruments are classified as Level 1 in the fair value hierarchy (based on observable inputs) and are initially recognized at cost, which approximates fair value due to their immediate or short-term nature. Gains and losses are recognized in the Statement of Operations in the period incurred.

eHealth's exposure to credit, liquidity, and market risks is minimal given the short-term nature of the instruments. There has been no change in classification from the prior year.

i) Leases

Leases that transfer substantially all of the benefits and risks of ownership related to the leased property from the lessor to eHealth are accounted for as a capital lease. Other leases are accounted for as operating leases with contractual obligations disclosed in Note 8.

j) Inventory

Inventory at eHealth consists of end user devices (e.g., laptops, monitors) that have not been deployed at March 31, 2026. Inventory is valued at the lower of cost and net realizable value.

k) Future changes in accounting policies

A number of new Canadian public sector accounting standards and amendments to standards are not yet effective and have not been applied in preparing these financial statements. The following standards will come into effect as follows:

i. Conceptual Framework (effective April 1, 2026) replaces Financial Statement Concepts, Section PS 1000, and Financial Statement Objectives, Section PS 1100, which will be withdrawn.

ii. PS 1202 Financial Statement Presentation (effective April 1, 2026) a new standard ensuring increased understanding of financial statements and the indicators within them, and provides improved accountability information for users. eHealth plans to adopt these new standards on the effective date and is currently analyzing the impact this will have on its financial statements.

3. Due from General Revenue Fund

Earned interest is calculated and paid by the General Revenue Fund on a quarterly basis into eHealth's bank account using the Government's thirty-day borrowing rate and eHealth's average daily account balance. The Government's average thirty-day borrowing rate in 2026 was 2.50% (2025 - 4.05%).

4. Budget Approval

eHealth's budget was approved by the Board on May 8, 2025.

5. Accumulated Surplus

eHealth's accumulated surplus is \$89,186 in 2026 (2025 - \$74,458). eHealth's accumulated surplus is \$30,404 after adjusting for tangible capital assets not fully amortized (\$29,103); and designated assets held for specific purposes (\$29,679) (Note 11).

6. Tangible Capital Assets

	March 31, 2026							March 31, 2025
	Desktop Hardware	Computer Hardware	Computer Software	Office Furniture & Leasehold Improvements	System Development Costs	Work In Progress System Development	Total	Total
Opening Cost	\$ 6	\$ 77,424	\$ 6,056	\$ 3,169	\$ 155,795	\$ 900	\$ 243,350	\$ 233,886
Additions During the Year	-	3,770	-	-	-	7,262	11,032	9,464
Transfer	-	7,099	-	-	212	(7,311)	-	-
Disposals	-	(1,373)	-	-	-	-	(1,373)	-
Closing Cost	6	86,920	6,056	3,169	156,007	851	253,009	243,350
Opening Accumulated Amortization	6	54,252	6,047	3,052	154,299	-	217,656	211,767
Annual Amortization	-	7,123	2	15	483	-	7,623	5,889
Disposals	-	(1,373)	-	-	-	-	(1,373)	-
Closing Accumulated Amortization	6	60,002	6,049	3,067	154,782	-	223,906	217,656
Total Tangible Capital Assets	\$ -	\$ 26,918	\$ 7	\$ 102	\$ 1,225	\$ 851	\$ 29,103	\$ 25,694

7. Related Parties

These financial statements include routine transactions with related parties. eHealth is related to all Saskatchewan Crown agencies such as ministries, corporations, boards and commissions under the common control of the Government of Saskatchewan as well as its key management personnel, and their close family members. Additionally, eHealth is related to organizations where they have key management personnel in common. Transactions with these related parties are in the normal course of operations and are settled on normal trade terms.

8. Contractual Obligations

i) Operating Leases

eHealth has entered into a lease agreement with Canada Life for office space expiring May 31, 2031, Cameco for office space expiring August 31, 2030, Stantec for office space expiring April 30, 2026, and SaskTel for data center leases expiring December 31, 2033. The operating lease payments for the next 5 years are as follows:

2027	\$ 5,731
2028	6,431
2029	6,573
2030	6,677
2031	6,059
Thereafter	4,743
Total Lease Payments	\$ 36,214

ii) Maintenance agreements for software

eHealth has several agreements with software vendors to provide maintenance for software that has been purchased by eHealth. A total of \$73,270 was spent in 2026 (2025 - \$65,996). This arrangement will likely continue into the future.

iii) Other Contractual Obligations

As of March 31, 2026, eHealth is committed to technical support for internal and IT systems totaling \$251,770 (2025 - \$146,005). The following table outlines the funds dedicated for capital and operational expenditures over the remaining years as follows:

2027	\$	67,557
2028		47,084
2029		46,368
2030		46,313
2031		37,504
Thereafter		6,944
Total Commitment	\$	251,770

9. Deferred Revenue

As of March 31, 2026, eHealth's deferred revenue balance is \$4,660 (2025 - \$1,336). Deferred revenue is only used once all project planning and due diligence (including stakeholder readiness) is completed and other revenue opportunities are maximized. Deferred revenue consists of unspent amounts provided by the Project Management Board of the Provider Registry System from Saskatchewan and Newfoundland, from Saskatchewan Centre for Patient Oriented Research (SCPOR), Canada Health Infoway, Service Canada, Saskatchewan Health Authority, Ministry of Health and 3sHealth.

Deferred Revenue	April 1, 2025	Recognized in 2025-26	Amounts Received	March 31, 2026
Provider Registry Host Agency	\$ 180	\$ 39	\$ 72	\$ 213
SPCOR	237	1,002	1,182	417
Canada Health Infoway	215	215	-	-
Service Canada	704	-	-	704
Saskatchewan Health Authority	-	1,842	5,124	3,282
Ministry of Health	-	20	35	15
3sHealth	-	147	176	29
Total Deferred Revenue	\$ 1,336	\$ 3,265	\$ 6,589	\$ 4,660

10. Employee Future Benefits

i) Pension plans

Employees of eHealth participate in one of three pension plans; the Public Employees Pension Plan (PEPP) which is administered by Plannera, Saskatchewan Healthcare Employees Pension Plan (SHEPP) and the Regina CIVIC Employees Superannuation and Benefit Plan (CIVIC).

PEPP is a defined contribution pension plan. eHealth's financial obligation to the plan is limited to making required payments to match the amount contributed by the employees for current services. eHealth's contribution to this plan is 9% (2025 - 9%).

SHEPP and CIVIC are defined benefit pension plans. eHealth's financial obligation to the plan is limited to making required payments as outlined in the plan agreements. eHealth's contribution to these plans are 8.18% and 8.25% respectively.

Pension expense for the year is included in salary and benefits in Schedule 1.

ii) Disability income plans

Employees of eHealth participate in the following disability income plans:

Public Employee Disability Income Plan – Disability income plan for out-of-scope staff are administered by Plannera Pensions and Benefits. eHealth's financial obligation to this plan is limited to making the required payments to the plan according to the applicable agreement. Disability expense for this plan is included in salary and benefits in Schedule 1.

SGEU – Disability income plan for in-scope staff, administered by the Saskatchewan Government and General Employees' Union. eHealth has no financial obligation for this plan.

iii) Accumulated sick leave benefit liability

The cost of the accrued benefit obligations related to sick leave entitlement earned by employees is determined using management's best estimate of sick leave usage of active employees. Sick leave liability is included in salary and benefits in Schedule 1.

11. Designated Assets

eHealth's designated assets represent Ministry of Health funding committed to developing information technology systems that support frontline delivery and improve access, quality and efficiency of care. eHealth's designated asset balance as at March 31, 2026 is \$29,679 (2025 - \$13,214). In 2025-26, the designated assets consist of a combination of cash and accounts receivable. eHealth's Board of Directors has approved the following designated assets in 2025-26:

Designated Assets	April 1, 2025	2025-26 Expenditures	Amounts Received	March 31, 2026
Ministry of Health	\$ 10,927	\$ 6,932	\$ 22,168	\$ 26,163
eHealth Saskatchewan	2,255	1,409	2,638	3,484
Saskatchewan Health Authority	32	-	-	32
Total Designated Assets	\$ 13,214	\$ 8,341	\$ 24,806	\$ 29,679

12. Comparative Figures

Certain prior year amounts have been reclassified to conform to the current year's financial statement presentation. Specifically \$3,904 from software licensing to software maintenance. These reclassifications have no impact on the annual surplus (deficit).

Schedule 1

**eHealth Saskatchewan
Schedule of Expenses by Object
For the year ended March 31, 2026
(\$000s)**

	Budget	2026	2025 (Note 12)
Amortization	\$ 7,000	\$ 7,623	\$ 5,889
Board	25	3	-
Cabling	-	-	1
Communications	508	1,315	1,263
Community Net	7,041	6,504	6,822
Facilities	696	476	800
Hardware	18,736	12,172	12,011
Hardware Maintenance	849	2,315	2,127
Insurance	190	202	190
Leases	-	66	57
Legal	168	285	159
Membership	27	15	11
Miscellaneous	292	2,709	435
Office Supplies	1,438	1,157	840
Parking	512	518	475
Professional Fees	20,262	22,726	22,686
Rent	4,725	5,389	4,669
Salary & Benefits	90,552	90,005	85,413
Software License	5,033	5,664	3,023
Software Maintenance	67,019	73,270	65,996
Telephone	480	472	442
Travel	687	955	824
	\$ 226,240	\$ 233,841	\$ 214,133

Payee List

Salaries

Listed employees who received \$50,000 or more for the provision of services.

Aasen, Corey	94,158.36	Auton, Leslie	89,145.66
Abbott, Jerad	99,952.09	Awad, Ahmed	126,248.02
Abdullah, Muhammad	104,691.03	Awesome, Wes	95,644.31
Abenoja, Leilani	66,020.46	Ayedun, Ayodele	101,527.52
Abeygunawardene, Shehani	51,990.27	Babalola, Oladapo	74,262.92
Abir, ASM	96,374.88	Babista, Aileen	78,210.92
Aboyade, Oluwaseun	69,044.98	Bachelu, Darren	99,214.85
Abu, Lawal	50,225.83	Bachtiar, Machdum	104,598.40
Acharya, Vaibhav	100,465.99	Badarpura, Sanifali	75,334.59
Adams, Michael	53,386.75	Bakare, Adebayo	90,776.99
Adegboji, Qudus	82,565.63	Baller, Gregory	104,598.48
Adepegba, Abiola	69,435.75	Ban, Hao	131,595.20
Adeyemi, Oluwaremilekun	77,950.58	Banwait, Jitendar Singh	92,497.39
Afolabi, Oluhide	66,477.92	Barcnas, Norlene	69,998.77
Agnihotri, Mayank	87,305.35	Baron, Craig	68,600.89
Ahire, Pritam	94,152.31	Bathula, Venkata Srilekha	72,227.73
Ahuja, Naresh	66,192.26	Bawa, Japjot Singh	50,059.61
Ainy, Shehla	66,064.63	Baynton, Christine	131,943.54
Ajanya, Ojoajogu	70,066.73	Bayode, Tosin	100,072.87
Ajayi, Olawale	85,814.40	Beaurivage, Serena	100,372.17
Ajayi, Olugbenga	120,062.86	Becker, Christopher	145,040.45
Akinola, Olusegun	103,283.06	Beckett, Christopher	58,480.00
Akter, Farzana	98,717.50	Benham, Robert	108,604.39
Al Qatawneh, Thamer	129,727.83	Bermejo, Noel	82,394.24
Alam, Faiz	78,392.75	Bersabe, Mygie	62,310.31
Aleem, Muhammad	55,436.86	Betker, Nola	99,593.67
Ali, Ibrahim	115,393.48	Bhagat, Hemali	55,567.46
Ali, Naveed	138,945.99	Bhandari, Sujana	72,607.92
Alizadah, Afshen	62,415.72	Bharthi, Rosalpreet	95,925.34
Almuete, Alejandro	83,658.33	Bhatt, Mehul	68,263.26
Almuete, Precious	63,399.14	Bhatt, Zubin	58,011.31
Aloni, Nakul	131,943.58	Bhattacharyya, Pinaki	131,943.39
Aluede, Henry	96,508.01	Biehn, Regan	131,943.50
Amadeo, John Richard	83,727.98	Bienvenue, Murray	131,943.54
Amao, Nasir	74,444.42	Billington, John	192,755.70
Amin, Shivam	61,252.84	Bishop, Isaac	98,043.60
Andeh, Kenekukwu	76,417.99	Bisht, Neeraj	109,252.70
Anderson, Kenton	56,452.00	Blackett, Vikki	54,330.20
Andreas, Trent	131,253.28	Blommaert, Brett	85,464.63
Antonio, Justin	86,544.16	Blondeau, Micheal	81,767.63
Appleton, Jaclynn	54,386.91	Bobetsis, Gus	94,239.24
Armstrong, Kristin	145,028.23	Bobonets, Illia	66,224.49
Arora, Gaurav	110,327.23	Boechler, Brad	122,140.19
Arora, Sahil	100,820.05	Bohach, Jodi	73,761.86
Arthur, Vicentia	50,761.10	Boldt, Kelsey	96,903.68
Asadi Dehmirahmadi, Nima	68,536.92	Bollefer, Scott	70,344.48
Ashokkumar, Naga Poornima	85,007.86	Bon, Berlen	98,413.24
Ashwin, Ans	104,699.71	Bond, Kelly	108,712.32
Asryan, Karen	83,929.81	Boogaard, Lisa	119,335.81
Atayero, Adeyemi	110,556.90	Borha, Modupeore	51,020.69

Bouvier, Kyla	86,441.10	Diemert, Shari-Ann	58,557.67
Bowey, Cara	53,498.34	Diewold, Cole	66,799.09
Boychuk, Andrea	142,423.31	Dimaculangan, Maria Jellicoe	78,305.30
Brockman, Daniel	114,095.81	Dobson-Williams, Tamara	110,497.12
Brown, Jacinda	77,924.42	Dolney, Diane	143,936.62
Bueckert, Kaieleigh	96,785.32	Domingo, John	75,935.53
Bukola, Babajide	80,459.43	Doneza, Ronald	83,416.82
Bullo, Kulamo	81,446.40	Dong, Li	95,950.71
Burrell, Jonathan	86,098.39	Draude, Mitchell	118,731.49
Butler, Melissa	142,295.49	Dumont, Aurel	72,311.64
Cala, Irma Jean	101,960.80	Dunn, Joseph	76,636.19
Cameron, Trevor	107,934.17	Dunn, Lydia	91,388.95
Cannon, Brian	123,137.74	Ebrahim, Tahamina	57,634.41
Cardoso, Reynaldo	122,546.17	Ede, Chioma	56,016.50
Carlston, Lindsay	57,031.74	Ejaz, Ebad	73,725.64
Carr, Jesse	96,352.43	Ekdahl, Bradley	70,832.11
Casemore, Chris	126,906.57	Ekwonwa, Obinna	63,947.40
Chahal, Gagandeep	97,464.44	Ellis, Jarrod	109,835.84
Chahal, Gurkiran	70,555.89	Emefesi, Perfect	83,612.09
Chaudhari, Deep	66,844.58	Emegwa, Audrey	52,199.15
Chaudhary, Aviraj	66,778.96	Emmanuel, Favour	84,022.18
Chaudhary, Sachin	90,390.56	Engel, Lisa	144,387.97
Chauhan, Anand	75,226.30	Ens, Evan	128,858.75
Chevli, Ria	77,834.93	Enyinnaya-Okidi, Nene	89,084.71
Chirayil, Jacob	102,825.26	Estevez, May	66,346.81
Chomyn, Jamie	104,924.83	Evangelista, Eva Rose	60,023.90
Chornawka, Tanner	76,084.74	Fagbemi, Hakeem	126,600.91
Chugh, Bipul	100,906.03	Falade, Idowu	73,556.33
Church, Davin	275,979.16	Falase, Omolara	101,735.46
Clifford, Lloyd	63,804.42	Famuyibo, Oyebola	120,062.78
Cojocar, Justin	84,925.60	Fan, Jingtao	106,585.06
Conley, Dylan	92,458.88	Farahat, Ahmed	85,940.16
Conrad, Thomas	91,164.41	Fedorak, Cory	105,957.31
Cook, Jordan	107,944.54	Fernando, Nilupul	61,085.98
Corfield, Darron	150,499.34	Fidelak, Mark	126,398.88
Craig, Mitchell	75,291.74	Field, Elaine	61,902.47
Crawford, Jason	76,205.19	Firomski, Curtis	108,214.49
Cullins, Keith	69,641.66	Fisher, Darren	127,933.62
Curtis, Troy	85,870.20	Florida, Orlando	82,981.74
Custer, Cory	130,857.74	Foord, Annelise	54,688.62
Dabao, Mark	123,236.77	Fraser, Maxine	69,356.66
Daly, Jason	121,466.29	Frei, Derek	104,802.12
Das, Palash	102,295.26	Frei, Jason	131,302.26
Das, Utpal	117,724.93	Frischke, Maureen	67,657.96
Dasaraju, Rohith	94,191.06	Gabel, Grant	109,253.10
Dave, Anandkumar	89,070.85	Gabora, Alice	81,315.03
Dave, Shruti	84,459.18	Gafencu, Fawn	105,836.75
Davies, Peter	118,939.65	Gammel, Leanne	94,568.45
Day, Myles	86,214.71	Garcia, Maria	64,665.51
Dayalan, Poojitha	71,471.05	Garg, Chhavi	86,108.25
Del Mundo, Ailyn	96,319.32	Garlapati, Rama Krishna	95,928.90
Delisle, Marc	130,964.36	Garrard, Steve	98,785.74
Demas, Rogena	56,932.84	Gaudia, Paul Michael	80,293.49
Deobald, Aaron	109,014.51	Geddes, Sean	108,604.40
Derin, Carrie	104,316.63	Genaille, Candace	56,508.78
Desai, Darshit	72,228.61	George, Agnel	149,623.61
Desai, Jenil	78,726.46	George, Gemlison	79,050.46
Dhameliya, Nirav Pravinbhai	80,769.05	Gerbrandt, Samantha	93,709.73
Dhar, Oisharya	80,562.63	Ghatti, Rini	131,919.90
Dholasaniya, Snehil	76,532.57	Ghatti, Yash	114,468.61
Dhruva, Rajdeep	67,230.12	Giasson, Chandler	93,661.72

Gibbs, Jeanette	143,647.46	Johnson, Pauline	83,408.90
Gilani, Farzan	92,017.69	Jordan, Jennifer	71,023.64
Gill, Manpreet	55,826.73	Joseph, Gerald	107,417.37
Gill, Ramneet	86,034.01	Joshi, Niraj	99,943.46
Goodwin, Allyson	98,589.77	Juancito, Joven	76,006.41
Gordon, Marcia	66,606.81	Kalinocha, Jamie	97,468.17
Grant, Jason	69,759.03	Kalu-Umeh, David	50,441.42
Grohs, Joseph	86,009.50	Kashif, Nida	71,484.37
Groome, Ryan	73,027.52	Kasperski, Dan	104,598.43
Hackl, Craig	104,570.63	Kaur, Avneet	88,852.30
Hager, Brad	80,722.52	Kaur, Harjinder	54,534.88
Halim, Md	97,578.39	Kaur, Ramanpreet	52,858.38
Hameluck, Cory	86,088.07	Kaur, Ravneet	82,653.62
Hamilton, Darwin	87,725.21	Kaur, Sukhdeep	74,463.48
Hamoline, Norman	102,268.97	Keamo, Carrie	64,599.19
Hancock, Michael	104,039.42	Keffer, Michael	114,875.19
Harihara Subramanian, Sulochana	112,373.72	Kelbaugh, Jeff	94,509.96
Harjai, Prashant	60,171.52	Kelly, Kenneth	144,488.08
Harker, Amber	89,082.97	Kenny, Michelle	89,602.53
Hayes, Robert	77,506.12	Khabibulin, Rynat	106,218.54
Head, Aidan	71,154.42	Khan, MD Abid	80,968.77
Hebert, Andrew	108,417.91	Khan, Tanveer	99,131.49
Hedin, Cody	107,472.34	Khoja, Asif	89,941.21
Hennenfent, Jamie	96,505.01	Kilgour, Pearce	79,726.95
Henning, Dave	116,414.85	Kim, Minkyong	61,812.04
Henry-Machame, Onyinyechi	113,619.36	Kirsch, Ashley	104,514.22
Herperger, Kim	127,393.29	Klassen, Geoffrey	80,449.20
Hillsden, Michael	89,591.48	Klassen, Laura	106,033.56
Hines, Tyler	131,943.58	Klippenstein, Neil	95,950.62
Hinzmann, Carter	64,113.57	Knaus, Taylor	56,086.67
Hinzmann, Gary	125,290.27	Ko, James	66,793.25
Hong, Haiying	95,950.72	Kobussen, Jemal	70,232.35
Houngbo, Serge	69,703.89	Kochylema, Santanna	65,100.32
Hovind, Myrna	131,943.54	Konanz, Lynette	90,032.40
Howatt, Wendy	96,678.51	Konechny, Lorraine	95,542.21
Hubbard, Lanny	56,557.21	Korchinski, Donna	83,475.70
Humphreys, Mark	117,147.98	Korpu, Jawahar	89,294.01
Hunchak, Justine	104,157.27	Koshman, Nathan	117,893.32
Hutchings, Robert	80,722.50	Kosior, Cassey	56,550.72
Idholo, Eniwo	60,200.21	Koteck, Marvin	115,502.54
Ihemelu, Chibuike	65,453.04	Koung Mbamba, Farida	59,540.04
Inocalla, Clark	78,331.30	Kraft, Evan	107,273.16
Ipanag, Harold	73,381.27	Krusk, Leah	103,501.40
Isbister, Ashley	71,776.25	Kubavat, Hector	80,047.42
Iturralde, Jim	111,542.42	Kumar, Praveen	71,499.76
Jacob, Roshin	69,590.27	Kumar, Subhash	93,730.50
Jamil, Muhammad	108,729.03	Kurian, Bestin	97,237.39
Jamil, Muhammad	79,149.03	Kurkula, Ivan	89,166.32
Jamil, Raheel	99,625.30	Kuz, Jennifer	90,585.17
Jangi Kalat, Amir	94,070.48	Kyei, Kwaku	131,943.58
Jani, Kaushalkumar	87,848.31	Laberge, Stephanie	145,040.53
Jaster, Nicole	104,347.77	Laborte, Zoe John	68,842.24
Javed, Faisal	86,379.75	Labrador, Yazmin	130,176.29
Jensen, Chris	107,734.49	Lagrimas, Rodolfo	83,112.03
Jerry, Jessy	118,924.69	Lague, David	73,073.04
Jewsbury, Kirsty	94,062.87	Laing, David	113,587.42
Jeyachandran, Manoj Sakthi Kumar	102,157.59	Lam, William	112,352.71
Jibodu, Adedoyin	94,721.13	Lamadrid, Leonel	81,568.07
John, Manu	64,174.10	Langman, Joseph	63,489.36
John, Priji	106,980.96	Lao, Andrea	55,159.09
Johnson, Alexander	84,707.95	Larnyoh, Joy	106,147.33

Larson, Kayla	95,318.22	Mengell, Philip	117,444.74
Laughren, Brett	104,183.62	Mervitz, Jessica	88,291.27
Lawrence, Paul	145,412.64	Michael, Yonatan	104,969.01
Lazar, Sharlet	79,072.41	Michaels, Scott	112,932.61
Leflar, Nicole	145,043.37	Mihalicz, Adam	104,680.58
Lestage, Valerie	104,598.37	Millar, John	121,885.09
Liggett, Jason	224,610.26	Millions, Adam	106,382.20
Limbachia, Maulin	59,768.46	Millions, Derek	86,921.60
Lindenbach, Jennifer	162,823.85	Mistry, Jasmit	107,384.45
Lintott, Nicole	84,488.39	Mitchell, Owen	73,130.18
Lipinski, Bradley	131,943.43	Mittton, Carolyn	63,874.05
Lipinski, Crystal	108,677.44	Mohamed, Sherif	131,943.58
Little, David	119,873.26	Mohammed, Azharuddin	141,436.42
Lizee, Erik	159,466.01	Mohan, Isha	61,988.35
Locke, Christopher	132,102.47	Molnar, Brent	132,329.07
Longman, Dan	109,762.37	Morhart, Randy	107,362.64
Lopes, Brian	70,064.02	Mravnik, Aaron	91,593.73
Lorenc, Michal	119,690.07	Mudry, Brenda	73,467.92
Loucks, Darryl	114,760.76	Mula, Aaron	191,777.60
Louko, Mark	80,371.66	Mulamalla, Hima Bindu	103,879.78
Lu, Jiongyun	111,888.06	Murray, Kathryn	67,241.80
Lucas, Matthew	96,614.58	Musa, Timothy	103,452.79
Lund, Michael	92,079.49	Mutschler, Shannon	141,734.66
Ly, Lillian	181,258.12	Muyco, Leoj Phil	120,413.59
MacFarlane, Angela	56,010.61	Myles, Darren	175,342.66
Madnani, Ravi	106,870.45	Nagel, Sherri	108,604.30
Madole, Terry	117,325.26	Najumudeen, Ashifa	79,172.85
Mahmood, Asif	84,491.34	Nalluri, Lakshmi Chaitrika	96,529.80
Mai, Uyen	67,179.15	Nanda, Kuldeep Kaur	68,403.51
Maknoja, Asim	61,300.92	Naskar, Sourav	85,653.62
Makwana, Gaurang	70,098.09	Nation, Jennifer	64,903.13
Malgapo, Mark	115,305.44	Navarro, Danica	130,091.97
Manalo, Darwin	92,203.03	Nayyer, Mohit	94,402.83
Mangrolia, Shilpa	56,872.27	Ndulue, Alexander	82,226.93
Mann, Alita	65,913.17	Ndulue, Stephanie	81,718.95
Mann, Gregory	117,360.70	Nesir Zghoul, Ahmad	76,334.01
Manuel, Cesar	102,935.60	Nicolson, Kent	73,137.67
Manz, Dallas	126,579.49	Nikolaeva, Ekaterina	101,512.58
Mapile, Mischelle	68,576.28	Ninalowo, Busuyi	50,714.08
Maredia, Robinsali Nasruddin	73,512.61	Nizam, Begam Reshma	96,361.47
Marsh, Paul	50,285.87	Nolasco, John Mark	83,010.87
Marshall, Ross	97,698.11	Nsofor, Anthony	102,020.05
Martens, Morgan	140,168.19	Nwanguma, Chigozie	52,094.53
Masute, Taranjit	79,504.53	Nwokocha, George	61,671.89
Matchett, Hayden	93,804.61	Obi-Ezumah, JaneFrances	115,406.99
Matcyk, Kane	50,194.62	Odeniyi, Ebunoluwa	101,508.57
Matt, Danielle	94,869.88	Odusanya, Joel	68,548.80
Mba, Adaobi	86,741.57	Ogunleye, Samuel	63,536.73
McCann, Shawn	122,649.34	Oh, Sangtaek	50,474.39
McDonald, Carrie	77,011.08	Oke, Mercy	96,230.93
McElligott, Sean	101,085.30	Okrainetz, Tyrone	112,757.89
McGeough, Margo	94,843.39	Okyere, Ivan	93,642.64
McKay, Sherry	63,983.28	Olaleye, Rukayat Tola	83,571.40
McKenzie, Ranae	144,110.43	Olatunji, Opeyemi	124,003.27
McLean, Terra	95,998.38	Olshewski, Keith	100,805.85
McLennan, Carla	59,502.36	Olson, Chad	90,171.91
McMurdo, Steven	90,403.92	Olukunle, Taiwo	91,946.12
Mehta, Gautam	131,943.46	Oluleye, Olumide	105,757.35
Mehta, Heer	70,065.62	Olynick, Neil	131,943.47
Meier, Jarvis	108,919.77	Omoyinmi, Olubukola	80,262.10
Mellor, Sean	80,501.99	Omubo-Pepple, Atonyesigha	83,196.67

Oni, Adedamola	91,720.10	Paulhus, Chase	75,223.51
Onile, Oluwatoyin (Deborah)	68,955.27	Paulson, Steven	103,075.48
Onimago, Segilolia	52,351.68	Pearce, Rhonda	126,931.65
O'Reilly, Roderick	70,515.83	Pekrul, Shaun	122,651.95
Orekoya, Kehinde	109,205.26	Pellazo, Leo Raymond	81,953.29
Oropo, Olamide	74,535.07	Perez Paredes, Jorge Santiago	52,132.26
Orser, Raeanna	55,408.67	Perolino, Neil	83,898.57
Owoeye, Temitope	72,478.87	Perras, Brenda	98,959.24
Owokoniran, Shola	77,674.71	Petersen, Wayne	80,722.52
Owolabi, Temilade	74,092.55	Peterson, Scot	109,306.92
Owusu, Tracy	51,766.67	Petriew, Jennifer	133,828.97
Oyemade, Olutomi	80,639.85	Phillips, Jeff	125,087.82
Oyieyo, Barnabas	109,566.45	Pinilla Cubides, Yeni Adriana	78,036.30
Paca, Kristalyn	66,262.21	Poitras, Donald	91,854.00
Panchal, Rajan	77,679.36	Poliquin, Vincent	108,207.06
Pandya, Jimit	58,384.02	Ponda, Hardik	94,776.77
Pandya, Mandar	76,944.69	Ponsaran, Monchie	107,534.84
Pandya, Vyomal	108,725.55	Popowich, Cheryl	104,598.48
Panesar, Rupj	121,905.26	Porter, Shauna-Gay	110,881.18
Panneerselvam, Suma	117,800.53	Prashar, Bhuvnesh	68,222.10
Pansuria, Henaben	90,806.14	Prejola, Gilbert	76,645.57
Papp, Randy	121,595.68	Procyshe, Trevor	110,253.86
Paquet, Daniel	105,043.56	Puri, Nishi	81,230.52
Parbat, Aashish	88,359.49	Quach, Andrew	95,554.72
Parisone, Michele	95,078.20	Quebido, Jennifer	79,085.40
Parker, Natasha	58,142.93	Quinnett Bobetsis, Michele	118,849.44
Parmar, Nikhilkumar	102,372.41	Quraishi, Ahsan	107,937.57
Parmar, Vaishaliben	72,831.37	Quraishi, Farah	51,530.44
Parry, Parry	83,292.35	Radfelder, Stacy-Lee	85,013.11
Parulan, Eliazer Rodel	74,176.73	Raghani, Zeel	63,853.73
Patel, Anirudhkumar	91,545.05	Rahman, Faizur	79,596.56
Patel, Bhadresh	81,828.58	Raj, Adhin	93,391.58
Patel, Bhavini	71,787.05	Ramiz, Rashique	94,385.56
Patel, Chirayu	79,009.36	Rapchalk, Jason	132,416.48
Patel, Dipen	92,540.16	Rashid, Asim	121,065.10
Patel, Drashti	77,954.39	Rathore, Priyanka	104,887.17
Patel, Harnisha	55,396.09	Rathwell, Rob	127,924.85
Patel, Keyur	95,174.14	Raveendran Pillai, Rakesh	91,218.09
Patel, Krupalkumar	84,192.88	Raza, Amir	108,604.31
Patel, Mauleshkumar	72,667.06	Razaq, Abdul	115,285.87
Patel, Meet	50,163.62	Read, Marcus	89,171.65
Patel, Mihirkumar	104,651.06	Reddick, Jennifer	113,679.27
Patel, Nileschkumar	90,217.47	Reece, David	95,950.70
Patel, Nilkumar	77,867.23	Reilly Redler, Angeleen	129,151.55
Patel, Nisarg	80,702.58	Reimer, Brian	97,025.97
Patel, Niyati	60,257.75	Reineke, Wayne	120,052.98
Patel, Prahars	75,759.51	Reyes, Trisha	87,604.72
Patel, Priyanka	52,169.09	Ria, Eisen	102,239.64
Patel, Rakeshkumar	115,189.23	Richard, Marnie	125,806.68
Patel, Ritesh	73,698.37	Richardson, Dana	129,141.81
Patel, Sahil	79,015.55	Riche, Kailey	107,770.64
Patel, Shiv	79,707.79	Roadhouse, Mathew	92,744.42
Patel, Shrey	56,138.30	Robb, Shaun	111,278.95
Patel, Smit	75,620.21	Roberts, Gennine	104,631.41
Patel, Smith	75,344.78	Robinson, Trevor	138,646.94
Patel, Tejal	69,662.79	Roden, Amanda	96,608.63
Patel, Vatsalkumar	67,124.75	Rodriguez Yanez, Maria	71,587.66
Patel, Viraj	68,291.32	Roesch, Wilfred	96,117.77
Patel, Vrushtiben	51,644.59	Romana, Sukhdeep	81,164.32
Patel, Yashkumar	88,828.56	Ronderos, Andres	108,416.47
Patterson, Troy	71,986.21	Roth, Adam	69,786.27

Ruiz Guzman, Wilson	78,231.13	Singh, Karanvir	104,199.87
Rust, Jessica	122,651.96	Singh, Manmeet	122,887.22
Sabandal, Maria Kathreena	121,677.66	Singh, Satinder	97,033.20
Sabir, Irfan	89,304.51	Singkala, Joy	74,537.72
Sagun, Lamberto	86,931.92	Skalicky, Curtis	132,930.05
Sahota, Sukhmendip	124,247.33	Skinner, Dean	116,207.10
Saint, Paul	103,603.69	Sloman, Paul	130,500.86
Sam-Brew, David	88,886.35	Smith, Gord	114,310.60
Sandhu, Kulbir	78,932.05	Smith, Richard	83,620.06
Sandrino, Rene	82,877.05	Smythe-McArthur, Savanna	54,591.55
Sapitanan, Marugerald	75,159.81	Snell, Amanda	122,657.12
Sauer, Stephanie	129,662.11	Snyder, Dustin	94,680.92
Savani, Dhruvil	64,533.55	Soni, Rachit	84,417.43
Sawatzky, Matthew	99,863.89	Sopitan, Florence	64,070.68
Sawchyn, Corey	108,639.00	St Yves, Guy	104,598.48
Sawyer, Emmanuel	100,575.24	Stamatinos, Jordan	97,687.84
Sax, Peter	106,921.97	Stephens, Sean	101,805.69
Schachtel, Rowan	137,290.49	Stepp, Quinn	95,443.88
Schaffer, Corey	84,674.84	Stilborn, Gina	141,504.72
Scharfenberg, Leslie	104,506.24	Stomp, Kim	85,810.14
Schmidt, Douglas	90,219.10	Stone, Joel	101,103.85
Schmidt, Karen	119,452.45	Strawford, Randy	99,031.14
Schriwastava, Ankur	95,297.61	Sujoldzic, Alen	119,917.09
Schultz, Calvin	105,055.70	Supynuk, Mckenzie	63,751.69
Schultz, Michael	99,625.22	Sutherland, William	89,170.96
Schulz, Emele	65,232.00	Swystun, Joanne	55,451.74
Scutchings, Roland	87,046.94	Szabo, Dale	131,943.50
Seitz, Jordan	77,184.68	Tadakapalli, Karthik	78,416.37
Sekhon, Khushdeep	81,490.29	Taiwo, Adesola	103,221.41
Selinger, Melissa	89,511.35	Tam, Minoah	102,896.22
Selinger, Paul	131,573.61	Tan, Betina	64,498.31
Selinger, Terry	60,004.77	Tanveer, Faisal	108,607.35
Semasa-Talabi, Adetoro	93,338.35	Taoreed, Zainab	98,666.15
Semenoff, Sean	95,498.04	Taylor, Brett	65,143.11
Seru, Malakai	100,389.49	Tejani, Pritkumar	75,703.47
Sesula, James	105,420.62	Tessier, Taneesha	66,459.46
Shah, Bhavya	57,434.85	Thacyk, Lorri	192,756.61
Shah, Binal	79,638.34	Thacyk, Mark	122,768.76
Shah, Dishant	57,833.28	Thacyk, Randal	131,908.94
Shah, Nishant	55,543.46	Thakkar, Shitalben	63,738.74
Shah, Pooja	55,623.16	Thakur, Vaneet	72,909.20
Shaik, Shakeel	74,518.23	Thiessen, Corey	109,266.40
Shankarappa, Sandeep	96,366.96	Thomas, Justin	145,040.50
Sharma, Aniket	91,330.42	Thompson, Kevin	71,420.00
Sharma, Karan	116,416.23	Tiro, James Carl	70,313.77
Sharma, Radhika	133,359.89	Tochor, Barry	89,998.18
Sharma, Yetendra	76,409.12	Toews, Jennifer	108,613.78
Shau, Moumita	80,249.90	Tompkins, Megan	61,085.91
Shipley, Leah	145,040.54	Tongco, Jomer	71,966.92
Shukla, Ankita	105,629.53	Tremblay, Cody	139,431.62
Siddique, Md Nurul Afser	67,908.55	Tripathy, Ananda	93,045.16
Siddique, Muhammad Imtiaz	106,028.01	Tucker, Marsha	115,670.80
Silver, Robin	131,943.32	Turcotte, Stevin	99,180.87
Simbulan, Jasper	70,425.33	Tyagi, Yuvank	67,480.24
Simons, Doug	83,254.81	Ubongen, Juanito	81,412.79
Singh, Arshdeep	73,492.34	Uhumagho, Osaretin	115,577.25
Singh, Gurjant	89,207.61	Umatiya, Munafbhai	62,022.03
Singh, Harkaran	97,061.50	Vaidya, Ujwal	70,142.63
Singh, Harnek	76,902.19	Van Dyk, Andrew	114,310.71
Singh, Iqbal	100,451.82	Van Meppelen, Alexander	87,103.84
Singh, Jaswinder	83,171.58	VanDeSype, Lucas	66,270.07

Vanhouwe, Jesse	68,420.86
Vaxvick, Kevin	142,143.61
Veninata, Bernadette	75,252.79
Villanueva, Christine	66,271.21
Villanueva, Ryan	89,487.57
Vincent, Sony	89,020.01
Viray, John	76,485.79
Vocalan, Francis	91,241.41
Wale, Roxanne	79,404.84
Wallington, Melissa	57,595.83
Walz, Jason	144,408.02
Warnes, Jason	120,656.50
Watson, Shawndra	91,428.36
Weisbeck, Bobby	96,537.24
Werner, Christopher	103,481.68
Whelan, Kevin	105,626.60
Whitfield, Carmen	74,933.27
Wiebe, David	79,889.70
Willoughby, Breanne	62,829.12
Wilyman, Jordin	60,736.00
Winnicki, Krista	89,511.39
Wohlberg, Mike	97,029.88
Wolitski, Stacy	145,040.48
Wolk, Brennan	70,567.85
Wong, Michael	142,908.55
Woods, Rhonda	61,779.13
Wright, Jason	77,839.88
Wright, Michael	96,712.62
Yao, Jian	81,996.54
Yauck, Rodney	116,654.47
Yeudall, Candice	88,008.42
Yocte, Emmanuel	88,104.12
Young, Shauna	187,915.99
Yuen, Simon	79,726.91
Yusuf, Habib	85,040.66
Zaman, Shafi	104,598.49
Zanger, Karen	79,171.96
Zentner, Cory	109,000.86
Zhan, Junsheng	109,903.61
Zhang, Hong	88,007.50
Zhang, Zhaoxiang	95,148.35
Zheng, Lu	109,229.37
Ziolkowski, Alan	84,905.26
Zorn, Aaron	99,368.23
Zorn, Crystal	106,556.49
Zougbor, Julius	112,508.45
Zwirsky, Nikki	87,268.96

Goods and Services

Listed payees who received \$50,000 or more for the provision of goods and services, including office supplies, communications, contracts and equipment.

101145025 Saskatchewan Ltd.	223,378.72
101151129 Saskatchewan Ltd.	160,727.18
3sHealth	3,177,739.77
Accenture Inc.	1,128,515.22
Affinity Staffing Inc.	950,877.27
Akkodis Canada Inc.	843,790.74
AlayaCare Inc.	3,349,599.98
Altera Digital Health Inc.	6,843,329.92
ARC Business Solutions Inc.	2,499,587.11
Axiell ALMCanada Inc.	168,647.84
BDM Healthware Inc.	2,650,449.81
Becton Dickinson and Company	271,622.98
Brown Communications Group	118,720.00
Canada Post Corporation	156,804.93
Canada Revenue Agency	593,715.26
Canadian Bank Note Company Ltd.	264,800.99
Canadian Pharmacists Association	150,353.46
Cattan Technologies Inc.	836,050.79
CCA Financial Company	68,844.25
CDW CANADA	1,588,544.11
CGI ISMC Inc.	72,128.00
Cisco Systems Capital Canada Co.	193,373.24
Civica Solutions Canada Inc.	1,274,716.47
Clutch Solutions Canada Ltd.	82,139.40
Colliers McClocklin Real Estate Corp.	1,060,684.81
Compugen Inc.	959,769.70
Computrition, Inc.	503,400.22
Convergint Technologies Ltd.	74,912.04
Cornwall Centre Inc.	1,735,399.43
Crown Shred & Recycling	50,535.99
CXtec	101,580.81
Dasro Consulting Inc.	311,568.81
Data Communications Management	169,896.77
Dawson Services Ltd.	227,878.80
Dell Canada Inc.	82,776.20
Dell Financial Services Canada	173,141.33
Delta Regina	62,881.80
DLS Technology Corp.	669,685.10
EBW Legal Professional Corporation	76,991.98
Elite Information Systems and Consulting Inc.	849,690.71
Endless Blue Sky Communication Solutions Inc.	267,268.40
Enterprise Rent A Car Canada Company	560,892.60
ESTI Consulting Services	4,813,150.33
F12.Net	1,063,197.91
FCI Accelerated Solutions Inc.	76,378.24

Focus Systems Inc.	162,760.24	Quantitative Medical Systems Inc.	384,979.73
Gartner Canada, Co.	266,741.93	Quest Software Canada Inc.	77,733.52
GDI Services (Canada) LP	76,231.57	Receiver General of Canada	24,121,700.23
Grand & Toy	1,199,730.31	Regina Civic Employees Superannuation & Benefits Plan	127,354.15
Guillevin International Co.	96,151.19	Reif Consulting Inc.	935,107.09
Harvard Developments	115,681.15	Rolling Wave Consulting Inc.	253,039.92
HBI office plus Inc.	373,332.88	S I Systems	1,107,001.10
Hillman Audio Video Incorporated	250,472.50	Sabtronics Telecommunications Corporation	50,367.92
Hilltop Partner Network Inc.	140,524.00	Sagefrog Solutions Inc.	52,950.00
Horizon	609,786.22	SAP Canada Inc.	52,650.00
Hyland Software Canada ULC	595,492.73	SAS Institute (Canada) Inc.	354,103.50
IBM Canada Ltd.	1,460,798.85	Saskatchewan Government Employees Union	1,704,109.62
Imprivata, Inc.	601,172.36	Saskatchewan Health Authority	208,038.59
Infor (Canada), Ltd.	263,932.62	Saskatchewan Workers' Compensation Board	873,300.00
Informatica LLC	284,427.36	SaskPower	184,017.62
Inverness Consulting	411,615.60	SaskTel	15,715,125.47
InVita Healthcare Technologies	99,975.00	SCC Soft Computer	2,066,863.82
iQMetrix Software Development Corp.	650,990.13	SHEPP	2,137,538.44
ITI Tech Recruiters Inc.	62,535.91	Softchoice Corporation	2,800,683.43
Lab Ware Inc.	121,128.32	SRG Security Resource Group Inc.	2,539,681.16
Lexmark Canada Inc.	909,396.61	Stantec	312,196.50
LinkedIn	80,897.73	Synnapex Inc.	2,022,148.02
LMG Consulting	104,327.85	Tectonic Advisory Services Inc.	234,989.28
Lumeca	1,354,225.60	Teema Solutions Group Inc.	605,615.26
M&A IT TECH Inc.	3,980,098.74	Telus Health Solutions Inc.	4,057,417.69
Macaranas Cleaning Limited	82,001.97	Terranova Worldwide Corporation	59,038.88
Marsh Canada Limited	154,127.26	The Titan Group	66,621.10
McLean & Company	192,614.03	The Wireless Age	55,052.35
Micro Focus Software Solutions Canada Co.	137,182.13	Think Research Group	603,640.12
Microage	124,876.12	Tundra Technical Solutions	490,337.75
Microsoft Canada Co.	24,490,147.14	Unilogik Systems Inc.	120,410.21
MicroStrategy Services Corporation	136,015.22	Verito Inc.	79,500.00
Minister of Finance	124,503.10	VIVVO Application Studios Ltd.	178,080.00
Minister of Finance - PST	872,020.52	Vocera Communications, Inc.	418,792.50
Ministry of Justice and Attorney General	101,171.76	vTech Group Solution Ltd.	383,510.00
Ministry of SaskBuilds and Procurement	132,870.28	WBM Office Systems	3,140,428.41
MLT Aikins	188,719.11	Workiy Inc.	59,850.00
Nedco-Div. of Rexel Canada Electrical Inc.	77,768.97	Xenex Consulting Inc.	427,025.91
OCI Inc.	876,012.09		
Oracle Canada ULC	3,118,294.97		
Orion Health Limited	613,869.15		
Paradigm Consulting Group Inc.	281,749.06		
Payara Services Ltd.	178,370.00		
PC Place	463,502.15		
Philips Healthcare	5,413,072.72		
PICIS Clinical Solutions Inc.	1,920,766.99		
Powerland Computers	141,632.73		
Public Employees - Disability Income Plan	462,831.88		
Public Employees - Pension Plan	9,894,550.26		
Public Employees - Group Life Insurance	410,560.48		
Purolator Inc.	50,485.27		
QHR Technologies Inc.	243,888.44		

