



SAN DIEGO COUNTY  
REGIONAL AIRPORT AUTHORITY  
**EXECUTIVE COMMITTEE**

Item No.  
**6**

Meeting Date: **AUGUST 27, 2012**

**Subject:**

**Pre-Approval of Travel Requests and Approval of Business and Travel Expense Reimbursement Requests for Board Members, the President/CEO, the Chief Auditor and General Counsel**

**Recommendation:**

Pre-approve Travel Requests and Approve Business and Travel Expense Reimbursement Requests.

**Background/Justification:**

Authority Policies 3.30 (2)(b) and (4)(b) require that business expenses reimbursements of Board Members, the President/CEO, the Chief Auditor and the General Counsel be approved by the Executive Committee and presented to the Board for its information at its next regularly scheduled meeting.

Authority Policy 3.40 (2)(b) and (3)(b) require that travel expense reimbursements of Board Members, the President/CEO, the Chief Auditor and the General Counsel be approved by the Executive Committee and presented to the Board for its information at its next regularly scheduled meeting.

The attached reports are being presented to comply with the requirements of Policies 3.30 and 3.40.

**Fiscal Impact:**

Funds for Business and Travel expenses are included in the FY 2012 Budget.

**Environmental Review:**

- A. This Board action is not a project that would have a significant effect on the environment as defined by the California Environmental Quality Act (CEQA), as amended. 14 Cal. Code Regs. §15378. This Board action is not a "project" subject to CEQA. Cal. Pub. Res. Code §21065.
- B. California Coastal Act Review: This Board action is not a "development" as defined by the California Coastal Act. Cal. Pub. Res. Code §30106.

Page 2 of 2

**Equal Opportunity Program:**

Not applicable

**Prepared by:**

TONY RUSSELL  
DIRECTOR, CORPORATE SERVICES/AUTHORITY CLERK

# **TRAVEL REQUESTS**

**THELLA F. BOWENS**

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY**  
**OUT-OF-TOWN TRAVEL REQUEST**

**GENERAL INSTRUCTIONS:**

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: BU6  
Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 07/11/12 PLANNED DATE OF DEPARTURE/RETURN: 07/19/12 / 07/20/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip-- continue on extra sheets of paper as necessary):**

Destination: Seattle, WA Purpose: Alaska Airlines Meeting  
Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ 500.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ 100.00
<b>B. LODGING</b>	<b>\$ 250.00</b>
<b>C. MEALS</b>	<b>\$ 75.00</b>
<b>D. SEMINAR AND CONFERENCE FEES</b>	<b>\$ 0.00</b>
<b>E. ENTERTAINMENT (If applicable)</b>	<b>\$ 0.00</b>
<b>F. OTHER INCIDENTAL EXPENSES</b>	<b>\$ 0.00</b>
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ 875.00</b>

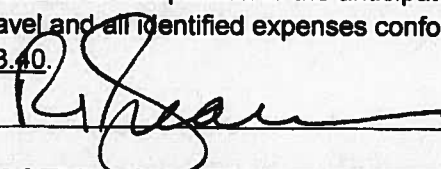
**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: July 11, 2012

**CERTIFICATION BY ADMINISTRATOR** (Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

- 1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
- 2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
- 3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature:  Date: 7.12.12

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

I, \_\_\_\_\_, hereby certify that this document was approved  
(Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
by the Executive Committee at its \_\_\_\_\_ meeting.  
(Leave blank and we will insert the meeting date.)

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
OUT-OF-TOWN TRAVEL REQUEST**

**GENERAL INSTRUCTIONS:**

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella Bowens Dept: 6

Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor

All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 6/27/12 PLANNED DATE OF DEPARTURE/RETURN: 8/11/12 / 8/16/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip- continue on extra sheets of paper as necessary):**

Destination: Arlington, VA

Purpose: Attend the ACI-NA Public Safety & Security Fall Conference, and TSA Meetings

Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

**A. TRANSPORTATION COSTS:**

- AIRFARE \$ 728.00
- OTHER TRANSPORTATION (Taxi, Train, Car Rental) \$ 200.00

B. LODGING \$ 929.50

C. MEALS \$ 500.00

D. SEMINAR AND CONFERENCE FEES \$ 725.00

E. ENTERTAINMENT (If applicable) \$

F. OTHER INCIDENTAL EXPENSES \$ 100.00

**TOTAL PROJECTED TRAVEL EXPENSE \$ 3,182.50**

**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature: Thella A. Bowens Date: 28 June 2012

**CERTIFICATION BY ADMINISTRATOR** (Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature: R. Sean Date: 6-29-12

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

I, \_\_\_\_\_, hereby certify that this document was approved  
(Please leave blank. Whoever clerk's the meeting will insert their name and title.)

by the Executive Committee at its \_\_\_\_\_ meeting.

(Leave blank and we will insert the meeting date.)

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
OUT-OF-TOWN TRAVEL REQUEST**

**GENERAL INSTRUCTIONS:**

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella Bowens Dept: Exec Office BU6  
 Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 08/08/12 PLANNED DATE OF DEPARTURE/RETURN: 08/31/12 / 08/31/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip— continue on extra sheets of paper as necessary):**

Destination: Dallas, TX Purpose: Meeting with American Airlines at Headquarters to discuss AA presence at SAN and One World Alliance issues

Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ <u>850.00</u>
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ _____
B. LODGING	\$ _____
C. MEALS	\$ _____
D. SEMINAR AND CONFERENCE FEES	\$ _____
E. ENTERTAINMENT (If applicable)	\$ _____
F. OTHER INCIDENTAL EXPENSES	\$ _____
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ <u>850.00</u></b>

**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature: [Signature] Date: 8.8.12

**CERTIFICATION BY ADMINISTRATOR** (Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature: [Signature] Date: 8 Aug 2012

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

I, \_\_\_\_\_, hereby certify that this document was approved  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 by the Executive Committee at its \_\_\_\_\_ meeting.  
 (Leave blank and we will insert the meeting date.)

# **EXPENSE REPORTS**



**THELLA F. BOWENS**

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
TRAVEL EXPENSE REPORT**

*(To be completed within 30 days from travel return date)*

TRAVELER: Thella F. BOWENS DEPT. NAME & NO. Executive Office BU6  
 DEPARTURE DATE: 7/15/2012 RETURN DATE: 7/18/2012 REPORT DUE: 8/17/12  
 DESTINATION: Washington, DC

*Please refer to the Authority Travel and Lodging Expense Reimbursement Policy, Article 3, Part 3.4, Section 3.40, outlining appropriate reimbursable expenses and approvals. Please attach all required supporting documentation. All receipts must be detailed, (credit card receipts do not provide sufficient detail). Any special items should be explained in the space provided below.*

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
		7/15/12	7/16/12	7/17/12	7/18/12				
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	601.60								0.00
Conference Fees (provide copy of flyer/registration expenses)									0.00
Rental Car*									0.00
Gas and Oil*									0.00
Garage/Parking*									0.00
Mileage - attach mileage form*									0.00
Taxi and/or Shuttle Fare (include tips pd.)*		68.00	16.00	8.00	71.76				163.76
Hotel*		342.36	342.36	342.36					1,027.08
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (Include tips pd.)	Breakfast*			22.25	3.78				26.03
	Lunch*			23.64					23.64
	Dinner*		32.45		49.80	2.78			85.03
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality <sup>1*</sup>									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
<b>Total Expenses prepaid by Authority</b>	<b>601.60</b>	<b>442.81</b>	<b>382.00</b>	<b>422.41</b>	<b>78.32</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,325.54</b>

Explanation:	Total Expenses Prepaid by Authority	601.60
	Total Expenses Incurred by Employee (including cash advances)	1,325.54
	<b>Grand Trip Total</b>	<b>1,927.14</b>
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	601.60
	Due Traveler (positive amount) <sup>2</sup>	
	Due Authority (negative amount) <sup>3</sup>	1,325.54
<i>Note: Send this report to Accounting even if the amount is \$0.</i>		

I as traveler or administrator acknowledge that I have read, understand and agree to Authority policies 3.40 - Travel and Lodging Expense Reimbursement Policy<sup>4</sup> and 3.30 - Business Expense Reimbursement Policy<sup>5</sup> and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of travel expenses were incurred in connection with official Authority business and is true and correct.

<sup>1</sup> Travel and Lodging Expense Reimbursement Policy 3.40

<sup>2</sup> Business Expense Reimbursement Policy 3.30

Prepared By: \_\_\_\_\_  
 Traveler Signature: Thella F. BOWENS  
 Approved By: \_\_\_\_\_

Ext.: 2445  
 Date: 17 Aug 2012  
 Date: \_\_\_\_\_

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE** (To be certified if used by President/CEO, Gen. Counsel, or Chief Auditor)

I, \_\_\_\_\_ hereby certify that this document was approved by the Executive Committee at its \_\_\_\_\_ meeting.  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 (Leave blank and we will insert the meeting date.)

Failure to attach required documentation will result in the delay of processing reimbursement. If you have any questions, please see your department Administrative Assistant or call Accounting at ext. 2806.

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY**

**MISSING RECEIPT FORM**

Employee/Department Head must complete form below.

INTERNATIONAL  
AVIATION CLUB  
@ City Club  
for lunch mtg

Date of Purchase/Event: 7/17/2012

Description of Item/Event: Transportation (ACI-NA Headquarters to ~~LA~~ for lunch mtg)

Vendor/Event Name: Taxicab

Dollar Amount: \$8 (fare plus tip)

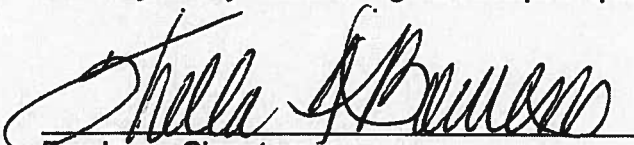
Reason for Missing Receipt: Lost receipt

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I hereby certify that the original receipt in question was lost or none was issued to me.

  
Employee Signature

17 Aug 2012  
Date

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

*Form must be attached to Petty Cash Voucher for Reimbursement*

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
OUT-OF-TOWN TRAVEL REQUEST**

**GENERAL INSTRUCTIONS:**

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- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: Exec Office BU6  
 Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 05/21/12 PLANNED DATE OF DEPARTURE/RETURN: 07/15/12 / 07/17/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip- continue on extra sheets of paper as necessary):**

Destination: Washington, D.C.

Purpose: Airport Policy Roundtable Meeting and Summer Legislative Issues Conference

Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ 650.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ 200.00
<b>B. LODGING</b>	\$ 750.00
<b>C. MEALS</b>	\$ 200.00
<b>D. SEMINAR AND CONFERENCE FEES</b>	\$ 420.00
<b>E. ENTERTAINMENT (If applicable)</b>	\$
<b>F. OTHER INCIDENTAL EXPENSES</b>	\$
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<u>\$ 2220.00</u>

**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature: [Signature] for Thella F. Bowens Date: 5/23/12

**CERTIFICATION BY ADMINISTRATOR** (Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

- 1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
- 2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
- 3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

Tony L. Russell, Authority Clerk, hereby certify that this document was approved  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 by the Executive Committee at its 5/29/12 meeting.  
 (Leave blank and we will insert the meeting date.)



Traveltrust  
 374 North Coast Highway 111  
 Encinitas, Ca 92024  
 Tel: 760-635-1700  
 Fax: 760-635-1720  
 Website: www.traveltrust.com


BOWENS/THELLA


DEPT 6

01-Jun-2012 12:31 pm

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS \*\* C4ZF56 \*\*  
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----  
 \*\*\*\*\*TICKETLESS TRAVEL INSTRUCTIONS\*\*\*\*\*  
 THIS IS AN E-TICKET RESERVATION.  
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN  
 A PORTION OF THIS TRIP MAY BE REFUNDABLE. PLEASE RETURN  
 UNUSED PORTIONS TO TRAVELTRUST FOR POSSIBLE REFUND.  
 \*\*\*\*\*  
 \*\*\*\*\*TSA GUIDANCE FOR PASSENGERS\*\*\*\*\*  
 PLEASE ALLOW EXTRA TIME FOR SCREENING AND BOARDING  
 INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE  
 DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE  
 FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV  
 \*\*\*\*\*

 15-Jul-2012 08:12am Sunday	<b>Air</b>	United Airlines	<b>Flight#</b>	546	<b>Class:</b>	S	
	<b>From:</b>	San Diego CA, USA	<b>To:</b>	Washington Dulles DC, USA			
	<b>Meal:</b>	Food For Purchase	<b>Seats:</b>	Seat9C			
	<b>Equip:</b>	Boeing 757 200 Jet	<b>Status:</b>	Confirmed			
	<b>Depart:</b>	15-Jul-2012 Sunday 08:12am	<b>Stops:</b>	0			
	<b>Arrival:</b>	15-Jul-2012 Sunday 04:03pm					
	<b>Depart - TERMINAL 1</b>						
	<b>Arrive -</b>						
	<b>United Airlines locator: C4ZF56</b>						
	<b>** AISLE SEAT CONFIRMED **</b> <b>Flight Duration: 4 hour(s) and 51 minutes</b> <b>Class of Service: Coach</b>						

 18-Jul-2012 08:20am Wednesday	<b>Air</b>	United Airlines	<b>Flight#</b>	229	<b>Class:</b>	S	
	<b>From:</b>	Washington Dulles DC, USA	<b>To:</b>	San Diego CA, USA			
	<b>Meal:</b>	Light Lunch	<b>Seats:</b>	Seat9C			
	<b>Equip:</b>	Boeing 757 200 Jet	<b>Status:</b>	Confirmed			
	<b>Depart:</b>	18-Jul-2012 Wednesday 08:20am	<b>Stops:</b>	0			
	<b>Arrival:</b>	18-Jul-2012 Wednesday 10:25am					
	<b>Depart -</b>						
	<b>Arrive - TERMINAL 1</b>						
	<b>United Airlines locator: C4ZF56</b>						
	<b>** AISLE SEAT CONFIRMED **</b> <b>Flight Duration: 5 hour(s) and 05 minutes</b> <b>Class of Service: Coach</b>						

**Other**

14-Jan-2013  
 Monday  
 San Diego CA, USA  
 RESERVATION RETAINED FOR 180 DAYS

TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 5AM-530PM PST  
 AND SATURDAY FROM 9AM-1PM PST - 760-635-1700.  
 FOR EMERGENCY AFTERHOURS SERVICE IN THE US  
 PLEASE CALL 888-221-6062 AND USE YOUR VIT CODE - S7NS0  
 PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER  
 EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00  
 THANK YOU FOR CHOOSING TRAVELTRUST...SCOTT MACKERLEY



TravelTrust  
374 North Coast Highway 101  
Encinitas, Ca 92024  
Tel: 760-635-1700  
Fax 760-635-1720  
Website: www.traveltrust.com

BOWENS/THELLA

DEPT 6

01-Jun-2012 12:31 pm

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Ticket Information

BOWENS THELLA  
Ticket#:7065642001  
Invoice#:1194639

Ticket Base Fare: 511.63  
Ticket Tax: 59.97  
Total Ticket Amount: 571.60

Electronic: YES

SERVICE FEE DOCUMENT #: 0575459068 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN [REDACTED]

601.60

W Washington DC  
 515 15th Street, NW  
 Washington, DC 20004  
 202-661-2400 / 202-661-2425  
 http://www.whotels.com/



**HOTELS**

<b>Bowens, Thella</b>	<b>Page Number</b>	<b>1</b>	<b>Invoice Nbr</b>	<b>1000066998</b>
<b>Po Box 82776</b>	<b>Guest Number</b>	<b>243003</b>	<b>Arrive Date</b>	<b>07-15-2012</b>
<b>San Diego, CA 92138-2776</b>	<b>Folio ID</b>	<b>A</b>	<b>Depart Date</b>	<b>07-18-2012</b>
	<b>No. Of Guest</b>	<b>2</b>		
	<b>Room Number</b>	<b>821</b>		
	<b>Time</b>	<b>07-18-2012 06:20</b>		

**Invoice**

<b>Date</b>	<b>Reference</b>	<b>Description</b>	<b>Charges</b>	<b>Credits</b>
07-15-2012	RT821	Room Charge	\$299.00	} 342.36
07-15-2012	RT821	Occupancy/Tourism	\$43.36	
07-16-2012	RT821	Room Charge	\$299.00	} 342.36
07-16-2012	RT821	Occupancy/Tourism	\$43.36	
07-17-2012	7199	J&G Steakhouse	\$22.25	- See attached
07-17-2012	RT821	Room Charge	\$299.00	} 342.36
07-17-2012	RT821	Occupancy/Tourism	\$43.36	
07-18-2012	AX	American Express		\$-1,049.33
		<b>** Total</b>	<b>\$1,049.33</b>	<b>\$-1,049.33</b>
		<b>** Balance</b>	<b>\$0.00</b>	

0.00  
 0.00  
 0.00  
 0.00  
 0.00

Signature \_\_\_\_\_

W Washington DC  
 515 15th Street, NW  
 Washington, DC 20004  
 202-661-2400 / 202-661-2425  
<http://www.whotels.com/>



**HOTELS**

<b>Bowens, Thella</b>	<b>Page Number</b>	<b>1</b>	<b>Invoice Nbr</b>	<b>1000066998</b>
<b>Po Box 82776</b>	<b>Guest Number</b>	<b>243003</b>	<b>Arrive Date</b>	<b>07-15-2012</b>
<b>San Diego, CA 92138-2776</b>	<b>Folio ID</b>	<b>A</b>	<b>Depart Date</b>	<b>07-18-2012</b>
	<b>No. Of Guest</b>	<b>2</b>		
	<b>Room Number</b>	<b>821</b>		
	<b>Time</b>	<b>07-18-2012 04:30</b>		

**Information Invoice**

<b>Date</b>	<b>Reference</b>	<b>Description</b>	<b>Charges</b>	<b>Credits</b>
07-15-2012	RT821	Room Charge	\$299.00	
07-15-2012	RT821	Occupancy/Tourism	\$43.36	
07-16-2012	RT821	Room Charge	\$299.00	
07-16-2012	RT821	Occupancy/Tourism	\$43.36	
07-17-2012	7199	J&G Steakhouse	\$22.25	
07-17-2012	RT821	Room Charge	\$299.00	
07-17-2012	RT821	Occupancy/Tourism	\$43.36	
07-18-2012	AX	American Express		\$-1,049.33
		<b>** Total</b>	<b>\$1,049.33</b>	<b>\$-1,049.33</b>
		<b>** Balance</b>	<b>\$0.00</b>	

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

0.00  
 0.00  
 0.00  
 0.00  
 0.00

Signature \_\_\_\_\_





**Check Report @ J&G Steakhouse-DC**

Server: Esteban Ventura	Date: 07/17/2012
Revenue Center: J& Steak Hse	Meal-Period: Breakfast
Table Name: 17	Check Open: 7:13 AM
Cover Count: 0	Check Closed: 10:15 AM
Check #: 7199	Cashier:
Ref Number: BOWENS, THELLA A, ITEMS SPLIT FROM 7181 (J&G Steak Hse)	

Item Number	Menu Item	QTY	Amount
104015	GranBerrYogurt	1	\$10.00
133002	OJ	1	\$4.50
138011	Coffee	1	\$3.00
<b>Total Item Sales:</b>			<b>\$17.50</b>

**Service Charges:**

<b>\$ CHG TIP:</b>	<b>\$3.00</b>
<b>Total Service Charges:</b>	<b>\$3.00</b>

<b>Tax:</b>	<b>\$1.75</b>
<b>Direct Tips:</b>	<b>\$0.00</b>
<b>Total Amount Due:</b>	<b>\$22.25</b>

**Payments:**

<b>Room Charge:</b>	<b>\$22.25</b>
<b>Total Payments:</b>	<b>\$22.25</b>

**RECEIPTS FROM TRAVEL TO WASHINGTON, DC  
July 15 - 18, 2012—THELLA F. BOWENS**

TEAR HERE ---  
CUSTOMER COPY

Washington Flyer  
CAB-DR ID 823-50823  
✓ 2012-07-15 16:31  
3857205, -7726762  
2012-07-15 17:05  
3853843, -7702002  
DISTANCE 26.70  
FARE \$57.50  
TIP \$10.50  
TOTAL ✓ \$68.00

aid:  
AMERICAN EXPRESS  
3727XXXX

Washington Flyer  
(703) 841-0000

\*\*\*\*\*

←  
7/15  
airport  
to  
hotel

**0146**

Server: KEVIN D  
07/15/12 20:31, Swiped T: 51 Term: 4

CHEF GEOFF'S  
1301 Pennsylvania Ave NW  
Washington, DC 20004  
(202)464-4461  
MERCHANT #:

CARD TYPE ACCOUNT NUMBER  
AMERICAN EXPRESS XXXXXXXXXXXX  
Name: THELLA F BOWENS  
TRANSACTION APPROVED  
AUTHORIZATION #: 569414  
Reference: 0715010000146  
ANS TYPE: Credit Card SALE

CHECK: 39.49  
TIP: 7.00  
TOTAL: 46.49  
32.45

**CHEF GEOFF'S  
DOWNTOWN**

PHONE: ( ) -  
\*\*\*Duplicate Copy\*\*\*

What are Your Plans for Sunday?  
Join Us for Brunch!

CARDHOLDER WILL PAY CARD ISSUER ABOVE  
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT  
SIGNED COPY

0146 TABLE 51 #Party 1 ✓  
KEVIN D SvrCk: 16 7:50p 07/15/12

1 CRABCAKE ENTREE 24.95  
Sub Total: 35.90  
Tax: 3.59  
07/15 8:29p TOTAL: 39.49

← 24.95  
2.50 tax  
5.00 tip

Thank You!  
CHEF GEOFF'S DOWNTOWN  
202 464 4461

32.45  
7/15 dinner

CHECK # 1

**RECEIPTS FROM TRAVEL TO WASHINGTON, DC  
July 15 - 18, 2012—THELLA F. BOWENS**

The Hamilton  
200 14th Street NW  
Washington, DC 20005  
(202) 787-1000  
www.thehamiltondc.com

The Hamilton  
200 14th Street NW  
Washington, DC 20005  
(202) 787-1000

1102 Wayne T

Date: Jul16'12 12:40PM ✓  
Card Type: Amex  
Acct #: XXXXXXXXXXXX  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Trans Key: EIE006624413180  
Auth Code: 524131  
Check: 5051  
Table: 137/2  
Server: 1102 Wayne T

-----  
#1 137/1      Chk 5016      Gst 1  
                    Jul16'12 11:45AM  
-----  
1 Arnold Palmer                      2.85  
1 Green Tomatoes                    6.00  
1 Ravioli-SM                            9.00  
  
Subtotal                                17.85  
Sales Tax                                1.79  
:34PM Total                              19.64  
  
TaxCollected                            1.79

Subtotal:                                19.64  
Tip:                                        4.00  
Total:                                      23.64

Join us for  
Summer Sushi Hour  
All sushi, nigiri  
& specialty rolls - 50% off  
Every day from 3pm- 6pm  
www.the

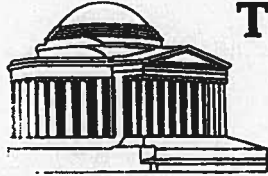


Signature  
I agree to pay above total  
according to my card issuer  
agreement.

\*\*\* Guest Copy \*\*\*

7/16 Lunch

RECEIPTS FROM TRAVEL TO WASHINGTON, DC  
July 15 - 18, 2012—THELLA F. BOWENS



TAXICAB RECEIPT

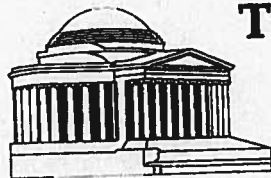
Time: 6:30 pm  
Date: 7/16

Origin of trip: hotel

Destination: Bibiana

Fare: 7.00 + tip (8) Sign: \_\_\_\_\_

7/16  
taxi



TAXICAB RECEIPT

Time: 9 pm  
Date: 7/16

Origin of trip: Bibiana

Destination: Hotel

Fare: \$8.00 Sign: \_\_\_\_\_

7/16  
taxi

**RECEIPTS FROM TRAVEL TO WASHINGTON, DC  
July 15 - 18, 2012—THELLA F. BOWENS**



\*\*\*\*\*

\*

\*\*\*\*\*

\*\*\*\*\*

Tosca  
1112 F STREET, N.W.  
Washington, DC 20004  
Tel. 202.367.1990

Tosca  
1112 F STREET, N.W.  
Washington, DC 20004  
202.367.1990

Server 22 KURT  
Order 2049 07/17/12 8:35 PM  
TABLE 10:1 Cust. 1

Date: 07/17/12 ✓  
Time: 8:33 PM  
Server: 22. KURT  
Order: 332049  
Description: Table 10:1

**\*\* TABLE SERVICE \*\***

RUGULA PEACH SALAD 16.00 ✓  
MEDITERRANEAN POMODORO 19.00 ✓  
ICE TEA 3.00 ✓

Card Type: AMEX  
Card No: XXXXXXXXXXXX  
Appr Code: 503442

Table: 38.00  
Sub-total: 38.00  
Sales Tax: 3.80

Purchases: \$ 41.80

**Total Due: 41.80**

Tip: \$ 8.00

Total: \$ 49.80

-- Private dining space available  
-- Please inquire at (202) 367-1990  
-- Visit [www.toscadc.com](http://www.toscadc.com)  
Thank You !!!

BOWENS, THELLA F

I agree to  
according

7/17 dinner

**RECEIPTS FROM TRAVEL TO WASHINGTON, DC  
July 15 - 18, 2012—THELLA F. BOWENS**

Paradies Shops - Dulles  
Washington Dulles Airport  
Dulles, Va.

ARTWATER	92721075000	
	2.65 T	
BOTAL		\$2 65
X06		\$0 13
TOTAL		\$2 78
CASH		\$3 00
CHANGE		\$0 22

1. EMS 1 ✓  
7/7/18/12 ✓ 07:16AM  
46 03 17976 KUMMEGER

Thank You for Shopping at  
The Paradies Shops  
Washington Dulles International Airport  
CELEBRATING 50 YEARS IN BUSINESS!

7/18 other meal

DU LLES AIRPORT  
CHANTILLY, VIRGINIA

9548 RABIA ✓  
-----  
CHK 5507 JUL18'12 7:24AM  
-----

1 Tall CAFFE LATTE	2.85
ADD SHOT	0.75
Subtotal	3.60
Tax	0.18
Amt Paid	<b>3.78</b>
XXXXXXXXXXXXXXXXXX	XX/XX
AMEX A3	3.78

THANKS FOR YOUR PATRONAGE  
KEVIN HAYDEN, GM  
kevin.hayden@hmshost.com  
703-572-4610

HMSHost  
Making The Travelers Day Better  
HMS Host Store Code = 5935D02

Find Us On Facebook  
[www.facebook.com/Hmshost](http://www.facebook.com/Hmshost)

YOUR ORG

7/18  
Breakfast


**RECEIPTS FROM TRAVEL TO WASHINGTON, DC**  
**July 15 - 18, 2012—THELLA F. BOWENS**

Red Top Arlington  
Cab #56

3251 Washington Blvd  
Arlington, VA  
(703) 522-3333

Date ✓ 07/18/12  
Time 06:44:02  
Distance 26.80mi  
FARE.....\$ 59.80  
EXTRAS.....\$ 0.00  
TIP.....\$ 11.96  
TOTAL.....\$ 71.76

7/18  
hotel to airport

American Express  
xxxx xxxx xxxx   
MID 445100001996  
Auth 508943  
Signature:  
  
\_\_\_\_\_

\* \* \* \* \*

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
TRAVEL EXPENSE REPORT**

*(To be completed within 30 days from travel return date)*

TRAVELER: Thella F. Bowens DEPT. NAME & NO.: Executive Office BU6  
 DEPARTURE DATE: 5/19/2012 RETURN DATE: 5/25/2012 REPORT DUE: 6/24/12  
 DESTINATION: Marina Bay Sands, Singapore

*Please refer to the Authority Travel and Lodging Expense Reimbursement Policy, Article 3, Part 3.4, Section 3.40, outlining appropriate reimbursable expenses and approvals. Please attach all required supporting documentation. All receipts must be detailed, (credit card receipts do not provide sufficient detail). Any special items should be explained in the space provided below.*

	Authority Expenses (Prepaid by Authority)	Employee Expenses								TOTALS
		SUNDAY 5/20/12	MONDAY 5/21/12	TUESDAY 5/22/12	WEDNESDAY 5/23/12	THURSDAY 5/24/12	FRIDAY 5/25/12	SATURDAY 5/18/12		
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	6,956.30									0.00
Conference Fees (provide copy of flyer/registration expenses)										0.00
Rental Car*										0.00
Gas and Oil*										0.00
Garage/Parking*										0.00
Mileage - attach mileage form*										0.00
Taxi and/or Shuttle Fare (Include tips pd.)*						45.00				45.00
Hotel*			568.92	568.92	568.92	568.92				2,275.68
Telephone, Internet and Fax*										0.00
Laundry*										0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)										0.00
Meals (include tips pd.)	Breakfast*					56.90	55.56			112.46
	Lunch*		58.98	56.90	52.41					168.29
	Dinner*			177.18	29.94					207.12
	Other Meals*									0.00
Alcohol is a non-reimbursable expense										
Hospitality <sup>1*</sup>										0.00
Miscellaneous: Baggage Fees										0.00
										0.00
										0.00
*Provide detailed receipts										0.00
<b>Total Expenses prepaid by Authority</b>	<b>6,956.30</b>	<b>0.00</b>	<b>627.90</b>	<b>803.00</b>	<b>651.27</b>	<b>670.82</b>	<b>55.56</b>	<b>0.00</b>	<b>2,808.55</b>	

Explanation:  
 FYI: No charge for registration because Thella was a keynote speaker.

<sup>1</sup>Give names and business affiliations of any persons whose meals were paid by traveler.  
<sup>2</sup>Prepare Check Request  
<sup>3</sup>Attach personal check payable to SDCRAA

Total Expenses Prepaid by Authority	6,956.30
Total Expenses Incurred by Employee (including cash advances)	2,808.55
<b>Grand Trip Total</b>	<b>9,764.85</b>
Less Cash Advance (attach copy of Authority ck)	
Less Expenses Prepaid by Authority	6,956.30
Due Traveler (positive amount) <sup>2</sup>	
Due Authority (negative amount) <sup>3</sup>	2,808.55
<i>Note: Send this report to Accounting even if the amount is \$0.</i>	

I as traveler or administrator acknowledge that I have read, understand and agree to Authority policies 3.40 - Travel and Lodging Expense Reimbursement Policy<sup>1</sup> and 3.30 - Business Expense Reimbursement Policy<sup>2</sup> and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of travel expenses were incurred in connection with official Authority business and is true and correct.

Travel and Lodging Expense Reimbursement Policy 3.40
Business Expense Reimbursement Policy 3.30

Prepared By: Ally Caldera Ext.: 2445  
 Traveler Signature: Thella F. Bowens Date: 5/25/12  
 Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE** (To be certified if used by President/CEO, Gen. Counsel, or Chief Auditor)  
 I, \_\_\_\_\_ hereby certify that this document was approved by the Executive Committee at its \_\_\_\_\_ meeting.  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 (Leave blank and we will insert the meeting date.)

*Failure to attach required documentation will result in the delay of processing reimbursement. If you have any questions, please see your department Administrative Assistant or call Accounting at ext. 2806.*



**May 19 - 25, 2012, Marina Bay Sands, Singapore**

Date	Expense	Amount	Exchange Rate	Reimburse Amount
5/21/2012	Hotel	\$ 447.26	1.272	\$ 568.92
5/21/2012	Lunch	\$ 46.37	1.272	\$ 58.98
5/22/2012	Hotel	\$ 447.26	1.272	\$ 568.92
5/22/2012	Lunch	\$ 44.73	1.272	\$ 56.90
5/22/2012	Dinner	\$ 140.06	1.265	\$ 177.18
5/23/2012	Hotel	\$ 447.26	1.272	\$ 568.92
5/23/2012	Lunch	\$ 41.20	1.272	\$ 52.41
5/23/2012	In Room	\$ 23.54	1.272	\$ 29.94
5/24/2012	Hotel	\$ 447.26	1.272	\$ 568.92
5/24/2012	Breakfast	\$ 44.73	1.272	\$ 56.90
5/25/2012	Breakfast	\$ 44.70	1.243	\$ 55.56
5/19/2012	Taxi to Airport	\$ 45.00		\$ 45.00

**Total: \$ 2,808.55**

Line items in gray scale above represent expenses shown on hotel invoice.

Type	US Dollar	Divided by	Exchange Rate	
<i>Credit card:</i>			1.272	
<i>Cash:</i>	\$ 260.00	323.15 SGD	1.243	

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY**

**MISSING RECEIPT FORM**

Employee/Department Head must complete form below.

Date of Purchase/Event: 05/22; 05/23; 05/24

Description of Item/Event: Hotel Restaurant Meal(s)

Vendor/Event Name: Rise Restaurant

Dollar Amount: \$44.73; \$23.54; \$44.73

Reason for Missing Receipt: Lost receipts - hotel has not been able to provide detailed receipts.

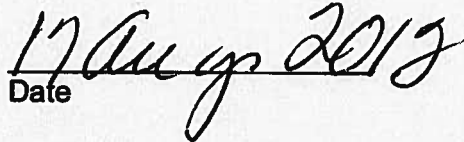
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I hereby certify that the original receipt in question was lost or none was issued to me.

  
Employee Signature

  
Date

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

*Form must be attached to Petty Cash Voucher for Reimbursement*

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
OUT-OF-TOWN TRAVEL REQUEST**

**GENERAL INSTRUCTIONS:**

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 06/Executive Office  
 Position: Board Member  President/CEO  Gen. Counsel  Chief Auditor

All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 02/16/12 PLANNED DATE OF DEPARTURE/RETURN: 05/21/12 / 05/25/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip— continue on extra sheets of paper as necessary):**

Destination: Marina Bay Sands, Singapore

Purpose: 7<sup>th</sup> ACI Asia-Pacific Regional Assembly, Conference & Exhibition an

Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

A. TRANSPORTATION COSTS:

• AIRFARE	\$ 8700.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ 200.00
B. LODGING	\$ 1680.00
C. MEALS	\$ 400.00
D. SEMINAR AND CONFERENCE FEES	\$ 600.00
E. ENTERTAINMENT (If applicable)	\$ 0.00
F. OTHER INCIDENTAL EXPENSES	\$ 100.00
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ 11680.00</b>

**CERTIFICATION BY TRAVELER**

By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature: *Thella F. Bowens* Date: 2/16/12

**CERTIFICATION BY ADMINISTRATOR**

(Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

*Tony R. Russell, Authority Clerk*, hereby certify that this document was approved by the Executive Committee at its 2/21/2012 meeting.  
(Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
(Leave blank and we will insert the meeting date.)



Traveltrust  
 374 North Coast Highway 101  
 Encinitas, Ca 92024  
 Tel: 760-835-1700  
 Fax: 760-835-1720  
 Website www.traveltrust.com

BOWENS/THELLA

DEPT 6

22-Feb-2012 3:22 pm

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS \*\* L4RWZ0  
 YOUR SINGAPORE ETICKET CONFIRMATION IS \*\* J32GVY \*\*  
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----  
 \*\*\*\*\*TICKETLESS TRAVEL INSTRUCTIONS\*\*\*\*\*  
 THIS IS AN E-TICKET RESERVATION.  
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN  
 THIS TICKET IS NON-REFUNDABLE AND MUST BE USED FOR  
 THE FLIGHTS BOOKED. IF THE RESERVATION IS NOT USED  
 OR CANCELLED BEFORE THE DEPARTURE OF YOUR FLIGHTS  
 IT MAY HAVE NO VALUE. CONTACT TRAVELTRUST BEFORE  
 YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY.  
 \*\*\*\*\*  
 \*\*\*\*\*TSA GUIDANCE FOR PASSENGERS\*\*\*\*\*  
 PLEASE ALLOW EXTRA TIME FOR SCREENING AND BOARDING  
 INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE  
 DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE  
 FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV  
 \*\*\*\*\*  
 FOR TRAVEL TO SINGAPORE  
 A US CITIZEN MUST HAVE A VALID PASSPORT  
 YOU CANNOT TRAVEL OUT OF THE UNITED STATES IF YOUR U.S.  
 PASSPORT EXPIRES WITHIN 6 MONTHS OF YOUR DEPARTURE DATE  
 \*\*\*\*\*  
 FOR EMERGENCY AFTERTHOUS SERVICE  
 WHILE IN SINGAPORE  
 PLEASE CALL 001-800-15253545  
 IF INTL AFTERTHOUR NUMBER DOES NOT WORK  
 DIAL DIRECT OR COLLECT 201-221-4462  
 \*\*\*\*\*  
 YOUR INTERNATIONAL TRAVEL MAY REQUIRE VACCINATIONS  
 PLEASE CHECK WWW.CDC.GOV FOR LATEST REQUIREMENTS

 19-May-2012 04:22pm Saturday	<b>Air</b> United Airlines	<b>Flight#</b> 6335	<b>Class:</b> W
	<b>From:</b> San Diego CA, USA	<b>To:</b> Los Angeles CA, USA	
	<b>Meal:</b> None	<b>Seats:</b> Seat:6A	
	<b>Equip:</b> Embraer 120 Turbopro	<b>Status:</b> Confirmed	
	<b>Depart:</b> 19-May-2012 Saturday 04:22pm	<b>Stops:</b> 0	
	<b>Arrival:</b> 19-May-2012 Saturday 05:11pm		

SAN-LAX OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES  
 Depart - COMMUTER TERMINAL  
 Arrive - TERMINAL 8  
 United Airlines locator: L4RWZ0  
 UA Frequent Flyer# [REDACTED]  
 \*\* EXIT ROW AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 49 minutes  
 Class of Service: Coach

 19-May-2012 09:15pm Saturday	<b>Air</b> Singapore Airlines	<b>Flight#</b> 37	<b>Class:</b> J
	<b>From:</b> Los Angeles CA, USA	<b>To:</b> Singapore, Singapore	
	<b>Meal:</b> Meals	<b>Seats:</b> Seat:15A	
	<b>Equip:</b> Airbus Jet	<b>Status:</b> Confirmed	
	<b>Depart:</b> 19-May-2012 Saturday 09:15pm	<b>Stops:</b> 0	
	<b>Arrival:</b> 21-May-2012 Monday 05:40am		

Depart - TOM BRADLEY INTL TERM  
 Arrive -  
 Singapore Airlines locator: J32GVY  
 UA Frequent Flyer# [REDACTED]  
 \*\* AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 17 hour(s) and 25 minutes  
 Class of Service: Business

 25-May-2012 04:20pm Friday	<b>Air</b> Singapore Airlines	<b>Flight#</b> 38	<b>Class:</b> J
	<b>From:</b> Singapore, Singapore	<b>To:</b> Los Angeles CA, USA	
	<b>Meal:</b> Meals	<b>Seats:</b> Seat:15A	
	<b>Equip:</b> Airbus Jet	<b>Status:</b> Confirmed	
	<b>Depart:</b> 25-May-2012 Friday 04:20pm	<b>Stops:</b> 0	
	<b>Arrival:</b> 25-May-2012 Friday 05:50pm		



TravelTrust  
 374 North Coast Highway 101  
 Encinitas, Ca 92024  
 Tel: 760-635-1700  
 Fax: 760-635-1720  
 Website: www.traveltrust.com

BOWENS/THELLA

DEPT 6

22-Feb-2012 3:22 pm

Page 2 of 2

Depart - TERMINAL 3  
 Arrive - TOM BRADLEY INTL TERM  
 Singapore Airlines locator: J32GVY  
 UA Frequent Flyer# [REDACTED]  
 \*\* AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 16 hour(s) and 30 minutes  
 Class of Service: Business

 25-May-2012 08:10pm Friday	<b>Air</b>	United Airlines	<b>Flight#</b>	6342	<b>Class:</b>	W
	<b>From:</b>	Los Angeles CA, USA	<b>To:</b>	San Diego CA, USA		
	<b>Meal:</b>	None	<b>Seats:</b>	Seat 8A		
	<b>Equip:</b>	Embraer 120 Turbopro	<b>Status:</b>	Confirmed		
	<b>Depart:</b>	25-May-2012 Friday	08:10pm	<b>Stops:</b>	0	
	<b>Arrival:</b>	25-May-2012 Friday	09:05pm			

LAX-SAN OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES  
 Depart - TERMINAL 8  
 Arrive - COMMUTER TERMINAL  
 United Airlines locator: L4RWZ0  
 UA Frequent Flyer# [REDACTED]  
 \*\* EXIT ROW AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 55 minutes  
 Class of Service: Coach

**Other**

21-Nov-2012  
 Wednesday

San Diego CA, USA  
 RESERVATION RETAINED FOR 180 DAYS

TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 5AM-530PM PST  
 AND SATURDAY FROM 9AM-1PM PST - 760-635-1700.  
 FOR EMERGENCY AFTERHOURS SERVICE IN THE US  
 PLEASE CALL 888-221-8082 AND USE YOUR VIT CODE - S7NS0  
 PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER  
 EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00  
 THANK YOU FOR CHOOSING TRAVELTRUST...SCOTT MACKERLEY

**Ticket Information**

BOWENS THELLA		
Ticket#:8744271729	Ticket Base Fare:	216.74
Invoice#:1192012	Ticket Tax:	37.86
	Total Ticket Amount:	254.60

Electronic: YES

BOWENS THELLA		
Ticket#:8744271730	Ticket Base Fare:	6270.00
Invoice#:1192012	Ticket Tax:	646.30
	Total Ticket Amount:	6916.30

Electronic: YES

SERVICE FEE DOCUMENT #: 0571993357 FEE AMOUNT: 40.00

BILLED TO: AMERICAN EXPRESS ENDING IN [REDACTED]

} \$6956.30



**MARINA BAY Sands.**  
SINGAPORE

THELLA BOWENS  
3225 NORTH HARBOR DRIVE  
SAN DIEGO CA92101  
AM

08/03/2012  
02:08 PM  
CI: FDLOHSH  
CO: FDCHANGL  
Wing/Room T3 4315  
No Party 1  
Resv No 410075568564  
Page 1 05/25/2012 10:42  
Arrival 05/21/2012  
Departure 05/25/2012  
Bill code  
Group SRCAGAC

Thank you for staying with us

DATE	REFERENCE	DESCRIPTION	\$ CHARGES	CREDITS	\$ BALANCE
05/21/2012	1812964	RISE RESTAURANT	46.37	- See page 1	46.37
05/21/2012	T3 4315	ROOM CHARGE T3 4315	380.00	447.26	493.63
		TAX1	38.00		
		TAX2	29.26		
05/22/2012	1813120	RISE RESTAURANT	44.73	Missing receipt form	538.36
05/22/2012	T3 4315	ROOM CHARGE T3 4315	380.00	447.26	985.62
		TAX1	38.00		
		TAX2	29.26		
05/23/2012	2032432	RISE - LOBBY LOUNGE	41.20	See pg 1	1026.82
05/23/2012	1743173	IN-ROOM DINING	23.54	Missing receipt form	1050.36
05/23/2012	T3 4315	ROOM CHARGE T3 4315	380.00	447.26	1497.62
		TAX1	38.00		
		TAX2	29.26		
05/24/2012	1892229	RISE RESTAURANT	44.73	See Missing receipt form	1542.35

**RECEIPTS FROM TRAVEL TO  
May 19 - 25, 2012—HELLA F. BOWENS**

UNITED OVERSEAS BANK  
CHANGI AIRPORT - T3

Sales Type: Buying Of Foreign Currency  
USD 260.00 @ 1.2430 SGD 323.15  
Total SGD 323.15

Bank Pays


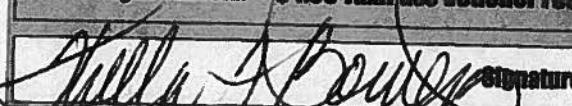
**SGD 323.15**

5/21/12 Exchange rate  
for cash transactions  
1.243

21/05/2012 05:12:02 P:352 R:7124 D9 BC  
PLEASE CHECK YOUR CASH AND TRANSACTION  
BEFORE LEAVING THE COUNTER.  
THANK YOU AND HAVE A NICE DAY.

Saturday  
5/19  
  
to  
airport

Top White Copy Passenger Receipt -- Bottom Yellow Copy Driver Voucher

 <b>Voucher</b> 1-888-Taxi-Pay 212-222-Taxi <i>The Reliable, Secure &amp; Easy Way to Pay.</i>					
Passenger: Fill Out Like Check					
Fare	Fare + Tolls & Extras				
Tip					
Sub Total	Do Not Include Fee				
	38.80				
	45.00				
SUBTOTAL: Write out in words like check. (Do NOT include Fee)					
45.00 Dollars					
Card Charged SubTotal + \$4.00 TaxiPass Voucher Fee					
 Signature					
TaxiPass Satisfaction Guaranteed \$100 Maximum Voucher Value www.TaxiPassReceipt.com customerservice@taxipass.com					
Date:	To:		From:		
Cab #:					
Voucher sold by TaxiPass, an independent 3rd party service provider. Driver does not charge, collect or receive any portion of TaxiPass.					

**RECEIPTS FROM TRAVEL TO  
May 19 - 25, 2012—THELLA F. BOWENS**

RISE RESTAURANT  
10 Bayfront Avenue  
Singapore 018956  
Tel: +65 6688 5525

Company Reg No: 200507292R  
GST Reg No: M90364464C

**TAX INVOICE**

21/5/2012 14:37

Check: 1812964      Table: 42  
TM: Joel              Cover: 2

Dine In +  
1 Veg Fried Rice      22.00  
1 Iced Tea              5.00  
1 Fiji 500 ml          9.00

Sub-Total              36.00  
10% Service Charge    3.60  
Tax (inclusive)        0.00  
Or 7% GST              2.77  
Rounding               0.00  
Gratuity/Tips          0.00  
Additional Tips        4.00

Total Due            46.37

Retail Rating

Room Chrg/Deposit    46.37  
4315 BOWENS, THELLA

GRAND TOTAL        46.37

T185 Juliet 21/5/2012 15:14

This is NOT a tax invoice if it is  
charged to the Hotel guest folio  
or city ledger

DUPLICATE RECEIPT

10 Bayfront Avenue  
Singapore 018956  
Tel: +65 6688 5568

Company Reg No: 200507292R  
GST Reg No: M90364464C

**TAX INVOICE**

23/5/2012 12:30

Check: 2032432      Table: 07  
THOSPATIA            Cover: 3

RL Dine In +  
1 Veg Fried Rice      22.00  
1 French Fries        8.00  
1 Lemon Tea           5.00

Sub-Total              35.00  
10% Service Charge    3.50  
Tax (inclusive)        0.00  
Or 7% GST              2.70  
Rounding               0.00  
Gratuity/Tips          0.00  
Additional Tips        0.00

Total Due            41.20

Retail Rating

Room Chrg/Deposit    41.20  
1315 BOWENS, THELLA

GRAND TOTAL        41.20

202 Mhing 23/5/2012 12:30

This is NOT a tax invoice if it is  
charged to the Hotel guest folio  
or city ledger

DUPLICATE RECEIPT



**RECEIPTS FROM TRAVEL TO  
May 19 - 25, 2012—THELLA F. BOWENS**

Me

10 Bayfront Avenue  
Singapore 018956

Company Reg No: 200507292R  
GST Reg No: M90364464C

TAX INVOICE

22/5/2012 21:13

=====  
Check:3657394      Table:10  
TM:Vicky            Cover:1  
=====

Dine In +	
1 Voss Still	18.00
1 Butter Lettuce	29.00
1 PRIME FILET	72.00

-----	
Sub-Total	119.00
10% Service Charge	11.90
Tax (inclusive)	0.00
Or 7% GST	9.16
Rounding	0.00
Gratuity/Tips	0.00
Additional Tips	0.00

Total Due      140.06

Retail Rating

Tips: \_\_\_\_\_

Total: \_\_\_\_\_

\_\_\_\_\_  
Room Number

\_\_\_\_\_  
Guest Name (Print)

\_\_\_\_\_  
Signature

This is NOT a tax invoice if it is  
charged to the Hotel guest folio  
or city ledger

F

Rise Restaurant  
10 Bayfront Avenue  
Singapore 018956  
Tel: +65 6688 5525

Company Reg No: 200507292R  
GST Reg No: M90364464C

TAX INVOICE

25/5/2012 11:07

=====  
Check:1814036      Table:401  
TM:Juris            Cover:2  
=====

Dine In +	
1 Breakfast Buffet	38.00

-----	
Sub-Total	38.00
10% Service Charge	3.80
Tax (inclusive)	0.00
Or 7% GST	2.93
Rounding	-0.03
Gratuity/Tips	0.00
Additional Tips	0.00

Total Due      44.70

Retail Rating

Cash	50.00
Change	5.30

GRAND TOTAL      44.70 ✓

=====  
T185 Jenny      25/5/2012 11:12  
=====

This is NOT a tax invoice if it is  
charged to the Hotel guest folio  
or city ledger



7<sup>th</sup> ACI Asia-Pacific Regional Assembly, Conference & Exhibition  
22 – 25 May 2012, Marina Bay Sands, Singapore

**Registration Form**



• Delegate Information (in BLOCK letters)

Surname (Dr. / Mr. (Ms./Mrs.) **BOWENS** First Name **THELLA**  
 Company **San Diego County Regional Airport Auth.** Job Title **President / CEO**  
 Address **3225 North Harbor Drive**  
 City / Postal Code **San Diego 92101** Country **USA**  
 Telephone **(619) 400-2445** Fax **(619) 400-2448** Email **tbowens@san.org**  
 Name of Accompanying Person

• Conference Registration Fees (US\$)

	Before 31 Mar 2012	After 31 Mar 2012	No Charge		
ACI Member	<input type="checkbox"/> US\$ 600	<input type="checkbox"/> US\$ 750	Exhibitor	<input type="checkbox"/> 1 <sup>st</sup> Rep	<input type="checkbox"/> 2 <sup>nd</sup> Rep
Accompanying Person	<input type="checkbox"/> US\$ 150	<input type="checkbox"/> US\$ 150	Conf. Incentive Prgm*	<input type="checkbox"/> 1 <sup>st</sup> Rep	<input type="checkbox"/> 2 <sup>nd</sup> Rep
Non Member	<input type="checkbox"/> US\$ 900	<input type="checkbox"/> US\$ 1,200	<input type="checkbox"/> Sponsor	<input checked="" type="checkbox"/> Speaker	<input type="checkbox"/> Media
Attend Events	<input checked="" type="checkbox"/> Welcome Reception <input checked="" type="checkbox"/> Gala Dinner		Accompanying Person's Tour	<input type="checkbox"/> 23 May	<input type="checkbox"/> 24 May
Post Event Tour	<input checked="" type="checkbox"/> Airport Tour 25 May 2012, 1.00pm – 4.30pm				
	<input type="checkbox"/> City Tour 25 May 2012, 9.00am – 5.00pm				
Special Requests	<input type="checkbox"/> Dietary requirements (Kosher, Halal, Vegetarian, etc)		<input type="checkbox"/> Disabilities (Wheelchair, etc)		

\* Please contact the Regional Office for details.

• Method of Payment - Credit Card

<input type="checkbox"/> Visa	<input type="checkbox"/> Master	<b>Bank Transfer:</b> Airports Council International HSBC 1 Queen's Rd Central, Hong Kong Account No.: 808-732341-274 Swift Code: HSBCHKH HHKH	<b>Cheque/Bank Draft:</b> Made payable to: Airports Council International Send to: Airports Council International, Unit 5, 2/F, Airport World Trade Ctr, 1 Sky Plaza Road, HKIA, Hong Kong
Name as on card:			
Credit Card No:			
Expiry Date:	Signature:		

\*\* Cancellation must be made in writing, by mail, fax or email. If notice is received before 21 April 2012, the registration fee (less a US\$150 administration fee) will be refunded. Cancellation received after this date, fee will NOT be refunded. No-shows will be charged full amount and will not be refunded. Your registration may be transferred to another person at no charge, subject to writing notification to the organizer, prior to the conference.

• Hotel Accommodation

Marina Bay Sands, Singapore	Room Type	Room Rate per room per night (Inclusive breakfast)
	Atrium Deluxe	SGD 418 + taxes <sup>1</sup>
	Club Room	SGD 580 + taxes <sup>1</sup>

<sup>1</sup> Room Rates are subject to service charge (10%) and prevailing government taxes (7%).

For booking of hotel rooms, please visit [https://resweb.passkey.com/Resweb.do?mode=welcom\\_ei\\_new&eventID=3421246](https://resweb.passkey.com/Resweb.do?mode=welcom_ei_new&eventID=3421246).

• Flight Arrangements

	Date	Time	Flight no.
Arrival	19 May	5:40am	37
Departure	25 May	4:20pm	38

**For inquiries on conference registration:**

Tel: +852 2180 9449  
 Yuki Kinjo yuki@aci-asiapac.aero  
 Natalie Tsang natalie@aci-asiapac.aero  
 Sonia Liu sonia@aci-asiapac.aero

Singapore Airlines is proud to be our official airline. For bookings, kindly contact your nearest Singapore Airlines office or email [conventions@singaporeair.com.sg](mailto:conventions@singaporeair.com.sg) to enjoy the attractive airfares to Singapore by quoting "SAA0947".

Please FAX completed form to + 852 2180 9462

<b>Transaction Date:</b>	05/25/2012 Fri						
<b>Transaction Description:</b>	MBS FRONT OFFICE SINGAPORE SG						
	<table border="1"><thead><tr><th>Arrival Date</th><th>Departure Date</th><th>No of Nights</th></tr></thead><tbody><tr><td>05/25/12</td><td>01/01/01</td><td>1</td></tr></tbody></table>	Arrival Date	Departure Date	No of Nights	05/25/12	01/01/01	1
Arrival Date	Departure Date	No of Nights					
05/25/12	01/01/01	1					
	00000000						
	LODGING						
	SIGN & TRAVEL® / EXTENDED PAYMENT OPTION						
<b>Amount \$:</b>	1,564.40						
<b>Foreign Spend Amount:</b>	1,989.61 Singapore Dollars						
<b>Doing Business As:</b>	MBS FRONT OFFICE						
<b>Merchant Address:</b>	10 BAYFRONT AVENUE SINGAPORE 018958 SINGAPORE						
<b>Reference Number:</b>	320121460477622074						
<b>Category:</b>	Travel - Lodging						

Exchange rate 1.272

<b>Transaction Date:</b>	05/22/2012 Tue						
<b>Transaction Description:</b>	CUT BY WOLFGANG PUCKSINGAPORE SG						
	<table border="1"><thead><tr><th>Arrival Date</th><th>Departure Date</th><th>No of Nights</th></tr></thead><tbody><tr><td>05/22/12</td><td>01/01/01</td><td>1</td></tr></tbody></table>	Arrival Date	Departure Date	No of Nights	05/22/12	01/01/01	1
Arrival Date	Departure Date	No of Nights					
05/22/12	01/01/01	1					
	00000000						
	LODGING						
	SIGN & TRAVEL® / EXTENDED PAYMENT OPTION						
<b>Amount \$:</b>	115.49						
<b>Foreign Spend Amount:</b>	148.06 Singapore Dollars						
<b>Doing Business As:</b>	CUT BY WOLFGANG PUCK						
<b>Merchant Address:</b>	10 BAYFRONT AVENUE SINGAPORE 018958 SINGAPORE						
<b>Reference Number:</b>	320121440451734521						
<b>Category:</b>	Travel - Lodging						

exchange rate 1.265

## Programme

All events will be held in the Peony Junior Ballroom, Level 4, Sands Expo and Convention Center, Marina Bay Sands unless otherwise specified.

### Day 1 Tuesday, 22 May 2012

- 1300 – 1930 Registration
- 1530 – 1730 ACI World Business Partners Meeting *(by invitation only)*  
*(Lotus 4A & 4B, Level 4)*
- 1800 – 1830 Welcome Ceremony & Official Opening of Exhibition
- 1830 – 2030 Welcome Reception in the Exhibition Hall

#### Small Airports Network Workshop\* *(Lotus 4D, Level 4)*

Moderator: PS NAIR, CEO-Corporate, Airports Sector, GMR Group

- 1430 – 1530 Survival & sustainability in times of turbulence – ever increasing need to attract air service and sustain
- Kiran JAIN, Head of Marketing & Route Development, Delhi International Airport (P) Limited
  - Emmanuel MENANTEAU, Chief Executive Officer, Cambodia Airports
- 1600 – 1700 Building the community – employment generation at smaller airports, impact on local economy
- Rafael ECHEVARNE, Director, Economics and Programme Development, Airports Council International
  - Charles H. ADA II, Executive Manager, A. B. Won Pat International Airport Authority, Guam

\* Admission is subject to seat availability.

#### Airport Collaborative Decision Making Workshop\* *(Metrol Room, Level 4)*

- 1430 – 1600 Introduction to Airport Collaborative Decision Making (A-CDM)
- Eric MIART, Former Airport Operations Programme and Environment Manager, EUROCONTROL
  - Daniel BIRCHER, Director – Operations, Bangalore International Airport Limited

\* Admission is subject to seat availability

## Programme

### Day 2 Wednesday, 23 May 2012

0800 Registration

0900 – 1000 Opening Remarks

- Tan Sri Bashir Ahmad ABDUL MAJID, President, ACI Asia-Pacific & Managing Director, Malaysia Airports Holdings Berhad

#### Keynote Speech

- Philip N L CHEN, Managing Director, Hang Lung Group & Hang Lung Properties Limited

1000 – 1045 Coffee Break

1045 – 1215 Session 1 – Understanding Airlines of the Future

Airlines are the core business partners of airports, it is essential that airports understand the future of airlines and its business trends in order to map a better plan for both airline and airport development. This session will focus on new interline arrangements, LCC trend, hubbing for LCC and FSCs. Is the era of the network carrier over? Is point to point traffic the trends of the future?

Moderator: Brendan SOBIE, Chief Analyst, CAPA – Centre for Aviation

- Dinesh KHANNA, Partner & Managing Director, Singapore, Boston Consultancy Group
- Maunu VON LUEDERS, Regional Vice President, Asia Pacific, International Air Transport Association
- Campbell WILSON, Chief Executive Officer, Scoot Pte Limited
- Daniel BIRCHER, Director – Operations, Bangalore International Airport Limited

1215 – 1345 Luncheon

1345 – 1500 Session 2 – Understanding Emerging Passenger Profiles

The emerging markets play a key role in driving the growth in today's global economy. The travelling passenger profile is changing as the global economic profile is evolving. The Asia-Pacific region is experiencing rapid growth due to the many emerging markets in the region. This session will take a detailed look at up and coming passenger profiles, in particular, Chinese and Indian passengers, etc. and what airports must do to prepare ahead for our future customers.

## Programme

**Moderator:** Rafael ECHEVARNE, Director, Economics and Programme Development, Airports Council International

- Martin J. CRAIGS, Chief Executive Officer, Pacific Asia Travel Association
- Philippe SCHAUS, Group President, Merchandising and Marketing, DFS Group
- George KARAMANOS, Vice-President Corporate Marketing & Communications, Abu Dhabi Airports Company

1500 – 1545 Coffee Break

1545 – 1730 7th ACI Asia-Pacific Regional Assembly Meeting & Committee Updates  
Young Executive Award Presentation  
Green Airports Recognition Presentation

### Day 3 Thursday, 24 May 2012

0745 – 0915 ACI Asia-Pacific World Business Partner and Executives Breakfast Meeting  
*(by invitation only) (Lotus AE, Level 3)*

#### 0930 – 1045 Session 3 – Customer Service Beyond Expectation

Today's airports are transforming themselves from an infrastructure provider to a service provider and becoming more and more customer-oriented. This session will bring several stakeholders together to discuss and share views on how today's aviation customer service has evolved and its future direction

**Moderator:** Catherine MAYER, Vice President, SITA

- Sujata SURI, Vice President, Service Development, Dubai Airports
- Tom RUTH, President & CEO, Halifax International Airport Authority

1045 – 1130 Coffee Break

#### 1130 – 1250 Session 4 – Technological Innovations: Transforming Airport Experience

Information technology today can help improve operational flow and provide efficient services. Airport experience is now transforming not only for the travelers, but also for the internal customers – staff and business partners of the airports. The transformation will not be realized without the development of customer-oriented solutions from innovative, cutting edge technologies for airports and airlines.

## Programme

**Moderator:** Daniel COLEMAN, Founder, Future Travel Experience and Event Director & Publisher, PPS Publications Ltd

- Jim L. MARTIN, Managing Director, ARINC Asia Pacific Division
- Steve LEE, Chief Information Officer & Senior Vice President, Technology, Changi Airport Group (Singapore) Pte Ltd
- Patricia SIMILLON DORNE, Head of Airlines Operations Strategy, Airline IT, Amadeus

1250 – 1300 ACI Special Announcement on Airport Excellence in Safety (APEX)

1300 – 1430 Luncheon

1430 – 1545 **CEO and Leaders' Forum: Aviation chiefs meet to discuss current key issues**

**Moderator:** Greg PRINCIPATO, President, Airports Council International-North America

- Thella F. BOWENS, President & CEO, San Diego County Regional Airport Authority
- Angela GITTENS, Director General, Airports Council International (ACI World)
- Seow Hiang LEE, Chief Executive Officer, Changi Airport Group (Singapore) Pte Ltd
- Kerrie MATHER, Chief Executive Officer & Managing Director, Sydney Airport Corporation Limited
- Yiannis N. PARASCHIS, Chief Executive Officer, Athens International Airport S.A.

1545 – 1600 Airport Carbon Accreditation Certificate Presentation Ceremony

1600 – 1615 Closing Ceremony

1730 – 2200 Gala Dinner & ASQ Awards Ceremony  
(Universal Studios Singapore®)

## Day 4 Friday, 25 May 2012

0900 – 1700 Post-conference City Tour *(Please refer to Page 31 for more info)*

1400 – 1645 Airport Tour  
*(Registered delegates will be picked up from Marina Bay Sands Coach Terminal, Basement 1 at 1pm sharp.)  
(Map of Marina Bay Sands pick up point can be found on page 33)*



**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
TRAVEL EXPENSE REPORT**

*(To be completed within 30 days from travel return date)*

TRAVELER: Thella F. Bowens DEPT. NAME & NO. Executive Office BU8  
 DEPARTURE DATE: 8/12/2015 RETURN DATE: 8/15/2012 REPORT DUE: 9/14/12  
 DESTINATION: Arlington, VA

*Please refer to the Authority Travel and Lodging Expense Reimbursement Policy, Article 3, Part 3.4, Section 3.40, outlining appropriate reimbursable expenses and approvals. Please attach all required supporting documentation. All receipts must be detailed, (credit card receipts do not provide sufficient detail). Any special items should be explained in the space provided below.*

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY 8/12/12	MONDAY 8/13/12	TUESDAY 8/14/12	WEDNESDAY 8/15/12	THURSDAY	FRIDAY	SATURDAY	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	591.60								0.00
Conference Fees (provide copy of flyer/registration expenses)	725.00								0.00
Rental Car*									0.00
Gas and Oil*									0.00
Garage/Parking*									0.00
Mileage - attach mileage form*									0.00
Taxi and/or Shuttle Fare (include tips pd.)*		70.00			75.00				145.00
Hotel*		185.90	185.90	185.90					557.70
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel svcs.)									0.00
Meals (include tips pd.)	Breakfast*								0.00
	Lunch*		37.34	35.16					72.50
	Dinner*	28.25	25.97	51.58					105.80
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality <sup>1*</sup>									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
<b>Total Expenses prepaid by Authority</b>	<b>1,316.60</b>	<b>284.15</b>	<b>249.21</b>	<b>272.64</b>	<b>75.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>881.00</b>

Explanation:	Total Expenses Prepaid by Authority	1,316.60
	Total Expenses Incurred by Employee (including cash advances)	881.00
	<b>Grand Trip Total</b>	<b>2,197.60</b>
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	1,316.60
	Due Traveler (positive amount) <sup>2</sup>	
Due Authority (negative amount) <sup>3</sup>	881.00	
<i>Note: Send this report to Accounting even if the amount is \$0.</i>		

I as traveler or administrator acknowledge that I have read, understand and agree to Authority policies 3.40 - Travel and Lodging Expense Reimbursement Policy<sup>4</sup> and 3.30 - Business Expense Reimbursement Policy<sup>5</sup> and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of travel expenses were incurred in connection with official Authority business and is true and correct.

<sup>1</sup> Travel and Lodging Expense Reimbursement Policy 3.40      <sup>2</sup> Business Expense Reimbursement Policy 3.30

Prepared By: Amy Caldera Ext.: 2445  
 Traveler Signature: Thella F. Bowens Date: 8/15/12  
 Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE** (To be certified if used by President/CEO, Gen. Counsel, or Chief Auditor)  
 I, \_\_\_\_\_ hereby certify that this document was approved by the Executive Committee at its \_\_\_\_\_ meeting.  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 (Leave blank and we will insert the meeting date.)

*Failure to attach required documentation will result in the delay of processing reimbursement. If you have any questions, please see your department Administrative Assistant or call Accounting at ext. 2806.*

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
OUT-OF-TOWN TRAVEL REQUEST**

**GENERAL INSTRUCTIONS:**

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella Bowens Dept: 6  
 Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor

All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 6/27/12 PLANNED DATE OF DEPARTURE/RETURN: 8/11/12 / 8/16/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip- continue on extra sheets of paper as necessary):**

Destination: Arlington, VA

Purpose: Attend the ACI-NA Public Safety & Security Fall Conference, and TSA Meetings

Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$	728.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	200.00
<b>B. LODGING</b>	\$	929.50
<b>C. MEALS</b>	\$	500.00
<b>D. SEMINAR AND CONFERENCE FEES</b>	\$	725.00
<b>E. ENTERTAINMENT (If applicable)</b>	\$	
<b>F. OTHER INCIDENTAL EXPENSES</b>	\$	100.00
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	\$	<b>3,182.50</b>

**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature: Thella A. Bowens Date: 28 June 2012

**CERTIFICATION BY ADMINISTRATOR** (Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature: R. Jean Date: 6.29.12

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

I, \_\_\_\_\_, hereby certify that this document was approved  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)

by the Executive Committee at its \_\_\_\_\_ meeting.  
 (Leave blank and we will insert the meeting date.)



DRAFT 2012 Public Safety & Security Fall Conference Agenda  
Ritz Carlton Hotel - Arlington, VA

SUNDAY, AUGUST 12

**9PM-12PM, Canadian Airport Security Committee Meeting**

*(Open to conference attendees)*

**12PM– 4PM Canadian Airport Security Committee Meeting with Transport Canada**

*(Open to Canadian airport members only)*

MONDAY, AUGUST 13

**9AM – 10AM, Transnational Working Group Meeting**

*(Open to conference attendees)*

The purpose of the Transnational Working group is to develop airport positions on security issues that enhance security systems, measures and increase efficiency and effectiveness at airports throughout North America. The working group will work to identify topics of mutual interest to Canadian and United States airport and associate members for resolution with US and Canadian Government representatives. Some of these topics include:

- Recapitalization and Optimization of baggage screening systems
- Rescreening of checked baggage from Canada
- 100% non-passenger screening
- Trusted traveler programs
- Cyber Security

**10AM – 12PM, Canadian Airport Security Committee Meeting**

*(Open to conference attendees)*

**10AM – 12PM, PS&S Committee Meeting-Airports Only**

*(Open to airport members only)*

Airports raise topics of interest. PS&S Leadership determines which topics rise to the level of national importance and should be raised with federal government officials.

**1PM – 4PM, PS&S Steering Group/Committee Meeting**

*(Led by PS&S Leadership, open to Airport and Associate members)*

**6PM – 7:30 PM, Welcome Reception**

*(Open to conference attendees and invited representatives of the TSA and other federal agencies)*

TUESDAY, AUGUST 14 and WEDNESDAY, AUGUST 15 – AGENDA ITEMS

- TSA Administrator John Pistole
- TSA Policy Updates from Office of Security Policy & Industry Engagement, Office of Security Operations and Office of Global Strategies
- What's next for the In-Depth Security Review?
- How do you raise the bar on conducting identity verification?
- TSA Compliance and Enforcement Policy Overview
- Designated Aviation Channeling Service Providers, Best practices & Lessons Learned During Change Over

THURSDAY, AUGUST 16

**8:00AM – 9:30AM, PS&S Airports Meeting**

*(Open to PS&S Airports Only)*



THE RITZ-CARLTON®  
PENTAGON CITY

Ms Thella Bowens

Room Number: 1101  
Arrival Date: 08/12/12  
Departure Date: 08/15/12  
CRS Number: 88556175  
Rewards No:  
Page No: 1 of 1

Company: Aci Na

**INFORMATION INVOICE**

Folio No: 298261

08/16/12

Date	Description		Charges	Credits
08/12/12	In Room Dining	CHECK# 6534	28.25	
08/12/12	Group Room Charge		169.00	
08/12/12	Occupancy Tax (5 %)		8.45	
08/12/12	VA Sales Tax (5%)		8.45	
08/13/12	Fyve charges	CHECK# 2935	37.34	
08/13/12	Group Room Charge		169.00	
08/13/12	Occupancy Tax (5 %)		8.45	
08/13/12	VA Sales Tax (5%)		8.45	
08/14/12	Fyve charges	CHECK# 3073	35.16	
08/14/12	Group Room Charge		169.00	
08/14/12	Occupancy Tax (5 %)		8.45	
08/14/12	VA Sales Tax (5%)		8.45	
08/15/12	American Express	XXXXXXXXXXXX [REDACTED] XX/XX		658.45
<b>Total</b>			<b>658.45</b>	<b>658.45</b>
<b>Balance</b>			<b>0.00</b>	

185.90 }  
185.90 }  
185.90 }  
185.90 }

sec page 1  
sec page 2  
sec page 3



**TRAVELTRUST SCRIPPS RANCH**  
 THANK YOU FOR USING TRAVELTRUST  
 Phone: 1-800-792-4662

**Electronic Invoice**

**Prepared For:**  
**BOWENS/THELLA**

**Ref: DEPT 6**

SALES PERSON	E4
INVOICE NUMBER	1195311
INVOICE ISSUE DATE	29 Jun 2012
RECORD LOCATOR	FCECNU
CUSTOMER NUMBER	0000SDCRAA

**Client Address**

SAN DIEGO COUNTY REG AIRPORT AUTHORITY  
 PO BOX 82776  
 SAN DIEGO CA 92138-2776

**Notes**

YOUR UNITED ETICKET CONFIRMATION IS \*\* NVT6JH \*\*

-----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----

\*\*\*\*\*TICKETLESS TRAVEL INSTRUCTIONS\*\*\*\*\*

THIS IS AN E-TICKET RESERVATION.

A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN  
 THIS TICKET IS NON-REFUNDABLE AND MUST BE USED FOR  
 THE FLIGHTS BOOKED. IF THE RESERVATION IS NOT USED  
 OR CANCELLED BEFORE THE DEPARTURE OF YOUR FLIGHTS  
 IT MAY HAVE NO VALUE. CONTACT TRAVELTRUST BEFORE  
 YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY.

\*\*\*\*\*TSA GUIDANCE FOR PASSENGERS\*\*\*\*\*

PLEASE ALLOW EXTRA TIME FOR SCREENING AND BOARDING  
 INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE  
 DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE  
 FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV

**DATE: Sat, Aug 11**

**Flight: UNITED AIRLINES 856**

From	SAN DIEGO, CA	Departs	8:12am
To	WASHINGTON DULLES, DC	Arrives	4:03pm
Departure Terminal	1		
Duration	04hr(s) :51min(s)	Class	UNITED ECONOMY
Type	BOEING 757 200 SERIES JET	Meal	Food for Purchase
Stop(s)	Non Stop		
Seat(s) Details	BOWENS/THELLA	Seat(s) - 10C	UA - XXXXXX 58
Notes	** AISLE SEAT CONFIRMED **		

**DATE: Wed, Aug 15**

**Flight: UNITED AIRLINES 522**

From	WASHINGTON DULLES, DC	Departs	2:54pm
To	SAN DIEGO, CA	Arrives	5:06pm
		Arrival Terminal	1
Duration	05hr(s) :12min(s)	Class	UNITED ECONOMY
Type	BOEING 757 200 SERIES JET	Meal	Food for Purchase
Stop(s)	Non Stop		

Seat(s) Details  
Notes

BOWENS/THELLA  
\*\* AISLE SEAT CONFIRMED \*\*

Seat(s) - 09C

UA - XXXXXX 58

**DATE: Mon, Feb 11**

**Others**

RESERVATION  
RETAINED FOR  
180 DAYS

**Ticket Information**

<b>Ticket Number</b>	UA 7072095558	<b>Passenger</b>	BOWENS THELLA		
		<b>Billed to:</b>	AX XXXXXXXXXXXX	USD	* 561.60
<b>Service Fee</b>	XD 0576370114	<b>Passenger</b>	BOWENS THELLA		
		<b>Billed to:</b>	AX XXXXXXXXXXXX	USD	* 30.00
				<b>SubTotal</b>	USD 591.60
				<b>Net Credit Card Billing</b>	* USD 591.60
				<b>Total Amount Due</b>	USD 0.00

TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 5AM-530PM PST  
AND SATURDAY FROM 9AM-1PM PST - 760-835-1700.  
FOR EMERGENCY AFTERHOURS SERVICE IN THE US  
PLEASE CALL 888-221-6062 AND USE YOUR VIT CODE - S7NS0  
PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER  
EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00  
THANK YOU FOR CHOOSING TRAVELTRUST...SCOTT MACKERLEY

Your travel arranger provides the information contained in this document. If you have any questions about the content, please contact your travel arranger. For Credit Card Service fees, please see eTicket receipt for total charges.

**RECEIPTS FROM TRAVEL TO ARLINGTON, VA  
August 12 - 15, 2012—THELLA F. BOWENS**

WASHINGTON FLYER TAXI  
DULLES INT'L AIRPORT  
CAT CAB # 459  
Date 08/12/2012  
FROM: 21:19 TO: 21:56  
TRIP # 4892  
DELAY 00:04:33  
DIST 27.87 mi  
FARE.....\$ 60.00  
TOTAL.....\$ 60.00  
THANK YOU AND CALL AGAIN  
(703)224-2022

*Dulles to Hotel  
+ \$10.44*

*8/12 taxi to hotel*

& & & 402 & & &  
THE RITZ-CARLTON PENTAGON CITY  
\*\*\*\*\* IN ROOM DINING\*\*\*\*\*  
234 SZE

-----  
TBL 1101/1            **6534**            GST 1  
                                 12AUG'12 10:43PM  
-----

1 CHICKEN WINGS/RS	15.00	
1 ICED TEA	4.00	
1 Delivery Charge:	3.50	✓
Sub-Total:	22.50	
RM SVC GRATUITY	3.42	✓
Tax	2.33	
10:44 TOTAL DUE:	<b>\$28.25</b>	

SERVICE CHARGE INCLUDED

GRATUITY \$ \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_  
ROOM NUMBER \_\_\_\_\_  
PRINT LAST NAME \_\_\_\_\_  
SIGNATURE \_\_\_\_\_

*8/12 dinner*



**RECEIPTS FROM TRAVEL TO ARLINGTON, VA  
August 12 - 15, 2012—THELLA F. BOWENS**

**Ristorante Murali**  
101 S. Joyce Street  
Arlington, va 22202  
(703) 415-0411

Server: **anastasia** Station: **19**

Order #: **145** Dine In  
Tab #: **67** Guests: **1**

Salata de-5.50 5.50 ✓

0.00

Spaghetti lognese-11.95 11.95 ✓

Tea 2.25 ✓

TOTAL: 19.70

1: 1.77

**AMOUNT DUE: \$21.47**

>> Ticket #: **35** <<  
8/13/2012 8:20:09 PM

\*\*\*\*\*  
Join MURALI FAN CLUB  
Please write Clearly

Name: →

Phone Number: - -

E-Mail:.....  
.....

or e-mail us: [guest@muraliva.com](mailto:guest@muraliva.com)

\*\*\*\*\*



GSAR 417000010769001

Store # 1

**Ristorante Murali**  
1201 S. Joyce Street  
Arlington, va 22202  
(703) 415-0411

Date: 8/13/2012 9:03:24 PM  
Server: **anastasia**

Acct # XXXXXXXXXXXX  
American Express Exp XX/XX  
BOWENS/THELLA F

**\$\$\$ SALES \$\$\$**

RESULT CAPTURED  
Trout #: 244175  
AUTH. # 523451  
REF. # 00000000  
ORDER # 148015

8/13  
dinner

PURCHASE: \$21.47

ENTER TIP HERE: 4.50

PLEASE TOTAL: 25.97

**\*\*\* \*\* DUPLICATE COPY \*\*\* \*\***  
Signature On Original Copy

**\*\*\* \*\* Additional Copy \*\*\* \*\***

**\*\*\* Restaurant Mode \*\*\***

8/13  
Lunch

**RECEIPTS FROM TRAVEL TO ARLINGTON, VA  
August 12 - 15, 2012—THELLA F. BOWENS**

& & & 401 & & &  
THE RITZ-CARLTON PENTAGON CITY  
\*\*\*\*\* FYVE RESTAURANT\*\*\*\*\*  
70 SABA 1

---

TBL 41/1            2935            GST 1  
13AUG'12 12:50PM

1 CRAB CAKE            24.00  
1 ICED TEA            4.75  
Sub-Total:            28.75  
Tax            2.59  
1:19 TOTAL DUE: \$31.34

PLEASE COMPLETE FOR ROOM CHARGES

GRATUITY \_\_\_\_\_

TOTAL See page 2 of 5

ROOM NUMBER \_\_\_\_\_

PRINT LAST NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

& & & 401 & & &  
THE RITZ-CARLTON PENTAGON CITY  
\*\*\*\*\* FYVE RESTAURANT\*\*\*\*\*  
70 SABA See pg 2 of 5 2

---

TBL 41/1            2935            GST 1  
13AUG'12 12:50PM

1 CRAB CAKE            24.00  
1 ICED TEA            4.75  
FOOD            28.75  
Tax            2.59  
Total:            37.34  
CHARGE TIP \$            6.00

1101/Bowens  
ROOM/ACCT CHG            37.34

-----70 CLOSED 13AUG 1:19PM-----

& & & 401 & & &  
THE RITZ-CARLTON PENTAGON CITY  
\*\*\*\*\* FYVE RESTAURANT\*\*\*\*\*  
72 HAYAT 1

---

TBL 44/1            3073            GST 1  
14AUG'12 12:43PM

1 ICED TEA            4.75  
1 SP FIELD GREENS            0.00  
1 SP SHORT RIBS            22.00  
1 SP SHORTCAKE            0.00  
FOOD            26.75  
Tax            2.41  
Total:            35.16  
CHARGE TIP \$            6.00

1101/Bowens  
ROOM/ACCT CHG            35.16

-----72 CLOSED 14AUG 1:12PM-----

8/14 lunch

**RECEIPTS FROM TRAVEL TO ARLINGTON, VA  
August 12 - 15, 2012—THELLA F. BOWENS**



Table  
480 7TH ST, NW  
Washington, DC 20004  
tel 202 628 7949

Date: Aug14'12 09:14PM  
Card Type: Amex  
Acct #: XXXXXXXXXXXX  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Trans Key: BIB001145541890  
Auth Code: 581218  
Check: 378  
Table: 301/1  
Server: 4 Fernando

Subtotal: 74.80 44.83  
Tip: 15.00 6.75  
Total: 51.58

Signature  
I agree to pay above total  
according to my card issuer  
agreement.

\*\*\* Guest Copy \*\*\*

8/14 dinner



480 7th Street, NW  
Washington, DC 20004  
202-628-7949

4 Fernando

Tbl 301/1 Chk 378 Gst 2  
Aug14'12 08:13PM

**Patio**

1 Ensal Remolacha	10.00	✓
1 Manchege-Manzana	<del>8.50</del>	
1/2 Espinacas	7.00 14.00	✓
1 Pollo al Ajillo	<del>8.00</del>	
1 Iberico Manzanitas	20.00	✓
1 Flan	1/2 7.50	✓
	3.75	

Subtotal 40.75 ~~58.00~~  
Sales Tax 4.08 ~~6.00~~  
09:08PM Total 74.80 44.83

Join us for DC Restaurant Week  
August 13 - 26!  
\$20.12 for lunch or  
\$35.12 for dinner.



\$40.75  
4.08 tax  

---

44.83  
6.75 tip  

---

51.58

**RECEIPTS FROM TRAVEL TO ARLINGTON, VA**  
**August 12 - 15, 2012—THELLA F. BOWENS**



**Taxi Cab Receipts**

DATE: 08/15/12 TIME: 12:30

TRIP ORIGIN: Pentagon City Ritz C

DESTINATION: Dallas Airport

FARE: \$ 85 SIGNATURE: [Signature]  
*submitting (including tip)*

8/15 taxi to airport

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
TRAVEL EXPENSE REPORT**

*(To be completed within 30 days from travel return date)*

TRAVELER: Thelia F. Bowers DEPT. NAME & NO. Executive Office BU6  
 DEPARTURE DATE: 7/19/2012 RETURN DATE: 7/20/2012 REPORT DUE: 8/19/12  
 DESTINATION: Seattle, WA

*Please refer to the Authority Travel and Lodging Expense Reimbursement Policy, Article 3, Part 3.4, Section 3.40, outlining appropriate reimbursable expenses and approvals. Please attach all required supporting documentation. All receipts must be detailed, (credit card receipts do not provide sufficient detail). Any special items should be explained in the space provided below.*

	Authority Expenses (Prepaid by Authority)	Employee Expenses								
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY 7/19/12	FRIDAY 7/20/12	SATURDAY	TOTALS	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	511.60								0.00	
Conference Fees (provide copy of flyer/registration expenses)									0.00	
Rental Car*									0.00	
Gas and Oil*									0.00	
Garage/Parking*									0.00	
Mileage - attach mileage form*									0.00	
Tax and/or Shuttle Fare (include tips pd.)*							20.00		20.00	
Hotel*						201.20			201.20	
Telephone, Internet and Fax*									0.00	
Laundry*									0.00	
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00	
Meals (include tips pd.)	Breakfast*						22.71		22.71	
	Lunch*								0.00	
	Dinner*						39.02		39.02	
	Other Meals*								0.00	
<i>Alcohol is a non-reimbursable expense</i>										
Hospitality <sup>1</sup> *									0.00	
Miscellaneous: Baggage Fees							20.00		20.00	
									0.00	
									0.00	
*Provide detailed receipts									0.00	
<b>Total Expenses prepaid by Authority</b>	<b>511.60</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>260.22</b>	<b>42.71</b>	<b>0.00</b>	<b>302.93</b>

Explanation:	Total Expenses Prepaid by Authority	511.60
	Total Expenses Incurred by Employee (including cash advances)	302.93
	Grand Trip Total	814.53
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	511.60
	Due Traveler (positive amount) <sup>2</sup>	
	Due Authority (negative amount) <sup>3</sup>	302.93
<i>Note: Send this report to Accounting even if the amount is \$0.</i>		

<sup>1</sup>Give names and business affiliations of any persons whose meals were paid by traveler.  
<sup>2</sup> Prepare Check Request  
<sup>3</sup>Attach personal check payable to SDCRAA

I as traveler or administrator acknowledge that I have read, understand and agree to Authority policies 3.40 - Travel and Lodging Expense Reimbursement Policy<sup>4</sup> and 3.30 - Business Expense Reimbursement Policy<sup>5</sup> and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of travel expenses were incurred in connection with official Authority business and is true and correct.

Travel and Lodging Expense Reimbursement Policy 3.40
   
  Business Expense Reimbursement Policy 3.30

Prepared By: Amy Caldera Ext.: 2445  
 Traveler Signature: Thelia F. Bowers Date: 8/16/12  
 Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE** (To be certified if used by President/CEO, Gen. Counsel, or Chief Auditor)

I, \_\_\_\_\_ hereby certify that this document was approved by the Executive Committee at its \_\_\_\_\_ meeting.  
 (Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 (Leave blank and we will insert the meeting date.)

*Failure to attach required documentation will result in the delay of processing reimbursement. If you have any questions, please see your department Administrative Assistant or call Accounting at ext. 2806.*

CR 13-008

**RECEIPTS FROM TRAVEL TO SEATTLE, WA  
July 19-20, 2012—THELLA F. BOWENS**

SEATTLE  
SEATTLE  
18740 INTERNATIONAL BLVD SOUTH  
SEATTLE, WA 98188  
206-246-8600

Server: MOFEED A

1146127.2

SANDRA S Table 29  
Fri 07/20/12 8:39 AM Guests 4  
Guest Num: 3 COFF GARD

-----  
1 BUFFET 18.00  
-----  
511 SubTotal 18.00  
\*BFMS BOWENS/THE  
Sales Tax 1.71  
**Total 19.71**

ROOM CHG TIP.. 3.00  
511 \*BFMS BOWENS/THE 22.71

ROOM CHG Tendered **22.71**

\*\*\*\*\*  
\* R ROOM CHARGES & MASTER ACCTS ONLY! \*  
\* EST NAME \_\_\_\_\_ \*  
\* ROOM # \_\_\_\_\_ \*  
\* TIP AMOUNT \_\_\_\_\_ \*  
\* TOTAL CHARGE \_\_\_\_\_ \*  
\* SIGNATURE \_\_\_\_\_ \*  
\* NOTES: \*  
\*\*\*\*\*

**OWNER DRIVERS**

Date: 7/20/12

Received of: \_\_\_\_\_

THE SUM OF: \$ 20 YOUR RECEIPT  
PAID  
From: Alaska Highway (include tax)  
To: Seattle

Cab No: \_\_\_\_\_ Driver: \_\_\_\_\_

2450 - 6th AVE. SOUTH • SEATTLE • BUSINESS 292-0569

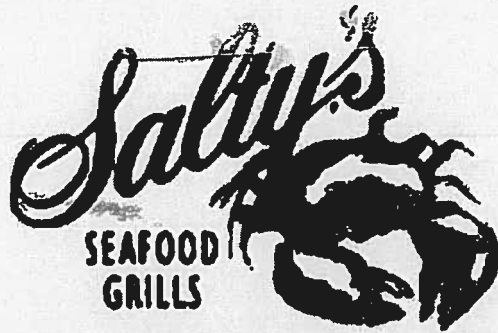
**RECEIPTS FROM TRAVEL TO SEATTLE, WA  
July 19-20, 2012—THELLA F. BOWENS**

Salty's - Redondo  
28201 Redondo Beach Dr S  
Des Moines, WA 98198  
253-946-0636

Server: TYANA ✓ DOB: 07/19/2012  
8:03 PM 07/19/2012  
table 24/3 3/30062

Ex 3145753  
Card #XXXXXXXXXX  
Magnetic card present: BOWENS THELLA F  
Approval: 567420

Amount: 34.02  
          \$44.90  
+ Tip: 5.00 (9.00)  
= Total: 39.02



Salty's - Redondo  
28201 Redondo Beach Dr S  
Des Moines, WA 98198  
253-946-0636

Server: TYANA ✓ 07/19/2012  
Table 24/3 7:52 PM  
Guests: 1

#30062

~~31.00~~  
J Mixed Greens ✓ 9.00  
D Dungeness Crab Cakes App ✓ 15.00  
Ala Carte Plank Veggies ✓ 7.00

Subtotal 31.00 ~~41.00~~

WA State&Local Tax 3.02 ~~3.90~~

Total Tax 3.02 3.90

Total 34.02 44.90

Balance Due 44.00

Like us on Facebook/Salty's  
Follow us on Twitter

**RECEIPTS FROM TRAVEL TO SEATTLE, WA  
July 19-20, 2012—THELLA F. BOWENS**

Sage and Cars Inc.  
Site 29 - 6751 Forum Drive Ste 230  
Orlando, FL 32821  
ph

Alaska Airlines Skycap  
San Diego International Airport

TABLE: #41 - 1 Guests  
Skycap Name: Laurice Richie  
✓ 7/19/2012 11:45:10 AM  
Sequence #000022  
ID #0085309

EM	QTY	PRIC
Baggage Fee \$20	1	\$20.00
Subtotal		\$20.00
Grand Total		\$20.00
This Payment		\$20.00
Total Charged:		\$20.00
Paid by	Credit Card	

Credit Purchase  
Name : BOWENS/THELLA F  
Type : Amex  
Number : xxxx xxxx xxxx [REDACTED]  
Reference : 0022  
Approval : 543675  
CUSTOMER COPY

X \_\_\_\_\_  
I agree to pay the amount shown above.

Have A Great Flight!





18740 International Blvd. • Seattle, WA 98188  
 Phone (206) 246-8600 • Fax (206) 901-5923  
 Reservations  
 www.doubletree.com or 1-800-222-TREE

Name & Address

BOWENS, THELLA  
 P.O. BOX 82776  
 SAN DIEGO, CA 92138  
 US

Room 511/NQ2D ✓  
 Arrival Date 7/19/2012 4:33:00PM  
 Departure Date 7/20/2012  
 Adult/Child 1/0  
 Room Rate \$179.00

RATE PLAN LV2  
 AL [REDACTED]  
 BONUS AL CAR

Confirmation: 84326608

7/20/2012 PAGE 1

DATE	REFERENCE	DESCRIPTION	AMOUNT
7/19/2012	8732261	GUEST ROOM	\$179.00
7/19/2012	8732261	ROOM TAXES	\$22.20
WILL BE SETTLED TO AX [REDACTED]			\$201.20
EFFECTIVE BALANCE OF			\$0.00

} 201.20

*Hilton HHonors(R) stays are posted within 72 hours of checkout. To check your earnings for this or any other stay at more than 3,000 Hilton Family hotels worldwide, please visit HiltonHHonors.com.*

*Thank you for choosing Doubletree! Come back soon to enjoy our warm chocolate chip cookies and relaxed hospitality. For your next trip visit us at doubletree.com for our best available rates!*

T  
H  
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U

**EXPRESS CHECK-OUT**

**Good Morning ! We hope you enjoyed your stay. With Express Check-Out there is no need to stop at the Front Desk to check out.**  
 Please review this statement. It is a record of your charges as of late last evening.  
 For any charges after your account was prepared, you may:  
 + pay at the time of purchase.  
 + charge purchases to your account, then stop by the Front Desk for an updated statement.  
 + or request an updated statement be mailed to you within two business days.  
 Simply call the Front Desk from your room and tell us when you are ready to depart. Your account will be automatically checked out and you may use this statement as your receipt. Feel free to leave your key(s) in the room.  
 Please call the Front Desk if you wish to extend your stay or if you have any questions about your account.

DATE OF CHARGE	FOLIO NO./CHECK NO.	
AUTHORIZATION	2324808	INITIAL
PURCHASES & SERVICES		
TAXES		
TIPS & MISC.		
TOTAL AMOUNT	0.00	

**DATE: Wed, Jan 16**

**Others**

**RESERVATION  
RETAINED FOR  
180 DAYS**

**Ticket Information**

<b>Ticket Number</b>	<b>AS 7075162527</b>	<b>Passenger</b>	<b>BOWENS THELLA</b>		
		<b>Billed to:</b>	<b>[REDACTED]</b>	<b>USD</b>	<b>* 481.60</b>
<b>Service Fee</b>	<b>XD 0576728113</b>	<b>Passenger</b>	<b>BOWENS THELLA</b>		
		<b>Billed to:</b>	<b>[REDACTED]</b>	<b>USD</b>	<b>* 30.00</b>
				<b>SubTotal</b>	<b>USD 511.60</b>
				<b>Net Credit Card Billing</b>	<b>* USD 511.60</b>
				<b>Total Amount Due</b>	<b>USD 0.00</b>

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AND SATURDAY FROM 9AM-1PM PST - 760-635-1700.  
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PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER  
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**TRAVELTRUST SCRIPPS RANCH**  
**THANK YOU FOR USING TRAVELTRUST**  
**Phone: 1-800-792-4662**

**Electronic Invoice**

**Prepared For:**  
**BOWENS/THELLA**

**Ref: DEPT 6**

SALES PERSON	E4
INVOICE NUMBER	1195583
INVOICE ISSUE DATE	12 Jul 2012
RECORD LOCATOR	DLUSFY
CUSTOMER NUMBER	0000SDCRAA

**Client Address**

SAN DIEGO COUNTY REG AIRPORT AUTHORITY  
 PO BOX 82776  
 SAN DIEGO CA 92138-2776

**Notes**

YOUR ALASKA ETICKET CONFIRMATION IS \*\* NOCDUI \*\*  
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----

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 INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE  
 DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE  
 FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV

**DATE: Thu, Jul 19**

**Flight: ALASKA AIRLINES 491**

<b>From</b>	SAN DIEGO, CA	<b>Departs</b>	1:25pm
<b>To</b>	SEATTLE TACOMA, WA	<b>Arrives</b>	4:09pm
<b>Departure Terminal</b>	1		
<b>Duration</b>	02hr(s) :44min(s)	<b>Class</b>	Economy
<b>Type</b>	BOEING 737-400 JET	<b>Meal</b>	Food for Purchase
<b>Stop(s)</b>	Non Stop		
<b>Notes</b>	** SEAT ASSIGNMENT AIRPORT CHECKIN ONLY **		

**DATE: Fri, Jul 20**

**Flight: ALASKA AIRLINES 494**

<b>From</b>	SEATTLE TACOMA, WA	<b>Departs</b>	12:45pm
<b>To</b>	SAN DIEGO, CA	<b>Arrives</b>	3:32pm
		<b>Arrival Terminal</b>	1
<b>Duration</b>	02hr(s) :47min(s)	<b>Class</b>	Economy
<b>Type</b>	BOEING 737-400 JET	<b>Meal</b>	Food for Purchase
<b>Stop(s)</b>	Non Stop		
<b>Notes</b>	** SEAT ASSIGNMENT AIRPORT CHECKIN ONLY **		

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY  
OUT-OF-TOWN TRAVEL REQUEST**

**FILE COPY**

**GENERAL INSTRUCTIONS:**

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: BU6

Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor

All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 07/11/12 PLANNED DATE OF DEPARTURE/RETURN: 07/19/12 / 07/20/12

**3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip— continue on extra sheets of paper as necessary):**

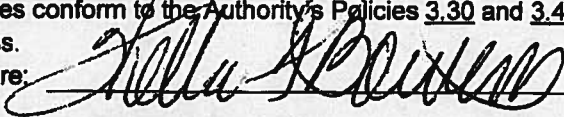
Destination: Seattle, WA Purpose: Alaska Airlines Meeting  
Explanation: \_\_\_\_\_

**4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES**

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$	500.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	100.00
<b>B. LODGING</b>	\$	250.00
<b>C. MEALS</b>	\$	75.00
<b>D. SEMINAR AND CONFERENCE FEES</b>	\$	0.00
<b>E. ENTERTAINMENT (If applicable)</b>	\$	0.00
<b>F. OTHER INCIDENTAL EXPENSES</b>	\$	0.00
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	\$	<b>875.00</b>

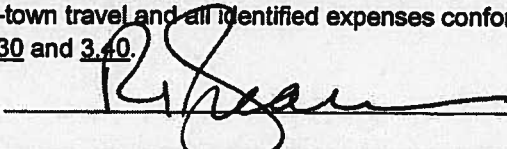
**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: July 11, 2012

**CERTIFICATION BY ADMINISTRATOR** (Where Administrator is the Executive Committee, the Authority Clerk's signature is required).

By my signature below, I certify the following:

- 1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse.
- 2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority.
- 3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

Administrator's Signature:  Date: 7.12.12

**AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE**

I, \_\_\_\_\_, hereby certify that this document was approved  
(Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
by the Executive Committee at its \_\_\_\_\_ meeting.  
(Leave blank and we will insert the meeting date.)

# **BUSINESS EXPENSE**

**BRETON K. LOBNER**

# SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

## MONTHLY MILEAGE and PARKING FEE REIMBURSEMENT REPORT

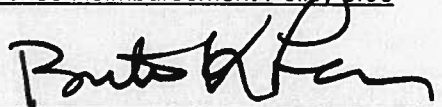
EMPLOYEE NAME Breton Lobner			PERIOD COVERED June and July 2012	
DEPARTMENT/DIVISION General Counsel				
DATE	MILES DRIVEN	DESTINATION AND PURPOSE OF TRIP	PARKING FEES & OTHER TRANSPORTATION COSTS	\$\$\$
6/14/12		SD County Courthouse / West Tech v. SDCRAA		12.00
6/19/12		SD County Courthouse / West Tech v. SDCRAA		15.00
6/26/12		SD County Courthouse / West Tech v. SDCRAA		15.00
7/9/12		SD County Courthouse / West Tech v. SDCRAA		12.00
7/18/12		SD County Courthouse / West Tech v. SDCRAA		15.00
SUBTOTAL			-	69.00

### Computation of Reimbursement

TOTAL MILEAGE DRIVEN (LIMITED TO 200 MILE MONTHLY AVERAGE PER YEAR)	-
REIMBURSEMENT RATE: (see below) * <span style="float: right;">Rate for 7/1/11 - 12/31/12</span>	X 0.555
TOTAL MILEAGE REIMBURSEMENT	-
PARKING FEES/TOLL CHARGES (ATTACH RECEIPTS)	69.00
TOTAL REIMBURSEMENT REQUESTED	\$ 69.00

I acknowledge that I have read, understand and agree to \*Authority Policy 3.30 - Business Expense Reimbursement Policy and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of business expenses were incurred in connection with official Authority business and is true and correct.

Business Expense Reimbursement Policy 3.30



SIGNATURE OF EMPLOYEE

DEPT./DIV. HEAD APPROVAL

ON DASH DISPLAY FACE UP ON DASH DISPLAY FACE UP ON DASH

**RECEIPT**

**Ampco System Parking**  
Lot 1001  
First and Ash

Setting: Lot 1001  
Mach Name: Shelby 3

\$12.00  
Card  
Visa

EXPIRATION DATE/TIME

**09:19 PM**  
**JUN 14, 2012**

Exp 09:19p  
JUN 14, 2012

Ticket #: 00030421  
FOLLOW INSTRUCTIONS ON SIGNS  
\$12.00 Card#xxxx-  
Visa Auth #: 06638C  
8AM-5PM 12HRS \$12  
Total Due \$12.00  
Total Paid \$12.00  
Questions 619-233-2000 or  
customerserviceSD@abm.com

T#00030421  
S/N#200008  
100098  
Purchased  
JUN14,2012  
09:19a

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PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

**PLACE FACE UP ON DASH**  
**SOFIA**  
**SUNSET PARKING**

Expiration Date/Time

**07:22 PM**  
**JUN 19, 2012**

Purchase Date/Time: 10:22am Jun 19, 2012  
Total Due: \$15.00 Rate: 0-9 HOURS = \$15.00  
Total Paid: \$15.00 Payment Type: Card  
Ticket #: 00074211  
S/N #: 500012130230  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*- Visa  
**PLACE FACE UP**  
**ON DASH**  
**NO IN & OUT PRIVILEGES**

**RECEIPT**

**SOFIA**  
**SUNSET PARKING**

Expiration Date/Time: 07:22pm Jun 19, 2012  
Purchase Date/Time: 10:22am Jun 19, 2012

Total Due: \$15.00 Rate: 0-9 HOURS = \$15.00  
Total Paid: \$15.00 Payment Type: Card  
Ticket # 00074211  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*- Visa



**PLACE FACE UP ON DASH**  
**SOFIA**  
**SUNSET PARKING**

Expiration Date/Time

**10:31 PM**  
**JUN 26, 2012**

Purchase Date/Time: 01:31pm Jun 26, 2012  
Total Due: \$15.00      Rate: 0-9 HOURS = \$15.00  
Total Paid: \$15.00      Payment Type: Card  
Ticket #: 40860102  
S/N #: 500012130230  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*-\*\*\*\*, Visa  
**PLACE FACE UP**  
**ON DASH**  
**NO IN & OUT PRIVILEGES**

**RECEIPT**

**SOFIA**  
**SUNSET PARKING**

Expiration Date/Time: 10:31pm Jun 26, 2012  
Purchase Date/Time: 01:31pm Jun 26, 2012

Total Due: \$15.00      Rate: 0-9 HOURS = \$15.00  
Total Paid: \$15.00      Payment Type: Card  
Ticket #: 40860102  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*-\*\*\*\*, Visa

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

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PARKING RECEIPT

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PLACE FACE UP ON DASH  
SOFIA  
SUNSET PARKING

Expiration Date/Time

12:22 PM  
JUL 09, 2012

Purchase Date/Time: 10:22am Jul 09, 2012  
Total Due: \$12.00 Rate: 0-2 HOURS = \$12.00  
Total Paid: \$12.00 Payment Type: Card  
Ticket #: 40461109  
S/N #: 500012130230  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*- Visa  
PLACE FACE UP  
ON DASH  
NO IN & OUT PRIVILEGES

RECEIPT

SOFIA  
SUNSET PARKING

Expiration Date/Time: 12:22pm Jul 09, 2012  
Purchase Date/Time: 10:22am Jul 09, 2012

Total Due: \$12.00 Rate: 0-2 HOURS = \$12.00  
Total Paid: \$12.00 Payment Type: Card  
Ticket #: 40461109  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*- Visa

PLACE FACE UP ON DASH  
SOFIA  
SUNSET PARKING

Expiration Date/Time

06:26 PM  
JUL 18, 2012

Purchase Date/Time: 09:26am Jul 18, 2012  
Total Due: \$15.00 Rate: 0-9 HOURS = \$15.00  
Total Paid: \$15.00 Payment Type: Card  
Ticket #: 12021410  
S/N #: 500012130230  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*- Visa  
PLACE FACE UP  
ON DASH  
NO IN & OUT PRIVILEGES

RECEIPT

SOFIA  
SUNSET PARKING

Expiration Date/Time: 06:26pm Jul 18, 2012  
Purchase Date/Time: 09:26am Jul 18, 2012

Total Due: \$15.00 Rate: 0-9 HOURS = \$15.00  
Total Paid: \$15.00 Payment Type: Card  
Ticket #: 12021410  
Setting: Sofia 1  
Mach Name: Sofia 1

Card #\*\*\*\*- Visa