Meeting Date: JANUARY 5, 2012

Subject:

Business and Travel Expense Reimbursement Reports for Board Members, President/CEO, Chief Auditor and General Counsel When Attending Conferences, Meetings, and Training at the Expense of the Authority
Recommendation:
For information only.
Background/Justification:
Authority Policy 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.
Authority Strategies:
This item supports one or more of the Authority Strategies, as follows:
Community Customer Employee Financial Operations Strategy Strategy Strategy Strategy

Page 2 of 2

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.

Equal Opportunity Program:

Not applicable.

Prepared by:

TONY RUSSELL
DIRECTOR, CORPORATE SERVICES/AUTHORITY CLERK

EXPENSE REPORTS

THELLA F. BOWENS

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY TRAVEL EXPENSE REPORT

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

expenses a	ON:	11/15/2011	RETUR	N DATE.				BEROL	T DUE.	40	
Please refer			1401014	N DATE:		11/16/201	1	REPOF	KI DUE:	14	/16/11
expenses a		St. Louis, MO				1 1-					
	nd approvals	ority Travel and Lodging Expense Re s. Please attach all required support is should be explained in the space p	ing documenta	tion. All n							
			Authority				Employe	e Expens	:08		
			Expenses (Prepaid by Authority)	SUNDAY	MONDAY	TUESDAY 11/15/11	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
Air Fare, Ra	iiroad, Bus (attach copy of itinerary w/charges)	715.70			1					0.0
Conference	Fees (provid	le copy of flyer/registration expenses)	医哈勒巴斯								0.0
Rental Car*											0.0
Gas and Oil								10 to 1			0.0
Garage/Pari	king*										0.0
Mileage - att											0.00
	Shuttle Fare	(Include tips pd.)*		Cett 1		100.00					0.00
Hotel*	100					183.98					183.9
Telephone, i	internet and	rax-									0.00
Laundry*	adada a add far	olds hallbar other batal arm									0.00
Meals	Breakfast*	naids, belihop, other hotel srvs.)		-	-		14.41			-	0.00
(include	Lunch*	**************************************		de la	-	16.00	14.41	-			14.4° 16.00
tips pd.)	Dinner*					10.00	8.42				8.42
Alcohol is a	Other Mea	ls*									0.00
Alcohol is a r			20万里公园在201		临时初						NEW STATE
Hospitality 1						A CAMPANA AND DAY	100				0.00
Miscellaneou		Fees									0.00
				A STATE OF THE STA							0.00
1994										5 N = 2 1 1 40 1	0.00
*Provide deta	ailed receipt	3 1 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2									0.00
問題題而任		otal Expenses prepaid by Authority	715.70	0.00	0.00	199.98	22.83	0.00	0.00	0.00	222.81
Explanation:					Total Exp	enses Pre	paid by Au	thority			715.70
						enses Inc					
					(including		ances)				222.81
					Grand Tr	Chromodal Professional Service	The state of the s	S ARTHUR PER CONT.			938.51
					41-			y of Authority	ck)		於例后期間
						enses Pre					715.70
² Prepare Che	eck Request	affiliations of any persons whose meals was a second or	ere paid by travel	ar. I	Due Trave Due Auth	ority (neg	ative amo	unt) ³	na even if i	the amount I	222.81
i as traveler	or adminis	strator acknowledge that I have re and 3.30 - Business Expense R			gree to A	uthority p	olicies 3	.40 - Trav	ei and L	odging Ex	pense
responsibilit correct.		certify that this report of travel ex Lodging Expense Reimbursement P			I in conne Business					and is tru	e and
Prepared By:		An	ny Caldera					Ext.:		2445	
Traveler Sign	nature:		Print/Type Name					Date:			
Approved By								Date:			
AUTHORITY	CLERK CE	RTIFICATION ON BEHALF OF EXE	CUTIVE COM	MITTEE	(To be ce	rtified if us	ed by Pres	ident/CEO	Gen. Cou	insel, or Ch	ief Auditor)
14 1		ver clerk's the meeting will insert their nar								itive Comm	

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

-	 _					_	
a	50	ΔI	IIN:	RTB	1 I I I	4 1 1 0)N8:

- 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 Na		Bowens	D	ept: 6/Executive Office
Position:	☐ Board Member	₩ President/CEO	Cen. Counsel	Chief Auditor
r objecti.	☐ All other Author	itv emplovees (does not re	quire executive committee	edministrator approval)
2 DATE OF	REQUEST: 10/04/1		DEPARTURE/RETURN:	
of paper as Destination	s necessary): on:St. Louis, MO	P	urpose. ACI-NA Englitate	NES CONTRACTOR OF THE PARTY OF
		ed Discussion Session with	Airpoit Silie LRépas en	Itives as Chair PACINA IOI 25 Canculed IVIP
	ED OUT-OF-TOWN ' RANSPORTATION C AIRFARE		U.	50.00 11-8-11
	OTHER TRANSPO	RTATION (Taxi, Train Ca	r Rental) \$ 11	00.00 Trip back or
B. L.C. C. M	DDGING	AG		100.00 not concul
	EMINAR AND CONFI	ERENCE FEES	1	1101 00.100
	NTERTAINMENT (If a		3	
F. 01	THER INCIDENTAL E	ED TRAVEL EXPENSE	11	50.00
CERTIFICA	TION BY TRAV	LER By my alemature be	low, I centry that the above	listed out-of-town travel and
		a Authority's Policies 3.30	and 340 and are reasonal	ble and directly related to the
Authority's but Travelers Sig		16-AM111	Date:	400000
I I di Action o Cu	Jilaui S. Julia	M & KITAA	erus Date.	(Cally () Call
		ISTRATOR (Where Ad	iministrator is the Executiv	e Committee, the Authority
	ure is required).	- de Orași la cu		
	up below, I certify the		n travel request and the de	etails provided on the reverse.
			penses are necessary for	
			the anticipated benefit to	
			penses conform to the req	uirements and intent of
Autho	ority's Policies 3.30 an	1d 3.40		10 4
Administrati	or's Signature:	10/00		Date: 10-4-11
AUTHORIT	Y CLERK CERTI	FICATION ON BEHA	LF OF EXECUTIVE C	OMMITTEE
1. Tony	R Russell,	Ato-ity Cle	, hereby certify that	at this document was approved
The state of the s	itive Committee at its	(Leave blank and we will inse	of the meeting date.)	



Traveltrusst
374 North Coast Faghway 101
Encintes, Ca 92024
Tol: 760-635-1700
Fax 760-635-1720
Website www.traveltrust.com

BOWENS/THELLA	DEPT	Г 6			(0	16-Oct-2011 3:48 p
						Perge 1 of
	YOUR U	NITED ETICKET CONFIRMAT				
		***TICKETLESS TRAVEL IN	STRUCTIONS'			
		S AN E-TICKET RESERVATI RNMENT ISSUED PHOTO ID		AT CHECK	TN	
	THIS T	ICKET IS NON-REFUNDABLE	AND MUST	BE USED F	OR	
		IGHTS BOOKED. IF THE R CELLED BEFORE THE DEPAR				
	IT MAY	HAVE NO VALUE. CONTAC	T TRAVELTRU	UST BEFOR		
	YOUR O	UTBOUND FLIGHT IF CHANG	E IS NECESS	SARY.	**	
	****	**************************************	OR PASSENGE	ERS*****	****	
		ALLOW EXTRA TIME FOR S				
		ATIONAL-MINIMUM 3 HOUR IC-MINIMUM 2 HOUR CHECK				
		DITIONAL SECURITY INFOR				
	Air	United Airlines		Flight#	674 Class:	G
	From:	San Diego CA, USA		To:	Denver CO, USA	
5-Nov-2011	Meal:	Light Lunch		Seats:	Seat:21C	
11:47am	Equip:	Airbus A320 Jet	11:47am	Status:	Confirmed	
uesday	Depart: Arrival:	15-Nov-2011 Tuesday 15-Nov-2011 Tuesday	03:06pm	Stops:	0	
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	Arrive	Airlines locator: N2LD	25			
	UA Fred	guent Flver#				
	** ECO	NOMY PLUS AISLE SEAT CO	NFIRMED **			
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5 No 0044	From:	Denver CO, USA		To:	St Louis Intl MO, USA	
5-Nov-2011 6:03pm	Meal:	None CB I 700 Consdeir Bog		Seats: Status:	Seat: 12B Confirmed	
uesday	Equip: Depart:	CRJ-700 Canadair Reg 15-Nov-2011 Tuesday	06:03pm	Stops:	0	
,	Arrival:	15-Nov-2011 Tuesday	08:57pm	Olopo.		
	DEN-STU Depart	L OPERATED BY /UNITED E	XPRESS/GOJE	T AIRLIN	ES	
	Arrive	- TERMINAL 1				
		Airlines locator: N2LD	2F			
	** ECO	quent Flyer# NOMY PLUS AISLE SEAT CO	NFIRMED **			
	Flight	Duration: 1 hour(s) an of Service: Coach	d 54 minute	es		
	Air	United Airlines		Flight#	6321 Class:	K
and the latest and th	From:	St Louis Intl MO, USA		To:	Denver CO, USA	1
6-Nov-2011	Meal:	None		Seats:	Seat:8B	
4:05pm	Equip:	CRJ-Canadair Regiona	04:05	Status:	Confirmed	
Vednesday	Depart: Arrival:	16-Nov-2011 Wednesday	04:05pm 05:34pm	Stops:	0	
	STL-DEN	N OPERATED BY /UNITED E		EST AIRL	INES	
	Depart	- TERMINAL 1				
	Arrive United	Airlines locator: N2LD	2F			
	Arrive United UA Free	Airlines locator: N2LD				
	Arrive United UA Freq ** ECON Flight	Airlines locator: N2LD quent Flyer# NOMY PLUS AISLE SEAT CO Duration: 2 hour(s) an	NFIRMED **	15		
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	Arrive United UA Freq ** ECON Flight Class O	Airlines locator: N2LD quent Flyer# NOMY PLUS AISLE SEAT CO Duration: 2 hour(s) an of Service: Coach United Airlines	NFIRMED **	Flight#	630 Class:	К
6-Nov-2011	Arrive United UA Freq ** ECON Flight Class o Air From:	Airlines locator: N2LD quent Flyer# NOMY PLUS AISLE SEAT CO Duration: 2 hour(s) an of Service: Coach United Airlines Denver CO, USA	NFIRMED **	Flight# To:	San Diego CA, USA	К
6-Nov-2011 7:07pm	Arrive United UA Free ** ECON Flight Class o Air From: Meal:	Airlines locator: N2LD quent Flyer# NOMY PLUS AISLE SEAT CO Duration: 2 hour(s) an of Service: Coach United Airlines Denver CO, USA Light Lunch	NFIRMED **	Flight# To: Seats:	San Diego CA, USA Seat:21C	К
	Arrive United UA Freq ** ECON Flight Class o Air From:	Airlines locator: N2LD quent Flyer# NOMY PLUS AISLE SEAT CO Duration: 2 hour(s) an of Service: Coach United Airlines Denver CO, USA	NFIRMED **	Flight# To:	San Diego CA, USA	К



Traveltrust 374 North Coast Highway 101 Encintes, Ca. 92024 Tol: 760-635-1700 Fex. 760-635-1720 Website www.traveltrust.com

BOWENS/THELLA 06-Oct-2011 3:48 pm **DEPT 6** Page 2 of 2 Depart Arrive - TERMINAL 1
United Airlines locator: N2LD2F
UA Frequent Flyer#
** ECONOMY PLUS AISLE SEAT CONFIRMED **
Flight Duration: 2 hour(s) and 26 minutes
Class of Service: Coach Other San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS 14-May-2012 Monday 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 Ticket Information BOWENS THELLA Ticket#:8714090531 218.84 26.56 Ticket Base Fare: Invoice#:1188564 Ticket Tax: Total Ticket Amount: 245.40 Electronic: YES #270.40 FEE AMOUNT: 25.00 SERVICE FEE DOCUMENT #: 0550830016 BILLED TO: AMERICAN EXPRESS ENDING IN



Traveltrust 374 North Coast Fighway 101 Encintas, Ca 92024 Tol: 760-635-1700 Fax 760-635-1720

Website www.travetrust.com **BOWENS/THELLA DEPT 6** 09-Nov-2011 10:14 am Page 1 of 2 YOUR SOUTHWEST ETICKET CONFIRMATION IS ** IYK93I ** -----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. 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 Southwest Airlines Air Flight# 1224 Class: From: San Diego CA, USA To: Houston Hobby TX, USA 15-Nov-2011 Meal: None 10:00am Boeing 737-700 Jet Status: Confirmed Equip: 10:00am Tuesday 15-Nov-2011 Tuesday 15-Nov-2011 Tuesday Depart: Stops: 0 03:00pm Arrival: Depart - TERMINAL 1 Arrive Flight Duration: 3 hour(s) and 00 minutes
Class of Service: Coach Flight# 1050 Y Air Southwest Airlines Class: From: Houston Hobby TX, USA St Louis Intl MO, USA To: 15-Nov-2011 Meal: None 03:55pm Boeing 737-300 Jet Confirmed Equip: Status: 15-Nov-2011 Tuesday 15-Nov-2011 Tuesday Tuesday 03:55pm Depart: Stops: 0 Arrival: 05:55pm Depart Arrive - TERMINAL 2
Flight Duration: 2 hour(s) and 00 minutes
Class of Service: Coach Air Southwest Airlines Flight# 1103 Class: Y From: St Louis Intl MO, USA To: Chicago Midway IL, USA 16-Nov-2011 Meal: None 05:10pm Equip: Boeing 737-700 Jet Confirmed Status: 16-Nov-2011 Wednesday 16-Nov-2011 Wednesday 05:10pm Wednesday Depart: Stops: Arrivai: 06:15pm Depart - TERMINAL 2 Arrive - Flight Duration: 1 hour(s) and 05 minutes class of Service: Coach Air 275 Class: Y Southwest Airlines Flight# From: Chicago Midway IL, USA San Diego CA, USA To: 16-Nov-2011 Meal: None 07:20pm Boeing 737-700 Jet Equip: Status: Confirmed Wednesday 16-Nov-2011 Wednesday 07:20pm Depart: Stops: 0 Arrival: 16-Nov-2011 Wednesday 10:10pm Depart -Arrive - TERMINAL 1
Flight Duration: 4 hour(s) and 50 minutes Class of Service: Coach Other 14-May-2012 San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS-A Monday



Traveltrust 374 North Coast Fighway 101 Encintes, Ca 92024 Tol: 760-635-1700 Fex 760-635-1720 Website www.travetrust.com

BOWENS/THELLA

DEPT 6

09-Nov-2011 10:14 am

Page 2 of 2

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

Ticket Information

BOWENS THELLA Ticket#:2402940641

Invoice#:1189465

Ticket Base Fare:

415.30 0.00

Ticket Tax: Total Ticket Amount:

415.30

Electronic: YES

\$ 445.30

SERVICE FEE DOCUMENT #: 0568908373

FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN



11-16-11

 Thella Bowens
 Folio No.
 :
 Room No.
 :
 553

 A/R Number
 :
 11-15-11

 Group Code
 :
 Departure
 :
 11-16-11

 Company
 :
 Conf. No.
 :
 63671195

 Membership No.
 :
 Rate Code
 :
 IGCOR

 Invoice No.
 :
 Page No.
 :
 1 of 1

Date		Description		Charges	Credits
11-15-11	*Accommodation			159.00	
11-15-11	State Tax			12.60	
11-15-11	Occupancy Tax			11.53	
11-15-11	Airport Tax			0.85	
11-16-11	American Express				183.98
			Total	183.98	183.98
			Balance	0.00	

Council Clamphone				
Guest Signature:				

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the Issuer.

RECEIPTS FROM TRAVEL TO ST. LOUIS, MO NOVEMBER 15-16, 2011—THELLA F. BOWENS



Pappas Burger (610) 7800 Airport Blvd (HOU) Houston, Tx 77061 (281) 657-6168

0526 Table 52 #Party 1 KENNETH E SVrCk: 1 15:46 11/15/11 DINE IN

1 Tea 2.35 1 Tortilla Soup 7.95 1 Side of Fries 2.45

would like to hear about your dining experience. Please visit our website at

Sub Total: 12.75

11/15 16:00 TOTAL: Tax: 1.05

0526

Server: KENNETH E Rec:318 11/15/11 16:09. Swiped T: 52 Term: 6

Pappas Burger #02 7800 Airport Blvd Houston, TX 77061 21)657-6168

CHANT #: 67071730196

AJTHORIZATION #: 564697 Naference: 1115010000526 PANS TYPE: Credit Card SALE

CHECK: 13.80

TIP: 200

Duplicate Copy

RECEIPTS FROM TRAVEL TO ST. LOUIS, MO NOVEMBER 15-16, 2011—THELLA F. BOWENS

CLOUDS **** CREDIT CARD VOUCHER **** *******************************	CLOUDS CROWNE PLAZA ST LOUIS AIRPORT
ST LOUIS, MO CHECK: 1 1 0 4 TABLE: 1 0 / 1 SERVER: 105 PATTY	ST LOUIS, MO 105 PATTY TBL 10/1 1104 GST 1 NOV16'11 9:52AM
DATE: NOV16'11 10:08AM CARD TYPE: XXXXXXXXXXX	1 TOAST WHEAT 4.00
EXP DATE: XX/XX AUTH CODE: 543383 RESEARCH: 0000000000 THELLA F BOWENS	1 SIDE BACON 4.50 1 COFFEE 3.00 Sub-Total: 11.50 Tax 0.91
SUBTOTAL: 12.41	9:52 TOTAL DUE: \$ 1 2 . 4 1 ***FOR ROOM CHARGE ONLY***
GRATUITY \$	TOTAL
TOTAL \$ (14.41)	ROOM NUMBER
SIGNATURE	PRINT LAST NAME
	SIGNATURE

Please leave SIGNED COPY with your Server / Cashier.

RECEIPTS FROM TRAVEL TO ST. LOUIS, MO NOVEMBER 15-16, 2011—THELLA F. BOWENS

milde . Inc 90 Mideay Aliport Green to Greens 6/2011 18:49

Spn 108 heck. 32,5801 11. . l1. . leth allean: 23

> Superdaug6 1 Custorno Ment 1 60

> > Subtotal 7.59 Tax 0.83 Total 8.42

8.42 XXXXXXXXXX BOWENS/THELLA F

> GRAND TUTAL 8.42

lalumingraphic actual a T323 C3936 11/16/2011 18:49

Questions or Comments? Please Call (773) 582-4450

Page _____3_ of ___3

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY TRAVEL EXPENSE REPORT

DEPARTURE DATE: 10/1/2011 RETURN DATE: 10/2/2011 REPORT DUE: 1: DESTINATION: Sacramento, Ca Pilease refer to the Authority Trevel and Lodging Expense Reimbursement Policy, Article 3, Part 3.4, Section 3.40, outlining appropriate reimburse expenses and approvals. Please attach all required supporting documentation. All receipts must be detailed, (credit card receipts do not provide detail). Any special items should be explained in the space provided below. Authority Employee Expenses
Please refer to the Authority Travel and Lodging Expense Reimbursement Policy, Article 3, Part 3.4, Section 3.40, outlining appropriate reimburse expenses and approvals. Please ettach all required supporting documentation. All receipts must be detailed, (credit card receipts do not provide detail). Any special items should be explained in the space provided below. Authority Expenses
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Excernee (Prepet by Authority) Alir Fare, Railroad, Bus (attach copy of timerary wicharges) Conference Fees (provide copy of timerary wicharges) Alir Fare, Railroad, Bus (attach copy of timerary wicharges) 499.40 Conference Fees (provide copy of timerary wicharges) 499.40 Conference Fees (provide copy of timerary wicharges) Alir Fare, Railroad, Bus (attach copy of timerary wicharges) 499.40 Conference Fees (provide copy of timerary wicharges) 499.40 Conference Fees (provide copy of timerary wicharges) 499.40 Conference Fees (provide copy of timerary wicharges) Alir Fare, Railroad, Bus (attach copy of timerary wicharges) 499.40 Conference Fees (provide copy of timerary wicharges) 499.40
Crepated by Authority) Authority Aut
Air Fare, Railroad, Bus (ettach copy of titnerary wicharges) Conference Fees (provide copy of tityer/registration expenses) Rental Car* Gas and Oil* Garage/Parking* Mileage - ettach mileage form* Taxi and/or Shuttle Fare (include tips pd.)* Hotel* Telephone, internet and Fax* Laundry* Tips - separately paid (maids, belihop, other hotel srvs.) Meals (include tips pd.) Breakfast* Lunch* Dinner* Other Meals* Alcohol is a non-retmbursable expense Hospitality 1* Miscellaneous: Baggage Fees Total Expenses prepaid by Authority
Conference Fees (provide copy of flyer/registration expenses) Rental Car* Gas and Oil* Garage/Parking* Mileage - attach mileage form* Taxi and/or Shuttle Fare (include tips pd.)* Hotel* Telephone, internet and Fax* Laundry* Tips - separately paid (maids, belihop, other hotel srvs.) Meals (include tips pd.) Meals (include tips pd.) Dinner* Other Meals* Alcohol is a non-reimbursable expense Hospitality 1* Milscellaneous: Baggage Fees *Provide detailed receipts Total Expenses prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Rental Car* 75.71
Gas and Oil* Garage/Parking* Mileage - attach mileage form* Taxl and/or Shuttle Fare (include tips pd.)* Hotel* Telephone, internet and Fax* Laundry* Tips - separately paid (maids,bellhop,other hotel srvs.) Meals (include tips pd.) Brakfast* Lunch* Dinner* Other Meals* Alcohol is a non-reimbursable expense Hospitality 1* Miscellaneous: Baggage Fees Total Expenses prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Garage/Parking* Mileage - attach mileage form* Taxi and/or Shuttle Fare (include tips pd.)* Hotel* Telephone, internet and Fax* Laundry* Tips - separately paid (maids, bellhop, other hotel srvs.) Meals (include tips pd.) Meals (include tips pd.) Other Meals* Alcohol is a non-retimbursable expense Hospitality 1* Milscellaneous: Beggage Fees Total Expenses prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
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Laundry* Tips - separately paid (maids,bellhop,other hotel srvs.) Meals (include tips pd.) Dinner* Other Meals* Alcohol is a non-reimbursable expense Hospitality 1* Miscellaneous: Baggage Fees *Provide detailed receipts Total Expenses prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Tips - separately paid (malds, bellhop, other hotel srvs.) Meals (include tips pd.) Dinner*
Meals (include tips pd.) Breakfast* 3.83
(include tips pd.) Lunch* Dinner* Other Meals* Alcohol is a non-reimbursable expense Hospitality 1* Miscellaneous: Baggage Fees *Provide detailed receipts Total Expenses prepaid by Authority Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Dinner* Other Meals* Alcohol is a non-reimbursable expense Hospitality 1* Miscellaneous: Baggage Fees *Provide detailed receipts *Total Expenses prepaid by Authority Total Expenses Incurred by Employee
Other Meals* Alcohol is a non-reimbursable expense Hospitality 1* Miscellaneous: Baggage Fees *Provide detailed receipts Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Alcohol is a non-reimbursable expense Hospitality 1* Miscellaneous: Baggage Fees *Provide detailed receipts Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Hospitality 1* Miscellaneous: Baggage Fees *Provide detailed receipts *Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Miscellaneous: Baggage Fees *Provide detailed receipts *Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
*Provide detailed receipts Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Explanation: Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
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Explanation: Total Expenses prepaid by Authority 499.40 3.83 0.00 0.00 0.00 0.00 0.00 258.04 Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Explanation: Total Expenses Prepaid by Authority Total Expenses Incurred by Employee
Total Expenses incurred by Employee
Conversion rate used the average of 1.02488 where charges are paid by cash. (including cash advances)
PERIOD WALL AND A STATE OF THE
Due Tenuales (positive emaunt) ²
Give names and business affiliations of any persons whose meals were paid by traveler. Prepare Check Request Attach personal check payable to SDCRAA Due Authority (negative amount) ³ Note: Send this report to Accounting even if the amount is
Grand Trip Total Less Cash Advance (attach copy of Authority ck) Less Expenses Prepaid by Authority The same and business affiliations of any persons whose meals were paid by traveler. The pare Check Request Grand Trip Total Less Cash Advance (attach copy of Authority ck) Less Expenses Prepaid by Authority Due Traveler (positive amount) ² Due Authority (negative amount) ³

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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

1. TRAVELER: Travelers Name: Thella F. Bowens		Dept:	6/Executive Office
	n. Counsel		Chief Auditor
All other Authority employees (does not require exec	utive committe	e adminis	strator approvai)
2. DATE OF REQUEST: 08/31/11 PLANNED DATE OF DEPARTUR	RE/RETURN:	10/01/1	1 / 10/01/11
3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the	purpose of th	e trip- co	ntinue on extra sheets
of paper as necessary):			
Opening Ev	ent	ternationa	I Airport Terminal
Explanation: Sacramento International Airport Terminal Opening E	vent		
4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS:		470.00	
AIRFARE ATHER TRANSPORTATION (Toyl Topin Con Bonds))	\$	470.00 150.00	
 OTHER TRANSPORTATION (Taxi, Train, Car Rental) B. LODGING 	\$	250.00	
C. MEALS	\$	50.00	
D. SEMINAR AND CONFERENCE FEES	\$	30.00	
E. ENTERTAINMENT (If applicable)	\$		
F. OTHER INCIDENTAL EXPENSES	\$		
TOTAL PROJECTED TRAVEL EXPENSE	\$	920.00	
CERTIFICATION BY TRAVELER By my signature below, I certif	to that the abo	us listed	
associated expenses conform to the Authority's Policies 3.30 and 3.40 a			
	ing are reaso	nable and	directly related to the
Authority's business.	Det	511/	Mrs.
Travelers Signature:	Dat	· Du	HY OUT
CERTIFICATION BY ADMINISTRATOR (Where Administrato	r is the Execu	tive Com	mittee the Authority
Clerk's signature is required).	NO UNO EXCOC		intoo, the riddionty
By my signature below, I certify the following:			
I have conscientiously reviewed the above out-of-town travel received.	auget and the	detaile nr	ovided on the reverse
The concerned out-of-town travel and all identified expenses are	· · · · · · · · · · · · · · · · · · ·	A THE RESERVE TO A PROPERTY OF THE PARTY.	
Authority's business and reasonable in comparison to the anticip			
 The concerned out-of-town travel and all ideptified expenses co Authority's Policies 3.30 and 3.40. 	morm to the r	equireme	nts and intent of
Administrator's Signature:		_ Date:	8.31.11
AUTHORITY CLERK CERTIFICATION ON BEHALF OF E	KECUTIVE	COMMI	TTEE
1. Tony R. Russell, Anthory Clerk , h	ereby certify t	hat this d	ocument was approved
(Please leave plank. Whoever clerk's the meeting will insert their name and titla.)			
by the Executive Committee at its (Leave blank and we will insert the meeting)	meeti	ng.	



Traveltrust
374 North Cosst Haghwey 101
Encinites, Ca 92024
Tol: 760-635-1700
Fax 760-635-1720
Website: www.traveltrust.com

BOWENS/THELLA	DEPT 6		30-S	ep-2011 12:31 pi
				Page 1 of
	YOUR SOUTHWEST ETICKET CONFIRMATION IS **INVOICE/ITINERARY ACCOUNTING DOC *********TICKETLESS TRAVEL INSTRUCTIONS** THIS IS AN E-TICKET RESERVATION. A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT A PORTION OF THIS TRIP MAY BE REFUNDABLE. ***UNUSED PORTIONS TO TRAVELTRUST FOR POSSIE ***********************************	CUMENT ****** T CHECK . PLEASE BLE REFU ******	IN E RETURN IND. **	
	INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRI DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO FOR ADDITIONAL SECURITY INFORMATION VISIT	DEPART	URE	
01-Oct-2011 12:10pm Saturday	Air Southwest Airlines From: San Diego CA, USA Meal: None Equip: Boeing 737-700 Jet Depart: 01-Oct-2011 Saturday 12:10pm	Flight# To: Status: Stops:	1709 Class: I Sacramento CA, USA Confirmed 0	(
	Arrival: 01-Oct-2011 Saturday 01:40pm Depart - TERMINAL 1 Arrive - TERMINAL A Flight Duration: 1 hour(s) and 30 minutes Class of Service: Business Select			
02-Oct-2011 08:40am Sunday	Air Southwest Airlines From: Sacramento CA, USA Meal: None Equip: Boeing 737-700 Jet Depart: 02-Oct-2011 Sunday 08:40am Arrival: 02-Oct-2011 Sunday 10:10am	Flight# To: Status: Stops:	2990 Class: If San Diego CA, USA Confirmed 0	
	Depart - TERMINAL A Arrive - TERMINAL 1 Southwest Airlines locator: WGZ3ZS Flight Duration: 1 hour(s) and 30 minutes Class of Service: Business Select			
30-Mar-2 012 Friday	Other San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS			
	TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 5 AND SATURDAY FROM 9AM-1PM PST - 760-635-1700 FOR EMERGENCY AFTERHOURS SERVICE IN THE L PLEASE CALL 888-221-6062 AND USE YOUR VIT COI PLEASE NOTE THIS IS OUR NEW EMERGENCY NUM EACH EMERGENCY CALL IS BILLABLE AT A MINIMU THANK YOU FOR CHOOSING TRAVELTRUSTSCOT). JS DE - S7NS IBER M 25.00	50	

469.40 30.00 fee 499.40



Hyatt Regency Sacramento at Capitol Park 1209 L Street Sacramento, CA 95814 916 443 1234 916 321 3099

INFORMATION INVOICE

Payee Thella Bowens

Membership

Bonus Code

Confirmation No. 6137699001

Group Name

Room No.

0437

Arrival

10-01-11

Departure

10-02-11

Page No.

1 of 1

1

Folio Window

Foilo

Invoice

Date	Description			Charges	Credits
10-01-11	Guest Room			139.00	
10-01-11	Occupancy Tax			16.68	157.33
10-01-11	STBID Assessment			1.50	U 1U=
10-01-11	CA Tourism Assessment			0.15	
10-01-11	Parking Valet			25.00	
10-02-11	American Express	xxxxxxxxx	XX/XX		182.33
Your Gold Pastay.	ssport account will be credited for this	Total		182.33	182.33
		Balance			0.00

Guest Signature

personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. your stay please share them with us.

I accept delivery of The Wall Street Journal M-F (Gold Passport, Concierge, and VIP rooms only). If refused, a refund of \$1 will be provided.

WE HOPE YOU ENJOYED YOUR STAY WITH US!

agree that my liability for this bill is not waived and I agree to be held. Thank you for choosing Hyatt Regency Sacramento. We hope that you enjoyed your stay with us. Our goal is to exceed our guests' expectations. If you have any comments regarding

Consumer Affairs; Patrick Miller 916-321-3632 or Patrick.M.Miller@hyatt.com LOST & FOUND V-MAIL: 916-443-1234 ext:4572

Please remit payment to: Hyatt Regency Sacramento PO Box 202649 Dallas, TX 75319

Customer Service number: 1-888-863-3020

Customer Service email: Na.CustomerService@Hyatt.com

RECEIPTS FROM TRAVEL TO SACRAMENTO, CA OCTOBER 1-2, 2011—THELLA F. BOWENS

HMS HOST STARBUCKS
SACRAMENTO INTERNALTONAL AIRPORT
WELCOME TO SACRAMENTO!'

4843 Savorn
CHK 7400 OCTO2'11 8:11AM

1 LATTE 2.80 0.75
Subtotal 3.55
Tax 0.28
Ant Paid 3.83
Chargo bue 1.17

THANK YOU!! PLEASE COME AGAIN!!
PLS COMMENT ON YOUR EXPERIENCE
DON FREAZEE (916) 283-2101
Don.frazee@hmshost.com

Your terder number is: 7400



THE HERTZ CORPORATION

Direct All Inquiries To:

PO BOX 26120

THE HERTZ CORPORATION

Phone: 800-654-4173

Fax: Web:

www.hertz.com

OKLAHOMA CITY, OK 73126-0120

REPRINT

Rental Agreement No: 105563824

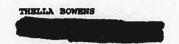
Invoice Date: Document:

10/02/2011 951001511659

Renter:

Account No.:

THELLA BOWENS ******



RENTAL REFERENCE

Rental Agreement No: 105563824 Reservation ID:

F2404956606

MISCELLANEOUS INFORMATION

CC AUTH: 522024 DATE: 2011/10/01 AMT: 276.00

RENTAL DETAILS

Rate Plan: Rented On:

Returned On:

IN: MCLE

OUT: MCLE

10/01/2011 14:29 LOC# 125011 SACRAMENTO AP, CA

10/02/2011 07:31 LOC# 125011

SACRAMENTO AP, CA
Car Description: ALTIMA 6PGR699
Veh. No.:

7151533 CAR CLASS Charged: F MILEAGE
Rented: YF

Reserved: F

In: 19,203 Out: 19,154

RENTAL CHARGES

Driven: 49 1 @ 27.49 27.49

7.75%

SUBTOTAL 27.49 DAMAGE WAIVER (CDW/LDW) 15.00 LIABILITY INS. SUPPLEMENT 13.95 PERSONAL ACCIDENT INS. 5.95 CONCESSION FEE RECOVERY 5.30 CA TOURISM FEE 0.78 VEHICLE LICENSE FRE 0.37 PREMIUM ROADSIDE SERVICE 3.99

AMOUNT DUE

TAX

75.71 USD

2.88

THANK YOU FOR RENTING FROM HERTZ

ALL CHARGES HAVE BEEN BILLED TO YOUR ACCOUNT.

Direct All Inquiries To: THE HERTZ CORPORATION PO BOX 26120 OKLAHOMA CITY, OK 73126-0120 UNITED STATES

Phone:

800-654-4173

Fax: Web:

www.hertz.com

AMOUNT BILLED TO ACCOUNT:

75.71 USD

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY TRAVEL EXPENSE REPORT

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

TRAVELE		Thella F. Bowens		Marie Marie 17	DEPT. NAI				Executive		2044
DEPART	JRE DATE:	8/28/2011	RETUR	N DATE:		8/29/201	1	REPO	RT DUE:	9/	28/11
DESTINA		Reno, Nevada			Mark and a second						
expenses	and approval	nority Travel and Lodging Expense R ls. Please attach all required suppor ns should be explained in the space	ting documente	tion. All r							
			Authority				Employe	e Expens	98		
			Expenses (Prepaid by Authority)	SUNDAY 8/28/11	MONDAY 8/29/11	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
Air Fare, F	Railroad, Bus	(attach copy of itinerary w/charges)	536.00					1/40			0.0
Conference	e Fees (provid	de copy of flyer/registration expenses)									0.0
Rental Ca	r						NO E				0.0
Gas and C)il*									WE BU	0.0
Garage/Pa	arking*						STEP OF				0.0
Mileage - a	attach mileage	e form*									0.0
Taxi and/o	r Shuttle Fare	(include tips pd.)*			V. 14						0.0
Hotel*			NEW TOTAL	134.47			1 1				134.4
	, Internet and	l Fax*	是要是自然的							E R	0.0
Laundry*										11-11-	0.0
	arately paid (n	maids,bellhop,other hotel srvs.)									0.0
Meals	Breakfast*				6						0.0
(include	Lunch*		10000000000000000000000000000000000000				Y. I				0.00
tips pd.)	Dinner*					ME TO		CTATE!			0.0
	Other Mea	als*		8.00	4		THE COLUMN			130	8.00
	non-reimburi	sable expense					阿拉克		開始的影響	特定级	
Hospitality	1.								E .		0.00
Miscellane	ous: Baggag	e Fees								d Towns	0.00
											0.00
											0.00
*Provide d	etailed receip	ts				EIE		Holby S.			0.00
		Total Expenses prepaid by Authority	536.00	142.47	0.00	0.00	0.00	0.00	0.00	0.00	142.47
Explanatio	n				Total Exp	enses Pre	paid by A	uthority			536.00
rvhieriero							urred by E				000.00
					(including				45		142.47
				-17	Grand Tri	p Total			4 1 2 2		678.47
				A	Less Cas	h Advanc	B (attach cop	y of Authorit	(ck)		
					Less Expe	enses Pre	paid by Au	thority	The Day of the		536.00
16hm mam	es and business	affiliations of any persons whose meals w	vers paid by trave	ler	Due Trav	eler (posi	tive amou	nt) ²			
2 Prepare C	Check Request	yable to SDCRAA	iare paid by dave		Due Auth	ority (neg	ative amo	unt) ³ o Accounti	ng even if	the amount l	142.47
Los bours	or or odmi-i	otrotor oaknowlodge that I have	and understa	nd cod	The same of the same						
		strator acknowledge that I have r			The state of the state of the state of						
		and 3.30 - Business Expense f									
	ility. I furthe	r certify that this report of travel a	xpenses wen	e incurred	in conne	ection wit	th official	Authority	business	and is tru	e and
correct.	7 Townsland	Ladeira Ermanas Baimbumamast f	Dellar 2 40		Duelness	Ermanaa	Daimhuma	mont Dell	2 20		
	I raver and	Lodging Expense Reimbursement F	- OIICV 3.40		Dusiness	Expense	Reimburse		CV 3.30		
Prepared E	By:	Jan MA	m/Caldera	1111				Ext.:	11/	2445	
Traveler Si	gnature:	THUNUI XI	カンスカレル					Date: /	4/1	e d	0//
Approved E			A COVIETA					Date:			4/
AUTHORIT	Y CLERK CE	ERTIFICATION ON BEHALF OF EX	ECUTIVE CON	MITTEE	(To be ce	rtified if u	sed by Pres	sident/CEC	, Gen. Cou	ınsel, or Chi	ief Auditor)
				hereby ce	tify that thi	is docume	ent was ap	proved by	the Execu	utive Comm	ittee at its
Please leav	e blank. Whos	wer clerk's the meeting will insert their na meeting.	ime and title.)								
Leave blank	and we will in	sert 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

4/23 -> Forporate Serv

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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

	lame: Thella Bower	18		Dept:06	3/Executive Office
osition:	Board Member		Gen. Counsel		Chief Auditor
	□ All other Authority	employees (does not requ	ire executive commi	ttee administr	rator approval)
DATE OF	REQUEST: 06/20/11	PLANNED DATE OF DE	PARTURE/RETURN:	08/28/11	/ 08/30/11
DESTINA	TIONS/PURPOSE (Prov	ide detailed explanation a	s to the purpose of	the trip- cont	inue on extra sheet
	as necessary):				
Destinat	ion: Reno, NV		oose: Participant or E CIP Finance Wo		rd Annual Unison -
Explana	tion: Participant on pane	at Third Annual Unison -	AAAE CIP Finance	Workshop	
	TED OUT-OF-TOWN TRANSPORTATION COS				
A. 1	RANSPORTATION COS AIRFARE	13.	\$	500.00	
		ATION (Taxi, Train, Car F	tental) \$	100.00	
BI	ODGING	ATTOM (Taxi, Train, Oar)	Sental) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	300.00	
	MEALS		\$	150.00	
	EMINAR AND CONFER	ENCE FEES	\$		
	NTERTAINMENT (If app		\$		
	THER INCIDENTAL EXP		\$	100.00	
	TOTAL PROJECTED		\$	1150.00	
FRTIFIC	ATION BY TRAVELE	ER By my signature below	/ I certify that the a	hove listed or	ıt-of-town travel an
		uthority's Policies 3.30 ar			
uthority's bu		7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	0.70 and are real	soriable aria	Totally related to the
ravelers S	/ 1/1/1/1/1/	11 -AM 1110	MA	ate:	VIMOISI
Tavelets O	ignature	a) X WANG	700	ate.	The work
FRTIFIC	ATION BY ADMINIS	TRATOR (Where Adm	inistrator is the Exe	cutive Comm	tee the Authority
		TOTTOTA (TIMOTOTICAL	modulator to the LAG	oddio ooniii	ktoo, the riddlerity
art'e eigna	ture below, I certify the fo	lloudne:			
	lure below. I ceruiv ure 10		marial magricas and th	a dataila sas	delegation the management
y my signa		al the character of tours			
y my signa 1. I hav	e conscientiously reviewe				
y my signa 1. I hav 2. The	e conscientiously reviewe concerned out-of-town tra	vel and all identified expe	nses are necessary	for the adva	ncement of the
y my signa 1. I hav 2. The Author	e conscientiously reviewe concerned out-of-town tra ority's business and reaso	vel and all identified expe	nses are necessary ne anticipated benef	for the adva	ncement of the ority.
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PEPPERMILL

THELLA

BOWENS

PAGE

WG/RM

T -T1506

3225 N HARBOR DR

08/28/2011

ARRIVAL DEPART

08/29/2011 SAN DIEGO

CA 921011045

AAAE811

DATE	REFERENCE	DESCRIPTION	SPLIT	AMOUNT
08/28/11	407826441093	REFRESHMENT CENTER T1506 Evian 1L Bottled Wa		8.00
08/28/11	407829003202	ROOM CHARGE T T1506	\$134.4	(13.4/
08/29/11 	407836457747 	HOTEL AMERICAN EXPRESS **********1003		142.47-
	T) OTAL		.00

< www.PeppermillReno.com >



Traveltrust
374 North Cosst Highway 101
Encintas, Ca 92024
Tol: 760-635-1700
Fax 760-635-1720
Website www.traveltrust.com

BOWENS/THELLA	DEPT 6		0.	5-Aug-2011 3:43 pm Page 1 of 2				
				rugo rorz				

	SOUTHWEST E-TICKET CONFIRMATION *** WB6SIG *** *********************************							
	PLEASE CHECK NEW CARRY-ON RESTRICTIONS DO YOUR CARRIER OR CALL US AT 800-792-4662INVOICE/ITINERARY ACCOUNTING DOC *********TICKETLESS TRAVEL INSTRUCTIONS** THIS IS AN E-TICKET RESERVATION. A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT A PORTION OF THIS TRIP MAY BE REFUNDABLE UNUSED PORTIONS TO US FOR POSSIBLE REFUNDABLE UNUSED PORTIONS TO US FOR SCREENING ANI INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO TO ADDITIONAL SECURITY INFORMATION VISIT ***********************************	CUMENT ******* T CHECK . PLEASE D. ******* RS******* D BOARDI IOR TO D D DEPART	** IN RETURN ** ******* NG EPARTURE URE					
	Air Southwest Airlines	Flight#	1940 Class:	K				
22 4 2014	From: San Diego CA, USA	То:	Reno NV, USA					
28-Aug-2011 05:25pm	Meal: None Equip: Boeing 737-300 Jet	Status:	Confirmed					
Sunday	Depart: 28-Aug-2011 Sunday 05:25pm Arrival: 28-Aug-2011 Sunday 06:50pm	Stops:	0					
	Depart - TERMINAL 1 Arrive - Southwest Airlines locator: ** BUSINESS SELECT CONFIRMED Flight Duration: 1 hour(s) and 25 minutes Class of Service: Business Select	5						
	Air Southwest Airlines	Flight#	300 Class:	K				
20.4 2011	From: Reno NV, USA	To:	San Diego CA, USA					
29-Aug-2011 02:05pm	Meal: None Equip: Boeing 737-700 Jet	Status:	Confirmed					
Monday	Depart: 29-Aug-2011 Monday 02:05pm Arrival: 29-Aug-2011 Monday 04:45pm	Stops:	1 (San Jose CA)					
	Depart - Arrive - TERMINAL B Depart - TERMINAL B Arrive - TERMINAL 1 Southwest Airlines locator: ** BUSINESS SELECT CONFIRMED Flight Duration: 55 minutes Class of Service: Business Select							
	Other							
25-Feb-2012 Saturday	San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS-A							
	WE ARE OPEN MONDAY - FRIDAY FROM 5AM-530PI AND SATURDAY FROM 9AM-1PM PST - 760-635-170 FOR EMERGENCY AFTERHOURS SERVICE IN THE I PLEASE CALL 888-221-6043 AND USE YOUR VIT CO PLEASE NOTE THIS IS OUR NEW EMERGENCY NUM EACH EMERGENCY CALL IS BILLABLE AT A MINIMU THANK YOU	0. US DE - SJE7 MBER	2					



Traveltrust 374 North Coest Highwey 101 Encintes, Ca 92024 Tol: 760-635-1700 Fax 760-635-1720 Website www.travetrust.com

BOWENS/THELLA

DEPT 6

05-Aug-2011 3:43 pm

Page 2 of 2

Ticket Information

BOWENS THELLA Ticket#:2192025250 Invoice#:5217631

Ticket Base Fare: Ticket Tax: Total Ticket Amount:

492.00 14.00 506.00

Electronic: YES

FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN

SERVICE FEE DOCUMENT #: 0548872194

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American Association of Airport Executives Unison Consulting, Inc.

CIP Finance Workshop

Peppermill Resort Spa Casino, Reno, Nevada • August 28-30, 2011

Sunday, August 28

5:30 - 7:30 p.m.

Registration

6:30 - 7:30 p.m.

Cocktail Reception

Monday, August 29

7:45 - 8:15 a.m.

Registration and Continental Breakfast

8:15 - 8:30 a.m.

Welcome Remarks

- o Jim Johnson, Executive Director of Airport Services, AAAE
- o Kevin Dolliole, Senior Vice President, Unison Consulting, Inc.
- Marily Mora, Executive Vice President/COO, Reno-Tahoe Airport Authority

8:30 - 9:30 a.m.

Session 1: Economic Outlook and Airport Capital Needs Moderator: Kevin Dolliole, Senior Vice President, Unison

- o Economic and industry trends (Sharon Sarmiento, Principal, Unison)
- Airport capital needs (Robin Hunt, Manager, FAA San Francisco ADO)

9:30 - 10:30 a.m.

Session 2: Evaluating Airport Capital Decisions I

Moderator: Gregory Chappell, Principal, Unison

- Considerations in airport capital decision making (Barry Molar, Director, Unison)
- o Airport financial planning (Don Arthur, Principal, Unison)

10:30 - 10:45 a.m.

Coffee Break

10:45 - 11:45 a.m.

Session 3: Evaluating Airport Capital Decisions II

Moderator: Korey Campbell, Director, Unison

- Financial analysis: traditional investment rules (Brian Drake, Consultant, Unison)
- o Economic analysis (Sharon Sarmiento, Principal, Unison)

11:45 - 12:30 p.m.

Session 4: Evaluating Airport Capital Decisions III- CEO Perspectives (CEO Panel Discussion)

Moderator: Kevin Dolliole, Senior Vice President, Unison

- Thella Bowens, President/CEO, San Diego County Regional Airport Authority
- Rhonda Hamm-Niebruegge, Director of Airports/CEO, Lambert-St.
 Louis International Airport

12:30 - 1:45 p.m.

Lunch

1:45 - 2:45 p.m.

Session 5: FAA Re-Authorization, AIP and LOI Funding

Moderator: John Sorensen, Senior Vice President, Unison

- FAA Re-Authorization Update and AIP Funding (Barry Molar, Director, Unison)
- LOI Funding (Elliott Black, Deputy Director, FAA Office of Airport Planning and Programming)

2:45 - 3:45 p.m.

Session 6: PFC Program and Case Studies

Moderator: Diane Ricard, Principal, DMR Consulting

- PFC Program (Elliott Black, Deputy Director, FAA Office of Airport Planning and Programming)
- Incorporating PFCs in airport CIP financing plans (John Sorensen, Senior Vice President, Unison)

3:45 - 4:00 p.m.

Refreshment Break

4:00 - 5:00 p.m.

Session 7: Funding CIPs in Difficult Economic Times I (Airport Case Presentations)

Moderator: John Rauback, Director of Administration and Finance, Savanna/Hilton Head International Airport

- o Reno-Tahoe International Airport (Rick Gorman, CFO)
- Sarasota Bradenton International Airport (Martin Lange, Senior Vice President and CFO)

Tuesday, August 30

7:45 - 8:15 a.m.

Registration and Continental Breakfast

8:15 - 9:15 a.m.

Session 8: Funding CIPs in Difficult Economic Times II (Airport Case Presentations)

Moderator: Jorge Gonzalez, Aviation Practice Builder, Kimley-Horn

- Phoenix Sky Harbor International Airport (Brent Cagle, Deputy Aviation Director)
- o San Francisco International Airport (Julia Dawson, Budget Manager)

9:15 - 10:15 a.m.

Session 9: Debt Financing

Moderator: Gregory Chappell, Principal, Unison

- Debt financing (Nancy Clawson, Managing Director, Merrill Lynch Public Finance)
- Airline perspective (Chris Czarnecki, Manager, Properties, Southwest Airlines)

10:15 - 10:30 a.m.

Coffee Break

10:30 - 10:50 a.m.

Session 10: Master Plan Financial Planning

Don Arthur, Principal, Unison

10:50 - 12:00 p.m.

Session 11: Program Finance Management

Moderator: Tom Strange, CEO, The Solution Design Group

- o Lambert-St. Louis International Airport Development Program (Korey Campbell, Director, Unison)
- Love Field Airport Capital Development Program (Manoj Patel, Director, Unison)
- o Chicago Department of Aviation Capital Improvement Plan (Anthony Banks, Director, Unison)

12:00 - 12:10 p.m.

Closing Remarks

- o Kevin Dolliole, Senior Vice President, Unison Consulting, Inc.
- o Jim Johnson, Executive Director of Airport Services, AAAE

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY TRAVEL EXPENSE REPORT

TRAVELER: DEPARTURE DATE: DESTINATION:		Theila F. Bowens			DEPT. NAME & NO.				cutive Of	ffice BU6		
		10/27/2011	RETUR	N DATE:	11/1/2011		1	REPO	RT DUE:	1:	12/1/11	
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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.

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10/29/2011	Hotel	1099.50 DH	0.116987	\$	128.63
10/30/2011	Hotel	1099.50 DH	0.116987	\$	128.63
10/30/2011	Dinner	196.00 DH	0.116892	\$	22.91
10/31/2011	Dinner	£34.03	1.55188	\$	52.82
10/31/2011	Hotel	£142.80	1.55188	\$	144.35
10/31/2011	Internet	£15.00	1.55188	\$	23.28
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11/1/2011	Other Meal	£2.20	1.55179	\$	3.41
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SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY OUT-OF-TOWN TRAVEL REQUEST

GENER	A I	121	RTD		MG.
GENER	-		20 1 P	-	LEG.

- 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. TRAVEL		Thella Bowen	8		Dept:	06/Executive Office
Position:	Г	Board Member		Gen. Counsel		Chief Auditor
Position:	-	All other Authority	amplayase /dage noi	require executive comm	ittee admi	nietrotor annwai)
2. DATE O	FREQU	EST: <u>06/20/11</u>	_ PLANNED DATE (OF DEPARTURE/RETURN	1: 10/2//	11 / 11/02/11
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Traveltrust 374 North Coast Highway 101 Encintes, Ca 92024 Tol: 760-635-1700 Fax 760-635-1720 Website www.traveltrust.com

BOWENS/THELLA

DEPT 6

13-Jul-2011 10:25 am

Page 1 of 3

27-Oct-2011 08:28am Thursday Air Continental Airlines
From: San Diego CA, USA
Meal: Breakfast
Equip: Boeing 737-800 Jet
Depart: 27-Oct-2011 Thursday
Arrival: 27-Oct-2011 Thursday

To: Houston Intercontinental, TX
Seats: Seat:2B
Status: Confirmed
08:28am Stops: 0

1638

Class:

Class: Z

London Heathrow EN, UK

Fliaht#

Depart - TERMINAL 2
Arrive - TERMINAL C
Continental Airlines locator: D5XY50
UA Frequent Flyer#
** AISLE SEAT CONFIRMED **

** AISLE SEAT CONFIRMED **
Flight Duration: 3 hour(s) and 11 minutes
Class of Service: Business

Air Continental Airlines

27-Oct-2011 03:45pm Thursday Air Continental Airlines
From: Houston Intercontinental, TX
Meal: Dinner
Equip: Boeing 777 Jet

Depart 27-Oct-2011 Thursday 03:45pm Arrival: 28-Oct-2011 Friday 08:55am

Depart - TERMINAL E Arrive - TERMINAL 4 Continental Airlines locator: D5XY50

WA Frequent Flyer#*

** AISLE SEAT CONFIRMED **
Flight Duration: 9 hour(s) and 10 minutes
Class of Service: Business

Seats: Seat:2D Status: Confirmed

Stops: 0

Flight#

To:



Traveltrust
374 North Coest i-ighwey 101
Enclintes, Ca 92024
Tol: 760-635-1700
-ax 760-635-1720
Website www.traveltrust.com

BOWENS/THELLA	DEPT	6			13-Ju	ıl-2011 10:25 a Page 2 of
-	Air From:	Bmi British Midiand London Heathrow EN, UK		Flight#	447 Class: P Marrakech, Morroco	
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Traveltrust 274 North Coast Haghway 101 Enclinhas, Ca 92024 Tol: 760-635-1700 Fex 760-635-1720 Website www.traveltrust.com

BOWENS/THELLA	DEPT 6			13-Jul-2011 10:25 am				
				Page 3 of 3				
	Other							
29-Apr-2012	San Diego CA, USA							
Sunday	RESERVATION RETAINED	FOR 180 DAYS						
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	AND SATURDAY FROM 9AM	M-1PM PST - 760-635-1700.						
	FOR EMERGENCY AFTERHOURS SERVICE IN THE US.							
	PLEASE CALL 888-221-6062 AND USE YOUR VIT CODE STANSO							
	PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER							
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AIRPORTS COUNCIL INTERNATIONAL

INVOICE

Invoice N°: 701109 Invoice Date: 14/07/2011 Client Number: 50381 GST: 846678316 RT0001 QST: 1217133528 TQ0001

Attention: Thella BOWENS
Billing Address:
San Diego County Regional Airport
Authority
PO Box 82776
San Diego, CA 92138-2776
USA

Purchase Order N°: Reference: WAGA 2011 Marrakesh, 31 Oct.-2 Nov. 2011

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My Saferpay Page 1 of 1

Journal Detail

Payment Saferpay Phone-Mail
The shown amount was added to your Saferpay-Account.

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Payment details	
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Account	Saferpay Phone-Mailorder 70525-19290148
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ACI WAGA 2011

ACI WORLD / AFRICA ANNUAL GENERAL ASSEMBLY, CONFERENCE & EXPOSITION

MARRAKECH, MAROC - 28 OCTOBER - 02 NOVEMBER

SCHEDULE OF EVENTS

27 October 2011 All Day : AFR Working Group Airport Charges (Thursday)

28 October 2011

(Friday)

1400 - 1700 : AFR Executive Committee

AII Day : AFR Working Group Airport Charges

29 October 2011 0800 - 0900 : World Audit Committee meeting (Saturday) 0900 - 1700 : AFR Working Group I meeting 0900 - 1700 : AFR Working Group II meeting 0900 - 1700 : AFR Working Group III meeting **ACI Europe Executive Committee** 0900 - 1330 : 0900 - 1330 : ACI Europe Board meeting 1300 - 1400 : Lunch 1400 - 1430 : World Budget Committee meeting 1430 - 1700 : World Executive Committee meeting 1700 - 1800 : **ACI Fund Board meeting** 1930 - 2300 : Board dinner (all regions) Conference hall build up All day :

30 October 2011
(Sunday)

All day : Exhibition move-in/ Conference hall build up

0830 - 1030 : AFR General Assembly

1100 - 1600 : ACI World Governing Board meeting

1300 - 1400 : Lunch

1700 - 1900 : Scholarship networking

All day : Golf Tournament and Social Activities

0600 - 1600 : Exhibition move-in/ Conference hall baild up

0900 - 1330 : ACI Asia-Pacific/Board meeting & lynch 1390-1400

1600 - 1630 : ACI World Business Partners Board meeting (tentative)

1630 - 1730 : ACI World Business Fartners meeting (tentative)

1800 - 2000 : Opening ceremony in conference hall & exhibition opening on exhibition floor.

- Departing -



Centre Monétique Interbancaire

F.Bowens Thella Morocco

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Member of Preferred Hotels & Resorts Worldwide





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196.00 DH= \$22.91US

Page 1 of 1



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Palmeraie Golf Palace ***** L* Les Jardins de la Palmeraie* Circuit de la Palmeraie * BP 1488 * 40 000 Marrakech * Maroc Tél.: +212 (0) 524 30 10 10 * Fax: +212 (0) 524 30 90 00 * www.paimeraiemarrakech.com * E-mail reservation@pgp.ma / sales@pgp.ma RC . 6041 * Patente : 53001749 * IF : 06501811



RECEIPTS FROM TRAVEL TO MARRAKECH, MOROCCO OCTOBER 27 – NOVEMBER 1, 2011—THELLA F. BOWENS

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BUSINESS DATE:	28 OCT 2011
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BENEFIT FROM COMMISS	ION FREE FOR
RETURNED CURRENCY UP T	D THE ORIGINAL
PURCHASE AMOUNT AT AM	ERICAN EXPRESS
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Fish & Chips 16.95 1 Fruit Salad 5.95 1 Strath 330ml spa 3.50 1 Pot of Tea 3.85 5.04 VAT 30.25 SUBTOTAL 30.25 12.5%Service Chr 70TAL DUE 34.03
ROOM No:
SIGNATURE: Discretionary12.5%service charge has been added to your bill

RECEIPTS FROM TRAVEL TO MARRAKECH, MOROCCO OCTOBER 27 - NOVEMBER 1, 2011—THELLA F. BOWENS

Costa Coffee
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Heathrow Aircord, wounslow
voodlessk, TW6 3X4

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Til: 2 Sala 202478

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** 0 25 DINCESSION 10% DISCOUNT **

Tell us about your visit, we're listening Text to 07537 412001 or visit website costafeedtate colle. See web for Tabs Store reference: 40014435

Dusta Soffes Heathrow Terrins: 4 Airside Heathrow Aircort, Hounslow Michlesek, TW6 3X4

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Tall us about your visit, we're listening Text to 07537 412031 or visit website costafeedceck.colk. See web for T&Ds Store reference: 43014435

YOU COULD HAVE EARNED & POINTS
BY LSING A COFFEE CLUB CARD

Forgotten your card? Bring your card and surrender this rescipt by 29/11/2011 to collect the end of as at participating atoms.

Page 2 OF 2



ID

BOWENS, THELLA

SAN DIEGO COUNTY REG AIRPORT A

P.O. BOX 82776

SAN DIEGO, CA 92138-2776 UNITED STATES OF AMERICA **ROOM NUMBER**

255/Q1

ARRIVAL DATE DEPARTURE DATE

31/10/2011 18:52:00 01/11/2011 08:54:00

ADULT/CHILD

1/0

ROOM RATE RATE PLAN

£ 119.00 L-T1

AL:

Hhonors #

£191.83 L

VAT INVOICE

18285875 CONFIRMATION NUMBER: 3440034498

VAT#

GUEST CHARGES

917 8760 84

FOLIO NO./CHE TAX DATE:

611906A 01/11/2011

CREDIT

01/11/2011 DATE

PAGE 1

DESCRIPTION

31/10/2011 IBAHN INTERNET ACCESS

31/10/2011 OSCAR'S # 3265

31/10/2011 GUEST ROOM

31/10/2011 ROOM TAXES

01/11/2011 AX *1003

LINTR	3389235	£34.03 - SCC
LINTR	3389263	£15.00
COGO	3389647	£119.00 3
COGO	3389647	£23.80
TOFA	3390313	

REF NO

BALANCE **ESTIMATED CURRENCY TOTAL GBP**

£0.00 0.00

BALANCE

TAX SUMMARY

Taxable Amount (excl VAT)	£156.71
Zero Rated Amount	£0.00
Non Taxable Amount	£3.78
VAT AT 20%	£31.34
VAT AT 17.5%	£0.00
VAT AT 15%	£0.00
Total Amount Payable	£191.83

SIGNATURE.

Thank you for your custom. Payment required upon presentation.

Hilton London Heathrow Airport Terminal 4, Heathrow Airport, Hounslow, Middlesex, TW6 3AF

Telephone: +44 (0)20 8759 7755 Fax: +44 (0)20 8759 7579 Reservations: hilton.co.uk

Hilton Reservations and Customer Care: 08705 909090

Adda Hotels T/A Hilton London Heathrow Airport Registered Office: Adda Hotels, Maple Court, Central Park, Reeds Crescent, Watford, Herts, WD24 4QQ, England

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY TRAVEL EXPENSE REPORT

DEPARTUR DESTINATI	RE DATE:	9/17/2011									
		9/1//2011	RETUR	N DATE:		9/21/2011		REPOR	T DUE:	10	/21/11
Diagon min	ON:	Washington, DC									
expenses a	nd approvals.	ity Travel and Lodging Expense R Please attach all required suppor should be explained in the space	ting documenta	tion. All re							
			Authority Expenses		1		Employe	e Expens	es		
			(Prepaid by Authority)	SUNDAY	MONDAY 9/19/11	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	707410
Air Fere Rs	ilmad Rus (et	tach copy of itinerary w/charges)	482.00	9/18/11	9/19/11	9/20/11	9/21/11			9/17/11	TOTALS 0.0
THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS N		copy of fiver/registration expenses)	402.00								0.0
Rental Car											0.0
Gas and Oil									PART THE	2 7	0.0
Garage/Par	king*							1			0.0
Mileage - at	tach mileage f	'orm*	医海门基于阿尔		II y Ess						0.0
		include tips pd.)*		73.00	11.00		11.25				95.2
Hotel*				319.46	319.46	319.46		Was all	10	319.46	1,277.8
	Internet and F	ax*	16.15								0.0
Laundry*							Balanta				0.0
		ids,bellhop,other hotel srvs.)									0.0
Meals (include	Breakfast*		Event Service	24.00	-						24.0
tips pd.)	Lunch*				400.00	100	8.39			-	8.3
	Dinner*			23.45	155.25		7.49				186.1
41531516	Other Meals			ENCENTRAL .	ALTERNATION A	16000 5232A	ESS/ESS/ESS/ESS/ESS/ESS/ESS/ESS/ESS/ESS		Man Carre	EAR STRONG	0.0
Hospitality 1	non-reimbursal •	ne expense			200751369		THE STATE OF THE S				0.0
	us: Baggage	Food		-	-			12.3			0.0
MINISCONALIOO	us. Dayyaye										0.0
			17. 7. The Co.		V65/64/5 (4.6)						0.0
*Provide de	tailed receipts				A				W FEW	EVENS.	0.0
MARGINET STATE	Name and Address of the Owner, where the Person of the Per	tal Expenses prepaid by Authority	482.00	439.91	485.71	319.46	27.13	0.00	0.00	319.46	1,591.6
					Total Eve	onece Dec	nold by A	dh a dh e			402.0
Explanation:						-	paid by Au		-		482.0
					(including			iipioyoo	118		1,591.6
					Grand Tri	p Total					2,073.6
								y of Authority	ck)		
							paid by Au				482.0
1Give names	and business at	filiations of any persons whose meals w	vere paid by trave	Mar. 1 1			ive amour	AND THE RESERVE OF THE PARTY OF			
3 Prepare Ch	eck Request			37			ative amo			1000	1,591.6
3Attach pers	onal check paya				N	ote: Send (his report t	o Accountir		the amount	is \$0.
		rator acknowledge that I have I and 3.30 - Business Expense			The second second second second						
		certify that this report of travel									
correct.											
	Travel and L	odging Expense Reimbursement	Policy 3.40		Business	Expense I	Reimburse	ment Police	y 3.30		
Prepared By		allan alla	my Caldera		/ 1			Ext.:		2445	
Traveler Sign		Thelles	077772/					Date:	12	10 201	1
E CHEST		nucla y	MANE SHE						16	tinh rat	
Approved By	<i>-</i>			331				Date: _			
AUTHORITY	CLERK CER	TIFICATION ON BEHALF OF EX	ECUTIVE COM	MITTEE	(To be ce	rtified if us	ed by Pres	ident/CEO	Gen. Cou	ınsel, or Ch	ief Auditor)
		Commence of the commence of th		nereby cer	tify that th	is docume	nt was an	proved by	the Exec	utive Comn	nittee at its

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.

S:\Travel\Thelia 2011\09-18, Washington DC\Washington DC Travel Expense Report TFB .xisx

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY 4/21 -> Corporate Serv. OUT-OF-TOWN TRAVEL REQUEST

GEN	FRAI	INSTR	LICT	ONG.

- 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

Tall other Authority employees (does not require executive committee administrator approval) DATE OF REQUEST: 06/20/11 PLANNED DATE OF DEPARTURE/RETURN: 09-18-11 / 09-21-11 DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip— continue on extra shee of paper as necessary): Destination: Washington DC Purpose: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) Explanation: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: A. AIRFARE OTHER TRANSPORTATION (Taxi, Train, Car Rental) B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES D. SEMINAR AND CONFERENCE FEES ENTERTAINMENT (if applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE **3299.00 **ERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel are lociated expenses conform to the put hority's Polipies 3.30 and 3.40 and are reasonable and directly related to to the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of the trip—continue on extra sheet of the purpose of t	neition:	Thella Bowens Board Member	₩ President/CEO	Gen. Counsel	_ Dept: _	06/Executive Office Chief Auditor
DATE OF REQUEST: 06/20/11 PLANNED DATE OF DEPARTURE/RETURN: 09-18-11 / 09-21-11 DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip—continue on extra shee of paper as necessary): Destination: Washington DC Purpose: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) Explanation: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) Explanation: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: • AIRFARE • OTHER TRANSPORTATION (Taxi, Train, Car Rental) B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (If applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSES **TOTAL PROJECTED TRAVEL EXPENSES **TO						
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of paper as necessary): Destination: Washington DC Purpose: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) Explanation: Attend Fifth Annual One Region/One Voice Event and Semi-Annual Aviation Industry Workforce - Management Conference (Follow-Up to FAAC) PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: A REFARE OTHER TRANSPORTATION (Taxi, Train, Car Rental) B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (if applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE S. 1099.00 ERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel an coclated expenses conform to the puthority's Policies 3,30 and 3,40 and are reasonable and directly related to thority's business. Available of the purpose 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. 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. 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. 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: Date: ITHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE	DATE OF REQU	EST: 06/20/11	PLANNED DATE OF DE	PARTURE/RETURN:	09-18-1	1 / 09-21-11
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(Leave blank and we will insert the meeting date.)



Traveltrust 374 North Coast Fighway 101 Encinitas, Ca 92024 Tol: 760-635-1700 Fex 780-835-1720 Website www.travetrust.com

BOWENS/THELLA

05-Aug-2011 5:12 pm

Page 1 of 2

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 USE 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

17-Sep-2011 08:00am Saturday

Air **United Airlines** From: San Diego CA, USA Meal. Food For Purchase Boeing 757 200 Jet Fauip:

17-Sep-2011 Saturday 17-Sep-2011 Saturday

08:00am 03:47pm

Depart - TERMINAL 1 Arrive

United Airlines locator: Z9JHLA UA Frequent Flyer#
Flight Duration: 4 hour(s) and 47 minutes

Class of Service: Coach

21-Sep-2011 05:45pm Wednesday

Air From: Meal: Equip:

Depart:

Arrival:

United Airlines Washington Dulles DC, USA Food For Purchase

Boeing 757 200 Jet 21-Sep-2011 Wednesday 21-Sep-2011 Wednesday

05:45pm 08:01pm

Seats: Seat:10C Status: Confirmed Stops:

240

San Diego CA, USA

Flight#

Seats.

Status:

Stops:

Flight#

To:

To:

970

0

Seat:21C

Confirmed

Class: V

Class: V

Washington Dulles DC, USA

Depart -

Depart:

Arrival:

Arrive - TERMINAL 1 United Airlines locator: Z9JHLA

UA Frequent Flyer# Flight Duration: 5 hour(s) and 16 minutes

Class of Service: Coach

Other

19-Mar-2012 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...MARY LARSON-PICKETT



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BOWENS/THELLA

05-Aug-2011 5:12 pm

Page 2 of 2

Ticket Information

BOWENS THELLA Ticket#:8671382395 Invoice#:1186907

Ticket Base Fare: Ticket Tax: Total Ticket Amount:

438.00 14.00 452.00

30.00

Electronic: YES

FEE AMOUNT:

#48200

SERVICE FEE DOCUMENT #: 0548880414

BILLED TO: AMERICAN EXPRESS ENDING IN

09/18

One Region One Voice, Mission to Washington DC - Sep 18

The Chamber invites you to join the discussion at our nation's capital, and make an impact on legislation and regulation that affects your business on our Fifth Annual One Region, One Voice mission to Washington D.C.

Don't miss out on this unique opportunity to identify hot topics & issues important to your industry, participate in meetings & functions with key federal officials, interact and connect with peers who share your regional priorities, and much more.

Registration also includes participation in a Policy Team of choice, welcome reception, three group breakfasts, one group lunch, and two additional hosted receptions.

Click here to download the Registration Form.

DATE:

Start Date: Sep 18, 2011 End Date: Sep 21, 2011

TIMING:

Start Time: 08:00 am End Time: 05:00 pm LOCATION:

The Madison ADDRESS:

1177 Fifteenth St, NW

Washington

DC 20005

CONTACT DETAILS:

Contact Person: Judith Andry

Ph: (619) 544-1341

Email: jandry@sdchamber.org

SPONSORS

Delegation Partners:



REGISTRATION

Return to Calendar

One Region One Voice, Mission to Washington DC 9/18/2011 to 9/21/2011 8:00 AM to 5:00 PM

Member Registration

Non-Member Registration

Online registration open until 9/15/2011

Event Description

Registration Form is required with all registration, click here to download form.

Location

MISSION PRIORITIES

Mission Priorities

- · Resources Water & Energy
- · Healthcare, Including Medical I.T.
- Transportation
- · Border Related Issues
- National Defense & Homeland Security
- Education & Workforce
- · Small Business & Commerce
- Technology & Cyber Security

ITINERARY

Advocacy Itinerary

The Chamber is currently developing the 2011 Advocacy Itinerary. Mission priorities include, Resources - Water & Energy, Healthcare, including Medical I.T., Transportation, Border Related Issues, National Defense & Homeland Security, Education & Workforce, Small Business & Commerce, Technology & Cyber Security.

Click here to view The 2010 Delegation Itinerary.

SPONSORSHIP

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- · Event Sponsor (Reception, Luncheon or Breakfast)
- · Delegation Sponsor

Contact the Chamber Sponsorship Team at (619) 544-1354 or email sstocker@sdchamber.org.

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Miss. Thella Bowens 3225 North Harbor Drive San Diego, CA 92101 United States

FOLIO NO:
ROOM NO:
ARRIVE:
DEPART:
RATE/PACKAGE:
IN PARTY:

3U26RK 1119 17-Sep-2011 21-Sep-2011 3U15VA

Date	Description	Charges	Payments
17-Sep-11	Room Revenue	5 279.00	0.00
17-Sep-11	City Tax 14.5%	4319.46 7 40.46	0.00
18-Sep-11	Postscript Lunch #3691	Scc page 3 - 24.00	0.00
18-Sep-11	-Mini-Bar-	6.49	0.00
18-Sep-11	Room Service Lunc #2768	Su page 3 - 23.45	0.00
18-Sep-11	Room Revenue	319.46 3 279.00	0.00
18-Sep-11	City Tax 14.5%	311.96 7 40.46	0.00
19-Sep-11	Room Revenue	279.00	0.00
19-Sep-11	City Tax 14.5%	319.46 2 40.46	0.00
20-Sep-11	Room Revenue	\$ 279.00	0.00
20-Sep-11	City Tax 14.5%	319.46 7 40.46	0.00
21-Sep-11		0.00	1,331.78
	Totals for Sub-Foli	o: 1 1,331.78	1,331/18 1325.2

Paid in Full - Thank You

0.00

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

Guest Signature



RECEIPTS FROM TRAVEL TO WASHINGTON D.C. JULY 17-19, 2011—THELLA F. BOWENS

FROM	Dulles	
то	Hotel	
DATE	9/18	FARES 63 + 10 - (73
DRIVER'S	NAME	CAB#
		nuest, We Accept

ALEXANDRIA UNION CAR

10 State department
(Missing (coeipt Perm)
1100

Su page after 3 of 3

9/19/2011 McBee Strategies dinner
(Missing (coept Perm attached)
135

	1 2	
Page	OF	

RECEIPTS FROM TRAVEL TO WASHINGTON D.C. **JULY 17-19, 2011—THELLA F. BOWENS**

Tidewater Landing

Located In Concorse C At Dulles

International Airport

DC TRIP / CAPPED FIVE STAR CAB # 239 09/21/11 TR 1071 START END MILES 08:08 08:26 3.5 FARE FOR EA KATT RATE 1: \$ 10 25 EXTRA: \$ 1.00 TOTAL: \$ 11.25 H 87261 FACE ID# 54786

TEL 202 645-601

51 A T Tb1 35/1 Chk 1391 Gst 0 Sep21'11 04:43PM 1 BBQ Pork Sand 7.99 Subtota1 7.99

0.40

8.39

Have a Safe Flight!!!

Sales Tax

14.57PM Total

9/21 DOT Breakfast Ray Lathood

UMITED

01/21/2011 'A!! ---

Receipt #: 0770 Transaction | TIME THE TOWN OF IT

". de

frieduct Price Qty And Charse Plate 7.49 1 7.49 110. 1 19 DAXI USD 1.49

OF

Post Script Bar 1177 15th St NW Washington DC 509 SIGUENZA

TBL 24/1 CHK 3691 GST 1 / SEP18'11 11:15AM

Breakfost

Dinner

09/18

1 B'fast Buffet 10 00
SUBTOTAL 15 11
Tax 1.30
Total Due 20.90
Gratuity 34.00

risca Number 11.19

Print Name IHELLA BOWENS
Signature Kella A Bowens

1177 15th St NW Washington DC 509 SIGUENZA 1

TBL 24/1 CHK 3691 GST 1 / SEP18'11 11:15AM

1 B'fast Buffet 19.00 FOOD 19.00 Gratuity 3.10

Post Script Bar

Cratuity 3.10
Tax 1.90
Payment 24.00
CHARGE TIP 3.10
1119
ROOM 1119-BT
Room Charge 24.00
----509 CLOSED SEP18 12:33PM----

Poom Service 1177 ista St NW Washington DC 102 Fransise

78L 1119/1 CHK 2768 GST 1 < SEP18'11 4:34PM

1 Delivery Charge 4.00 1 Soup of the Day 9.00 1 Iced Tea 3.75 SUBTOTAL 16.75 18% Service Chrg 3.02 Tax 1.68

21.45

Scratuit, 23 45

Room Number . 1119

Total Due

Print Name 600

Room Service 1177 15th St NW Mashington DC 102 Fransisc 1

TBL 1119/1 CHK 2768 GST 1 / SEP18'11 4:34PM

1 Delivery Charge 4.00 : Coup of the Day 9.00 ! [ced Tea 3 75 F000 12.75 Delivery 2.00 18% Service Chrg 3.02 1.68 Payment 23.45 CHARGE TIP 1119 ROCM 1119-8T Room Charge --- 102 CLOSED SEP18 4:52PM----

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

MISSING RECEIPT FORM

Employee/Department Head must complete form below.

Date of Purchase/Event: 19-Sep-11

Description of Item/Event: Taxi ride from hotel to State Department

Vendor/Event Name: Five Star Taxi

Dollar Amount: \$ 11.00

Reason for Missing Receipt: Lost receipt

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

Hereby Signature 12/15/2011

Date

Date

Department Head Signature

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

MISSING RECEIPT FORM

Employee/Department Head	must complete form be	elow.
Date of Purchase/Event:	19-Sep-11	
Description of Item/Event:	McBee Strategic Dini	ner
Vendor/Event Name:	Al Tiramisu	
Dollar Amount:	\$ 155.25	
Reason for Missing Receipt:	Lost receipt	
(See attached credit card tran	nsaction detail)	
Attendees: Mike Kulis, Matt	Harris, Thelia Bowens	
I hereby certify that the origina	al receipt in question w	as lost or none was issued to me.
ala ma		
Thella KN	WIN	12/15/2011
Employee Signature		Date
Department Head Signature		Date

Transaction Date: 09/19/2011 Mon AL_TIRAMISU WASHINGTON DC **Transaction Description:** \$247.82 \$296 00 \$136 20.25 tip 155.25 2024674466 FOOD/BEVERAGE TIP Amount \$: 288.38 Doing Business As: AL TIRAMISU INC Merchant Address: 2014 P ST NW WASHINGTON DC 20036-5923 **UNITED STATES** Reference Number: 320112630401702739 Restaurant - Restaurant Category:

Attendres: Mike Kulis

Most Hamis Thella Burums

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY TRAVEL EXPENSE REPORT

DEPARTURE DATE: DESTINATION:	ELER: Thelia F. Bowens DEPT. NAME & NO. Executive Office BUG					fice BU6	6			
	11/3/2011	11/3/2011 RETURN DAT		E: 11/4/2011		REPORT DUE:		1:	12/4/11	
BI III	Newport Beach, CA			42.2						44.
expenses and approve	thority Travel and Lodging Expense als. Please attach all required supp ams should be explained in the spa	porting documenta	tion. All r	icle 3, Per eceipts mu	t 3.4, Sect ist be deta	ion 3.40, d iled, (cred	outlining ap lit card rec	opropriate eipts do n	reimbursa ot provide	ble sufficient
		Authority	9.75			Employe	e Expens	es ·		U.S.
		(Prepaid by	SUNDAY	MONDAY	TUEBDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
Ale Feet Dellered Du		Authority)				3.30	11/3/11	11/4/11		TOTALS
The state of the s	s (attach copy of itinerary w/charges) vide copy of flyer/registration expenses)		E 3 E 3 E 5							0.0
Rental Car*	иов сору от пувите увываной ехрепава,									0.0
Gas and Oil*										0.0
Garage/Parking*										0.0
Mileage - attach milea	ge form*						47.23	47.23		94.4
Taxi and/or Shuttle Fa							5.00			5.0
Hotel*				TYL AT			195.13			195.1
Telephone, Internet an	nd Fax*									0.0
Laundry*						5 1				0.0
	(maids,bellhop,other hotel srvs.)		Use is					ASSESSMENT OF THE PARTY OF THE		0.0
Meals Breakfas	st*	建设施。建筑								0.0
tine nd)								-		0.0
Dinner							35.93		La y	35.9
Other Me		Carring at 1500 A	Y TO THE O	Constitution of the	PARTY TAKEN			THE PROPERTY OF	District Calenda	0.0
<u>Alcohol is a non-reimbu</u> Hospitality ¹ *	твавие ехрепзе	THE PARTY OF THE P		H-1209DV	and the says			60.09		20.0
Miscellaneous: Bagga	ana Fees			-				60.05		60.0 0.0
Wiscellaireous. Dagga	ige rees									0.0
		A 145 / 150	-		41 7 7 7 7					0.0
*Provide detailed recei	ipts									0.0
	Total Expenses prepaid by Author	tty 0.00	0.00	0.00	0.00	0.00	283.29	107.32	0.00	390.6
Eveleneties.		Street Street		Total Eve	enses Pre	sold by A	thoribe			0.0
Explanation:					enses Incl			-		0.0
11/4/11: Attendee inch	ided Matt Harris, SDCRAA				cash adv		pioyoo			390.6
				Grand Tr	A		加速医验验			390.6
				Less Cas	h Advance	(attach cop	y of Authority	ck)		
					enses Pre					0.0
	ss affiliations of any persons whose mea	is were paid by travel	er.		eler (posit					
2 Prepare Check Request 3 Attach personal check payable to SDCRAA					ority (neg			na avan ii t	he emount	390.6

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.

- 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. Bow	/ens			Dept:	6/Executive Office
Position:	Board Member		Г G	en. Counsel		☐ Chief Auditor
	All other Authority	employees (does not re	quire exec	utive commit	tee adminis	strator approval)
2. DATE OF REQU						
of paper as nece	essary):	de detailed explanation				
Destination:Nev	wport Beach, CA		urpose: C eeting	California Airp	orts Counc	cil Board of Directors
Explanation:						
4. PROJECTED O	JT-OF-TOWN TRA					
	FARE	13.		\$		
• OTH	ER TRANSPORT	ATION (Taxi, Train, Ca	r Rental)	\$ \$ \$ \$ \$	150.00	
B. LODGIN	IG			\$	170.00	
C. MEALS				\$	100.00	
	R AND CONFERE			\$		
	TAINMENT (If appl			\$		
	INCIDENTAL EXP	TRAVEL EXPENSE		\$	420.00	
10	IAL PROJECTED	TRAVEL EXPENSE		4	420.00	
CERTIFICATION	BY TRAVELE	R By my signature bel	ow, I cert	ify that the ab	ove listed	out-of-town travel and
associated expense	s conform to the A	uthority's Policies 3.30	and 3.40	and are reas	onable and	directly related to the
Authority's business						
Travelers Signature	e:			Da	ate:	
CERTIFICATION	BY ADMINIST	TRATOR (Where Ad	lministrate	or is the Exec	utive Com	mittee the Authority
Clerk's signature is		1701		7 10 010 2700		
By my signature bel		llowing:				
	Charles Co. Commission of the Contract of the	ed the above out-of-tow	n travel re	guest and the	e details no	myided on the reverse
2. The concern	ned out-of-town tra	vel and all identified ex onable in comparison to	penses a	re necessary	for the adv	ancement of the
3. The concern		yel and all identified ex				
Administrator's Sig	Ol Ah	tha Agou	UNG		Date:	33 Sept 2011
AUTHORITY CL	ERK CERTIFIC	ATION ON BEHAI	LF OF E	XECUTIVE	COMM	TTEE /
, Tony L.P	usel, A	Alerity Clar		nereby certify	that this d	ocument was approved
by the Executive Co	ommittee at its	ting will insert their name and 9 2 2 5 2 5 1 (Leave blank and we will insert	2	mee	ting.	



November 3 -4, 2011
California Airports Council
Board Meeting
Marriott Newport Beach Hotel & Spa
900 Newport Center Drive
Newport Beach, CA 92660
949,729,3500

Tentative Schedule

Thursday, November 3

1:00 - 4:00 P.M.

Strategic Planning Session

CAC Board of Directors and Staff

Marriott Newport Beach - Cardiff Room

4:30 P.M.

Meet in hotel lobby and board shuttle to dinner

Hornblower Dinner Cruise 3101 West Coast Highway Newport Beach, CA 92663

949.650.2412

6 P.M. - 9:00 P.M.

Dinner

Business Casual Attire

Please wear comfortable shoes and bring a light jacket

Friday, November 4

8 A.M. - 9 A.M.

Continental Breakfast

Marriott Newport Beach - Cardiff Room

9 A.M.

CAC Board of Directors Meeting

Business Casual Attire

12 P.M.

Adjournment / Board Shuttle to John Wayne Airport (JWA)

12:30 - 2:00 P.M.

Lunch at JWA's New South Commuter Terminal

2:00 - 3:30 P.M.

Tour of JWA's New "Terminal C"

4:00 P.M.

Board Shuttle Back to Hotel



900 Newport Center Drive, Newport Beach, CA 92660 - 949.640.4000 - Marriott.com/LAXNB

801 BOWENS/THELLA

149.00 11/04/11 12:00 22174 6031 Fime ACCT# GROUP

NSKN

11/03/11 15:46

55

Room Clerk	Address		Payment		MRW#:
DATE	1 REFER	ENCE	CHARGES	CREDITS	BALANCE DUE
11/03 11/03 11/03 11/03 11/03 11/04	OVER VLT ROOM RM TX CA FEE NPB FEE AX CARD	VALET1 801, 1 801, 1 801, 1 801, 1	28.00 149.00 14.90 2.25 2.98	\$195.13	

TO BE SETTLED TO:

AMERICAN EXPRESS CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT, PLEASE DIAL EXTENSION 6800, OR PRESS "MENU" ON YOUR TV REMOTE CONTROL TO ACCESS VIDEO CHECK-OUT.

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNLIAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X

RECEIPTS FROM TRAVEL TO NEWPORT BEACH, CA **NOVEMBER 3-4, 2011—THELLA F. BOWENS**

TRANSPORTATION CORRIDOR AGENCIES ROUTE 73 CATALINA N ML

11/U3/11 3:29:40PM PI 1191 Ln 3 ID# 4339 Class 1 \$5.00

THANK YOU

Canaletto Ristorante Veneto 545 Newport Center Drive Newport Baach, CA 92660 11 112, 540-0500 11e | Aur 05 11 08:4404 Date: Caro, Juan Amex Acct · FERREXXXXXXXXXXXXX003 Card & ir, Selsed Trans (year - Sesse Trains he. . it Citz. Check: 33 Table: 5/1 Server. 33522 NORA H Subtotal:

Crat . -Total * * * * * Guest Cop; * * * * *

(949) 540-0900 33522 NORA H bl 5/1 Chk 33 "CV03"11 07:39PM Bruse Dagodo SAMPTETRO 28.99 100 % moierae 28.55 100.45 How did . w & your med? Receive a F . Design w/entreal purchase on jour next visit Take our brief . ey: m.W.ilfornaiosur sy.com 2) Enter access code:3091 Write rademption code 4) Bring receipt next visit Expires 30 days from today.

11/3/2011 Dinner Widohn Martin, SFO alport 28.99 2.25 +94 Director

RECEIPTS FROM TRAVEL TO NEWPORT BEACH, CA NOVEMBER 3-4, 2011—THELLA F. BOWENS

Great Maple 1133 Newport Center Drive Newport Beach, CA 92660 Ph: (949) 706-8282

	1133 Newport Center Drive
11/04/2011 1:36 PM	Newport Beach, CA 92660 Ph: (949) 706-8282
40013	
	Server: Gabriel DOB: 11/04/2011 01:39 PM 11/04/2011
2. 75 2. 75	22/1 4/40013
16. 00	AMEX 4194319
12.00	Card #XXXXXXXXXXXXXX1003
7. 00	Magnetic card present: BOWENS THELLA F
8.00	Approval: 522899
48. 50	Amount: \$ 52.25
48.50	+ Gratuity: 7.84
	= Total: $(\mathcal{B}(0.09))$
52. 2°	
52. 2 5	Χ
	1:36 PM 40013 2.75 2.75 16.00 12.00 7.00 8.00 48.50 48.50 3.76

**** CUSTOMER COPY ****

Great Maple

11/4/2011 Sunch w/ Mass Harris, Sporan

Page 2 of 2

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

MONTHLY MILEAGE and PARKING FEE REIMBURSEMENT REPORT

EMPLOYEE N			PERIOD COVERED	
Thella F. Bo			Nov-11	
DEPARTMEN				
6/Executive	فخطب كفسكيد أبيري والمكانة			
DATE	MILES DRIVEN	DESTINATION AND PURPOSE OF TRIP	PARKING FEES & OTHER TRANSPORTATION COSTS	\$\$\$
11/3/11	85.10	Newport Beach, CA to attend	Toll road en route to Newport Beach, CA	5.00
		the California Airport Councils		
		Board of Directors meeting.		
11/4/11	85.10	San Diego, CA from Newport Beach		
		(return)		
	4,210			
5 7 2 85				
				0.04
SUBTOTAL	170.20		SUBTOTAL	5.00

Computation of Reimbursement

TOTAL MILEAGE DRIVEN (LIMITED TO 200 MILE MONTHL	Y AVERAGE PER YEAR)		170.20
REIMBURSEMENT RATE: (see below) *	Rate for 7/1/11 - 12/31/11	X	0.555
TOTAL MILEAGE REIMBURSEMENT			94.46
PARKING FEES/TOLL CHARGES (ATTACH RECEIPTS)	(Sec Page 1 of 2 receipts)		5.00
TOTAL REIMBURSEMENT REQUESTED		\$	99.46
原始 在原理的 医性神经 医皮肤 医皮肤 医皮肤 医皮肤			TO STORY
I acknowledge that I have read, understand and agree to *Aut Policy 3.30 - Business Expense Reimbursement Policy and the	at any		
purchases/claims that are not allowed will be my responsibility certify that this report of mileage traveled on Business Expense/Reimbursement/Policy 3.30	() I further		

7/1/11 - 12/31/11 = \$.555 1/1/11 - 6/30/11 = \$.51 1/1/10 - 12/31/10 = \$.50 Please use <u>2011 - 1-1 to 6-30</u> tab for mileage prior to <u>July</u> 1, 2011

Google

Directions to 900 Newport Center Dr, Newport Beach, CA 92660

85.1 mi - about 1 hour 33 mins

11/3/2011 Miléage from airport to Newport Beach, CA destination.





3225 N Harbor Dr, San Diego, CA 92101

Y			
	1.	Head south	go 16 ft total 16 ft
r	2.	Turn right toward Airport Terminal Rd	go 463 ft total 479 ft
5	3.	Slight left onto Airport Terminal Rd	go 0.2 mi total 0.3 mi
r	4.	Keep right at the fork	go 443 ft total 0.4 mi
4	5.	Turn left onto N Harbor Dr About 2 mins	go 1.1 mi total 1.4 mi
4	6.	Turn left onto W Laurel St About 2 mins	go 0.4 mi total 1.9 mi
4	7.	Turn left onto India St About 3 mins	go 0.9 mi total 2.7 mi
5	8.	Slight left to merge onto I-5 N About 1 hour 3 mins	go 66.6 mi total 69.4 mi
73)	9.	Take exit 85A to merge onto CA-73 N toward Long Beach Partial toll road About 12 mins	go 12.1 mi total 81.4 mi
7	10.	Take exit 12 for Bonita Canyon Dr Partial toll road	go 0.4 mi total 81.8 mi
4	11.	Turn left onto Bonita Canyon Dr About 3 mins	go 1.4 mi total 83.2 mi
	12.	Continue onto Ford Rd About 2 mins	go 0.7 mi total 83.9 mi
4	13.	Turn left onto Jamboree Rd About 2 mins	go 0.7 mi total 84.6 mi
4	14.	Turn left onto Santa Barbara Dr About 2 mins	go 0.5 mi total 85.1 mi
7	15.	Take the 1st right onto Newport Center Dr Destination will be on the right	go 108 ft total 85.1 mi
	900	Newport Center Dr, Newport Beach, CA 92660	

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

Map data ©2011 Google, INEGI

Directions weren't right? Please find your route on maps google.com and click "Report a problem" at the bottom left.

TRAVEL REQUEST

BRETON LOBNER

- 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:	Breton Lobne			Dept: 15	
Position:	Board Member	President/CEO	Gen. Counsel		Chief Auditor
Г	All other Authority	employees (does not req	uire executive commit	tee administr	ator approval)
2. DATE OF REQ	UEST: 12-7-2011	_ PLANNED DATE OF D	EPARTURE/RETURN:	1-26-11	/ 1-27-2011
of paper as neo	cessary): Denver, CO	de detailed explanation Pu Il Affairs Steering Comm	rpose: ACI-NA Legal		
A. TRANS A. AIF OT B. LODG C. MEALS D. SEMIN E. ENTES F. OTHES	ING S NAR AND CONFERE RTAINMENT (If appl R INCIDENTAL EXP	TS: ATION (Taxi, Train, Car ENCE FEES icable)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	319.00 10.00 50.00 379.00	
	ses conform to the A	ER By my signature belouthority's Pelicies 3.30 a	and <u>3.40</u> and are reas		
Clerk's signature is By my signature is 1. I have cor 2. The conce Authority's 3. The conce	s required). pelow, I certify the following	ed the above out-of-towr vel and all identified exp onable in comparison to vel and all identified exp	travel request and the penses are necessary the anticipated benef	e details pro for the adva	vided on the reverse. ncement of the ority.
Administrator's	Signature:			Date: _	
AUTHORITY O	LERK CERTIFIC	ATION ON BEHAL	F OF EXECUTIV	E COMMIT	TEE
AUTHORITI O	LINI OLIVIII	THOU ON BEINE			
I, (Please leave blank.	Whoever clerk's the mee	ting will insert their name and	, hereby certify	y that this do	cument was approved
by the Executive	Committee at its	(Leave blank and we will inse	mee	eting.	

TRAVEL REQUESTS

THELLA F. BOWENS

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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

Position:	1. TRAVELER: Travelers Name:	Thella F. Bow	rens		Dept:	6/Executive Office
2. DATE OF REQUEST: 12/13/11 PLANNED DATE OF DEPARTURE/RETURN: 03/17/12 / 03/23/12 3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip—continue on extra shed of paper as necessary): Destination:Geneva, Switzerland Purpose: ACI World Aviation and Environmental Summit and ACI World Board Meeting Explanation: ACI World Aviation and Environmental Summit and ACI World Board Meeting Explanation: ACI World Aviation and Environmental Summit and ACI World Board Meeting 4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: • AIRFARE • OTHER TRANSPORTATION (Taxi, Train, Car Rental) \$ 200.00 B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (if applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE **STOTAL PROJECTED TRAVEL EXPENSE** **TOTAL PROJECTED TRAVEL EXPENSE** **STOTAL PROJECTED TRAVEL EXPENSE** **DOWN TO STOTE TO STO	Position:	Board Member		Gen. Counsel		Chief Auditor
3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip—continue on extra shed of paper as necessary): Destination:Geneva, Switzerland Purpose: ACI World Aviation and Environmental Summit and ACI World Board Meeting Explanation: ACI World Aviation and Environmental Summit and ACI World Board Meeting Explanation: ACI World Aviation and Environmental Summit and ACI World Board Meeting 4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: • AIRFARE • OTHER TRANSPORTATION (Taxi, Train, Car Rental) B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (If applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE S. 9900.00 CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel as associated expenses conform to/the Authority's Poligies 3,30 and 3,40 and are reasonable and directly related to the Authority's business. Travelers Signature: Date: Detail In Provided On the reverse and a lidentified expenses are necessary for the advancement of the Authority's Policies 3,30 and 3,40. Authority's Policies 3,30 and 3,40. Administrator's Signature: Date: Date: AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE		All other Authority	employees (does not rec	uire executive commit	tee admini	strator approval)
Destination: Geneva, Switzerland Purpose: ACI World Aviation and Environmental Summit and ACI World Board Meeting Explanation: ACI World Aviation and Environmental Summit and ACI World Board Meeting 4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: • AIRFARE • OTHER TRANSPORTATION (Taxi, Train, Car Rental) 8. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (If applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel a associated expenses conform tythe Authority's Polizies 3.30 and 3.40 and are reasonable and directly related to the Authority's Usiness. Travelers Signature: Date: Description by ADMINISTRATOR (Where Administrator is the Executive Committee, the Authority Spinature below, I certify that the details provided on the rever 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 are necessary for the advancement of the Authority's Policies 3.30 and 3.40. Administrator's Signature: Date: AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE	2. DATE OF REQ	UEST: 12/13/11	_ PLANNED DATE OF I	DEPARTURE/RETURN:	03/17/1	12 / 03/23/12
A. TRANSPORTATION COSTS: • AIRFARE • OTHER TRANSPORTATION (Taxi, Train, Car Rental) B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (If applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE **Secondard 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:	of paper as nec Destination:G	essary): eneva, Switzerland	Pi Si	rpose: ACI World Avi	lation and Board Mee	Environmental ting
CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel 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:	A. TRANS • AIF • OT B. LODGI C. MEALS D. SEMIN E. ENTEF F. OTHEF	SPORTATION COST RFARE HER TRANSPORTANG SIAR AND CONFERE RTAINMENT (If appli R INCIDENTAL EXP	TS: ATION (Taxi, Train, Car ENCE FEES icable) ENSES	Rental) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00 2500.00 400.00 600.00	
Authority's business. Travelers Signature: Date	CERTIFICATIO	N BY TRAVELE	<u>:R</u> By my signature bek	ow, I certify that the ab	ove listed	out-of-town travel and
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 rever 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: Date:	Authority's busines	is.	, Abour	nela /	KIN	20616
AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE hereby certify that this document was appro-	Clerk's signature is By my signature b 1. I have cone 2. The conce Authority's 3. The conce	s required). elow, I certify the foliocientiously reviewerned out-of-town traversed out-	lowing: d the above out-of-towr vel and all identified exp nable in comparison to vel and all identified exp	n travel request and the penses are necessary the anticipated benefi	e details p for the adv it to the Au	rovided on the reverse vancement of the thority.
hereby certify that this document was appro-	Administrator's S	Signature:			Date:	
hereby certify that this document was appro-	AUTHORITY C	LERK CERTIFIC	ATION ON BEHAL	F OF EXECUTIVE	E COMM	ITTEE
I, hereby certify that this document was approached. Whoever clerk's the meeting will Insert their name and title.)						
V	(Please leave blank	Whoever clerk's the meet	ing will insert their name and	, hereby certify	that this c	locument was approv

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- 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

	ame: T	hella F. Boy	vens			Dept	: 6/	Executive Office
Position:	☐ Board	Member		☐ Ger	. Counse	əl		Chief Auditor
r contion.	☐ All othe	er Authority	employees (does not rec	uire execu	tive com	mittee adm	nlnist	rator approval)
2. DATE OF I			PLANNED DATE OF D					The second second
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			ide detailed explanation	as to the p	ourpose o	of the trip-	cont	tinue on extra sheets
	s necessary)				40 4014			
Destination	on:Salt Lake	City, Utan		rpose: 20 O Forum	12 ACI-N	IA WINTER	Boar	d of Directors and
Explanation	on: 2012 AC	CI-NA Winte	r Board of Directors Mee		EO Foru	ım		7 J.
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- 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

TRAVELER: Travelers Name: Theila F. Bowe	ens		Dept: 6/	Executive Office
☐ Board Member	▼ President/CEO	☐ Gen. Couns		Chief Auditor
Position:		d		-4
	mployees (does not requ	line executive com	mittee administr	ator approval)
2. DATE OF REQUEST: 12/13/11	_ PLANNED DATE OF DI	PARTURE/RETUR	RN: <u>03/13/12</u>	/ 03/17/12
3. DESTINATIONS/PURPOSE (Provide	le detailed explanation a	s to the purpose	of the trip-cont	inue on extra sheets
of paper as necessary):				
Destination:Washington, DC		pose: 2012 ACI-l iference	NA/AAAE Spring	y Washington
Explanation: 2012 ACI-NA/AAAE	Spring Washington Con	erence		
4. PROJECTED OUT-OF-TOWN TRA A. TRANSPORTATION COST • AIRFARE • OTHER TRANSPORTA B. LODGING C. MEALS D. SEMINAR AND CONFERE E. ENTERTAINMENT (If applie F. OTHER INCIDENTAL EXPE TOTAL PROJECTED CERTIFICATION BY TRAVELE associated expenses conform to the Au Authority's business. Travelers Signature:	S: TION (Taxi, Train, Car I NCE FEES cable) ENSES IRAVEL EXPENSE	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
CERTIFICATION BY ADMINIST	RATOR (Where Adm	inistrator is the E	xecutive Comm	ittee, the Authority
Clerk's signature is required).				
By my signature below, I certify the following	owing:			
1. I have conscientiously reviewed				
The concerned out-of-town trav				
Authority's business and reason		THE RESERVE OF THE PARTY OF THE		
 The concerned out-of-town trav Authority's Policies 3.30 and 3. 		enses conform to	the requirement	s and intent of
Administrator's Signature:			Date:	
AUTHORITY CLERK CERTIFIC	ATION ON BEHALI	OF EXECUT	IVE COMMIT	TEE
		hereby co	diffy that this day	cument was approved
(Please leave blank. Whoever clerk's the meeti	ng will insert their name and t	tle.)	iny diatana doc	Jument was approved
by the Executive Committee at its			neeting.	
	eave blank and we will insert			

- 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

1. TRAVELER: Travelers Name:	Thella F. Bo	wens			Dept:	6/Executive Office
	Board Member		☐ Gen.	Counsel		Chief Auditor
	All alban Authoritis	ampleyage (does not as			daa adaala	-A
		employees (does not rec				
2. DATE OF REQU	JEST: <u>12/13/11</u>	PLANNED DATE OF I	DEPARTURE/	RETURN:	01/22/	2 / 01/24/12
		vide detailed explanation	as to the pu	rpose of t	the trip- co	ntinue on extra sheets
of paper as nece				NA Air C	D-4	and Diamina
Destination:Lo	ng Beach, CA		irpose: ACI- eminar	NA AIF SE	ervice Data	and Planning
Explanation: A	CI-NA Air Service	Data and Planning Sem				
	UT-OF-TOWN TR PORTATION COS FARE			\$		
		TATION (Taxi, Train, Car	Rental)	\$	150.00	
B. LODGIN		THOM (Taxi, Train, our		\$	350.00	
C. MEALS				\$	150.00	
	AR AND CONFER	ENCE FEES		\$	575.00	
E. ENTER	TAINMENT (If app	olicable)		\$		
F. OTHER	INCIDENTAL EX	PENSES		\$		
ТО	TAL PROJECTE	TRAVEL EXPENSE		\$	1225.00	
CERTIFICATION	N BY TRAVEL	ER By my signature bel	ow I certify t	hat the al	nove listed	out-of-town travel and
10/20/20/20/20/20		Authority's Policies 3.30		,		
Authority's business		11/2/2	1 - 4	y u. c 1000		
Travelers Signatur		11-4/10/11/		D	ate: /c/	100,2011
Travelers Signatur	e dua	c June	THE STATE OF THE S		ale. 19	secondy
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Clerk's signature is						
By my signature be	THE ROOM AS A STATE OF THE PARTY OF THE PART	ollowina:				
		ed the above out-of-town	travel requi	est and th	e details n	rovided on the reverse
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Administrator's S	ignature:				Date:	
AUTHORITY CL	ERK CERTIFIC	CATION ON BEHAL	F OF EXE	CUTIVI	E COMM	ITTEE
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by the Executive C				mee	ting.	
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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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

Position:	Thella F. Bow				_ Dept: _6	Executive Office
CONTOUR.	Board Member	▼ President/CEO	☐ Gen	. Counsel		Chief Auditor
Г	All other Authority	employees (does not	require execu	tive commit	tee administ	trator approval)
DATE OF REC	QUEST: 12/15/11	PLANNED DATE OF	F DEPARTUR	E/RETURN:	03/26/12	2 / 03/28/12
		de detailed explanation	on as to the p	urpose of t	the trip-con	tinue on extra shee
of paper as ne	cessary): /ancouver British Col	umbio Canada	Purpose: Att	and ACL N	A Duningan	Information
Destination. v	ancouver british con					Security Spring
The second section of the sect	Attend ACI-NA Busin	ness Information Tec		Public Safe	ty and Secu	irity Spring
Conference						
		WELLENDENGES				
	OUT-OF-TOWN TRA SPORTATION COS					
	RFARE	10.		\$	750.00	
		ATION (Taxi, Train, C	ar Rental)	\$	150.00	
B. LODG				\$	400.00	
C. MEAL	S			\$	150.00	
	NAR AND CONFERE			\$ \$ \$	600.00	
	RTAINMENT (If appl			\$		
	R INCIDENTAL EXP		9.01.0	\$	0050.00	
	OTAL PROJECTED	TRAVEL EXPENSE		\$	2050.00	
FRTIFICATION	ON BY TRAVELE	R By my signature b	elow I certify	that the at	oove listed o	out-of-town travel a
		uthority's Policies 3.3				
uthority's busine		1. 12-	1011			110- 5
ravelers Signat	1/1 //1/1/	W 4XXXII	WILL	Da	ate: /5 /	UC 201
				TEACH V		
EDTIFICATIO	ON BY ADMINIST	TRATOR (Where	Administrator	is the Exec	cutive Comm	nittee, the Authority
ERTIFICATION	s required).					
		laudae:				
lerk's signature i	below, I certify the fol	lowing.				
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(Leave blank and we will insert the meeting date.)

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

Travelers Name: Thella F. Bowens		Dept:	6/Executive Office
Position: Position: President/CEO G	en. Counse		Chief Auditor
All other Authority employees (does not require exec	cutive comm	nittee admir	nistrator approval)
2. DATE OF REQUEST: 12/15/11 PLANNED DATE OF DEPARTU	RE/RETURN	N: <u>03/28</u>	/12 / 03/29/12
3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the	purpose o	f the trip- c	ontinue on extra sheet
of paper as necessary):			
Destination: Sacramento, CA Purpose: A Directors N		ornia Airpo	rts Council Board of
Explanation: Attend California Airports Council Board of Directors	Meeting		
4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES			
A. TRANSPORTATION COSTS:			
• AIRFARE	\$	600.0	
OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	150.00	
B. LODGING	\$	200.00	
C. MEALS	\$	100.00	
D. SEMINAR AND CONFERENCE FEES	9		
E. ENTERTAINMENT (If applicable)	•	A	
	0		
F. OTHER INCIDENTAL EXPENSES	\$	1050.00	
	\$ \$ \$ \$ \$	1050.00	<u>) </u>
F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I cert associated expenses conform to the Authority's Policies 3.30 and 3.40	ify that the	above liste	d out-of-town travel and
F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I cert associated expenses conform to the Authority's Policies 3.30 and 3.40	ify that the	above liste	d out-of-town travel and
F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I cert associated expenses conform to the Authority's Policies 3.30 and 3.40 Authority's business. Travelers Signature:	tify that the and are rea	above listerasonable an	d out-of-town travel and directly related to the
F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I cert associated expenses conform to the Authority's Policies 3.30 and 3.40 Authority's business. Travelers Signature: CERTIFICATION BY ADMINISTRATOR (Where Administrate)	tify that the and are rea	above listerasonable an	d out-of-town travel and directly related to the
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F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I cert associated expenses conform to the Authority's Policies 3.30 and 3.40 Authority's business. Travelers Signature: CERTIFICATION BY ADMINISTRATOR (Where Administrate Clerk's signature is required). By my signature below, I certify the following: 1. I have conscientiously reviewed the above out-of-town travel research.	and are read or is the Executed and are read or is the Executed and	above listerasonable and Date: /	d out-of-town travel and directly related to the solution of t
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