Meeting Date: JANUARY 10, 2013

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 2013 Budget.
Authority Strategies:
This item supports one or more of the Authority Strategies, as follows:
Community Customer Employee Financial Operations Strategy Strategy Strategy

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

TRAVEL REQUESTS

ROBERT GLEASON

GEN	FRAI	INSTRU	ICT	IONS:

- A. All travel requests must conform to applicable provisions of Policies $\underline{3.30}$ and $\underline{3.40}$.
- 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: Robert H. Gleason		Dept: Board/2	
Position: President/CEO	Gen. Counsel	T Chie	ef Auditor
T All other Authority employees (does not re	quire executive commit	tee administrator appr	roval)
2. DATE OF REQUEST: 10/25/12 PLANNED DATE OF	DEPARTURE/RETURN:	12/3/12 / 1	2/7/12
DESTINATIONS/PURPOSE (Provide detailed explanation of paper as necessary): Destination: Tokyo, Japan P Explanation:	n as to the purpose of the urpose: Attend Japan		
4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: • AIRFARE • OTHER TRANSPORTATION (Taxi, Train, Ca B. 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 be	\$ \$ \$ \$ \$	4100 500 1100 500 200 6400 bove listed out-of-tow	n travel and
associated expenses conform to the Authority's Policies 3.30	and 3.40 and are reas	sonable and directly re	elated to the
Authority's business.	and oto and are read		
Travelers Signature:	D	ate: 10.25	.12
CERTIFICATION BY ADMINISTRATOR (Where Ad Clerk's signature is required). By my signature below, I certify the following: 1. I have conscientiously reviewed the above out-of-tow 2. The concerned out-of-town travel and all identified exauthority's business and reasonable in comparison to 3. The concerned out-of-town travel and all identified exauthority's Policies 3.30 and 3.40 Administrator's Signature: AUTHORITY CLERK CERTIFICATION ON BEHA I, (Please leave blank. Whoever clerk's the meeting will insert their name and	orn travel request and the expenses are necessary the anticipated benefit penses conform to the expenses conformation to t	ne details provided on for the advancement to the Authority. e requirements and in Date:	the reverse. of the
by the Executive Committee at its	mee	eting.	
(Leave blank and we will ins	ert the meeting date.)		

03 DEC 2012 > 07 DEC 2012 TRIP TO TOKYO NARITA, JAPAN

PREPARED FOR GLEASON/ROBERT



TRAVELTRUST SCRIPPS RANCH 1-800-792-4662 TRAVEL CONSULTANT E4

RESERVATION CODE HOITNZ AIRLINE RESERVATION CODE KY4RHA (JL) **Travel Arranger Priority Comments**

YOUR JAPAN AIRLINES ETICKET CONFIRMATION IS ** KY4RHA ** -- INVOICE/ITINERARY ACCOUNTING DOCUMENT-

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

THIS IS AN E-TICKET RESERVATION.

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

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

FOR TRAVEL TO JAPAN A US CITIZEN MUST HAVE A VALID PASSPORT YOU CANNOT TRAVEL OUT OF THE UNITED STATES IF YOUR U.S. PASSPORT EXPIRES WITHIN 6 MONTHS OF YOUR DEPARTURE DATE

FOR EMERGENCY AFTERHOURS SERVICE WHILE IN JAPAN PLEASE CALL 010/061-010/0041-010/0033-0100 THEN 800-15253545 IF INTL AFTERHOUR NUMBER DOES NOT WORK DIAL DIRECT OR COLLECT 201-221-4462

YOUR INTERNATIONAL TRAVEL MAY REQUIRE VACCINATIONS PLEASE CHECK WWW.CDC.GOV FOR LATEST REQUIREMENTS

DEPARTURE: MONDAY 03 DEC ARRIVAL: TUESDAY 04 DEC

Please verify flight times prior to departure

JAPAN AIRLINES JL 0065 Duration: 12hr(s) :00min(s)

SAN SAN DIEGO, CA NRT

TOKYO NARITA, JAPAN

Departing At: 11:30am (Mon, Dec 3) Arriving At: 4:30pm (Tue, Dec 4)

COMMUTER TERMINAL

Terminal: **TERMINAL 2** Aircraft: Air

Distance (in Miles): 5554

Stop(s): 0

Notes:

** AISLE SEAT CONFIRMED **

Passenger Name: » GLEASON/ROBERT Seats: 07C / Confirmed Class:

Terminal:

Status:

Frequent Flyer #: Business Confirmed L967856 / AMERICAN AIRLINES eTicket Receipt(s): 1317141341625

Meals: Served



DEPARTURE: FRIDAY 07 DEC Please verify flight times prior to departure

Departing At:

TERMINAL 2

5:10pm

Terminal:

JAPAN AIRLINES JL 0066

Duration: 09hr(s):35min(s)

NRT TOKYO NARITA, JAPAN

SAN SAN DIEGO, CA

Arriving At: 9:45am

Terminal: COMMUTER TERMINAL Aircraft: Air

Distance (in Miles): 5554

Stop(s): 0

Notes:

** AISLE SEAT **CONFIRMED** **

Passenger Name:

» GLEASON/ROBERT

Seats: 07D / Confirmed Class: **Business** Confirmed

Statüs:

Frequent Flyer #: L967856 / AMERICAN AIRLINES eTicket Receipt(s): 1317141341625

Meals: Served

OOTHER: WEDNESDAY 05 JUN

OTHER

Status: Confirmed SAN

SAN DIEGO, CA

Information:

RESERVATION RETAINED FOR 180 DAYS

Notes

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

TRAVELTRUST SCRIPPS RANCH 1-800-792-4662

TRAVEL CONSULTANT E4

THELLA F. BOWENS

GENERAL	INCTO	ICTIO	NO.
GENERAL	INSIRI	JLAIRU	10.5

by the Executive Committee at its

B.	Personnel t	quests must confo	y expense shall, co	nsistent w	Policies 3.30 ith the provisi	and <u>3.40</u> . ons of Polici	es <u>3.30</u> and <u>3.40,</u> use
	the most ec	conomical means a	vailable to affect the	e travel.			
1. TRAV							
Travele	ers Name:	Thella F. Bow	ens			Dept:	Bu6 Exec Office
Position		Board Member	▼ President/CEC		Gen. Counsel		Chief Auditor
	F /	All other Authority em	ployees (does not re	equire exec	utive committe	e administrat	or approval)
2. DATE	OF REQU	EST: 12/17/12	PLANNED DATE	OF DEPART	TURE/RETURN	V: <u>01/14/1</u>	13 / 01/17/13
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	s Signature	MIKA	A Deur	UM	C)ate:	New 2013
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Clerk's sig	gnature is re	equired).				- 3 0 001/11	, the rectionty
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Adminis	strator's Sign	nature:				Date:	
AUTHOI	RITY CLE	RK CERTIFICA	TION ON BEH	ALF OF	EXECUTIV	E COMMI	TTEE
							cument was approve

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

meeting.

12/18/12 Travel dots

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

	GENER	AL	INSTRI	ICTIO	NQ.
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the most econ-	omical means	available to affect the tra	vel.	PIOAISIOIS	OI POlicie	s <u>3.30</u> and <u>3</u>	.40, uşe
1. TRAVELER:							
Travelers Name:	Thella F. Boy	lone.					
ГРес	rd Member				Dept: _E	xec Off BU6	
Position:	ind Mellipet		Gen. C	ounsel		☐ Chief A	uditor
T All o	ther Authority er	nployees (does not requin	e evertise or	manaithe and	malminates to		
2. DATE OF REQUEST	T: 12/11/12	PI ANNED DATE OF D		THE SO		approval)	13
		PLANNED DATE OF D			01/30/12	/ 01/3	1/3/2
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1. 1	•) /•					STIGO OIL BALL	3 3110613
Destination: Chicago Explanation:	0, IL	Pur	pose: Meeti	ng with Uni	ted Airline	es	
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E. ENTERTAIN	MENT (If applie	aple)	\$			1/31/12	ac or
F. OTHER INCI	DENTAL EXPE	NSES	3		00.00	atlante	64
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dministrator's Signatur	·	LIXII—KINX		9	Date:		
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(Leave blank and we will insert the meeting date.)

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GENERAL INSTRUCTION	DNS:				
A. All travel reques	s must conform	to applicable previsi	ons of Policies 3.30	and 3,40.	
B. Personnel travel	ing at Authority a	expense shall, consi	stent with the provision	ons of Policies	3.30 and 3.40, use
the most econon	nical means avail	lable to affect the tra	avel.		
1. TRAVELER:					
Travelers Name:	Thella F. Bowens			Dont: BII	e Even Office
□ Roam	termination of the second	President/CEO	☐ Gen. Counsel	Dept: BU	6 Exec Office
Position:					Chief Auditor
I All oth	er Authority emplo	yees (does not requir	e executive committee	e administrator a	pprovail
2. DATE OF REQUEST:			DEPARTURE/RETURN		1 03/22/12
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3. DESTINATIONS/PUR of paper as necessary	POSE (Provide d	ietalled explanation	as to the purpose of	the trip-contin	ue on extra sheets
Destination: Washingt					
Explanation:	DII, DC	Pu	rpose: Washington i	Legislative Con	ference
4. PROJECTED OUT-OF	TOWN TOWN	EVDENCES			
A. TRANSPORTA	ATION COSTS:	- EXPENSES			
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	RANSPORTATIO	N (Taxi, Train, Car	Bontol\ C	500.00	
B. LODGING		in (raxi, rraili, Car	Rental) \$	050.00	
C. MEALS			3	950.00	
D. SEMINAR ANI	CONFERENCE	F FEEQ	<u> </u>	202.22	
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Travelers Signature:	MOIV/1 -	X//10/11/1/		. 1/1/h/1	Drike
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ERTIFICATION BY	ADMINISTRA	TOR Where Adm	Inletrator is the Even	within Committee	- 4- 4- 4- 4
lerk's signature is require	d)	- CANOLO MUII	minatiatol is the EXEC		e, the Authority
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1. I have conscientiou	of town travel	above out-or-town	travel request and the	e details provid	ed on the reverse.
2. The concerned out	-or-town travel at	na all identified expe	enses are necessary	for the advance	ement of the
Authority's busines	s and reasonable	in comparison to the	he anticipated benefit	t to the Authorit	y.
3. The concerned out-	-of-town travel ar	nd all identified expe	enses conform to the	requirements a	nd intent of
Authority's Policies	3.30 and 3.40.				
Administrator's Signature				Deter	
				Date:	
UTHORITY CLERK (ERTIFICATION	ON ON BEHALF	OF EXECUTIVE	COMMITTE	
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			, hereby certify	that this docum	nent was approved
Please leave blank. Whoever ch	erk's the meeting will	insert their name and tit	le.)	wat tine docum	ionit was approved
y the Executive Committee	e at its		meet	ing.	
	(Leave	blank and we will insert to	he meeting date.)		

12/18/12 Travel dors corrected

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

A TRANSPORTATION COSTS: AIRFARE OTHER TRANSPORTATION (Taxl, Train, Car Rental) B. 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 and associated expenses conform to the authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business. Travelers Signature: Date: CERTIFICATION BY ADMINISTRATOR (Where Administrator is the Executive Committee, the Authority Directly's signature below, I certify the following: 1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse. 2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority. 3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40. Administrator's Signature: Date: NUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE		ty expense shall, consist vallable to affect the trans	tent with the provision vel.	ns of Policies 3.30 and 3.40, use
Position: Board Member F President/CEO Gen. Course Chief Auditor C	1. TRAVELER:			
Position:	Travelers Name: Thella F. Bow	ens		Dent RIJE Ever Office
2. DATE OF REQUEST: 12/11/12 PLANNED DATE OF DEPARTURE/RETURN: 01/31/12/13 / 02/01/12/13 3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip—continue on extra sheets of paper as necessary): Destination: Atlanta, GA Purpose: Meeting with Delta Airlines Purpose: Me	Position: Board Member		☐ Gen. Counsel	
2. DATE OF REQUEST: 12/11/12 PLANNED DATE OF DEPARTURE/RETURN: 01/31/12/13 / 02/01/12/13 3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip—continue on extra sheets of paper as necessary): Destination: Atlanta, GA Purpose: Meeting with Delta Airlines Explanation: 4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: a. AIRFARE OTHER TRANSPORTATION (Text, Train, Car Rental) B. LODGING C. MEALS D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (if applicable) F. OTHER INCIDENTAL EXPENSES TOTAL PROJECTED TRAVEL EXPENSE TOTAL PROJECTED TRAVEL EXPENSE CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business. Travelers Signature: Date: Detail CERTIFICATION BY ADMINISTRATOR (Where Administrator is the Executive Committee, the Authority Disputs and the details provided on the reverse. 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: Date: AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE	☐ All other Authority em	nolovees (does not require	a executive committee	administrator annun all
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Destination: Alanta, GA Purpose: Meeting with Delta Airlines Purpose: Meeting with Purpose Purpose: Meeti	3. DESTINATIONS/PURPOSE (Provide	de detailed explanation a	as to the number of	the trin. continue on outer the sta
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A TRANSPORTATION COSTS: AIRFARE OTHER TRANSPORTATION (Taxl, 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 100.00 Travel. CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's signature. Date: CERTIFICATION BY ADMINISTRATOR (Where Administrator is the Executive Committee, the Authority Direct's signature is required). By my signature below, I certify the following: 1. I have conscientiously reviewed the above out-of-town travel request and the details provided on the reverse. 2. The concerned out-of-town travel and all identified expenses are necessary for the advancement of the Authority's business and reasonable in comparison to the anticipated benefit to the Authority. 3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40. Administrator's Signature: Date: LUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE	Explanation:			
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homby position to the state of	Authority's business. Travelers Signature: CERTIFICATION BY ADMINISTE Clerk's signature is required). By my signature below, I certify the folio 1. I have conscientiously reviewed 2. The concerned out-of-town trave Authority's business and reasons 3. The concerned out-of-town trave Authority's Policies 3.30 and 3.44	RATOR (Where Administration wing: the above out-of-town to the and all identified expendible in comparison to the and all identified expendible and all iden	inistrator is the Exec	e details provided on the reverse. for the advancement of the to the Authority. requirements and intent of
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Please leave blank. Whoever clark's the meeting will insert their name and title.)	Authority's business. Travelers Signature: CERTIFICATION BY ADMINISTE Clerk's signature is required). By my signature below, I certify the folio 1. I have conscientiously reviewed 2. The concerned out-of-town trave Authority's business and reasons 3. The concerned out-of-town trave Authority's Policies 3.30 and 3.44 Administrator's Signature;	RATOR (Where Administration of the above out-of-town to and all identified expendible in comparison to the and all identified expendible in and all identified expendible.)	inistrator is the Exectorate request and the cases are necessary to anticipated benefit asses conform to the	utive Committee, the Authority e details provided on the reverse. for the advancement of the to the Authority. requirements and intent of Date:

ENERAL INSTRUCTIONS:			
A. All travel requests must conform to applicable provisions of Po	olicies 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.			21
TRAVELER:			
Fravelers Name: Thelia F. Bowens		Dont 5	ree Office DUIG
F Roard Member F Provident/050 Fo.	en. Counsel	Dept: E	cec Office BU6
osition:	en. Counsel		Chief Auditor
All other Authority employees (does not require executive	ve committee ac	Iministrator	approval)
DATE OF REQUEST: 12/07/12 PLANNED DATE OF DEPARTU		12	/ 02/10/12/13
	The Later of the L		
DESTINATIONS/PURPOSE (Provide detailed explanation as to the of paper as necessary):	purpose of the	trip-conti	nue on extra sheets
	H		
	National ACI Wor NCEO Forum	d Governir	ng Board meeting
Explanation: Attend ACI World Governing Board meeting and ACI	-NA CEO FOR	m	
PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS: • AIRFARE	\$	450.00	
OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	100.00	
B. LODGING	\$ 1	1900.00	
C. MEALS	\$ \$ \$	1 State 1	
D. SEMINAR AND CONFERENCE FEES E. ENTERTAINMENT (If applicable)	\$	425.00	
F. OTHER INCIDENTAL EXPENSES	\$	100.00	
TOTAL PROJECTED TRAVEL EXPENSE		975.00	
	THE PARTY OF THE P	TRANSPORT	
ERTIFICATION BY TRAVELER By any signature below, I certificated expenses conform to the Authority's Policies 3.30 and 3.40 a chority's business. avelers Signature:	and are reason	able and di	rectly related to the
RTIFICATION BY ADMINISTRATOR (Where Administrator	r is the Executi	ve Commit	tee. the Authority
rk's signature is required).			
my signature below, I certify the following:			
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I ne concerned out-of-town travel and all identified expenses are	necessary for	the advance	cement of the
Authority's business and reasonable in comparison to the anticip	pated benefit to	the Author	ity.
 The concerned out-of-town travel and all identified expenses cor Authority's Policies 3,30 and 3,40. 	nform to the rec	quirements	and intent of
Iministrator's Signature:		Date:	
		10000	
	ECUTIVE C	OMMITT	EE
THORITY CLERK CERTIFICATION ON BEHALF OF EX	100		777
THORITY CLERK CERTIFICATION ON BEHALF OF EX	100		EE ment was approved

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