



**SAN DIEGO COUNTY  
REGIONAL AIRPORT AUTHORITY**

Meeting Date: **MARCH 1, 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 Strategy     Customer Strategy     Employee Strategy     Financial Strategy     Operations 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**

**THELLA F. BOWENS**

219 → Corporate Services/  
Email

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

**GENERAL INSTRUCTIONS:**

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

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 6/Executive Office  
Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 01/31/12 PLANNED DATE OF DEPARTURE/RETURN: 02/23/12 / 02/24/12

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

Destination: Dallas, TX Purpose: Meeting with Southwest Airlines  
Explanation: Meeting with Southwest Airlines Headquarters

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

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ <u>850.00</u>
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ <u>100.00</u>
B. LODGING	\$ <u>250.00</u>
C. MEALS	\$ <u>100.00</u>
D. SEMINAR AND CONFERENCE FEES	\$ _____
E. ENTERTAINMENT (If applicable)	\$ _____
F. OTHER INCIDENTAL EXPENSES	\$ _____
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ <u>1300.00</u></b>

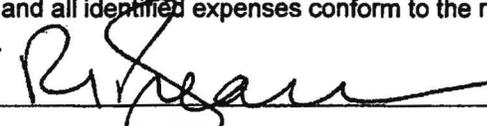
**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: 2 Feb 2012

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

By my signature below, I certify the following:

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

Administrator's Signature:  Date: 2-9-12

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

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

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

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

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 6/Executive Office  
 Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

**2. DATE OF REQUEST:** 01/24/12 **PLANNED DATE OF DEPARTURE/RETURN:** 01/26/12 / 01/26/12

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

Destination: Long Beach, CA Purpose: ACI Media Relations and Crisis Communications Seminar  
 Explanation: \_\_\_\_\_

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

<b>A. TRANSPORTATION COSTS:</b>	
• AIRFARE	\$ _____
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ <u>131.54</u>
<b>B. LODGING</b>	\$ _____
<b>C. MEALS</b>	\$ <u>25.00</u>
<b>D. SEMINAR AND CONFERENCE FEES</b>	\$ _____
<b>E. ENTERTAINMENT (If applicable)</b>	\$ _____
<b>F. OTHER INCIDENTAL EXPENSES</b>	\$ _____
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	\$ <u>165.00</u>

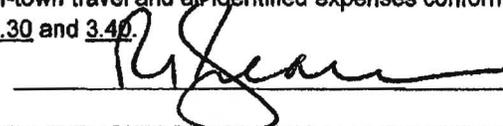
**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: 1/25/2012

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

By my signature below, I certify the following:

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

Administrator's Signature:  Date: 1.25.12

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

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

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

**GENERAL INSTRUCTIONS:**

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

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 06

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

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

2. DATE OF REQUEST: 2/10/12 PLANNED DATE OF DEPARTURE/RETURN: 04/16/12 / 4/19/12

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

Destination: Las Vegas, NV

Purpose: ACI-NA Operations and Technical Affairs/Environmental Affairs Conference

Explanation:

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

**A. TRANSPORTATION COSTS:**

- AIRFARE \$ 450.00
- OTHER TRANSPORTATION (Taxi, Train, Car Rental) \$

B. LODGING \$ 433.44

C. MEALS \$ 150.00

D. SEMINAR AND CONFERENCE FEES \$ 695.00

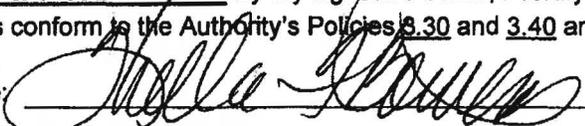
E. ENTERTAINMENT (If applicable) \$ 0.00

F. OTHER INCIDENTAL EXPENSES \$ 0.00

**TOTAL PROJECTED TRAVEL EXPENSE** \$ 1728.44

**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: 2/10/12

**CERTIFICATION BY ADMINISTRATOR**

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

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

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

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**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 06/Executive Office  
Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 02/14/12 PLANNED DATE OF DEPARTURE/RETURN: 04/24/12 / 04/28/12

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

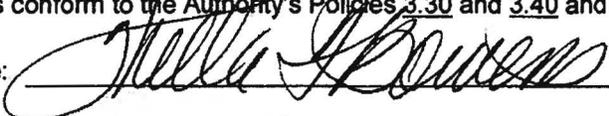
Destination: Charleston, South Carolina Purpose: ACI-NA Legal Affairs Spring Conference  
Explanation: \_\_\_\_\_

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

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ 680.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ 100.00
B. LODGING	\$ 1030.00
C. MEALS	\$ 200.00
D. SEMINAR AND CONFERENCE FEES	\$ 785.00
E. ENTERTAINMENT (If applicable)	\$ 0.00
F. OTHER INCIDENTAL EXPENSES	\$ 100.00
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ 2895.00</b>

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

Travelers Signature:  Date: 2/16/12

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

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- 3. The concerned out-of-town travel and all identified expenses conform to the requirements and intent of Authority's Policies 3.30 and 3.40.

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

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

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**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 06/Executive Office  
 Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

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

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

Destination: Marina Bay Sands, Singapore Purpose: 7<sup>th</sup> ACI Asia-Pacific Regional Assembly, Conference & Exhibition an

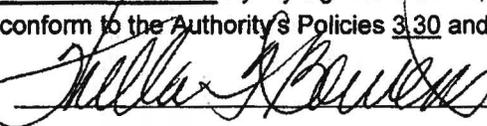
Explanation: \_\_\_\_\_

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

**A. TRANSPORTATION COSTS:**

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

**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: 2/16/12

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

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

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**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 06/Executive Office  
Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 02/14/12 PLANNED DATE OF DEPARTURE/RETURN: 05/06/12 / 05/09/12

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

Destination: Nashville, TN Purpose: ACI-NA Airport Economics and Finance and Human Capital Conference

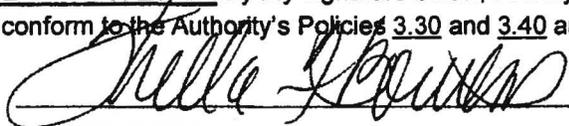
Explanation: \_\_\_\_\_

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

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ 600.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ 100.00
B. LODGING	\$ 500.00
C. MEALS	\$ 200.00
D. SEMINAR AND CONFERENCE FEES	\$ 785.00
E. ENTERTAINMENT (If applicable)	\$ 0.00
F. OTHER INCIDENTAL EXPENSES	\$ 100.00
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ 2285.00</b>

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

Travelers Signature:  Date: 2/16/12

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

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

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

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

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**1. TRAVELER:**

Travelers Name: Thella F. Bowers Dept: 06/Executive Office  
 Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

**2. DATE OF REQUEST:** 02/14/12 **PLANNED DATE OF DEPARTURE/RETURN:** 04/29/12 / 05/2/12

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

Destination: Phoenix, AZ Purpose: 84<sup>th</sup> Annual AAAE Conference & Exposition and Policy Review Committee Meeting

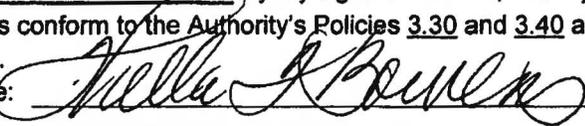
Explanation: \_\_\_\_\_

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

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$	450.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	100.00
<b>B. LODGING</b>	\$	675.00
<b>C. MEALS</b>	\$	150.00
<b>D. SEMINAR AND CONFERENCE FEES</b>	\$	750.00
<b>E. ENTERTAINMENT (If applicable)</b>	\$	0.00
<b>F. OTHER INCIDENTAL EXPENSES</b>	\$	100.00
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	\$	2225.00

**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: 2/16/12

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

By my signature below, I certify the following:

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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: \_\_\_\_\_

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

# **EXPENSE REPORTS**

**THELLA F. BOWENS**

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

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

TRAVELER: Thella F. Bowers DEPT. NAME & NO. Executive Office BU6  
 DEPARTURE DATE: 11/29/2011 RETURN DATE: 12/12/2011 REPORT DUE: 1/11/12  
 DESTINATION: Washington DC

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY 11/29/11	WEDNESDAY 11/30/11	THURSDAY 12/1/11	FRIDAY 12/2/11	SATURDAY	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	988.80								0.00
Conference Fees (provide copy of flyer/registration expenses)									0.00
Rental Car*									0.00
Gas and Oil*									0.00
Garage/Parking*									0.00
Mileage - attach mileage form*									0.00
Taxi and/or Shuttle Fare (include tips pd.)*				73.00	16.00		89.00		178.00
Hotel*				445.41	267.93	267.93			981.27
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (include tips pd.)	Breakfast*					38.00			38.00
	Lunch*						9.74		9.74
	Dinner*			27.22		36.70			63.92
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality <sup>1*</sup>									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
<b>Total Expenses prepaid by Authority</b>	<b>988.80</b>	<b>0.00</b>	<b>0.00</b>	<b>545.63</b>	<b>283.93</b>	<b>342.63</b>	<b>98.74</b>	<b>0.00</b>	<b>1,270.93</b>

Explanation:	Total Expenses Prepaid by Authority	988.80
	Total Expenses Incurred by Employee (including cash advances)	1,270.93
	<b>Grand Trip Total</b>	<b>2,259.73</b>
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	988.80
	Due Traveler (positive amount) <sup>2</sup>	
	<b>Due Authority (negative amount)<sup>3</sup></b>	<b>1,270.93</b>

*Note: Send this report to Accounting even if the amount is \$0.*

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

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

<sup>4</sup> Travel and Lodging Expense Reimbursement Policy 3.40

<sup>5</sup> Business Expense Reimbursement Policy 3.30

Prepared By: \_\_\_\_\_  
 Traveler Signature: *Thella F. Bowers*  
 Approved By: \_\_\_\_\_

Ext.: 2445  
 Date: 2/13/12  
 Date: \_\_\_\_\_

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

I, \_\_\_\_\_ hereby certify that this document was approved by the Executive Committee at its \_\_\_\_\_ meeting.

(Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 (Leave blank and we will insert the meeting date.)

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

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

**1. TRAVELER:**

Travelers Name: Thelia F. Bowens Dept: 6/Executive Office  
Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 10/24/11 PLANNED DATE OF DEPARTURE/RETURN: 11/30/11 / 12/02/11

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

Destination: Washington DC Purpose: 2011 ACI-NA International Aviation Issues Seminar  
Explanation: 2011 ACI-NA International Aviation Issues Seminar

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

<b>A. TRANSPORTATION COSTS:</b>	
• AIRFARE	\$ <u>1100.00</u>
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ <u>100.00</u>
<b>B. LODGING</b>	\$ <u>600.00</u>
<b>C. MEALS</b>	\$ <u>400.00</u>
<b>D. SEMINAR AND CONFERENCE FEES</b>	\$ _____
<b>E. ENTERTAINMENT (If applicable)</b>	\$ _____
<b>F. OTHER INCIDENTAL EXPENSES</b>	\$ _____
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ <u>2200.00</u></b>

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

Travelers Signature: *Thelia F. Bowens* Date: 24 Oct 2011

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

By my signature below, I certify the following:

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

Administrator's Signature: *Rixean* Date: 10.24.11

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

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

the fairfax at embassy row, washington d.c.  
 2100 massachusetts avenue north west washington, district of columbia 20008  
 phone 202.293.2100 fax 202.293.0641

guest travel agent/charge to

**Thella Bowens**



room 400  
 rate 389.00  
 no. pers. 1  
 folio 612391 A  
 page 1  
 arrive 29-NOV-11 16:53  
 depart 30-NOV-11 07:31  
 payment AX

**date reference description charges/credits**

29-NOV-11	RT400	Room Charge Retail	389.00	} 445.41
29-NOV-11	RT400	Room Tax	56.41	
29-NOV-11	7578	Room Service	27.22	
30-NOV-11	AX	American Express	472.63-	

See page 1 of 4

\*\*\*For Authorization Purposes Only\*\*\*



Auth Date	Code	Authorized
29-NOV-11	567530	544.60

Balance Due 0.00

**EXPENSE REPORT SUMMARY**

Date	Room/Tax	Food/Bev	Telephone	Other	Total	Payment
29-NOV-11	445.41	27.22	0.00	0.00	472.63	0.00
30-NOV-11	0.00	0.00	0.00	0.00	0.00	472.63-
<b>Total</b>	<b>445.41</b>	<b>27.22</b>	<b>0.00</b>	<b>0.00</b>	<b>472.63</b>	<b>472.63-</b>

Thank you for choosing Starwood Hotels. We look forward to welcoming you back soon!

I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

signature \_\_\_\_\_

As a Starwood Preferred Guest you have earned at least 814 Starpoints for this visit A50768218495

Thella Bowens	ROOM	DEPART	AGENT
FOLIO 612391 29-NOV-11	400	30-NOV-11	JENNIFER



the fairfax at embassy row, washington d.c.  
 2100 massachusetts avenue north west washington, district of columbia 20008  
 phone 202.293.2100 fax 202.293.0641

guest travel agent/charge to

**Thella Bowens**  
 [REDACTED]

room 400  
 rate 234.00  
 no. pers. 1  
 folio 608832 A  
 page 1  
 arrive 30-NOV-11 07:31  
 depart 02-DEC-11 12:30  
 payment AX

date	reference	description	charges/credits
30-NOV-11	RT400	Room Grp Association	234.00
30-NOV-11	RT400	Room Tax	33.93
01-DEC-11	RT400	Room Grp Association	234.00
01-DEC-11	RT400	Room Tax	33.93
01-DEC-11	7672	Room Service	38.00
02-DEC-11	AX	American Express	573.86-

267.9  
 267.9  
 See page 1 of 4 —

\*\*\*For Authorization Purposes Only\*\*\*

Auth Date	Code	Authorized
30-NOV-11	183230	655.20

Balance Due 0.00

EXPENSE REPORT SUMMARY

Date	Room/Tax	Food/Bev	Telephone	Other	Total	Payment
30-NOV-11	267.93	0.00	0.00	0.00	267.93	0.00
01-DEC-11	267.93	38.00	0.00	0.00	305.93	0.00
02-DEC-11	0.00	0.00	0.00	0.00	0.00	573.86-
Total	535.86	38.00	0.00	0.00	573.86	573.86-

Thank you for choosing Starwood Hotels. We look forward to welcoming you back soon!

I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

signature \_\_\_\_\_

As a Starwood Preferred Guest you have earned at least 1012 Starpoints for this visit A50768218495

Thella Bowens ROOM DEPART AGENT  
 FOLIO 608832 30-NOV-11 400 02-DEC-11 RAHEL





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

BOWENS/THELLA

DEPT 6

07-Nov-2011 2:52 pm

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS \*\* TFPVNM \*\*

  
 30-Nov-2011  
 06:18am  
 Wednesday

**Air** United Airlines **Flight#** 5325 **Class:** H  
**From:** San Diego CA, USA **To:** Los Angeles CA, USA  
**Meal:** None **Seats:** Seat:5B  
**Equip:** CRJ-Canadair Regiona **Status:** Confirmed  
**Depart:** 30-Nov-2011 Wednesday 06:18am **Stops:** 0  
**Arrival:** 30-Nov-2011 Wednesday 07:06am  
 SAN-LAX OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES  
 Depart - COMMUTER TERMINAL  
 Arrive - TERMINAL 8  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 48 minutes  
 Class of Service: Coach

  
 30-Nov-2011  
 07:48am  
 Wednesday

**Air** United Airlines **Flight#** 950 **Class:** W  
**From:** Los Angeles CA, USA **To:** Washington Dulles DC, USA  
**Meal:** Food For Purchase **Seats:** Seat:25H  
**Equip:** Boeing 777 Jet **Status:** Confirmed  
**Depart:** 30-Nov-2011 Wednesday 07:48am **Stops:** 0  
**Arrival:** 30-Nov-2011 Wednesday 03:32pm  
 Depart - TERMINAL 7  
 Arrive -  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* ECONOMY PLUS AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 4 hour(s) and 44 minutes  
 Class of Service: Coach

  
 02-Dec-2011  
 05:29pm  
 Friday

**Air** United Airlines **Flight#** 951 **Class:** W  
**From:** Washington Dulles DC, USA **To:** Los Angeles CA, USA  
**Meal:** Food For Purchase **Seats:** Seat:40B  
**Equip:** Boeing 777 Jet **Status:** Confirmed  
**Depart:** 02-Dec-2011 Friday 05:29pm **Stops:** 0  
**Arrival:** 02-Dec-2011 Friday 08:00pm  
 Depart -  
 Arrive - TERMINAL 7  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 5 hour(s) and 31 minutes  
 Class of Service: Coach

  
 02-Dec-2011  
 10:59pm  
 Friday

**Air** United Airlines **Flight#** 6344 **Class:** H  
**From:** Los Angeles CA, USA **To:** San Diego CA, USA  
**Meal:** None **Seats:** Seat:6C  
**Equip:** CRJ-Canadair Regiona **Status:** Confirmed  
**Depart:** 02-Dec-2011 Friday 10:59pm **Stops:** 0  
**Arrival:** 02-Dec-2011 Friday 11:51pm  
 LAX-SAN OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES  
 Depart - TERMINAL 8  
 Arrive - COMMUTER TERMINAL  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 52 minutes  
 Class of Service: Coach

**Other**

30-May-2012  
 Wednesday

San Diego CA, USA  
 RESERVATION RETAINED FOR 180 DAYS



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

BOWENS/THELLA

DEPT 6

22-Nov-2011 3:18 pm

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS \*\* TFPVNM \*\*

 **Air** United Airlines **Flight#** 5445 **Class:** U  
**From:** San Diego CA, USA **To:** Los Angeles CA, USA  
**Meal:** None **Seats:** Seat:8A  
**Equip:** CRJ-Canadair Regiona **Status:** Confirmed  
**Depart:** 29-Nov-2011 Tuesday 06:18am **Stops:** 0  
**Arrival:** 29-Nov-2011 Tuesday 07:06am  
 SAN-LAX OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES  
 Depart - COMMUTER TERMINAL  
 Arrive - TERMINAL 8  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* EXIT ROW WINDOW SEAT CONFIRMED \*\*  
 Flight Duration: 48 minutes  
 Class of Service: U

 **Air** United Airlines **Flight#** 950 **Class:** W  
**From:** Los Angeles CA, USA **To:** Washington Dulles DC, USA  
**Meal:** Food For Purchase **Seats:** Seat:23F  
**Equip:** Boeing 777 Jet **Status:** Confirmed  
**Depart:** 29-Nov-2011 Tuesday 07:48am **Stops:** 0  
**Arrival:** 29-Nov-2011 Tuesday 03:32pm  
 Depart - TERMINAL 7  
 Arrive -  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* ECONOMY PLUS MIDDLE - WE WILL MONITOR FOR AISLE \*\*  
 Flight Duration: 4 hour(s) and 44 minutes  
 Class of Service: Coach

 **Air** United Airlines **Flight#** 951 **Class:** W  
**From:** Washington Dulles DC, USA **To:** Los Angeles CA, USA  
**Meal:** Food For Purchase **Seats:** Seat:40B  
**Equip:** Boeing 777 Jet **Status:** Confirmed  
**Depart:** 02-Dec-2011 Friday 05:29pm **Stops:** 0  
**Arrival:** 02-Dec-2011 Friday 08:00pm  
 Depart -  
 Arrive - TERMINAL 7  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* AISLE SEAT CONFIRMED \*\*  
 Flight Duration: 5 hour(s) and 31 minutes  
 Class of Service: Coach

 **Air** United Airlines **Flight#** 6344 **Class:** U  
**From:** Los Angeles CA, USA **To:** San Diego CA, USA  
**Meal:** None **Seats:** Seat:8B  
**Equip:** CRJ-Canadair Regiona **Status:** Confirmed  
**Depart:** 02-Dec-2011 Friday 10:59pm **Stops:** 0  
**Arrival:** 02-Dec-2011 Friday 11:51pm  
 LAX-SAN OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES  
 Depart - TERMINAL 8  
 Arrive - COMMUTER TERMINAL  
 United Airlines locator: TFPVNM  
 UA Frequent Flyer# [REDACTED]  
 \*\* EXIT ROW WINDOW SEAT CONFIRMED \*\*  
 Flight Duration: 52 minutes  
 Class of Service: U

**Other**  
 30-May-2012 San Diego CA, USA  
 Wednesday RESERVATION RETAINED FOR 180 DAYS



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

BOWENS/THELLA

DEPT 6

22-Nov-2011 3:18 pm

Page 2 of 2

Ticket Information

BOWENS THELLA  
Ticket#: 8724911310  
Invoice#: 1189778

Ticket Base Fare: 196.52  
Ticket Tax: 3.48  
Total Ticket Amount: 200.00

Electronic: YES

SERVICE FEE DOCUMENT #: 0569305066 FEE AMOUNT: 25.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1012

} \$225.00

FYI: Changed itinerary due  
to request to attend  
Flight Diversion Forum

763.80  
225.00  

---

988.80

**FLIGHT DIVERSION  
PLANNING FORUM  
DRAFT AGENDA**

**November 30, 2011**

**9:00-9:45am**      **Forum Opening in the DOT Atrium**

**Opening remarks: Secretary of Transportation Ray LaHood**

**High level review of October 29, 2011 operation  
FAA Administrator Randy Babbitt**

**FAA initial recommendations to improve diversion management  
FAA Deputy Administrator Michael Huerta**

**Open session for comments/questions  
Secretary of Transportation Ray LaHood**

**9:45am**      **Break**

**10:00am**      **Concurrent break-out sessions:**  
**1) Airport Operations – Kate Lang**  
**2) Airline Operations – David Grizzle**  
**3) Customer Experience – Bob Rivkin**

**11:45am**      **Break**

**12:00pm**      **Plenary Session: Reports from Break-Out Sessions and Discussion  
Administrator Babbitt**

**1:00pm**      **Close-out  
Administrator Babbitt**

**RECEIPTS FROM TRAVEL TO WASHINGTON DC  
NOVEMBER 29 - DECEMBER 2, 2011—THELLA F. BOWENS**

DATE 11/29 AMOUNT \$ 73<sup>00</sup>  
 RECEIVED FROM airport (dulles)  
 FROM hotel  
 DESTINATION \_\_\_\_\_  
 CAB # \_\_\_\_\_ DRIVER I.D. # \_\_\_\_\_  
 DRIVERS NAME \_\_\_\_\_

Ro  
 THE FAIRFAX EMBASSY ROW  
 Washington, D.C.

179 M.

-----  
 Tbl 400/1 Chk 757 Gst 1  
 BOWENS  
 Nov29'11 07:38PM  
 -----  
 1 TOMATO SOUP 1.00  
 1 APPLEWOOD BOBBLER 6.00  
 1 ICE CREAM  
 Special Prep  
 1 PAT OF HOT WATER  
 Special Prep  
 \$3.50 Deliv 3.50  
 -----  
 Subtotal 18.00  
 Sales Tax 2.43  
 Service Chrg 3.50  
 R/S Auto Grt 3.24  
 07:40PM Total 27 22

ADDITIONAL TIP: \_\_\_\_\_  
 TOTAL: \_\_\_\_\_  
 ROOM #: \_\_\_\_\_  
 NAME \_\_\_\_\_  
 SIGNATURE \_\_\_\_\_

Room Service At  
 THE FAIRFAX EMBASSY ROW  
 Washington, D.C.

174 SERRY

-----  
 Tbl 400/1 Chk 7672 Gst 1  
 BOWENS  
 Dec01'11 10:29AM  
 -----  
 1 SIDE TOAST 4.00  
 Wheat 1st  
 1 APPLEWOOD BACON 6.00  
 1 COFFEE/SM 5.00  
 Cream  
 1 SEASONAL BERRIES 9.00  
 PAT OF HOT WATER  
 Special Prep  
 \$3.50 Deliv 3.50  
 -----  
 Subtotal 24.00  
 Sales Tax 3.18  
 Service Chrg 3.50  
 R/S Auto Grt 4.32  
 10:31AM Total 35.00

ADDITIONAL TIP: 3.00  
 TOTAL: 38.00  
 ROOM #: 400  
 NAME THELLA BOWENS  
 SIGNATURE Thella F. Bowens

**RECEIPTS FROM TRAVEL TO WASHINGTON DC  
NOVEMBER 29 - DECEMBER 2, 2011—THELLA F. BOWENS**

*36.70*  
*[Signature]*

THE FAIRFAX HOTEL  
2100 Massachusetts Avenue N.W.  
Washington D.C. 20008  
202-293-2100

JORGE

-----  
/4 Chk 3204 Gst 1  
Dec01'11 09:19PM  
-----

AESAR SALAD	2.00
OMATO SOUP	2.00
SIMPLE SALAD	1.60
Sauce On Side	
SIMPLE SALAD	1.60
SIMPLE SALAD	1.60
*****	0.00
CRAB CAKE	3.20
C. ONION TART	2.40
1/5 WILD SALMON	4.80
1/5 STRIP BASS	4.40
PORK TENDERLOIN	4.40
Med	
FIRE	0.00
MAIN COURSE	
SELECTION OF TEA	1.00
CAMOMILE	



Subtotal *\$29.00* ~~31.80~~  
Sales Tax *2.90* ~~3.18~~  
:43PM Total *34.98*  
*\$31.90*

ROOM #: \_\_\_\_\_ *4.80 tip*

TOTAL: *\$36.70*

NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

THE FAIRFAX HOTEL  
2100 Massachusetts Avenue N.W.  
Washington D.C. 20008  
202-293-2100

Date: Dec01'11 10:45PM  
Card Type: Amex  
Acct #: XXXXXXXXXXXX1003  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Auth Code: 569993  
Check: 3204  
Table: 8/4  
Server: 138 JORGE

*#480 tip*

Subtotal: *34.98*

TIP: *36.70*

TOTAL: *\$39.98*  
*[Signature]*

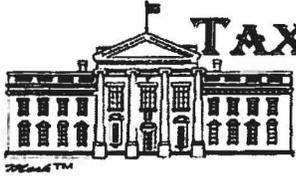
SIGNATURE  
I agree to pay above total  
according to my card issuer  
agreement.



*12/1/12*

*dinner (receipt shows 1/5 of total - split amongst attendees)*

RECEIPTS FROM TRAVEL TO WASHINGTON DC  
NOVEMBER 29 - DECEMBER 2, 2011—THELLA F. BOWENS



TAXICAB RECEIPT

Time: \_\_\_\_\_

Date: 11/30

Origin of trip: Hotel

Destination: DOT Headquarters

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



TAXICAB RECEIPT

Time: \_\_\_\_\_

Date: 12/2

Origin of trip: ACI-NA Townhouse

Destination: hotel

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



TAXICAB RECEIPT

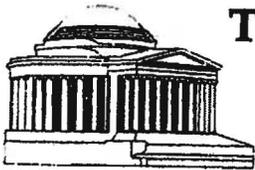
Time: \_\_\_\_\_

Date: 11/30

Origin of trip: DOT Headquarters

Destination: hotel

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



TAXICAB RECEIPT

Time: \_\_\_\_\_

Date: 12/2

Origin of trip: hotel

Destination: ACI-NA Townhouse B6 D

Fare: \$8.00 Sign: Street

**RECEIPTS FROM TRAVEL TO WASHINGTON DC  
NOVEMBER 29 - DECEMBER 2, 2011—THELLA F. BOWENS**

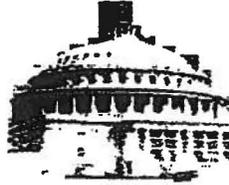
Save Time - Order ON LINE  
sweetgreen.com  
1512 Connecticut Ave.  
Washington, DC  
P: 202-387-9338

33 Elsie A

chk 1883      Dec02'11 12:57P      3-      0

1 CUSTOM	6.75
SALAD	
1 HOUSE DRINK (iced tea)	2.50
Cash	20.00
Subtotal	8.25
Sales Tax	0.69
Payment	<b>9.74</b>
Change Due	10.26

12/2 Lunch



**TAXICAB RECEIPT**

Time: \_\_\_\_\_

Date: 12/2/11

Origin of trip: hotel

Destination: AIRport

Fare: 73<sup>00</sup>      Sign: \_\_\_\_\_

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

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

TRAVELER: Thella F. Bowens DEPT. NAME & NO. Executive Office BU6  
 DEPARTURE DATE: 1/26/2012 RETURN DATE: 1/26/2012 REPORT DUE: 2/25/12  
 DESTINATION: Long Beach, CA

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses								TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY		
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)						1/26/12				0.00
Conference Fees (provide copy of flyer/registration expenses)										0.00
Rental Car*										0.00
Gas and Oil*										0.00
Garage/Parking*										0.00
Mileage - attach mileage form*						123.21				123.21
Taxi and/or Shuttle Fare (include tips pd.)*										0.00
Hotel*										0.00
Telephone, Internet and Fax*										0.00
Laundry*										0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)										0.00
Meals (include tips pd.)										0.00
Breakfast*										0.00
Lunch*										0.00
Dinner*										0.00
Other Meals*										0.00
<i>Alcohol is a non-reimbursable expense</i>										
Hospitality <sup>1*</sup>										0.00
Miscellaneous: Baggage Fees										0.00
										0.00
										0.00
*Provide detailed receipts										0.00
<b>Total Expenses prepaid by Authority</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>123.21</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>123.21</b>

Explanation:	Total Expenses Prepaid by Authority	0.00
	Total Expenses Incurred by Employee (including cash advances)	123.21
	<b>Grand Trip Total</b>	<b>123.21</b>
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	0.00
	Due Traveler (positive amount) <sup>2</sup>	
	<b>Due Authority (negative amount)<sup>3</sup></b>	<b>123.21</b>

*Note: Send this report to Accounting even if the amount is \$0.*

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

\* Travel and Lodging Expense Reimbursement Policy 3.40

\* Business Expense Reimbursement Policy 3.30

Prepared By: Amy Caldera  
 Traveler Signature: Thella F. Bowens  
 Approved By: \_\_\_\_\_

Ext.: 2445  
 Date: 1/26/2012  
 Date: \_\_\_\_\_

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

\_\_\_\_\_, hereby certify that this document was approved by the Executive Committee at its \_\_\_\_\_ meeting.

(Please leave blank. Whoever clerk's the meeting will insert their name and title.)  
 (Leave blank and we will insert the meeting date.)

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

**SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY**  
**MONTHLY MILEAGE and PARKING FEE REIMBURSEMENT REPORT**

EMPLOYEE NAME Thella F. Bowens			PERIOD COVERED 26-Jan-12	
DEPARTMENT/DIVISION				
DATE	MILES DRIVEN	DESTINATION AND PURPOSE OF TRIP	PARKING FEES & OTHER TRANSPORTATION COSTS	\$\$\$
1/26/12	111.00	Drive to Long Beach, CA		
1/26/12	111.00	Drive to San Diego, CA		
<b>SUBTOTAL</b>	<b>222.00</b>		<b>SUBTOTAL</b>	<b>-</b>

**Computation of Reimbursement**

TOTAL MILEAGE DRIVEN (LIMITED TO 200 MILE MONTHLY AVERAGE PER YEAR)	222.00
REIMBURSEMENT RATE: (see below) * <b>Rate for 7/1/11 - 12/31/12</b>	<b>X 0.555</b>
TOTAL MILEAGE REIMBURSEMENT	123.21
PARKING FEES/TOLL CHARGES (ATTACH RECEIPTS)	-
<b>TOTAL REIMBURSEMENT REQUESTED</b>	<b>\$ 123.21</b>

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

  
 SIGNATURE OF EMPLOYEE

DEPT./DIV. HEAD APPROVAL



Directions to 200 S Pine Ave, Long Beach, CA 90802  
111 mi - about 1 hour 55 mins

**Save trees. Go green!**  
Download Google Maps on your phone at [google.com/gmm](http://google.com/gmm)



1. Head south on [redacted] toward [redacted] go 52 ft  
Restricted usage road total 52 ft
  2. Take the 1st right onto [redacted] go 187 ft  
Restricted usage road total 240 ft
  3. Turn left onto [redacted] go 0.3 mi  
Partial restricted usage road total 0.3 mi  
About 1 min
  4. Take the 2nd right onto [redacted] go 1.8 mi  
About 4 mins total 2.1 mi
  5. Take the California 163 N ramp to Escondido go 0.4 mi  
total 2.5 mi
  6. Merge onto CA-163 N go 1.9 mi  
About 2 mins total 4.5 mi
  7. Take exit 7A to merge onto I-805 N toward Los Angeles go 8.8 mi  
About 8 mins total 13.2 mi
  8. Merge onto I-5 N go 53.5 mi  
About 50 mins total 66.7 mi
  9. Take exit 85A to merge onto CA-73 N toward Long Beach go 17.6 mi  
Partial toll road total 84.3 mi  
About 18 mins
  10. Take exit 18A on the left to merge onto I-405 N toward Long Beach go 21.3 mi  
About 22 mins total 106 mi
  11. Take exit 32B to merge onto I-710 S go 3.5 mi  
About 4 mins total 109 mi
  12. Take exit 1C on the left toward Downtown Long Beach/Convention Center/  
Aquarium go 0.3 mi  
About 1 min total 110 mi
  13. Merge onto W Shoreline Dr go 1.6 mi  
About 3 mins total 111 mi
  14. Turn left onto S Pine Ave go 302 ft  
Destination will be on the right total 111 mi
- 200 S Pine Ave, Long Beach, CA 90802

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 ©2012 Google, INEGI

Directions weren't right? Please find your route on [maps.google.com](http://maps.google.com) and click "Report a problem" at the bottom left.

\$ 123.21

1/31/2012 7:13pm → T. Russell  
(Email) S. Real  
L. Gehlken

**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 travelling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.

**1. TRAVELER:**

Travelers Name: Thella F. Bowens Dept: 6/Executive Office  
Position:  Board Member  President/CEO  Gen. Counsel  Chief Auditor  
 All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 01/24/12 PLANNED DATE OF DEPARTURE/RETURN: 01/26/12 / 01/28/12

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

Destination: Long Beach, CA Purpose: ACI Media Relations and Crisis Communications Seminar  
Explanation: \_\_\_\_\_

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

**A. TRANSPORTATION COSTS:**

• AIRFARE	\$ _____
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ <u>131.54</u>
B. LODGING	\$ _____
C. MEALS	\$ <u>25.00</u>
D. SEMINAR AND CONFERENCE FEES	\$ _____
E. ENTERTAINMENT (if applicable)	\$ _____
F. OTHER INCIDENTAL EXPENSES	\$ _____
<b>TOTAL PROJECTED TRAVEL EXPENSE</b>	<b>\$ <u>165.00</u></b>

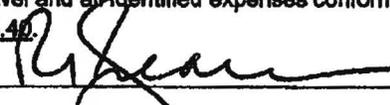
**CERTIFICATION BY TRAVELER** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: 1/25/2012

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

By my signature below, I certify the following:

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

Administrator's Signature:  Date: 1.25.12

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

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

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

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

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

**A. TRANSPORTATION COSTS:**

- AIRFARE \$ \_\_\_\_\_
- OTHER TRANSPORTATION (Taxi, Train, Car Rental) \$ 131.54

**B. LODGING**

\$ \_\_\_\_\_

**C. MEALS**

\$ 25.00

**D. SEMINAR AND CONFERENCE FEES**

\$ \_\_\_\_\_

**E. ENTERTAINMENT (If applicable)**

\$ \_\_\_\_\_

**F. OTHER INCIDENTAL EXPENSES**

\$ \_\_\_\_\_

**TOTAL PROJECTED TRAVEL EXPENSE** \$ 165.00

**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.

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

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

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



## Media Relations and Crisis Communications Seminar

January 25-27, 2012 • Hyatt Regency • Long Beach

*As of 1-19-12*

*On Twitter #12acimr*

*Thanks to Our Sponsors!*



Wednesday, January 25, 2012

5:00pm – 7:00pm     **Registration**  
6:00pm – 7:00pm     **Welcome Reception**

Thursday, January 26, 2012

7:30am – 8:15am     **Registration**  
7:30am – 8:15am     **Continental Breakfast**  
8:15am – 8:30am     **Welcome & Opening Remarks**  
**Speakers:** Lucinda Harshman, Pittsburgh; Mario Rodriguez, Director, Long Beach Airport  
8:30am – 9:00am     **Aviation Update: Just The Facts & News You Can Use**  
**Speaker:** Debby McEiroy, ACI-NA  
10:00am – 11:30am   **Crisis Communications Training: Managing Communications in the Aftermath of an Aircraft Accident**

Learn about the NTSB investigation process and how they work with the media when disaster strikes, as well as how the family assistance process could impact airport media relations.

**Speaker:** Peter Knudson, National Transportation Safety Board

11:30am – 11:45am **Networking Break**

11:45am – 12:30pm **Translating Public Opinion Into More Effective Airport Messaging**

Working with Fleishman Hillard, ACI-NA conducted focus groups among frequent business travelers, community leaders, and business leaders/owners to better understand public views about airports. Come hear what we learned and how you can use this inside knowledge to better market your airport's message in the local and national press.

**Speaker:** Trevor Francis, Fleishman Hillard

12:30pm – 1:30pm **Luncheon Keynote: Brett Snyder, The Cranky Flier**

1:30pm – 2:30pm **Social Media: Getting It Right and Measuring Success**

A panel of well known, non-airport professionals will discuss how 'they' do it.

**Moderator:** Pat Hogan, Minneapolis-St. Paul International Airport

**Speakers:** Morgan Johnston, JetBlue; TBD

2:30pm – 2:45pm **Networking Break**

2:45pm – 5:15pm **Developing The National Airport Media Strategy**

In small groups followed by an all-In discussion, meeting participants will roll up their sleeves and develop critical components of the earned media plan in support of America's airports and ultimately our policy campaign.

**Moderator:** Myrna White, Hartsfield-Jackson Atlanta International Airport

**Open Evening**

Friday, January 27, 2012

7:30am – 8:30am **Registration**

7:30am – 8:15am **Continental Breakfast**

8:15am – 9:00am **Report Out from Airport Media Strategy Roundtable Discussion**

9:00am – 10:00am **Partnering with the Government**

**Moderator:** Scott Armstrong, Toronto Pearson International Airport

**Speakers:** Ian Gregor, Federal Aviation Administration; Laura Eimiller, Federal Bureau of Investigation

10:00 – 10:45am **It's Your Sound Bite, Even When It Isn't – Roundtable Discussion**

From responding to extended tarmac delays to TSA passenger confrontations, to FAA or CBP equipment outages – in the media's eyes, it's the airport's job to respond. This

roundtable will offer best practices and effective educational messages that inspire public confidence in the airport and promote a positive image of air travel without disparaging the airlines or federal agencies.

**Moderator:** Carolyn Fennell, Orlando International Airport

10:45am – 11:00am **Networking Break**

11:00am – 12:00pm **Media Training: Crisis Communications Critique for the Pros**

Back by popular demand, Dr. Joseph Trahan, President & CEO of Trahan & Associates will share the dos and don'ts that every PR professional should know to effectively engage with the media. Participants will learn techniques on how to give a flawless interview with real-life scenarios and can participate in mock on-camera interviews to be critiqued by our seminar's PR personal trainer.

**Speaker:** Dr. Joseph Trahan, Trahan & Associates

12:00pm – 1:00pm **Lunch - Networking Opportunity**

1:00pm – 2:00pm **Airport Social Media Panel**

It's no secret; airports are taking their social media efforts to the next level. Hear best practices and lessons learned as industry leaders discuss effective use of social media as a customer service, media relations and marketing tool.

**Moderator:** Cheryl Brown, San Diego

**Speakers:** Richard Walsh, Massport – Logan Airport; Alex Ryan, Distill/Oakland International Airport

2:00pm – 2:15pm **Networking Break**

2:15pm – 4:00pm **On-Camera Interview Critique and Peer Reviews**

**BRETON LOBNER**

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

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

TRAVELER: Breton Lobner DEPT. NAME & NO. General Counsel  
 DEPARTURE DATE: 1/26/2012 RETURN DATE: 1/27/2012 REPORT DUE: 2/26/12  
 DESTINATION: Denver, CO

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY 1/26/12	FRIDAY 1/27/12	SATURDAY 1/28/12	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	229.60								0.00
Conference Fees (provide copy of flyer/registration expenses)									0.00
Rental Car*									0.00
Gas and Oil*									0.00
Garage/Parking*									0.00
Mileage - attach mileage form*									0.00
Taxi and/or Shuttle Fare (include tips pd.)*						31.00			31.00
Hotel*						200.81			200.81
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel svcs.)									0.00
Meals (include tips pd.)									0.00
Breakfast*									0.00
Lunch*									0.00
Dinner*						50.00			50.00
Other Meals*									0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality <sup>1</sup> *									0.00
Miscellaneous:	30.00					2.00			2.00
									0.00
									0.00
*Provide detailed receipts									0.00
<b>Total Expenses prepaid by Authority</b>	<b>259.60</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>283.81</b>	<b>0.00</b>	<b>0.00</b>	<b>283.81</b>

Explanation:	Total Expenses Prepaid by Authority	259.60
	Total Expenses Pd. by Employee (including cash advances)	283.81
	<b>Grand Trip Total</b>	<b>543.41</b>
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	259.60
	<b>Due Traveler (positive amount)<sup>2</sup></b>	
<b>Due Authority (negative amount)<sup>3</sup></b>	<b>283.81</b>	
<i>Note: Send this report to Accounting even if the amount is \$0.</i>		

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

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

Prepared By: \_\_\_\_\_ Ext.: x2424  
 Traveler Signature: Breton Lobner (Print/Type Name) Date: 2-7-12  
 Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

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



A KIMPTON HOTEL

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Denver, CO 80202  
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Facsimile: (303) 296.1818  
Reservations: (800) 397 5380  
www.monaco-denver.com



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Lobner, Breton

Room Number: 325  
Daily Rate: 175.00  
Room Type: MCST  
No. of Guests: 1 / 0

San Diego, CA 92101 US

ARRIVAL	DEPARTURE	CREDIT CARD	RATE PLAN	CATEGORY	ACCOUNT
01/26/12	01/27/12	XXXXXXXXXXXX4314	XCRP	GCRP	12440346137

DATE	ROOM NO.	DESCRIPTION	REFERENCE	AMOUNT
01/26/12	325	ROOM CHARGE	#325 Lobner, Breton	\$175.00
01/26/12	325	TAX - ROOM - CITY	TAX - ROOM - CITY	\$18.81
01/26/12	325	TAX - ROOM - STATE	TAX - ROOM - STATE	\$7.00
01/27/12	325	AMERICAN EXPRESS	AMERICAN EXPRESS	(\$200.81)

TOTAL DUE: \_\_\_\_\_ \$0.00





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

LOBNER/BRETON

DEPT 15

09-Jan-2012 11:45 am

Page 1 of 2

\*\*\*\*\*  
 SOUTHWEST E-TICKET CONFIRMATION \*\*\* I7R04Z \*\*\*  
 \*\*\*\*\*  
 PLEASE CHECK NEW CARRY-ON RESTRICTIONS DIRECT WITH  
 YOUR CARRIER OR CALL TRAVELTRUST AT 800-792-4662  
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----  
 \*\*\*\*\*TICKETLESS TRAVEL INSTRUCTIONS\*\*\*\*\*  
 THIS IS AN E-TICKET RESERVATION.  
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN  
 A PORTION OF THIS TRIP MAY BE REFUNDABLE. PLEASE RETURN  
 UNUSED PORTIONS TO TRAVELTRUST FOR POSSIBLE REFUND.  
 \*\*\*\*\*  
 \*\*\*\*\*TSA GUIDANCE FOR PASSENGERS\*\*\*\*\*  
 PLEASE ALLOW EXTRA TIME FOR SCREENING AND BOARDING  
 INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE  
 DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE  
 FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV  
 \*\*\*\*\*

 26-Jan-2012 03:15pm Thursday	<b>Air</b>	Southwest Airlines	<b>Flight#</b>	1695	<b>Class:</b>	R
	<b>From:</b>	San Diego CA, USA	<b>To:</b>	Denver CO, USA		
	<b>Meal:</b>	None				
	<b>Equip:</b>	Boeing 737-700 Jet	<b>Status:</b>	Confirmed		
	<b>Depart:</b>	26-Jan-2012 Thursday	03:15pm	<b>Stops:</b>	0	
	<b>Arrival:</b>	26-Jan-2012 Thursday	06:40pm			
	<b>Depart -</b>	TERMINAL 1				
	<b>Arrive -</b>					

Flight Duration: 2 hour(s) and 25 minutes  
 Class of Service: Coach

 27-Jan-2012 04:40pm Friday	<b>Air</b>	Southwest Airlines	<b>Flight#</b>	3338	<b>Class:</b>	R
	<b>From:</b>	Denver CO, USA	<b>To:</b>	San Diego CA, USA		
	<b>Meal:</b>	None				
	<b>Equip:</b>	Boeing 737-300 Jet	<b>Status:</b>	Confirmed		
	<b>Depart:</b>	27-Jan-2012 Friday	04:40pm	<b>Stops:</b>	0	
	<b>Arrival:</b>	27-Jan-2012 Friday	06:05pm			
	<b>Depart -</b>					
	<b>Arrive -</b>	TERMINAL 1				

Flight Duration: 2 hour(s) and 25 minutes  
 Class of Service: Coach

**Other**

25-Jul-2012  
 Wednesday

San Diego CA, USA  
 RESERVATION RETAINED FOR 180 DAYS-A

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 888-221-6043 AND USE YOUR VIT CODE - SJE72  
 PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER  
 EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00  
 THANK YOU FOR CHOOSING TRAVELTRUST...CHERYL HARLOFF

**Ticket Information**

LOBNER BRETON		
Ticket#:2412937452	Ticket Base Fare:	193.48
Invoice#:5228788	Ticket Tax:	36.12
	Total Ticket Amount:	229.60

Electronic: YES

SERVICE FEE DOCUMENT #: 0570413792 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1012



**Traveltrust**  
374 North Coast Highway 101  
Encinitas, Ca 92024  
Tel: 760-635-1700  
Fax: 760-635-1720  
Website: [www.traveltrust.com](http://www.traveltrust.com)

LOBNER/BRETON

DEPT 15

09-Jan-2012 11:45 am

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