



**SAN DIEGO COUNTY
REGIONAL AIRPORT AUTHORITY**

Meeting Date: **SEPTEMBER 6, 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 2013 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

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

GENERAL INSTRUCTIONS:

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

1. TRAVELER:

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

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

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

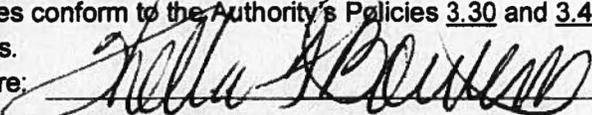
Destination: Seattle, WA Purpose: Alaska Airlines Meeting
Explanation: _____

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

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

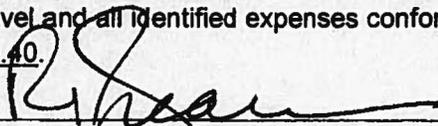
CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: July 11, 2012

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

By my signature below, I certify the following:

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

Administrator's Signature:  Date: 7.12.12

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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

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

GENERAL INSTRUCTIONS:

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

1. TRAVELER:

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

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

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

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

Explanation: _____

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

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

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

Travelers Signature: Thella A Bowens Date: 28 June 2012

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

By my signature below, I certify the following:

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

Administrator's Signature: R. Jean Date: 6.29.12

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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

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

GENERAL INSTRUCTIONS:

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

1. TRAVELER:

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

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

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

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

Explanation: _____

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:	
• AIRFARE	\$ 850.00
• 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	\$ 850.00

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: [Signature] Date: 8.8.12

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

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

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

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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

EXPENSE REPORTS

THELLA F. BOWENS

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

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

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

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY 7/15/12	MONDAY 7/16/12	TUESDAY 7/17/12	WEDNESDAY 7/18/12	THURSDAY	FRIDAY	SATURDAY	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	601.80								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.)*		68.00	16.00	8.00	71.76				163.76
Hotel*		342.36	342.36	342.36					1,027.08
Telephone, internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel svcs.)									0.00
Meals (include tips pd.)	Breakfast*			22.25	3.78				26.03
	Lunch*		23.64						23.64
	Dinner*	32.45		49.80	2.78				85.03
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality ¹ *									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority	601.80	442.81	382.00	422.41	78.32	0.00	0.00	0.00	1,325.54

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

¹ Give names and business affiliations of any persons whose meals were paid by traveler.
² Prepare Check Request
³ 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 Policy⁴ and 3.30 - Business Expense Reimbursement Policy⁵ 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 Zaldara Ext.: 2445
 Traveler Signature: Thelia F. Bowens Date: 17 Aug 2012
 Approved By: _____ Date: _____

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

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

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

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

MISSING RECEIPT FORM

Employee/Department Head must complete form below.

Date of Purchase/Event: 7/17/2012

Description of Item/Event: Transportation

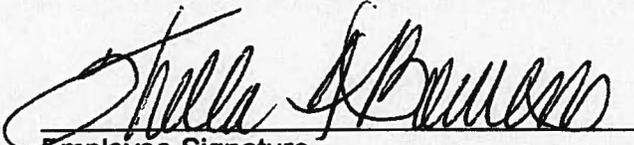
INTERNATIONAL AVIATION CLUB LUNCH @ CITY CLUB
CACI-NA Headquarters to ~~LA~~ for lunch mtg

Vendor/Event Name: Taxicab

Dollar Amount: \$8 (fare plus tip)

Reason for Missing Receipt: Lost receipt

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


Employee Signature

17 Aug 2012
Date

Department Head Signature

Date

Form must be attached to Petty Cash Voucher for Reimbursement

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

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

1. TRAVELER:

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

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

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

Destination: Washington, D.C. Purpose: Airport Policy Roundtable Meeting and Summer Legislative Issues Conference

Explanation: _____

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

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

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:  for Thella F. Bowers Date: 5/23/12

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

By my signature below, I certify the following:

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

Administrator's Signature: _____ Date: _____

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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



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

BOWENS/THELLA

DEPT 6

01-Jun-2012 12:31 pm

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS ** C4ZF56 **
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----
 *****TICKETLESS TRAVEL INSTRUCTIONS*****
 THIS IS AN E-TICKET RESERVATION.
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN
 A PORTION OF THIS TRIP MAY BE REFUNDABLE. PLEASE RETURN
 UNUSED PORTIONS TO TRAVELTRUST FOR POSSIBLE REFUND.

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


 15-Jul-2012
 08:12am
 Sunday

Air	United Airlines	Flight#	546	Class:	S
From:	San Diego CA, USA	To:	Washington Dulles DC, USA		
Meal:	Food For Purchase	Seats:	Seat:9C		
Equip:	Boeing 757 200 Jet	Status:	Confirmed		
Depart:	15-Jul-2012 Sunday 08:12am	Stops:	0		
Arrival:	15-Jul-2012 Sunday 04:03pm				

Depart - TERMINAL 1
 Arrive -
 United Airlines locator: C4ZF56

 ** AISLE SEAT CONFIRMED **
 Flight Duration: 4 hour(s) and 51 minutes
 Class of Service: Coach


 18-Jul-2012
 08:20am
 Wednesday

Air	United Airlines	Flight#	229	Class:	S
From:	Washington Dulles DC, USA	To:	San Diego CA, USA		
Meal:	Light Lunch	Seats:	Seat:9C		
Equip:	Boeing 757 200 Jet	Status:	Confirmed		
Depart:	18-Jul-2012 Wednesday 08:20am	Stops:	0		
Arrival:	18-Jul-2012 Wednesday 10:25am				

Depart -
 Arrive - TERMINAL 1
 United Airlines locator: C4ZF56

 ** AISLE SEAT CONFIRMED **
 Flight Duration: 5 hour(s) and 05 minutes
 Class of Service: Coach

Other

14-Jan-2013
 Monday

San Diego CA, USA
 RESERVATION RETAINED FOR 180 DAYS

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



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

BOWENS/THELLA

DEPT 6

01-Jun-2012 12:31 pm

Page 2 of 2

Ticket Information

BOWENS THELLA
Ticket#:7065642001
Invoice#:1194639

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

Electronic: YES

SERVICE FEE DOCUMENT #: 0575459068 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN [REDACTED]

601.60

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



HOTELS

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

Invoice

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

0.00
 0.00
 0.00
 0.00
 0.00

Signature _____

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



HOTELS

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

Information Invoice

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

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

0.00
 0.00
 0.00
 0.00
 0.00

Signature _____



Check Report @ J&G Steakhouse-DC

Server: Esteban Ventura	Date: 07/17/2012
Revenue Center: J& Steak Hse	Meal-Period: Breakfast
Table Name: 17	Check Open: 7:13 AM
Cover Count: 0	Check Closed: 10:15 AM
Check #: 7199	Cashier:

Ref Number: BOWENS, THELLA A, ITEMS SPLIT FROM 7181 (J&G Steak Hse)

Item Number	Menu Item	QTY	Amount
104015	GranBerryYogurt	1	\$10.00
133002	OJ	1	\$4.50
138011	Coffee	1	\$3.00
Total Item Sales:			\$17.50

Service Charges:

\$ CHG TIP:	\$3.00
Total Service Charges:	\$3.00

Tax:	\$1.75
Direct Tips:	\$0.00
Total Amount Due:	\$22.25

Payments:

Room Charge:	\$22.25
Total Payments:	\$22.25

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

TEAR HERE ---
CUSTOMER COPY

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

←
7/15
airport
to
hotel

aidy:
AMERICAN EXPRESS
3727XXXXX

Washington Flyer
(703) 841-0000

**CHEF GEOFF'S
DOWNTOWN**

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

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

1 CRABCAKE ENTREE 24.95

Sub Total: 35.90
Tax: 3.59

07/15 8:29p TOTAL: 39.49

Thank You!
CHEF GEOFF'S DOWNTOWN
202 464 4461

CHECK # 1

0146

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

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

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

HECK: 39.49
TIP: 7.00
TOTAL: 46.49

32.45

PHONE: () -
Duplicate Copy

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

← 24.95
2.50 tax
5.00 tip

32.45

7/15 dinner

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

Washington, DC 20005
 (202) 787-1000
 www.thehamiltondc.com

1102 Wayne T

1 137/1 Chk 5016 Gst 1
 Jul16'12 11:46AM

1 Arnold Palmer 2.85
 1 Green Tomatoes 6.00
 1 Ravioli-SM 9.00

Subtotal 17.85
 Sales Tax 1.79
:34PM Total 19.64

TaxCollected 1.79

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

Washington, DC 20005
 (202) 787-1000

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

Subtotal: 19.64

Tip: 4.00

Total: 23.64

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

7/16 Lunch

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



TAXICAB RECEIPT

Time: 6:30 pm

Date: 7/16

Origin of trip: hotel

Destination: Bibiana

Fare: 7.00 + tip (\$8) Sign: _____

7/16

taxi



TAXICAB RECEIPT

Time: 9 pm

Date: 7/16

Origin of trip: Bibiana

Destination: Hotel

Fare: \$8.00 Sign: _____

7/16

taxi

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



*

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

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

Server 22 KURT
Order 2049 07/17/12 8.35 PM
Table 10:1 Cust. 1

Date: 07/17/12 ✓
Time: 8:33 PM
Server: 22. KURT
Order: 532049
Description: Table 10:1

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

**** TABLE SERVICE ****

RUGULA PEACH SALAD 16.00 ✓
MEDITERRANEAN PASTA 19.00 ✓
ICED TEA 3.00 ✓

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

Purchases: \$ 41.80

Total Due: 41.80

Tip: \$ 8.00

Total: \$ 49.80

BOWENS, THELLA F

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

I agree to
according

7/17 dinner

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

Paradies Shops Dulles
Washington Dulles Airport
Dulles, Va.

ARTWATER	92/21075000	
	2.65 T	
BOTAL		\$2 65
X06		\$0 13
OTAL		\$2 78
ASH		\$3 00
CHANGE		\$0 22

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

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

DU LLES INTERNATIONAL AIRPORT
CHANTILLY, VIRGINIA

9548 RABIA ✓

CHK 5507 JUL18'12 7:24AM

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

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

HMShost
Making The Travelers Day Better
HMS Host Store Code = 5935D02
Find Us On Facebook
www.facebook.com/Hmshost

~~Your card~~ 7

7/18 other meal

*7/18
Breakfast*

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

Red Top Arlington
Cab #56

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

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

7/18
hotel to airport

American Express
xxxx xxxx xxxx 
MID 445100001996
Auth 508943
Signature:

* * * * *

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

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

TRAVELER: Thella F. Bowens DEPT. NAME & NO.: Executive Office BU6

DEPARTURE DATE: 5/19/2012 RETURN DATE: 5/25/2012 REPORT DUE: 6/24/12

DESTINATION: Marina Bay Sands, Singapore

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
		5/20/12	5/21/12	5/22/12	5/23/12	5/24/12	5/25/12	5/19/12	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	6,956.30								0.00
Conference Fees (provide copy of flyer/registration expenses)									0.00
Rental Car*									0.00
Gas and Oil*									0.00
Garage/Parking*									0.00
Mileage - attach mileage form*									0.00
Taxi and/or Shuttle Fare (include tips pd.)*						45.00			45.00
Hotel*		568.92	568.92	568.92	568.92				2,275.68
Telephone, internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (include tips pd.)	Breakfast*					56.90	55.56		112.46
	Lunch*		58.98	56.90	52.41				168.29
	Dinner*			177.18	29.94				207.12
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality ^{1*}									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority	6,956.30	0.00	627.90	803.00	651.27	670.82	55.56	0.00	2,808.55

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

Total Expenses Prepaid by Authority	6,956.30
Total Expenses Incurred by Employee (including cash advances)	2,808.55
Grand Trip Total	9,764.85
Less Cash Advance (attach copy of Authority ck)	
Less Expenses Prepaid by Authority	6,956.30
Due Traveler (positive amount)²	
Due Authority (negative amount)³	2,808.55

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

¹ Give names and business affiliations of any persons whose meals were paid by traveler.
² Prepare Check Request
³ 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 Policy⁴ and 3.30 - Business Expense Reimbursement Policy⁵ 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.

⁴ Travel and Lodging Expense Reimbursement Policy 3.40

⁵ Business Expense Reimbursement Policy 3.30

Prepared By: _____
 Traveler Signature: Thella F. Bowens
 Approved By: _____

Ext.: 2445
 Date: 5/25/12
 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.

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

MISSING RECEIPT FORM

Employee/Department Head must complete form below.

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

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

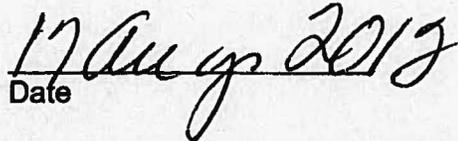
Vendor/Event Name: Rise Restaurant

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

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

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


Employee Signature


Date

Department Head Signature

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. 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: 02/16/12 **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: 7th ACI Asia-Pacific Regional Assembly, Conference & Exhibition an

Explanation:

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

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

Date: 2/16/12

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

By my signature below, I certify the following:

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

Administrator's Signature: _____

Date: _____

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

I, Tony L. Russell, Authority Clerk, hereby certify that this document was approved
(Please leave blank. Whoever clerk's the meeting will insert their name and title.)

by the Executive Committee at its _____

2/21/2012

meeting.

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



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

BOWENS/THELLA

DEPT 6

22-Feb-2012 3:22 pm

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS ** L4RWZ0
 YOUR SINGAPORE ETICKET CONFIRMATION IS ** J32GVY **
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----
 *****TICKETLESS TRAVEL INSTRUCTIONS*****
 THIS IS AN E-TICKET RESERVATION.
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN
 THIS TICKET IS NON-REFUNDABLE AND MUST BE USED FOR
 THE FLIGHTS BOOKED. IF THE RESERVATION IS NOT USED
 OR CANCELLED BEFORE THE DEPARTURE OF YOUR FLIGHTS
 IT MAY HAVE NO VALUE. CONTACT TRAVELTRUST BEFORE
 YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY.

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

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

 FOR EMERGENCY AFTERSHOURS SERVICE
 WHILE IN SINGAPORE
 PLEASE CALL 001-800-15253545
 IF INTL AFTERSHOURS NUMBER DOES NOT WORK
 DIAL DIRECT OR COLLECT 201-221-4462

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

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

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

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

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

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



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

BOWENS/THELLA

DEPT 6

22-Feb-2012 3:22 pm

Page 2 of 2

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


 25-May-2012
 08:10pm
 Friday

Air United Airlines Flight# 6342 Class: W
 From: Los Angeles CA, USA To: San Diego CA, USA
 Meal: None Seats: Seat 6A
 Equip: Embraer 120 Turbopro Status: Confirmed
 Depart: 25-May-2012 Friday 08:10pm Stops: 0
 Arrival: 25-May-2012 Friday 09:05pm

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

Other

21-Nov-2012
 Wednesday

San Diego CA, USA
 RESERVATION RETAINED FOR 180 DAYS

TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 5AM-530PM PST
 AND SATURDAY FROM 9AM-1PM PST - 760-635-1700.
 FOR EMERGENCY AFTERHOURS SERVICE IN THE US
 PLEASE CALL 888-221-6062 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#: 8744271729 Ticket Base Fare: 216.74
 Invoice#: 1192012 Ticket Tax: 37.86
 Total Ticket Amount: 254.60

Electronic: YES

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

Electronic: YES

SERVICE FEE DOCUMENT #: 0571993357 FEE AMOUNT: 40.00

BILLED TO: AMERICAN EXPRESS ENDING IN [REDACTED]

} \$6956.30



MARINA BAY Sands.
SINGAPORE

THELLA BOWENS
3225 NORTH HARBOR DRIVE
SAN DIEGO CA92101
AM

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

Thank you for staying with us

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

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

UNITED OVERSEAS BANK
CHANDI AIRPORT - T3

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

Bank Pays

SGD 323.15

5/21/12 Exchange rate
for cash transactions
1.243

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

Saturday
5/19
to
airport

TAXPASS Voucher
1-888-Taxi-Pay
212-222-Taxi
The Reliable, Secure & Easy Way to Pay.

Passenger: Fill Out Like Check

Fare	Fare + Tolls & Extras	38.80
Tip		
Sub Total	Do Not Include Fee	45.00

SUBTOTAL: Write out in words like check. (Do Not Include Fee)
45.00 Dollars

Card Charged SubTotal + \$4.00 TaxiPass Voucher Fee

Thella F. Bowens Signature

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

P_v 4_b T_u W_c J_n P_#

d r i v e r c e l l

TaxiPass Satisfaction Guaranteed
\$100 Maximum Voucher Value
www.TaxiPassReceipt.com
customerservice@taxipass.com

Date: _____ To: _____
Cab #: _____ From: _____

Voucher sold by TaxiPass, an independent 3rd party service provider. Driver does not charge, collect or receive any portion of TaxiPass

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

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

Company Reg No: 200507292R
GST Reg No: M90364464C

TAX INVOICE

✓ 21/5/2012 14:37

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

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

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

Total Due 46.37

Retail Rating

Room Chrg/Deposit 46.37
4315 BOWENS, THELLA

GRAND TOTAL 46.37

T185 Juliet 21/5/2012 15:14

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

DUPLICATE RECEIPT

RISE RESTAURANT
10 Bayfront Avenue
Singapore 018956
Tel: +65 6688 5568

Company Reg No: 200507292R
GST Reg No: M90364464C

TAX INVOICE

12/4

1 Veg Fried Rice 22.00
1 Iced Tea 8.00
1 Fiji 500 ml 5.00

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

Total Due 41.20

Retail Rating

Room Chrg/Deposit 41.20
1315 BOWENS, THELLA

GRAND TOTAL 41.20

102 Mhing 23/5/2012 12:30

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

DUPLICATE RECEIPT

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

Me

10 Bayfront Avenue
Singapore 018956

Company Reg No: 200507292R
GST Reg No: M90364464C

TAX INVOICE

22/5/2012 21:13

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

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

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

Total Due 140.06

Retail Rating

Tips: _____

Total: _____

Room Number

Guest Name (Print)

Signature

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

Me

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

Company Reg No: 200507292R
GST Reg No: M90364464C

TAX INVOICE

25/5/2012 11:07

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

Dine In +	
1 Breakfast Buffet	38.00

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

Total Due 44.70

Retail Rating

Cash	50.00
Change	5.30

GRAND TOTAL 44.70 ✓

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

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



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

Registration Form



• Delegate Information (in BLOCK letters)

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

• Conference Registration Fees (US\$)

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

* Please contact the Regional Office for details.

• Method of Payment - Credit Card

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

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

• Hotel Accommodation

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

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

For booking of hotel rooms, please visit https://resweb.passkey.com/Resweb.do?mode=welcome_ei_new&eventID=3421246.

• Flight Arrangements

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

For inquiries on conference registration:

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

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

Please FAX completed form to + 852 2180 9462

Transaction Date: 05/25/2012 Fri
Transaction Description: MBS FRONT OFFICE SINGAPORE SG

Arrival Date	Departure Date	No of Nights
05/25/12	01/01/01	1

00000000
LODGING
SIGN & TRAVEL® / EXTENDED PAYMENT OPTION

Amount \$: 1,564.40
Foreign Spend Amount: 1,888.61 Singapore Dollars
Doing Business As: MBS FRONT OFFICE
Merchant Address: 10 BAYFRONT AVENUE
SINGAPORE
018956
SINGAPORE
Reference Number: 320121480477622074
Category: Travel - Lodging

Exchange rate 1.272

Transaction Date: 05/22/2012 Tue
Transaction Description: CUT BY WOLFGANG PUCKSINGAPORE SG
Arrival Date Departure Date No of Nights
05/22/12 01/01/01 1
00000000
LODGING
SIGN & TRAVEL® / EXTENDED PAYMENT OPTION
Amount \$: 115.49
Foreign Spend Amount: 148.08 Singapore Dollars
Doing Business As: CUT BY WOLFGANG PUCK
Merchant Address: 10 BAYFRONT AVENUE
SINGAPORE
018956
SINGAPORE
Reference Number: 320121440451734521
Category: Travel - Lodging

exchange rate 1.265

Programme

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

Day 1 Tuesday, 22 May 2012

1300 – 1930 Registration

1530 – 1730 ACI World Business Partners Meeting *(by invitation only)*
(Lotus 4A & 4B, Level 4)

1800 – 1830 Welcome Ceremony & Official Opening of Exhibition

1830 – 2030 Welcome Reception in the Exhibition Hall

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

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

1430 – 1530 Survival & sustainability in times of turbulence – ever increasing need to attract air service and sustain

- Kiran JAIN, Head of Marketing & Route Development, Delhi International Airport (P) Limited
- Emmanuel MENANTEAU, Chief Executive Officer, Cambodia Airports

1600 – 1700 Building the community – employment generation at smaller airports, impact on local economy

- Rafael ECHEVARNE, Director, Economics and Programme Development, Airports Council International
- Charles H. ADA II, Executive Manager, A. B. Won Pat International Airport Authority, Guam

* Admission is subject to seat availability.

Airport Collaborative Decision Making Workshop* *(Mehari Room, Level 4)*

1430 – 1600 Introduction to Airport Collaborative Decision Making (A-CDM)

- Eric MIART, Former Airport Operations Programme and Environment Manager, EUROCONTROL
- Daniel BIRCHER, Director – Operations, Bangalore International Airport Limited

* Admission is subject to seat availability.

Programme

Day 2 Wednesday, 23 May 2012

0800 Registration

0900 – 1000 Opening Remarks

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

Keynote Speech

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

1000 – 1045 Coffee Break

1045 – 1215 Session 1 – Understanding Airlines of the Future

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

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

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

1215 – 1345 Luncheon

1345 – 1500 Session 2 – Understanding Emerging Passenger Profiles

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

Programme

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

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

1500 – 1545 Coffee Break

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

Day 3 Thursday, 24 May 2012

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

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

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

Moderator: Catherine MAYER, Vice President, SITA

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

1045 – 1130 Coffee Break

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

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

Programme

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

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

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

1300 – 1430 Luncheon

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

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

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

1545 – 1600 Airport Carbon Accreditation Certificate Presentation Ceremony

1600 – 1615 Closing Ceremony

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

Day 4 Friday, 25 May 2012

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

1400 – 1645 Airport Tour
*(Registered delegates will be picked up from Marina Bay Sands Coach Terminal, Basement 1 at 1pm sharp.)
(Map of Marina Bay Sands pick up point can be found on page 35)*

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: 8/12/2015 RETURN DATE: 8/15/2012 REPORT DUE: 9/14/12
 DESTINATION: Arlington, VA

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
		8/12/12	8/13/12	8/14/12	8/15/12				
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	591.60								0.00
Conference Fees (provide copy of flyer/registration expenses)	725.00								0.00
Rental Car*									0.00
Gas and Oil*									0.00
Garage/Parking*									0.00
Mileage - attach mileage form*									0.00
Taxi and/or Shuttle Fare (include tips pd.)*		70.00			75.00				145.00
Hotel*		185.90	185.90	185.90					557.70
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (include tips pd.)	Breakfast*								0.00
	Lunch*		37.34	35.18					72.50
	Dinner*	28.25	25.97	51.58					105.80
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality ¹ *									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority	1,316.60	284.15	249.21	272.64	75.00	0.00	0.00	0.00	881.00

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

I as traveler or administrator acknowledge that I have read, understand and agree to Authority policies 3.40 - Travel and Lodging Expense Reimbursement Policy⁴ and 3.30 - Business Expense Reimbursement Policy⁵ and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of travel expenses were incurred in connection with official Authority business and is true and correct.

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

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

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

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

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

GENERAL INSTRUCTIONS:

- A. All travel requests must conform to applicable provisions of Policies 3.30 and 3.40.
- B. Personnel 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 Bowens Dept: 6
 Position: Board Member President/CEO Gen. Counsel Chief Auditor
 All other Authority employees (does not require executive committee administrator approval)

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

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

Destination: Arlington, VA Purpose: Attend the ACI-NA Public Safety & Security Fall Conference, and TSA Meetings
 Explanation: _____

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

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

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

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

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

By my signature below, I certify the following:

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

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

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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

[About ACI-NA](#) [ACI-NA 2012 Events](#) [ACI-NA Committees](#) [Stats & Research](#) [ACI-NA Newsroom](#) [ACI-NA Home](#)

Purchase Detail

[other orders](#)

Please print this page for future reference, and present it at on-site registration.
If changes need to be made to your registration contact our office by calling (202) 293-8500 or by email at ogriffin@aci-na.org

Order# 62469

ID: 4106

Full Name: Thella F. Bowens

Order Date 07/02/2012

Description	Unit Price	Qty.	Price
2012 ACI-NA Public Safety & Security Fall Conference - From: 08/13/2012 To: 08/16/2012			
Conference Registration Fee 08/13/2012 09:00 PM - 08/16/2012 01:00 PM	\$ 725.00	1	\$ 725.00
Total			\$ 725.00

Registration for conference

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

SUNDAY, AUGUST 12

9PM-12PM, Canadian Airport Security Committee Meeting

(Open to conference attendees)

12PM- 4PM Canadian Airport Security Committee Meeting with Transport Canada

(Open to Canadian airport members only)

MONDAY, AUGUST 13

9AM – 10AM, Transnational Working Group Meeting

(Open to conference attendees)

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

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

10AM – 12PM, Canadian Airport Security Committee Meeting

(Open to conference attendees)

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

(Open to airport members only)

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

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

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

6PM – 7:30 PM, Welcome Reception

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

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

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

THURSDAY, AUGUST 16

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

(Open to PS&S Airports Only)



THE RITZ-CARLTON®
PENTAGON CITY

Ms Thella Bowens

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

Company: Aci Na

INFORMATION INVOICE

Folio No: 298261

08/16/12

Date	Description		Charges	Credits
08/12/12	In Room Dining	CHECK# 6534	28.25	See page 1
08/12/12	Group Room Charge		169.00	
08/12/12	Occupancy Tax (5 %)		8.45	
08/12/12	VA Sales Tax (5%)		8.45	
08/13/12	Fyve charges	CHECK# 2935	37.34	See page 2
08/13/12	Group Room Charge		169.00	
08/13/12	Occupancy Tax (5 %)		8.45	
08/13/12	VA Sales Tax (5%)		8.45	
08/14/12	Fyve charges	CHECK# 3073	35.16	See page 3
08/14/12	Group Room Charge		169.00	
08/14/12	Occupancy Tax (5 %)		8.45	
08/14/12	VA Sales Tax (5%)		8.45	
08/15/12	American Express	XXXXXXXXXXXX [REDACTED] XX/XX		658.45
Total			658.45	658.45
Balance			0.00	



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

Electronic Invoice

Prepared For:
BOWENS/THELLA

Ref: **DEPT 6**

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

Client Address

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

Notes

YOUR UNITED ETICKET CONFIRMATION IS ** NVT6JH **
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----
 *****TICKETLESS TRAVEL INSTRUCTIONS*****
 THIS IS AN E-TICKET RESERVATION.
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN
 THIS TICKET IS NON-REFUNDABLE AND MUST BE USED FOR
 THE FLIGHTS BOOKED. IF THE RESERVATION IS NOT USED
 OR CANCELLED BEFORE THE DEPARTURE OF YOUR FLIGHTS
 IT MAY HAVE NO VALUE. CONTACT TRAVELTRUST BEFORE
 YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY.

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

DATE: Sat, Aug 11

Flight: UNITED AIRLINES 856

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

DATE: Wed, Aug 15

Flight: UNITED AIRLINES 522

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

Seat(s) Details
Notes

BOWENS/THELLA
** AISLE SEAT CONFIRMED **

Seat(s) - 09C

UA - XXXXXX 58

DATE: Mon, Feb 11

Others

RESERVATION
RETAINED FOR
180 DAYS

Ticket Information

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

TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 5AM-530PM PST
AND SATURDAY FROM 9AM-1PM PST - 760-835-1700.
FOR EMERGENCY AFTERHOURS SERVICE IN THE US
PLEASE CALL 888-221-8062 AND USE YOUR VIT CODE - S7NS0
PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER
EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00
THANK YOU FOR CHOOSING TRAVELTRUST...SCOTT MACKERLEY

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

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

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

*Dulles to Hotel
+ \$10 tip*

8/12 taxi to hotel

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

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

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

SERVICE CHARGE INCLUDED

GRATUITY \$ _____

TOTAL \$ _____

ROOM NUMBER _____

PRINT LAST NAME _____

SIGNATURE _____

8/12 dinner

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

GSAR 417000010769001

Store # 1

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

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

Server: **anasia** Station: 19

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

Order #: 1445 Dine In
Tab #: 67 Guests: 1

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

Salata de-5.50 5.50 ✓
0.00
ghetti bognese-11.95 11.95 ✓
Tea 2.25 ✓

TOTAL: 19.70
1: 1.77

\$\$\$ SALES \$\$\$

AMOUNT DUE: \$21.47

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

8/13
dinner

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

PURCHASE: \$21.47

ENTER TIP HERE:

4.50
25.97

PLEASE TOTAL:

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

***** ** Additional Copy *** ****

***** Restaurant Mode *****

Join MURALI FAN CLUB
Please write Clearly

Name: _____

Phone Number: _____

E-Mail:.....

or e-mail us: guest@muraliva.com



8/13
Lunch

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

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

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

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

PLEASE COMPLETE FOR ROOM CHARGES

GRATUITY _____

TOTAL See page 2 of 5

ROOM NUMBER _____

PRINT LAST NAME _____

SIGNATURE _____

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

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

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

1101/Bowens
ROOM/ACCT CHG 37.34

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

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

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

1 ICED TEA 4.75
1 SP FIELD GREENS 0.00
1 SP SHORT RIBS 22.00
1 SP SHORTCAKE 0.00
FOOD 28.75
Tax 2.41
Total: 35.16
CHARGE TIP \$ 6.00

1101/Bowens
ROOM/ACCT CHG 35.16

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

8/14 lunch

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



Telno
480 7TH, SL, NW
Washington, DC 20004
tel 202 628 7949

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

Subtotal: 74.80 44.83
Tip: 15.00 6.75
Total: 51.58

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

*** Guest Copy ***

8/14 dinner



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

4 Fernando

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

Patio

1 Ensal Remolacha	10.00	✓
1 Manchege-Manzana	8.50	
1/2 Espinacas	7.00 14.00	✓
1 Pollo al Ajillo	8.00	
1 Iberico Manzanas	20.00	✓
1 Flan	1/2 7.50	✓
	3.75	
Subtotal	40.75 68.00	
Sales Tax	4.08 6.00	
09:08PM Total	<u>74.80</u> 44.83	

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

\$40.75
4.08 tax

44.83
6.75 tip

51.58

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



Taxi Cab Receipts

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

TRIP ORIGIN: Pentagon City Ritz C

DESTINATION: Dallas Airport

FARE: \$ 85 SIGNATURE [Signature]
submit \$5 (including tip)

8/15 taxi to airport

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

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

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

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	511.60					7/19/12	7/20/12		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*									0.00
Tax and/or Shuttle Fare (include tips pd.)*							20.00		20.00
Hotel*						201.20			201.20
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (include tips pd.)	Breakfast*						22.71		22.71
	Lunch*								0.00
	Dinner*					39.02			39.02
	Other Meals*								0.00
<i>Alcohol is a non-reimbursable expense</i>									
Hospitality ¹ *									0.00
Miscellaneous: Baggage Fees						20.00			20.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority	511.60	0.00	0.00	0.00	0.00	280.22	42.71	0.00	302.93

Explanation:	Total Expenses Prepaid by Authority	511.60
	Total Expenses Incurred by Employee (including cash advances)	302.93
	Grand Trip Total	814.53
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	511.60
	Due Traveler (positive amount) ²	
	Due Authority (negative amount)³	302.93

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 Policy⁴ and 3.30 - Business Expense Reimbursement Policy⁵ 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: Ann Caldera Ext: 2445
 Traveler Signature: Thelia F. Bowens Date: 8/16/12
 Approved By: _____ Date: _____

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

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

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

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

CR 13-008

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

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

Server: MOFEED A

1146127.2
SANDRA S Table 29
Fri 07/20/12 8:39 AM Guests 4
Guest Num: 3 COFF GARD

1 BUFFET 18.00

511 SubTotal 18.00
*BOWENS/THE
Sales Tax 1.71
Total 19.71

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

ROOM CHG Tendered **22.71**

* R ROOM CHARGES & MASTER ACCTS ONLY! *
* EST NAME _____ *
* ID # _____ *
* * * * *
* TP AMOUNT _____ *
* TOTAL CHARGE _____ *
* SIGNATURE _____ *
* NOTES: *
* * * * *

OWNER DRIVERS

Date: 7/20/12

Received of: _____

THE SUM OF: \$ 20 YOUR RECEIPT PAID
From: Alaska Trip (includes tip)
To: Sentia

Cab No: _____ Driver: _____
2450 - 6th AVE. SOUTH • SEATTLE • BUSINESS 292-0569

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

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

Alaska Airlines Skycap
San Diego International Airport

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

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

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

X _____
I agree to pay the amount shown above.

Have A Great Trip!



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

Name & Address

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

Room 511/NQ2D ✓
 Arrival Date 7/19/2012 4:33:00PM
 Departure Date 7/20/2012

Adult/Child 1/0
 Room Rate \$179.00

RATE PLAN LV2
 AL [REDACTED]
 BONUS AL [REDACTED] CAR

Confirmation: 84328608

7/20/2012 PAGE 1

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

} 201.20

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

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

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EXPRESS CHECK-OUT

Good Morning! We hope you enjoyed your stay. With Express Check-Out there is no need to stop at the Front Desk to check out.

Please review this statement. It is a record of your charges as of late last evening.

For any charges after your account was prepared, you may:

- + pay at the time of purchase.
 - + charge purchases to your account, then stop by the Front Desk for an updated statement.
 - + or request an updated statement be mailed to you within two business days.
- Simply call the Front Desk from your room and tell us when you are ready to depart. Your account will be automatically checked out and you may use this statement as your receipt. Feel free to leave your key(s) in the room.
 Please call the Front Desk if you wish to extend your stay or if you have any questions about your account.

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

DATE: Wed, Jan 16

Others

**RESERVATION
RETAINED FOR
180 DAYS**

Ticket Information

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

TRAVELTRUST IS OPEN MONDAY - FRIDAY FROM 6AM-530PM PST
AND SATURDAY FROM 9AM-1PM PST - 760-835-1700.
FOR EMERGENCY AFTERHOURS SERVICE IN THE US
PLEASE CALL 888-221-6062 AND USE YOUR VIT CODE - S7NS0
PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER
EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00
THANK YOU FOR CHOOSING TRAVELTRUST...SCOTT MACKERLEY

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



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

Electronic Invoice

Prepared For:
BOWENS/THELLA

Ref: **DEPT 6**

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

Client Address

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

Notes

YOUR ALASKA ETICKET CONFIRMATION IS ** NOCDUI **
 -----INVOICE/ITINERARY ACCOUNTING DOCUMENT-----
 *****TICKETLESS TRAVEL INSTRUCTIONS*****
 THIS IS AN E-TICKET RESERVATION.
 A GOVERNMENT ISSUED PHOTO ID IS NEEDED AT CHECK IN
 THIS TICKET IS NON-REFUNDABLE AND MUST BE USED FOR
 THE FLIGHTS BOOKED. IF THE RESERVATION IS NOT USED
 OR CANCELLED BEFORE THE DEPARTURE OF YOUR FLIGHTS
 IT MAY HAVE NO VALUE. CONTACT TRAVELTRUST BEFORE
 YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY.
 *****TSA GUIDANCE FOR PASSENGERS*****
 PLEASE ALLOW EXTRA TIME FOR SCREENING AND BOARDING
 INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE
 DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE
 FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV

DATE: Thu, Jul 19

Flight: ALASKA AIRLINES 491

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

DATE: Fri, Jul 20

Flight: ALASKA AIRLINES 494

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

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

FILE COPY

GENERAL INSTRUCTIONS:

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

1. TRAVELER:

Travelers Name: Thella F. Bowens Dept: BU6

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

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

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

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

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

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

• AIRFARE \$ 500.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental) \$ 100.00

B. LODGING \$ 250.00

C. MEALS \$ 75.00

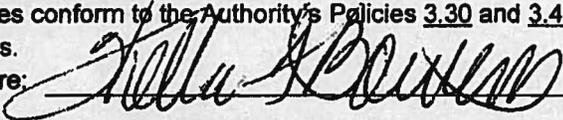
D. SEMINAR AND CONFERENCE FEES \$ 0.00

E. ENTERTAINMENT (If applicable) \$ 0.00

F. OTHER INCIDENTAL EXPENSES \$ 0.00

TOTAL PROJECTED TRAVEL EXPENSE \$ 875.00

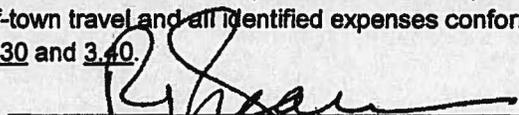
CERTIFICATION BY TRAVELER By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Policies 3.30 and 3.40 and are reasonable and directly related to the Authority's business.

Travelers Signature:  Date: July 11, 2012

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

By my signature below, I certify the following:

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

Administrator's Signature:  Date: 7.12.12

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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

by the Executive Committee at its _____ meeting.

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

BUSINESS EXPENSE

BRETON K. LOBNER

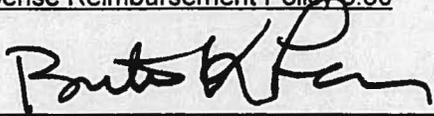
SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY
MONTHLY MILEAGE and PARKING FEE REIMBURSEMENT REPORT

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

Computation of Reimbursement

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

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



SIGNATURE OF EMPLOYEE

DEPT./DIV. HEAD APPROVAL

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

RECEIPT

Ampco System Parking
Lot 1001
First and Ash

Setting: Lot 1001 \$12.00
Mach Name: Shelby 3 Card
Visa

EXPIRATION DATE/TIME

09:19 PM Exp 09:19p
JUN 14, 2012 JUN 14, 2012

Ticket #: 00030421 T#00030421
S/N#200006
FOLLOW INSTRUCTIONS ON SIGNS 100098

\$12.00 Card#xxxx- Visa
Auth #: 06638C

AM-5PM 12HRS \$12 Purchased
Total Due \$12.00 JUN14,2012
Total Paid \$12.00 09:19a

Questions 619-233-2000 or
customerserviceSD@abm.com

Y FACE UP ON DASH DISPLAY FACE UP ON DASH DISPLAY

PLACE FACE UP ON DASH
SOFIA
SUNSET PARKING

Expiration Date/Time

07:22 PM
JUN 19, 2012

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

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

RECEIPT

SOFIA
SUNSET PARKING

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

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

Card #****- Visa

PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

PLACE FACE UP ON DASH
SOFIA
SUNSET PARKING

Expiration Date/Time

12:22 PM
JUL 09, 2012

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

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

RECEIPT

SOFIA
SUNSET PARKING

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

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

Card #***** Visa

PARKING RECEIPT

PLACE FACE UP ON DASH
SOFIA
SUNSET PARKING

Expiration Date/Time

06:26 PM
JUL 18, 2012

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

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

RECEIPT

SOFIA
SUNSET PARKING

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

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

Card #***** Visa

PARKING RECEIPT