



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

**Item No.
6**

Meeting Date: MAY 23, 2011

Subject:

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

Recommendation:

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

Background/Justification:

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

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

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

Fiscal Impact:

Funds for Business and Travel expenses are included in the FY 2010 Budget.

Environmental Review:

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

Page 2 of 2

Equal Opportunity Program:

Not applicable

Prepared by:

TONY RUSSELL
DIRECTOR, CORPORATE SERVICES/AUTHORITY CLERK

TRAVEL REQUEST

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: 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: 05/11/11 PLANNED DATE OF DEPARTURE/RETURN: 07/19/11 / 07/21/11

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

Destination: Santa Rosa, CA

Purpose: California Airport Council Meeting

Explanation: California Airport Council Meeting

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

- AIRFARE

\$ 300.00

- OTHER TRANSPORTATION (Taxi, Train, Car Rental)

\$

B. LODGING

\$ 500.00

C. MEALS

\$ 150.00

D. SEMINAR AND CONFERENCE FEES

\$

E. ENTERTAINMENT (If applicable)

\$

F. OTHER INCIDENTAL EXPENSES

\$ 100.00

TOTAL PROJECTED TRAVEL EXPENSE

\$ 1050.00

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. Bowens

Date: _____

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, _____, 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

BRUCE BOLAND

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

TRAVEL EXPENSE REPORT - Board Members

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

Board member name:

Bruce Boland

Departure Date:

5/1/2011

Return Date:

5/3/2011

Report Due:

6/2/11

Destination:

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.

⁵ Business Expense Reimbursement Policy 3.30

⁴ Travel and Lodging Expense Reimbursement Policy 3.40

	Authority Expenses (Prepaid by Authy)	Board Member Expenses							
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
		5/1/11	5/2/11	5/3/11					
Daily PerDiem Limitations:									
**GSA Daily Hotel Rate or Conference Hotel Rate	197.84		197.84						
**GSA Daily Meals, Entertainment & Incidentals (ME&I)		42.00	56.00	42.00					
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	225.10								0.00
Conference Fees (provide copy of flyer/registration expenses)	650.00								0.00
Rental Car									0.00
Gas and Oil									0.00
Garage/Parking									0.00
Mileage - attach mileage form									0.00
Taxi/Shuttle Fare (include tips pd.) To/From meetings, airport, etc.				55.00					55.00
Hotel - Actual Expense Paid - Excluding Taxes	175.00		175.00						
Allowable Hotel (Lessor of Actual or GSA Allowance)		0.00	175.00	0.00	0.00	0.00	0.00	0.00	175.00
Hotel Taxes Paid	22.84		22.84						22.84
Telephone, Internet and Fax									0.00
Laundry									0.00
Meals, Entertainment & Incidentals (M,E&I):									
Meals (include tips pd.)	Breakfast								
	Lunch		42.44	10.82					
	Dinner		32.39						
	Other Meals								
Entertainment (Hospitality) ¹									
Tips Paid to Maids, Bellhops and other hotel servers									
Taxi/Shuttle Fare (include tips pd.) To/From meal destinations									
Total Meals, Entertainment & Incidentals		74.83	0.00	10.82	0.00	0.00	0.00	0.00	
GSA Allowance for M,E&I (from above)		42.00	56.00	42.00	0.00	0.00	0.00	0.00	
Allowable M,E&I (Lessor of Actual or GSA Allowance)		42.00	0.00	10.82	0.00	0.00	0.00	0.00	52.82
Alcohol is a non-reimbursable expense									0.00
Miscellaneous: Tip for baggage handling				6.00					6.00
									0.00
									0.00
Total Expenses		1,072.94	42.00	197.84	71.82	0.00	0.00	0.00	311.66

Add any additional details as needed for explanation (attach add'l sheet if needed):

Grand Trip Total

1,384.60

Less Cash Advance (attach copy of Authority ck)

Less Expenses Prepaid by Authority

1,072.94

Due Traveler - if positive amount, prepare check request

Due Authority - if negative, attach check payable to SDCRAA

311.66

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

Alcohol is a non-reimbursable expense

¹ Give names and business affiliations of all persons whose meals were paid by traveler.

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.

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.

Prepared By:

Anne Warren

Ext.: 2408

Traveler Signature:

Date:

5/9/11

Administrator's signature:

Date:

5-9-11

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE (To be completed by Clerk)

I, _____ hereby certify that this document was approved by the Executive Committee at it's meeting on _____

Clerk 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: Bruce Boland Dept: 2

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

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

2. DATE OF REQUEST: 3/10/11 PLANNED DATE OF DEPARTURE/RETURN: 4/30/11 / 5/3/11

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

Destination: Tucson, AZ Purpose: Attend Conference
Explanation: ACI-NA: ACI Board Members & Commissioners Conference

*Meals expenses are based on GSA per diem rates

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

• AIRFARE	\$	205
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	100

B. LODGING	\$	200
------------	----	-----

C. MEALS	\$	*140
----------	----	------

D. SEMINAR AND CONFERENCE FEES	\$	650
--------------------------------	----	-----

E. ENTERTAINMENT (If applicable)	\$	
----------------------------------	----	--

F. OTHER INCIDENTAL EXPENSES	\$	
------------------------------	----	--

TOTAL PROJECTED TRAVEL EXPENSE	\$	\$1295
---------------------------------------	-----------	---------------

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: 3/11/11

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: 3.11.11

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

I, Tony R. 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 3/28/11 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


BOLAND/BRUCE
RAYMOND

BOARD


29-Apr-2011 3:30 pm
Page 1 of 2

YOUR SOUTHWEST ETICKET CONFIRMATION IS ** XXFPZN **
-----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


01-May-2011
09:05am
Sunday

Air Southwest Airlines
From: San Diego CA, USA
Meal: None
Equip: Boeing 737-700 Jet
Depart: 01-May-2011 Sunday 09:05am
Arrival: 01-May-2011 Sunday 10:15am
Flight# 1079 Class: Y
To: Tucson AZ, USA
Status: Confirmed
Stops: 0
Depart - TERMINAL 1
Arrive -
EARLYBIRD CHECKIN CONFIRMED
Flight Duration: 1 hour(s) and 10 minutes
Class of Service: Coach


03-May-2011
12:45pm
Tuesday

Air Southwest Airlines
From: Tucson AZ, USA
Meal: None
Equip: Boeing 737-700 Jet
Depart: 03-May-2011 Tuesday 12:45pm
Arrival: 03-May-2011 Tuesday 02:05pm
Flight# 457 Class: Y
To: Las Vegas NV, USA
Status: Confirmed
Stops: 0
Depart -
Arrive - TERMINAL 1
EARLYBIRD CHECKIN CONFIRMED
Flight Duration: 1 hour(s) and 20 minutes
Class of Service: Coach


03-May-2011
03:05pm
Tuesday

Air Southwest Airlines
From: Las Vegas NV, USA
Meal: None
Equip: Boeing 737-300 Jet
Depart: 03-May-2011 Tuesday 03:05pm
Arrival: 03-May-2011 Tuesday 04:10pm
Flight# 492 Class: Y
To: San Diego CA, USA
Status: Confirmed
Stops: 0
Depart - TERMINAL 1
Arrive - TERMINAL 1
EARLYBIRD CHECKIN CONFIRMED
Flight Duration: 1 hour(s) and 05 minutes
Class of Service: Coach

Other

30-Oct-2011
Sunday

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 888-221-6062 AND USE YOUR VIT CODE - S7NS0
PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER
EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00
THANK YOU FOR CHOOSING TRAVELTRUST...SCOTT MACKERLEY



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

BOLAND/BRUCE
RAYMOND

BOARD

29-Apr-2011 3:30 pm

Page 2 of 2

Ticket Information

BOLAND BRUCE
Ticket#:2162073470
Invoice#:1183067

Ticket Base Fare: 195.10
Ticket Tax: 0.00
Total Ticket Amount: 195.10

Electronic: YES

BOLAND BRUCE
Ticket#:0637215544
Invoice#:1183067

Ticket Base Fare: 10.00
Ticket Tax: 0.00
Total Ticket Amount: 10.00

Electronic: NO

BOLAND BRUCE
Ticket#:0637215545
Invoice#:1183067

Ticket Base Fare: 10.00
Ticket Tax: 0.00
Total Ticket Amount: 10.00

Electronic: NO

SERVICE FEE DOCUMENT #: 0544633201 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

Warren Anne

From: Brito Leticia
Sent: Friday, February 25, 2011 2:21 PM
To: Warren Anne
Subject: RE: Hotel reservation charge

Hello, Anne:

This is your authorization to use your P-Card for these hotel deposits in order to hold the two reservations (as listed below). Please ensure that the travelers are aware that each of them will need to change the credit card on record when they check into the hotel (for additional night charges and any incidentals).

In addition, please make sure you include this email with your P-Card reconciliation. Thank you and have a great weekend!

Kind Regards,

Leticia Brito
Purchasing Card Program Analyst
Procurement Department
San Diego County Regional Airport Authority
P.O. Box 82776
San Diego, CA 92138
(619) 400-2536

From: Warren Anne
Sent: Thursday, February 24, 2011 11:24 AM
To: Brito Leticia
Subject: Hotel reservation charge

Board Chair Robert Gleason and Board Member Paul Robinson are attending the ACI-NA Airport Board Members & Commissioners Conference in Tucson, AZ, May 1-3, 2011. The conference hotel, The Westin La Paloma Resort & Spa, requires a one-night deposit by April 23. I would appreciate authorization for this deposit to be charged to my P-Card. Thank you, Anne

the westin la paloma
3200 e sunrise dr tucson, az 85718-3302 us
phone 520.742.6000 fax 520.577.5878
westin.com/lapaloma.com

guest:

travel agent/charge to

Bruce Boland
Aaa Preferred Account

United States

ACD29A

room 708
rate 175.00
no. pers. 1
folio 435602 EX-A
page 1
arrive 01-MAY-11 10:57
depart 03-MAY-11
payment AX

date	reference	description	charges/credits
01-MAY-11	RT708	Room Chrg Grp Association	175.00
01-MAY-11	RT708	Room Tax	22.84
01-MAY-11	DEPOSIT	Deposit Applied	197.84-
01-MAY-11	9385430	Azul Restaurant <i>No Alcohol -</i>	42.44
01-MAY-11	11388972	Azul Restaurant <i>" "</i>	32.39
02-MAY-11	RT708	Room Chrg Grp Association	175.00
02-MAY-11	RT708	Room Tax	22.84
02-MAY-11	03170168	Retail-Essentials	10.71
02-MAY-11	S568	In Room Movie	17.45
03-MAY-11	AX	American Express	300.83-
		Balance Due	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.

** continued on the next page **

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

Bruce Boland
FOLIO 435602 01-MAY-11

WESTIN
HOTELS & RESORTS

the westin la paloma
3800 e sunrise dr tucson, az 85718-3302 us
phone 520.742.6000 fax 520.577.5878
westin.com/lapaloma.com

travel agent/charge to

Bruce Boland
Aaa Preferred Account
United States
ACD29A

room 708
rate 175.00
no. pers. 1
folio 435602 EX-A
page 2
arrive 01-MAY-11 10:57
depart 03-MAY-11
payment AX

date	reference	description	charges/credits
------	-----------	-------------	-----------------

EXPENSE REPORT SUMMARY

Date	Room/Tax	Food/Bev	TeleComm	Other	Total	Payment
01-MAY-11	197.84	74.83	0.00	0.00	272.67	197.84-
02-MAY-11	197.84	0.00	0.00	28.16	226.00	0.00
Total	395.68	74.83	0.00	28.16	498.67	197.84-

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 885
Starpoints for this visit A42524741029

Bruce Boland
FOLIO 435602 01-MAY-11

WESTIN
HOTELS & RESORTS

WESTIN LA PALOMA
Azul Restaurant
3800 EAST SUNRISE DRIVE
TUCSON, AZ 85718
520-742-6000

938543.1
LILIA M Table 7123
Sun 05/01/11 12:07 PM Guests 2
Guest Num: 1 AZUL

1 ADULT BRUNCH 34.95

SubTotal 34.95
Sales Tax 2.49

Please pay this amount
Total 37.44

100% of the service charge is a
gratuity for the staff.

FOR ROOM CHARGES ONLY!

Gratuity 5-
Total Charge 42.44
Room Number 708 I
Print Name BOLAND
SIGNATURE [Signature]

Brunch 5/1

WESTIN LA PALOMA
Azul Restaurant
3800 EAST SUNRISE DRIVE
TUCSON, AZ 85718
520-742-6000

1138897.1
KATLYN W Table 7021
Sun 05/01/11 7:56 PM Guests 5
Guest Num: 1 AZUL

1 GUISO DE LOCOS 24.00
1 ICED TEA 2.50

SubTotal 26.50
Sales Tax 1.89

Please pay this amount
Total 28.39

100% of the service charge is a
gratuity for the staff.

FOR ROOM CHARGES ONLY!

Gratuity 4-
Total Charge 32.39
Room Number 708 J
Print Name BOLAND
SIGNATURE [Signature]

Dinner 5/1

Arizona Sports Grill
Tucson Airport
OTG Management

113 Jennifer 1

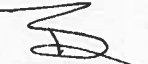
12/1 2903 GST 1
MAY03'11 11:17AM

1 SM STELLA (-) ~~6.00~~
1 TurkRuben Dipper 8.25

Food 8.25
Liquor (-) ~~6.00~~
TAX 1.01
AMOUNT PAID 15.26
Cash 20.00
CHANGE DUE 4.74

-----113 CLOSED MAY03 11:53AM-----

***** Thank You *****

+ 1.00 \$2.00 Net
10.82


24 HOUR SERVICE - AIRPORT SERVICE

DATE 5/3/11
TRIP ID # 1 TIME YELLOW
AMOUNT \$55 CAB # 1602
DRIVER Victor 520 4052793
FROM LA Paloma Resort
TO Tucson Airport

SAFE DRIVERS NEEDED!! CALL 520-624-6611
FEEDBACK? SEND TO COMMENTS@AAAYELLOWAZ.COM
DBA - AAA Cab, Courier, Checker, Neal's, TLC, Fiesta

ACI-NA AGENDA



AIRPORT BOARD MEMBERS & COMMISSIONERS CONFERENCE

MAY 1-3, 2011

THE WESTIN LA PALOMA • TUCSON, AZ

CONFERENCE TOPICS

ACI-NA Policy & Metrics Presentation

What's New on Capitol Hill?

Standing Out: Making Your Case to the Airlines

Benchmarking Your Airport's Environmental Performance

Alternative Options for Outsourcing Aspect of Airport Operations

Air Service Incentives

Intermodalism: The Wave of the Future?

Airport Security Policy Report

Forecasting the Future of Aviation Demand/ Grading Airline Performance

Understanding the Business Travelers Wants and Needs

Regulatory & Legal Issues in Accommodating Passengers with Disabilities

US DOT Aviation Consumer Protection Program



April 8, 2011

Meeting Confirmation

Please review your **CONTACT** information below as it will be used for rosters and badges. Any changes should be sent to cgroup@aci-na.org immediately.

Please note: The company name listed is per your Official Representative to ACI-NA. No changes to Company name are permitted.

Mr. Bruce Boland
Board Member
Nickname: Bruce
San Diego County Regional Airport Authority
PO Box 82776
San Diego, CA 92138-2776

PH: (619) 400-2408
FX: (619) 400-2406

You are registered for the following:

2011 ACI-NA Airport Board Member & Commissioners Annual Conf
Sunday, May 01, 2011 through Tuesday, May 03, 2011

Function	Quantity	Rate	Amount
Conference Registration	1	\$650.00	\$650.00
		Total	\$650.00
		Payment	\$650.00
		Balance	\$0.00

Thank you for registering for the 2011 Airport Board Member & Commissioners Annual Conference to be held May 1-3, 2011. All events will take place at The Westin La Paloma located at 3800 East Sunrise Drive, Tucson, AZ 85718. For hotel reservations, call the The Westin La Paloma at (520) 577-5887 and request the Airports Council International group rate of \$175 USD single/double occupancy plus additional taxes. The hotel cut-off date is 5 pm EST, Thursday, April 7, 2011. Reservations made after this date can only be accepted on a space and rate available basis. The hotel may sell out of rooms or the conference rate before the cut-off date. Make your reservations early.

Registration fees for the conference include continental breakfasts, lunches; all refreshment breaks and educational materials.

A taxi ride from the Tucson International Airport to the hotel is approximately \$45-50 one-way and takes about 30-40 minutes, depending upon traffic.

Dress for the meeting is business casual.

If you need to cancel your registration, please contact ACI-NA as soon as possible at (202) 293-8500 or meetings@aci-na.org. Registration fees will be fully refunded if written notice is received at ACI-NA no later than Thursday, April 7. After Thursday, April 7, all refunds will have a \$75 processing fee per person deducted. No refunds will be issued, for any reason, on cancellations received after Monday, April 18. Substitutions will be honored at any time.

For more information on this event including program updates, tourist information, Tucson weather conditions, and more visit <http://www.aci-na.org/2011/commissioners/welcome.html>.

We look forward to seeing you in Tucson for the 2011 Airport Board Member & Commissioners Annual Conference.

ACI-NA REGISTRATION FORM

2011 ACI-NA AIRPORT BOARD & COMMISSIONERS CONFERENCE
MAY 1-3, 2011 THE WESTIN LA PALOMA TUCSON, AZ

Please print or type name for each attendee. Please print or type form.

Name: Bruce Boland
 Badge Name: Bruce Title: Board Member
 Organization: San Diego County Regional Airport Authority
 Address: 3225 North Harbor Drive
 City: San Diego State: CA Zip/Postal Code: 92101 Country: USA
 Phone: 619-400-2408 Fax: 619-400-2406 *Email: [REDACTED]@san.org
 Guest name, if attending (complimentary-no charge): _____

*An e-mail confirmation will be sent to this email. If you want confirmation sent to an additional email address, please list here: _____



Are you a first time attendee? Yes ☐ No ☐

For 1 Attendee	Early (before April 7)	Regular (7 or After)
ACI/ACI-NA Member	<input checked="" type="checkbox"/> \$650 USD	<input type="checkbox"/> \$750 USD
Non-member	<input type="checkbox"/> \$925 USD	<input type="checkbox"/> \$1065 USD

Please check the appropriate boxes.

☒ Check made payable to ACI-NA enclosed
 OR
 Credit Card:

☐ Master Card ☐ Visa
☐ Amex ☐ Diners Club

Credit Card Number: _____
 Expiration Date: _____
 Name on Card: _____
 Signature: _____

ADA ☐ Please check here if you require assistance in order to fully participate in this meeting.

Badges: Only individuals who register and present badges and/or tickets may attend conference events. A badge is required for all conference sessions.

PAYMENT: Full payment must accompany registration forms in order to complete a registration. Registrations will be processed at the registration table available when payment is received. Credit card payment must be included for online and faxed registrations. Check payment will only be accepted with mailed forms and onsite registration forms. The card holder's signature above authorizes ACI-NA to charge the credit card the total correct amount due and acknowledges there are no refunds after, Thursday, April 7, 2011.

CONFIRMATION OF REGISTRATION: Confirmation of registration will be e-mailed to conference attendees using the e-mail address (es) provided above. If confirmation is not received within two weeks after sending in your registration form, please e-mail meetings@aci-na.org. Non-receipt of confirmation before the conference is not justification for seeking a refund.

OPT-OUT: By registering for the conference you are providing permission to receive e-mails, mailings and faxes related to the conference. If you do not wish to receive any further emails from ACI-NA, please send a reply email to: jweidlich@aci-na.org with the words "OPT-OUT" in the subject line with the original email in the body. You may notify us with your decision to opt-out within 30 days of receiving the email. Please note, if you choose to opt out of receiving email from ACI-NA, you will no longer receive ACI-NA e-newsletters, notices of upcoming meetings, sponsorship opportunities, etc. If you prefer to unsubscribe from certain electronic publications rather than opt-out from email communications entirely, please email such request to: communications@aci-na.org. It may take up to 10 days to process your request. The postal address for ACI-NA is 1775 K Street, N.W., Suite 500, Washington, DC 20006.

Refund Policy: Registration fees will be fully refunded if written notice is received at ACI-NA no later than Thursday, April 7, 2011. After April 7, all refunds will have a processing fee of \$75 deducted. No refunds will be issued on cancellations received after Monday, April 18, 2011. Substitutions will be honored at any time. All no-shows will be billed.

Note: ACI-NA reserves the right to cancel this program if the number of registrants is insufficient. In that event, we will notify all registrants and refund the registration fee in full. However, any costs incurred by the registrant, such as hotel cancellation or airline penalties, are the responsibility of the registrant.

Fax this form to (202) 478-0889 or register online at www.aci-na.org.

Remit Payment to: ACI-NA • PO Box 79286 • Baltimore, MD 21279-0286 • PHONE: (202) 293-8500



U.S. General Services Administration

FY 2011 Per Diem Rates for ZIP 85718

(October 2010 - September 2011)

Cities not appearing below may be located within a county for which rates are listed.

To determine what county a city is located in, visit the [National Association of Counties \(NACo\) website \(a non-federal website\)](#).

The following rates apply for 85718															
Primary Destination* (1)	County (2, 3)	Max lodging by Month (excludi ng taxes)													Meals & Inc. Exp.**
		2010			2011										
		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
Tucson	Pima County	93	93	93	93	111	111	111	111	77	77	77	93	56	

* NOTE: Traveler reimbursement is based on the location of the work activities and not the accommodations.

** Meals and Incidental Expenses: see [Breakdown of M&IE Expenses](#) for important information on first and last days of travel.

U.S. General Services Administration

Per Diem

Overview

M&IE Breakdown

Factors Influencing Lodging Rates

FAQ

FY 2011 Highlights

Fire Safe Hotels

Have a Per Diem Question?

Per Diem Files (Archived)

Per Diem Rates

Meals and Incidental Expenses (M&IE) Breakdown

The following table shows the breakdown of continental breakfast/breakfast, lunch, and dinner components of the maximum daily reimbursement (per diem) rates for meals and incidental expenses while on travel. Refer to [Section 301-11.18 of the Federal Travel Regulation](#) for guidance on deducting these amounts from your per diem reimbursement claims for meals furnished to you by the government.

NOTE: The first and last calendar day of travel is calculated at 75 percent.

The M&IE rates differ by travel location. View the per diem rate for your primary destination to determine which M&IE rates apply.						
M&IE Total	\$46	\$51	\$56	\$61	\$66	\$71
Continental Breakfast/ Breakfast	\$7	\$8	\$9	\$10	\$11	\$12
Lunch	\$11	\$12	\$13	\$15	\$16	\$18
Dinner	\$23	\$26	\$29	\$31	\$34	\$36
Incidentals	\$5	\$5	\$5	\$5	\$5	\$5
First & Last Day of Travel	\$34.50	\$38.25	\$42	\$45.75	\$49.50	\$53.25

The shortcut to this page is www.gsa.gov/mie.

CONTACTS

Federal Travel Discussion

View Contact Details

☐ RATE THIS PAGE

Hotel expenses	272.68
Baggage Handling	6
Taxi...hotel to TUS Airport	55
Lunch TUS Airport	8.25
lunch tip TUS Airprot	2
Tax on Lunch TUS Airport	0.57
	344.5

Note: I rode to the Hotel with CFO Bowers -

she paid -



PAUL ROBINSON

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

TRAVEL EXPENSE REPORT - Board Members

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

Board member name:

Paul Robinson

Departure Date:

4/30/2011

Return Date:

5/2/2011

Report Due:

6/1/11

Destination:

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.

⁵ Business Expense Reimbursement Policy 3.30

⁴ Travel and Lodging Expense Reimbursement Policy 3.40

		Authority Expenses (Prepaid by Authy)	Board Member Expenses							TOTALS
			SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
			5/1/11	5/2/11					4/30/11	
Daily PerDiem Limitations:										
**GSA Daily Hotel Rate or Conference Hotel Rate			197.84						197.84	
**GSA Daily Meals, Entertainment & Incidentals (ME&I)			56.00	42.00					42.00	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)		316.40								0.00
Conference Fees (provide copy of flyer/registration expenses)		650.00								0.00
Rental Car										0.00
Gas and Oil										0.00
Garage/Parking										0.00
Mileage - attach mileage form										0.00
Taxi/Shuttle Fare (include tips pd.) To/From meetings, airport, etc.				69.00					53.00	122.00
Hotel - Actual Expense Paid - Excluding Taxes		175.00	175.00							
Allowable Hotel (Lessor of Actual or GSA Allowance)			175.00	0.00	0.00	0.00	0.00	0.00	0.00	175.00
Hotel Taxes Paid		22.84	22.84							22.84
Telephone, Internet and Fax										0.00
Laundry										0.00
Meals, Entertainment & Incidentals (M,E&I):										
Meals (include tips pd.)	Breakfast		26.73							
	Lunch									
	Dinner		30.71						16.80	
	Other Meals									
Entertainment (Hospitality) ¹										
Tips Paid to Maids, Bellhops and other hotel servers										
Taxi/Shuttle Fare (include tips pd.) To/From meal destinations										
Total Meals, Entertainment & Incidentals			57.44	0.00	0.00	0.00	0.00	0.00	16.80	
GSA Allowance for M,E&I (from above)			56.00	42.00	0.00	0.00	0.00	0.00	42.00	
Allowable M,E&I (Lessor of Actual or GSA Allowance)			56.00	0.00	0.00	0.00	0.00	0.00	16.80	72.80
Alcohol is a non-reimbursable expense										0.00
Miscellaneous:										0.00
										0.00
										0.00
Total Expenses		1,164.24	253.84	69.00	0.00	0.00	0.00	0.00	69.80	392.64

Add any additional details as needed for explanation (attach add'l sheet if needed):

Grand Trip Total

1,556.88

Less Cash Advance (attach copy of Authority ck)

Less Expenses Prepaid by Authority

1,164.24

Due Traveler - if positive amount, prepare check request

Due Authority - if negative, attach check payable to SDCRAA

392.64

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

Alcohol is a non-reimbursable expense

¹ Give names and business affiliations of all persons whose meals were paid by traveler.

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.

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.

Prepared By:

Anne Warren

Ext.: 2408

Traveler Signature:

Print/Type Name

Date:

5/5/11

Administrator's signature:

Date:

5.5.11

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE (To be completed by Clerk)

I, _____ hereby certify that this document was approved by the Executive Committee at it's meeting on _____.

Clerk 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: Paul Robinson Dept: 2
Position: ☒ Board Member ☐ President/CEO ☐ Gen. Counsel ☐ Chief Auditor
☐ All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 3/10/11 PLANNED DATE OF DEPARTURE/RETURN: 4/30/11 / 5/3/11

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

Destination: Tucson, AZ Purpose: Attend Conference
Explanation: ACI-NA: ACI Board Members & Commissioners Conference

*Meals expenses are based on GSA per diem rates

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

• AIRFARE	\$	185
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	100
B. LODGING	\$	400
C. MEALS	\$	*196
D. SEMINAR AND CONFERENCE FEES	\$	650
E. ENTERTAINMENT (If applicable)	\$	
F. OTHER INCIDENTAL EXPENSES	\$	
TOTAL PROJECTED TRAVEL EXPENSE	\$	1531

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: Paul Robinson Date: 3/11/11

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: 3.11.11

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

I, Tony R 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 3/28/11 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

ROBINSON/PAUL
EDWARD

BOARD

17-Mar-2011 11:00 am

Page 1 of 1

YOUR SOUTHWEST ETICKET CONFIRMATION IS ** X2JY44 **

-----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


30-Apr-2011
06:50pm
Saturday

Air Southwest Airlines

From: San Diego CA, USA

Meal: None

Equip: Boeing 737-700 Jet

Depart: 30-Apr-2011 Saturday 06:50pm

Arrival: 30-Apr-2011 Saturday 08:00pm

Depart - TERMINAL 1

Arrive -

Flight Duration: 1 hour(s) and 10 minutes

Class of Service: Coach


Flight# 2943

Class: Y

To: Tucson AZ, USA

Status: Confirmed

Stops: 0


03-May-2011
06:20pm
Tuesday

Air Southwest Airlines

From: Tucson AZ, USA

Meal: None

Equip: Boeing 737-700 Jet

Depart: 03-May-2011 Tuesday 06:20pm

Arrival: 03-May-2011 Tuesday 07:35pm

Depart -

Arrive - TERMINAL 1

Flight Duration: 1 hour(s) and 15 minutes

Class of Service: Coach

Flight# 1586

Class: Y

To: San Diego CA, USA

Status: Confirmed

Stops: 0

30-Oct-2011
Sunday

Other

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 888-221-6062 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

ROBINSON PAUL

Ticket#:2162078023

Invoice#:1183069

Electronic: YES

Ticket Base Fare: 169.40

Ticket Tax: 0.00

Total Ticket Amount: 169.40

SERVICE FEE DOCUMENT #: 0544633203 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006



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

ROBINSON/PAUL
EDWARD

BOARD

29-Apr-2011 4:35 pm

Page 1 of 2

YOUR SOUTHWEST ETICKET CONFIRMATION IS ** X2JY44 **
-----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



30-Apr-2011
06:50pm
Saturday

Air Southwest Airlines
From: San Diego CA, USA
Meal: None
Equip: Boeing 737-700 Jet
Depart: 30-Apr-2011 Saturday 06:50pm
Arrival: 30-Apr-2011 Saturday 08:00pm
Depart - TERMINAL 1
Arrive -
Flight Duration: 1 hour(s) and 10 minutes
Class of Service: Coach

Flight# 2943 Class: Y
To: Tucson AZ, USA
Status: Confirmed
Stops: 0



02-May-2011
06:20pm
Monday

Air Southwest Airlines
From: Tucson AZ, USA
Meal: None
Equip: Boeing 737-700 Jet
Depart: 02-May-2011 Monday 06:20pm
Arrival: 02-May-2011 Monday 07:35pm
Depart -
Arrive - TERMINAL 1
Flight Duration: 1 hour(s) and 15 minutes
Class of Service: Coach

Flight# 1586 Class: T
To: San Diego CA, USA
Status: Confirmed
Stops: 0

Other

30-Oct-2011
Sunday

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

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



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

ROBINSON/PAUL
EDWARD

BOARD

29-Apr-2011 4:35 pm

Page 2 of 2

Ticket Information

ROBINSON PAUL
Ticket#:2169094351
Invoice#:1184075

Ticket Base Fare: 72.00
Ticket Tax: 0.00
Total Ticket Amount: 72.00

Electronic: YES

ROBINSON PAUL
Ticket#:0637217385
Invoice#:1184075

Ticket Base Fare: 10.00
Ticket Tax: 0.00
Total Ticket Amount: 10.00

Electronic: NO

ROBINSON PAUL
Ticket#:0637217384
Invoice#:1184075

Ticket Base Fare: 10.00
Ticket Tax: 0.00
Total Ticket Amount: 10.00

Electronic: NO

SERVICE FEE DOCUMENT #: 0545671395 FEE AMOUNT: 25.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

24 HOUR SERVICE - AIRPORT SERVICE

DATE _____ TIME _____
AMOUNT 53.00 CAB# #50
DRIVER P. J. B.
FROM _____
TO _____

E M A TRANSPORTATION
1832 N. CHIRICAHUA AVE
TUCSON, AZ 85745

05/02/2011 17:08:34
Merchant ID: 000000001564546
Terminal ID: 02340424
4223696500286270

CREDIT CARD

VISA SALE

CARD # XXXXXXXXXXXX7322
INVOICE 1790002
Batch #: 000179
Approval Code: 019590
Entry Method: Swiped
Approved: Online
Tax Amount: \$0.00

SALE AMOUNT \$69.00

CUSTOMER COPY

Warren Anne

From: Brito Leticia
Sent: Friday, February 25, 2011 2:21 PM
To: Warren Anne
Subject: RE: Hotel reservation charge

Hello, Anne:

This is your authorization to use your P-Card for these hotel deposits in order to hold the two reservations (as listed below). Please ensure that the travelers are aware that each of them will need to change the credit card on record when they check into the hotel (for additional night charges and any incidentals).

In addition, please make sure you include this email with your P-Card reconciliation. Thank you and have a great weekend!

Kind Regards,

Leticia Brito
Purchasing Card Program Analyst
Procurement Department
San Diego County Regional Airport Authority
P.O. Box 82776
San Diego, CA 92138
(619) 400-2536

From: Warren Anne
Sent: Thursday, February 24, 2011 11:24 AM
To: Brito Leticia
Subject: Hotel reservation charge

Board Chair Robert Gleason and Board Member Paul Robinson are attending the ACI-NA Airport Board Members & Commissioners Conference in Tucson, AZ, May 1-3, 2011. The conference hotel, The Westin La Paloma Resort & Spa, requires a one-night deposit by April 23. I would appreciate authorization for this deposit to be charged to my P-Card. Thank you, Anne

the westin la paloma
3800 e sunrise dr tucson, az 85718-3302 us
phone 520.742.6000 fax 520.577.5878
westin.com/lapaloma.com

guest

travel agent/charge to

Paul Robinson
Aaa Preferred Account

room 233
rate 175.00
no. pers. 1
folio 433026 EX-A
page 1
arrive 30-APR-11 20:53
depart 02-MAY-11
payment AX

ACD29A

30-APR-11	RT233	Room Chrg Grp Association	175.00
30-APR-11	RT233	Room Tax	22.84
30-APR-11	DEPOSIT	Deposit Applied	197.84-
30-APR-11	10380770	Azul Restaurant	40.47
01-MAY-11	RT233	Room Chrg Grp Association	175.00
01-MAY-11	RT233	Room Tax	22.84
01-MAY-11	11384520	Azul Restaurant	26.73
01-MAY-11	11388973	Azul Restaurant	30.71
02-MAY-11	AX	American Express	295.75-
		Balance Due	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.

EXPENSE REPORT SUMMARY

Date	Room/Tax	Food/Bev	TeleComm	Other	Total	Payment
30-APR-11	197.84	40.47	0.00	0.00	238.31	197.84-
01-MAY-11	197.84	57.44	0.00	0.00	255.28	0.00
Total	395.68	97.91	0.00	0.00	493.59	197.84-

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 896
Starpoints for this visit A42504738366

Paul Robinson
FOLIO 433026 30-APR-11

WESTIN
HOTELS & RESORTS

WESTIN LA PALOMA
Azul Restaurant
3800 EAST SUNRISE DRIVE
TUCSON, AZ 85718
520-742-6000

1138452.1
GARRET G Table 7053
Sun 05/01/11 10:39 AM Guests 1
Guest Num: 1 AZUL

1 3-EGG OMELET 14.00
1 HOT TEA 2.75
1 V-8 JUICE 4.00

SubTotal 20.75
Sales Tax 1.48

Please pay this amount
Total 22.23

✓
100% of the service charge is a
gratuity for the staff.

*****4.50*****
FOR ROOM CHARGES ONLY!

Gratuity

Total Charge

Room Number

Print Name

SIGNATURE

WESTIN LA PALOMA
Azul Restaurant
3800 EAST SUNRISE DRIVE
TUCSON, AZ 85718
520-742-6000

1038077.1
KARISA R Table 7073
Sat 04/30/11 9:53 PM Guests 1
Guest Num: 1 AZUL

1 3-EGG OMELET 14.00
1 CAESAR 14.00

SubTotal 31.25
Sales Tax 2.22

✓
14.00
2.22
16.22
Please pay this amount
Total 33.47

100% of the service charge is a
gratuity for the staff.

FOR ROOM CHARGES ONLY!

Gratuity

Total Charge

Room Number

Print Name

SIGNATURE

WESTIN LA PALOMA

Azul Restaurant
3800 EAST SUNRISE DRIVE
TUCSON, AZ 85718
520-742-6000

1138897.1
KATLYN W Table 7021
Sun 05/01/11 7:57 PM Guests 5
Guest Num: 5 AZUL

1 GUIZO DE LOCOS 24.00

SubTotal 24.00
Sales Tax 1.71

Please pay this amount
Total 25.71

100% of the service charge is a
gratuity for the staff.

FOR ROOM CHARGES ONLY

Gratuity

Total Charge

Room Number

Print Name

SIGNATURE

ACI-NA AGENDA



AIRPORT BOARD MEMBERS & COMMISSIONERS CONFERENCE

MAY 1-3, 2011

THE WESTIN LA PALOMA • TUCSON, AZ

CONFERENCE TOPICS

ACI-NA Policy & Metrics Presentation

What's New on Capitol Hill?

Standing Out: Making Your Case to the Airlines

Benchmarking Your Airport's Environmental Performance

Alternative Options for Outsourcing Aspect of Airport Operations

Air Service Incentives

Intermodalism: The Wave of the Future?

Airport Security Policy Report

Forecasting the Future of Aviation Demand/Grading Airline Performance

Understanding the Business Travelers Wants and Needs

Regulatory & Legal Issues in Accommodating Passengers with Disabilities

US DOT Aviation Consumer Protection Program



April 8, 2011

Meeting Confirmation

Please review your **CONTACT** information below as it will be used for rosters and badges. Any changes should be sent to cgroup@aci-na.org immediately.

Please note: The company name listed is per your Official Representative to ACI-NA. No changes to Company name are permitted.

Mr. Paul Robinson
Board Member
Nickname: Paul
San Diego County Regional Airport Authority
PO Box 82776
San Diego, CA 92138-2776

PH: (619) 400-2408
FX: (619) 400-2406

You are registered for the following:

2011 ACI-NA Airport Board Member & Commissioners Annual Conf
Sunday, May 01, 2011 through Tuesday, May 03, 2011

Function	Quantity	Rate	Amount
Conference Registration	1	\$650.00	\$650.00
		Total	\$650.00
		Payment	\$650.00
		Balance	\$0.00

Thank you for registering for the 2011 Airport Board Member & Commissioners Annual Conference to be held May 1-3, 2011. All events will take place at The Westin La Paloma located at 3800 East Sunrise Drive, Tucson, AZ 85718. For hotel reservations, call the The Westin La Paloma at (520) 577-5887 and request the Airports Council International group rate of \$175 USD single/double occupancy plus additional taxes. The hotel cut-off date is 5 pm EST, Thursday, April 7, 2011. Reservations made after this date can only be accepted on a space and rate available basis. The hotel may sell out of rooms or the conference rate before the cut-off date. Make your reservations early.

Registration fees for the conference include continental breakfasts, lunches; all refreshment breaks and educational materials.

A taxi ride from the Tucson International Airport to the hotel is approximately \$45-50 one-way and takes about 30-40 minutes, depending upon traffic.

Dress for the meeting is business casual.

If you need to cancel your registration, please contact ACI-NA as soon as possible at (202) 293-8500 or meetings@aci-na.org. Registration fees will be fully refunded if written notice is received at ACI-NA no later than Thursday, April 7. After Thursday, April 7, all refunds will have a \$75 processing fee per person deducted. No refunds will be issued, for any reason, on cancellations received after Monday, April 18. Substitutions will be honored at any time.

For more information on this event including program updates, tourist information, Tucson weather conditions, and more visit <http://www.aci-na.org/2011/commissioners/welcome.html>.

We look forward to seeing you in Tucson for the 2011 Airport Board Member & Commissioners Annual Conference.

ACI-NA REGISTRATION FORM

2011 ACI-NA AIRPORT BOARD & COMMISSIONERS CONFERENCE
MAY 1-3, 2011 THE WESTIN LA PALOMA TUCSON, AZ

Please use one registration form for each attendee. Please print or type form.

Mr./Ms. Name: Paul Robinson
 Badge Name: Paul Title: Board Member
 Organization: San Diego County Regional Airport Authority
 Address: 3225 North Harbor Drive
 City: San Diego State: CA Zip/Postal Code: 92101 Country: USA
 Phone: 619-400-2408 Fax: 619-400-2406 *Email: [REDACTED]@san.org
 Guest name, if attending (complimentary-no charge): _____



* Automated confirmation letter will be sent to this email. If you want confirmation sent to an additional email address, please list here: _____

Are you a first time attendee? Yes ☐ No ☐

REGISTRATION FEES		STANDARD OF PAYMENT	
For 1 Attendee	Early (before April 7)	Regular (7 or After)	
ACI/ACI-NA Member	<input checked="" type="checkbox"/> \$650 USD	<input type="checkbox"/> \$750 USD	Please check the appropriate boxes. <input checked="" type="checkbox"/> Check made payable to ACI-NA enclosed OR Credit Card: <input type="checkbox"/> Master Card <input type="checkbox"/> Visa <input type="checkbox"/> Amex <input type="checkbox"/> Diners Club Credit Card Number: _____ Expiration Date: _____ Name on Card: _____ Signature: _____
Non-member	<input type="checkbox"/> \$925 USD	<input type="checkbox"/> \$1065 USD	

ADA ☐ Please check here if you require assistance in order to fully participate in this meeting.

Badges: Only individuals who register and present badges and/or tickets may attend conference events. A badge is required for all conference sessions.

PAYMENT: Full payment must accompany registration forms in order to complete a registration. Registrations will be processed at the registration rate available when payment is received. Credit card payment must be included for online and faxed registrations. Check payment will only be accepted with mailed forms and onsite registration forms. The card holder's signature above authorizes ACI-NA to charge the credit card the total correct amount due and acknowledges there are no refunds after, Thursday, April 7, 2011.

CONFIRMATION OF REGISTRATION: Confirmation of registration will be e-mailed to conference attendees using the e-mail address (es) provided above. If confirmation is not received within two weeks after sending in your registration form, please e-mail meetings@aci-na.org. Non-receipt of confirmation before the conference is not justification for seeking a refund.

OPT-OUT: By registering for the conference you are providing permission to receive e-mails, mailings and faxes related to the conference. If you do not wish to receive any further emails from ACI-NA, please send a reply email to: jweidlich@aci-na.org with the words "OPT-OUT" in the subject line with the original email in the body. You may notify us with your decision to opt-out within 30 days of receiving the email. *Please note, if you choose to opt out of receiving email from ACI-NA, you will no longer receive ACI-NA e-newsletters, notices of upcoming meetings, sponsorship opportunities, etc.* If you prefer to unsubscribe from certain electronic publications rather than opt-out from email communications entirely, please email such request to communications@aci-na.org. It may take up to 10 days to process your request. The postal address for ACI-NA is 1775 K Street, N.W., Suite 500, Washington, DC 20006.

Refund Policy: Registration fees will be fully refunded if written notice is received at ACI-NA no later than Thursday, April 7, 2011. After April 7, all refunds will have a processing fee of \$75 deducted. No refunds will be issued on cancellations received after Monday, April 18, 2011. Substitutions will be honored at any time. All no-shows will be billed.

Note: ACI-NA reserves the right to cancel this program if the number of registrants is insufficient. In that event, we will notify all registrants and refund the registration fee in full. However, any costs incurred by the registrant, such as hotel cancellation or airline penalties, are the responsibility of the registrant.

Fax this form to (202) 478-0889 or register online at www.aci-na.org.

Remit Payment to: ACI-NA • PO Box 79286 • Baltimore, MD 21279-0286 • PHONE: (202) 293-8500



U.S. General Services Administration

FY 2011 Per Diem Rates for ZIP 85718

(October 2010 - September 2011)

Cities not appearing below may be located within a county for which rates are listed.

To determine what county a city is located in, visit the [National Association of Counties \(NACo\) website](#) (a non-federal website).

The following rates apply for 85718

Primary Destination* (1)	County (2, 3)	Max lodging by Month (excluding taxes)													Meals & Inc. Exp.**
		2010 Oct Nov Dec			2011 Jan Feb Mar Apr May Jun Jul Aug Sep										
Tucson	Pima County	93	93	93	93	111	111	111	111	111	77	77	77	93	56

*NOTE: Traveler reimbursement is based on the location of the work activities and not the accommodations.

**Meals and incidental Expenses: see [Breakdown of M&IE Expenses](#) for important information on first and last days of travel.

U.S. General Services Administration

Per Diem

Overview

M&IE Breakdown

Factors Influencing Lodging
Rates

FAQ

FY 2011 Highlights

Fire Safe Hotels

Have a Per Diem Question?

Per Diem Files (Archived)

Per Diem Rates

Meals and Incidental Expenses (M&IE) Breakdown

The following table shows the breakdown of continental breakfast/breakfast, lunch, and dinner components of the maximum daily reimbursement (per diem) rates for meals and incidental expenses while on travel. Refer to [Section 301-11.18 of the Federal Travel Regulation](#) for guidance on deducting these amounts from your per diem reimbursement claims for meals furnished to you by the government.

NOTE: The first and last calendar day of travel is calculated at 75 percent.

The M&IE rates differ by travel location. View the per diem rate for your primary destination to determine which M&IE rates apply.						
M&IE Total	\$46	\$51	\$56	\$61	\$66	\$71
Continental Breakfast/Breakfast	\$7	\$8	\$9	\$10	\$11	\$12
Lunch	\$11	\$12	\$13	\$15	\$16	\$18
Dinner	\$23	\$26	\$29	\$31	\$34	\$36
Incidentals	\$5	\$5	\$5	\$5	\$5	\$5
First & Last Day of Travel	\$34.50	\$38.25	\$42	\$45.75	\$49.50	\$53.25

The shortcut to this page is [www.gsa.gov/mie](#)

CONTACTS

Federal Travel Discussion

View Contact Details

[RATE THIS PAGE](#)

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 15
 DEPARTURE DATE: 4/12/2011 RETURN DATE: 4/16/2011 REPORT DUE: 5/16/11
 DESTINATION: Philadelphia, PA

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
				4/12/11	4/13/11	4/14/11	4/15/11	4/16/11	4/17/11	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)		631.40								0.00
Conference Fees (provide copy of flyer/registration expenses)		785.00								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.)*				12.00	10.00	15.00		20.00		57.00
Hotel*				236.16	236.16	236.16	236.16			944.64
Telephone, Internet and Fax*										0.00
Laundry*										0.00
Tips - separately paid (maids, bellhop, other hotel svcs.)										0.00
Meals (Include tips pd.)	Breakfast*									0.00
	Lunch*			8.31	16.84			18.70		43.85
	Dinner*			29.04	57.60			9.28		95.92
	Other Meals*									0.00
Alcohol is a non-reimbursable expense										
Hospitality ¹ *										0.00
Miscellaneous:										0.00
Baggage Fees								50.00		50.00
										0.00
*Provide detailed receipts										0.00
Total Expenses prepaid by Authority		1,416.40	0.00	285.51	320.80	251.16	236.16	97.98	0.00	1,191.41

Explanation:

Total Expenses Prepaid by Authority	1,416.40
Total Expenses Pd. by Employee (including cash advances)	1,191.41
Grand Trip Total	2,607.81
Less Cash Advance (attach copy of Authority ck)	
Less Expenses Prepaid by Authority	1,416.40
Due Traveler (positive amount) ²	
Due Authority (negative amount) ³	1,191.41

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.

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

Prepared By: Kendy Rios Ext.: 2424
 Traveler Signature: Breton Lobner Date: 5.6.2011
 Approved By: _____ Date: _____

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

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

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

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

GENERAL INSTRUCTIONS:

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

1. TRAVELER:

Travelers Name: Breton Lobner Dept: 15
Position: ☐ Board Member ☐ President/CEO ☒ Gen. Counsel ☐ Chief Auditor
☐ All other Authority employees (does not require executive committee administrator approval)

2. DATE OF REQUEST: 2/22/2011 PLANNED DATE OF DEPARTURE/RETURN: 4/12/2011 / 4/16/2011

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

Destination: Philadelphia, PA

Purpose: 2011 ACI-NA Conference - Spring Legal Affairs - "Spotting Issues and Practical Solutions"

Explanation: _____

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

• AIRFARE	\$	\$440
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	
B. LODGING	\$	\$900
C. MEALS	\$	\$300
D. SEMINAR AND CONFERENCE FEES	\$	\$785
E. ENTERTAINMENT (If applicable)	\$	
F. OTHER INCIDENTAL EXPENSES	\$	
TOTAL PROJECTED TRAVEL EXPENSE	\$	\$2,425

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: Breton K. Lobner Date: FEB 4 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: _____ Date: _____

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

I, Tony K. Lussac, 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 2/22/11 meeting.
(Leave blank and we will insert the meeting date.)



FOUR SEASONS HOTEL

Philadelphia

Mr. Breton Lobner
3225 North Harbor Dr
San Diego CA 92101
USA

Arrival: 04/12/11
Departure: 04/16/11
Rm #: 852
Folio #: 378535
Cashier: 142
Page #: 1 of 1
Grp Code: ACI412

INVOICE

Date	Description	Reference	Debit	Credit
04/12/11	Room Charge		205.00	
04/12/11	State Room Tax		14.35	
04/12/11	Local Room Tax		16.81	
04/13/11	Room Charge		205.00	
04/13/11	State Room Tax		14.35	
04/13/11	Local Room Tax		16.81	
04/14/11	Room Charge		205.00	
04/14/11	State Room Tax		14.35	
04/14/11	Local Room Tax		16.81	
04/15/11	Room Charge		205.00	
04/15/11	State Room Tax		14.35	
04/15/11	Local Room Tax		16.81	
04/16/11	Visa			944.64
XXXXXXXXXXXX1444 XX/XX				
Total			944.64	
Balance				0.00

Guest Signature

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, association or company fails to pay for any part or the full amount of these charges. Please leave your room key at the reception upon departure. This folio also serves as a receipt of payment for services rendered.

Thank you for staying at Four Seasons Hotel Philadelphia

Lobner Breton

From: cgroup@aci-na.org
Sent: Friday, February 04, 2011 5:01 PM
To: Lobner Breton; Rios Kendy
Subject: General Counsel - Confirmation

02/04/2011



Meeting Confirmation Notice

Please review your **CONTACT** information below as it will be used for rosters and badges. Any changes should be sent to **cgroup@aci-na.org** immediately.

Please note: The company name listed is per your Official Representative to ACI-NA. No changes to Company name is permitted.

Mr. Breton K. Lobner
General Counsel
NickName: Bret
San Diego County Regional Airport Authority
3225 N. Harbor Drive San Diego, CA 92101

PH: (619) 400-2424
FX: (619) 400-2428
EM: **blobner@san.org**

You are registered for the following:

General Counsel

From Wednesday, April 13, 2011 through Saturday, April 16, 2011

Description	UnitPrice	Quantity	Price
Conference Registration	\$ 785.00	1	\$ 785.00
Total			785.00
Payments			785.00
Balance			0.00

Thank you for registering for the 2011 ACI-NA Legal Affairs Spring Conference. The conference will be held April 13-16, 2011. All events will take place at The Four Seasons Hotel, Philadelphia, PA. The Four Seasons Hotel is located at One Logan Square, Philadelphia, PA 19103. For hotel reservations, call The Four Seasons Hotel (215) 963-2712 or and request the Airports Council International group rate of \$205 USD single/double occupancy. The hotel cut-off date is March 25, 2011. Reservations made after this date can only be accepted on a space and rate available basis. The hotel may sell out of rooms or the conference rate before the cut-off date. Make your reservations early.

Registration fees for the conference include the welcome reception, all food functions including breakfast, lunch, and breaks, and all educational materials.



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

01-Apr-2011 3:09 pm

Page 1 of 2

US AIR E-TICKET CONFIRMATION *** C8B4DK ***

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
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



12-Apr-2011
11:25am
Tuesday

Air	US Airways	Flight#	150	Class:	S
From:	San Diego CA, USA	To:	Philadelphia PA, USA		
Meal:	Food For Purchase	Seats:	Seat:18E		
Equip:	Airbus A321 Jet	Status:	Confirmed		
Depart:	12-Apr-2011 Tuesday 11:25am	Stops:	0		
Arrival:	12-Apr-2011 Tuesday 07:34pm				

Depart - TERMINAL 2
Arrive - TERMINAL B
US Airways locator: C8B4DK
UA Frequent Flyer# -LOBNER/BRETON
** MIDDLE SEAT ** AISLE OR WINDOW NOT AVAILABLE
WE WILL CONTINUE TO MONITOR FOR A SEAT
Flight duration: 5 hour(s) and 09 minutes
Class of Service: Coach


16-Apr-2011
06:00pm
Saturday

Air	US Airways	Flight#	155	Class:	N
From:	Philadelphia PA, USA	To:	San Diego CA, USA		
Meal:	Food For Purchase	Seats:	Seat:25E		
Equip:	Airbus A320 Jet	Status:	Confirmed		
Depart:	16-Apr-2011 Saturday 06:00pm	Stops:	0		
Arrival:	16-Apr-2011 Saturday 08:58pm				

Depart - TERMINAL B
Arrive - TERMINAL 2
US Airways locator: C8B4DK
UA Frequent Flyer# -LOBNER/BRETON
** MIDDLE SEAT ** AISLE OR WINDOW NOT AVAILABLE
WE WILL CONTINUE TO MONITOR FOR A SEAT
Flight duration: 5 hour(s) and 58 minutes
Class of Service: N

Other

13-Oct-2011
Thursday

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 888-221-6043 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



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

01-Apr-2011 3:09 pm

Page 2 of 2

Ticket Information

LOBNER BRETON

Ticket#: 7969664320

Invoice#: 5210814

Electronic: YES

Ticket Base Fare: 567.44

Ticket Tax: 63.96

Total Ticket Amount: 631.40

SERVICE FEE DOCUMENT #: 0545119583 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

Lunch \$8.31

4/12

Dinner
Bret's share \$29.04

Lunch April 12

HMSHOST
CALIFORNIA PIZZA KITCHEN
SAN DIEGO AIRPORT

5909 ANGELICA

3838 APR12'11 10:53AM

EAT IN

1 CAESAR SAL W/CHI	8.99
15 %	
ARPT DISC 15%	1.35-
SUBTOTAL	7.64
TAX	0.67
AMOUNT PAID	8.31
CASH	20.00
CHANGE DUE	11.69

HOW DID WE DO?
JOE NIKNAM
619-231-5100 EXT:157
Joe.Niknam@hmshost.com

Your order number is: 3838

Swann Lounge
Four Seasons Hotel Philadelphia

242 HOWARD N.

2

107/1

CHK 9380

APR12'11 9:24PM

[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
1 Pommes Frite	7.00
[REDACTED]	[REDACTED]
1 CHEESESTEAK	21.00
1 COKE	6.00
21.00 %	
21% SVC CHG	23.94
FOOD	55.00
LIQUOR	14.00
WINE	18.00
BEER	21.00
SODA	6.00
Other.....	23.94
Tax.....	10.18
Total.....	\$148.12

***** FOR HOTEL ROOM CHARGE *****

GRATUITY_____

TOTAL_____

ROOM / ACCOUNT # _____

PRINT NAME_____

SIGNATURE_____

\$29.04
7
12
6
+21%

Dinner april 12

4/12
Airport Shuttle \$12.00

Let us take you to the airport: (4/12)

 Lady Liberty Airport Shuttle
Center City - West Philadelphia
DOOR TO DOOR SERVICE
ladylibertyshuttle.com

DATE April 12
RECEIPT 12

Lady Liberty
TRANSPORTATION CO., INC.
CALL FOR RESERVATIONS
(215) 724-8888

AT THE AIRPORT DIAL 27

Total

7 \$22.00

4/13
Taxi \$10.00

(4/13)

2.24
10.00

4/13
Bret's share \$ 16.84
Lunch

LUNCH April 13
Zane + Dave

(4/13)

PUBLIC HOUSE at LOGAN SQUARE
2 Logan Square
Philadelphia, PA 19103

Server: Perri 04/13/2011
Table 35/1 12:44 PM
Guests: 3

#40004

Reprint #: 1
Order Type: SEND

PLANNING AN EVENT?

For information on booking one please
call Public House at
215-587-9040 and ask for Shannon.
We would love to help you plan
a great party!!

[REDACTED]
Diet Coke (2 @2.00) 4.00
[REDACTED]
Grilled Steak Salad 13.00
[REDACTED]

Subtotal 52.00
Tax 4.16
Total 56.16

Balance Due 56.16

THANK YOU
PLEASE COME AGAIN
VISIT US AT:
www.publichousephilly.com
SIGN UP FOR SPECIAL EVENTS
& TO BOOK YOUR NEXT PARTY

(4/13)

PUBLIC HOUSE at LOGAN SQUARE
2 Logan Square
Philadelphia, PA 19103

Server: Perri DOB: 04/13/2011
12:49 PM 04/13/2011
Table 35/1 4/40004

VISA 6291468
Card #XXXXXXXXXXXX1444
Magnetic card present: LOBNER BRETON
Approval: 01797D

Amount: \$ 14.04
+ Credit Card Tip: 2.80
= Total: \$ 16.84

x Bld C

THANK YOU
PLEASE COME AGAIN
VISIT US AT:
www.publichousephilly.com
SIGN UP FOR SPECIAL EVENTS
& TO BOOK YOUR NEXT PARTY

>Rest Copy-Please Sign<

4/13 - Dinner

\$1 57.60

April 13

4/13

CHECK # 752770

DATE 4/13/11

TABLE # P10

TIME 10:45PM

-- DPRIVATE : STEPHEN --

SEAT#	ITEMS ORDERED	AMOUNT
3	FP SOUP	0.00
	FP BASS	0.00
	FP PANNA COTTA	0.00
	FP 45	45.00
	SUBTOTAL	45.00
		45.00
	TOTAL	45.00

SUBTOTAL	45.00
SERVICE	9.00
TAX	3.60

TOTAL DUE 57.60

OF GUESTS 0

Thank you!

FORK
30E Market Street Philadelphia, PA
(215) 625-9425
www.forkrestaurant.com
GIFT CARDS ALSO AVAILABLE

April 13

4/13

FORK RESTAURANT
306 MARKET STREET
PHILADELPHIA, PA 19106
215-625-9425

Merchant ID: 8002137563
Term ID: 007542000002137563004
Server ID: ?

Sale

xxxxxxxxxxxx1444

VISA Entry Method: Swiped

Amount: \$ 57.60

Tip:

Total:

04/13/11 22:57:43
Inv #: 000038 Appr Code: 023250
Apprvd: Online

Customer Copy

THANK YOU!

4/14

Taxi \$15.00

(4/14)

ACL CITY TAXI
215 467-5556

DRIVER: 00106036
CAB # P0177
DATE: 04/14/2011
START TIME 19:55
END TIME 20:00
TRIP # 35149
RATE No. 1
MILES 1.49
FARE \$ 6.38

GR. TOT. 6.38

TIP: \$ (7.00)

TOTAL \$

OPA Complaints
215 553-3441

(4/14)

PHL TAXI
215 232-2000

DRIVER: 00109028
CAB # P1021
DATE: 04/14/2011
START TIME 21:33
END TIME 21:42
TRIP # 10909
RATE No. 1
MILES 1.53
FARE \$ 7.53

GR. TOT. (8.00) 7.53

TIP: \$

TOTAL \$

4/16
Lunch \$ 18.70

PUBLIC HOUSE at LOGAN SQUARE
2 Logan Square
Philadelphia, PA 19103

Server: Michelle 04/16/2011
Table 42/3 1:51 PM
Guests: 5
#40004
Order Type: SEND

PLANNING AN EVENT?
For information on booking one please
call Public House at
215-587-9040 and ask for Shannon.
We would love to help you plan
a great party!!

Iced Tea 2.00
Caesar Salad 13.00
Add Chicken

Subtotal 15.00
Tax 1.20
Total 16.20
Balance Due 16.20

THANK YOU
PLEASE COME AGAIN
VISIT US AT:
www.publichousephilly.com
SIGN UP FOR SPECIAL EVENTS
& TO BOOK YOUR NEXT PARTY,

16
PUBLIC HOUSE at LOGAN SQUARE
2 Logan Square
Philadelphia, PA 19103

Server: Michelle DOB: 04/16/2011
02:03 PM 04/16/2011
Table 42/3 4/40004
VISA 5242887
Card #XXXXXXXXXXXX1444
Approval: 04247D

Amount: \$ 16.20
+ Credit Card Tip: 2.50
= Total: \$ 18.70

x BK

THANK YOU
PLEASE COME AGAIN
VISIT US AT:
www.publichousephilly.com
SIGN UP FOR SPECIAL EVENTS
& TO BOOK YOUR NEXT PARTY

>> Customer Copy <<

4/16

Dinner \$ 9.28

See - missing detailed receipt
Form

4/16

Taxi \$20.00

(4/16)

Villa B 4892

Date: Apr16'11 05:21PM
Card Type: Visa
Acct #: XXXXXXXXXXXX1444
Exp Date: XX/XX
Auth Code: 04286D
Check: 9455
Server: 102083 Flora A

Total 9.28

Total: _____

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

*** Guest Copy ***

Dinner et Airport

4/16/11
PARTY TAXI
11-17-6866
ORIGIN: 00105365
L3: 1 P1353
DATE: 4/16/2011
STAR: 14:08
END: 14:23
TRIP: 22919
RATE: 2
TAX: 9.28
TOTAL: 28.50
TAX: 1.00
TOTAL: 29.50
TOTAL: 29.50

\$20.00



C2WZYH/US 16APR11 BFOEABXC E-TICKET RECEIPT
LOBNER/BRETON ARRIVAL
1000A EXCESS BAG EBC US 9957 Y 16APR 1130A FEE FEE



FROM TO
EBC FEE

FP VIXXXXXXXXXXXXX1444/XXXX/06770D /FC BAGGAGE FEE (1B) 01 0025 (2B) 00
0000 (3B) 00 0000 (OW) 00 0000 (OZ) 00 0000(SE) 00 0000 USD TTL 025.00E
ND

FARE USD 25.00 DOCUMENT NUMBER 0372427198606
TAX US 0.00
TAX
TOTAL USD 25.00

NO CASH VALUE

THANK YOU FOR FLYING
US AIRWAYS

Baggage Fees For
4/12 & 4/16 \$50.00



A5RM62/US 12APR11 BF147AXD E-TICKET RECEIPT
LOBNER/BRETON ARRIVAL
1000A EXCESS BAG EBC US 9957 Y 12APR 1130A FEE FEE



FROM TO
EBC FEE

FP VIXXXXXXXXXXXXX1444/XXXX/07306D /FC BAGGAGE FEE (1B) 01 0025 (2B) 00
0000 (3B) 00 0000 (OW) 00 0000 (OZ) 00 0000(SE) 00 0000 USD TTL 025.00E
ND

FARE USD 25.00 DOCUMENT NUMBER 0372426692582
TAX US 0.00
TAX
TOTAL USD 25.00

NO CASH VALUE

THANK YOU FOR FLYING
US AIRWAYS

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

MISSING RECEIPT FORM

Employee/Department Head must complete form below.

Date of Purchase/Event: 5-May-11

Description of Item/Event: 24th Annual Aviation Issues Conference

Vendor/Event Name: American Association of Airport Executives

Dollar Amount: \$9.28

Reason for Missing Receipt: Detailed receipt missing - lost

The cashier gave me the only receipt
the restaurant printed. They did not give
an itemized receipt at the Airport.

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

Robert G. Fisher
Employee Signature

5-6-11
Date

Angie K
Department Head Signature

Date

BUSINESS EXPENSES

BRETON LOBNER

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

BUSINESS EXPENSE REIMBURSEMENT REPORT

March 1, 2011

Period Covered

DATE	G/L Account	Description	AMOUNT
3/16/11	66290	Parking - San Diego County Bar Association / Judicial Reception	\$5.00
3/11/11	66290	Parking - Board Retreat Dinner Dinner	\$15.00
TOTAL			\$20.00

I acknowledge that I have read, understand and agree to Authority *Policy 3.30 - Business Expense Reimbursement Policy and that any purchases 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.

* Policy 3.30

APPROVED: By the Executive Committee at its April 25, 2011

NAME

Bruce K. Fahn

NAME

DATE

4-8-11

DATE

PARKING RECEIPT

RECEIPT

Ampco System Parking

Lot 1044
Sixth and A

Setting: Lot 1044

Mach Name: Shelby 2

\$5.00
Cash

EXPIRATION DATE/TIME

Exp 02:00am
MAR 17, 2011

Exp 02:00a

MAR 17, 2011

T#00021425
S/N#200007
470553Purchased
MAR 16, 2011
06:12p

Ticket # 00021425

FOLLOW INSTRUCTIONS ON RECEIPT

\$5.00 Cash

5PM to 2AM

Total Due \$5.00

Total Paid \$5.00

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

PARKING RECEIPT

COMPLETE PARKING MANAGEMENT FOR RESTAURANTS,
HOTELS, PRIVATE PARTIES AND PARK & LOCK, SAN DIEGO, CA

15-

D 002940



LICENSE NO.

THIS CONTRACT LIMITS OUR LIABILITY—READ IT

This is a license to park only, no bailment is created. In accepting this contract, Holder agrees to use Operator's garage or lot at Holder's own risk. The owners and operators of this parking facility hereby specifically disclaim any responsibility, express or implied, to protect against the loss of or damage to your vehicle or its contents. No employee or agent may alter or enlarge our liability hereunder orally or otherwise. Parking in this facility shall constitute an acknowledgment and acceptance of this condition on your right to use our parking facility. Operator's attendant is on duty for collection of fees only. Note hours of operation and rates are posted. Please lock your car and take your keys.

LOST TICKET PAYS FULL CHARGE
ATTENDANT NOT ALWAYS ON DUTY
NO IN AND OUT PRIVILEGES

SOUTHLAND PRINTING - SHREVEPORT, LA

132813

March 11, 2011

Friday

March 2011

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

April 2011

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

11	Friday	Notes
7 am		
8 00		
9 00		
10 00		
11 00		
12 pm	Board Retreat 12:30 PM to 3 PM Board Room/BICC Ribs/kendy	
	Lunch 12:30 Board	
1 00		
2 00		
3 00		
4 00		
5 00		
6 00		
	Dinner with Board: BICE, Bice Restaurant 4251 Grand Avenue San Diego, CA 92104	

March 16, 2011

Wednesday

March 2011

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

April 2011

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

16 Wednesday		Notes
7 am		
8 00		
9 00		
10 00		
11 00		
12 pm		
1 00		
2 00		
3 00		
4 00		
5 00		
6 00	5:30-8:30 Judicial Reception 1333 - 7th Ave (between A & Ash)	