



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

**Item No.
4**

Meeting Date: **AUGUST 22, 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 2012 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

EXPENSE REPORT

THELLA F. BOWENS

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

TRAVEL EXPENSE REPORT

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

TRAVELER: Thella F. Bowens DEPT. NAME & NO. 6/Executive Office
 DEPARTURE DATE: 7/17/2011 RETURN DATE: 7/19/2011 REPORT DUE: 8/18/11
 DESTINATION: Washington DC

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
		7/17/11	7/18/11	7/19/11					
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	940.40								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.)*		84.00		96.00					180.00
Hotel*		319.46	319.46						638.92
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (include tips pd.)									
Breakfast*		5.49	36.96	36.96					79.41
Lunch*									0.00
Dinner*				8.49					8.49
Other Meals*		2.09		4.56					6.65
Alcohol is a non-reimbursable expense									
Hospitality ¹ *									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority	940.40	411.04	356.42	146.01	0.00	0.00	0.00	0.00	913.47

Explanation:

* 07-18-11 Adjusted \$5.18 for In Room Dining Charge on July 18. Room number accidentally added in as the tip. Total of receipt is \$36.96

Total Expenses Prepaid by Authority	940.40
Total Expenses Incurred by Employee (including cash advances)	913.47
Grand Trip Total	1,853.87
Less Cash Advance (attach copy of Authority ck)	
Less Expenses Prepaid by Authority	940.40
Due Traveler (positive amount)²	
Due Authority (negative amount)³	913.47

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.

⁴ Travel and Lodging Expense Reimbursement Policy 3.40

⁵ Business Expense Reimbursement Policy 3.30

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

Ext.: 2445
 Date: 8/18/2011
 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.

✓ BB 8/17/11

4/8/2011 → Corporate

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: 06/08/11 PLANNED DATE OF DEPARTURE/RETURN: 07/17/11 / 07/19/11

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

Destination: Washington, DC Purpose: Airport Legislative Alliance Meetings
Explanation: Airport Legislative Alliance Meetings

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

• AIRFARE	\$	600.00
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	130.00

B. LODGING	\$	600.00
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C. MEALS	\$	200.00
----------	----	--------

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

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

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

TOTAL PROJECTED TRAVEL EXPENSE	\$	1530.00
---------------------------------------	----	---------

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: 6 June 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: [Signature] Date: 6.8.11

AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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 6/27/11 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

BOWENS/THELLA

DEPT 6

01-Jul-2011 9:30 am

Page 1 of 2

YOUR UNITED ETICKET CONFIRMATION IS ** L9V1J8 **

-----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.

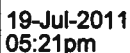
*****TSA GUIDANCE FOR PASSENGERS*****

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


17-Jul-2011
07:17am
Sunday

Air United Airlines Flight# 970 Class: M
From: San Diego CA, USA To: Washington Dulles DC, USA
Meal: Food For Purchase Seats: Seat:21C
Equip: Boeing 757 200 Jet Status: Confirmed
Depart: 17-Jul-2011 Sunday 07:17am Stops: 0
Arrival: 17-Jul-2011 Sunday 03:04pm
Depart - TERMINAL 1
Arrive -
United Airlines locator: L9V1J8

** EXIT ROW AISLE SEAT CONFIRMED **
Flight Duration: 4 hour(s) and 47 minutes
Class of Service: Coach


19-Jul-2011
05:21pm
Tuesday

Air United Airlines Flight# 975 Class: V
From: Washington Dulles DC, USA To: San Francisco CA, USA
Meal: Food For Purchase Seats: Seat:19D
Equip: Boeing 777 Jet Status: Confirmed
Depart: 19-Jul-2011 Tuesday 05:21pm Stops: 0
Arrival: 19-Jul-2011 Tuesday 07:55pm
Depart -
Arrive - TERMINAL 3
United Airlines locator: L9V1J8

** ECONOMY PLUS MIDDLE - WE WILL MONITOR FOR AISLE **
Flight Duration: 5 hour(s) and 34 minutes
Class of Service: Coach

15-Jan-2012
Sunday

Other
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.traveltrust.com

BOWENS/THELLA

DEPT 6

01-Jul-2011 9:30 am

Page 2 of 2

Ticket Information

BOWENS THELLA
Ticket#: 8663124648
Invoice#: 1186036

Ticket Base Fare: 826.98
Ticket Tax: 83.42
Total Ticket Amount: 910.40

Electronic: YES

SERVICE FEE DOCUMENT #: 0547854904 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1012

910.40



Representing America's Airport System

**Airport Policy Roundtable Meeting
Monday, July 18, 2011
W Washington D.C.**

1:00 p.m. – 1:15 p.m.	Welcome and Introductions
1:15 p.m. – 1:45 p.m.	Jeff Davis Editor, Transportation Weekly
1:45 p.m. – 2:15 p.m.	Steve Van Beek Director, Chief of Policy and Strategy, LeighFisher
2:15 p.m. – 3:00 p.m.	Building Blocks <ul style="list-style-type: none">• PFCs• AIP Realignment• Taxation: Lowering the rates and broadening the Base
3:00 p.m. – 3:15 p.m.	Break
3:15 p.m. – 4:30 p.m.	Open Discussion
4:30 p.m. - 5:00 p.m.	Communications Update and Other Issues
5:30 p.m. - 6:30 p.m.	2011 AAAE & ALA Summer Legislative Issues Conference Welcome Reception <i>(all Roundtable attendees are welcome to attend)</i>
7:00 p.m. – 9:00 p.m.	ALA Roundtable Dinner <i>Bibiana</i> <i>1100 New York Avenue NW</i> <i>Washington D.C., DC 20005-3934</i> <i>(Walking directions and a map are included on back of this agenda)</i>

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



Bowens, Thella	Page Number	1	Invoice Nbr	1000040259
Aaa Preferred Account	Guest Number	171770	Arrive Date	07-17-2011
XXXXXXXXXX	Folio ID	A	Depart Date	07-19-2011
XXXXXXXXXX	No. Of Guest	1		
	Room Number	518		
	Club Account	XXXXXXXXXX		
	Time	07-20-2011 03:31		

Duplicate Invoice

Date	Reference	Description	Charges	Credits
07-17-2011	RT518	Room Charge	✓ \$279.00	\$319.46
07-17-2011	RT518	Occupancy/Tourism	✓ \$40.46	
07-18-2011	3739	In Room Dining	✓ \$36.96	\$42.14 -5.18 *
07-18-2011	RT518	Room Charge	✓ \$279.00	\$319.46
07-18-2011	RT518	Occupancy/Tourism	✓ \$40.46	
XXXXXXXXXX			\$11.14	-11.14 **
07-19-2011	AX	American Express		\$-692.20
07-19-2011	3815	In Room Dining	✓ \$36.96	
07-19-2011	AX	American Express		\$-36.96
		** Total	\$712.84	\$729.16
		** 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.

Continued on the next page

* Hotel overcharged tip. \$5.18 returned to credit card. (see pg 'D' and 'G')

** Removed expense \$11.14

A

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



Bowens, Thella	Page Number	2	Invoice Nbr	1000040259
Aaa Preferred Account	Guest Number	171770	Arrive Date	07-17-2011
XXXXXXXXXXXX	Folio ID	A	Depart Date	07-19-2011
XXXXXXXXXXXX	No. Of Guest	1		
XXXX	Room Number	518		
	Club Account	XXXXXXXXXXXX		
	Time	07-20-2011 03:31		

Duplicate Invoice

0.00
0.00
0.00
0.00
0.00

As a Starwood Preferred Guest you have earned at least 1458
Starpoints for this visit A50768218495.

Were all your wishes granted? Just let me know:
gmedbaten@whothels.com. Explore a World of Wonder 24/7/365 at wresidences.com.

Signature _____

B

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



Bowens, Thella	Page Number	3	Invoice Nbr	1000040259
Aaa Preferred Account	Guest Number	171770	Arrive Date	07-17-2011
[REDACTED]	Folio ID	A	Depart Date	07-19-2011
[REDACTED]	No. Of Guest	1		
[REDACTED]	Room Number	518		
	Club Account	[REDACTED]		
	Time	07-20-2011 03:31		

Duplicate Invoice

EXPENSE SUMMARY REPORT

Currency: USD

Date	Room	Room Tax	Food /Bev	Telecom	Wheels	Other	Total	Payment
07-17-2011	\$279.00	\$0.00	\$0.00	\$0.00	\$0.00	\$40.46	\$319.46	\$0.00
07-18-2011	\$279.00	\$0.00	\$0.00	\$0.00	\$0.00	\$82.60	\$361.60	\$0.00
07-19-2011	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$48.10	\$48.10	\$-729.16
Total	\$558.00	\$0.00	\$0.00	\$0.00	\$0.00	\$171.16	\$729.16	\$-729.16

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



Bowens, Thella
[REDACTED]
[REDACTED]
[REDACTED]

Page Number 1
Guest Number 182596
Folio ID A
No. Of Guest 1

Room Number
Club Account [REDACTED]
Time 08-03-2011 16:30

Invoice Nbr 1000041205
Arrive Date 08-03-2011
Depart Date 08-03-2011

Invoice				
Date	Reference	Description	Charges	Credits
08-03-2011	OVERCHARGE	In Room Dining		\$-5.18
08-03-2011	AX	American Express	\$5.18	
		** Total	\$5.18	\$-5.18
		** Balance	\$0.00	

8/3



\$5.18 credited to Thella's card.

0.00
0.00
0.00
0.00
0.00

As a Starwood Preferred Guest you have earned at least -10
Starpoints for this visit [REDACTED]

Continued on the next page

D

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



Bowens, Thella	Page Number	2	Invoice Nbr	1000041205
[REDACTED]	Guest Number	182596	Arrive Date	08-03-2011
[REDACTED]	Folio ID	A	Depart Date	08-03-2011
[REDACTED]	No. Of Guest	1		
	Room Number			
	Club Account	[REDACTED]		
	Time	08-03-2011 16:30		

Invoice

Were all your wishes granted? Just let me know:
gmedbaten@whothels.com. Explore a World of Wonder 24/7/365 at wresidences.com.

Signature _____

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



Bowens, Thella Page Number 3 Invoice Nbr 1000041205
[REDACTED] Guest Number 182596 Arrive Date 08-03-2011
[REDACTED] Folio ID A Depart Date 08-03-2011
[REDACTED] No. Of Guest 1

Room Number
Club Account [REDACTED]
Time 08-03-2011 16:30

Invoice
EXPENSE SUMMARY REPORT
Currency: USD

Date	Room	Room Tax	Food /Bev	Telecom	Wheels	Other	Total	Payment
08-03-2011	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-5.18	\$-5.18	\$5.18
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-5.18	\$-5.18	\$5.18

W
Washington, DC
Whatever/Whenever

3038 Nate

CHK 3739 518/bowens GST 1
JUL18'11 10:50AM

1 DELIVERY CHARGE	5.00
1 Toast	2.00
1 S-Apple Bacon	8.00
1 Kids Fruit Plate	8.00
1 French Press Sm	6.00
5.00 %	
ADMIN FEE RM SVC	1.45
Food	24.00
Other	5.00
OTHER	1.45
RM SVC 15%	3.60
TAX	2.91
TOTAL DUE	\$36.96

Tip: 518 ~~36.96~~

TOTAL: 36.96

Room: 518

Print Name: Bowens

Signature: *[Signature]*

↑
Correct
receipt
\$36.96

W
Washington, DC
Whatever/Whenever

3038 Nate

CHK 3739 518/bowens GST 1
JUL18'11 10:50AM

1 DELIVERY CHARGE	5.00
1 Toast	2.00
1 S-Apple Bacon	8.00
1 Kids Fruit Plate	8.00
1 French Press Sm	6.00
5.00 %	
ADMIN FEE RM SVC	1.45
\$ CHG TIP	5.18
518	
BOWENS, PHELLA	
Room Charge	42.14
Food	24.00
Other	5.00
OTHER	6.63
RM SVC 15%	3.60
TAX	2.91
PAYMENT	42.14
---3045 CLOSED JUL18 11:24AM---	

← INCORRECTLY
ADDED
ROOM# AS
TIP.

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

DUL NG ARRIVALS 116
DULLES INTERNATIONAL AIRPORT
DULLES, VA 20166
Thanks for shopping with us!
Comments/Inquiries
www.stellarairportstores.com

Ticket# 116-162781 User: 334
07/17/2011 3:23 pm Station: 116

Item #	Qty	Price	Total
Description			
V962500057	1	1.99	1.99
Nutter Butter Bites 3oz			
Subtotal			1.99
Tax			0.10
Total			2.09

Tender:
Cash 5.10
(Change)Cash -3.01

Net tender: 2.09

Items purchased: 1

116-162781

UNITED

07/17/2011
UAG/0 SAN-IAD
Device ID 01X00081095

Receipt #: 0060
Transaction: 11071709123481095

Sale

Product	Price	Qty	Amt.
Parfait	5.49	1	5.49
Total	USD		5.49
1003	USD		5.49

Breakfast

DATE 07/17/2011 AMOUNT \$ 73.00
RECEIVED FROM 2AD TIP 11.00
FROM 2AD DOR. 84.00
DESTINATION 95 15th St NW De.
CAB # 796 DRIVER I.D. # 50-796
DRIVERS NAME APRADI

Other meal

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

Washington, DC
Whatever/Whenever

3038 Nate

CHK 3739 518/bowens GST 1
JUL18'11 10:50AM

1 DELIVERY CHARGE 5.00
1 Toast 2.00
1 S-Apple Bacon 3.00
1 Kids Fruit Plate 3.00
1 French Press Sm 3.00
5.00 W
ADMIN FEE RM SVC 1.45

Food 24.00
Other 5.00
OTHER 1.45
RM SVC 15% 3.60
TAX 2.91
TOTAL DUE \$36.96

Tip: 518

TOTAL: 36.96

Room: 518

Print Name: BOWENS

Signature: *[Signature]*

Washington, DC
Whatever/Whenever

3023 VIRGINIA

CHK 3815 bowens/518 GST 1
JUL19'11 9:45AM

1 DELIVERY CHARGE 5.00
1 Kids Fruit Plate 3.00
1 French Press Sm 3.00
1 Toast 2.00
1 S-Apple Bacon 3.00
5.00 W
ADMIN FEE RM SVC 1.45

Food 24.00
Other 5.00
OTHER 1.45
RM SVC 15% 3.60
TAX 2.91
TOTAL DUE \$36.96

Tip: 518

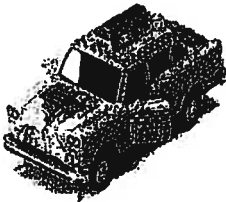
TOTAL: 36.96

Room: Bowens

Print Name: 518

Signature: *[Signature]*

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



TAXICAB RECEIPT

Time: 11:30
Date: 7/19/2011

Origin of trip: Hotel, W.

Destination: Aero Club, Capital Hilton Hotel

Fare: \$8 + \$2 tip Sign: _____
\$9

UNITED

07/19/2011
UA975 IAD SFO
Device ID 01X00081060

Receipt #: 0656
Transaction: 110/1916351081060

Sale

Product	Price	Qty	Amt
Lapas Snack Bu	8.49	1	8.49
Total	USD		8.49
1003	USD		8.49

Dinner

STARBUCKS & SHUTTLE
DULLES INTERNATIONAL AIRPORT
CHANTILLY, VIRGINIA

9392 DORA

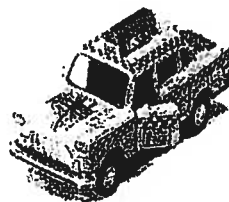
CHK 6292 JUL19'11 4:30PM

1 Venti Iced LEMON	3.25
1 Reg FRUIT & YOGURT	1.09
Tax	0.22
Amt Paid	4.56
Cash	10.00
Change Due	5.44

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

~~Phone number 6292~~

Other Meal.



TAXICAB RECEIPT

Time: _____
Date: 7/19

Origin of trip: Hotel, W Hotel

Destination: Airport

Fare: \$73 + \$14 tip Sign: _____
\$87

**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. 6/Executive Office
DEPARTURE DATE: 5/28/2011 RETURN DATE: 6/2/2011 REPORT DUE: 7/2/11
DESTINATION: London, England

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	
		5/29/11	5/30/11	5/31/11	6/1/11			5/28/11	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	5,244.00								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.)*		189.74	11.21						200.95
Hotel*		392.02	392.02	392.02					1,176.06
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)			3.30	4.95	4.95				13.20
Meals (include tips pd.)									0.00
Breakfast*									0.00
Lunch*		50.22	45.38						95.60
Dinner*			47.09						47.09
Other Meals*			5.77						5.77
Alcohol is a non-reimbursable expense									
Hospitality ^{1*}			50.97	18.74					69.71
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority	5,244.00	631.98	555.74	415.71	4.95	0.00	0.00	0.00	1,608.38

Explanation: Hospitality Items: Included Hampton Brown (SDCRAA)	Total Expenses Prepaid by Authority	5,244.00
	Total Expenses Incurred by Employee (including cash advances)	1,608.38
	Grand Trip Total	6,852.38
	Less Cash Advance (attach copy of Authority ck)	
	Less Expenses Prepaid by Authority	5,244.00
	Due Traveler (positive amount)²	
	Due Authority (negative amount)³	1,608.38

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.

⁴ Travel and Lodging Expense Reimbursement Policy 3.40

⁵ Business Expense Reimbursement Policy 3.30

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

Ext.: 2445
Date: 6/18/11
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 _____

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

meeting.

(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.

FY2011 BB ✓

May 28 - June 2, 2011 London, England

Date	Expense	Amount	Exchange Rate	Reimburse Amount
5/29/2011	Hotel	£237.60	1.6499	\$ 392.02
5/29/2011	Lunch	£30.44	1.6499	\$ 50.22
5/29/2011	Taxi (to hotel)	£115.00	1.6499	\$ 189.74
5/30/2011	Hotel	£237.60	1.6499	\$ 392.02
5/30/2011	Other Meal	£3.50	1.6499	\$ 5.77
5/30/2011	Tip	£2.00	1.6499	\$ 3.30
5/30/2011	Hospitality	£30.00	1.6991	\$ 50.97
5/30/2011	Lunch	£26.71	1.6991	\$ 45.38
5/30/2011	Dinner	£28.54	1.6499	\$ 47.09
5/30/2011	Subway	£6.60	1.6991	\$ 11.21
5/31/2011	Hotel	£237.60	1.6499	\$ 392.02
5/31/2011	Tip	£3.00	1.6499	\$ 4.95
5/31/2011	Hospitality	£11.03	1.6991	\$ 18.74
6/1/2011	Tip	£3.00	1.6499	\$ 4.95

Total: \$ 1,608.38

Line items in gray scale above represent expenses shown on hotel invoice.

Type	US Dollar	Divided by	Exchange Rate	
<i>Credit card:</i>	\$ 1,378.13	£835.28	1.6499	
<i>Cash:</i>	\$ 158.02	£93.00	1.6991	

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

GENERAL INSTRUCTIONS:

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

1. TRAVELER:

Travelers Name: Thella F. Bowens Dept: 6

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

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

2. DATE OF REQUEST: 3/14/11 PLANNED DATE OF DEPARTURE/RETURN: 5/28/11 / 6/1/11

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

Destination: London, England

Purpose: British Airlines Inaugural Activities

Explanation: British Airlines Inaugural Activities

4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES

A. TRANSPORTATION COSTS:

• AIRFARE	\$	5206.90
• OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	200.00

B. LODGING	\$	2,250.00
------------	----	----------

C. MEALS	\$	500.00
----------	----	--------

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

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

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

TOTAL PROJECTED TRAVEL EXPENSE	\$	8156.90
---------------------------------------	-----------	----------------

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: 18 Mar 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

1. Tony B. 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
274 North Coast Highway 101
Encinitas, Ca 92024
Tel: 760-635-1700
Fax: 760-635-1720
Website: www.TravelTrust.com

BOWENS/THELLA

DEPT 6

01-Apr-2011 4:10 pm

Page 1 of 2

YOUR BRITISH AIRWAYS ETICKET CONFIRMATION IS ** YM9UH8 **

-----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 UNITED KINGDOM

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


FOR EMERGENCY AFTERHOURS SERVICE

WHILE IN UNITED KINGDOM


PLEASE CALL 00-800-15253545


IF INTL AFTERHOUR NUMBER DOES NOT WORK

DIAL DIRECT OR COLLECT 201-221-4462



28-May-2011
02:25pm
Saturday


Air	British Airways	Flight#	5525	Class:	Y
From:	San Diego CA, USA	To:	Los Angeles CA, USA		
Meal:	Food For Purchase	Seats:	Seat:7A		
Equip:	Embraer RJ140 Jet	Status:	Confirmed		
Depart:	28-May-2011 Saturday	02:25pm	Stops:	0	
Arrival:	28-May-2011 Saturday	03:05pm			

SAN-LAX OPERATED BY /AMERICAN EAGLE FOR AMERICAN AIRLINES
Depart - COMMUTER TERMINAL
Arrive - TERMINAL 4
British Airways locator: YM9UH8
BA Frequent Flyer# -BOWENS/THELLA
** AISLE SEAT CONFIRMED **
Flight Duration: 40 minutes
Class of Service: Coach



28-May-2011
05:35pm
Saturday

Air	British Airways	Flight#	282	Class:	I
From:	Los Angeles CA, USA	To:	London Heathrow EN, UK		
Meal:	Meals	Seats:	Seat:61J		
Equip:	Boeing 747 Jet	Status:	Confirmed		
Depart:	28-May-2011 Saturday	05:35pm	Stops:	0	
Arrival:	29-May-2011 Sunday	11:45am			

Depart - TOM BRADLEY INTL TERM
Arrive - TERMINAL 5
British Airways locator: YM9UH8
BA Frequent Flyer# 
** UPPERDECK AISLE SEAT CONFIRMED **
Flight Duration: 10 hour(s) and 10 minutes
Class of Service: Business


03-Jun-2011
03:05pm
Friday

Air	British Airways	Flight#	273	Class:	I
From:	London Heathrow EN, UK	To:	San Diego CA, USA		
Meal:	Meals	Seats:	Seat:3J		
Equip:	Boeing 777 Jet	Status:	Confirmed		
Depart:	03-Jun-2011 Friday	03:05pm	Stops:	0	
Arrival:	03-Jun-2011 Friday	06:15pm			

Depart - TERMINAL 5
Arrive - TERMINAL 2
British Airways locator: YM9UH8
BA Frequent Flyer# 



TravelTrust
3/4 North Coast Highway 101
Encinitas, Ca 92024
Tel: 760-635-1700
Fax: 760-635-1720
Website: www.traveltrust.com

BOWENS/THELLA

DEPT 6

01-Apr-2011 4:10 pm

Page 2 of 2

**** AISLE SEAT CONFIRMED ****
Flight Duration: 11 hour(s) and 10 minutes
Class of Service: Business

Other

30-Nov-2011
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 - S7NSO
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#:7968039431
Invoice#:1183547

Ticket Base Fare: 4326.00
Ticket Tax: 878.00
Total Ticket Amount: 5204.00

Electronic: YES

SERVICE FEE DOCUMENT #: 0545117165 FEE AMOUNT: 40.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

\$ 5244.00

No Additional Information

https://online.americanexpress.com/mvca/acctserv/us/accountservices.do?request_type=ant 8/10/2011

**RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS**

5/29/2011 Lunch

Renaissance Chancery Court
Lounge
VAT No: 225858540
507 Carlos 3

6/2 CHK 3569
29MAY'11 15:31

1 Afternoon Tea 23.50
TIP Amount 4.00
248/BOWENS
Room Charge 30.44
3.92 VAT 20.0 23.50
SUBTOTAL 23.50
OTHER 4.00
12.5% Svc Chg 2.94
PAYMENT 30.44
---115 CLOSED MAY29 16:21---

Renaissance Chancery Court
Lounge
VAT No: 225858540
507 Carlos

6/2 CHK 3569
29MAY'11 15:31

1 Afternoon Tea 23.50
SUBTOTAL 23.50
12.5% Svc Chg 2.94
SUBTOTAL 26.44
GRATUITIES AT YOUR DISCRETION
Gratuity: 4.00 TOTAL 30.44
NAME: THELLA BOWENS
ROOM No: 248
SIGNATURE: *Thella Bowens*



TAXI RECEIPT

ALWAYS USE A LICENSED TAXI CAB



DATE 29/5/2011

AMOUNT £ 100.00 + £15 (tip)

Signature *[Signature]* £115

WARNING

See Over

*5/29/2011
Airport to hotel
taxi*

**RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS**

Renaissance Court
 Pearl Restaurant
 VAT No: 225858540
 91 Sanowar Hussain 3

 TBL 4/1 CHK 2346 GST 2
 30MAY'11 8:54 ✓

 1 English B/fast 26.00
 TOTAL DUE 26.00
 GRATUITIES AT YOUR DISCRETION
 Gratuity 22.00 TOTAL
 NAME: _____
 ROOM No: _____
 SIGNATURE: _____
 252 High Holborn, London WC1V 7EN
 Tel No: 020 7829 7000

R
RENAISSANCE
 LONDON CHANCERY COURT HOTEL

MINIBAR

Item	Qty	Price £	Number consumed
Stella	2	£4.75	
Spring water	4	£3.50	1
Diet Pepsi	2	£3.00	
Pringles	1	£2.50	
Kit Kat	1	£1.75	

5/30/2011 Breakfast included
 in room rate. Tip only.

Renaissance Chancery Court
 Mini Bar
 VAT No: 225858540
 107 Luca

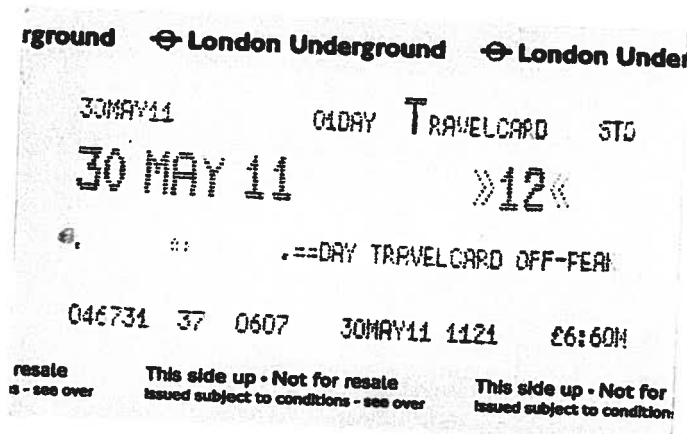
For a full list of soft drinks, wines, spirits
 and prices please see the In-Room Book

 TBL 248/1 CHK 6017
 30MAY'11 14:11

 1 Spring Water 3.50
 248/BOWENS
 Room Charge 3.50
 0.58 VAT 20.0 3.50
 SUBTOTAL 3.50

5/30/2011 Other meal

**RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS**



subway to 87-135 Brompton Road - other meal 5/30/11

**RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS**

160 PICCADILLY
LONDON W1J 9EB

TEL: 020 7499 6996
FAX: 020 7499 6888

BLE: 102 GROUP: 21
May-2011 15:58:57 ✓
CK NUMBER: 18040790

SMI SPARKLING 2.75
WOLSELEY AFT TEA 21.00

total: 23.75

% Service Charge 2.96
tal 26.71

DISCRETIONARY SERVICE INCLUDED

SEE "THE WOLSELEY COLLECTION" AT
www.thewolseley.com

VAT NUMBER: 902 190 951
VAT ANALYSIS

RATE%	Tax	TOTAL
20.00	26.71	26.71

5/30/2011 lunch

TOTAL

160 PICCADILLY
LONDON W1J 9EB
442403366
06915550 S213
ter ID:02
le ID:10221
IDSET:1

AMERICAN EXPRESS
*****1003
P 02/14
IPED

LE
OUNT £26.7
TAL £26.7

SIGNATURE VERIFIED
THANKYOU FOR YOUR CUSTOM

30/05/11 16:00
AUTH CODE: 91
FXN 0056

CUSTOMER COPY
PLEASE RETAIN RECEIPT

Harrods

011 44 207730 1234

Shop online at harrods.com

Thella F. Bowens
Harrods Limited
87-135 Brompton Road
Knightsbridge
LONDON SW1X 7XL
Telephone 020 7730 1234
VAT Number: 629273423
Chocolste Bar

30/05/11 13:00 Assistant 102301 N10791-008919

*Each way
half price
I had the best
M&P
water
water
M&P (1)*

1 Dark Chocolate Suckao (Chocolate bar)	6.25
1 Veen Still 330ml Water	4.50
1 Veen Still 330ml Water	4.50
1 Salmon Bagel M&P (1)	11.75

SPLIT
Gratuity 0.30
Gratuity 2.70

Total to Pay £30.00

American Express Tendered £30.00



Service at your own discretion.
Thank you for your visit.
Please Email Us Your Comments to
restaurants@harrods.com
www.harrods.com

5/30/2011 Hospitality

RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS

20 MAY 23:33

Renaissance Chancery Court
In Room Dining
VAT No: 225858540
122 Daniel Gonzales

248/1 CHK 1671 GST 1
30MAY'11 23:12✓

1 Classic Caesar	12.95
1 Onion Soup	9.75
1 Tray Charge	3.00
SUBTOTAL	25.70
12.5% Svc Chg	2.84
TOTAL DUE	28.54
GRATUITIES AT YOUR DISCRETION	

Gratuity: _____ TOTAL _____

NAME: BOWENS

ROOM No: 248

SIGNATURE: *Thella Bowens*

252 High Holborn, London WC1V 7EN
Tel No: 020 7829 9888

Renaissance Chancery Court
In Room Dining
VAT No: 225858540
122 Daniel Gonzales 1

248/1 CHK 1671 GST 1
30MAY'11 23:12

1 Classic Caesar	12.95
1 Onion Soup	9.75
1 Tray Charge	3.00
248/BOWENS	
Room Charge	28.54
4.28 VAT 20.0	25.70
SUBTOTAL	25.70
12.5% Svc Chg	2.84
TOTAL	28.54

-----107 CLOSED 30MAY 23:41-----

5/30/2011 Dinner

**RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS**

5/31/2011 Breakfast complimentary
£3.00 tip



Wimpton

Renaissance Chancery Court
Pearl Restaurant
VAT No: 225858540

Dinesh Pandey

L 14/1/11 CHK 2428 GST 1
✓ 31MAY'11 10:17

1 English B/fast	26.00
TIP Amount	3.00
248/BOWENS	
Room Charge	29.00
4.33 VAT 20.0	26.00
SUBTOTAL	26.00
GRATUITY	3.00
PAYMENT	29.00

*-
VILLAGE DU PAIN LTD
174 HIGH HOLBORN
WC1V 7AA

M9444146914 T17921871
31-05-11 15:45

AMEX

*****1003

02/14 (S) R0575

TOTAL SALE

£11.03

Please debit my account
with the total amount.

SIGNATURE VERIFIED

AUTH CODE: 73

PLEASE RETURN RECEIPT

CHECK # 260349 DATE 31/05/11
TABLE # 64 TIME 15:47
=====

-- DINING : ALISSIA --

ITEMS ORDERED	AMOUNT
1 SML TOM& BASIL	3.80
1 SCONE	3.60
1 BREAKFAST TEA	2.40

SUBTOTAL	9.80
SERVICE	1.23

TOTAL DUE 11.03

OF GUESTS

RATE	NET	TAX	GROSS
20.00%	8.17	1.63	9.80

LE PAIN QUOTIDIEN

AVEDA

174 HIGH HOLBORN

LONDON WC1V 7AA

<http://lepainquotidien.co.uk>

Service charge 10% gratuity

5/31/2011 Hospitality

**RECEIPTS FROM TRAVEL TO LONDON, ENGLAND
MAY 28 THRU JUNE 3, 2011—THELLA F. BOWENS**

Renaissance Chancery Court
Pearl Restaurant
VAT No: 225858540
56 Ekaterina Glazyr

TBL 14/2/ CHK 2491
✓ 01JUN'11 9:08

1 English B/fast 26.00
TOTAL DUE 26.00
GRATUITIES AT YOUR DISCRETION

Gratuity: 3.00 TOTAL 29.00

NAME: _____

ROOM No: _____

SIGNATURE: _____

252 High Holborn, London WC1V 7EN
Tel No: 020 7829 7000

[Breakfast included in room rate]

6/1/2011

£3.00 tip

[REDACTED] chancerycourt.com

lbs - need Statement (Amex) for E.E.

Mr. Thella Bowens

Room No. : 248
Arrival : 29/05/11
Departure: 01/06/11

REWARD No.: [REDACTED]

- Breakfast included in Room Rate - tip only charged to room

I N V O I C E 706836

VAT NO: 225858540

Renaissance London Chancery Court, 01/06/11/11:15/57 MAB/1

Date	Reference	Charge	Credit
------	-----------	--------	--------

29/05	-Govt/Military	198.00	
29/05	-Room VAT	39.60	
29/05	-Lounge Dinner Food	23.50	
	->#248 : CHECK #3569		
29/05	-Lounge Service Charge	2.94	
	->#248 : CHECK #3569		
29/05	-Lounge Gratuities	4.00	
	->#248 : CHECK #3569		
30/05	-Govt/Military	198.00	
30/05	-Room VAT	39.60	
	->#248 : CHECK #2370		
30/05	-Rm Svc Night Food	22.70	
	->#248 : CHECK #1671		
30/05	-Rm Svc Service Charge	2.84	
	->#248 : CHECK #1671		
30/05	-RM Svc Tray Charge	3.00	
	->#248 : CHECK #1671		
30/05	-Minibar Beverage Soft DK	3.50	
	->#248 : CHECK #6017		
30/05	-Pearl Gratuities	2.00	
	->#248 : CHECK #2346		
31/05	-Govt/Military	198.00	
31/05	-Room VAT	39.60	
31/05	-Pearl Gratuities	3.00	
	->#248 : CHECK #2428		
01/06	-Pearl Gratuities	3.00	
	->#248 : CHECK #2491		
01/06	American Express		835.28
	->XXXXXXXXXXXX1003	XX/XX	
	Total	835.28	835.28

- 52.00 (incorrect charge)

780.28 = 1292.33

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. 6/Executive Office
 DEPARTURE DATE: 7/19/2011 RETURN DATE: 7/21/2011 REPORT DUE: 8/20/11
 DESTINATION: Santa Rosa, CA

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

	Authority Expenses (Prepaid by Authority)	Employee Expenses							TOTALS
		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
Air Fare, Railroad, Bus (attach copy of itinerary w/charges)	211.40			7/19/11	7/20/11	7/21/11			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.)*				34.00					34.00
Hotel*				95.96					95.96
Telephone, Internet and Fax*									0.00
Laundry*									0.00
Tips - separately paid (maids, bellhop, other hotel srvs.)									0.00
Meals (include tips pd.)					16.27				16.27
Breakfast*									
Lunch*									0.00
Dinner*									0.00
Other Meals*									0.00
Alcohol is a non-reimbursable expense									
Hospitality ¹ *									0.00
Miscellaneous: Baggage Fees									0.00
									0.00
									0.00
*Provide detailed receipts									0.00
Total Expenses prepaid by Authority		211.40	0.00	0.00	129.96	16.27	0.00	0.00	146.23

Explanation:

Total Expenses Prepaid by Authority	211.40
Total Expenses Incurred by Employee (including cash advances)	146.23
Grand Trip Total	357.63
Less Cash Advance (attach copy of Authority ck)	
Less Expenses Prepaid by Authority	211.40
Due Traveler (positive amount) ²	
Due Authority (negative amount) ³	146.23

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

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.

⁴ Travel and Lodging Expense Reimbursement Policy 3.40

⁵ Business Expense Reimbursement Policy 3.30

Prepared By: Amy Caldera

Ext.: 2445

Traveler Signature: Thella F. Bowens

Date: 15 Aug 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: 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: 5/12/2011

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 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 5/23/11 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

BOWENS/HELLA

DEPT 6

08-Jun-2011 2:36 pm

Page 1 of 2

YOUR ALASKA ETICKET CONFIRMATION IS ** ELWYPB **

-----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


21-Jul-2011
04:10pm
Thursday

Air:	Alaska Airlines	Flight#:	2475	Class:	K
From:	Santa Rosa CA, USA	To:	Los Angeles CA, USA		
Meal:	None	Seats:	Seat: 10B		
Equip:	DeHavilland Dash 8-4	Status:	Confirmed		
Depart:	21-Jul-2011 Thursday 04:10pm	Stops:	0		
Arrival:	21-Jul-2011 Thursday 05:44pm				

STS-LAX OPERATED BY HORIZON AIR

Depart -

Arrive - -TERMINAL 3

Alaska Airlines locator: ELWYPB

** AISLE SEAT CONFIRMED **

Flight Duration: 1 hour(s) and 34 minutes

Class of Service: Coach


21-Jul-2011
07:10pm
Thursday

Air:	Alaska Airlines	Flight#:	4381	Class:	K
From:	Los Angeles CA, USA	To:	San Diego CA, USA		
Meal:	Food For Purchase	Seats:	Seat: 7B		
Equip:	Embraer RJ140 Jet	Status:	Confirmed		
Depart:	21-Jul-2011 Thursday 07:10pm	Stops:	0		
Arrival:	21-Jul-2011 Thursday 08:05pm				

OPERATED BY AMERICAN EAGLE

Depart - TERMINAL 4

Arrive - -COMMUTER TERMINAL

Alaska Airlines locator: ELWYPB

** AISLE SEAT CONFIRMED **

Flight Duration: 55 minutes

Class of Service: Coach

17-Jan-2012
Tuesday

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 888-221-8062 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



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

08-Jun-2011 2:36 pm

Page 2 of 2

Ticket Information

BOWENS THELLA
Ticket#: 8658305782
Invoice#: 1185382

Ticket Base Fare: 148.84
Ticket Tax: 32.56
Total Ticket Amount: 181.40

Electronic: YES

211.40

SERVICE FEE DOCUMENT #: 0547143949 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1012



CALIFORNIA AIRPORTS COUNCIL

Agenda
CAC Strategic Planning Session
Hyatt Vineyard Creek
170 Railroad Street
Santa Rosa, CA
707.284.1234
July 20, 2011, 11 A.M. – 3 P.M.
Russian River Valley Ballroom

Part 1. 11:00

- 1. Introductions**
- 2. Agenda review**

Part 2. 11:15

- 1. Establish the current state of the organization**
- 2. Validation of current reality**

Break and Working Lunch 12:15

Part 3. 12:30

- 1. Forward vision exercise**
- 2. Identifying key leverage points and action**

Part 4. 2:00

- 1. Action planning**
- 2. Present plan overviews.**
- 3. Confirmation of strategic direction**

Part 5, 2:45 – 3:00

- 1. Closing comments – next steps**



AGENDA

**California Airports Council – Board Meeting
Thursday, July 21, 2011
Hyatt Vineyard Creek
170 Railroad Street
Santa Rosa, CA**

- 8:00 – 9:00 A.M. Continental Breakfast**
- 9:00 Approval of March 31, 2011 Minutes**
- 9:05 President's Report
Mr. Alan Murphy**
- 9:10 Federal Update
Christa Fornarotto, FAA**
- 9:35 Treasurer's Report
Mr. Rod Dinger and Mr. Jim Lites**
- 9:50 Executive Director's Report
Mr. Jim Lites**
- 10:00 – 10:20 Recap of Strategic Planning Session**
- 10:20 – 10:25 CAC and Social Media**
- 10:25 – 10:40 Legislative Committee Report**
 - **2011 CAC Legislation**
 - **AJR 3 (Dickinson) – AMT Resolution**
 - **SB 446 (Dutton) – ONT Airport Authority**
 - **SB 295 (Price) – Comm. College/CalTrans Facility Review**
 - **SB 1333 Clean-up**
 - **H.R. 1691**

10:40 – 10:50	Title 21 Committee Report
10:50 – 11:00	Other Committee Reports
11:00 – 11:15	Break
11:15 – 11:30	Other
11:30 – 11:40	Next Meeting <ul style="list-style-type: none">▪ November 3-4, 2011, Orange County, CA
11:40	Adjournment
11:45 – 1:00	Lunch



Hyatt Vineyard Creek Hotel & Spa
170 Railroad Street
Santa Rosa, CA 95401
Tel: (707) 284-1234
Fax: (707) 636-7130
vineyardcreek.hyatt.com

INFORMATION INVOICE

Payee Thella Bowens
3225 N Harbor Dr

Room No. 0254
Arrival 07-19-11
Departure 07-21-11
Page No. 1 of 2
Folio 19032
Invoice

Membership [REDACTED]
Bonus Code
Confirmation No. 5626220201
Group Name CA Airports Council, IN, \$84

Date	Description	Charges	Credits
07-19-11	Group Room	84.00	
07-19-11	Occupancy Tax	7.56	
07-19-11	Tourism Assessment	1.68	
07-19-11	Tourism Assessment - City	2.52	
07-19-11	CA Assessment Fee	0.20	
07-20-11	Group Room	84.00	
07-20-11	Occupancy Tax	7.56	
07-20-11	Tourism Assessment	1.68	
07-20-11	Tourism Assessment - City	2.52	
07-20-11	CA Assessment Fee	0.20	
07-21-11	Group Room Adj.	-84.00	
07-21-11	Occupancy Tax Adj.	-7.56	
07-21-11	Tourism Assessment Adj.	-1.68	
07-21-11	Tourism Assessment - City Adj.	-2.52	
07-21-11	CA Assessment Fee Adj.	-0.20	
07-21-11	American Express	XXXXXXXXXXXX1003	XX/XX
			95.96

\$95.96

due to
several
errors -
reversed
charge



Hyatt Vineyard Creek Hotel & Spa
170 Railroad Street
Santa Rosa, CA 95401
Tel: (707) 284-1234
Fax: (707) 636-7130
vineyardcreek.hyatt.com

INFORMATION INVOICE

Payee Thella Bowens
3225 N Harbor Dr

Room No. 0254
Arrival 07-19-11
Departure 07-21-11
Page No. 2 of 2
Folio 19032
Invoice

Membership [REDACTED]
Bonus Code [REDACTED]
Confirmation No. 5626220201
Group Name CA Airports Council, IN, \$84

Date	Description	Charges	Credits
Your Gold Passport account will be credited for this stay.			
Total		95.96	95.96
Balance			0.00

Guest Signature

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

We hope you enjoyed your stay with us!

If you have any questions regarding billing, please call (707) 284-1234 or email lisa.sibrian@hyatt.com.

We value your feedback. If you were not fully satisfied with your visit, please email us at: Keo.hombostel@hyatt.com or call (707) 284-1234

Please remit payment to:
Hyatt Vineyard Creek Hotel & Spa
Attn: Accounts Receivable
170 Railroad Street
Santa Rosa, CA 95401

**RECEIPTS FROM TRAVEL TO SANTA ROSA, CA FROM WASH. DC
JULY 19-21, 2011—THELLA F. BOWENS**

431235406888
THE OMLETTE EXPRESS
112 4TH ST
SANTA ROSA, CA 95401
(707) 323-1698

TERMINAL I.D.: 00438491
MERCHANT #: 070000045049001
VISA
XXXXXXXXXXXX6737 SRV: 3
SALE
BATCH: 000042 TKT: 25
DATE: JUL 20, 11 TIME: 09:20:49
AUTH NO: 002851

BASE \$13.77

TIP

TOTAL

TIP GUIDE
15%=\$2.06 20%=\$2.75 25%=\$3.44

THELLA F BOWENS

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

CUSTOMER COPY

See itemized receipt on
page 2 of 2
7/20/11 Breakfast

**Airport Northbay
Express Airporter**

Service Areas — Redwood Park — Petaluma — San Rafael

(707) 837-8700
5807 Old Redwood Hwy.
Santa Rosa, CA 95403

FARE PAID \$ 24.00

RECEIPT ONLY

7/19
Transportation
from San Fra
to Santa Ros
(hotel)

DATE	TABLE NO.	SERVICE NO.	
		2	279297
		Coffee	2.00
		1/2 white	
#	7	no mush	0.40
		add 2nd 1/2	
		onion	
		feba	
		Wen - english	
		Sub Total	
		Sub-Total	12.40
		Tax	1.37
		Total	13.77
DON TAYLOR'S OMELETTE EXPRESS		DATE	TOTAL

BUSINESS EXPENSE

BRET LOBNER

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

BUSINESS EXPENSE REIMBURSEMENT REPORT

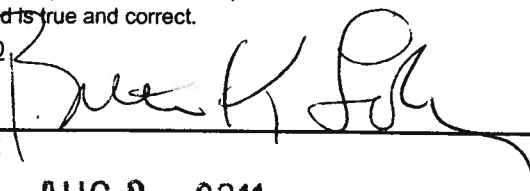
June / July

Period Covered

DATE	G/L Account	Description	AMOUNT
7/13/11	66290	Parking - Meeting with City Attorney, Jan Goldsmith re: Proposition 26/ CAL Constitution XIIC/Airport Taxicab Trip Fees/MTS	\$8.00
6/29/11	66290	Parking - Meeting with City Attorney, Jan Goldsmith and General Counsel of MTS Karen Landers re: Taxicab Trip Fees	\$8.00
TOTAL			\$16.00

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



NAME

AUG 3 2011

DATE

APPROVED: By the Executive
Committee at its August 22 2011

NAME

DATE

THIS IS YOUR RECEIPT

ACE PARKING
LOT 28 PARKING
TWO HOUR PERMIT

Meter# 00000028
Trans# 063281
Stall# 39
PURCHASE TIME:
2:51PM Jun 29 2011
PURCHASE PRICE:
\$ 8.00
Card: VISA 1444
Auth: 042670
PERMIT EXPIRES:
Jun29 2011
4:51PM Wed

THANKS FOR PARKING
QUESTIONS? CALL
800-925-7275

THIS IS YOUR RECEIPT

Parking Receipt

Meeting at City Hall
with City Atty
Jan Goldsmith and
General Counsel of MTS
Karen Landers

Subject: Taxicab
Trip Fees

Date: June 29, 2011

BRETON K. Lobner
BK Lobner

PARKING RECEIPT: \$8

SAN DIEGO CITY HALL

MEETING WITH CITY ATTORNEY
JAN GOLDSMITH, DEP. CITY ATTY
RYAN KOHUT AND PAUL ROBINSON

SUBJECT: PROPOSITION 26/ CAL
CONSTITUTION XIIC/ AIRPORT TAXICAB
TRIP FEES/MTS

DATE: JULY 13, 2011 AT 2PM

BRETTON LOBNER
Rachel Foley

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT

ACE PARKING
LOT 28 PARKING
TWO HOUR PERMIT

Meter# 00000028
Trans# 064297
Stall# 04
PURCHASE TIME:
1:45PM Jul 14 2011
PURCHASE PRICE:
\$ 8.00
Card: VISA 1444
Auth: 067330
PERMIT EXPIRES:

Jul 14 2011
3:45PM Thu

THANKS FOR PARKING
QUESTIONS? CALL
800-925-7275

THIS IS YOUR RECEIPT

THIS IS YOUR RECEIPT