

SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

Meeting Date: SEPTEMBER 2, 2010

## Subject:

Business and Travel Expense Reimbursement Reports for Board Members, President/CEO, Chief Auditor and General Counsel When Attending Conferences, Meetings, and Training at the Expense of The Authority

### **Recommendation:**

For information only.

### **Background/Justification:**

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

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

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

### **Fiscal Impact:**

Funds for Business and Travel expenses are included in the FY 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 REQUESTS**

# **THELLA BOWENS**

#### **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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

1. TRAVE	LER:				
Travelers	Name: Thella Bowe	ns		_ Dept: _	¥6
Position:	Board Member	President/CEO	F Gen. Counsel		Chief Auditor
	All other Authority	employees (does not rea	quire executive commit	tee adminis	trator approval)
2. DATE C	OF REQUEST:7/14/10	PLANNED DATE OF	DEPARTURE/RETURN:	9/24/10	/ 9/30/10
	NATIONS/PURPOSE (Prov er as necessary):	vide detailed explanation	as to the purpose of t	he trip- cor	ntinue on extra sheets
Destin	ation: Pittsburgh, PA		urpose: ACI-NA Annua ommittee, Board and C		· · · · · · · · · · · · · · · · · · ·
Explar	nation:			<u> </u>	
	CTED OUT-OF-TOWN TR				
	TRANSPORTATION COS				
<i>.</i>	AIRFARE		\$	400	
	OTHER TRANSPORT	ATION (Taxi, Train, Ca	Rental) \$	100	•

## B. LODGING

- C. MEALS
- D. SEMINAR AND CONFERENCE FEES
- E. ENTERTAINMENT (If applicable)
- F. OTHER INCIDENTAL EXPENSES
  - TOTAL PROJECTED TRAVEL EXPENSE

\$	400
\$	100
\$	1200
\$ \$ \$	250
	795
\$	
\$	
\$	2745

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

Authority's business. Travelers Signature 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

(Please leave blank. Whoever clerk's the meeting will insert their name and title.) by the Executive Committee at its

hereby certify that this document was approved

meeting.

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

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1. TRAVELER: Travelers Name:	Thella Bowens				Dept:	Executive Office/#6
E Bo	ard Member	President/CEO	l Ger	n. Counsel	Dopt.	Chief Auditor
Position:	other Authority e	mployees (does not re	aulire execu	itive committe	e admin	istrator approval)
2. DATE OF REQUES	-	PLANNED DATE OF				
of paper as necess Destination: Wash	ary):	F	Purpose: Fi		on Advis	ontinue on extra sheets sory Committee
Explanation:						
AIRFA     OTHE     B. LODGING     C. MEALS     D. SEMINAR     E. ENTERTA	RTATION COS RE R TRANSPORT	rS: ATION (Taxi, Train, Ca ENCE FEES icable)	ar Rental)	୫ ୫ ୫ ୫ ୫ ୫ ୫ ୫ ୫ ୫	350 100 300 50	0
TOTA	AL PROJECTED	RAVEL EXPENSE				d out-of-town travel and nd directly related to the
Authority's business. Travelers Signature:			<u>مرکم</u>	Dat	_	2. 27.10
Clerk's signature is re	quired).		dministrato	r is the Execu	tive Co	mmittee, the Authority
<ol> <li>The concerne Authority's bu</li> <li>The concerne</li> </ol>	entiously reviewe d out-of-town tra siness and reaso d out-of-town tra blicies <u>3.30</u> and ß	d the above out-of-to vel and all identified e mable in comparison vel and all identified e	expenses ar to the antici	e necessary for pated benefit	or the a to the A	Nuthority. nents and intent of
AUTHORITY CLE	RK CERTIFIC	ATION ON BEHA	LF OF E	XECUTIVE	COM	MITTEE
I, (Please leave blank. Who by the Executive Con	mmittee at its	ting will insert their name a Leave blank and we will in	nd title.)	meeti		document was approved

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1. TRAVELER: Travelers Name:	Thella Bowens				Dept:	Execut	ive Office / #6
Position:	Board Member	President/CEC		Gen. Counsel		Г	Chief Auditor
Г	All other Authority en	nployees (does not	require exe	cutive committ	ee admir	nistrator a	approval)
2. DATE OF REQU	EST: 8/19/10	PLANNED DATE	OF DEPARTI	JRE/RETURN:	9/22/1	.0 /	9/23/10
3. DESTINATIONS of paper as nece <u>Destination: Nec</u> Explanation:	a state a	e detailed explana		e purpose of th			
4. PROJECTED O		/EL EXPENSES					

- A. TRANSPORTATION COSTS:

AIRFARE	\$ 320
OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$ 100
B. LODGING	\$ 450
C. MEALS	\$ 50
D. SEMINAR AND CONFERENCE FEES	\$
E. ENTERTAINMENT (If applicable)	\$
F. OTHER INCIDENTAL EXPENSES	\$ 
TOTAL PROJECTED TRAVEL EXPENSE	\$ 920

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: /	

ority's business.	tilla	I Doulens		19 aug 2010
velers Signature:	( MISA/G	J Laurer	Date:	19 ang au
	man			. 0

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:

## AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

, hereby certify that this document was approved

Date:

(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.)

#### **GENERAL INSTRUCTIONS:**

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1. TRAVELE Travelers N		Thella Bower	<b>IS</b>			Dept:	Exec	utive Office / #6
Position:	Г Во	ard Member	President/CE	0 F	Gen. Counsel		Г	Chief Auditor
		other Authority	employees (does no	t require ex	ecutive committ	ee admii	nistrato	r approval)
2. DATE OF	REQUES	T: 8/19/10	PLANNED DATE	OF DEPART	URE/RETURN:	_10/17	/10	/ 10/19/10
3. DESTINA of paper a		•	ide detailed explana	ation as to t	he purpose of th	ne trip- c	ontinu	e on extra sheets
Destinat	ion: San A	ntonio		Purpose: Meeting	ACI-NA Board	and Stra	ategic F	Planning
Explanat	tion:							

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

A. TRANSPORTATION COSTS: 400 AIRFARE 50 OTHER TRANSPORTATION (Taxi, Train, Car Rental) \$ **B. LODGING** \$ 300 \$ C. MEALS 100 D. SEMINAR AND CONFERENCE FEES \$ E. ENTERTAINMENT (If applicable) \$ F. OTHER INCIDENTAL EXPENSES \$ 850 TOTAL PROJECTED TRAVEL EXPENSE \$

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Authority's business.	Tilla-	NO 1100
Travelers Signature:	( Maller	KINN/16
		-

Date:

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Administrator's Signature:

Date:

## AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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, hereby certify that this document was approved

by the Executive Committee at its

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

r.

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1. TRAVELE	ER:							
Travelers N	Name:	Thella Bowe	ens			Dept:	Executiv	ve Office / #6
Position:	Г	Board Member	President/CEO	☐ Ger	n. Counsel		Г	Chief Auditor
	Г	All other Authority	employees (does not	require exect	utive commit	tee admir	nistrator a	pproval)
2. DATE OF	REQU	JEST: 8/19/10	PLANNED DATE C	F DEPARTUR	RE/RETURN:	10/28/	'10 <i>I</i>	11/1/10
3. DESTIN/ of paper Destina	as nec	essary):	vide detailed explanat		CI World Bo			on extra sheets 7 & Carribbean
Explana	ation:							
		FARE	RAVEL EXPENSES STS: TATION (Taxi, Train, (	Car Rental)	<u>\$</u> \$	<u> </u>		

	Ψ	000
OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	100
B. LODGING	\$	1500
C. MEALS	\$	200
D. SEMINAR AND CONFERENCE FEES	\$	900
E. ENTERTAINMENT (If applicable)	\$	
F. OTHER INCIDENTAL EXPENSES	\$	
TOTAL PROJECTED TRAVEL EXPENSE	\$	3300

TOTAL PROJECTED TRAVEL EXPENSE

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

Authority's business.	At all	Asha Ilma
Travelers Signature:	Stella	4 Denler

Date:

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Administrator's Signature:

Date:

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(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.)

Ω.

# **ROBERT GLEASON**

#### **GENERAL INSTRUCTIONS:**

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#### 1. TRAVELER:

Travelers Nam	e:	Robert H. Gl	eason		Dept:	Board Chair/02
Position:	2	Board Member	President/CEO	F Gen. Counsel		Chief Auditor
	Г	All other Authority	employees (does not re	quire executive committe	ee admir	nistrator approval)
2. DATE OF RE	QL	IEST: 8/23/10	PLANNED DATE OF	DEPARTURE/RETURN:	9/26/1	0 / 9/30/10

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: San Diego Mission to Washington, DC
Explanation: One Region/One Voice sponsored by S	San Diego Regional Chamber of Commerce

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

A. TRANSPORTATION COSTS:

AIRFARE	\$	570.00
OTHER TRANSPORTATION (Taxi, Train, Car Rental)	\$	200.00
B. LODGING	\$	930.00
C. MEALS	\$	200.00
D. SEMINAR AND CONFERENCE FEES	\$	1199.00
E. ENTERTAINMENT (If applicable)	\$	
F. OTHER INCIDENTAL EXPENSES	\$	50.00
TOTAL PROJECTED TRAVEL EXPENSE	\$	3149.00
	8. <u></u>	- 1//9

**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 <u>3.30</u> and <u>3.40</u> and are reasonable and directly related to the

Authority's business. Travelers Signature

## CERTIFICATION BY ADMIN, ATOR (Where Administrator is the Executive Committee, the Authority

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Administrator's Signature:

Date:

# AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

, 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.

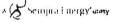
(Leave blank and we will insert the meeting date.)



#### Sponsored By:







McKenna Long & Aldridge...

## One Regi<mark>on</mark> One Voi**ce**



Washington DC September 26-29



#### Join Delegation Leaders:

Ruben Barrales President & CEO San Diego Regional Chamber of Commerce

Tom Wornham Chairman San Diego Regional Chamber of Commerce Wells Fargo

Ben Haddad 2010 Mission Chair SAIC

#### **Delegation News**

The regional business community can make an impact on legislation and regulation, but first we must be heard! Join our growing alliance of business and civic leaders on our Fourth Annual One Region One Voice Washington D.C. Delegation mission to our nation's capital. Participants will have the opportunity to engage high-level federal officials and Washington insiders to advocate, promote and align support for key regional priorities.

Registration includes participation and input in a <u>Policy Team</u> of choice, opening reception, welcome breakfast with keynote, two group breakfasts, and two additional hosted receptions. You'll experience a host of value-added benefits...

- · Identify hot topics & issues important to your industry
- · Scheduled meetings & functions with key federal officials
- · Interact and connect with peers who share your regional priorities
- And much more

## X Delegation Highlights Local Elected Officials Joining the Delegation: Mayor Jerry Sanders, City of San Diego Councilmember Kevin Faulconer, City of San Diego Jim Janney, Mayor of Imperial Beach · Gastón Luken, Member of Congress, Mexico Check back for updates on confirmed keynote speakers, participating elected officials and delegation news **Mission** Priorities Resources, including Water and Energy Transportation & Infrastructure Border Related Issues, including Immigration Healthcare Housing Military/Homeland Security Education / Workforce Technology: Biotech, Cyber Security & Clean Technology

#### **Delegation Partners**









# **PAUL ROBINSON**

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1. TRAVELER:	
Travelers Name: Paul Robinson	Dept: Board/02
Position:	nsel <b>F</b> Chief Auditor
All other Authority employees (does not require executive control of the security of the se	ommittee administrator approval)
2. DATE OF REQUEST: 8/23/10 PLANNED DATE OF DEPARTURE/RET	URN: <u>9/26/10 / 9/29/10</u>
	go Mission to Washington, DC
Explanation: One Region/One Voice sponsored by San Diego Regional C	namber of Commerce
<ul> <li>4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES <ul> <li>A. TRANSPORTATION COSTS:</li> <li>AIRFARE</li> <li>OTHER TRANSPORTATION (Taxi, Train, Car Rental)</li> </ul> </li> <li>B. LODGING <ul> <li>C. MEALS</li> <li>D. SEMINAR AND CONFERENCE FEES</li> <li>E. ENTERTAINMENT (If applicable)</li> <li>F. OTHER INCIDENTAL EXPENSES</li> <li>\$</li> </ul> </li> </ul>	570.00 200.00 930.00 200.00 1199.00 50.00 3149.00
<b><u>CERTIFICATION BY TRAVELER</u></b> By my signature below, I certify that	
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: Rolf B. Rolf B. Rolf B.	8/13/10
CERTIFICATION BY ADMINISTRATOR (Where Administrator is the	Executive Committee, the Authority
Clerk's signature is required).	
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Administrator's Signature:

Date:

## AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

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\_ , hereby certify that this document was approved

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meeting.

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



## **Delegation News**

From Science to Solutions

Sempla Energy' atomy

McKenna Long

& Aldridge...

The regional business community can make an impact on legislation and regulation, but first we must be heard! Join our growing alliance of business and civic leaders on our Fourth Annual One Region One Voice Washington D.C. Delegation mission to our nation's capital. Participants will have the opportunity to engage high-level federal officials and Washington insiders to advocate, promote and align support for key regional priorities.

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- · Identify hot topics & issues important to your industry
- · Scheduled meetings & functions with key federal officials
- · Interact and connect with peers who share your regional priorities
- And much more



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CONNECT

# **EXPENSE REPORTS**

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# **THELLA BOWENS**

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

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

TRAVELER:	Thelia Bowens	0	EPT. NAME & NO.	Executive Office / #6	<u> </u>
DEPARTURE DATE:	6/18/2010	RETURN DATE:	6/20/2010	REPORT DUE:	7/20/10

DESTINATION: New Orleans

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				Employe	e Expens	189		
		(Prepaid by Authority)	SUNDAY 6/20/10	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY 6/18/10	SATURDAY 6/19/10	TOTALS
Air Fare, R	allroad, Bus (attach copy of itinerary w/charges)	385.80			and a large					0.00
Conference	Fees (provide copy of flyen/registration expenses)									0.00
Rental Car										0.00
Gas and Oi	P									0.00
Garage/Pa	rking*						i i			0.00
Mlieage - a	ttach mileage form*									0.00
Taxi and/or	Shuttle Fare (include tips pd.)*		50.00					50.00		100.00
Hotel*								161.20	161.20	322.40
Telephone,	Internet and Fax*									0.00
Laundry*										0.00
Tips - sepa	rately paid (maids, bellhop, other hotel srvs.)									0.00
Meals	Breakfest*								13.17	13.17
(include	Lunch*									0.00
tips pd.)	Dinner*		14.05					99.50	3.06	116.61
	Other Meals*		2.91					1-1		2.91
Alcohol is a	non-reinthursable expense	<b>感染</b> に住,群			1.		54.1			
Hospitality	1.									0.00
Miscellane										0.00
						T				0.00
								a subscription		0.00
*Provide de	etailed receipts									0.00
	Total Expenses prepaid by Authority	385.80	66.96	0.00	0.00	0.00	0.00	310.70	177.43	555.09
Explanatio	n			Total Exp	enses Pr	epaid by A	uthority		I	385.80
-	r Included Bob Silvas (SDCRAA)		Total Expenses Pd. by Employee (including cash advances) Grand Trip Total					555.09 940.89		
					Contraction of the	R. AL. K.M.	STRANGER	E Partie Partie	ALL PROPERTY OF	840.08
				Construction of the local division of the lo	the second s	e (altach co	Statistics of the local division of the loca	y dig	1211247523	000
					Statement and the second	epaid by A	Station of the local division of the local d			385.80
2 Prepare C	es and business affiliations of any persons whose meals v Theck Request raonal check payable to SDCRAA	vere paid by trav	aler.	Due Aut	hority (ne	itive amou gative amo	ount) <sup>3</sup>		the emount	555.09

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

Travel	and Lodging Expense	Reimburseme	nt Policy 3.40	Business Expense Reimbursement	Pollcy 3.30	
Prepared By:	ala	AL	Dianne Berg	Ext.:		2445
Traveler Signature:	All	Vasal	BristType Name	Date:		
Approved By:	9	Uthe	al	- Date:	7.	13.10

AUTHORITY CLERK CERTIFICATION ON BEHALF-OP 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.)

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

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

#### **GENERAL INSTRUCTIONS:**

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- B. Personnel traveling at Authority expense shall, consistent with the provisions of Policies 3.30 and 3.40, use the most economical means available to affect the travel.
- 1. TRAVELER: Name: Thella Bowens Dept: 6
  - Position: 
    Board Member X President/CEO 
    Gen. Counsel
    Chief Auditor

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

2. DATE OF REQUEST: 2/16/10 PLANNED DATE OF DEPARTURE/RETURN: 6/19/10 / 6/20/10.

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

Destination: New Orleans, LA Purpose: 2010 Airport Business Diversity Conference, Panel Member – "Airports in Year 2030 – Leaders' Visions and Predictions for Airports Well Beyond Today and Tomorrow".

#### 4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES:

\$ 300
\$ 70
\$ 150
\$ 50
\$ 
\$ 
\$ 
\$ 570
\$ \$ \$ \$ \$ <u> </u>     4

**<u>CERTIFICATION BY TRAVELER</u>** By my signature below, I certify that the above listed out-of-town travel and associated expenses conform to the Authority's Belictes 8.30 and 3.40 and are reasonable and directly related to the Authority's business. Traveler's Signature:

**<u>CERTIFICATION BY ADMINISTRATOR</u>** (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, Jony R Russell, Anthony Clerk, hereby certify the	hat this document was approved
--	--------------------------------

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

## **Berg Dianne**

From: Sent: To: Subject: Attachments:	Scott Mackerley [smackerl Thursday, June 03, 2010 1 Berg Dianne; Harris Matt; Travel Itinerary 18JUN SA 50390397.PDF; 50390397	:58 PM SMACKERLEY@TRAV N BOWENS	/ELTRUST.COM
BOWENS/THELLA	DEPT 6	03Jun10	01:58pm
<pre>INVOI *******TICKE THIS IS AN E-TI A GOVERNMENT IS THIS TICKET IS THE FLIGHTS BOO OR CANCELLED B IT MAY HAVE NO YOUR OUTBOUND I ************************************</pre>	rlines Flight# 1588 5 CA, USA 18Jun10 Intercontinen 18Jun10 unch Equip: Boeing 737 MAL 2	G DOCUMENT ONS********* ED AT CHECK IN ST BE USED FOR ION IS NOT USED YOUR FLIGHTS LTRUST BEFORE CESSARY. ************************************	*** JRE ***
Arrive - TERMIN Continental Air		5/THELLA	
** AISLE SEAT ( Flight Duration Class of Servio	a: 3 hour(s) and 17 min	nutes	
Air Continental Air From: Houston I To: New Orlea	ntercontinen 18Jun10	08:22pm Friday	, ,
Depart - TERMIN Arrive -	AL C	1	

Continental Airlines locator: A2BBWC UA Frequent Flyer# CONSCIENCER-BOWENS/THELLA \*\* AISLE SEAT CONFIRMED \*\* Flight Duration: 1 hour(s) and 12 minutes Class of Service: Coach 20Jun10 05:32pm Sunday Continental Airlines Air Flight# 129 Class:E Seat:9C From: New Orleans LA, USA 20Jun10 05:32pm Sunday Houston Intercontinen 20Jun10 06:40pm Sunday To: Meal: None Equip: Boeing 737-900 Jet Status: Confirmed Stops: 0 Depart -Arrive - TERMINAL C Continental Airlines locator: A2BBWC UA Frequent Flyer# CAREADON BOWENS/THELLA \*\* AISLE SEAT CONFIRMED \*\* Flight Duration: 1 hour(s) and 08 minutes Class of Service: Coach 20Jun10 07:30pm Sunday Air Continental Airlines Flight# 417 Class:E Seat:8C From: Houston Intercontinen 20Jun10 07:30pm Sunday San Diego CA, USA 20Jun10 08:44pm Sunday To: Meal: None Equip: Boeing 737-800 Jet Status: Confirmed Stops: 0 Depart - TERMINAL C Arrive - TERMINAL 2 Continental Airlines locator: A2BBWC UA Frequent Flyer# General-BOWENS/THELLA \*\* AISLE SEAT CONFIRMED \*\* Flight Duration: 3 hour(s) and 14 minutes Class of Service: Coach 17Dec10 Friday 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 -S7NSØ 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#:7892955199	Ticket Base Fare:	293.94
Invoice#:1175118	Ticket Tax:	61.86
	Total Ticket Amount:	355.80

Electronic: YES

SERVICE FEE DOCUMENT #: 0524500351 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY AND NOTIFY YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

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\*\*\*ResFAX Message ID 692474\*\*\* \*\*\*ResFAX Itinerary E-Mail\*\*\*

WE'RE JAZZED YOU'RE HERE!
CAB COMPANY VETERANS CAD GO,
TELEPHONE # <u>504-451-9306</u>
PASSENGER RECEIPT, TAXI FARE
DATE <u>D6/18/10,</u>
Amount
Other Charges\$
Total
Driver's Name Cell
Cab Number 1266 NEW ORLEANS

HOTE	L - AIRPORT	
Telephone #_		-

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## SHERATON NEW ORLEANS HOTEL 500 Canal St New Orleans, LA 70130-2306 t - 504 525 2500 f - 504 595 5552



GUEST CLIENT 2517 ROOM 140.00 Thella Bowens RATE 1 # PERS. 2722271 Po Box 82776 А FOLIO San Dieço, CA 92138-2776 1 PAGE USA 18-JUN-10 20:03 . ARRIVE 20-JUN-10 14:52 DEPART AIF18A AX PAYMENT

2

TRAVEL AGENT CHARGE TO

DATE	REFERENCE	DESCRIPTION	RGES / CREDITS
18-JUN-10	RT2517	Room Chrg Grp Association	140.00)
18-JUN-10	RT2517	Room Tax	18.20 \$ 161.20
18-JUN-10	RT2517	Occupancy/Tourism Tax	3.00,
19-JUN-10	S299		
19-JUN-10	5299		
19-JUN-10	RI2517	Room Chrg Grp Association	140.00
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19-JUN-10	RT2517	Occupancy/Tourism Tax	3.00
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20-JUN-10			492.21-
	***For Authorization	Purposes Only***	
	Auth Date Code	Authorized	

Auth Date Code Authorize \*\* continued on the next page \*\*

Thella	Bowens		ROOM	DEPART	AGENT
JULIC	2922271	18-JUN-10	2517	20-JUN-10	JADEPAY

SIGNATURE 1 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.

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SHERATON NEW ORLEANS HOTEL 500 Canal St New Orleans. LA 70130-2306 t - 504 525 2500 f - 504 595 5552 aton GUEST CLIENT TRAVEL AGENT / CHARGE TO 2517 ROOM Thella Bowens 140.00 RATE 1 # PERS. 2722271 Po Box 82776 A FOLIO San Diego, CA 92138-2776 2 PAGE 20:03 18-JUN-10 USA ARRIVE 20-JUN-10 14:52 DEPART AIF18A PAYMENT ļ 18-JUN-10 420.00 105465 50.00 122994 19-JUN-10 0.00 20-JUN-10 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

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Date	Rn/lax	Food/Bev	Telephone	Parking	Other	<b>Fota</b> l	Paymenc
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19-JUN-10	161.20	27.64	0.00	0.00	109.88	298.72	0.00
20-JUN-10	0.00	20.33	0.00	0.00	11.99	32.32	492.24 -
Total	322.40	47.97	0.00	0.00	121.87	492.24	492.24-

Thank you for choosing Starwood Hotels. We look forward to welcoming you back soon! \*\* continued on the next page \*\*

Thella	Bowens			ROOM	DEPART	AGENT
FOLIO	2722271	18-JUN-10	·	2517	20-JUN-10	JADEPAY

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SIGNATURE 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.



Check out the Link@Sheraton experienced with Microsoft Join us at the Link, cur connectivity hub in the lobby, to surf the Web, watch a game with friends, borrow a magazine or newspaper or even print your boarding pass. Learn more at www.sheraton.com/link

i

As a Starwood Preferred Guest you have earned at least 668 Starpoints for this visit A41425053629

Thella	Bowens		ROOM	DEPART	AGENT
FOLIO	2722271	18-JUN-10	2517	20-JUN-10	JADEPAY

SIGNATURE 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.

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SOCRAA STOR - Bob Silves

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> 25% OFF NEXT FOOD PURCHASE Simply go to www.sbarrofeedback.com Fill out our short survey. Your opinion matters to us. THANK YOU!

6/20 Other

(S) Sheraton

### SHERATON

Starbuck's 500 CANAL STREET NEW ORLEANS, LA 70130 504-525-2500

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Total Talk<sup>1</sup>-05

We always welcome your comments.

riease call us at 877-325-8777 Or or j1:

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From:Bowens ThellaSent:Monday, March 15, 2010 7:10 PMTo:Berg DianneSubject:FW: Special Invitation from Don O'Bannon for Airport Director Roundtable and LuncheonAttachments:2010 Conference Brochure Small.pdf

From: Gene Roth [mailto:gene.roth@amac-org.com]
Sent: Wednesday, March 10, 2010 7:26 AM
To: Gene Roth; Mary Winston
Cc: O'Bannon, Don
Subject: Special Invitation from Don O'Bannon for Airport Director Roundtable and Luncheon

March 10, 2010

**Dear Fellow Airport Executive:** 

Please join us at the 26TH Annual AMAC/FAA Airport Business Diversity Conference being held in New Orleans, Louisiana, June 19 – 22, 2010 at the Sheraton New Orleans Hotel on Canal Street. We are excited to host this gathering of airport, government and business professionals.

We would like to personally invite you to the Airport Executives Roundtable on Sunday, June 20, 2010, from 1:00 p.m. – 3:00 p.m. that will take place at the Sheraton New Orleans Hotel. This roundtable is "invitation only" and provides a relaxed atmosphere where you can meet with your peers to discuss issues that are common to airport executives.

U.S. airports are the economic engines of the communities they serve and continue to be a source of business opportunities for small, minority and women-owned businesses. The luncheon program will include presentations on the significance of including Disadvantaged Business Enterprise (DBE) type goals on PFC funded contracts and the impact of the current economic climate on the success and growth of small, minority and women-owned concession businesses.

Both topics are timely and will provide you with useful information to take back to your airport to share with staff that is directly engaged with ensuring access to business opportunities at your airport.

In addition, we will be hosting a networking luncheon for airport directors and commissioners from across the country from 12:00 p.m. - 1:00 p.m. just prior to the roundtable.

Please RSVP with Mary Winston at 703-414-2622 ext 4. We look forward to welcoming you to New Orleans.

Sincerely,

Don T. O'Bannon Board Chairman AMACESP

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

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

TRAVELE	R:	Theila Bowens	·····	. r	DEPT. NAM	IE & NO.		Exe	cutive Of	fice / #6	
DEPARTU	JRE DATE:	6/9/2010	RETUR	N DATE:		6/11/2010	2	REPOR	T DUE:	7/	11/10
DESTINAT	FION:	Sonoma, ÇA		-							
expenses a	and approval	hority Travel and Lodging Expense Re us. Please attach all required supporti ms should be explained in the space p	ing documenta	ation. All n							
			Authority Expenses				Employe	e Expens	08		
			(Prepaid by Authority)	SUNDAY	MONDAY	TUESDAY	WECHESOAY 6/9/10	THURSDAY 6/10/10	FREDAY 6/11/10	SATURDAY	TOTALS
Air Fare, F	tailroad, Bus	(attach copy of filnerary w/charges)	327.40								0.00
		ride copy of flyer/registration expenses)									0.00
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Gas and O	and the second se								16.55		16.55
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Mileage - I	attach mileag	te form*									0.00
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Hotel*							193.95	193.95			387.90
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		Total Expenses prepaid by Authority	327,40	0.00	0.00	0.00	228.65	193.95	163.81	0.00	586.41
Explanatio	on:				Total Expenses Prepaid by Authority					327.40	
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1 Prepare (	<b>Check Request</b>	ess affiliations of any persons whose meals w it payable to SDCRAA	vere paid by travi	ster.	Due Aut	hority (ne	live amount gative amount this report i	unt) <sup>a</sup>			586.41

I as traveler or administrator acknowledge that I have read, understand and agree to Authority policies 3.40 - Travel and Lodging Expense Reimbursement Policy<sup>4</sup> and 3.30 - Businèss Expense Reimbursement Policy<sup>8</sup> and that any purchases/claims that are not allowed will be my responsibility. I further certify that this report of travel expenses were incurred in connection with official Authority business and is true and correct.

Travel and Lodging Expense Reimburgement Policy 3.40

Business Expense Reimbursement Policy 3.30

Ext:

Date:

Date:

O

riepered by.	
Traveler Signature	:

Approved By:

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

The association of the second second

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.

Dianne Berg

HtThelia/Thelia 2010/TraveN8-9, ACI-NA Summer Board Mig. Sonoma/Travel Expense Report, ACI Summer Brd Mig, Sonome

### 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel:

### 1. TRAVELER:

Travelers Name:		hella Bowens				Dept:	6		
Position:	F Board	Member	President/CEC		ien. Counsel		1	Chief	Auditor
	C All oth	er Authority er	mployees (does not	require exe	ecutive commit	tee admir	histrator	appro	oval)
2. DATE OF F	REQUEST:	3/18/10	PLANNED DATE C	F DEPART	JRE/RETURN:	6/9/10	)	/ 6/1	1/10
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CERTIFICA	TION BY	TRAVELER	By my signature	below, I cer	tify that the ab	ove listed	d out-of	-town	travel and

**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 <u>3.30</u> and <u>3.40</u> and are reasonable and directly related to the

Authority's business. Travelers Signature:

\_\_\_\_ Date: <u>23 Mar 200</u>

**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

(Please leave blank. Whoever clerk's the n	tutharity (ler K	, hereby certify that this document was approved
(Please leave blank. Whoever clerk's the r	meeting will insert their name and title.)	
by the Executive Committee at its	4126/10	meeting.

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

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From: Sent: To: Subject: Attachments:	Scott Mackerley [smackerley@traveltrust.com] Friday, May 28, 2010 5:39 PM Berg Dianne; Harris Matt; SMACKERLEY@TRAVELTRUST.COM Travel Itinerary 09JUN SAN BOWENS 63562927.PDF; 63562927.HTM					
BOWENS/THELLA	DEPT 6	28May10 05:39pm				
INVOIO *******TICKE THIS IS AN E-T A GOVERNMENT IS THIS TICKET IS THE FLIGHTS BOO OR CANCELLED B IT MAY HAVE NO YOUR OUTBOUND I ************************************	TLESS TRAVEL INSTRUC ICKET RESERVATION. SSUED PHOTO ID IS NE NON-REFUNDABLE AND OKED. IF THE RESERV EFORE THE DEPARTURE VALUE. CONTACT TRA FLIGHT IF CHANGE IS ************************************	TING DOCUMENT CTIONS******** EEDED AT CHECK IN MUST BE USED FOR VATION IS NOT USED OF YOUR FLIGHTS AVELTRUST BEFORE NECESSARY. ************************************				
To: Sacrament	ines Flight# 140 5 CA, USA 09Jun1 to CA, USA 09Jun1	10 05:20pm Wednesday				
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Flight Duration Class of Servio	n: 1 hour(s) and 30 m ce: Coach	minutes				
Meal: None Equi Stops: 0	ines Flight# 436 to CA, USA 11Jun10 to CA, USA 11Jun10 p: Boeing 737-300 Jo	0 06:15pm Friday				
Depart - TERMIN Arrive - TERMIN Southwest Airli						

1

Flight Duration: 1 hour(s) and 25 minutes Class of Service: Coach

08Dec10 Wednesday Other San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS-A

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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 -S7NSØ 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

Ticket#:2103065761	Ticket Base Fare:	297.40
TICKE(#.2103003/01	TICKEL Dase Tale.	237.40
Invoice#:1174995	Ticket Tax:	0.00
	Total Ticket Amount:	297.40

Electronic: YES

POLIENC THELLA

SERVICE FEE DOCUMENT #: 0524369874 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

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IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY AND NOTIFY YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

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\*\*\*ResFAX Message ID 691568\*\*\*
\*\*\*ResFAX Itinerary E-Mail\*\*\*

THE C LODGE guest folio

1325 Broadway at Leveroni & Napa Roads Sonoma, CA 95476 p: 707 935 6600 renaissancehotels.com/sfols

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AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO: DBERG@SAN.ORG SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

Thank you for staying with Marriott! Your Marriott Rewards points / miles earned for this stay will be credited to your account and will appear on your next statement. For account activity: 801-468-4000 or www.Marriott.com.

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE :8%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.



Signature X

CARNEROS BISTRO & WINE BAR THE LODGE AT SONOMA RUSS 6/9-DINNER 2581 . 103/1 GS 09JUN'10 9:54PM 1 PCRK 27.00 41.00 27sub-Total: 9% 3.69 243 Tax 1:59 TOTAL DUE: \$44.69 2143 ATUITY \$ 17.8% S 5.27 34.70 TAL \$\_\_\_\_\_ JM NUMBER\_\_\_\_\_ INT LAST NAME\_\_\_\_\_ SIGNATURE\_\_\_\_\_ Bis On Enceptions . .

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From: Sent: To: Subject: Bowens Thella Tuesday, April 20, 2010 7:20 PM Berg Dianne FW: 2010 Summer Board Meeting-Room Reservations- CORRECT Phone Number

**From:** Airports Council International-North America [mailto:meetings@aci-na.org] **Sent:** Wednesday, March 17, 2010 11:21 AM **To:** Bowens Thella **Subject:** 2010 Summer Board Meeting-Room Reservations- CORRECT Phone Number



On behalf of Airports Council International - North America and our host airport Sacramento International Airport, I am delighted to extend an invitation to you to attend the ACI-NA 2010 Summer Board of Directors Meeting at the Lodge at Sonoma.

At this meeting, in addition to our normal business, we will discuss a number of key policy issues and conduct a "strategic discussion" to examine the state of our organization and ensure we are well positioned to serve the industry in the years ahead. We will be inviting past and former chairs of ACI-NA, and AOCI, to the meeting for this discussion.

We invite you to join us to share in the opportunities for networking, interaction and discussion in addition to the business meetings. A board book will be sent to you prior to the meeting.

I look forward to welcoming you to the ACI-NA Summer Board Meeting, June 10-11, 2010.

Sincerely,

Greg Principato, President

### WHO SHOULD ATTEND THIS INVITATION ONLY EVENT

ACI-NA Board of Directors ACI-NA and AOCI Past Chairs and Former chairs ACI-NA Goals and Programs Committee members

Please RSVP to meetings@aci-na.org or call Mary Moyo at (202) 293-8500 x3034 no later than May 14, 2010.

### PRELIMNARY SCHEDULE OF EVENTS

<u>Thursday, June 10, 201(</u>	2	<u>Friday, June 11, 2010</u>	
9:00 am - 12:00 pm	Executive Committee	7:30 am - 8:30 am	Buffet Breakfast
12:00 pm - 1:30 pm	Board Luncheon	8:30 am - 12:00 pm	Strategic Discussion

1:30 pm - 5:00 pm Evening Board of Directors Host Airport Event

### VENUE

<u>The Lodge at Sonoma</u> 1325 Broadway at Leveroni & Napa Roads Sonoma, CA 95476 (707) 935-6600

### HOUSING RESERVATIONS

Please call the Lodge at Sonoma Central Reservations at (866) 263-0758 or call the hotel directly at (707) 935-6600 and reference Airports Council International – North America to secure the special rates of \$176 + tax/night. Please note that all reservations must be made by Wednesday, May 19, 2010. (*Rooms will be available Tuesday, June 6 - Saturday, June 12, 2010, for those wishing to extend their stay*)

### **TRAVEL/AREA INFORMATION**

\* Convention & Vistiors Bureau

\* Sonoma County - What to do?

### **Area Airports**

### Sacramento International Airport - SMF

- Phone: 1 916 929 5411
- Hotel direction: 72 miles SW

• Driving Directions: Go South on Airport Blvd. for 1.5 miles. Bear right at sign reading 'I-5 N to Woodland' and go approx. 8 miles. Bear right on access road at sign reading 'Main St. to Woodland and CA-113 S' and go Northwest for 0.3 miles. Turn left on E Main St. and go West for 0.4 miles. Turn left on ramp at sign reading 'CA-113 to Davis' and continue South on CA-113, Vic Fazio Hwy for approx. 10 miles. Exit CA-113 via ramp to I-80. Continue on I-80 West for approx. 30 miles and exit via ramp at sign reading 'CA-12 to Napa / Sonoma'. Continue West on CA-12, Jameson Canyon Rd. for 6 miles. Bear right onto CA-29 and go Northwest for 5 miles. Turn left at Hwy 12/121 (West) towards Sonoma. Turn right at stop light onto Napa Road (Nicholson Winery will be on the right) and go West for 4.2 miles. Napa Rd. becomes Leveroni Rd. at CA-12 / Broadway. The Lodge at Sonoma is on the NW corner of Broadway and Leveroni Rd at 1325 Broadway.

This hotel does not provide shuttle service.

- Alternate transportation: Rental Car services are available
- Estimated taxi fare: 300.00 USD (one way)

### San Francisco - SFO

- Phone: 1 650 821 8211
- Hotel direction: 55 miles N

• Driving Directions: Airport Exit to US-101 N / I-380 W to San Francisco / San Bruno and I-280. Exit US-101 onto I-380, go West for 1.1 miles. Exit I-380 onto I-280 N to San Francisco. Continue on I-280 Junipero Serra Fwy for 6 miles. Continue on CA-1 at sign reading CA-1 to 19th Avenue / Golden Gate Bridge and go North for 7 miles. Exit CA-1 via ramp at sign reading 'Golden Gate BR' onto US-101 and go North for 21 miles. Exit US-101 via ramp reading CA-37 East to Vallejo / Napa. Continue on CA-37 for approx. 7 miles. Turn left at stop light onto CA-121 / Arnold Drive at sign reading 'CA-121 N to Sonoma / Napa (Infineon Raceway will be on the left) and go North for 6.6 miles. Stay straight to go onto CA-116 for

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

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

TRAVELER	<sup>t:</sup>	Thella Bowens			DEPT. NAME & NO.			Executive Office / #6			
DEPARTUR	RE DATE:	6/24/2010 RETURN DATE:		6/25/2010			REPORT DUE: 7/			/25/10	
DESTINATI	ION:	San Jose, CA									
expenses a	nd approval	ority Travel and Lodging Expense Re s. Please attach all required support ns should be explained in the space p	ing documente	tion. All n	icle 3, Pan aceipts mu	1 3.4, Sec ist be deta	tion 3.40, d alled, (cred	outlining a lit card red	epropriale eipts do n	reimbursa ot provide	ble sufficient
			Authority Employee Expenses								
			Expenses (Prepaid by Authority)	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURBDAY	PRIDAY	SATURDAY	TOTALS
Air Fare, Ru	allroad, Bus	(attach copy of itinerary wicharges)	293.40								0.00
Statement of the local division of the local	other water of the local division of the loc	de copy of flyer/registration expenses)									0.00
Rental Car											0.00
Gas and Ol	l•										0.00
Garage/Pa	riking*										0.00
	ttach milesg	e form"									0.00
Taxi and/or	Shuttle Fan	e (include tips pd)*		5							0.00
Hotel*						100					0.0
Telephone,	Internet and	d Fax*							-		0.0
Laundry*			1. 2								0.0
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tips pd.)	Dinner*					· · · · · · · · · · · · · · · · · · ·		33.50			33,5
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		Total Expenses prepaid by Authority	524.25	0.00	0.00	0.00	0.00	33.50	14.02	0.00	47.5
Explanation	<b>n</b> .				Total Ext	entes Pr	epaid by A	uthority			524.2
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					Loss Cas	h Advand	e. (attach co	y of Authali	7 - 49		
					Less Exp	enses Pr	epaid by A	uthority			524.2
<sup>1</sup> Give names and business affiliations of any persons whose meals were paid by traveler.       Due Traveler (positive amount) <sup>2</sup> <sup>2</sup> Prepare Check Request <sup>2</sup> Due Authority (negative amount) <sup>3</sup> <sup>3</sup> Attach personal check payable to SDCRAA       Note: Send this report to Accounting even If the amount is 4				47.5.							

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

Travel	and Lodging Expense Raimbursement Policy 3.40 Business	Expense Reimbursement Policy 3.	30
Prepared By:	A Glignne Berg	Ext.:	2445
Traveler Signature:	Hally of Druck	Date:	
Approved By:	Timean	Date: _7	1310

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

hereby cartify that this document was approved by the Executive Committee at its (Please leave blank, Whoever clerk's the meeting will insert their name and ble.)

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.

h. Thelia Thelia 2010/Travel/6-25, Silicon Valley Structures Luncheon, San Jose/Travel Expense Report, Silicon Valley Structures Luncheon, San Jose

### 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

1. TRAV	/ELER: ers Name	. т <b>і</b>	nella Bowens				Dept:	Executive Office
Position	г	Board		President/CEO	Г	Gen. Counsel	_ Dopt.	Chief Auditor
	Г	All othe	er Authority en	nployees (does not	require ex	ecutive committ	ee admir	nistrator approval)
2. DATE	E OF REC		5/7/10	PLANNED DATE O	F DEPART	URE/RETURN:	6/24/1	0 / 6/25/10
of pa	per as ne	cessary):		e detailed explanati			-	ontinue on extra sheets
Des	stination:	San Jose	•			mational Airport		inal B at Mineta San con Valley Structures
Exp	lanation:	Thella w	ill pay for her	overnight expense	on 6/24 ir	order to attend	the term	ninal opening.
	A. TRAN • All • OT B. LODG C. MEAL D. SEMIN E. ENTER F. OTHE T	SPORTA RFARE THER TR ING S VAR ANE RTAINMI R INCIDI OTAL PI	ATION COSTS ANSPORTAT CONFEREN ENT (If applic ENTAL EXPE ROJECTED T	fION (Taxi, Train, C ICE FEES able) NSES <b>RAVEL EXPENSE</b>	1	\$ \$ \$ \$ \$ \$	300 75 	
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3.	The conce	erned out		and all identified		•		
Admin	istrator's	Signature	<del>)</del> :				Date:	

### AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE

2 (Please leave blank. Whoever clerk's the meeting will insert their name and title.) 5/24/10 by the Executive Committee at its

, hereby certify that this document was approved

meeting.

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

From: Sent: To: Subject: Attachments:	Scott Mackerley [smackerley@traveltrust.com] Thursday, June 10, 2010 2:35 PM Berg Dianne; Harris Matt; SMACKERLEY@TRAVELTRUST.COM Travel Itinerary 24JUN SAN BOWENS 52244943.PDF; 52244943.HTM					
BOWENS/THELLA	DEPT 6	10Jun10 02:35pm				
INVOIC *******TICKET THIS IS AN E-TI A GOVERNMENT IS THIS TICKET IS THE FLIGHTS BOO OR CANCELLED BE IT MAY HAVE NO YOUR OUTBOUND F ************************************	ETICKET CONFIRMATION IS E/ITINERARY ACCOUNTING D LESS TRAVEL INSTRUCTIONS CKET RESERVATION. SUED PHOTO ID IS NEEDED NON-REFUNDABLE AND MUST KED. IF THE RESERVATION FORE THE DEPARTURE OF YO VALUE. CONTACT TRAVELTR LIGHT IF CHANGE IS NECES TSA GUIDANCE FOR PASSENG TRA TIME FOR SCREENING A INIMUM 3 HOUR CHECK-IN PRIOR SECURITY INFORMATION VIS	AT CHECK IN BE USED FOR I IS NOT USED OUR FLIGHTS RUST BEFORE SSARY. ************************************				
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	nes locator: QN93UC : 1 hour(s) and 15 minut e: Coach	es				
To: San Diego	nes Flight#119 C CA, USA 25Jun10 0	lass:H 2:55pm Friday 4:10pm Friday atus: Confirmed				
Depart - TERMIN/ Arrive - TERMIN/ Southwest Airlin						

Flight Duration: 1 hour(s) and 15 minutes Class of Service: Coach

22Dec10 Wednesday 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

BOWENS THELLA		
Ticket#:2105261892	Ticket Base Fare:	263.40
Invoice#:1175313	Ticket Tax:	0.00
	Total Ticket Amount:	263.40

Electronic: YES

SERVICE FEE DOCUMENT #: 0524704830 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

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IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY AND NOTIFY YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

ResFAX(r) Copyright(c) 1992-2010 Cornerstone Information Systems, Inc., Bloomington, IN

\*\*\*ResFAX Message ID 694280\*\*\*
\*\*\*ResFAX Itinerary E-Mail\*\*\*

### <u>Print</u> Please print this page and keep it for your records. Order Detail

### Mineta San Jose International Airport Grand Opening Celebration

### **Celebration Ticket**

1 ticket for Thella Bowens



\$155.85

### **Credit Card Confirmation Number: 076354**

#### **Transaction Number: 4211123**

**Reminder:** Please make sure to bring the parking directions. Also please give us your guest names closer to the event date, we will have name badges for all the guests attending the party. We look forward to hosting you at this event.

\*\*Note: Acteve does not mail a hard copy confirmation of your transaction; however, you will receive a system generated email confirmation that contains your order information.

# Your order will appear as a purchase from Acteva on your credit card statement.

bizjournals.com Purchase Receipt

Invoice #886311 2010-04-27 14:53:34 Credit Card processed by: Biz Books, LLC 120 W. Morehead Suite 100 Charlotte, NC 28202

### **Products Ordered**

Description		Quantity	Unit Price
Event Registration - Silicon Valley Structures	1		\$75.00
		Subtotal:	\$75.00
		Sales Tax:	\$0.00
		Total:	\$75.00

### **Billing Address**

Thella Bowens San Diego International Airport P. O. Box 82776

San Diego CA 92138 US

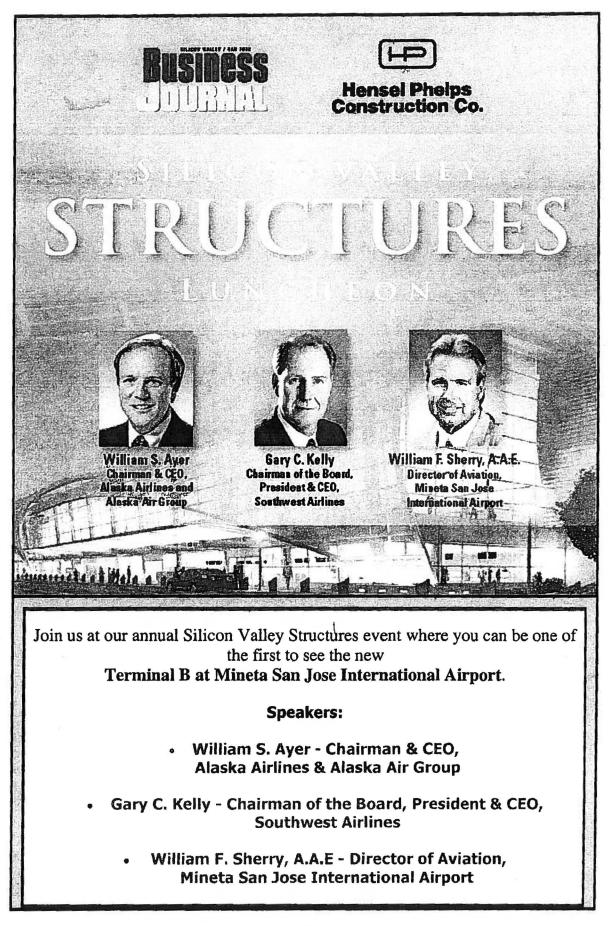
619.400.2445

Payment Information Thella F Bowens

XX/XXXX

Thank you for your order. Please call 1-800-486-3289 if we may be of further assistance. No returns accepted after 30 days.

6/24 DINNER 6/25 Breakfost DOUBLETREE HOTEL SPENCERS For Steaks And Chops SAN JOSE 2050 GATEWAY PLACE 2050 Gateway Place SAN JOSE, CA 95110 San Jose, CA 95110 408-453-4000 408-437-2170 1900716.1 900856. ARCIAL C RY-008 V Table 134 Table 1109 2 06/25/10 10:26 AM Guests Guests SPENCERS SPRIC west Num: 2 st Num: 1 \$CHICK APPL SAU 5.00 ENCER SALAD 8.00 \$TOAST 3.00 COFFEE ION SOUP 9.00 3.00 -SH BROWNS 10.00 \_\_\_\_\_ SubTotal 11.( 9.24% SubTotal 45.00 27-Tax 1 1.0/ 🕹 Tax 1 4.16 250 Please pay this amount Please pay this amount Total 12.02 Total 49.16 Tip a -\$ 295 ) 11.00 14.02 L'.00 \*\*\*\*\*\*\*\*\* Tip \*\*FOR ROOM CHARGES ONLY\*\* 33 50 \* \*\*FOR ROOM CHARGES ONLY\*\* JEST NAME T NAME EASE PRINT YOUR LAST NAME -SE PRINT YOUR LAST NAME DOM # \_\_\_\_\_ 7.2 **#**\_\_\_\_\_ \* IP AMOUNT \_\_\_\_\_ AMOUNT OTAL CHARGE CHARGE IGNATURE 



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

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

TRAVELE	R:	Theila Bowens		, I	DEPT. NAME & NO.			Executive Office / #6			
DEPARTU	RE DATE:	7/13/2010	RETUR	N DATE:		7/14/2010	)	REPOR	RT DUE:	8/	13/10
DESTINAT	TION:	Atlanta, GA		6284							
expenses	and approval	ority Travel and Lodging Expense Re s. Please attach all required supporti ns should be explained in the space p	ng documenta	tion. All n							
			Authority Expenses				Employe	e Expens	508		
			(Prepaid by Authority)	SUNDAY	MONDAY	TUESDAY 7/13/10	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
Air Fare, R	ailroad, Bus	(attach copy of itinerary w/charges)	1,486.40								0.00
Conference	e Fees (provid	de copy of flyer/registration expenses)									0.00
Rental Car	*										0.00
Gas and Oil*										0.00	
Garage/Pa	rking*										0.00
Mileage - a	ttach mileage	e form*									0.00
Taxi and/or	r Shuttle Fare	(include tips pd.)*									0.00
Hotel*						159.60			-		159.60
Telephone, Internet and Fax*										0.00	
Laundry*										0.00	
Tips - sepa	rately paid (n	naids,bellhop,other hotel srvs.)									0.00
Meals	Breakfast										0.00
(include	Lunch*										0.00
tips pd.)	Dinner*									-	0.00
	Other Mea	als*					2.25				2.25
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Hospitality	1.									7. 20	0.00
Miscellane	ous:										0.00
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-	7	Total Expenses prepaid by Authority	1,486.40	0.00	0.00	159.60	2.25	0.00	0.00	0.00	161.85
Explanation	n: The n	neeting location was changed from W	ashington, D.	C. to	Total Expe	anses Pre	paid by A	thority		·	1,486.40
Atlanta, GA	. A change i	n the return flight was made to accom	modate the e	arlier	Total Expe (including			mployee			161.85
finish time of the meeting. Grand Trip Total					1,648.25						
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					Less Expe	enses Pre	baid by Au	thority			1,486.40
<sup>2</sup> Prepare C	<sup>1</sup> Give names and business affiliations of any persons whose meals were paid by traveler. <sup>2</sup> Prepare Check Request Due Authority (negative amount) <sup>3</sup>					161.85					
<sup>3</sup> Attach per	sonal check pa	yable to SDCRAA			Ne	ote: Send t	his report t	o Accounti	ng even if t	the amount i	is \$0.

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

\* Travel and Lodging Expense Reimbursement Policy 3.40

<sup>\*</sup> Business Expense Reimbursement Policy 3.30

Ext.: 2445 Date Date:

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.)

Prepared By:

Traveler Signature:

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.

Dianne Ben

### 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

1. TRAVELER Travelers Na		e		Dept:	Executive Office
	☐ Board Member	✓ President/CEO	Gen. Counsel	_ Dept.	Chief Auditor
Position:		<ul> <li>The rest structure induced instruction and structure is all to be all the rest of the res</li></ul>	<ul> <li>Hell-Advance/11 (SHRTONE Region Region (State)) - Ender</li> </ul>		<ul> <li>Distribution multiple 20 - Bachwarn on administration</li> </ul>
	All other Authority e	employees (does not rec	quire executive committ	ee admir	histrator approval)
2. DATE OF F	REQUEST: 5/17/10	PLANNED DATE OF [	DEPARTURE/RETURN:	7/13/1	0 / 7/14/10
of paper as	IONS/PURPOSE (Provision in the second s	Pu	as to the purpose of th urpose: Future of Aviat eeting	-	
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And the second se	penses conform to the A				
Authority's bus Travelers Sig	siness.	a Adaul	Da	K	1 May 2010
<b>CERTIFICA</b>	TION BY ADMINIST	RATOR (Where Ad	ministrator is the Exect	utive Cor	nmittee, the Authority
•	ire is required).				
	re below, I certify the fol conscientiously reviewe	-	n travel request and the	e details	provided on the reverse.
	oncerned out-of-town trav				
	rity's business and reaso				
	oncerned out-of-town tra- rity's Policies <u>3.30</u> and <u>3.</u>	The second	penses conform to the	requirem	ients and intent of
Administrato	or's Signature:	······		Date:	· · · · · · · · · · · · · · · · · · ·
AUTHORIT	Y CLERK CERTIFIC	ATION ON BEHAL	F OF EXECUTIVE	COM	NITTEE
I, (Please leave bla	ank. Whoever clerk's the meet tive Committee at its		, hereby certify	that this	document was approved
by the Execut		Leave blank and we will inse		ıy.	



1031 Virginia Avenue • Atlanta, GA 30354 Phone (404) 767-9000 • Fax (404) 768-0185 Reservations www.hilton.com or 1 800 HILTONS

BOWENS, THELLA P.O. BOX 82776

SAN DIEGO, CA 921382776 US

Name & Address

Room1217/D2Arrival Date7/13/2010Departure Date7/14/2010Adult/Child1/0Room Rate140.00

9:47:00PM 7:43:00AM I

Folio

RATE PLAN C-FAAC

HH# 423793395 BLUE AL: AA #YF49148 BONUS AL: CAR:

CONFIRMATION NUMBER: 3390093259

7/14/2010 PAGE 1

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANC	E	1
7/13/2010	GUEST ROOM GA SALES TAX OCCUPANCY TAX AX *1003 BALANCE	MJACOBS MJACOBS MJACOBS JJONES	4259819 4259819 4259819 4260462	\$9.80	\$159.60		\$0.00	The <b>Hildon</b> Family Hilton
5	You have earned appro 140 miles with America this stay or any other s Thank you for choosing advantage of our intern special offers!	n Alrlines for to ay at any of m Hilton! Book	his stay. To ore than 3, your next s	check your earning 000 Hil ay at hilton.com and	s for I take			
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ACCOUNT NO.				-	DATE OF CHARGE	FOLIO NO./CH	eck no.	(1) Hilton Grand Vacations Cluby
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THANK YO	DU FOR CHOOSING HILTON A	TLANTA AIRP	ORT		TAXES			
					TIPS & MISC.			Official Sponsor
					TOTAL AMOUNT			
RCHANDISE AND/OR SERV	ICES PURCHASED ON THIS CARD SHALL NOT BE R	ESOLD OR RETURNED	POR A CASH REFU	ND.	PAYMENT	DUE UPON RECEIPT		

7/14-0thor

rtsfield Hospitality-Freshens-T Terminal T Atlanta, GA 30320 PHONE:					
4/10 3:29 PM					
er 0045 ۲ 12 Patrick ۲ *******************	********	*****			
TLED WATER		2.10			
Та	xable:	2.10			
Sub-	total: Tax:	2.10 0.15			
Total	Due:	2.25			
rash: ⇒NGE DUE:		5.25 3.00			

ihank You

From:Cheryl Harloff [cheryl@traveltrust.com]Sent:Tuesday, July 06, 2010 10:32 AMTo:Berg DianneSubject:FW: Travel Itinerary 13JUL SAN BOWENSAttachments:33225043.PDF; 33225043.HTM

Hi Diane,

I was able to unblock an aisle seat on the departure

BOWENS/THELLA

DEPT 6

06Jul10 09:13am

\*\*\*\*\*\*\*\*\*\*\*\* PLEASE CHECK NEW CARRY-ON RESTRICTIONS DIRECT WITH YOUR CARRIER OR CALL US 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 US 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 

13Jul10 09:00am Tuesday

Air Delta Air Lines Flight# 2992 Class:M Seat:27D From: San Diego CA, USA 13Jul10 09:00am Tuesday To: Atlanta Hartsfield-Ja 13Jul10 04:20pm Tuesday Meal. Food For Purchase Equip: Boeing 757 Jet Status: Confirmed Stops: 0

Depart - TERMINAL 2 Arrive - SOUTH TERMINAL Delta Air Lines locator: PPVFP9 DL Frequent Flyer# **CENTRAL**-BOWENS/THELLA

\*\*\* AISLE SEAT CONFIRMED
Flight Duration: 4 hour(s) and 20 minutes
Class of Service: Coach

14Jul10 07:04pm Wednesday Air Delta Air Lines Flight# 1567 Class:M Seat:38D From: Atlanta Hartsfield-Ja 14Jul10 07:04pm Wednesday To: San Diego CA, USA 14Jul10 08:35pm Wednesday Meal: Food For Purchase Equip: Boeing 757 Jet Status: Confirmed Stops: 0 Depart - SOUTH TERMINAL

Arrive - TERMINAL 2 Delta Air Lines locator: PPVFP9 DL Frequent Flyer# 20000000-BOWENS/THELLA

\*\* AISLE SEAT CONFIRMED
Flight Duration: 4 hour(s) and 31 minutes
Class of Service: Coach

10Jan11 Monday Other San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS

WE ARE OPEN MONDAY - FRIDAY FROM 5AM-530PM PST AND SATURDAY FROM 9AM-1PM PST - 760-635-1700. FOR EMERGENCY AFTERHOURS SERVICE IN THE US PLEASE CALL 888-221-6043 AND USE YOUR VIT CODE -SJE72 PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00 THANK YOU FOR CHOOSING TRAVELTRUST...CHERYL HARLOFF

**Ticket Information** 

ROWENS THELLA

DOWLING THELLA		
Ticket#:7902449006	Ticket Base Fare:	1172.08
Invoice#:5199572	Ticket Tax:	109.32
	Total Ticket Amount:	1281.40
Electronic: YES		

SERVICE FEE DOCUMENT #: 0525287589 FEE AMOUNT: 30.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

\_\_\_\_\_

IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY\_AND\_NOTIFY\_YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

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\*\*\*ResFAX Message ID 676196\*\*\*
\*\*\*ResFAX Itinerary E-Mail\*\*\*

From: Sent: To: Subject: Attachments: Cheryl Harloff [cheryl@traveltrust.com] Wednesday, July 14, 2010 9:39 AM Berg Dianne FW: Travel Itinerary 13JUL SAN BOWENS 31179154.PDF; 31179154.HTM

Regards, Cheryl Harloff,CTC Traveltrust 760-635-1700 New Hours 730AM-430PM PDT

-----Original Message-----From: Cheryl Harloff [mailto:charloff@traveltrust.com] Sent: Wednesday, July 14, 2010 8:39 AM To: Cheryl Harloff Subject: Travel Itinerary 13JUL SAN BOWENS

BOWENS/THELLA

DEPT 6

14Jul10 08:39am

when our and the

\* PLEASE CHECK NEW CARRY-ON RESTRICTIONS DIRECT WITH YOUR CARRIER OR CALL US 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 US BEFORE YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY. \*\*\*\*\*\*\*\*\*\* PLEASE ALLOW EXTRA TIME FOR SCREENING AND BOARDING INTERNATIONAL-MINIMUM 3 HOUR CHECK-IN PRIOR TO DEPARTURE DOMESTIC-MINIMUM 2 HOUR CHECK-IN PRIOR TO DEPARTURE FOR ADDITIONAL SECURITY INFORMATION VISIT WWW.TSA.GOV 

13Jul10 01:25pm Tuesday

Air Delta Air Lines Flight# 2792 Class:A Seat:6D From: San Diego CA, USA 13Jul10 01:25pm Tuesday To: Atlanta Hartsfield-Ja 13Jul10 08:52pm Tuesday Meal: Lunch Equip: Boeing 757 Jet Status: Confirmed Stops: 0

Depart - TERMINAL 2 Arrive - SOUTH TERMINAL Delta Air Lines locator: PPVFP9 DL Frequent Flyer# **June 1998**-BOWENS/THELLA

Flight Duration: 4 hour(s) and 27 minutes Class of Service: First

14Jul10 04:20pm Wednesday Air Delta Air Lines Flight# 1467 Class:M Seat:37C From: Atlanta Hartsfield-Ja 14Jul10 04:20pm Wednesday San Diego CA, USA 14Jul10 05:48pm Wednesdav To: Meal: Food For Purchase Equip: Boeing 767 Jet Status: Confirmed Stops: 0

Depart - SOUTH TERMINAL Arrive - TERMINAL 2 Delta Air Lines locator: PPVFP9 DL Frequent Flyer#-TERMINE-BOWENS/THELLA

Flight Duration: 4 hour(s) and 28 minutes Class of Service: Coach

10Jan11 Monday Other San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS

WE ARE OPEN MONDAY - FRIDAY FROM 5AM-530PM PST AND SATURDAY FROM 9AM-1PM PST - 760-635-1700. FOR EMERGENCY AFTERHOURS SERVICE IN THE US PLEASE CALL 888-221-6043 AND USE YOUR VIT CODE -SJE72 PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER EACH EMERGENCY CALL IS BILLABLE AT A MINIMUM 25.00 THANK YOU FOR CHOOSING TRAVELTRUST...CHERYL HARLOFF

Ticket Information

BOWENS INELLA		
Ticket#:2114766319	Ticket Base Fare:	150.00
Invoice#:5200400	Ticket Tax:	0.00
	Total Ticket Amount:	150.00
Flootnonic, VEC		

Electronic: YES

DOLIENC THELLA

SERVICE FEE DOCUMENT #: 0525594433 FEE AMOUNT: 25.00

BILLED TO: AMERICAN EXPRESS ENDING IN 1006

IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY AND NOTIFY YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

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

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

TRAVELE	R:	Thella Bowens			DEPT. NA	ME & NO.		Exe	cutive Of	fice / #6	
DEPARTU	IRE DATE:	7/21/2010		N DATE:		7/31/2010	)	REPOR	RT DUE:		/30/10
DESTINAT	TION:	London, England and Munich, Ger	many								
expenses a	and approvals	nority Travel and Lodging Expense Re Is. Please attach all required support ns should be explained in the space	ting documenta	ation. All n							
			Authority Expenses				Employe	e Expens	<b>0</b> 5		
			(Prepaid by Authority)	SUNDAY	MONDAY	TUESDAY	WEDNESDAY 7/21/10	THURSDAY 7/22/10	FRIDAY 7/23/10	SATURDAY 7/24/10	TOTALS
Air Fare, R	ailroad, Bus	(attach copy of itinerary w/charges)	4,447.20						59.67		59.67
Conference	e Fees (provic	de copy of flyer/registration expenses)									0.00
Rental Car	r*										0.00
Gas and Oi	)il*										0.00
Garage/Pa	irking*										0.00
Mileage - a	attach mileage	e form*									0.00
Taxi and/or	r Shuttle Fare	e (include tips pd.)*						121.50			121.50
Hotel*								351.50	351.50	351.50	1,054.50
	, Internet and	I Fax*									0.00
Laundry*											0.00
		maids,bellhop,other hotel srvs.)									0.00
Meals	Breakfast*	k									0.00
(include tips pd.)	Lunch*							108.84	94.89		203.73
ups pu.)	Dinner*								55.84	62.68	118.52
	Other Mea		and the last of the second statement in the second sector of	ALL AND AND AND ADD	A first one dependence for	14- MARINA TUDINA MARINA	the second second second	- Link Lorzan	4.33	5.46	9.79
the second s	non-reimburs	sable expense									
Hospitality											0.00
Miscellaneo											0.00
		hange/Foreign Transaction Fee						3.28			3.28
	oreign Trans								4.17		4.17
*Provide de	etailed receip	and the second									0.00
		Total Expenses prepaid by Authority	4,447.20	0.00	0.00	0.00	0.00	585.12	570.40	419.64	1,575.16
Explanation	n:	Page 1 of 2					paid by Au				4,447.20
					(including			inployee			1,575.16
				)	Grand Tr						6,022.36
					Less Cas	h Advance	attach cop	y of Authority	ck)		
					Less Expo	enses Pre	paid by Au	thority			4,447.20
101-0		s affiliations of any persons whose meals w	and hu trave		Due Trav	eler (posi	live amoun	nt) <sup>2</sup>			
<sup>2</sup> Prepare C	Check Request		vere paid by trave	ner.	Due Auth	ority (neg	ative amo	unt) <sup>3</sup>			1,575.16
<sup>3</sup> Attach per	sonal check pa	yable to SDCRAA			N	lote: Send t	his report t	o Accounti	ng even if t	he amount	is \$0.

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

\* Travel and Lodging Expense Reimbursement Policy 3.40

<sup>3</sup> Business Expense Reimbursement Policy 3.30

Prepared By:	Dianne Berg	Ext.:	2445
Traveler Signature:	Milla Algune Ma	Date:	6/10
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 (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.

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

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

TRAVELER: Thella Bowens		DEPT. NAME & NO.		Executive Office / #6		
DEPARTURE DATE:	7/21/2010	RETURN DATE:	7/31/2010	REPORT DUE:	8/30/10	
DESTINATION:	London, England and Munich, Germany	1				

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	Employee Expenses							
			(Prepaid by Authority)	SUNDAY 7/25/10	MONDAY 7/26/10	TUESDAY 7/27/10	WEDNESDAY 7/28/10	THURSDAY 7/29/10	FRIDAY 7/30/10	SATURDAY 7/31/10	TOTALS
Air Fare,	Rai	Iroad, Bus (attach copy of itinerary w/charges)		1120/10	1120110	1121110	1120/10	1120110	1100/10	52.38	52.38
		Fees (provide copy of flyer/registration expenses)									0.00
Rental C	ar*										0.00
Gas and	Oil*	· · · · · · · · · · · · · · · · · · ·									0.00
Garage/F	ark	ing*									0.00
Mileage -	- att	ach mileage form*									0.00
Taxi and	lor S	Shuttle Fare (include tips pd.)*				46.94					46.94
Hotel*				351.50	466.85	259.58	214.99	214.99	214.99		1,722.90
Telephor	ne, l	nternet and Fax*	~	23.38			1.44	21.63			46.45
Laundry*	r i										0.00
Tips - se	para	ately paid (maids,bellhop,other hotel srvs.)									0.00
Meals	Γ	Breakfast*		11 - 11			40.43				40.43
(include		Lunch*			41.11		4.33	13.51	13.63		72.58
tips pd.)		Dinner*		23.23	17.38	37.71	32.44	69.06		11.38	191.20
		Other Meals*					6.68	4.29	7.60		18.57
Alcohol is	s a n	on-reimbursable expense				Alter a training					A Parties
Hospitali	ty 1.	k									0.00
Miscellar											0.00
	Fo	reign Transaction Fees				56.41	9.17	1.73	0.37	19.45	87.13
											0.00
*Provide	deta	ailed receipts									0.00
		Total Expenses prepaid by Authority	0.00	398.11	525.34	400.64	309.48	325.21	236.59	83.21	2,278.58
Explanati	ion:	Page 2 of 2			Total Exp	enses Pre	paid by Au	thority			0.00
	_						urred by Er	mployee		i i	
Total of Pages 1 and 2 (\$1,575.16 + \$2,278.58 = \$3,853.74)				(including		ances)				2,278.58	
					Grand Tri						2,278.58
					a second s		attach cop		(ck)		
							paid by Au				0.00
<sup>2</sup> Prepare	Che	and business affiliations of any persons whose meals w eck Request	vere paid by trave	nler.	(10) KTO (1) - KT - 1		tive amoun jative amo				2,278.58
<sup>3</sup> Attach p	oersc	onal check payable to SDCRAA							ng even if t	the amount i	

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

\* Travel and Lodging Expense Reimbursement Policy 3.40

Business Expense Reimbursement Policy 3.30

Prepared By:	- la li	A D	Dianne Berg
Traveler Signature:	MAUL	410	110 Mare
Approved By:	Goun		

Ext .: 2445 Date: 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.

### 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 <u>3.30</u> and <u>3.40</u>, use the most economical means available to affect the travel.

### 1. TRAVELER:

Travelers Name: Thella Bowens	Dept: Executive Office/#6
Position:	Gen. Counsel
All other Authority employees (does not	require executive committee administrator approval)
2. DATE OF REQUEST: 6/9/10 PLANNED DATE O	F DEPARTURE/RETURN: 7/21/10 / 8/1/10
3. DESTINATIONS/PURPOSE (Provide detailed explanat of paper as necessary): Destination: London, England; Frankfurt & Munich, Germany	on as to the purpose of the trip continue on extra sheets Purpose: International route development. Three senior executive-level airline staff meetings to discuss transatlantic service to San Diego.
Explanation:	
<ul> <li>4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES <ul> <li>A. TRANSPORTATION COSTS:</li> <li>AIRFARE</li> <li>OTHER TRANSPORTATION (Taxi, Train, 0)</li> </ul> </li> <li>B. LODGING <ul> <li>C. MEALS</li> <li>D. SEMINAR AND CONFERENCE FEES</li> <li>E. ENTERTAINMENT (If applicable)</li> <li>F. OTHER INCIDENTAL EXPENSES</li> <li>TOTAL PROJECTED TRAVEL EXPENSES</li> </ul> </li> </ul>	\$ 3977 \$ 1500 \$ \$ \$
CERTIFICATION BY TRAVELER By my signature	
associated expenses conform to the Authority's Policies 3. Authority's business. Travelers Signature:	30 and 3.40 and are reasonable and directly related to the         WMD       Date:         1       WMD         Date:       1
CERTIFICATION BY ADMINISTRATOR (Where	Administrator is the Executive Committee, the Authority
Clerk's signature is required).	
By my signature below, I certify the following:	
-	expenses conform to the requirements and intent of
Administrator's Signature:	an Date: 6.10.10
AUTHORITY CLERK CERTIFICATION ON BEH	ALF OF EXECUTIVE COMMITTEE
I, Tony Russell, Authorty Clerk (Please leave blank Whoever clerk's the meeting will insert their name	, hereby certify that this document was approved and title.)
by the Executive Committee at its Zune 21, 2	▲I △ meeting.

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

-

From: Sent: To: Subject: Attachments:	Scott Mackerley [smacker Thursday, July 01, 2010 2 Steele Cindy; Berg Diann Travel Itinerary 21JUL SA 53603418.PDF; 53603418	:53 PM e; Harris Matt; SMACH N BOWENS	KERLEY@TRAVELTRUST.COM
BOWENS/THELLA	DEPT 6	01Jul10	02:53pm
YOUR VIRGIN ATL YOUR LUFTHANSA YOUR UNITED ETI INVOIC *******TICKET THIS IS AN E-TI A GOVERNMENT IS THIS TICKET IS THE FLIGHTS BOO OR CANCELLED BE IT MAY HAVE NO YOUR OUTBOUND F ************************************	UST HAVE A VALID PASS EL OUT OF THE UNITED S WITHIN 6 MONTHS OF ************************************	VATION IS ** DØYV IS ** ZHMHCA ** ** JB61LY ** NG DOCUMENT IONS********* DED AT CHECK IN JST BE USED FOR TION IS NOT USED F YOUR FLIGHTS ELTRUST BEFORE ECESSARY. ************************************	<pre>***** ATURE AV ***** D.S. ATE .S.</pre>

Air American Airlines Flight# 3036 Class:N Seat:5A From: San Diego CA, USA 21Jul10 02:30pm Wednesday Los Angeles CA, USA 21Jul10 03:15pm To: Wednesday Meal: Food For Purchase Equip: Embraer RJ140 Jet Status: Confirmed Stops: 0 OPERATED BY AMERICAN EAGLE Depart - COMMUTER TERMINAL Arrive - - TERMINAL 4 American Airlines locator: HYMDQG AA Frequent Flyer# .BOWENS/THELLA \*\* AISLE SEAT CONFIRMED \*\* Flight Duration: 45 minutes Class of Service: Coach 21Jul10 Wednesday 05:35pm Air Virgin Atlantic Flight# 8 Class:Z Seat:4K From: Los Angeles CA, USA 21Jul10 05:35pm Wednesday London Heathrow EN, U 22Jul10 To: 12:05pm Thursday Meal: Dinner Breakfast Equip: Airbus Jet Status: Confirmed Stops: 0 Depart - TERMINAL 2 Arrive - TERMINAL 3 Virgin Atlantic locator: D0YVBG CO Frequent Flyer# COMMINS-BOWENS/THELLA \*\* AISLE SEAT CONFIRMED \*\* Flight Duration: 10 hour(s) and 30 minutes Class of Service: Upper Class Tuesday 27Jul10 11:50am Air Lufthansa German Flight# 4727 Class:W From: London Heathrow EN, U 27Jul10 11:50am Tuesday Frankfurt, Germany 27Jul10 02:25pm To: Tuesday Meal: Snack/brunch Equip: Airbus A321 Jet Status: Confirmed Stops: 0 Depart - TERMINAL 1 Arrive - TERMINAL 1 Lufthansa German locator: ZHMHCA CO Frequent Flyer# BOWENS/THELLA YOUR SEAT WILL BE ASSIGNED AT CHECKIN Flight Duration: 1 hour(s) and 35 minutes Class of Service: Coach 31Jul10 07:45am Saturday Air Lufthansa German Flight# 4750 Class:H From: Munich, Germany 31Jul10 07:45am Saturday London Heathrow EN, U 31Jul10 08:45am Saturday To:

Meal: Snack/brunch Equip: Airbus A320 Jet Status: Confirmed

Depart - TERMINAL 2 Arrive - TERMINAL 1 Lufthansa German locator: ZHMHCA CO Frequent Flyer# GENERS/THELLA \*\* SEAT ASSIGNMENT AIRPORT CHECKIN ONLY \*\* Flight Duration: 2 hour(s) and 00 minutes Class of Service: Coach 31Jul10 11:30am Saturday Air Virgin Atlantic Flight# 19 Class:Z Seat:14K From: London Heathrow EN, U 31Jul10 11:30am Saturday San Francisco CA, USA 31Jul10 02:20pm Saturday To: Meal: Lunch Snack/brunch Equip: Boeing 747 Jet Status: Confirmed Stops: 0 Depart - TERMINAL 3 Arrive - INTERNATIONAL TERMINAL Virgin Atlantic locator: D0YVBG CO Frequent Flyer# COMPANY-BOWENS/THELLA \*\* AISLE SEAT CONFIRMED \*\* Flight Duration: 10 hour(s) and 50 minutes Class of Service: Upper Class 31Jul10 05:32pm Saturday United Airlines Flight# 6014 Class:L Seat:4B Air From: San Francisco CA, USA 31Jul10 05:32pm Saturday San Diego CA, USA 31Jul10 07:06pm Saturday To: Meal: None Equip: CRJ-700 Canadair Regional Jet Status: Confirmed Stops: 0 SFO-SAN OPERATED BY /UNITED EXPRESS/SKYWEST AIRLINES Depart - TERMINAL 3 Arrive - COMMUTER TERMINAL United Airlines locator: JB61LY UA Frequent Flyer# BOWENS/THELLA \*\* ECONOMY PLUS AISLE SEAT CONFIRMED \*\* Flight Duration: 1 hour(s) and 34 minutes Class of Service: Coach Thursday 27Jan11 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 -S7NSØ PLEASE NOTE THIS IS OUR NEW EMERGENCY NUMBER FACH EMERGENCY CALL IS BILLARIE AT A Ticket Information

BOWENS THELLA Ticket#:7895729863 Invoice#:5199564	Ticket Base Fare: Ticket Tax: Total Ticket Amount:	288.37 43.03 331.40	
Electronic: YES			
BOWENS THELLA Ticket#:7895729865 Invoice#:5199564 Electronic: YES	Ticket Base Fare: Ticket Tax: Total Ticket Amount:	3279.00 638.10 3917.10	
BOWENS THELLA			
Ticket#:7895729866	Ticket Base Fare:	57.67	
Invoice#:5199564	Ticket Tax:	15.03	
Electronic: YES	Total Ticket Amount:	72.70	
BOWENS THELLA			
Ticket#:7901230749	Ticket Base Fare:	61.00	
Invoice#:5199564	Ticket Tax:	0.00	
Electronic: YES	Total Ticket Amount:	61.00	4,382.20 65 –
SERVICE FEE DOCUMENT #: ( SERVICE FEE DOCUMENT #: (		40.00 25.00	4,447.20
BILLED TO: AMERICAN EXPRI	ESS ENDING IN 1006		_

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IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY AND NOTIFY YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

ResFAX(r) Copyright(c) 1992-2010 Cornerstone Information Systems, Inc., Bloomington, IN

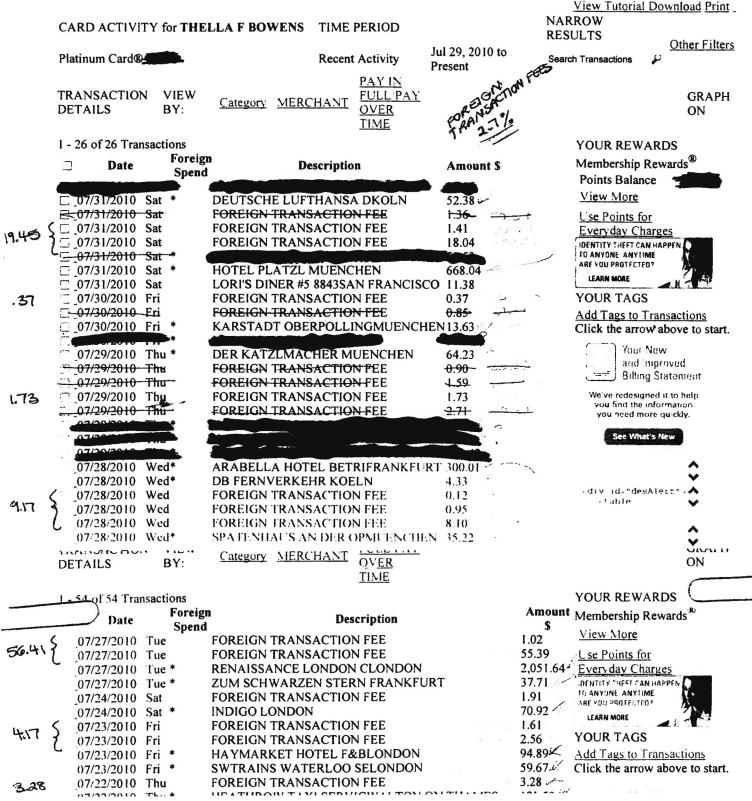
\*\*\*ResFAX Message ID 675470\*\*\*
\*\*\*ResFAX Itinerary E-Mail\*\*\*

#### American Express | Card Activity

Page 1 of 2



#### View Billing Statements



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RICAN EXPRESS t 4 Digits: A Digits:

E		
UNT		£79.4
AL		£79,4
		\$ 121,50
06IN6	CHG	104

NKYOU FOR YOUR CUST(+)

'07/10 13:56 'H CODE: 70 / 0081

- ---- cony

IN AMEX BILL

H54757291 DEBIT/CREDIT CARD SALES VOUCHER T21904599 Qty Description Number Total 23196 £8-10C 001 TICKET Issuine Office Tkt No. 74420 Date 23-JLY-10 LONDON HATERLOO 3088890945 04/10-04/13 Customer card number VISA \*\*\*\* \*\*\*\* \*\*\*\* 00 CARDHOLDER'S COPY A000000031010 Visa Authorised Sale Confirmed 003066 Debit my card account with the total amount Please retain for your records Printed 11:02 on 23-JLY-10

	Class	Ticket typ		Adult	Child		3
	STD	ANYTIME D	NAY S t date	ONE		SGL	
		23.	LY-10	74421	3088	890945	1
٠	From		Valid	until		Price	1
	LONDON To	TERMINALS	23-JL Route	.4-10	) Valid	E13-00X	1
	FARMBOR	ROUGH STINS	NOT REAL	DING	ON DA	te shown	
		arkedening care react deriva	n	Refer to the second second	SI	VGLE	
			942264509 P	-	:06 on 2	23-JLY-10	

Class Ticket type Adult 1ST ANYTIME DAY 1S ONE SGL Start Date Number 23.JLY.10 85894 1009552131 V From Valid until Price FARNBOROUGH STNS 23-JLY-10 £25.40X To Route Validity LONDON TERMINALS NOT READING ON DATE SHOWN SINGLE

Printed 14:10 on 23-14.10

TRAIN TICKETS

on

\$69

AME

DE: GRENZUEBERSCHREITENDE BEFOERDERUNG VON PERSONEN IN LUFTVERKEHR PAR, 26 : 3) USTG EXCESS BAGGAGE PASSENGER RECEIPT 1 OF1 31JUL10 23492033 DE TICKET LUFTHANSA 7329UF / GERMANY UFTHANSA BOWENS/THELLA 7906 1 \*\*PASSENGER RECEIPT\*\* \*\*NOT VALID FOR\*\* NOT VALID FOR TRAVEL \*\*TRANSPORTATION\* FFVV Passenger Ticket: 220 /901230749 MUC LH /LHR VS /SFO ZHMHCA/1A 6\*EXCESS BAGGAGE EXCESS OR OVERSIZED PIECES : 1 RATE PER KG/PIECE 40.00 EUR 40.00 5238 0 220 2604451288 3

ON AMEX BILL

40.00

EUR

#### Fahrpreis-Quittung

Firma/Herrn/Frau von 47 Stadtfahrt nach € inklusiv 7 % MwSt. € (in Worten) dankend erhalten 13, , C Datum/Unterschrift Taxi-Nr. TAXI 496 AHMAD-FAIZI Konrad-Duden-Weg 8 60437 Frankfurt/Main Tel. 0178 / 7272381 Stever Nr. 1221603066-315 ARRIVAL messe frankfurt

36 × 1,304 2#46.94



Mr. Thella Bowens

USA

Room No. :	170
Arrival :	22/07/10
Departure:	27/07/10
REWARD No.	: 992364729

INVOICE 649055

VAT NO: 225858540

Renaissance London Chancery Court, 27/07/10/08:48/62 ATE/1

Date	Reference	Charge	Credit
22/07	-Govt/Military	192.00	
22/07	-Room VAT	33.60 225.0	20 = 35 \.50 -
22/07	-Lounge Dinner Food	53.20	5 = 108.84 -
	->#530 : CHECK #3829	1	1
22/07	-Lounge Service Charge	6.65 69.8	5 = 108.84
	->#530 : CHECK #3829	(	
22/07	-Lounge Gratuities	10.00	
	->#530 : CHECK #3829		
23/07	-Govt/Military	192.00	0 05150
23/07	-Room VAT	33.60 225.0	0=351.00
24/07	-Govt/Military	192.00)	0 - 35150 -
24/07	-Room VAT	33.60 225.0	
24/07	-Minibar Beverage Soft DK	192.00 33.60 192.00 33.60 225.6 3.50	¥5.46
	->#170 : CHECK #6219		
25/07	-Govt/Military	192.00 235.6	0=351.50
25/07	-Room VAT	192.00 <b>225.6</b> 33.60	
25/07	-High Speed Internet	15.00	= 23.38
	->#170 : CHECK # 1		
26/07	-Regular Rate	255.00)	- 466.85
26/07	-Room VAT	44.63	
26/07	-Lounge Dinner Food	23.45)	
	->#170 : CHECK #3950	\$ 26.38	11.14 =
26/07	-Lounge Service Charge	255.00) 44.63 23.45 2.93	
	->#170 : CHECK #3950	2	
27/07			1316.76
	->XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		•2
	Total	1316.76	1316.76
		• • • • • • • • • • • • • • • • • • •	
	Balance	0.00 GBP	



#### Mr. Thella Bowens

USA

Room No.	:	170
Arrival	:	22/07/10
Departure	:	27/07/10
REWARD No	. :	992364729

#### INVOICE 649055

VAT NO: 225858540

Renaissance London Chancery Court, 27/07/10/08:48/62 ATE/2

Date Reference		Charge	Credit
Net vatable supplies	1099.81		
VAT	197.37		
Sub-Total	1297.18		
Non vatable supplies/exempt supplies	19.58		
Invoice Total	1316.76	2,051.64	
SIGNATURE:			

Please Debit/Credit my account by the amount indicated above.

Approval Code: A25 Card Number: XXXXXXXX Expiry: 02/14 Swiped Start Date: Issue Number: Transaction ID: 33214483796 SALE Terminal ID: 00215A1149C4 Merchant ID: 9420242612

Your Marriott rewards points/miles earned for this stay will be credited to your account and will appear on your next statement. Please note you have earned additional bonus points for: \*Silver \* \* To check your balance or view member exclusive offers, log on to www.marriottrewards.com or call UK 020-7012-7312.



Ms. Thella Bowens 3225 N Harbor Drive FI 3 92101 San Diego United States of America

		Balance				0.00	1.3044
		Total	23	0.00		230.00	300.01
28.07.10	American Express manual					230.00	
28.07.10	motions Breakfast Food CHECK# 4011189	\.50	3	1.00	⇒ 40.¥	8 (Rece atta	iched)
27.07.10	Logis/Room Charge	1.304	% 19	9.00	= 259.51	5	
Date	Description			ebit EUR		Credit EUR	
Invoice No. Please inc	: 233014 lude at time of payment: Client ID:	Departure Page Cashier		: 28 : 1 c	.07.10		
The Westir INVOICE	n Grand Frankfurt	Date Room No. Arrival		: 42	.07.10 3 .07.10		

	Net EUR	VAT EUR	Gross EUR
VAT 0%	0.00	0.00	0.00
VAT 7%	185.98	13.02	199.00
VAT 16%	0.00	0.00	0.00
VAT 19%	26.05	4.95	31.00

r

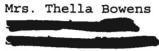
the westin grand frankfurt konrad-adenauer-strasse 7, 60313 frankfurt/m., deutschland t +49 (0)69.2981.0 f +49 (0)69.2981.810 grandfrankfurt@westin.com westin.com/grandfrankfurt



# PLATZL HOTEL

IN MÜNCHENS HISTORISCHER ALTSTADT

Platzl Hotel · Postfach 100 727 · D-80081 München



USA

Platzl Hotel, München, 31.07.10

INVOICE 375466

Cashier	:	7 OF	Page	:	1
Room	:	343			
Arrival	:	28.07.3	10		
Departure	:	31.07.3	10		

Mrs. Thella Bowens

Telefon: +49-(0) 89-23 703-0 Telefax: +49-(0) 89-23 703-800 e-mail: info@platzl.de Internet: www.platzl.de

#### Zimmerreservierung:

Telefon 00800-550 50 550 (gebührenfrei) Telefax +49-(0) 89-23 703-727

- 166 Zimmer mit Bad/Dusche, WC, Fön, Telefon, Radio, TV, Minibar und Klimaanlage
- 1 bayerische Suite
- Erholungsbereich "Maurischer Kiosk" mit Fitnesstaum, Solarium, Aroma-Dampfbad, Erlebnisduschen, Sauna, Ruhebereich mit Lichttherapie
- Hotelbar
- Sieben Veranstaltungsräume für 5 bis 140 Personen
- Restaurant Pfistermühle in den historischen Gewölben von 1573 mit gehobener Bayerischer Gastronomie.
- Wirtshaus Ayingers am Platzl 1a lebendige Wirtshauskultur an traditionsreicher Stätte

Description	Date	Debit EURO	Credit EURO	
Telephone	28.07.	1.10 ->=	L44	
Room Charge	28.07.	146.00	211.00	
Service charge	28.07.	18.00	~17:14	
Room Charge	29.07.	146.00)	2)440	
Service charge	29.07.	146.00	~ 1.13	
High Speed Internet	29.07.	16.50 -> =	21.63	
->#343 : 13MB/0026B9C				
Room Charge	30.07.	146.00 3 164 =	21499	
Service charge	30.07.	18.00		
Manual American Express	31.07.		509.60	
	Total:	509.6	50	509.60-7668.04
	Balance	: 0.0	0 EUR	= 1.3109
Total taxable		509.	60 EUR	
Revenue net 19.00 %		60.	17 EUR	
Revenue net 7.00 %		409.	35 EUR	
Tax 19.00 %		11.	43 EUR	(71.60)
Tax 7.00 %		28.	65 EUR	(438.00)

7/22	7/23 Dinner
Lunch	BACCO RESTAURANT **
Renaissance Chancery Court	25 RED LION STREET HOLBORN
Lounge VAT No: 225858540	LONDON WC1R 4PS
53 Shruti 1	FAX: 0207 242 7900
TBL 4/1 CHK 3829 GST 3	
22JUL'10 14:57	able #10
1 Ploughman Baguet 13.75	ersons: 3
1 Onion Soup 9.50 1 Scotch Broth 9.50	************************************
1 Coffee 4.75	27
1 Tea 4.75	
1 Cream Tea 10.95	MixED SALAD 8 and K 6.95
SUBTOTAL 53.20 12.5% Svc Chg 6.65	VNETTA ARRABBIATA 13
TOTAL DUE 59.85	CCHERI POMODORO 6
GRATUITIES AT YOUR DISCRETION	KED SALAD 4
	IN AWAY O
iratuity: 10- TOTAL 69.85	<b>%</b> SERVICE CHARGE E
- FE10884	ub Total 66.3
AME:	49 PM 23/07/2010 MUNARA - 27.50
00M No:	
	THANK YOU FOR CALL 38.89 10% SERVICE CHAR - 275 - 10% SYC
IGNATURE :	ADDED TO YOUR BI 36.4
52 High Holborn,London WC1V 7EN	ADDED TO TOUR DI 36.1 T
Tel No: 020 7829 9888	www.baccolondon.co.uk X 1.545%=#55.84 VAT NO: 810 3156 77

Includes Stoff: BRONT BUND Hompton BRONN



Rail Gourmet U.K. Ltd. 169 Euston Road, London. NW1 2AE VAT Number: 646 6744 04

RECEIPT		
Cir. No. 8052 Date2	3/01.	.10
	£	p
*COFFEE / TEA		
*BEERS / WINES / SPIRITS	Í	
*MINERALS / WATER	2	52
*CRISPS / NUTS		
*CONFECTIONERY		
SANDWICHES / CAKES /		
PASTRIES		
TOTAL 1.545% 70	2	80=
* includes VAT at the stan	dard ra	ate #4.82

SHOULD THE TOTAL AMOUNT EXCEED £250 A FULL VAT INVOICE, IF REQUIRED, CAN BE OBTAINED FROM THE ABOVE ADDRESS ON PRODUCTION OF THIS RECEIPT. RG04

7/23-Other MUS LUNC BRUMUS

HAYMARKET HOTEL 1 SUFFOLK PLACE LONDON SW1Y 4BP T: 020 7470 4007 F: 020 7470 4004 E: brumus@haymarkethotel.com www.brumus.com

17 Mirtier		
itanija Kanija	.⊴⊭ [c.⊐∠	3et 3 354110 154-5
े पर्वत्र ह	Gr (43 ) 3.7)	78,99
	10	25.30 17.37 15.30 3.91 51.41
100° 10	<b>.</b>	914.89 
$\gamma \in \frac{1}{\sqrt{2}} + \frac{1}{\sqrt{2}}$		The second second second

Includes Staff: Brent Buma Hompton Brown

AN OPTIONAL SERVICE CHARGE OF 12.5% IS ADDED TO YOUR BILL

7/24 IGO RESTAURANT DON WC2B 421972175 :27471500 DSET:01	S12
· 02/14 · PED · E · MOUNT AL · · · ·	
•NKYOU FOR YOU 07/10 21:55 H CODE: 14 0385	R CUSI
1,545%	

7/24 Oinner

One Aldwych Indigo Restaurant VAT. GB 709 9178 95

1044 Peter	2
TBL 43/1 CHK 1800 24JUL'10 20:00	GST 3
1 Belu Spark 75cl ⁄1 Sweetcorn Soup 2 @ 6.50	3.95 6.50
Tomato consomme 1 Sm Own Salad	13.00 9.50 44.00 19.50
-1 English Tea	4.00
	96.50 25.90 15.30 . <b>70</b>
18.23 VAT Included In	122.40
ROOM No:	

NAME : \_\_\_\_\_

SIGNATURE:

TEL: 020 7300 1000 FAX: 020 7300 1001 www.onealdwych.co.uk

#### 1 3,95 9.30 19.50 4.00 36.95 4.62 40.57 X 1. EUF \$62.68

7/25 DINNER DINNER *** Trafalgar Tavern *** Park Row, Greenwich Tel: 020 8858 2909 VAT#: 627 2958 13	7/26 LONCH Renaissance Chancery Court Lounge VAT No: 225858540 506 Stephani 6/2 CHK 3950 26JUL'10 15:27 1 BLT 12.50 1 Cream Tea 10.95 SUBTOTAL 23.45 12.5% Svc Chg 2.93 SUBTOTAL 26.38 GRATUITIES AT YOUR DISCRETIO
r: Vinroy       25/07/201         er: Louisa       25/2         25/2       4:36 P         s: 5       1009         nt #: 1       1009         Fish&Chips       13.2         4.0-       3.2-         tal       20.4         0.00	Sratuity:TOTAL VAME: CON NOTEL BILL) NAME: SIGNATURE: 752 High Holborn,London WC1V Tel No: 020 7829 9888
ce Charge $(3.25)$ 20.4 1.66 2.5 14.91 23.0 Hance Due 23.01 We thank you for your custom	7/26 DINNER PIZZAS EXPRESS
14.91 x 1.55%	High Holborn 99 High Holborn WC1V 6LF Tel. 0207 8315305 ZA EXPRESS NO:627 0767 30 TOU 26/07/2010 22:56 T617Q1YA I 1 sale 154027 Table 61 Covers San Pellegrino 50cl 2.3C American Hot 8.85 TOTAL 11.15 CASH 20.0C

1,5

11.15 \$17.38

8.85

CHANGE

		ىدىمىيە ئەتبى <del>رى</del> بىرىمىيە ئەتبىرى	104
7/27 DINMOR	Kuffler 7	28	6
OINME	SPATENHAUS an der Oper	Oiwr	NER
NEW COLORING			Rechnung
	Seite 01 28.07.10 · UstID Nr. DE	R-Nr.: 51 221047804	9 Tisch 242/-
	1x Käsespätzl 1x Bratkartof		13,90(1) 2,60(1) <del>7,50(1)</del>
rzen Stern rzerstern.de 07.2010 Tisch: 10 <b>NG 7710</b> let 21,50 EUR 21,50 udel 7,40 EUR 7,40	Netto(1) + 19,0%	 Eur MwSt	
del 7,40 EUR 7,40 Summe: 28,90 EUR	Summe: 1.	468% Eur	24,00
24,29 WSt: 4.61 37.71	Es bed ⊅	$\frac{1}{4.40} = 1$	1icic - 3.0074 12.5%
			35, 22
an ann an an ann à an Preis Bei g €∕kg €	For Fax	Reservierung: n 089. 290 706-0 x 089. 291 305 4 enhaus@kuffler.de	
		- 19% - + tip	6,50



Konrad-Adenauer-Strasse 7 60313 Frankfurt am Main Tel 0049/(0)69 29810

#### ZZMotions

Datum:	08:34:45	28.07.10	
Rechnung:	4011189		
Tisch:	423/1		
Service:	Uwe Griga		
ühstück	( 31	.00) 31.00	

#### :al: 31.00 EUR

ON MOTEL BILL

Zimmer: 31.00 EL Zimmernummer: 423 Gastname: Bowens #40.45 Gästeanzahl: 1

Tip:\_\_\_\_\_

des Gastes in Druckbuchstaben/ Name

r Nr./ Room No

-schrift des Gastes / Signature

7/28 LUNCH DB FERNVERKEHR AG STEPHENSONSTR. 1 60326 FRANKFURT AM MAIN

) NR. : DE 260656754

	ummer:	ICE3N	000721
	stnummer:		020249
č	nummer:	93805	4033056

MC #01 17:18 000020 EZZAHRAO 28-07-2010 17:18 ZZAHRAOUI

#### RECHNUNG

	RECHNU	NGSNUMMER	а. З
1	TOTAL	ANT CLASSIC CARD RG	EUR1, 20 EUR2, 10 EUR3, 30 EUR3, 30
	UMSATZ MWST	7% 7%	EUR3, 08 EUR0, 22

#### AMERICAN EXPRESS ditverkauf

·te			
rag tig	:	EUR3, 30 02/14	4.33
			1.312%

# OBERPOLLINGER

eine Betriebsstätte der KARSTADT Warenhaus GmbH Neuhauser Straðe 18 80331 München Geöffnet: MO-SA 09:30 bis 20:00 Uhr Guten Appetit wünscht Le Buffet

EUR

1 PASTA STATIO 197 3066	7,50 V
2. SPEZIALBR?TC 197 0555	0.80 v
3 GINGER ALE/T 197 0885	2,00 V

Zu zahlen: "		EUR	10,30	
Gesebe	n:			
Bar:		EUR	50,00	
Zurück:		EUR	39,70	
MwKz	MwSt	St.Betras	Nettobetray	
V	19.0%	1,64	8,66	

Stevernummer: 112/5700/1123

erschrift

bediente Sie: HERR EZZAHRAOUI

T-AUSWEIS: LEISTUNGSORT GEMÄß . 57 COUNCIL DIRECTIVE 2008/8 EC

N SIE SCHON UNSER FRÜHSTÜCKSANGEBOT BEI UNS KÖNNEN SIE - - COLINCTINKEN.

Wir hoffen es hat Ihnen seschmeckt. Vielen Dank für Ihren Besuch und bis zum nächsten Mal.



#### Rechnungs-/

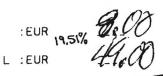
Bunummer filiole Kosse Lieferdatum . 4010238 /46 304 .9 .17 .017 17 15

7/29 Din w/stoff, Ho <b>FIUL-GASTS</b> DER KATZL Bräuhausstr.6 8 e1. 089/333360 Fax StNr. 143/13 Rechnungs N	Moton GROWN ST. GMBH MACHER 0331 München . 089/24205538 8/60532
[isch 13	29.07.2010
· tto	16,50
ata	14,50
	<del>-10,00-</del>
1 t2 19% Nétto tox 19% r 20:16	41,00 € 3\- 34,45 € 6,55 € 41,00 € >= \$64.23 1.366%
7/29 Dirmor N-D-E-N-B-E-L-E- Per Katzimacher Braeuhausstr. 6 80331 Muenchen inal-ID 5430' 2026276 BNr (	$B  \times 1.566\%$ ===================================

/

Kartenzahlung AMERICAN EXPRESS

UR 41.00



7/29 other



AM MARIENPLATZ Kaufingerstraße 1-5 80331 München Tel.: 089/23185-0

ss still 0,85 3 04260115711 wegpfand 1 00000000055	1062	· • • • • • #	2,49 0,25
+++ Total		EUR	2,74
2	74 X I.3	566 = <u>4. a</u> FIR	
⊲ kgeld		EUR	~ 3,00 0,26-
towarenwert	EUR	2,30	0,20
14 : 19,00%	EUR	0,44	

diesen Einkauf hätten Sie mit der "AYBACK Karte 2 Punkt(e) erhalten! (außer für Bücher)

Wir haben für Sie geöffnet: ntag – Samstag 9:00 – 20:00 Uhr

Bitte den Kassenbon für Umtausch aufbewahren! WEEE-Reg.-Nr. DE80848693

UST-ID: DE 811142395



lunch

#### GER OR

eine Betriebsstätte der KARSTADT Warenhaus GmbH Neuhauser Straðe 18 80331 München Geöffnet: MO-SA 09:30 bis 20:00 Uhr Guten Appetit wünscht Le Buffet



AS-Pride-Code 10 30-1 10 Capt.-Ref.= 0731 AID59: 45 00 GEN.NR: 45

Zahlung erfolgt \*\* \*\*

St Betras Nettobetras MwSt Makz 8,74 1,66 19.0% 1 Stevernummer: 112/5700/1123

	EUR
1 PASTA STATIO 197 3066	7,50 V
2 SPEZIALBR?TC 197 0555	0,80 V
3 POS-COLA 0.3 197 0811	2,10 V

Zu zahlen:	EUR	10,40
Gegeben: AMEX	EUR	10,40 × 1.81
K-U-N-I	D-E-N-B-E-L-E-G	\$13.63
B+S	Card-Service	1,31%

Bezahlung American Express

Betrag	10,40 EUR
30 07.2010	15:47
Terminal-ID	60213064
TA-Nr 001076	Beles-Nr. 0378
Kartennr	******
gültig bis (MM/J	J) 02/14
VU-Nummer	9508448339
Autorisierungsan	twortcode 0
Autorisierungsnu	0.401.07
AID	0002

CONTINUED

Wir hoffen es hat Ihnen geschmeckt. Vielen Dank für Ihren Besuch und bis zum nächsten Mal.



#### Rechnungs-/

Bronoummer Filiale Kasse Lieferdatum 303 30.07 2010 15 48 14020366 746

7/30 PR-

HAAGEN DAZS CAFE Tal 4 80331 München Tel. Rechnung 1. Kopie

 ⇒ Affogatto ★ <del>2 Scoops</del>	1.31 × € à € 4,50 €
il toumsatz t 19% t 7%	€ 1 € 13,28 € 0,93 € 0,59
<b>∖R</b> Jick 27 30.7.2010 3	€ 20, Bed. 3

7/31 Dinnor /





SAT JULY 31,2010 CHECK #1180056--1

1 BLT		\$7.95
1 BOTTLE DRINK		\$2.45
SUB-TOTAL	:	\$10.40
TAX	:	\$0.98
TOTAL	\$11	.38

DISCOUNT #: \_\_\_\_\_

Time: 16:45 1 CUSTOMER

Welcome to Lori's Diner

YOU HAVE BEEN SERVED BY : Elizabeth G 57

: \$11.38

SAN FRAN.

7/22 Curroncy Exchange

#### AMERICAN EXPRESS EUROPE LTD TERMINAL 3 AIRSIDE ARRIVALS HEATHROW AIRPORT, HOUNSLOW MIDDX TW6 1QG, VAT190198548, GB TEL:0208 990 9826

Ξ				
2	UL	2010	TIME:	12:47
۲.		01	TRANS:	080

SUY CURRENCY:	UNITED	STATES I	NOTES
AMOUNT:			110.00
EXCHANGE RATE:		1.	703300
LOCAL EQUIVALENT	:		-64.58
COMMISSION:			3.00
TOTAL:		,	-61.58
L COMMISSIONS: TO CUSTOMER:		3.28	3.00 61.58
E . NESS DATE:		22 JU	2010

EXCHANGE OVER B300 (STERLING IVALENT) OF FOREIGN CURRENCY INTO RLING AND BENEFIT FROM COMMISSION EXCHANGE UP TO ORIGINAL PURCHASE MERICAN EXPRESS DEPARTURE LOCATIONS B. DEAL DOES NOT GUARANTEE SAME RATE.THANK YOU FOR YOUR CUSTOM. UN AMER BILL

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

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

TRAVELE	R:	Thella Bowens	DEPT. NAME & NO. Executive Office		fice / #6						
DEPARTŲ	RE DATE:	7/8/2010	RETUR	N DATE:		7/9/2010		REPOR	T DUE:	8	/8/10
DESTINAT	ION:	Monterey, CA									
expenses a	and approvals	ority Travel and Lodging Expense Res. Please attach all required support ns should be explained in the space p	ing documenta	tion. All n							
			Authority Expenses		agen die gebeure		Employe	e Expens	<del>8</del> \$		
			(Prepaid by Authority)	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY 7/9/10	SATURDAY	TOTALS
Air Fare, R	ailroad, Bus (	(attach copy of itinerary w/charges)	479.80								0.00
Conference	e Fees (provio	le copy of flyer/registration expenses)			0.000 - 200						0.00
Rental Car	*										0.00
Gas and O	il*										0.00
Garage/Pa	rking*								-		0.00
Mileage - a	ttach mileage	e form*									0.00
Taxi and/or	Shuttle Fare	(include tips pd.)*									0.00
Hotel*			185.98					25.00			25.00
and statement and statement of the statement of the	Internet and	Fax*									0.00
Laundry*	-										0.00
		naids,bellhop,other hotel srvs.)									0.00
Meals (include	Breakfast*							9.41			9.41
tips pd.)	Lunch*		i internet internet			·					0.00
	Dinner*		and the second								0.00
	Other Mea	and the second sec	101211111111111111111111111111111111111	and an entering	NATIONAL CONTRACTOR	at the Agency of South	NUMBER OF STREET	No. Markey Const	2.50	escrete contract	2.50
	non-reimburs	sable expense	法规制的利用的总	目的自己的	Constant of the		State State	使的目标。			
Hospitality	COLUMN TO THE OWNER										0.00
Miscellane	ous:								-		0.00
											0.00
					-						0.00
"Provide de	etailed receip					0.00	0.00				0.00
		Total Expenses prepaid by Authority	665.78	0.00	0.00	0.00	0.00	34.41	2.50	0.00	36.91
Explanation	n:			1	Total Exp	enses Pre	paid by Au	thority			665.78
Thella to reimburse \$185 in air fare due to decision to extend stay. (Including cash advances)				36.91							
Grand Trip Total				702.69							
				1	Less Cas	h Advance	attach cop	of Authority	ck)		
					Less Expe	enses Pre	paid by Au	thority			665.78
	s and business heck Request	affiliations of any persons whose meals w	rere paid by trave	ler.			ive amoun ative amo				36.91
<sup>3</sup> Attach per	sonal check pay	yable to SDCRAA			N	ote: Send t	his report t	o Accountin	ng even if t	he amount l	s \$0.

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

Travel and Looging Expense Reinbursement Policy 3.40	Business Expense Reimbursement Policy 3.30
Prepared By: Dianne Berg	Ext.: 2445
Traveler Signature:	Date:
Approved By:	Date:
AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTE	E (To be certified if used by President/CEO, Gen. Counsel, or Chlef Auditor)

(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: <u>Thella Bowens</u>		_ Dept: _ #6
Position:	President/CEO	Chief Auditor
C All other Authority er	nployees (does not require executive committ	ee administrator approval)
2. DATE OF REQUEST: 4/29/10	PLANNED DATE OF DEPARTURE/RETURN:	7/8/10 / 7/9/10
3. DESTINATIONS/PURPOSE (Provide of paper as necessary): <u>Destination: Monterey, CA</u> Explanation:	e detailed explanation as to the purpose of the purpose: California Alrpe	
4. PROJECTED OUT-OF-TOWN TRAV A. TRANSPORTATION COSTS • AIRFARE • OTHER TRANSPORTAT B. LODGING C. MEALS D. SEMINAR AND CONFEREN E. ENTERTAINMENT (If applic F. OTHER INCIDENTAL EXPE TOTAL PROJECTED T	S: \$ FION (Taxi, Train, Car Rental) \$ S ICE FEES \$ able) \$ NSES \$	250 50 300 100 700
<b>CERTIFICATION BY TRAVELER</b>	By my signature below, I certify that the ab	ove listed out-of-town travel and
	hority's Policies <u>3.30</u> and <u>3.40</u> and are reaso	onable and directly related to the
Authority's business.	Da	ite:
<ul> <li>Clerk's signature is required).</li> <li>By my signature below, I certify the follor</li> <li>1. I have conscientiously reviewed</li> <li>2. The concerned out-of-town trave Authority's business and reason</li> <li>3. The concerned out-of-town trave Authority's Policies 3.30 and 34</li> <li>Administrator's Signature:</li> </ul>	the above out-of-town travel request and the of and all identified expenses are necessary f able in comparison to the anticipated benefit of and all identified expenses conform to the of the travel of the travel	e details provided on the reverse. for the advancement of the to the Authority. requirements and intent of Date: BAMA
AUTHORITY CLERK CERTIFICA	TION ON BEHALF OF EXECUTIVE	COMMITTEÉ
1, Sara B. R.	, hereby certify	that this document was approved

d (Please leave blank. Whoever clerk's the meeting will insert their name and title.) 5/24/10 by the Executive Committee at its meeting.

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

### Berg Dianne

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From: Sent: To: Subject: Attachments:	Scott Mackerley [smacker Wednesday, June 30, 20 Berg Dianne; Harris Matt Travel Itinerary 08JUL S/ 44907911.PDF; 4490791	010 12:29 PM t; SMACKERLEY@TRAVELTRUS AN BOWENS	ST.COM
BOWENS/THELLA	DEPT 6	30Jun10 12:28p	m
INVOI *******TICKE THIS IS AN E-T A GOVERNMENT IN THIS TICKET IS THE FLIGHTS BO OR CANCELLED B IT MAY HAVE NO YOUR OUTBOUND ************************************	TLESS TRAVEL INSTRUCT ICKET RESERVATION. SSUED PHOTO ID IS NEU NON-REFUNDABLE AND M OKED. IF THE RESERVA EFORE THE DEPARTURE ( VALUE. CONTACT TRAV FLIGHT IF CHANGE IS M ************************************	ING DOCUMENT TIONS********* EDED AT CHECK IN MUST BE USED FOR ATION IS NOT USED DF YOUR FLIGHTS VELTRUST BEFORE NECESSARY. ************************************	
Air United Airline From: San Dieg To: Los Ange	o CA, USA 08Julié les CA, USA 08Julié		irmed
Depart - COMMU Arrive - TERMI United Airline			
** ECONOMY PLU Flight Duration Class of Servi		ED **	
To: Monterey,	s Flight# 6290 les CA, USA 08Jul10 /Carmel CA, U 08Jul10	9 Class:S Seat:2B 9 07:57am Thursday 9 09:08am Thursday 0nal Jet Status: Confirmed	ł
LAX-MRY OPERATI	ED BY /UNITED EXPRESS	SYSKYWEST AIRLINES	

BOWENS THELLA Ticket#:7895729909 Ticket Base Fare: 206.50 Invoice#:1175860 Ticket Tax: 58.30 Total Ticket Amount: 264.80 Electronic: YES BOWENS THELLA manged return date Ticket#:7899037246 Ticket Base Fare: 159.31 Invoice#:1175860 Ticket Tax: 0.69 Total Ticket Amount: 160.00 Electronic: YES SERVICE FEE DOCUMENT #: 0524769513 FEE AMOUNT: 30.00 SERVICE FEE DOCUMENT #: 0525245783 FEE AMOUNT: 25.00 479.80 BILLED TO: AMERICAN EXPRESS ENDING IN 1006

IMPORTANT - PLEASE REVIEW YOUR TRAVEL ITINERARY/DOCUMENTS FOR ACCURACY AND NOTIFY YOUR TRAVELTRUST AGENT WITHIN 24 HOURS OF ANY ERRORS OR DISCREPANCIES TO ENSURE THERE ARE NO ADDITIONAL COSTS INCURRED.

DUE TO CONSTANTLY CHANGING SCHEDULES, TRAVELTRUST RECOMMENDS THAT YOU RECONFIRM YOUR FLIGHTS DIRECT WITH THE CARRIER. 72 HOURS PRIOR FOR INTERNATIONAL TRAVEL AND 24 HOURS PRIOR FOR DOMESTIC TRAVEL.

ResFAX(r) Copyright(c) 1992-2010 Cornerstone Information Systems, Inc., Bloomington, IN

\*\*\*ResFAX Message ID 674990\*\*\*
\*\*\*ResFAX Itinerary E-Mail\*\*\*



Thella Bowens Room Number: 1426 3225 North Harbor Dr Arrival Date: Jul 08, 2010 San Diego CA 92101 Departure Date: Jul 11, 2010 United States Conf. No: 2524133 Page No: 1 of 1 Folio No: 2867887 INFORMATION INVOICE

A/R Number	:		
Group Name	:	CA Aiports Coun	
Company Name	:	California Aiports Council	

#### Thank you for choosing the Monterey Plaza Hotel & Spa

Date	Description		Charges Payment
Jul 08, 2010	Advance Deposit		185.9
Jul 08, 2010	Room		168.00)
Jul 08, 2010	Room Tax		16.80
Jul 08, 2010	Monterey County Assessment Fee		1.00 21098
Jul 08, 2010	CA Tourism Assessment Fee		0.18 - 185.98
Jul 08, 2010	Resort Fee		25.00) 25.00
Jul 09, 2010	Room		168.00
Jul 09, 2010	Room Tax		16.80
Jul 09, 2010	Monterey County Assessment Fee		1.00 > 210.98
Jul 09, 2010	CA Tourism Assessment Fee		0.18
Jul 09, 2010	Resort Fee		25.00/
Jul 10, 2010	Room		168.00
Jul 10, 2010	Room Tax		16.80 210.98
Jul 10, 2010	Monterey County Assessment Fee		1.00
Jul 10, 2010	CA Tourism Assessment Fee	~ <u>_</u>	0.18
Jul 10, 2010	Resort Fee		25.00/
	*****	Total	647.93 185.98
		Balance	5461-95

7/8-BROOKPOST

HASHO:T A RUADHOUSE T-8 LU: ANGLI: TNT'L AIRPORT

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	AHJUN	\$9.	41

719-Other

Monterey Plaza Hotel & Spa \*La Strada\* 400 Cannery Row Monterey , CA 93940 (831) 646-1700 (831) 646-5937 Fax

7535 Tarah B -------Chk 7848 T Gs 🕠 Jul09'10 08:26AM ------1 MD Cafe au Lait 2.50 2419796 9510/F&B Cash CASH 5.50 Subtota1 2.5 Payment 2.5 Change Due 3.0

# **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 R. Boland					
Departure Date:	6/18/2010	Return Date:	6/23/2010	Report Due:	7/23/10	
Destination:	New orleans, LA					_

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

	Intess Capenae Remodisement Folio	Authority Expenses	s Board Member Expenses							
		(Prepaid by	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
		Athty)	6/20/10	6/21/10	6/22/10	6/23/10		6/18/10	6/19/10	TOTALS
Daily PerDiem Limitations:	Oracformance Hatel Date			101.00	101.00			101.00	404.00	
**GSA Daily Hotel Rate or	and the second	THE REPORT OF THE REPORT	161.20	And the second se	161.20	FO OF	signion autokate	161.20	161.20	and a second
	ainment & Incidentais (ME&I)		71.00	71.00	71.00	53.25		53.25	71.00	
Air Fare, Railroad, Bus (attach		428.14								0.00
Conference Fees (provide cop)	y of flyer/registration expenses)	800.00								0.00
Rental Car						165.55		-		165.55
Gas and Oil						5.13				5.13
Garage/Parking			13.42	13.42	13.42	-		13.42	13.42	67.10
Mileage - attach mileage form						5.50		5.50		11.00
Taxi/Shuttle Fare (include tips pd.) To/From meetings, airport, etc. Hotel - Actual Expense Paid - Excluding Taxes										0.00
			140.00		140.00			140.00	140.00	
Allowable Hotel (Lessor of Actual or GSA Allowance) Hotel Taxes Paid		and the second	140.00		140.00	0.00	0.00	140.00	140.00	700.00
Hotel Taxes Paid			21.20	21.20	21.20			21.20	21.20	106.00
Telephone, Internet and Fax										0.00
Laundry										0.00
Meals, Entertainment & Incl	dentals (M,E&i):		· · · · · · · · · · · · · · · · · · ·	國際認識性認識					間的自由	
Meals (include tips pd.)	Breakfast					行。10.002200 公司以上的位置			國政治部分	
	Lunch	2013年1月1日) 1月1日日日 - 子山山	國家國家			13.16		8.70		A State of the
	Dinner							44.00		
	Other Meals	常的意思。	的目的思想	的名称是						
Entertainment (Hospitality)			國際局部的	秋日三日 二十二日						
Tips Paid to Maids, Bellho	ps and other hotel servers			10.00						
Taxi/Shuttle Fare (include t	ips pd.) To/From meal destinations		時に認識	領導國際管理		<b>教授</b> 國家				なななな
Total Meals, Entertainme	nt & Incidentais	國家議論	0.00	0.00	0.00	23.16	0.00	52.79	0.00	
GSA Allowance for M,E&	(from above)		71.00	71.00	71.00	53.25	0.00	53.25	71.00	E.
Allowable M, E&I (Lessor d	of Actual or GSA Allowance)	間になって	0.00	0.00	0.00	23.16	0.00	52.79	0.00	75.95
Alcohol is a non-reimbursable										0.00
Miscellaneous: Baggage han	dling tip @ NO airport					3.00				3.00
American Airlines baggage fe	e					25.00		25.00		50.00
										0.00
	Total Expenses	1,228.14	174.62	174.62	174.62	227.34	0.00	257.91	174.62	1,183.73
Add any additional details as need	ded for explanation (attach add'l sheet if ne	eded):								
				Grand Trip	Total					2,411.87
					- I U CAI					2,411.07
				Less Cash	Advance (	attach copy of	Authority ck)			
Alcohol is a non-reimbursab	ie expense	-				aid by Autho				1,228.14
<sup>1</sup> Give names and business affi	liations of all persons whose meals we	re pald by tra	veler.	the second second	11 C C C C C C C C C C C C C C C C C C	live amount,		ock request		1 1 1 1 1 1 1 1
1						jative, attach				1,183.73
railure to attach required documentation	on will result in the delay of processing reimbursen	ient, ij you navi	e any			this report to				1,100.70

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

Prepared By:	Anne Warren	Ext.:	2408
Traveler Signature:	15C Stint Thee Name	Date:	
Administator's signature:	alan	Date:	7.12.10
<i>•</i>	AUTHORITY OLEBACERTIFICATION ON BEHALF OF E	XECUTIVE COMMITTEE (	To be completed by Clerk)
I,	hereby certify that this document was	s approved by the Executiv	e Committee at it's meeting on
Clerk Signature:		Date:	

Clerk	Signature

#### SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

#### MONTHLY MILEAGE and PARKING FEE REIMBURSEMENT REPORT Board Members Only

IAME	Bruce R. Bo	bland	June 18 an	id June 23,	2010POV	' Mileage	
DATE	MILES DRIVEN	DESTINATION AND PURPOSE OF TRIP					
6/18/10	11.00	SDIAfor New Orleans AMAC Trip					
6/23/10		HomeReturn From N.O. AMAC					
		trip.					
					240		
						ц.	
<u> Car</u>							
	22,00						
-							
liles Driven							
		·····		· · · · ·			2
lileage Rate	<i>, ,</i>					0.5	
						0.0	\$11.00

I HEREBY CERTIFY HATTHIS REPORT OF MILEAG TRAVELED ON OFFICIAL AIRPORT AUTHORITY BUSINESS IS TRUE AND CORRECT:

mu K. De SIG

APPROVAL

SDCRAA FORM NO.\_\_\_\_

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

GENERAL INSTRUCTIONS:
A. All travel requests must conform to applicable provisions of Policies <u>3.30</u> and <u>3.40</u> .
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 R. Boland Dept: Board
Position: President/CEO F Gen. Counsel F Chief Auditor
☐ All other Authority employees (does not require executive committee administrator approval)
2. DATE OF REQUEST: 5/18/10 PLANNED DATE OF DEPARTURE/RETURN: 6/18/10 / 6/23/10
3. DESTINATIONS/PURPOSE (Provide detailed explanation as to the purpose of the trip- continue on extra sheets
of paper as necessary): Destinction: New Orleans, I.A. Burness: Attend conference
Destination: New Orleans, LA       Purpose: Attend conference         Explanation: Board Member Bruce Boland will be the Authority's Board representative at the Airport Minority
Advisory Council's Airport Business Diversity Conference
4. PROJECTED OUT-OF-TOWN TRAVEL EXPENSES A. TRANSPORTATION COSTS:
• AIRFARE \$ 400
OTHER TRANSPORTATION (Taxi, Train, Car Rental)     S     235 B. LODGING     S     815
B. LODGING \$ 815
C. MEALS \$ 250
D. SEMINAR AND CONFERENCE FEES \$ 800
E. ENTERTAINMENT (If applicable)
F. OTHER INCIDENTAL EXPENSES\$200TOTAL PROJECTED TRAVEL EXPENSE\$2700
<b>CERTIFICATION BY TRAVELER</b> 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: 15055000 Date: 5/19/10
Travelers Signature: 1 1 1 5 and Date: 5/19/10
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.
<ol><li>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.</li></ol>
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: 5.19.10
Administrator's Signature.
AUTHORITY CLERK CERTIFICATION ON BEHALF OF EXECUTIVE COMMITTEE
I, Sag B. R. , 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 $5/24/10$ meeting.
(Leave blank and we will insert the meeting date.)



#### Traveitrust 274 North Coast Fighway 181 Encinitas, Ca. 92024 Tol: 760-635-1700 Fax 760-635-1720 Website: www.travetrust.com

BOLAND/BRUCE R	19-May-2010 11:50 am
	Page 1 of 2
	AMERICAN E-TICKET CONFIRMATION *** G F S Q R R *** PLEASE CHECK NEW CARRY-ON RESTRICTIONS DIRECT WITH YOUR CARRIER OR CALL US 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 US BEFORE YOUR OUTBOUND FLIGHT IF CHANGE IS NECESSARY. ************************************
18-Jun-2010 09:50am Friday	AirAmerican AirlinesFlight#1631Class:SFrom:San Diego CA, USATo:Dallas/Ft Worth TX, USAMeal:Food For PurchaseSeats:Seats:Seat: 12BEquipMcDonnell Douglas MDStatus:ConfirmedDepart:18-Jun-2010Friday09:50amStops:0Arrival:18-Jun-2010Friday02:55pmDepart -TERMINAL 2Arrive -American AirlinesIocatorGFSORDAAAA Frequent Flyer#GFSORDBOLAND/BRUCE RFlight Duration:3 hour(s) and 05 minutes
18-Jun-2010 04:50pm Friday	Class of Service: Coach         Air       American Airlines       Flight#       1489       Class: S         From:       Dallas/Ft Worth TX, USA       To:       New Orleans LA, USA         Meal:       None       Seats:       Seats:       Seats:       Seats:         Equip       McDonnell Douglas MD       Status:       Confirmed         Depart:       18-Jun-2010       Friday       04:50pm       Stops:       0         Arrival:       18-Jun-2010       Friday       06:15pm       American Airlines       Iocator:       GFSQRR         AA       Frequent Flyer#       EQUAND/BRUCE R       Flight Duration:       1 hour(s) and 25 minutes       Class of Service:       Coach
18-Jun-2010 Friday	Crass of Service: CoachCarHertz Rent A CarType:Pick Up:New Orleans LA, USAConfirmation:E7480907572Return:23-Jun-2010New Orleans LA, USAApproximate Price:233.23USDRate Info:USD28.48 Ulmtd WD Xtra Day42.73 Ulmtd Xtra Hr42.73 UlmtdApproximate Price:USD233.23 UNL 5DY OHR 76.58MCArrival Time:06:15pmDropoff :New Orleans LA, USADropoff :New Orleans LA, USADropoff :New Orleans LA, USADropoff :04:26pmHERTZ800-654-3131CD-1421398
23-Jun-2010 04:26pm Wednesday	AirAmerican AirlinesFlight#1057Class:OFrom:New Orleans LA, USATo:Dallas/Ft Worth TX, USAMeal:NoneSeats:Seats:Seat:21BEquipMcDonnell Douglas MDStatus:ConfirmedDepart:23-Jun-2010Wednesday04:26pmStops:0Arrival:23-Jun-2010Wednesday06:01pmMeerican AirlinesIocator:GFSQRRAA Frequent Flyer#McDiffer#FBOLAND/BRUCE RFlight Duration:1 hour(s) and 35 minutesClass of Service:Coach



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

BOLAND/BRUCE R		19-	May-201	10 11:50 ar Page 2 of 3
23-Jun-2010 )7:10pm Wednesday	AirAmerican AirlinesFlight#1121From:Dallas/Ft Worth TX, USATo:San Diego CA,Meal:Food For PurchaseSeats:Seats:EquipMcDonnell Douglas MDStatus:ConfirmedDepart:23-Jun-2010Wednesday07:10pmStops:OriginalOther Status:ConfirmedDepart -ArriveTERMINAL 2American AirlinesJocator:GFSQRRAA Frequent Flyer#FOLAND/BRUCE RFlight Duration:2 hour(s) and 55 minutesClass of Service:Coach	Class: USA	0	Fage 2 01
20-Dec-2010 Monday	Other San Diego CA, USA RESERVATION RETAINED FOR 180 DAYS			
	WE ARE 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 Ticket Information BOLAND BRUCE Ticket#:7890358115 Ticket Base Fare: 330.55 Invoice#:5197144 Ticket Tax: 67.59 Total Ticket Amount: 398.14 Electronic: YES			
	SERVICE FEE DOCUMENT #: 0524045440 FEE AMOUNT: 30.00			
	BILLED TO: AMERICAN EXPRESS ENDING IN 1006			
ι.				

#### Back to Original



# **Domestic Perdiem Rates**

# Louisiana - FY 10

(October 1, 2009 through September 30, 2010)

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).

NOTE: If neither the city nor the county is listed, the location is a standard CONUS destination with a rate of \$70.00 for lodging and \$46.00 for meals and incidental expenses (M&IE).

#### State Tax Rates & Exemption Forms

Properties at Per Diem (FedRooms)

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		- Looping	M&LE Pato	Hat Patase and trate to the total		
Primary Destination (1)	County (2, 3)	Matchar +	HAR .	= Harn	the lose	
Baton Rouge	East Baton Rouge Parish	103	56	159	42.0	
Covington / Slidell	St. Tammany Parish	99	56	155	42.0	
Lafayette	Lafayette Consolidated Government	89	56	145	42.0	
Lake Charles	Calcasieu Parish	82	61	143	45.75	
New Orleans (October 1 - June 30)	Orleans, St. Bernard, Jefferson and Plaquemine Parishes	133	71	204	53.25	
New Orleans (July 1 - September 30)	Orleans, St. Bernard, Jefferson and Plaquemine Parishes	104	71	175	53.25	

SHERATON NEW ORLEANS HOTEL 500 Canal Street New Orleans, Louisiana 70130

t - 504 525 2500 í -- 504 595 5552

14



TRAVEL AGENT CHARGE TO

GUEST CLIENT 2331 ROOM 140.00 Bruce Boland RATE 2 # PERS 2753949 EX-A At Checkin FOLIO San Diego, CA 92101 1 PAGE 18-JUN-10 23:33 USA ARRIVE 23-JUN-10 DEPART VM AIF18A PAYMENT

DATE	REFERENCE	DESCRIPTION	CHARGES / CREDITS
18-JUN-10	RT2331	Room Chrg Grp Association	140.00
18-JUN-10	RT2331	Room Tax	18.20
18-JUN-10	RT2331	Occupancy/Tourism Tax	3.00
18-JUN-10	RT2331	Parking One Car	3.3 54
19-JUN-10	RT2331	Room Chrg Grp Association	140.00
19-JUN-10	RT2331	Room Tax	18.20
19-JUN-10	RT2331	Occupancy/Tourism Tax	3 00
19-JUN-10	RT2331	Parking One Car	33.54
20-JUN-10	RT2331	Room Chrg Grp Association	140.00
20-JUN-10	RT2331	Room Tax	18.20
20-JUN-10	RT2331	Occupancy/Tourism Tax	3 . 0 0
20-JUN-10	RT2331	Parking One Car	33.54
21-JUN-10	RT2331	Room Chrg Grp Association	140.00
21-JUN-10	RT2331	Room Tax	18.20
21-JUN-10	RT2331	Occupancy/Tourism Tax	3.00
21-JUN-10	RT2331	Parking One Car	33.54
22-JUN-10	RT2331	Room Chrg Grp Association	140.00
22-JUN-10	RT2331	Room Tax	18.20
22-JUN-10	RT2331	Occupancy/Tourism Tax	3.00
22-JUN-10	RT2331	Parking One Car	33.54
23 JUN-10	VM	Visa/Mastercard	973.70-
		Balance Due	0.00

\*\* continued on the next page \*\*

SIGNATURE tagree 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

1.2

Bruce Boland		ROOM	DEPART	AGENT
FOLIO 2753949	18-JUN-10	2331		

#### 1 — 504 525 2500 1 — 504 595 5552



GUEST CLIENT TRAVEL AGENT CHARGE TO 2331 ROOM Bruce Boland 140.00 RATE 2 # PERS. 2753949 EX-A At Checkin FOLIO San Diego, CA 92101 2 PAGE 18-JUN-10 23:33 USA ARRIVE 23-JUN-10 DEPART AIF18A VM PAYMENT CHARGES / CREDITS DATE REFERENCE DESCRIPTION

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	Rm/Tax	Food/Bev	Telephone	Parking	Other	Total	Payment
18-JUN-10	161.20	0.00	0.00	33.54	0.00	194.74	0.00
19-JUN-10	161.20	0.00	0.00	33.54	0.00	194.74	. 0.00
20-JUN-10	161.20	0.00	0.00	33.54	0.00	194.74	0.00
21-JUN-10	161.20	0.00	Ů.00	33.54	0.00	194.74	0.00
22-JUN-10	161.20	0.00	0.00	33.54	0.00	194.74	0.00
Total	806.00	0.00	0.00	167.70	0.00	973.70	0.00

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

Upgrade to Sheraton Club on your next stay Enjoy a higher level of comfort and convenience in Sheraton Club and discover your place to be more productive, catch up with friends and enjoy complimentary breakfast and all-day snacks.

SIGNATUREagest ictemant personally labe for the payment of this account if the corporation or other third port, offer tails to pay pain or all or their for personally labe for the payment of this account if the corporation or other third port, offer tails to pay pain or all or their for personal states are personally labeled and the corporation or other there port, offer tails to pay pain or all or there for personal states are personally labeled at the corporation or other there port, other tails to pay pain or all or there for personal states are personally labeled at the corporation or other there port, other tails to pay pain or all or there for personal states are personally labeled at the corporation or other there port, other tails to pay pain or all or there for personal states are personally labeled at the corporation or other there port, other tails to pay pain or all or there for personal states are provide at the corporation of the corporation or other there port, other tails to pay pain or all or there for personal states are provide at the corporation or other tails to pay pain or all or there for personal states are provide at the corporation of the corporation of the corporation or other tails to pay pain or all or there for personal states are provide at the corporation of the cor



## 972-574-142

92 JUNTIN TBT 12/1 Cik 512 + t i Jun18'10 03:03PM

2 SODA PEP 1 C F R ON 2 PLATES

> Visit and get any appetizer up to \$8 free on your next visit. Plus, play our instant win game!

#### Survey Code: 040XCQCAU5LU

Thank you for participating! This receipt with valid code required to redeem coupon and prizes. Write the Coupon code from the survey here:

Food	13.47
Tax	1.11
03.15PM Ant', Due	14.58

#### THANK YOU FOR VISITING FRIDAY'S!

Do you like FREE STUFF? Juin Give Me More Stripes! Ask your server for more details Thank you, enjoy your flight!

2=

Brigtsen's DINNER 6/18. De RESTAURANT ORIGANS CHECK NO. TABLE NO. DATE SERVER PERSONS 3 15 94312 gumbo 7.50 PPETIZERS bisque 7.50 7.50 C . crdb olaHer AB D ð YOU ENTREE W. C. C. brulee AB eches DESSERI D MISCELLANEOUS 52 FOOD 70.50 BEVERAGES SUBTOTAL 35 TAX 21.92.32 .01 PAY THIS TOTAL-TIP

## DNC Travel Hospitality Sarvices \*\* New Orleans Airport \*\* \*\*\* Pizza to Go \*\*\*

1057 Shanoura P.	
CHK 7406 JUN23'10	3:28PM
1 Pep Pizz	9,20
1 Soda lg	2,60
Subtotal	11.80
Total Tax	1.36
Total Paid <b>1 3</b>	<b>. 16</b>
Cash (PRT)	20.00
Change Swed.	8.84

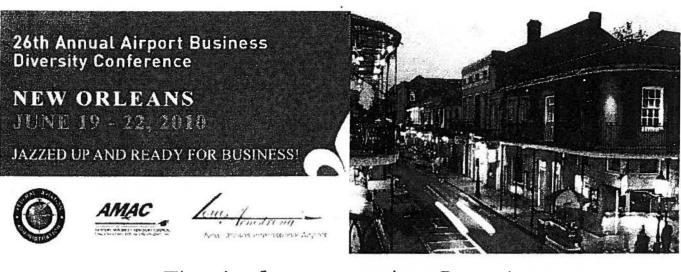
	HEFCZ. #01 RN RR 189106956 BRUCE R BOLAND CC
$\overline{\mathcal{T}}$	VEHICLE 01489 / 8651473 CLS YF 09ALTM LIC: LA A513198 FUEL: 8/8 OUT 8/8 IN CDP: 00004 - AUTO CLUB OF SOUTH CALIFOR RES E7480907572/TMDE /C PREPARED BY: 2355/LANEW13 COMPLETED BY: 0616/LANEW13
PETRO SAVE 3201 gentilly blvd New Orleans, La	RENTED: 08/18/10 18:54 @ NEW ORLEANS INT'L AIRPORT RETURN: 08/23/10 14:53 @ NEW ORLEANS INT'L AIRPORT PLAN IN: TMDE RATE CLASS: C PLAN OUT: TMDE MILEAGE IN 35270 TR-X MILES MILEAGE OUT 35139 MILES ALLOWED MILES DRIVEN 131 MILES CHARGED
STATION NUMBER 22854498001 06/23/10 14:15 BRUCE BOLAND	DAYS       4 @ \$ 31.65/ DAY       \$ 126.60         EX DAYS       1 @ \$ 47.48/ DAY       \$ 47.48         SUBTOTAL 1       \$ 174.08         DISCOUNT - R       10%       \$ 174.1         SUBTOTAL 2       T\$ 156.67         CONCESSION FEE RECOVERY       11.10%       T\$ 27.88         LDW       ACCEPTED @ \$ 27.99       DAY       0 T\$ 139.95
PUMP# 4 REGULAR GALLONS 5.135 @ \$2.499/GAL FUEL \$12.83 Total \$12.83	TLIS       ACCEPTED @ \$ 12.95 DAY       \$ 64.75         PAI, PEC       ACCEPTED @ \$ 5.95 DAY       \$ 29.75         CUST FAC CHG       T\$ 31.00         TAX       13.750% ON TAXABLE TTL OF \$ 355.50       \$ 48.87         MISCELLANEOUS ADJUSTMENTS       \$- 85.00         MISCELLANEOUS ADJUSTMENTS       \$ 413.87
SEQ NUM 26347 AUTH# 70009P	HOW WAS YOUR EXPERIENCE? WE'D LIKE YOUR FEEDBACK.
THANK YOU	<ol> <li>Call 1-800-278-1595, or Visit WWW.HERTZSURVEY.COM</li> <li>Enter Access Code: 3</li> <li>Take Brief 4 Question Survey</li> </ol>

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\* Dechine & Adjus tul

STATEMENT OF CHARGES - NOT VALID FOR RENTAL Renting Company - The Hertz Corporation

7	* PASSENGER AND BAGGAGE CHECK		2	AmericanAirlines
V	<b>AmericanAirline</b>	S PASSENGER RECEIPT 1		REFUNDABLE ONLY WITH
		1 8 JUN 10 05105105 CECCO ISSUE	UŠ	RELATED FLIGHT CPN
	NAME OF PASSENGER (NOT TRANSFERABLE)	SAN ENC /SAN DIEGO	60	RETAIN THIS RECEIPT
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ALC: NO	***NOT VALID FOR*	REALIZED AND A CONTRACT OF A C		JOURNEY
200		PSGR TICKET 0017890358	3115	
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	SANDFW-AA DFWMSY-AA	. GF SQRR /	1	CONNTIBACT CLASS SOFEE TIME
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		DO NOT MARK OR WRITE IN THE WHITE AREA ABOVE		
<u> </u>		N	1	AmericanAirlines
B	* PASSENGER AND BAGGAGE CHECK	PASSENGER RECEIPT 1	•	AmericanAirlines
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B	SSED BY AmericanAirline BOL AND / BRUCE R ##NOT VALAUD FOR # CONSCIENTS STREETING	PASSENGER RECEIPT 1 2015 UN 10 1915 UN 100 1950 000 150 0000 0000 0000 000 000 000 000 000 00	ບຮິ 6 8 1 1 5	REFUNDABLE ONLY WITH RELATED FLIGHT CPN RETAIN THIS RECEIPT THROUGHOUT YOUR JOURNEY FOR CONDITIONS OF CONTRACTOR SEE
E .	SAUL AND A BRUCE R BOL AND ABRUCE R ***NOT VALLUD FOR* **TRANSPORTATION SYDEW-AA DEWSAN-AA	PASSENGER RECEIPT 1 2 <sup>356</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup>150</sup> <sup></sup>	ບຮິ 6 8 1 1 5	REFUNDABLE ONLY WITH RELATED FLIGHT CPN RETATIN THIS RECEIPT THROUGHOUT YOUR JOURNEY TO FOR CONDITIONS OF CONTRACT <sub>CLAS</sub> SEE THE PASSENGES TICKET AN HACCAGE MHERK
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6	SUBLE OF PASSENGER INDITIONALS IN THE OF PASSENGER INDITIONALS INC. BOLLAND / BIRUCE R MANOT VALLED FOR * ***NOT VALLED FOR * ****NOT VALLED FOR * ****NOT VALLED FOR * ****NOT VALLED FOR * ***********************************	PASSENGER RECEIPT 1 23500×100 SS AGENTIO. MSY ENC /NEW ORLEANS PARE BASS PARE BASS	ບຮິ 6 8 1 1 5	REFUNDABLE ONLY WITH RELATED FLIGHT CPN RETATIN THIS RECEIPT THROUGHOUT YOUR JOURNEY TO FOR CONDITIONS OF CONTRACT <sub>CLAS</sub> SEE THE PASSENGES TICKET AN HACCAGE MHERK
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6	SUBLE OF PASSENGER NOT TRANSFIRME BOL AND / BRUCE R BOL AND / BRUCE R *** NOT VALUE FOR* ** TRANSFOR TATION NOT CHECKED BAGGAGE FEE USD 25.00 NA	PASSENGER RECEIPT 1 23500×100 SS AGENTIO. MSY ENC /NEW ORLEANS PARE BASS PARE BASS	ບຮິ 6 8 1 1 5	REFUNDABLE ONLY WITH RELATED FLIGHT CPN RETATIN THIS RECEIPT THROUGHOUT YOUR JOURNEY TO FOR CONDITIONS OF CONTRACT <sub>CLAS</sub> SEE THE PASSENGES TICKET AN HACCAGE MHERK
6	USD 25.00 USD 25.00 NAAND 25.00 NAAND	PASSENGER RECEIPT 1 2 <sup>356</sup> JUN 10 19 <sup>15</sup> UM PHORE CODE SS AGENTION MSY ENC /NEW ORLEANS TOUR CODE TARE BASS TOUR CODE PARE CODE PROCEED 25.00 FP IKXXXXXXXXXXXXXXXXX6510 59836P	∪\$5 6 8.11.15	REFUNDABLE ONLY WITH RELATED FLIGHT CPN RETATIN THIS RECEIPT THROUGHOUT YOUR JOURNEY TO FOR CONDITIONS OF CONTRACT <sub>CLAS</sub> SEE THE PASSENGES TICKET AN HACCAGE MHERK
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Activity Information Organizer Contact: Gene Roth gene.roth@amac-org.com 703-414-2622

AMAC Educational and Scholarship Program, Inc. The Airport Business Diversity Conference June 19-22, 2010

FRIDAY, JU	NE 18	
8:00 AM	12:00 PM	DBELO Certification Training Module 1
12:00 PM	1:00 PM	DBELO Certification Training Lunch
1:00 PM	6:00 PM	DBELO Certification Training Module 2
SATURDAY,	June 19	
7:00 AM	5:00 PM	Registration
8:00 AM	4:00 PM	Bill Walker Memorial Golf Tournament
8:00 AM	12:00 PM	DBELO Certification Training Module 3
11:30 AM	1:30 PM	AMAC Board and ACI/AAAE Diversity Committee Luncheon
12:00 PM	1:00 PM	DBELO Certification Training Lunch
1:00 PM	3:00 PM	DBELO Certification Training Module 4
3:00 PM	5:00 PM	AMAC Board of Directors Meeting
3:00 PM	5:00 PM	Business Valuation Workshop for DBEs and DBELOs
3:00 PM	5:00 PM	Sustainability: It Isn't Easy Being Green, or Is It?
6:00 PM	9:00 PM	VIP/Sponsors Party (Invitation Only)
Sunday, Ju	ine 20	· · · · · · · · · · · · · · · · · · ·
	5 00 P) (	
7:00 AM	5:00 PM	Registration
8:00 AM	10:00 AM	DBELO and Construction Workshop
10:00 AM	12:00 PM	Airports in Year 2030 - Leaders' Visions and Predictions for Airports We Beyond Today and Tomorrow
12:00 PM	2:00 PM	DBELO Networking Luncheon (Invitation Only)
1:30 PM	5:00 PM	Speed Dating For ACDBEs (Advanced Registration Required)
1:00 PM	3:00 PM	Airport Director Roundtable (Invitation Only)
2:00 PM	11:59 PM	Exhibit Hall Setup
3:00 PM	5:00 PM	Airport Commissioners Roundtable (Invitation Only)
6:00 PM	9:00 PM	Welcome To New Orleans Reception
Monday, J	UNE 21	
7:00 AM	5:00 PM	Registration
7:00 AM	9:30 AM	Breakfast In The Exhibit Hall
8:00 AM	9:30 AM	Meet Your FAA Civil Rights Staff
8:00 AM	9:30 AM	How To Do Business With USDOT- With You - We "CAN"
8:00 AM	10:00 AM	Partners Breakfast (Invitation Only)

The Conference Schedule and Workshops Are Subject To Change

10:00 AM	10:45 AM	FAA Update (General Session)	
10:45 AM	12:00 PM	AMAC Update Including Government Affairs (General Session)	
12:00 PM	1:30 PM	General Session Luncheon/Keynote Speaker (Soledad O'Brien)	
1:30PM	2:00 PM	FAA Awards Ceremony	
2:00 PM	7:00 PM	Exhibit Hall Open	
2:15 PM	3:30 PM	Airport Joint Ventures - Understanding the Operations, Agreements and Fine Print	
2:15 PM	3:30 PM	Financing in the New Arena, the Good, Bad, and the Ugly	
3:45 PM	5:00 PM	Business Legal Structures- What You Need To Know	
3:45 PM	5:00 PM	Getting On A Team - Will It Work For Me?	
5:00 PM	7:00 PM	Dallas/Fort Worth 2011 Preview Networking Reception	
9:00 PM	1:00 AM	AMAC After Dark Scholarship Fund-raising Party With Karaoke	
Tuesday, J	UNE 22		
7:00 AM	2:00 PM	Registration	
7:00 AM	2:00 PM	Exhibit Hall Open	
7:00 AM	9:00 AM	Breakfast With The Exhibitors	
8:00 AM	10:00 AM	AMAC Board of Directors Meeting (Old Board and New Board)	
8:00 AM	9:45 AM	FAA DBELO Training (Presented By FAA)	
8:00 AM	9:45 AM	Rebuilding The Levees	
8:00 AM	9:45 AM	The ABCs of CBAs for DBEs	
10:00 AM	12:00 PM	DOT DBELO Training (Presented By USDOT)	
10:00 AM	12:00 PM	Building a Stellar Team to Sustain Your Airport Business	
10:00 AM	12:00 PM	Lowering Insurance Costs For Airports And Businesses	
10:00 AM	12:00 PM	Doing Business Overseas: Grow Your Business by Expanding Horizon Abroad	
11:30 AM	1:30 PM	Lunch With The Exhibitors	
1:30 PM	4:30 PM	Franchise Seminar and Exposition	
1:30 PM	3:00 PM	Best Practices In Airport Contracting	
1:30 PM	3:00 PM	Preparing Winning Proposals	
2:00 PM	12:00 AM	Exhibit Hall Teardown	
3:15 PM	5:00 PM	Speed Dating Part II- AEC Presented by ACC	
		(Advance Registration Required)	
3:15 PM	5:00 PM	Achieving Your Airport Goals- Eugene Walker	
6:00 PM	7:00 PM	Business Networking Reception	
7:00 PM	9:00 PM	Closing Awards Dinner and Scholarship Program	

# SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

P.O. BOX 82776, SAN DIEGO, CA 92138-2776 3225 NORTH HARBOR DRIVE, THIRD FLOOR, COMMUTER TERMINAL, SAN DIEGO, CA 92101 619.400.2405 619.400.2406 FAX WWW.SAN.ORG

## **Board Communication**

Date: June 30, 2010

To:

From:

Cc:

	Board Members Bruce R. Boland, Board Member Dock	$\sum$
-	Thella Bowens, President/CEO	

Subject: Board Member Report on June 19–22, 2010 attendance at the 2010 AMAC Conference in New Orleans, Louisiana

From Saturday 6/19 until Tuesday 6/22, I represented the SDCRAA Board of Directors at the 2010 Airport Minority Advisory Council (AMAC) and the Federal Aviation Administration (FAA) Annual Business Diversity Conference. The Conference had over 1100 attendees, and all the major airports in the United States were represented by both Commissioners/Board Members and staff.

The conference included joint committee meetings and training sessions by both the AMAC representatives and FAA staff. The focus at these sessions was on updating and training attendees in providing maximum access for minority and women-owned businesses to the broad range of airport business available. This included opportunity in the construction and concession businesses. Emphasis was placed on the various requirements through the FAA authorization bills and regulations. There was much anticipation as to what the 2010 FAA reauthorization might bring in relief of outdated financial requirements that have been in place on DBE and WBE businesses since the early 1990's.

The extensive exhibits displayed throughout the Exhibit Hall gave me the opportunity to learn of the range and depth of concession opportunities that might be available to SDIA as we look forward to opening our new terminal expansion and the upcoming issuing of our new Concession RFP.

The conference's full agenda of workshops also gave me the opportunity to get a wide range of information relative to DBE/WBE issues. Workshops were designed for small businesses to learn how to improve their effectiveness in partnering and preparing winning business proposals.

The conference also had a range of social events that provided opportunities to network with attendees from other Airport Boards, AMAC, and the FAA.



BOARD MEMBERS

LAURIE BERMAN\*\* BRUCE R. BOLAND GREG COX JIM DESMOND RAMONA FINNILA ROBERT H. GLEASON JIM PANKNIN COL. FRANK A. RICHIE\*\* PAUL ROBINSON • TOM SMISEK ANTHONY K. YOUNG

\*\* EX OFFICIO BOARD MEMBERS

PRESIDENT/CEO THELLA F. BOWENS Saturday 6/19 during the day was set aside for workshop and certification training. Saturday evening I attended the VIP/Sponsor Reception representing SDCRAA/SDIA as we were among the sponsors of the conference.

Sunday 6/20 I attended a morning session on "Airports in the Year 2030" at which our CEO was a principal panel speaker. That afternoon I participated in a roundtable panel with about 30 other Commissioners/Board Members from major US airports which was enlightening. I was pleased to learn how far ahead we are in our efforts with respect to diversity and opportunity surrounding our "Green Build" project. Sunday night was devoted to the "Welcome to New Orleans". reception.

Monday 6/21 was devoted to FAA update sessions and the AMAC Government Affairs General Session. The luncheon speaker was CNN correspondent Soledad O'Brien who gave a most uplifting speech centered on the continuing need for efforts in supporting business diversity. Monday afternoon was devoted to additional workshops surrounding business issues.

Tuesday 6/21 I attended a most interesting session presented by New Orleans (Louis Armstrong) airport senior staff on the challenges they had to meet in the aftermath of Hurricane Katrina (Aug/Sept 2005). No amount of training could prepare them to handle the demands for evacuation and triage that was presented to them by that storm. It was interesting and very sobering to realize what a major airport went through to keep the vital community communication link operating in the days after that storm.

Tuesday evening I attended the Closing Scholarship and Awards Dinner at which I was honored to receive an award given to San Diego International Airport for Excellence in Airport Operations and Contracting.

Upon returning to San Diego, I recommended to Chair Gleason and our President/CEO Thella Bowens that we conduct a workshop concerning "Concessions" in anticipation of issuing the new RFP for SDIA. In my view the Board needs to ensure it has an in-depth understanding of the myriad of potential issues surrounding that awarding prior to issuing the new RFP. 2 July#, 2010

Travel claim for Bruce R. Boland official trip to New Orleans LA, to Represent SDCRAA at the Airport Minority Advisory Council (AMAC) Business Diversity Conference 19-22 June 2010. Travelling 6/18 and 6/23.

Note: I rented a mid-size car for the duration of the conference...Car used for official business 40% of the time (travel from /to Airport and other official business) and the remaining 60% was personal...I calculated costs for reimbursement by the authority for the car rental based on the 40% for official business. The rest I paid personally.

I also purchased the "Damage Waiver" insurance and "Personal Property Loss" insurance from Car Rental Agency (Hertz) as well. I did this to protect the Authority in the case of an accident which resulted in Damage to the rental car. I did not purchase "Liability Insurance" as I believed we were covered separately for Liability. Hertz agent incorrectly included the liability coverage and I had them "back-out" that cost. Note: the \$85 adjustment on the Hertz bill indicated as the #8 receipt. I do not know of a policy we have at the authority for additional insurance coverage on rental cars...thus I purchased the stated coverage to "be sure" we were covered.

Details and necessary documentation attached.

1.	Check baggage (1) piece American Airlines SD to New Orleans Receipt attached	\$25.00 🗸
2.	Lunch at Dallas/Fort Worth airport during layover Receipt attachedItem spilt with another traveler \$17.58 / 2	8.79 🗸
3.	Dinner 6/18 on arrival at New OrleansBill split between 3 persons No Alcohol included.	
	Soup	7.50
	Entree	18.00
	Desert	3.50
	TAX Portion	5.00
	Tip	10.00
	Receipt attachedTotal Dinner 6/18	\$44.00 🗸
4.	Hotel Including Occupancy and Room TAX 5 nights 18-22 June X \$161.20/night.	\$806.00
	Rental Car parking at hotel 40% of total cost \$33.54 X 2 nights	\$806.00 / 67.08 / +, 02
	Receipt Attached Total Hotel costs	\$873.08\
	Baggage Handling tips at Sheraton Hotel New Orleans 6-18-6-23	10.00 🗸

	Baggage handling Tip New Orleans Airport 6/23	3.00 🗸
5.	Receipt attachedLunch at N.O Airport while waiting for Departure	13.16 🗸
6.	Receipt attachedCheck Baggage at N.O Airport American Airlines	25.00 🗸
7.	Receipt attachedGas for rental car40%\$12.83 X .4 =	5.13 🗸
8.	Receipt attachedRental Car \$413.87 X .4 =	165.55 🗸

\$1172.71 + 1100 mileage

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Attached also is the Airline Ticket itinerary SAN - MSY SAN

Brun R. Balance

Bruce R. Boland

Total

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# **BRETON LOBNER**

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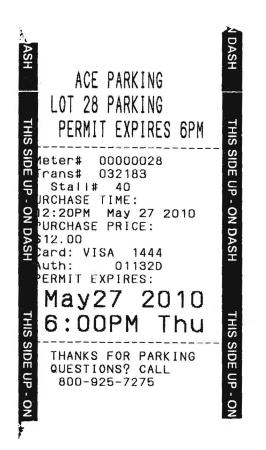
## SAN DIEGO COUNTY REGIONAL AIRPORT AUTHORITY

## **BUSINESS EXPENSE REIMBURSEMENT REPORT**

May

Period Covered

DATE	G/L Account	Description		AMOUNT
5/27/10	66240	Parking - Historical Resources Board - Salt Plan	nt Matter Hearing	\$12.00
		2	т.	
			9	
			τοτα	\$12.00
Reimbursement Po certify that this rep business and is tru	plicy and that any purchat ort of business expenses	and agree to Authority *Policy 3.30 - Business Expense ses that are not allowed will be my responsibility. I further s were incurred in connection with official Authority	APPROVED: By the Committee at its Aug meeting	
NAME			NAME	
	AUG11	2010		
DATE			DATE	



<b>Ma</b> Thurs	<u><u><u></u></u><u><u></u><u><u></u><u></u><u></u><u></u><u></u><u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u></u></u></u>	May 2010         June 2010           T W T F S         S M T W T F S           1         2         3         4           4         5         6         7         8         9         10         11         12           1         1         1         1         1         1         1         1         12         1         1         1         12         1         1         12         1         1         1         12         1         1         1         12         1         1         12         1         1         1         12         1         1         1         12         1         1         1         12         1         1         1         12         1         14         15         16         17         18         19         18         19         20         21         22         23         24         25         26         27         28         29         30         27         28         29         30
	27 Thursday	Notes
	From May 26     Tentative - Argonaut status conference - Judge So	
<b>7</b> am		
<b>8</b> <sup>00</sup>		-
9 00		
<b>10</b> <sup>00</sup>		
11 00		
12 pm		
1 <sup>00</sup> 2 <sup>00</sup>	<b>HRB Hearing re Salt Works</b> 202 C Street, 12th Floor, City Administration Bldg Gonzalez Amy	
3 <sup>00</sup>		
<b>4</b> <sup>00</sup>		
<b>5</b> <sup>00</sup>		
<b>6</b> <sup>00</sup>		
- -		-

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