FY 07

Transaction Number	Fiscal Yea	Dollar Amo	Userid	Batch #	Vendor Name	Comments
710000250	2007	154	SOSBAM0	079BS1	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000250	2007	22	SOSBAM0	079BS1	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000324	2007	41	SOSBAM0	122BS3	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000325	2007	29	SOSBAM0	122BS3	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000362	2007	122.5	SOSBAM0	141BS2	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000458	2007	136.5	SOSBAM0	178BS2	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000499	2007	162.75	SOSBAM0	211BS3	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000500	2007	110	SOSBAM0	211BS3	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000549	2007	110	SOSBAM0	250BS2	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
710000562	2007	66	SOSBAM0	254BS2	ASHLEY CARRIGAN	Req'd from Barb M 7/13/12
DD11021607V	2007	224	NBCJLM0	075BSB	BELLA K SEWALL	Sent 7/27/12
DD11021607V	2007	68	NBCJLM0	075BSB	BELLA K SEWALL	Sent 7/27/12
DD11021607V	2007	336	NBCJLM0	075BSB	BELLA K SEWALL	Sent 7/27/12
SEWAL051107	2007	201.75	NBCJLM0	155BSA	BELLA K SEWALL	Sent 7/27/12
SEWAL051107	2007	6	NBCJLM0	155BSA	BELLA K SEWALL	Sent 7/27/12
SEWAL051107	2007	73	NBCJLM0	155BSA	BELLA K SEWALL	Sent 7/27/12
SIWROFY07K2	2007	238.25	NBCJLM0	018RB1	BEZDEK, JOHN	Sent 7/27/12
710000086	2007	132.5	SOSBAM0	321BS1	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000038	2007	257.1	SOSBAM0	298BSA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
BOGERT3	2007	257.1	NBCJLM0	300MJG	BOGERT, MICHAEL LAURENCE	Sent 7/27/12
710000135	2007	65	SOSBAM0	362MJA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000222	2007	50	SOSBAM0	064BSA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000313	2007	31.64	SOSBAM0	117BSA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000313	2007	15.52	SOSBAM0	117BSA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000313	2007	97.5	SOSBAM0	117BSA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000344	2007	93	SOSBAM0	127RBA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000344	2007	15.52	SOSBAM0	127RBA	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000375	2007	160.31	SOSBAM0	149BS1	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000375	2007	92	SOSBAM0	149BS1	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000375	2007	4.5	SOSBAM0	149BS1	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000398	2007	42	SOSBAM0	151BS1	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000430	2007	187.46	SOSBAM0	163RBE	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000447	2007	236.94	SOSBAM0	171BS2	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000460	2007	58.5	SOSBAM0	178BS2	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000460	2007	15.52	SOSBAM0	178BS2	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12
710000517	2007	60	SOSBAM0	214BS3	BOGERT, MICHAEL LAURENCE	Req'd from Barb M 7/13/12

710000537	2007	746.5	SOSBAM0	235BS1	CURLETT, LAURA	Req'd from Barb M 7/13/12
710000068	2007	149.5	SOSBAM0	311BSB	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000122	2007	77.2	SOSBAM0	356BS2	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000169	2007	73.5	SOSBAM0	024BS1	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000302	2007	126.2	SOSBAM0	113BS2	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000304	2007	112.5	SOSBAM0	117BSA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000304	2007	3.7	SOSBAM0	117BSA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000434	2007	13	SOSBAM0	170RBA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000434	2007	44.46	SOSBAM0	170RBA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000436	2007	147.5	SOSBAM0	170RBA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000436	2007	9.74	SOSBAM0	170RBA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000435	2007	13	SOSBAM0	170RBA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000435	2007	44.46	SOSBAM0	170RBA	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000489	2007	122.5	SOSBAM0	199BS1	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000489	2007	67	SOSBAM0	199BS1	DAVID LEHMAN	Req'd from Barb M 7/13/12
710000231	2007	536	SOSBAM0	074BS1	DAVID MARQUEZ	Req'd from Barb M 7/13/12
710000231	2007	29	SOSBAM0	074BS1	DAVID MARQUEZ	Req'd from Barb M 7/13/12
710000231	2007	87.56	SOSBAM0	074BS1	DAVID MARQUEZ	Req'd from Barb M 7/13/12
710000231	2007	13.02	SOSBAM0	074BS1	DAVID MARQUEZ	Req'd from Barb M 7/13/12
710000163	2007	186.11	SOSBAM0	019BS1	DAVID W MURPHY	Req'd from Barb M 7/13/12
710000515	2007	55	SOSBAM0	257BS2	DIRK A KEMPTHORNE	Req'd from Barb M 7/13/12
710000059	2007	0	SOSBAM0	305BS2	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000092	2007	66	SOSBAM0	326BSC	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000093	2007	36.75	SOSBAM0	326BSC	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000150	2007	76.25	SOSBAM0	066BS4	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000151	2007	0	SOSBAM0	006BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000152	2007	376.65	SOSBAM0	012BSA	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000171	2007	96	SOSBAM0	029BS2	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000172	2007	432	SOSBAM0	029BS2	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000305	2007	0	SOSBAM0	113BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000306	2007	103.15	SOSBAM0	113BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000308	2007	35.88	SOSBAM0	113BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000307	2007	142	SOSBAM0	113BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000310	2007	231.29	SOSBAM0	113BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000309	2007	135.27	SOSBAM0	113BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000327	2007	245.75	SOSBAM0	122BS1	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12
710000353	2007	40	SOSBAM0	136BS2	DIRK KEMPTHORNE	Req'd from Barb M 7/13/12

TA07OHTA10A	2007	1.75	FSDCSR0	200VSA	HASPEL ABRAHAM	Sent 8/20/12
TA07OHTA10A	2007	4	FSDCSR0	200VSA	HASPEL ABRAHAM	Sent 8/20/12
07OHTA10C	2007	2	FSDCSR0	250RBB	HASPEL ABRAHAM	Sent 8/20/12
07OHTA10C	2007	160	FSDCSR0	250RBB	HASPEL ABRAHAM	Sent 8/20/12
07OHTA10C	2007	50	FSDCSR0	250RBB	HASPEL ABRAHAM	Sent 8/20/12
710000193	2007	134	SOSBAM0	040BSA	JAMES E CASON	Req'd from Barb M 7/13/12
710000333	2007	19.41	SOSBAM0	123RBA	JAMES E CASON	Req'd from Barb M 7/13/12
710000333	2007	122.5	SOSBAM0	123RBA	JAMES E CASON	Req'd from Barb M 7/13/12
710000396	2007	31.04	SOSBAM0	151BS3	JAMES E CASON	Req'd from Barb M 7/13/12
710000421	2007	14.56	SOSBAM0	163RBC	JAMES E CASON	Req'd from Barb M 7/13/12
710000421	2007	139.5	SOSBAM0	163RBC	JAMES E CASON	Req'd from Barb M 7/13/12
710000440	2007	122.5	SOSBAM0	170RBA	JAMES E CASON	Req'd from Barb M 7/13/12
710000440	2007	10	SOSBAM0	170RBA	JAMES E CASON	Req'd from Barb M 7/13/12
710000440	2007	14.56	SOSBAM0	170RBA	JAMES E CASON	Req'd from Barb M 7/13/12
710000295	2007	28.13	SOSBAM0	101BSA	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000295	2007	852	SOSBAM0	101BSA	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000295	2007	109.04	SOSBAM0	101BSA	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000295	2007	59.5	SOSBAM0	101BSA	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000508	2007	1162	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000508	2007	177.15	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000508	2007	38.65	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000508	2007	26.2	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000507	2007	295	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000507	2007	43.86	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000507	2007	20	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000507	2007	26.2	SOSBAM0	214BS2	JAMES L CASWELL	Req'd from Barb M 7/13/12
710000185	2007	127.12	SOSBAM0	039BS1	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000208	2007	114	SOSBAM0	054BSB	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000226	2007	183	SOSBAM0	066BSA	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000226	2007	6.79	SOSBAM0	066BSA	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000226	2007	71.55	SOSBAM0	066BSA	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000262	2007	171.5	SOSBAM0	087BS2	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000262	2007	31.4	SOSBAM0	087BS2	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000262	2007	26.2	SOSBAM0	087BS2	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000319	2007	25	SOSBAM0	117BSA	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000329	2007	40.5	SOSBAM0	122BS2	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12
710000329	2007	95.55	SOSBAM0	122BS2	JENNIFER MARIE HAYES	Req'd from Barb M 7/13/12

710000094	2007	172.5	SOSBAM0	326BSA	JUSTIN R HALL	Req'd from Barb M 7/13/12
710000112	2007	101	SOSBAM0	339BSD	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000272	2007	73.5	SOSBAM0	087BS2	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000272	2007	40	SOSBAM0	087BS2	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000272	2007	23.28	SOSBAM0	087BS2	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000280	2007	304.75	SOSBAM0	089BS2	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000292	2007	73.5	SOSBAM0	101BSA	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000292	2007	21	SOSBAM0	101BSA	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000399	2007	20	SOSBAM0	158BS1	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000399	2007	160	SOSBAM0	158BS1	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000400	2007	773.6	SOSBAM0	163RBE	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000429	2007	147.5	SOSBAM0	163RBD	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000431	2007	222	SOSBAM0	170RBB	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000431	2007	64.53	SOSBAM0	170RBB	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000450	2007	205.5	SOSBAM0	194BSA	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000450	2007	48	SOSBAM0	194BSA	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000478	2007	48	SOSBAM0	194BSA	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000478	2007	12	SOSBAM0	194BSA	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000556	2007	110	SOSBAM0	250BS2	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000556	2007	82	SOSBAM0	250BS2	KAMERAN L ONLEY	Req'd from Barb M 7/13/12
710000388	2007	2804	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000388	2007	83	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000388	2007	305.26	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000387	2007	1040	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000387	2007	77.08	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000387	2007	390	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000387	2007	146.42	SOSBAM0	151BS3	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000518	2007	1840	SOSBAM0	214BS2	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000518	2007	226	SOSBAM0	214BS2	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000518	2007	187.92	SOSBAM0	214BS2	LAVERTY, LYLE	Req'd from Barb M 7/13/12
710000587	2007	305	FSDCMO0	263BS1	LINDI L HARVEY	Sent 8/20/12
710000587	2007	78.33	FSDCMO0	263BS1	LINDI L HARVEY	Sent 8/20/12
710000587	2007	30	FSDCMO0	263BS1	LINDI L HARVEY	Sent 8/20/12
710000587	2007	44.84	FSDCMO0	263BS1	LINDI L HARVEY	Sent 8/20/12
710000067	2007	583.2	SOSBAM0	307BS2	LYNN SCARLETT	Req'd from Barb M 7/13/12
710000102	2007	168.5	SOSBAM0	326BSD	LYNN SCARLETT	Req'd from Barb M 7/13/12
710000118	2007	231.6	SOSBAM0	340BS1	LYNN SCARLETT	Req'd from Barb M 7/13/12

710000545	2007	85.98	SOSBAM0	240BS1	MOORE, DWIGHT C	Req'd from Barb M 7/13/12
710000545	2007	83	SOSBAM0	240BS1	MOORE, DWIGHT C	Req'd from Barb M 7/13/12
710000166	2007	599.03	SOSBAM0	024BS1	PIPER MONICA N	Req'd from Barb M 7/13/12
710000410	2007	284	SOSBAM0	159BS1	RINNE, WILLIAM E	Req'd from Barb M 7/13/12
710000410	2007	27.26	SOSBAM0	159BS1	RINNE, WILLIAM E	Req'd from Barb M 7/13/12
710000410	2007	81	SOSBAM0	159BS1	RINNE, WILLIAM E	Req'd from Barb M 7/13/12
SIWROFY07M4	2007	1026.93	NBCJLM0	023VSA	ROBERT LAIDLAW	Sent 7/27/12
SIWRO07W4	2007	54.32	NBCJLM0	082VSB	ROBERT LAIDLAW	Sent 7/27/12
SIWRO07W4	2007	144	NBCJLM0	082VSB	ROBERT LAIDLAW	Sent 7/27/12
SIWRO07W4	2007	64	NBCJLM0	082VSB	ROBERT LAIDLAW	Sent 7/27/12
2007RUSSELL	2007	311.26	NBCJLM0	229VSE	RUSSELL, MAJEL	Sent 7/27/12
2007RUSSELL	2007	38	NBCJLM0	229VSE	RUSSELL, MAJEL	Sent 7/27/12
710000123	2007	62.7	SOSBAM0	356BS1	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000412	2007	288	SOSBAM0	158BS2	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000412	2007	34.92	SOSBAM0	158BS2	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000482	2007	507.5	SOSBAM0	199BS2	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000482	2007	28.98	SOSBAM0	199BS2	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000482	2007	34.92	SOSBAM0	199BS2	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000554	2007	288	SOSBAM0	254BS3	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710000554	2007	34.92	SOSBAM0	254BS3	SCHUSTER, REID P	Req'd from Barb M 7/13/12
710500217	2007	160	SOSBAM0	058BS1	SHANE B WOLFE	Req'd from Barb M 7/13/12
710000563	2007	1054.25	SOSBAM0	254BS1	SHANE B WOLFE	Req'd from Barb M 7/13/12
710000563	2007	31.4	SOSBAM0	254BS1	SHANE B WOLFE	Req'd from Barb M 7/13/12
710000563	2007	2.25	SOSBAM0	254BS1	SHANE B WOLFE	Req'd from Barb M 7/13/12
7103000010	2007	101.6	NBCJLM0	060BSB	SHARON E WARREN	Sent 7/27/12
710000131	2007	319	SOSBAM0	362BSB	SMITH, GARY	Req'd from Barb M 7/13/12
710000223	2007	182	SOSBAM0	064BSA	SMITH, GARY	Req'd from Barb M 7/13/12
710000223	2007	190	SOSBAM0	064BSA	SMITH, GARY	Req'd from Barb M 7/13/12
710000223	2007	9	SOSBAM0	064BSA	SMITH, GARY	Req'd from Barb M 7/13/12
710000249	2007	153	SOSBAM0	079BS1	SMITH, GARY	Req'd from Barb M 7/13/12
710000249	2007	37	SOSBAM0	079BS1	SMITH, GARY	Req'd from Barb M 7/13/12
710000286	2007	37	SOSBAM0	093DS1	SMITH, GARY	Req'd from Barb M 7/13/12
710000286	2007	160	SOSBAM0	093DS1	SMITH, GARY	Req'd from Barb M 7/13/12
710000299	2007	44	SOSBAM0	107BS3	SMITH, GARY	Req'd from Barb M 7/13/12
710000326	2007	4	SOSBAM0	122BS2	SMITH, GARY	Req'd from Barb M 7/13/12
710000334	2007	110.25	SOSBAM0	127RBA	SMITH, GARY	Req'd from Barb M 7/13/12
710000334	2007	71	SOSBAM0	127RBA	SMITH, GARY	Req'd from Barb M 7/13/12

710000547 2007 76 SOSBAM0 247BS1 ZOLLER, ROBERT Req'd from Barb M 7/13/12

343777

TA070HTA10A

TRAVEL VOUCHER (Read Privacy Act Statement on the back)	1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: OS/SIO	2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION	3. VOUCHER NO.: 6-25-07 - Haspel
			4. SCHEDULE NO.

5. a. NAME (Last, first, middle initial): HASPEL, ABRAHAM E.

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

c. MAILING ADDRESS (Include ZIP Code): (b) (6) [redacted]

d. OFFICE TELEPHONE NO.: 202-208-7471

e. PRESENT DUTY STATION: Washington, DC

f. RESIDENCE (City and State): (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 06/25/2007 b. TO 06/29/2007

7. TRAVEL AUTHORIZATION: a. NUMBER(S) TA-070HTA10 b. DATE(S) 07/03/2007

10. CHECK NO.

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government (Attached [ ] Check [ ] Cash)
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY: TDL-0

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	752.80	UA		06/20/2007	IAD-Washington,	DuDEN-Denver, CO Airp

211d - 201.75
211A - 1.70
211I - 4.00

07 JUL 16 PM 1:29 NATIONAL BUSINESS CENTER

07 JUL 26 PM 1:48 NATIONAL BUSINESS CENTER

COMMENTS:
Trip Number 1 Ticket Agent Fee: $27.72.

Traveler's Return Flight #932 (United Airlines) was delayed and arrived after midnight.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 7/11/07 AMOUNT CLAIMED ▶ 226.25

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ [signature] DATE 7/12/07

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION
a. DIFFERENCES, IF ANY (Explain and show amount): Wrong Rate $ (18.75)
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $
c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00
d. NET TO TRAVELER ▶ $ 226.25

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ [signature] DATE 7/23/07

18. ACCOUNTING CLASSIFICATION
SIO-2007.1000DDD01...68..... - 226.25 NR- 1,699.99

207.50

7/19/9 VS

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel

Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. TA-07OHTA10

TRAVELER'S LAST NAME HASPEL

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.000 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
06/25	6:45A	D-:RES: Annandale,											
06/25		Airline Flight											
06/25	10:16A	A-:DENVER,CO		127/49		36.75		127.00	36.75			36.75	
06/25		Rental Car - Govcc											
06/25		Ticket Agent Fee											
06/26		Subsistence				49.00		80.00	49.00			49.00	44
06/26		Misc - Cash Advance											
06/26		ATM Service Fee		80/44									1.75 A
06/27		Subsistence				49.00		80.00	49.00			49.00	44
06/28	3:31P	D-:DENVER,CO											
06/28		Fuel-Rental/GovCar-Govcc											
06/28		Subsistence				49.00			49.00			49.00	
06/28		Tolls-Bridges/Highway											2.00
06/28		Tolls-Bridges/Highway											2.00
06/29	1:00A	A:RES: Annandale,V											
06/29		Subsistence				36.75			36.75			36.75	33
											0.00	220.50	5.75
											0.00	220.50	5.75

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ <18.75> 226.25

STANDARD FORM 1012 BACK (10-77)

OCT 16 PM 3:31 NATIONAL BUSINESS CENTER

Carlson Wagonlit Travel

June 20, 2007

For: ABRAHAM E HASPEL
To: DOI

Sales Person: AN
Locator: HANAUN
Customer Number: (b) (6) [redacted]

YOUR AIRFARE ON 18JUN AT 1024 IS 752.80
CALL 202-219-0707 DURING NORMAL BUSINESS HOURS MON-FRI
830AM-5PM
THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.

Monday June 25, 2007

United Airlines
Class of Service: Coach Class U
Depart: WASHINGTON/DULLES
Arrive: DENVER, CO
Total Flight Time:
Equipment: 777
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 25G
Frequent Flyer Number:
STAR ALLIANCE

Flight Number: 209
8:35 Am June 25, 2007
10:16 Am June 25, 2007
3 Hours 41 Minutes Non-Stop
Confirmation Number: N15QGZ
(b) (6) [redacted] HASPEL/ABRAHAM E

Monday June 25, 2007

AVIS
Pick Up: June 25, 2007 10:16 Am
Return: June 28, 2007 3:31 Pm
Daily Rate 91.00 USD ouch!
Unlimited Free Miles
Confirmation Number: 00483006US6PEXP
Membership Number: (b) (6) [redacted]

MVAR
Location: DENVER, CO
DENVER, CO
Extra Days: 91.00 Extra Hours: 46.00

Thursday June 28, 2007

United Airlines
Class of Service: Coach Class U
Depart: DENVER, CO
Arrive: WASHINGTON/DULLES
Total Flight Time:
Equipment: 752
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 13D
Frequent Flyer Number:
STAR ALLIANCE

Flight Number: 932
3:31 Pm June 28, 2007
8:52 Pm June 28, 2007
3 Hours 21 Minutes Non-Stop
Confirmation Number: N15QGZ
(b) (6) [redacted] ASPEL/ABRAHAM E

Monday December 24, 2007

Other Service
Dec 24, 2007 - Dec 24, 2007
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
HASPEL ABRAHAM E	2659/0167035340490	680.94USD	51.06US	6.80ZP	14.00XT	752.80
HASPEL ABRAHAM E	2659/8152379186	27.72				27.72
					Total Amount:	780.52

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CANCEL COMFORT INN BY 4PM DAY OF ARRIVAL TO AVOID
PENALTIES TO YOUR CREDIT CARD
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON
YOUR CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

U.S. DEPARTMENT OF THE INTERIOR
ABRAHAM E. HASPEL, PH.D.
ASSISTANT DEPUTY SECRETARY

meeting of climate change task force subcommittee

	Leave Home 6:45 AM	
6/25	UA 209 to Denver	
	Hampton Inn	$127
	Per diem	–
6/26	to Fort Collins	
	Hilton	80
	ATM fee	1.75
	per diem	–
6/27	Hilton	80
	per diem	–
6/28	Avis	491.17
	gas	41.30
	tolls (2x$2)	4.00
	per diem	–
	UA 932 (arrived after midnight – delayed)	
6/29	arrived home 1AM	
	per diem	–

E-470 PUBLIC
HIGHWAY AUTHORITY
E470 Tollway
Plaza E
Visit us at: www.e-470.com

LANE: 26 OPERATOR: 1936

TOLL RECEIPT

TRANSACTION: 568815

06/28/07 13:46:48

CLASS	TOLL	PAYMENT
02	$2.00	CASH

7680 PENA BLVD
DENVER, CO 802490000

SITE: 6546
DATE: 06-28-07
TIME: 13:53
TRACE: 6782

DEALER# 00848994
MC FLEET ACCT#
(b) (6) [redacted]
P9PB7MM6M7HC
8D/7B
INV# 135336
REF#927 29-036
AUTH# 00-001101
SELF
ODM# 0000000
CARD AMT $ 41.30

THANK YOU

PUMP: 17
PROD: UNLEAD
PRICE/GAL: $3.399
NET/GAL: $3.399
QUANTITY: 12.151GAL
FUEL TOTAL: $41.30
NET TOTAL: $41.30

Complete a Survey at
WWW.GASVISIT.COM
AND WIN FREE GAS*

WELLS FARGO ATM Transaction Record

ATE	TIME	LOCATION
6/26/07	07:55 AM	UNION SQUARE

USTOMER CARD	ATM
(b) (6) [redacted]	99251

TRANSACTION TYPE	TRANSACTION #
ASH ADVANCE FROM CC	06032

ACCOUNT#	AMOUNT	BALANCE
CREDIT	$100.00	UNAVAILABLE

THANK YOU FOR USING A WELLS FARGO ATM
TOTAL AMT $101.75

Avis Rent A Car
<Avis.RentACar@cendant.com>
06/28/2007 04:14 PM

Please respond to
e.receipts@avis.com

To Abe Haspel/SIO/OS/DOI@DOI
cc
bcc
Subject E-Receipt for Avis Rental # 242844361

Thank you for renting with Avis

Avis Car Rental E-Receipt

Rental Agreement Number:242844361

AVIS We tr hard

Customer Information:

Customer Name:	**ABRAHAM E HASPEL**
Wizard Number:	(b) (6) [redacted]
Avis Worldwide Discount Number:	**A555500**
Customer Status:	**PREFERRED**
Method of Payment:	**MASTER**
Credit Card #:	(b) (6) [redacted]
Freq Traveler:	UA/03029547741

Vehicle Information

Car Group Rented:	VAN
Car Group Charged:	VAN
Car Make Model:	WHI DODG GRCA VAN
Plate Number	TX811RLS
Car Number:	8874073
Mileage Out: 19155	Fuel Out: 8/8
Mileage In: 19255	Fuel In: 8/8
Mileage Driven: 100	

Rental Information

Pickup Date/Time:	**25JUN07/1101**	Return Date/Time:	**28JUN07/1413**
Pickup Location:	**DENVER INT'L APO**	Return Location:	**DENVER INT'L APO**
	255		**255**

Individual has indicated the van was used for several DOI employees who all attended this meeting and travelled together to another meeting.

00 E. 78TH AVE	**00 E. 78TH AVE**
DENVER, CO 80249 US	**DENVER, CO 80249 US**
303-342-5500	**303-342-5500**

Vehicle Charges

Time:	0 miles @ .300	0.00	TAX 13.350%	55.49
	0 hours @ 45.514	0.00	Fuel Service	0.00
	4 days @ 91.000	364.00	Gars $5.00/Day	20.00
	0 weeks @ 546.000	0.00	Total Charges	491.17
	0 months @ 2184.00	0.00		
Time & Mileage		364.00		
*$1.70/DAY FEE		6.80		
**11.11		42.		

%	8
FEE	8
LD	0.
W	0
	0
FTP	
SR$	2.
.50	0
DY$	0
2MX	
SUB TOTAL	**415.68**
Amount Due	**491.17**

**CONCESSION RECOVERY FEE
*DAILY FACILITY USE FEE
FF MLS/PNTS EARNED 200

Avis Car Rental E-Receipt

Thank you for renting with Avis.Please do not reply to this message.
If you have questions regarding this rental or if you do not wish to receive electronic receipts, please e-mail e.receipts@avis.co for assistance. If you have a question regarding this bill, please call us at 1-800-352-7900.
Attached is your receipt in Portable Document Format(PDF).
This receipt reflects your charges at the time of your return.

EReceipt.pdf

Hampton Inn Denver West/Federal Center
137 Union Boulevard • Lakewood, CO 80228
Phone (303) 969-9900 • Fax (303) 989-9847
Reservations online: www.denverwestfederalcenter.hamptoninn.com

official sponsor u.s. olympic team

USA

HASPEL, ABRAHAM (b) (6) [redacted] US	name address
room number: 521/KXTH arrival date: 06/25/0711:48AM departure date: 06/26/07 adult/child: 1/0 room rate: 127.00	

If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.

RATE PLAN C-UCC
HH# (b) (6) [redacted]
AL: UA #03029547741
BONUS AL: CAR:

CONFIRMATION NUMBER : 87257580

06/26/07 PAGE 1

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safe deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. I have requested weekday delivery of USA Today. If refused, a credit of $0.75 will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation assistance due to a physical disability. Please indicate yes by checking here: ☐

signature:

date	reference	description	amount
06/25/07	417872	GUEST ROOM EXEMPT	$127.00
		WILL BE SETTLED TO (b) (6) [redacted]	$127.00
		EFFECTIVE BALANCE OF	$0.00

EXPENSE REPORT SUMMARY

	06/25/07	STAY TOTAL
ROOM & TAX	$127.00	$127.00
DAILY TOTAL	$127.00	$127.00

127/49

You have earned approximately 1460 HHonors points and approximately 100 miles with UNITED for this stay. For reservations and to check your point balance, visit hiltonfamily.com.

Hit the road this weekend and take time out for you! Visit family, friends and just take time to play. Visit hamptoninn.com or call 1-800-HAMPTON.

for reservations call **1-800-hampton** or visit us online at **www.hamptoninn.com**

account no.	date of charge	folio/check no. 103859 A
card member name	authorization	initial
establishment no. and location — establishment agrees to transmit to card holder for payment	purchases & services	
	taxes	
	tips & misc.	
signature of card member X	**total** amount	0.00

TheHiltonFamily | Hilton | Conrad | DoubleTree | Embassy Suites Hotels | Hampton | Hilton Garden Inn | Homewood Suites by Hilton

thanks.

Hilton
Fort Collins

425 West Prospect Road • Fort Collins, CO 80526
Phone (970) 482-2626 • Fax (970) 493-6265
Reservations
www.hilton.com or 1 800 HILTONS

Name & Address

HASPEL, ABRAHAM
(b) (6) [redacted]

DOI

Room 714/D2
Arrival Date 06/26/07 2:38PM
Departure Date 06/28/07

Adult/Child 1/0
Room Rate 80.00

RATE PLAN C-GOI

HH# (b) (6) [redacted]
AL: UA #03029547741
CAR:

Folio

CONFIRMATION NUMBER : 3282121195

06/28/07 PAGE 1

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
06/26/07	GUEST ROOM	SDS	469502	$80.00		
06/27/07	GUEST ROOM	MMS	470874	$80.00		
06/28/07	(b) (6) [redacted]	ELE	471090		$160.00	
	BALANCE					$0.00

EXPENSE REPORT SUMMARY

	06/26/07	06/27/07	STAY TOTAL
ROOM & TAX	$80.00	$80.00	$160.00
DAILY TOTAL	$80.00	$80.00	$160.00

You have earned approximately 2017 HHonors points and approximately 500 miles with UNITED for this stay. For reservations and to check your point balance, visit hiltonfamily.com.

Thank you for choosing Hilton! Please visit us at hilton.com to view our best available Net Direct rates, plan a special vacation getaway or select a convenient location for your next business trip.

SDHH

TheHiltonFamily
Hilton
CONRAD
DOUBLETREE
EMBASSY SUITES HOTELS
Hampton
Hilton Garden Inn
Hilton Grand Vacations Club
HOMEWOOD SUITES Hilton
USA
Official Sponsor

ACCOUNT NO.
(b) (6) [redacted]

DATE OF CHARGE 06/26/07

FOLIO NO./CHECK NO. 114796 A

CARD MEMBER NAME
HASPEL, ABRAHAM

AUTHORIZATION 048990

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE
X

TOTAL AMOUNT

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 8, 1949

TRAVEL AUTHORIZATION

1. No. TA-07OHTA10
2. 10-01-2006 (DATE)

3. Office of Historical Trust Accounting (BUREAU OR OFFICE)

4. NAME Abraham E. Haspel (b) (6) [redacted]
5. OFFICIAL STATION Washington, DC
6. TITLE Assistant Deputy Secretary
7. ACCOUNTING OFFICE Washington, DC

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws an ' regulations.

PLACES OF TRAVEL

8. FROM: Washington, DC
9. TO: All places in the contiguous United States , Alaska, Hawaii, Puerto Rico, and the Virgin Islands as may e require and returned.

10. PURPOSE AND REMARKS:

To conduct official business, as may be required. I certify that the travel herein was reviewed and determined to b essential for the accomplishment of departmental programs and missions. Payment from a non Federal source fo travel related expenses is authorized under 31 USC 1353 provided that prior to acceptance the conditions for each case comply with 41 CFR 304-1.

11. PER DIEM ALLOWANCE:

Per diem or actual subsistence within a high cost area is authorized in accordance with Federal Travel Regulations as issued by GSA and published in the Federal Register.

12. PERIOD OF TRAVEL: Beginning on or about 10-01-06 **Ending on or about** 09-30-07

MODE OF TRAVEL

13. X Common carrier
14. X Extra fare
15. X Government-owned conveyance
16. X Privately owned at a mileage rate of .445 cents, subject to:
   - *(a)* X Administratively determined to be the advantage of the Government
   - *(b)* X A showing of advantage to the Government
   - *(c)* X Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. Transportation immediate family
19. Shipment household goods and personal effects
18. X Other *(specify)*
   Rental Car, Excess baggage, Taxi fares, Telephone calls, Conference Room and Facilities, in accordance with FTR-101-7

ESTIMATED COST

20. Transportation _____ $
21. Per Diem _____
22. Other _____
23. TOTAL _____ $ 25,000.00
24. CHARGED TO:
   OHTA 1060-OTX-01 M6
25. _____ (FISCAL OFFICER'S SIGNATURE)

26. [signature] (REQUESTER'S SIGNATURE)
27. Assistant Deputy Secretary (TITLE)
28. James E Cason (AUTHORIZING OFFICER'S SIGNATURE)
29. Associate Deputy Secretary (TITLE)

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

AIR 752.80

AGENT FEE 27.72

LODGING 127.00 160.00

RENTAL CAR 491.17

GAS 41.30

PARKING

TAXI / SHUTTLE

VXRF checked CHECKED JUL 24 2007

U .S. Department of the Interior

Notice of Action Taken

National Business Center - Denver
7401West Mansfield Ave. D-2777
Denver, CO 80235 – 2230

ABRAHAM HASPEL
(b) (6)
[redacted]

VOUCHER NUMBER:	**TA07OHTA10**		**200 – O**
Amount Claimed	**Suspended**	**Disallowed**	**Allowed**
226.25		18.75	207.50
Tax Withheld	**Applied to Advance**	**Under Claimed**	**Amount of Check**
			207.50

EXPLANATION:

Disallowed $18.75 - Only 75 percent of the allowable M&IE can be claimed on the first and last day of travel. The M&IE rate per day for Fort Collins, CO is $44.00 therefore the reduced rate is $33.00. The allowable M&IE rate per day for Fort Collins, CO is $44.00.

Please direct any inquiries to Vickie Stwalley 303-969-5652

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE: **Vickie Stwalley**	REVIEWING TECHNICIAN	**7/23/2007**

pc

0

07OHTA10C

TRAVEL VOUCHER (Read Privacy Act Statement on the back)	1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: OS/SIO	2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION	3. VOUCHER NO.: ~~Haspel - 8-20-07~~ 4. SCHEDULE NO.

09 SEP -6 AM 11:42

5. a. NAME (Last, first, middle initial)	b. SOCIAL SECURITY NO.	6. PERIOD OF TRAVEL a. FROM	b. TO
HASPEL, ABRAHAM E.	(b) (6) [redacted]	08/20/2007	08/22/2007
c. MAILING ADDRESS (Include ZIP Code) (b) (6) [redacted] 343777	d. OFFICE TELEPHONE NO. 202-208-7471	7. TRAVEL AUTHORIZATION a. NUMBER(S) TA-07OHTA10	b. DATE(S) 08/24/2007
e. PRESENT DUTY STATION Washington, DC	f. RESIDENCE (City and State) (b) (6) [redacted]	10. CHECK NO.	

8. TRAVEL ADVANCE		9. CASH PAYMENT RECEIPT		11. PAID BY
a. Outstanding	0.00	a. DATE RECEIVED	b. AMOUNT RECEIVED $	TDL
b. Amount to be applied	0.00			
c. Amount due Government (Attached [ ] Check [ ] Cash)		c. PAYEE'S SIGNATURE		
D. Balance outstanding				

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	928.20	UA		08/16/2007	IAD-Washington,	DuSEA-Seattle, WA Ai

COMMENTS:
Trip Number 1 Traveler changed his return flight, due to the flight being delayed from United Airlines, flight #470 to Alaskan Air, Flight #2.

Hotel Justification: The Crowne Plaza Hotel was reserved by USGS, under a block of rooms for the Climate Change conference, and the hotel was "only" available at the rate of $169.00, per night, which is over per diem for Seattle, Washington. Several other hotels were contacted, but were already booked.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 8/27/07 AMOUNT CLAIMED ▶ 212.00

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ [signature] DATE

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION

a. DIFFERENCES, IF ANY (Explain and show amount) $

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00

d. NET TO TRAVELER ▶ $ 212.00

9/7/07

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ [signature] DATE 9/8/07

18. ACCOUNTING CLASSIFICATION
SIO-2007.1000DDD01...68..... - 212.00 NR- 1,421.64
211D-160.00 T-50.00 A-2.00

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel:
- Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.
- (h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).
- (i) Complete for per diem and actual expense travel.
- (j) Show total subsistence expense incurred for actual expense travel.
- (m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
- (n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. TA-07OHTA10

TRAVELER'S LAST NAME HASPEL

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.000 NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
08/20	6:15A	D-:RES: Annandale,											
08/20		Airline Flight											
08/20	10:48A	A-:SEATTLE,WA				48 00		169 00	48.00			48 00	
08/20		Ticket Agent Fee											
08/21		Subsistence				64 00		169 00	64.00			64 00	
08/22	1:50P	D-:SEATTLE,WA											
08/22		Taxi - Cash											50 00 -T
08/22	10:45P	A:RES: Annandale,V											
08/22		Subsistence				48 00			48.00			48 00	
08/22		Ticket Agent Fee											
08/22		ATM Service Fee											2 00 -A
08/22		Misc - Cash Advance											
												4160.00	52.00
									SUBTOTALS		0 00	160 00	52 00
									TOTALS		0 00	160 00	52 00

136/64

Excess lodging approved. See front of voucher

If additio

In compl... vided: S... Chap. 57 E.O. 116... Novemb... of the rec... eligible i... under a... costs of used by perform... appropi...

...iring or firing of an ...tigations of the per... ...our Social Security ...ity of the Internal ...9397, November 22, ...n number; disclosure ...elocation allowance ...me. Disclosure of all other instances; ...n SSN) required to ...ement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 212.00

NATIONAL BUSINESS CENTER 08 SEP -6 AM 11:43

64 ·
75 ·
48 ·
64 ·
48 ·
64 ·
48 ·
160 ·
50 ·
2 ·
52 ·
0 ·
160 ·
50 ·
2 ·
212 ·
0 ·

STANDARD FORM 1012 BACK (10-77)

08/27/07 ACCOUNTING DETAIL |Doc No: Haspel - 8-20-07
Copyright 1989-2004 Gelco Information Network, Inc
|HASPEL, ABRAHA (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
ADVANCED-			100.00
ATM-			2.00
COM CARRIER-408			928.20
LODGING-409			338.00
M&IE-409			160.00
TAXI CASH-			50.00
TRAVEL AGENT-			55.44
SIO	0.00	0.00	1,633.64

Organization:
2007.1000DDD01...68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,633.64
NON-REIMBURSABLE EXPENSES		1,421.64
TOTAL AMOUNT CLAIMED		212.00
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		212.00
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		212.00

U.S. DEPARTMENT OF THE INTERIOR
ABRAHAM E. HASPEL, PH.D.
ASSISTANT DEPUTY SECRETARY

purpose - co chair 3 day meeting on DOI actions to deal with climate change land & water management issues

8/20 6:15 leave for IAD
ride w/ Reid Schuster
UA #261
Hotel $169
per diem

8/21 Hotel $169
per diem

8/22 per diem
Alaska Air #2 to DCA
cab from DCA home $50.00
cab advance fee $ 2.00

Carlson Wagonlit Travel

August 16, 2007

For: ABRAHAM E HASPEL

To: DOI

Sales Person: AN
Locator: DAAQOF
Customer Number: (b) (6) [redacted]

THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.

Monday August 20, 2007

United Airlines
Class of Service: Coach Class U
Depart: WASHINGTON/DULLES
Arrive: SEATTLE/TACOMA,WA
Total Flight Time:
Equipment: 752
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 10C
Frequent Flyer Number:
STAR ALLIANCE

Flight Number: 261
8:17 Am August 20, 2007
10:48 Am August 20, 2007
5 Hours 31 Minutes Non-Stop
Confirmation Number: ZGZQDQ
(b) (6) [redacted] HASPEL/ABRAHAM E

Wednesday August 22, 2007

United Airlines
Class of Service:Coach Class Y
Depart: SEATTLE/TACOMA,WA
Arrive: CHICAGO/OHARE
Total Flight Time:
Equipment: 752
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 12D
Frequent Flyer Number:
ARR-TERMINAL 1
STAR ALLIANCE

Flight Number: 470
2:16 Pm August 22, 2007
8:05 Pm August 22, 2007
3 Hours 49 Minutes Non-Stop
Confirmation Number: ZGZQDQ
(b) (6) [redacted] HASPEL/ABRAHAM E

Return flight was delayed & traveler switched flight to Alaska Air, flight 2.

Wednesday August 22, 2007

United Airlines
Class of Service:Coach Class Y
Depart: CHICAGO/OHARE
Arrive: WASHINGTON/DULLES
Total Flight Time:
Equipment: 752
Meal Service: None
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 12D
Frequent Flyer Number:
DEP-TERMINAL 1

Flight Number: 1244
9:10 Pm August 22, 2007
11:57 Pm August 22, 2007
1 Hour 47 Minutes Non-Stop
Confirmation Number: ZGZQDQ
(b) (6) [redacted] HASPEL/ABRAHAM E

STAR ALLIANCE

Wednesday February 20, 2008

Other Service
Feb 20, 2008 - Feb 20, 2008
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
HASPEL ABRAHAM E	2793/0167056656110	834.41USD	62.59US	10.20ZP	21.00XT	928.20
HASPEL ABRAHAM E	2793/8155238664	27.72				27.72
					Total Amount:	955.92

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
YOU DESERVE A VACATION AND WE HAVE THE PERFECT ONE
WAITING FOR YOU, INCLUDING MILITARY RATES. VISIT
WWW.SATOVACATIONS.COM OR CALL TOLL-FREE 877-698-2554
CAR DECLINED/A//06JUL
LODGING DECLINED//06JUL
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

Carlson Wagonlit Travel

August 22, 2007

For: ABRAHAM E HASPEL

To: DOI

New Return flight

Sales Person: AN
Locator: DAAQOF
Customer Number: (b) (6) [redacted]

THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.

Wednesday August 22, 2007

Alaska Airlines — Flight Number: 2
Class of Service:Coach Class Q
Depart: SEATTLE/TACOMA,WA — 1:50 Pm August 22, 2007
Arrive: WASHINGTON/NATL,DC — 9:45 Pm August 22, 2007
Total Flight Time: — 4 Hours 55 Minutes Non-Stop
Equipment: 738
Meal Service: Available For Purchase
Status: Confirmed — Confirmation Number: LLVGKC
ARR-TERMINAL B

Monday February 18, 2008

Other Service
Feb 18, 2008 - Feb 18, 2008
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
HASPEL ABRAHAM E	2825/0277056656136	176.74USD	13.26US	3.40ZP	7.00XT	200.40
HASPEL ABRAHAM E	2825/8155238691	27.72				27.72
HASPEL ABRAHAM E	2793/0167056656110	834.41USD	13.26US	3.40ZP	7.00XT	928.20
HASPEL ABRAHAM E	2793/8155238664	27.72				27.72
					Total Amount:	1,184.04

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
YOU DESERVE A VACATION AND WE HAVE THE PERFECT ONE
WAITING FOR YOU, INCLUDING MILITARY RATES. VISIT
WWW.SATOVACATIONS.COM OR CALL TOLL-FREE 877-698-2554
CAR DECLINED/A//06JUL
LODGING DECLINED//06JUL
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR

CREDIT CARD STATEMENT.

THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

.....REFUND INFORMATION.....

....TICKET NUMBER-0167056656110..COUPONS-3/4..PROCESSED ON..22AUG/

.....BASE FARE AMOUNT-834.41..TAX-93.79..TTL REFUND-928.20

.....REFUNDED BACK TO-343777

.....INVOICE NUMBER-0002793

THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR

CREDIT CARD STATEMENT.

THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

"Kakkar, Megha"
<mkakkar@Carlson.com>
08/27/2007 02:30 PM

To Laura Tyler/SIO/OS/DOI@DOI
cc
bcc
Subject RE: Refund

Hey Laura

see this RUA means refund on united then the ticket number and then the amount which is $504.18
+$58.62 that's coming up to $562.80

RUA‡7056656110/ 0.00/504.18/58.62/ONECCCA5568160000343
777 1.1HASPEL ABRAHAM

Megha Kakkar |Sr. VIP Travel Counselor, Military and Goverment Markets
Carlson Wagonlit Travel |Sato Travel
E-mail: mkakkar@carlson.com | Phone: 202 219 0707 | Fax: 202 208 7297
1849 C St NW Room 2312 | Washington, DC - 20240
www.cwgt.com / www.satotravel.com

From: Laura_Tyler@ios.doi.gov [mailto:Laura_Tyler@ios.doi.gov]
Sent: Mon 8/27/2007 1:41 PM
To: Kakkar, Megha
Subject: Re: Refund

Megha, the information that you sent me below shows a total refund of $928.20, shouldn't there be something showing "only" the amount of the second leg that was refunded. Please advise. Thanks.

Laura M. Tyler
Secretary to the Assistant Deputy Secretary
U.S. Department of the Interior
1849 C Street, N.W., Room 6127 (MS 7229)
Washington, D.C. 20240
Telephone: (202) 208-7471
Facsimile: (202) 208-5567
Email: laura_tyler@ios.doi.gov

"Kakkar, Megha"
<mkakkar@Carlson.
com>

To
Laura Tyler/SIO/OS/DOI@DOI

08/27/2007 11:39
AM

cc

Subject
Refund

Hey Laura

I spoke to United its still not showing refund in the ticket status she
told me to keep checking ...this is what I can see in my system right now
this is the only info I can give for right now.

‡.....REFUND INFORMATION.....
‡....TICKET NUMBER-0167056656110..COUPONS-3/4..PROCESSED ON
..22AUG/
‡.....BASE FARE AMOUNT-834.41..TAX-93.79..TTL REFUND-928.20
‡.....REFUNDED BACK TO-343777
‡.....INVOICE NUMBER-0002793

Thanks

Megha Kakkar |Sr. VIP Travel Counselor, Military and Goverment Markets
Carlson Wagonlit Travel |Sato Travel
E-mail: mkakkar@carlson.com | Phone: 202 219 0707 | Fax: 202 208 7297
1849 C St NW Room 2312 | Washington, DC - 20240
www.cwgt.com / www.satotravel.com

CHEVY CHASE® BANK

DATE	TIME	LOCATION	SEQ#
/22/07	22:03	NAT9	000239

RD NO: 3777

THDRAWAL	$100.00
M FEE	$2.00
TAL WITHDRAWAL AMOUNT	$102.00
OM	
COUNT BALANCE	$.00

* Chevy Chase Bank Customers, Please Read Important Message on Back.

Get the All Access Chevy Chase Check Card!

- 24/7 access to *all* your accounts
- Online, over the phone and at ATMs

Visit a Chevy Chase Bank branch or call 301-987-BANK or 1-800-987-BANK (out of area)

FDIC

TAXI DRIVER'S CUSTOMER RECEIPT

Cab #: _____ ID # _____

Charge Account _____

To: Home

From: DCA

# of Luggages _____ # of Passengers _____

Total Fare $ 50 00 Time / Date: 8/22/07

Driver Signature: _____

CROWNE PLAZA®
SEATTLE

Abraham Haspel **1849 C Street Nw** **Washington, DC 20240** **US**	A/R Number Group Code QUS Folio/Invoice No. / Reference #

Room No.	**0858**	Page No.	1 of 1
Arrival	08-20-07	Cashier No.	135
Departure	08-22-07		

www.cphotelseattle.com

Date	Description	Charges	Credits
08-20-07	*Accommodation	169.00	
08-21-07	*Accommodation	169.00	
08-22-07	MasterCard (b) (6) [redacted]		338.00
	Total	**338.00**	**338.00**
	Balance	**0.00**	

Thank you for staying at the Crowne Plaza - Seattle. Qualifying points for this stay will automatically be credited to your account. To make additional reservations online, update your account information or view your statement please visit www. priorityclub.com. We look forward to welcoming you back soon.

136/64

Crowne Plaza Hotel - Seattle
1113 6th Ave
Seattle, WA 98101
Telephone: (206) 464-1980 Fax: (206) 340-1617

www.cphotelseattle.com

"This hotel is owned by Today's Hotel Seattle Corporation and Managed by Interstate Hotels and Resorts"

CROWNE PLAZA
SEATTLE

Attn: Laura

Abraham Haspel
1849 C Street Nw
Washington, DC 20240
US

Haspel, Abraham

A/R Number
Group Code
Folio/Invoice No. 160211
Reference #

Room No.
Arrival
Departure

Page No. 1 of 1
Cashier No. 144

www.cphotelseattle.com

Date		Description	Charges	Credits
09-07-07	No-Show	Dup res/gst stayed	-169.00	
09-07-07	Occupancy Tax		-26.36	
09-07-07	MasterCard	(b) (6) [redacted]		-195.36
		Total	-195.36	-195.36
		Balance	0.00	

Crowne Plaza Hotel - Seattle
1113 6th Ave
Seattle, WA 98101
Telephone: (206) 464-1980 Fax: (206) 340-1617

www.cphotelseattle.com

"This hotel is owned by Today's Hotel Seattle Corporation and Managed by Interstate Hotels and Resorts"

InterContinental Hotels Group
<resconfirm@ihg.com>
08/14/2007 04:19 PM

To Laura Tyler/SIO/OS/DOI@DOI
cc
bcc
Subject Hotel Reservation Confirmation #64227823

Tuesday, August 14, 2007

To the attention of ABRAHAM HASPEL,

Thank you for choosing Crowne Plaza Hotels & Resorts as your preferred hotel. Below you will find the details of your reservation. If you would like additional information about your destination hotel, we suggest you visit us online at http://www.crowneplaza.com

Confirmation Number & Guest Information

Confirmation #: 64227823
ABRAHAM HASPEL

--- HOTEL ACCOMMODATIONS ----

Arrival date: Monday, August 20, 2007, 2 nights
1 room, 1 KING BED LEISURE Non Smoking

CROWNE PLAZA SEATTLE, WA DWTN
1113 SIXTH AVENUE
SEATTLE, WASHINGTON 98101
206/464-1980

Additional information about this hotel can be found on the web at:
http://www.crowneplaza.com/sea-downtown

Nightly rate, per room & Additional Information

RATE 3XP
USD G169.00 .00
US Geological Survey *QUS
GUARANTEE ONLY

****
TAX-PER NIGHT 15.60 PCT. NOT INCLUDED IN RATE.
RB $25 * NO POOL * MAX 5 PERSON PER RM
24 HR ALL PARKING / VALET $28 PLUS TAX
PETS ALLOWED W/NON REFUNDABLE $50 FEE
C-DH3 FOR EXEC/CLUB RM AMENITIES
EARLY DEPARTURE FEE 50.00 USD

Guarantee Type & Cancellation Policy

Master Charge/Mastercard
1-NTS PYMT DUE THRU MC IF NOT CXL BY 6PM 20AUG

All rates quoted are per room, per night

Legend:
XP - Extra Person Charge
PAX - Per Person
RB - Rollaway Bed
T/A - Travel Agent

Sleep Better at Crowne Plaza
We recognize the importance of getting a great night's sleep when you travel. That is why we have developed the Crowne Plaza Sleep Advantage program*, a holistic approach to sleep that includes:

Comfortable new beds
Guaranteed Wake Up Calls
Quiet Zone Floors
Sleep Amenities
Sleep CD and Relaxation Tips

The Crowne Plaza Sleep Advantage - Sleep Better

*Sleep Advantage Program available at Crowne Plaza Hotels and Resorts in the United States and Canada.

If you have any questions or your plans change, please contact 1-800-2-CROWNE or your local international reservations number for assistance. We look forward to serving you with your future travel needs. Most hotels are independently owned and/or operated.

Copyright Information

This e-mail message and its contents are copyrighted and are the proprietary product of InterContinental Hotels Group. Any unauthorized use, changes to this message or its contents, in any medium, is strictly prohibited.

<Cnf>4630138/2/64227823</Cnf>

DOI Climate Change Task Force Meeting
August 20-23, 2007
Jackson Federal Center
Seattle, Washington

DRAFT AGENDA

Monday, August 20th

1:00 PM	**Welcome and Opening Remarks**	**Armstrong**
1:15 PM	**Update on DOI Task Force**	**L. Scarlett**
2:00 PM	**Instructions for Breakouts**	**Armstrong/ Haspel/Faber**
2:15 PM	**Break and Adjourn to Breakouts** NOTE: 3 Breakouts in Jackson Federal Center 3 others in adjacent Fed bldg	
2:45 PM	**Breakout Sessions** **I. Land and Water Management Group** Purpose: To further articulate the management issues/options **II. Legal-Policy and Science Subcommittees** Purpose: Establish connections between science and policy and to present ideas on science application frameworks that are useful for decision-making	
5:30 PM	**Adjourn**	

Tuesday, August 21st

8:30 AM	**Plenary Session** Purpose: Presentations of management issues/options with feedback and discussions from science and legal-policy members	**Armstrong/Haspel/Faber**
12:00 PM	**Lunch**	
1:30 PM	**Plenary Session (Continued)**	
5:30 PM	**Adjourn**	

Wednesday, August 22nd

8:30 AM	**Plenary Session (Continued)**
12:00 PM	**Lunch**
1:30 PM	**Plenary Session (Continued)**
2:30PM	**Closing Remarks, Way Forward** **Armstrong/Haspel/Faber** NOTE: With emphasis on developing action items and follow-up activities
3:00 PM	**Adjourn** NOTE: Working groups may reconvene until end of day.

Thursday, August 23rd

DOI Puget Sound Climate and Restoration Fieldtrip (half or full day available) – details to follow

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 8, 1949

TRAVEL AUTHORIZATION

1. No. TA-07OHTA10
2. 10-01-2006 (DATE)

3. Office of Historical Trust Accounting (BUREAU OR OFFICE)

4. NAME Abraham E. Haspel (b) (6) [redacted]
5. OFFICIAL STATION Washington, DC

6. TITLE Assistant Deputy Secretary
7. ACCOUNTING OFFICE Washington, DC

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Washington, DC
9. TO: All places in the contiguous United States , Alaska, Hawaii, Puerto Rico, and the Virgin Islands as may e required and returned.

10. PURPOSE AND REMARKS:

To conduct official business, as may be required. I certify that the travel herein was reviewed and determined to be essential for the accomplishment of departmental programs and missions. Payment from a non Federal source for travel related expenses is authorized under 31 USC 1353 provided that prior to acceptance the conditions for each case comply with 41 CFR 304-1.

11. PER DIEM ALLOWANCE:

Per diem or actual subsistence within a high cost area is authorized in accordance with Federal Travel Regulations as issued by GSA and published in the Federal Register.

12. PERIOD OF TRAVEL: Beginning on or about 10-01-06 **Ending on or about** 09-30-07

MODE OF TRAVEL

13. X Common carrier
14. X Extra fare
15. X Government owned conveyance
16. X Privately owned at a mileage rate of .445 cents, subject to:
    - *(a)* X Administratively determined to be the advantage of the Government
    - *(b)* X A showing of advantage to the Government
    - *(c)* X Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. Transportation immediate family
18. X Other *(specify)*
    Rental Car, Excess baggage, Taxi fares, Telephone calls, Conference Room and Facilities, in accordance with FTR-101-7
19. Shipment household goods and personal effects

ESTIMATED COST

20. Transportation _____ $
21. Per Diem _____
22. Other _____
23. TOTAL _____ $ 25,000.00
24. CHARGED TO:
    OHTA 1060-OTX-01 M6

25. _____ (FISCAL OFFICER'S SIGNATURE)

26. A. E. Haspel (REQUESTER'S SIGNATURE)
27. Assistant Deputy Secretary (TITLE)

28. James E. Cason (AUTHORIZING OFFICER'S SIGNATURE)
29. Associate Deputy Secretary (TITLE)

CENTRALLY BILLED ITEMS CHECKED WITH CARD TABLE

27.72

Agent Fee	27.72	-562.80
Airfare	928.20	200.40
Lodging	195.36, 338.00	
Rental Car		
Gas		
Parking		
Taxi / Shuttle		
VXRF		
TAVD		

change reversed see att. receipt

CHECKED SEP 11 2007

07:22:52 Fri Sep 07, 2007

ACTION: R SCREEN: CARD USERID: FSDR
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ
CARDHOLDER#: (b) (6) [redacted] CARDHOLDER: HASPEL, ABRAHAM E
INVOICE DATE: 08 25 2007 TRANSACTION#: 72361922042
SEQ NUM: 003 OF 004 DOC NUM/LINE: BC BC070825001 056 REVIEWED? N
==========< DETAIL PURCHASE INFORMATION >==========
PURCHASE DATE: 08 23 2007 PURCHASE AMOUNT: 195.36
MERCHANT: CROWNE PLAZA DOWNTOWN PURCHASE ADJUSTED: 0.00
CITY/ST: SEATTLE WA BALANCE (DEFAULT): 195.36
LAST REF#: 55417347235152350033397 MCC: (b) (6) [redacted] VENDOR CODE: BANKAMER
SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
000	2007		1060		OTX01		M6	211D

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
000									0.00

REF DOC NO/LINE: P/F: QUANTITY: 0.00 USER:
DESCRIPTION: ADJUST DATE: ADJ POST? Y

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?
02-*L009 HEADER CHANGE

Charge reversed
See att receipt.

07:23:35 Fri Sep 07, 2007

ACTION: R SCREEN: CARD USERID: FSDR
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ
CARDHOLDER#: (b)(6) [redacted] CARDHOLDER: HASPEL, ABRAHAM E
INVOICE DATE: 08 25 2007 TRANSACTION#: 72361922052
SEQ NUM: 004 OF 004 DOC NUM/LINE: BC BC070825001 057 REVIEWED? N
==========< DETAIL PURCHASE INFORMATION >==========
PURCHASE DATE: 08 23 2007 PURCHASE AMOUNT: 338.00
MERCHANT: CROWNE PLAZA DOWNTOWN PURCHASE ADJUSTED: 0.00
CITY/ST: SEATTLE WA BALANCE (DEFAULT): 338.00
LAST REF#: 55417347235152350033488 MCC: (b)(6) [redacted] VENDOR CODE: BANKAMER
SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
000	2007		1060		OTX01		M6	211D

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
000									0.00

REF DOC NO/LINE: P/F: QUANTITY: 0.00 USER:
DESCRIPTION: ADJUST DATE: ADJ POST? Y

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?
02-*L009 HEADER CHANGE

710000587

TRAVEL VOUCHER (Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE

2. TYPE OF TRAVEL
[X] TEMPORARY DUTY
[ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO. 2007-Harvey1

4. SCHEDULE NO.

5. a. NAME (Last, first, middle initial): Harvey, Lindi

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

6. PERIOD OF TRAVEL
a. FROM 08/22/2007 b. TO 08/24/2007

c. MAILING ADDRESS (Include ZIP Code): (b) (6) [redacted]

d. OFFICE TELEPHONE NO.

7. TRAVEL AUTHORIZATION
a. NUMBER(S): 2007-Harvey
b. DATE(S): 09/11/2007

e. PRESENT DUTY STATION: Arlington, VA

f. RESIDENCE (City and State): (b) (6) [redacted]

10. CHECK NO.

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government (Attached [ ] Check [ ] Cash)
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY
TOF

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	948.82	US	Y	08/21/2007	DCA/Washington	NatFAT-Fresno, CA Airp

SEP 18 2007

COMMENTS:
Trip Number 1 Invitational guest of Secretary Kempthorne. Rental car/gas required to travel to Yosemite National Park with the Secretary. Actual lodging and per diem NTE 300% as authorized in accordance with the Federal Travel Regulations. CWT Administrative Fee is $26.00. Approved _____ signing official.

Rental 211O 305.00
211R-7833
211T 30.00
211I 4484

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ Lindi S. Harvey DATE 9/14/07 AMOUNT CLAIMED ▶ 458.17

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ _____ DATE

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION

a. DIFFERENCES, IF ANY (Explain and show amount) $

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00

d. NET TO TRAVELER ▶ $ 458.17

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION
SIO-2007.1000DDD01...68..... - 458.17 NR- 974.82

9/20/7

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

PAID SEP 21 2007

CHECKED SEP 24 2007

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES TRIP# 1

TRAVEL AUTHORIZATION NO. 2007-Harvey

TRAVELER'S LAST NAME Harvey

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.000 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
08/22	8:35A	D-:RES: Arlington,											
08/22		Airline Flight											
08/22	8:35A	A-:FRESNO,CA				40 50		85 00	125.50			125 50	
08/22		Rental Car - Govcc											78 03
08/22		Fuel-Rental/GovCar-Govcc											27 84
08/22		Taxi - Cash											15 00
08/22		Taxes for Lodging											8 50
08/22		Ticket Agent Fee											
08/23		Subsistence				54 00		85 00	139.00			139 00	
08/23		Taxes for Lodging											8 50
08/24	9:59P	D-:FRESNO,CA											
08/24		Taxi - Cash											15 00
08/24	9:59P	A:RES: Arlington,V											
08/24		Subsistence				40 50			40.50			40 50	

135.00 170

If additional space is required, conti

In compliance with the Privacy Act of 1 vided: Solicitation of the information on Chap. 57 as implemented by the Fede E.O. 11609 of July 22, 1971, E.O. 110 November 22, 1943, and 26 U.S.C. 6 of the requested information is to dete eligible individuals for allowable travel under appropriate administrative auth costs of such reimbursements to the used by officers and employees who performance of their official duties. appropriate Federal, State, local or fo

8.17

09/11/07 ACCOUNTING DETAIL |Doc No: 2007-Harvey1
Copyright 1989-2004 Gelco Information Network, Inc
|Harvey, Lindi (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			948.82
FUEL-GOVCC-			27.84
HOTEL TAXES-			17.00
LODGING-409			170.00
M&IE-409			135.00
RENTAL CAR-409			78.33
TAXI CASH-			30.00
TRAVEL AGENT-			26.00
SIO	0.00	0.00	1,432.99

Organization:
2007.1000DDD01...68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,432.99
NON-REIMBURSABLE EXPENSES		974.82
TOTAL AMOUNT CLAIMED		458.17
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		458.17
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		458.17

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 8, 1949

TRAVEL AUTHORIZATION

1. No. TAHARVEY
2. 08-21-2007 (DATE)

3. OIS (BUREAU OR OFFICE) Washington, DC

4. NAME Lindi Harvey SSN (b) (6) [redacted]

5. OFFICIAL STATION

6. TITLE

7. ACCOUNTING OFFICE Washington, DC

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Arlington, VA
9. TO: Such places in the contigous US, AK, HI, PR, and US Territories as may be necessary, and return. Accomplish & missions. Off. business

10. PURPOSE AND REMARKS:

Official business as may be required.
I certify that the travel herein was reviewed and determined to essential for accomplishment of DOI programs and missions. Payment from a non-Federal source for travel-related expenses is authorized under 31 U.S.C. 1353, provided that prior to acceptance, the conditions for each case comply with 41 CFR 304-1 and Part 374 DM 5, and are fully documented and approved via form DI-2000.

Attend/particpate in the Park Centennial Events in Yosemite NP, CA

11. PER DIEM ALLOWANCE:

Actual lodging and per diem NTE 300% as authorized in accordance with the Federal Travel Regulations as issued by GSA and published in the Federal Travel Register.

****Subject to Availablity of Funds*******

12. PERIOD OF TRAVEL: Beginning on or about 08-22-2007 Ending on or about 08-25-2007

MODE OF TRAVEL

13. [ ] Common carrier
14. [ ] Extra fare
15. [ ] Government-owned conveyance
16. [ ] Privately owned at a mileage rate of cents, subject to:
    - (a) [ ] Administratively determined to be the advantage of the Government
    - (b) [ ] A showing of advantage to the Government
    - (c) [ ] Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. [ ] Transportation immediate family
18. [ ] Other *(specify)*
    Excess baggage, taxi fares, telephone calls, rental cars/fuel, conference rooms, POV, public transportation, tolls, newspapers, faxes, misc. supplies, registrations/ATM fees in accordance w/FPMR 101-7, et. seq.
19. [ ] Shipment household goods and personal effects

ESTIMATED COST

20. Transportation	$	950.00
21. Per Diem		600.00
22. Other		700.00
23. TOTAL	$	2,250.00

24. CHARGED TO: 2007-1000- DDDO1- 68

25. (FISCAL OFFICER'S SIGNATURE)

26. (REQUESTER'S SIGNATURE)

27. Lindi Harvey (TITLE)

28. (AUTHORIZING OFFICER'S SIGNATURE)

29. Doug Domenech, Depy COS (TITLE)

This form was electronically produced by Elite Federal Forms, Inc.

Lindi Harvey
Expenses for August 22-24, 2007
Yosemite National Park

		Out of Pocket:	Expensed:
Aug. 22	Taxi to Reagan National Airport	$ 15.00	
	Airfare		$948.82
Aug. 24	Lodging (2 nights)	187.00	
	Car Rental (2 days)	78.33	
	Purchase of gas	27.84	
	Taxi from Airport to residence	15.00	
Total Charges		$323.17	$948.82

Lindi Harvey
(b) (6)
[redacted]

~~Invited~~ Guest
~~Invitational~~ Guest of the Secretary

KING CAB CO.
ALEXANDRIA, VA.
PH: 703-549-3530

FROM Reagan Nat'l Airport
TO Residence
DATE 8/24/07 FARE$ 15.00
DRIVER'S NAME _____ CAB# _____

1 STOP SHOP
1605 N CEDAR AVE
FRESNO CA
DLR# 00469320
DATE: 08/24/07
[redacted]
89GM5DS6J7H
INV# 103413 53/8W
REF# 921 09-034
AUTH# 00-567083

PUMP# 3 SELF
UNL [illegible]
PRICE/GAL [illegible]

FUEL TOTAL $27.84

COMPLETE A SURVEY
WWW.GASVISIT.COM
REGISTER TO WIN

THANK YOU

DATE 8/22/07 AMOUNT $ 15.00
RECEIVED FROM Residence
FROM Reagan Nat'l Airport
DESTINATION Yosemite Park Mdg
CAB # _____ DRIVER I.D. # _____
DRIVERS NAME _____

Rental Location

DTG OPERATIONS dba DOLLAR RENT A CAR
5175 E. CLINTON RD.
FRESNO, CA 93727
(866) 434-2226

Car To Be Returned to Above Unless Stated Below

RA CLOSED AT
FRESNO AIR TERMINAL

Customer Information

HARVEY LINDI
(b) (6) [redacted]

MIN CHG 1DAY=24HRS

CREDIT CARD/CASH PAYMENTS
(b) (6) [redacted]

Vehicle Information

VEH.#: 197884-1
LIC.#: 5UZZ951 STALL#:
07 CHRYSLER PT CONV
Rate: GOVT Cls: ITAR 052600
FUEL LEVEL IN: FULL
FUEL LEVEL OUT: FULL
MILEAGE IN: 25267
MILEAGE OUT: 25100
TOTAL MLS DRIVEN: 167
VEH. CONDITION IN:
NONE

DS
082375/951 082375/951
ID:CW2232 09581283

Rental Payment

08/24/2007 1055 AL226734-5

TIME OUT TIME IN
08/22/2007 1352 08/24/2007 1055

CHARGES

Days	2 Dys @ 23.00	46.00
TOTAL T & M		46.00
State Tax	7.975%	4.96
Under Age 25	INCLUDED	
LossDmgWaivr	INCLUDED	
000115	INCLUDED	
ApConRecFee	11.110%	5.22
CUSTOMER FAC	1 Itm@ 10.00	10.00
GARS	2 Dys@ 5.00	10.00
TOURISM SURC	2.500%	1.15
TOTAL CHARGES		78.33
NET DUE		78.33
PAYMENTS		-78.33

ZERO BALANCE 0.00

CALIFORNIA - NOTICE TO RENTERS

You are responsible for all collision damage to the rented Vehicle even if someone else caused it or the cause is unknown. You [illegible] sible for the cost of repair up to the value of the Vehicle, and towing, storage and impound fees. Your own insurance, or the issuer [illegible] it card You use to pay for the car rental transaction, may cover all or part of Your financial responsibility for the rented Vehicle. [illegible] check with Your insurance company, or credit card issuer, to find out about Your coverage and the amount of the deductible, if any [illegible] You may be liable. Further, if You use a credit card that provides coverage for Your potential liability, You should check with the [illegible] mine if You must first exhaust coverage limits of Your own insurance before the credit card coverage applies.

LDW does not apply if: (1) the damage or loss results from Your (i) intentional, willful, wanton, or reckless conduct, (ii) operation [illegible] cle under the influence of drugs or alcohol in violation of section 23152 of the Vehicle Code, (iii) towing or pushing anything, or [illegible] of the vehicle on an unpaved road if the damage or loss is a direct result of the road or driving conditions; (2) the damage or [illegible] while the vehicle is used (i) for commercial hire, (ii) in connection with conduct that could be properly charged as a felony, or [illegible] in a speed test or contest or in driver training activity; (3) operated by a person other than an Authorized Driver; (4) operated [illegible] United States; or (5) You (i) provided fraudulent information to the Company or (ii) provided false information and the Company [illegible] have rented the Vehicle if it had instead received true information. "Authorized Driver" means (1) the Renter; (2) the Renter's [illegible] person is a licensed driver and satisfies the Company's minimum age requirement; (3) the Renter's employer or co-worker if they [illegible] in business activity with the Renter, are licensed drivers, and satisfy the Company's minimum age requirements; and (4) any [illegible] by the Company on the rental agreement as an authorized driver.

The cost of optional LDW is $ ___ to $ ___ for every day, depending upon the vehicle rented.

These terms supersede any conflicting terms stated elsewhere.

9.00

The Rental Agreement [illegible] the undersigned and the company identified above (the "Company"). By signature below, the undersigned acknowledges and represents that [illegible] by valid driver's [illegible] they have read and agree to the terms, conditions and notices, both printed and written, including the Loss Damage Waiver information, that [illegible] THE UNDERSIGNED AUTHORIZE THE COMPANY TO PROCESS A CHARGE TO THEIR CREDIT, DEBIT OR CHARGE CARD IN THE AMOUNT [illegible] RENTAL UPON SIGNATURE OF LOW AND FOR ALL ADDITIONAL CHARGES DUE UPON RETURN OF THE VEHICLE. ALL CHARGES SUBJECT TO AUDIT. No additional drivers are permitted without the [illegible]

X ___ RENTER X ___ ADD [illegible]

Carlson Wagonlit Travel

August 21, 2007

For: LINDI HARVEY
To: ETKT TO BE ISSUED ON 21AUG
DOI
ETKT 21AUG

Sales Person: MK
Locator: GKODYN
Customer Number: (b) (6) [redacted]

THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.

Wednesday August 22, 2007

US Airways — Flight Number: 873
Class of Service: Coach Class Y
Depart: WASHINGTON/NATL,DC — 8:35 Am August 22, 2007
Arrive: LAS VEGAS, NV — 10:38 Am August 22, 2007
Total Flight Time: 5 Hours 3 Minutes Non-Stop
Equipment: 319
Meal Service: Available For Purchase
Status: Confirmed — Confirmation Number: F2JJL7
Reserved Seat: HARVEY/LINDI 13E
DEP-TERMINAL C ARR-TERMINAL 1

Wednesday August 22, 2007

US Airways — Flight Number: 209
Class of Service: Coach Class Y
Depart: LAS VEGAS, NV — 11:50 Am August 22, 2007
Arrive: FRESNO, CA — 12:55 Pm August 22, 2007
Total Flight Time: 1 Hour 5 Minutes Non-Stop
Equipment: 319
Meal Service: None
Status: Confirmed — Confirmation Number: F2JJL7
Reserved Seat: HARVEY/LINDI 5D
DEP-TERMINAL 1
*LAS-FAT OPERATED BY AMERICA WEST DBA US AIRWAYS

Wednesday August 22, 2007

DOLLAR — Intermediate Car
Pick Up: August 22, 2007 12:55 Pm — Location: FRESNO, CA FRESNO, CA
Return: August 24, 2007 12:29 Pm
Daily Rate: 23.00 USD — Extra Days: 23.00 Extra Hours: 8.00
Unlimited Free Miles
Confirmation Number: V7037448
Supplemental Information: AS-UDN

Friday August 24, 2007

US Airways Flight Number: 2708
Class of Service:Coach Class Y
Depart: FRESNO, CA 12:29 Pm August 24, 2007
Arrive: PHOENIX, AZ 2:06 Pm August 24, 2007
Total Flight Time: 1 Hour 37 Minutes Non-Stop
Equipment: CR9
Meal Service: None
Status: Confirmed Confirmation Number: F2JJL7
Reserved Seat: HARVEY/LINDI 9C
ARR-TERMINAL 4
*FAT-PHX OPERATED BY MESA AIRLINES DBA AMERICA WEST EXPRESS

Friday August 24, 2007

US Airways Flight Number: 46
Class of Service:Coach Class Y
Depart: PHOENIX, AZ 2:44 Pm August 24, 2007
Arrive: WASHINGTON/NATL,DC 9:59 Pm August 24, 2007
Total Flight Time: 4 Hours 15 Minutes Non-Stop
Equipment: 752
Meal Service: Available For Purchase
Status: Confirmed Confirmation Number: F2JJL7
Reserved Seat: HARVEY/LINDI 15C
DEP-TERMINAL 4 ARR-TERMINAL C
*PHX-DCA OPERATED BY AMERICA WEST DBA US AIRWAYS

Wednesday February 20, 2008

Other Service
Feb 20, 2008 - Feb 20, 2008
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Name	Invoice/Ticket	Base	Tax1	Tax2	Tax3	Total
HARVEY LINDI	2820/0377056656131	818.60USD	81.40US	13.60ZP	27.50XT	921.10
HARVEY LINDI	2820/8155238686	27.72				27.72
					Total Amount:	948.82

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-597-8016
YOU DESERVE A VACATION AND WE HAVE THE PERFECT ONE
WAITING FOR YOU, INCLUDING MILITARY RATES. VISIT
WWW.SATOVACATIONS.COM OR CALL TOLL-FREE 877-698-2554
CAR DECLINED/A//21AUG
LODGING DECLINED//21AUG
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

US Airways
Class of Service:Coach Class Y
Depart: FRESNO, CA
Arrive: PHOENIX, AZ
Total Flight Time:
Equipment: CR9
Meal Service: None
Status: Confirmed
Reserved Seat: HARVEY/LINDI 9C
ARR-TERMINAL 4
*FAT-PHX OPERATED BY MESA AIRLINES DBA AMERICA WEST EXPRESS

Flight Number: 2708

12:29 Pm August 24, 2007
2:06 Pm August 24, 2007
1 Hour 37 Minutes Non-Stop

Confirmation Number: F2JJL7

Friday August 24, 2007

US Airways
Class of Service:Coach Class Y
Depart: PHOENIX, AZ
Arrive: WASHINGTON/NATL,DC
Total Flight Time:
Equipment: 752
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HARVEY/LINDI 15C
DEP-TERMINAL 4 ARR-TERMINAL C
*PHX-DCA OPERATED BY AMERICA WEST DBA US AIRWAYS

Flight Number: 46

2:44 Pm August 24, 2007
9:59 Pm August 24, 2007
4 Hours 15 Minutes Non-Stop

Confirmation Number: F2JJL7

Wednesday February 20, 2008

Other Service
Feb 20, 2008 - Feb 20, 2008
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
HARVEY LINDI	2820/0377056656131	818.60USD	61.40US	13.60ZP	27.50XT	921.10
HARVEY LINDI	2820/8155238686	27.72				27.72
					Total Amount:	948.82

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
YOU DESERVE A VACATION AND WE HAVE THE PERFECT ONE
WAITING FOR YOU, INCLUDING MILITARY RATES. VISIT
WWW.SATOVACATIONS.COM OR CALL TOLL-FREE 877-698-2554
CAR DECLINED/A//21AUG
LODGING DECLINED//21AUG
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

9/20/07

TO: Barbara Smith
Fax 303-969-6697
Office 303-969-5697

From: Duane Calhoun
Phone 202/208-7351

Per Barbara Martin's Request
"Lendi Harvey Lodging
Receipt"

Delaware North Companies
PARKS & RESORTS
at Yosemite

6771 North Palm Avenue
Fresno, CA 93704
www.YosemitePark.com
For Reservations call: (559) 252-4848

FOLIO NO.	ROOM NO.	GUEST NO.
12H4SM	L4525	1573JW

RATE/PACKAGE	NO. IN PARTY	DEPOSIT RECD
	2	$220.64

RATE/PACKAGE DESCRIPTION

[redacted]
Harvey, Mindy
Hayes, Mrs. Jennifer
[redacted] Way
Yosemite National Park, CA 95389

08/24/07 [redacted]

DATE			DESCRIPTION		CHARGES	PAYMENTS
08/22/07	LROOM	L4525	1 YL Government Rate	--	85.00	
08/22/07	RMTAXM	L4525	1 Mariposa County Rm Tax	--	8.50	
08/23/07	LROOM	L4525	1 YL Government Rate	--	85.00	
08/23/07	RMTAXM	L4525	1 Mariposa County Rm Tax	--	8.50	
08/24/07	AMX	L4525	1 (b) (6) [redacted]	LC		187.00
			Subtotals		$ 187.00	187.00

PAID IN FULL --- THANK YOU!

THE AHWAHNEE · CURRY VILLAGE · WAWONA HOTEL · YOSEMITE LODGE AT THE FALLS · WHITE WOLF LODGE · TUOLUMNE MEADOWS LODGE

gree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or sociation fails to pay for any or the full amount of these charges. I also agree that all charges contained in this account are correct and any sputes or requests for copies of charges must be made within five days of my departure.

GNATURE _____

Printed on Recycled Paper

250659 710000588

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: PMB

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: AK Seattle Trip2

4. SCHEDULE NO.:

5. a. NAME (Last, first, middle initial): Scarlett, Lynn

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 08/12/2007 b. TO 08/21/2007

c. MAILING ADDRESS (Include ZIP Code): 1849 C Street, NW MS-5100 Washington, DC 20240

d. OFFICE TELEPHONE NO.: 202-208-4203

7. TRAVEL AUTHORIZATION: a. NUMBER(S) 6600A0003 b. DATE(S) 08/22/2007

e. PRESENT DUTY STATION: Washington, DC

f. RESIDENCE (City and State): (b) (6) [redacted]

10. CHECK NO.:

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government (Attached [ ] Check [ ] Cash)
d. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY

TDL F

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	2,655.80			08/12/2007	DCA-Washington Nat	Ketchikan, AK
See Attached Ticket 2	242.00			07/11/2007	Ketchikan, AK	Craig, AK

SEP 18 2007

211083725
211T 60 00

COMMENTS:
Trip Number 1 Alaska Trip & Climate Change Meeting
Various Locations in AK & Seattle, WA

RECEIVED SEP 19 2007

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 9/12/07 AMOUNT CLAIMED ▶ 897.75

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; Id. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ Brian Waidmann Chief of Staff DATE

17. FOR FINANCE OFFICE USE ONLY COMPUTATION
a. DIFFERENCES, IF ANY (Explain and show amount) $
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION $
Certifier's initials:
c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00
d. NET TO TRAVELER ▶ $ 897.75

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

PAID SEP 21 2007

18. ACCOUNTING CLASSIFICATION
SIO-2007.1000DDD01...68..... 897.75 NR- 4,561.27

9/19/07

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel:
- Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.
- (h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).
- (i) Complete for per diem and actual expense travel.
- (j) Show total subsistence expense incurred for actual expense travel.
- (m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
- (n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. 6600A0003

TRAVELER'S LAST NAME Scarlett

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.000 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
08/12 08/12	6:30A	D-:RES: Arlington, Airline Flight											
08/12 08/12	3:24P	A-:KETCHIKAN,AK Taxi - Cash	98/81			63 75		120 00	63.75			63 75	15 00
08/13 08/13	6:45A	D-:KETCHIKAN,AK Airline Flight											
08/13 08/14	7:15A 7:15A	A-:CRAIG,AK D-:CRAIG,AK	140/79			79 00		155 00	79.00			79 00	
08/14 08/15	12:50P 8:27P	A-:JUNEAU,AK D-:JUNEAU,AK	129/89			89 00		119 00	89.00			89 00	
08/15 08/16	10:12P 6:00P	A-:ANCHORAGE [INCL D-:ANCHORAGE [INCL	181/97			97 00		170 00	97.00			97 00	
08/16 08/17	7:00P	A-:KENNICOTT,AK Subsistence	249/110			110 00 110 00		249 00 249 00	110.00 110.00			110 00 110 00	
08/18 08/18	1:00P 5:00P	D-:KENNICOTT,AK A-:COPPER CENTER,A	89/74			<400 80 00	76 05	135 00	80.00			80 00	
08/19 08/19	10:00A 5:00P	D-:COPPER CENTER,A A-:ANCHORAGE [INCL	84/97			97 00		181 00	97.00			97 00	
08/19 08/20	7:07A	Taxes for Lodging D-:ANCHORAGE [INCL											
08/20	11:32A	A-:SEATTLE,WA			134/64	64 00		136 00	64.00			64 00	
										SUBTOTALS ▶	0 00	789 75	15 00
										TOTALS ▶			

...or firing of an ...tions of the per... Social Security ... of the Internal ...7, November 22, ...mber; disclosure ...cation allowance ... Disclosure of ... other instances; ...SN) required to ...rt.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶

STANDARD FORM 1012 BACK (10-77)

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel: Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.
(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).
(i) Complete for per diem and actual expense travel.
(j) Show total subsistence expense incurred for actual expense trave.
(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental relocation other than subsistence, etc.

Complete this information if this is a continuation sheet PAGE 3 OF 1 PAGES

TRIP# 1

TRAVEL AUTHORIZATION NO. 6600A0003

TRAVELER'S LAST NAME Scarlett

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.00 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
08/21		Taxi - Cash											45.00
08/21	11:00P	A:Washington, DC											
08/21		Subsistence				48.00			48.00			48.00	
08/21		Ticket Agent Fee											
								SUBTOTALS ▶			0.00	48.00	45.00
								TOTALS ▶			0.00	837.75	60.00

837.75

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 897.75

STANDARD FORM 1012 BACK (10-77)

09/10/07 ACCOUNTING DETAIL |Doc No: AK Seattle Trip2

Copyright 1989-2004 Gelco Information Network, Inc

|Scarlett, Lynn (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			2,897.80
HOTEL TAXES-			38.59
LODGING-409			1,514.00
M&IE-409			837.75
TAXI CASH-			60.00
TRAVEL AGENT-			110.88
SIO	0.00	0.00	5,459.02

Organization:
2007.1000DDD01...68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		5,459.02
NON-REIMBURSABLE EXPENSES		4,561.27
TOTAL AMOUNT CLAIMED		897.75
GOV'T ADVANCE OUTSTANDING	0.00	
GOV'T ADVANCE APPLIED	0.00	
		0.00
NET TO TRAVELER (GOVT)		897.75
GOV'T CHARGE CARD EXPENSES	0.00	
GOV'T CHARGE CARD ATM ADV	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		897.75

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 8, 1949

TRAVEL AUTHORIZATION

1. No. TA6600A0003
2. 04-17-2007 (DATE)

3. Secretary's Immediate Office (BUREAU OR OFFICE)

4. NAME Lynn Scarlott (b) (6) [redacted]

5. OFFICIAL STATION Washington, DC

6. TITLE Deputy Secretary

7. ACCOUNTING OFFICE Denver, CO

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Washington, DC
9. TO: Such places internationally or in the contiguous United States, Alaska, Hawaii, Puerto Rico & U.S Territories as may be necessary and return.

10. **PURPOSE AND REMARKS:**

Annual Limited Open Travel Authorization 05-02-07 through 01-31-08. Official travel as required, I certify that the travel herein was reviewed and determined to be essential for accomplishment of Departmental programs and missions. Payment from non-federal source for travel related expenses is authorized under 31 USC 1353, provided that prior to acceptance, the condition for each case comply with 41 CFR 304-1 and Part 374 DC 5, and are fully documented and approved via form DI-2000, including attendance at conferences where traveler is a speaker, presenter, or staff to the Secretary.

11. **PER DIEM ALLOWANCE:**

Per Diem or actual subsistence expenses within a high cost area is authorized in accordance with Federal travel Regulations as issued by GSA and published in the Federal Register.

AOT

12. **PERIOD OF TRAVEL: Beginning on or about** 05-02-2007 **Ending on or about** ~~01-31-2008~~ 09-30-2007 DCOR

MODE OF TRAVEL

13. ☐ **Common carrier**
14. ☐ **Extra fare**
15. ☐ **Government-owned conveyance**
16. ☐ **Privately owned** **at a mileage rate of** 48.5 **cents, subject to:**
    - *(a)* ☐ **Administratively determined to be the advantage of the Government**
    - *(b)* ☐ **A showing of advantage to the Government**
    - *(c)* ☐ **Not to exceed cost by common carrier, including consideration of Per Diem allowance**

MISCELLANEOUS

17. ☐ **Transportation immediate family**
18. **Other** *(specify)*
    Ground Transportation (including rental car, taxi, etc.), phone calls and minor misc. expenses authorized as necessary to conduct official business.
19. ☐ **Shipment household goods and personal effects**

ESTIMATED COST

20. **Transportation** $
21. **Per Diem**
22. **Other**
23. **TOTAL** $
24. **CHARGED TO:**
    2007-1000-DDD01-68
25. (FISCAL OFFICER'S SIGNATURE)
26. (REQUESTER'S SIGNATURE)
27. Deputy Secretary (TITLE)
28. (AUTHORIZING OFFICER'S SIGNATURE)
29. Deputy Chief of Staff (TITLE)

This form was electronically produced by Elite Federal Forms, Inc.

[illegible]
[illegible] LINCOLN [illegible]
[illegible]
[illegible]

Room [illegible]
Guest Name

Adults 1
Folio [illegible]
Arrival 08/[illegible]/07 [illegible]
Departure 08/13/07 [illegible]
Deposit Amt. .00
Deposit Rec. .00

12

DATE	ROOM	DESCRIPTION	CONTENT	AMOUNT
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	120.00

Total Charged 120.00
Total Due .00

Billed to [illegible]

Guest Signature [signature]

[illegible] 888 VENETIA WAY, KETCHIKAN, ALASKA 99901
[illegible] (907) 225-[illegible] FAX (907) 225-[illegible]
[illegible] (888) [illegible]

Inn of the Little Blue Heron

South Cove Boat Harbor
406 9th Street
Craig, Alaska 99921

Bucareli Bay Suite
403 Beach Road
Craig, Alaska 99921

Tammy Demmert
P.O. Box 556
Craig, Alaska 99921
907-826-3608
tammydemmert@hotmail.com
www.littleblueheroninn.com

Invoice No.

081307Scarlett

DATE OF STAY:

August 13, 2007

To: Lynn Scarlett
Address.

Phone #
Email:
Method of Payment: Visa or Mastercard
Act. # (b) (6) [redacted] 600 0025 0659 Exp: 08/07
Expires:
Last 3 digits on back of card ( )

140/75

DATE:	DESCRIPTION:	RATE:	TOTAL
8/13/07	Bucareli Bay Rm. # 2		$ 155.00
		Sub Total:	$ 155.00
		City Tax:	Exempt / state
		Total Due:	$ 155.00

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any of the full amount of these charges & I shall be responsible for any loss or damage to the premises or its contents

SIGNATURE: _____

THANK YOU for staying at one of our fine locations of the INN OF THE LITTLE BLUE HERON !

August 15, 2007

GOLDBELT
HOTEL JUNEAU

Reservation Number 37985

Send to Lynn Scarlett
(b) (6) [redacted]

Phone

Guest Name Lynn Scarlett

Arrival Date 8/14/2007

Departure Date 8/15/2007

Room Information 214 - Double Waterview

Bill To Scarlett, Lynn
(b) (6) [redacted]

Phone

Folio Number 44408

Trans Date	Description			Voucher	Amount
Charges					
8/14/2007	Government Room	government		ghj-214	119.00
	Total Charges				119.00
Payments					
8/15/2007	Mastercard	(b) (6) [redacted]	093590	0000021375	-119.00
	Total Payments				-119.00
				Balance Due:	**0.00**

	Total
Total Tax	**$0.00**

124/84

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

Guest Signature: _____

The hotel Captain Cook

4TH AVENUE AT K STREET
ANCHORAGE, ALASKA 99501
PHONE (907) 276-6000
FAX (907) 343-2298

Folio Date	Page Number
08-16-07	1
Folio Number	
726FG	
Room Number	
CN04	
Clerk	
CKG	N

MS LYNN SCARLETT
1849 C STREET NW
WASHINGTON DC 20420

Date	Reference	Description	Charges	Credits
08-15-07	#ECN04	GOVERNMENT TAX EXEMPT	170.00	
08-16-07	VM0755	(b) (6) [redacted] VISA OR MASTERCARD PMT - PRIOR SALE Auth:098110Ref:00290847 Merch#:328201316994806526 TransId:		170.00

15/47

THANK YOU FOR STAYING AT THE HOTEL CAPTAIN COOK

I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND BE HELD PERSONALLY RESPONSIBLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF THESE CHARGES. I ALSO AGREE THAT ALL CHARGES CONTAINED IN THIS ACCOUNT ARE CORRECT AND ANY DISPUTES OR REQUESTS FOR COPIES OF CHARGES MUST BE MADE WITHIN SEVEN DAYS AFTER MY DEPARTURE.

SIGNATURE

BALANCE DUE
.00

KENNICOTT GLACIER LODGE
PO Box 103940
Anchorage, AK 99510
907-258-2350 / / Fax:907-248-7975

KGL Guest Tab -

Name	Lynn Scarlett	Arr - Dep	8/16/2007 - 8/18/2007	Charges	$588.10
Address	(b) (6) [redacted]	Recorded	4/14/2007	Tax	$0.00
City		Confirmation	17340	Total	$588.10
State		Party	1 / 0 / 0 / 0	Paid	$498.00
Postal Co		Credit Card	x	Due	$90.10
Telephone			/2007		

Date	Description	Quantity	Actual Price	Total
8/16/2007	South Wing # 104	1	$249.00	$249.00
8/16/2007	ROOM ONLY	1	$0.00	$0.00
8/16/2007	DIN, Cornish Game Hens	1	$29.95	$29.95
8/17/2007	South Wing # 104	1	$249.00	$249.00
8/17/2007	DIN, Halibut	1	$33.95	$33.95
8/17/2007	BKFST, Buffet	1	$15.95	$15.95
8/17/2007	LUNCH, Stuffed Tomato	1	$8.75	$8.75
8/17/2007	Tea	1	$1.50	$1.50
4/14/2007	Visa	Lynn Scarlett		($498.00)
5/22/2007	Visa	Lynn Scarlett		$498.00
5/30/2007	Visa	Lynn Scarlett		($498.00)

Tax and Gratuity Detail: 2 + 4/110

Total	$588.10
Paid	$498.00 room charge
Due	$90.10 T70 amex

Our Policies

Office Use Only

Cash
Check #_____
Credit Card _____
Gift Certificate_____

Joanne
$10 per Room fee
$30 cancellation fee
total
+ (room charge) $498.00
$ = 528.00
June & July 18th reservation

Chanelle: please check. From the attached, it looks like they charged my personal account, not the business account. Please see me to discuss

The hotel Captain Cook
4TH AVENUE AT K STREET
ANCHORAGE, ALASKA 99501
PHONE (907) 276-6000
FAX (907) 343-2298

Folio Date	Page Number
08-20-07	1
Folio Number	
74426	
Room Number	
1079	
Clerk	
TLS	N

MS LYNN SCARLETT
1849 C STREET NW
WASHINGTON DC 20420

Date	Reference	Description	Charges	Credits
08-19-07	#T1079	GOVERNMENT RATE	181.00	
08-19-07	TX1079	ROOM TAX	21.72	
08-20-07	VM0532	(b) (6) [redacted] PRIOR SALE VISA OR MASTERCARD IMI Auth:074051Ref:00291307 Merch#:328201316994806526 TransId:		202.72

THANK YOU FOR STAYING AT THE HOTEL CAPTAIN COOK

I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND BE HELD PERSONALLY RESPONSIBLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF THESE CHARGES. I ALSO AGREE THAT ALL CHARGES CONTAINED IN THIS ACCOUNT ARE CORRECT AND ANY DISPUTES OR REQUESTS FOR COPIES OF CHARGES MUST BE MADE WITHIN SEVEN DAYS AFTER MY DEPARTURE.

BALANCE DUE
.00

SIGNATURE

Marriott.
HOTELS & RESORTS

SEATTLE AIRPORT MARRIOTT HOTEL — GUEST FOLIO

ROOM	NAME	RATE	DEPART	TIME	ACCT#
332	SCARLETT/LYNN	136.00	08/21/07	13:00	6738

ARRIVE: 08/20/07 TIME: 21:49

ROOM TYPE: NSD

ROOM CLERK: 8

PASSPORT:

PAYMENT

MR#:

ADDRESS

DATE	REFERENCE		CHARGES	CREDITS	BALANCE DUE
08/20	ROOM	332, 1	136.00		
08/20	ROOMTAX	332, 1	11.70	A	
08/20	OCCTAX	332, 1	3.81	B	
08/20	LOCALTAX	332, 1	1.36	C	
08/21	BK CARD			$152.87	

TO BE SETTLED TO: MASTERCARD CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT, PLEASE CALL THE FRONT DESK, OR PRESS "MENU" ON YOUR TV REMOTE CONTROL TO ACCESS VIDEO CHECK-OUT.

SUMMARY OF TAXES

DESCRIPTION		TAXED AMOUNT		TAX
ROOM TAXES	(ABC)			16.87
A ROOM STATE TAX		.00	11.70	
B CITY OCCUPANCY TAX		.00	3.81	
C LOCAL CITY TAX		.00	1.36	
D CITY FOOD/BEV TAX			.00	.00
E NON-ROOM ST TAX			.00	.00
J PARKING CITY			.00	.00
K PARKING STATE			.00	.00
L WATER CNTY TAX			.00	.00
M WIRED FOR BUS TAX			.00	.00

NET CHARGES	TAX	CREDITS	FOLIO
136.00	16.87	.00	152.87

EXP. REPORT SUMMARY

08/20 ROOM&TAX 152.87

Marriott.
HOTELS & RESORTS

SEATTLE AIRPORT MARRIOTT HOTEL
3201 S. 176TH ST.
SEATTLE:, WA 98188

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 check-out, you will owe us interest from the check-out date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X _____

226238014998
COPPER MOOSE B&B
HC 60 BOX 227 H
COPPER CENTER, AK 99573
9078224244

Merchant ID: 000226238014998
Term ID:00574308

Sale

MASTERCARD
0659
Entry Method: Swiped
Approved: Online
Batch #: 000171
08/19/07 08:37:18
Cust #: (b) (6) [redacted]

Inv#: 000004
Appr Code: 045515

Amount:	$	135.00
Tax:	$	0.00
Total:	$	135.00

Customer Copy

THANK YOU

Electronic Invoice

Print this page | Close window | Help

Salesperson: 98
For: SCARLETT/LYNN

Invoice number: 0470802
Record locator: K8LUHO

Date: 21AUG2007
Customer number: (b) (6)

DO!

Notes: YOUR AIRFARE ON 27JUN AT 1008 IS ~~2029.40~~ #2655.80
THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.

#1678.00

Sun, Aug 12

Air	ALASKA AIRLINES	Flight # : 1	Economy	
	From : WASHINGTON REAGAN, DC		0800A	
				5Hr 41Min
	To : SEATTLE TACOMA, WA		1041A	Non Stop

Sun, Aug 12

Air	ALASKA AIRLINES	Flight # : 178	Economy	
	From : SEATTLE TACOMA, WA		0225P	
				1Hr 59Min
	To : KETCHIKAN, AK		0324P	Non Stop
	SCARLETT/LYNN	Seat(s) - 06D		

Tue, Aug 14

Air	ALASKA AIRLINES	Flight # : 65	Economy	
	From : KETCHIKAN, AK		0941A	
				3Hr 09Min
	To : JUNEAU AK, AK		1250P	Non Stop

Wed, Aug 15

Air	ALASKA AIRLINES	Flight # : 67	Economy	
	From : JUNEAU AK, AK		0927P	
				1Hr 45Min
	To : ANCHORAGE, AK		1012P	Non Stop
	SCARLETT/LYNN	Seat(s) - 06D		

Mon, Aug 20

Other

CA/HOTEL GUARANTEED CANCEL BY 6PM TO AVOID BILLING

#425.40

Mon, Aug 20

Air	ALASKA AIRLINES	Flight # : 166	Economy	Food for Purchase
	From : ANCHORAGE, AK		0707A	
				3Hr 29Min
	To : SEATTLE TACOMA, WA		1132A	Non Stop
	SCARLETT/LYNN	Seat(s) - 11C		

Tue, Aug 21

Air	UNITED AIRLINES	Flight # : 910	Economy	Food for Purchase
	From : SEATTLE TACOMA, WA		0745A	
				4Hr 54Min
	To : WASHINGTON DULLES, DC		0339P	Non Stop
	Equipment : BOEING 767 JET			
	SCARLETT/LYNN	Seat(s) - 15B	UA - XXXXXXXXX61	

Sun, Feb 17

Other INFORMATION
THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Wed, Aug 20

Hotel SEATTLE TACOMA, WA
MARRIOTT HOTELS
MARRIOTT SEATTLE AI
3201 S 176TH ST
SEATTLE WA 98188
Phone 206-241-2000
Guaranteed Late Arrival
Confirmation: 06032144

Out - 21AUG
1 Night(s)
1 Room(s) - US GOVT PER DIEM RATE: DELUXE FED-MILITARY EMP ONLY. VALID
Rate - 136.00USD Per Night

Ticket number	UA7060895109	SCARLETT LYNN Billed to CA (b) (6) [redacted]	*652.40
Service Fee	XD8165930039	Billed to CA (b) (6) [redacted]	*27.72

Subtotal	580.12
Net credit card billing	*580.12
Total amount due	0.00

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 800-697-8916
CAR DECLINED/A//27JUN
LODGING DECLINED//27JUN
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.
.....REFUND INFORMATION.....
....TICKET NUMBER-0167056656011...PROCESSED ON...18JUL/
.....BASE FARE AMOUNT-490.23..TAX-57.57..TTL REFUND-547.80
.....REFUNDED BACK TO-250659
.....INVOICE NUMBER-0002661
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.
.....REFUND INFORMATION.....
....TICKET NUMBER-0167056656030...PROCESSED ON...31JUL/
.....BASE FARE AMOUNT-638.14..TAX-80.46..TTL REFUND-718.60
.....REFUNDED BACK TO-250659
.....INVOICE NUMBER-0002702
.....REFUND INFORMATION.....
....TICKET NUMBER-0167056656053...PROCESSED ON...15AUG/
.....BASE FARE AMOUNT-548.84..TAX-61.96..TTL REFUND-610.80
.....REFUNDED BACK TO-250659
.....INVOICE NUMBER-0002722
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.
TICKETS WILL BE ISSUED TO INDIVIDUAL GOVT CREDIT CARD
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.
G6719
U15-00
THIS INVOICE WILL SERVE AS YOUR PASSENGER RECEIPT
YOU MAY ALSO OBTAIN A PASSENGER RECEIPT OF EACH TICKET
BY REQUESTING IT FROM THE AIRLINES UPON CHECKIN
U6-----
U7-0.00-27.72-0.00
U3-OS
U4-1OSOS

Numerous Changes were made
Several Refunds as well

Total Ticket Amount
$2655.80
$110.88 Tkt Agt Fee (4)
$2766.68 C 27.72

Your travel arranger provides the information contained in this document to you. Sabre® Virtually There® is not responsible for the content of this document. Please contact your travel arranger should you have any questions.

Promech Air Itinerary

Record Locator: LXNHGZ

Passengers

Passenger 1 Cesar, Niles
Passenger 2 Neidig, Hans
Passenger 3 Scarlet, Lynn

Billing Contact Information

Telephone: 075867182

Air Itinerary & Pricing Calculation

Date	Day	Flight	Route	Times	Base Fare	Taxes	Fee's	Total
2007-08-13	Mon	81	WFB-KTN-CGA	06:30AM-06:34AM 06:35AM-07:05AM	$121.00	$0.00	0.00	121.00
2007-08-14	Tue	81	CGA-KTN	07:15AM-07:54AM	$121.00	$0.00	0.00	121.00
							# Passengers:	3
							Total:	726.00

Travel is only confirmed when payment is indicated below:

Payment Information

Payment History (Green=Approved, Red=Declined/Not Approved)

Pmt #	Pmt Date	Method	Acct/CC/PO Number	Expiration	Amount	Approval & Codes	Check # or Credit Card CID
1	2007-08-20 14:15:09	MasterCard	8041	0609	242.00	1	
BILLING INFO: hans neidig Agent: lindak							
2	2007-07-11 14:13:01	MasterCard	0659	0807	242.00	1	Lynn Scarlett
BILLING INFO: 20240 Agent: alison							
3	2007-07-07 10:55:43	credit	2698		-726.00	1	
BILLING INFO: 99901 Agent: jillin							
7	2007-07-06 09:51:03	split			242.00		
BILLING INFO: LXNHGZ Agent: apg							
8	2007-07-06 09:49:42	MasterCard	2698	0409	968.00	1	
BILLING INFO: 20854 Agent: apg							

Conditions of Travel

Trip	Fare Details
RT - regular r/t	

Fare is valid with the following rules:

- NON-REFUNDABLE.
- CHANGES OK.
- 40 lbs luggage allowed per passenger (Additional luggage, fish boxes and coolers are charged extra).
- PLEASE CHECK-IN 30 MINUTES PRIOR TO DEPARTURE.
- FLIGHT TIMES ARE APPROXIMATE.

Hans + Scarlet are paid for
Thanx!
Linda

8/20/2007 12:

BY: PROMECH AIR;

9072473875; AUG-20-07 2:05PM; PAGE 1/1

2007-09-18 04:31

Kennicott Glacier Lodge
PO Box 103940
Anchorage, AK 99510
907-258-2350

Date: 04/14 13:57

CREDIT CARD SALE

(b) (6) [redacted]

CARD NUMBER: $2370.00
TRAN AMOUNT: 169365
APPROVAL CD: 1
CUST CODE #: 0
TAX : SCARLETT
RES NAME : 081607
RES DATE :

** Customer Copy **

Kennicott Glacier Lo[illegible]
PO Box 103940
Anchorage, AK 9951[illegible]
907-258-2350

Date: 05/22 17:2[illegible]

CREDIT CARD REFUND

CARD NUMBER: (b) (6) [redacted]
TRAN AMOUNT: $1842.00
CUST CODE #: 1
TAX : 0
RES NAME : SCARLETT,LYNN
RES DATE : 08/16/07

** Customer Copy **

KENNICOTT GLACIER LO
3000 A ST
ANCHORAGE, AK 99503-4007
907-258-2350

Merchant ID: 8008329826
Term ID: 00540700008008329826 00
Server ID: 1

Sale

(b) (6) [redacted]

AMEX Entry Method: Swiped

Amount: $ 90.10
Tip:

Total:

08/18/07 12:07:29
Inv #: 000004 Appr Code: 524023
Apprvd: Online

Customer Copy

THANK YOU!

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

AGENT FEE	2772 1689.00	2772 547.80	<547.80>	
AIR FARE	1678-	42560	242.00	lodg.
LODGING	120+ 155	119- 25287	170+	135 20272
RENTAL CAR				
GAS				
PARKING				
TAXI				

VXRF _____

TADV _____

256659 710000589

TRAVEL VOUCHER
(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: PMB

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: UNTITLED

4. SCHEDULE NO.:

5. a. NAME (Last, first, middle initial): Scarlett, Lynn

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 09/01/2007 b. TO 09/09/2007

c. MAILING ADDRESS (Include ZIP Code): 1849 C Street, NW MS-5100 Washington, DC 20240

d. OFFICE TELEPHONE NO.: 202-208-4203

7. TRAVEL AUTHORIZATION: a. NUMBER(S) (-600A000) b. DATE(S) 09/11/2007

e. PRESENT DUTY STATION: Washington, DC

f. RESIDENCE (City and State): (b) (6) [redacted]

10. CHECK NO.:

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government (Attached [ ] Check [ ] Cash)
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY

TDL

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any person in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7)

▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	513.60			08/30/2007	IAD-Washington,	DuSBA-Santa Barbara

2110 14750
2117 90

COMMENTS:
Trip Number 1 Federal Land Transaction Facilitation Act Acquisition Dedication
Coachella Valley, CA
September 4, 2007

SEP 18 2007

*No lodging costs were accounted for, traveler stayed with colleagues while in Santa Barbara, CA.

RECEIVED SEP 19 2007

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ DATE 9/10/07 AMOUNT CLAIMED ▶ 237.50

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ Brian Kaidmann Chief of Staff DATE

17. FOR FINANCE OFFICE USE ONLY COMPUTATION

a. DIFFERENCES, IF ANY (Explain and show amount) $

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifiers initials: $

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00

d. NET TO TRAVELER ▶ $ 237.50

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

PAID SEP 21 2007

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION
SIO-2007.1000DDD01...68..... 237.50 NR- 569.04

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

09/11/07 ACCOUNTING DETAIL |Doc No: UNTITLED

Copyright 1989-2004 Gelco Information Network, Inc

|Scarlett, Lynn (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			513.60
M&IE-409			147.50
TAXI CASH-			90.00
TRAVEL AGENT-			55.44
SIO	0.00	0.00	806.54

Organization:
2007.1000DDD01...68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		806.54
NON-REIMBURSABLE EXPENSES		569.04
TOTAL AMOUNT CLAIMED		237.50
GOV'T ADVANCE OUTSTANDING	0.00	
GOV'T ADVANCE APPLIED	0.00	
		0.00
NET TO TRAVELER (GOVT)		237.50
GOV'T CHARGE CARD EXPENSES	0.00	
GOV'T CHARGE CARD ATM ADV	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		237.50

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 5, 1949

TRAVEL AUTHORIZATION

1. No. TA6600A0003
2. 04-17-2007 (DATE)

3. Secretary's Immediate Office (BUREAU OR OFFICE)

4. NAME Lynn Scarlott 161-42-6522
5. OFFICIAL STATION Washington, DC

6. TITLE Deputy Secretary
7. ACCOUNTING OFFICE Denver, CO

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Washington, DC
9. TO: Such places internationally or in the continguous United States, Alska, Hawaii, Puerto Rico & U.S Territories as may be necessary and return.

10. **PURPOSE AND REMARKS:**

Annual Limited Open Travel Authorization 05-02-07 through 01-31-08. Official travel as required, I certify that the travel herein was reviewed and determined to be essential for accomplishment of Departmental programs and missions. Payment from non-federal source for travel related expenses is authorized under 31 USC 1353, provided that prior to acceptance, the condition for each case comply with 41 CFR 304-1 and Part 374 DC 5, and are fully documented and approved via form DI-2000, including attendance at conferences where traveler is a speaker, presenter, or staff to the Secretary.

11. **PER DIEM ALLOWANCE:**

Per Diem or actual subsistence expenses within a high cost area is authorized in accordance with Federal travel Regulations as issued by GSA and published in the Federal Register.

12. **PERIOD OF TRAVEL: Beginning on or about** 05-02-2007 **Ending on or about** ~~01-31-2008~~ 09-30-2007

MODE OF TRAVEL

13. ☐ Common carrier
14. ☐ Extra fare
15. ☐ Government-owned conveyance
16. ☐ Privately owned at a mileage rate of 48.5 cents, subject to:
    - (a) ☐ Administratively determined to be the advantage of the Government
    - (b) ☐ A showing of advantage to the Government
    - (c) ☐ Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. ☐ Transportation immediate family
18. ☐ Other *(specify)*
    Ground Transportation (including rental car, taxi, etc.), phone calls and minor misc. expenses authorized as necessary to conduct official business.
19. ☐ Shipment household goods and personal effects

ESTIMATED COST

20. Transportation $
21. Per Diem
22. Other
23. TOTAL $
24. CHARGED TO:
    2007-1000-DDD01-68

25. (FISCAL OFFICER'S SIGNATURE)

26. (REQUESTER'S SIGNATURE)
27. Deputy Secretary (TITLE)
28. (AUTHORIZING OFFICER'S SIGNATURE)
29. Deputy Chief of Staff (TITLE)

Carlson Wagonlit TRAVEL

August 30, 2007

For: LYNN SCARLETT
To: DOI

Sales Person: MK
Locator: HUBJJI
Customer Number: (b) (6) [redacted]

THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.

Saturday September 1, 2007

United Airlines
Class of Service:Coach Class V
Depart: WASHINGTON/DULLES
Arrive: DENVER, CO
Total Flight Time:
Equipment: Boeing 767
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: SCARLETT/LYNN 11F
Frequent Flyer Number:
STAR ALLIANCE

Flight Number: 1053

8:35 Am September 1, 2007
10:20 Am September 1, 2007
3 Hours 45 Minutes Non-Stop

Confirmation Number: ZGZ3BG

(b) (6) [redacted] SCARLETT/LYNN

Saturday September 1, 2007

United Airlines
Class of Service:Coach Class V
Depart: DENVER, CO
Arrive: SANTA BARBARA,CA
Total Flight Time:
Equipment: CRJ
Meal Service: None
Status: Confirmed
Reserved Seat: SCARLETT/LYNN 3B
Frequent Flyer Number:
*DEN-SBA OPERATED BY /UNITED EXPRESS/SKYWEST
DEN-SBA CHECK-IN WITH UNITED AIRLINES
STAR ALLIANCE

Flight Number: 6015

11:38 Am September 1, 2007
1:08 Pm September 1, 2007
2 Hours 30 Minutes Non-Stop

Confirmation Number: ZGZ3BG

(b) (6) [redacted] SCARLETT/LYNN

Saturday September 1, 2007

BUDGET
Pick Up: September 1, 2007 1:08 Pm
Return: September 9, 2007 8:42 Am
Weekly Rate: 134.00 USD
Unlimited Free Miles
Confirmation Number: 05239265U83

Intermediate Car
Location: SANTA BARBARA,CA
SANTA BARBARA,CA

Extra Days: 27.00 Extra Hours: 23.00

Sunday September 9, 2007

United Airlines
Class of Service:Coach Class V
Depart: SANTA BARBARA,CA
Arrive: LOS ANGELES,CA
Total Flight Time:
Equipment: Embraer Turboprop
Meal Service: None
Status: Confirmed
Reserved Seat: SCARLETT/LYNN 9B
Frequent Flyer Number:
ARR-TERMINAL 8
*SBA-LAX OPERATED BY /UNITED EXPRESS/SKYWEST
SBA-LAX CHECK-IN WITH UNITED AIRLINES
STAR ALLIANCE

Flight Number: 5526

10:45 Am September 9, 2007
11:38 Am September 9, 2007
53 Minutes Non-Stop

Confirmation Number: ZGZ3BG

(b) (6) [redacted] SCARLETT/LYNN

Sunday September 9, 2007

United Airlines
Class of Service:Coach Class V
Depart: LOS ANGELES,CA
Arrive: WASHINGTON/DULLES
Total Flight Time:
Equipment: Boeing 767
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: SCARLETT/LYNN 15F
Frequent Flyer Number:
DEP-TERMINAL 7
STAR ALLIANCE

Flight Number: 924

12:45 Pm September 9, 2007
8:34 Pm September 9, 2007
4 Hours 49 Minutes Non-Stop

Confirmation Number: ZGZ3BG

(b) (6) [redacted] SCARLETT/LYNN

Friday March 7, 2008

Other Service
Mar 07, 2008 - Mar 07, 2008
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
SCARLETT LYNN	2777/0167056656094	0.00				0.00
SCARLETT LYNN	2777/8155238651	27.72				27.72
SCARLETT LYNN	2717/0167056656049	439.06USD	32.94US	13.60ZP	28.00XT	513.60
SCARLETT LYNN	2717/8152379237	27.72				27.72
					Total Amount:	569.04

NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
YOU DESERVE A VACATION AND WE HAVE THE PERFECT ONE
WAITING FOR YOU, INCLUDING MILITARY RATES. VISIT
WWW.SATOVACATIONS.COM OR CALL TOLL-FREE 877-698-2554
LODGING DECLINED//26JUL
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR CREDIT CARD STATEMENT.

THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

AGENT FEE	2772			
AIR FARE (1-24)	51360 ← NOT IN system.			
LODGING	0			
RENTAL CAR	0			
GAS				
PARKING				
TAXI				

VXRF _____

TADV _____

CHECKED SEP 24 2007

FY 2007

Req'd from BARB MARTIN

Transaction Number	Fiscal Yea	Dollar Amo	Debit Cred	Userid	Batch #	Vendor Name
710000250	2007	154	D	SOSBAM0	079BS1	ASHLEY CARRIGAN
710000250	2007	22	D	SOSBAM0	079BS1	ASHLEY CARRIGAN
710000324	2007	41	D	SOSBAM0	122BS3	ASHLEY CARRIGAN
710000325	2007	29	D	SOSBAM0	122BS3	ASHLEY CARRIGAN
710000362	2007	122.5	D	SOSBAM0	141BS2	ASHLEY CARRIGAN
710000458	2007	136.5	D	SOSBAM0	178BS2	ASHLEY CARRIGAN
710000499	2007	162.75	D	SOSBAM0	211BS3	ASHLEY CARRIGAN
710000500	2007	110	D	SOSBAM0	211BS3	ASHLEY CARRIGAN
710000549	2007	110	D	SOSBAM0	250BS2	ASHLEY CARRIGAN
710000562	2007	66	D	SOSBAM0	254BS2	ASHLEY CARRIGAN
DD11021607V	2007	224	D	NBCJLM0	075BSB	BELLA K SEWALL
DD11021607V	2007	68	D	NBCJLM0	075BSB	BELLA K SEWALL
DD11021607V	2007	336	D	NBCJLM0	075BSB	BELLA K SEWALL
SEWAL051107	2007	201.75	D	NBCJLM0	155BSA	BELLA K SEWALL
SEWAL051107	2007	6	D	NBCJLM0	155BSA	BELLA K SEWALL
SEWAL051107	2007	73	D	NBCJLM0	155BSA	BELLA K SEWALL
SIWROFY07K2	2007	238.25	D	NBCJLM0	018RB1	BEZDEK, JOHN
710000086	2007	132.5	D	SOSBAM0	321BS1	BOGERT, MICHAEL LAURENCE
710000038	2007	257.1	D	SOSBAM0	298BSA	BOGERT, MICHAEL LAURENCE
BOGERT3	2007	257.1	D	NBCJLM0	300MJG	BOGERT, MICHAEL LAURENCE
710000135	2007	65	D	SOSBAM0	362MJA	BOGERT, MICHAEL LAURENCE
SIWROFY07NV	2007	480.2	D	NBCJLM0	018RBA	BOGERT, MICHAEL LAURENCE
710000222	2007	50	D	SOSBAM0	064BSA	BOGERT, MICHAEL LAURENCE
710000313	2007	31.64	D	SOSBAM0	117BSA	BOGERT, MICHAEL LAURENCE
710000313	2007	15.52	D	SOSBAM0	117BSA	BOGERT, MICHAEL LAURENCE
710000313	2007	97.5	D	SOSBAM0	117BSA	BOGERT, MICHAEL LAURENCE
710000344	2007	93	D	SOSBAM0	127RBA	BOGERT, MICHAEL LAURENCE
710000344	2007	15.52	D	SOSBAM0	127RBA	BOGERT, MICHAEL LAURENCE
710000375	2007	160.31	D	SOSBAM0	149BS1	BOGERT, MICHAEL LAURENCE
710000375	2007	92	D	SOSBAM0	149BS1	BOGERT, MICHAEL LAURENCE
710000375	2007	4.5	D	SOSBAM0	149BS1	BOGERT, MICHAEL LAURENCE
710000398	2007	42	D	SOSBAM0	151BS1	BOGERT, MICHAEL LAURENCE
710000430	2007	187.46	D	SOSBAM0	163RBE	BOGERT, MICHAEL LAURENCE
710000447	2007	236.94	D	SOSBAM0	171BS2	BOGERT, MICHAEL LAURENCE
710000460	2007	58.5	D	SOSBAM0	178BS2	BOGERT, MICHAEL LAURENCE
710000460	2007	15.52	D	SOSBAM0	178BS2	BOGERT, MICHAEL LAURENCE

710000517	2007	60	D	SOSBAM0	214BS3	BOGERT, MICHAEL LAURENCE
710000565	2007	239.92	D	SOSBAM0	254BS2	BOGERT, MICHAEL LAURENCE
710000404	2007	25	D	SOSBAM0	158BS1	BRADLEY, MARGARET
710000404	2007	3.95	D	SOSBAM0	158BS1	BRADLEY, MARGARET
710000404	2007	87.31	D	SOSBAM0	158BS1	BRADLEY, MARGARET
710000550	2007	86.76	D	SOSBAM0	250BS2	CARLOINE MERRITT
710000550	2007	408	D	SOSBAM0	250BS2	CARLOINE MERRITT
710000070	2007	183	D	SOSBAM0	311BSB	CHRISTINA ESTRADA
710000095	2007	172	D	SOSBAM0	326BSA	CHRISTINA ESTRADA
710000043	2007	444	D	SOSBAM0	298BSA	CHRISTINA ESTRADA
710000042	2007	788.85	D	SOSBAM0	298BSA	CHRISTINA ESTRADA
710000127	2007	624	D	SOSBAM0	356BS2	CHRISTINA ESTRADA
710000186	2007	127	D	SOSBAM0	039BS1	CHRISTINA ESTRADA
710000219	2007	185.25	D	SOSBAM0	064BSA	CHRISTINA ESTRADA
710000220	2007	160	D	SOSBAM0	064BSA	CHRISTINA ESTRADA
710000220	2007	18	D	SOSBAM0	064BSA	CHRISTINA ESTRADA
710000227	2007	2.66	D	SOSBAM0	066BSA	CHRISTINA ESTRADA
710000227	2007	147	D	SOSBAM0	066BSA	CHRISTINA ESTRADA
710000270	2007	8.21	D	SOSBAM0	087BS2	CHRISTINA ESTRADA
710000270	2007	24	D	SOSBAM0	087BS2	CHRISTINA ESTRADA
710000270	2007	73.5	D	SOSBAM0	087BS2	CHRISTINA ESTRADA
710000288	2007	224	D	SOSBAM0	099BS1	CHRISTINA ESTRADA
710000288	2007	74	D	SOSBAM0	099BS1	CHRISTINA ESTRADA
710000343	2007	54.6	D	SOSBAM0	129BS1	CHRISTINA ESTRADA
710000343	2007	102.09	D	SOSBAM0	129BS1	CHRISTINA ESTRADA
710000343	2007	160	D	SOSBAM0	129BS1	CHRISTINA ESTRADA
710000341	2007	194.25	D	SOSBAM0	129BS1	CHRISTINA ESTRADA
710000341	2007	55	D	SOSBAM0	129BS1	CHRISTINA ESTRADA
710000406	2007	81	D	SOSBAM0	158BS2	CHRISTINA ESTRADA
710000467	2007	348.75	D	SOSBAM0	180BS1	CHRISTINA ESTRADA
710000467	2007	119	D	SOSBAM0	180BS1	CHRISTINA ESTRADA
710000144	2007	67.4	D	SOSBAM0	006BS3	CONNALLY, PATRICIA
710000374	2007	73.72	D	SOSBAM0	149BS1	CONNALLY, PATRICIA
710000544	2007	258	D	SOSBAM0	240BS1	CREE, BRIAN J
710000544	2007	92	D	SOSBAM0	240BS1	CREE, BRIAN J
710000544	2007	41.49	D	SOSBAM0	240BS1	CREE, BRIAN J
710000544	2007	38.8	D	SOSBAM0	240BS1	CREE, BRIAN J

710000537	2007	95	D	SOSBAM0	235BS1	CURLETT, LAURA
710000537	2007	746.5	D	SOSBAM0	235BS1	CURLETT, LAURA
710000068	2007	149.5	D	SOSBAM0	311BSB	DAVID LEHMAN
710000122	2007	77.2	D	SOSBAM0	356BS2	DAVID LEHMAN
710000169	2007	73.5	D	SOSBAM0	024BS1	DAVID LEHMAN
710000302	2007	126.2	D	SOSBAM0	113BS2	DAVID LEHMAN
710000304	2007	112.5	D	SOSBAM0	117BSA	DAVID LEHMAN
710000304	2007	3.7	D	SOSBAM0	117BSA	DAVID LEHMAN
710000434	2007	13	D	SOSBAM0	170RBA	DAVID LEHMAN
710000434	2007	44.46	D	SOSBAM0	170RBA	DAVID LEHMAN
710000436	2007	147.5	D	SOSBAM0	170RBA	DAVID LEHMAN
710000436	2007	9.74	D	SOSBAM0	170RBA	DAVID LEHMAN
710000435	2007	13	D	SOSBAM0	170RBA	DAVID LEHMAN
710000435	2007	44.46	D	SOSBAM0	170RBA	DAVID LEHMAN
710000489	2007	122.5	D	SOSBAM0	199BS1	DAVID LEHMAN
710000489	2007	67	D	SOSBAM0	199BS1	DAVID LEHMAN
710000231	2007	536	D	SOSBAM0	074BS1	DAVID MARQUEZ
710000231	2007	29	D	SOSBAM0	074BS1	DAVID MARQUEZ
710000231	2007	87.56	D	SOSBAM0	074BS1	DAVID MARQUEZ
710000231	2007	13.02	D	SOSBAM0	074BS1	DAVID MARQUEZ
710000163	2007	186.11	D	SOSBAM0	019BS1	DAVID W MURPHY
710000515	2007	55	D	SOSBAM0	257BS2	DIRK A KEMPTHORNE
710000059	2007	0	D	SOSBAM0	305BS2	DIRK KEMPTHORNE
710000092	2007	66	D	SOSBAM0	326BSC	DIRK KEMPTHORNE
710000093	2007	36.75	D	SOSBAM0	326BSC	DIRK KEMPTHORNE
710000150	2007	76.25	D	SOSBAM0	066BS4	DIRK KEMPTHORNE
710000151	2007	0	D	SOSBAM0	006BS1	DIRK KEMPTHORNE
710000152	2007	376.65	D	SOSBAM0	012BSA	DIRK KEMPTHORNE
710000171	2007	96	D	SOSBAM0	029BS2	DIRK KEMPTHORNE
710000172	2007	432	D	SOSBAM0	029BS2	DIRK KEMPTHORNE
710000305	2007	0	D	SOSBAM0	113BS1	DIRK KEMPTHORNE
710000306	2007	103.15	D	SOSBAM0	113BS1	DIRK KEMPTHORNE
710000308	2007	35.88	D	SOSBAM0	113BS1	DIRK KEMPTHORNE
710000307	2007	142	D	SOSBAM0	113BS1	DIRK KEMPTHORNE
710000310	2007	231.29	D	SOSBAM0	113BS1	DIRK KEMPTHORNE
710000309	2007	135.27	D	SOSBAM0	113BS1	DIRK KEMPTHORNE
710000327	2007	245.75	D	SOSBAM0	122BS1	DIRK KEMPTHORNE

710000353	2007	40	D	SOSBAM0	136BS2	DIRK KEMPTHORNE
710000354	2007	111	D	SOSBAM0	136BS2	DIRK KEMPTHORNE
710000443	2007	216.25	D	SOSBAM0	171BS1	DIRK KEMPTHORNE
710000444	2007	0	D	SOSBAM0	171BS1	DIRK KEMPTHORNE
710000445	2007	17.38	D	SOSBAM0	171BS1	DIRK KEMPTHORNE
710000446	2007	0	D	SOSBAM0	171BS1	DIRK KEMPTHORNE
710000485	2007	12	D	SOSBAM0	199BS3	DIRK KEMPTHORNE
710000486	2007	1050.75	D	SOSBAM0	199BS3	DIRK KEMPTHORNE
710000498	2007	331.41	D	SOSBAM0	213BS1	DIRK KEMPTHORNE
710000534	2007	336.27	D	SOSBAM0	228BS2	DIRK KEMPTHORNE
710000534	2007	6.04	D	SOSBAM0	228BS2	DIRK KEMPTHORNE
710000541	2007	1674.8	D	SOSBAM0	240BS1	DIXON VICTORIA SANDS
710000541	2007	43.58	D	SOSBAM0	240BS1	DIXON VICTORIA SANDS
710000541	2007	24	D	SOSBAM0	240BS1	DIXON VICTORIA SANDS
710000541	2007	84	D	SOSBAM0	240BS1	DIXON VICTORIA SANDS
710000410	2007	92	D	SOSBAM0	158BS3	DOMENECH DOULAS W
710000416	2007	78.58	D	SOSBAM0	163RBE	DOMENECH DOULAS W
710000416	2007	25	D	SOSBAM0	163RBE	DOMENECH DOULAS W
710000416	2007	7.9	D	SOSBAM0	163RBE	DOMENECH DOULAS W
710000382	2007	168	D	SOSBAM0	158BS3	DOMENECH DOULAS W
710000382	2007	30.56	D	SOSBAM0	158BS3	DOMENECH DOULAS W
710000490	2007	707.75	D	SOSBAM0	207BS1	DOMENECH DOULAS W
710000490	2007	23.6	D	SOSBAM0	207BS1	DOMENECH DOULAS W
710000490	2007	32.09	D	SOSBAM0	207BS1	DOMENECH DOULAS W
710000490	2007	15.52	D	SOSBAM0	207BS1	DOMENECH DOULAS W
710000386	2007	536	D	SOSBAM0	151BS3	FISHER, KENNETH
710000386	2007	38.54	D	SOSBAM0	151BS3	FISHER, KENNETH
710000386	2007	39	D	SOSBAM0	151BS3	FISHER, KENNETH
710000386	2007	14.55	D	SOSBAM0	151BS3	FISHER, KENNETH
710000200	2007	805.24	D	SOSBAM0	051BSA	FOSTER L WADE
710000271	2007	85	D	SOSBAM0	087BS2	FOSTER L WADE
710000271	2007	3.4	D	SOSBAM0	087BS2	FOSTER L WADE
710000271	2007	254	D	SOSBAM0	087BS2	FOSTER L WADE
710000271	2007	788	D	SOSBAM0	087BS2	FOSTER L WADE
710000271	2007	83.28	D	SOSBAM0	087BS2	FOSTER L WADE
710000124	2007	193.65	D	SOSBAM0	356BS1	HANS NEIDIG
TV052107CA	2007	243	D	NBCJLM0	158BRA	HASPEL ABRAHAM

TA07OHTA10A	2007	201.75	D	FSDCSR0	200VSA	HASPEL ABRAHAM
TA07OHTA10A	2007	1.75	D	FSDCSR0	200VSA	HASPEL ABRAHAM
TA07OHTA10A	2007	4	D	FSDCSR0	200VSA	HASPEL ABRAHAM
07OHTA10C	2007	2	D	FSDCSR0	250RBB	HASPEL ABRAHAM
07OHTA10C	2007	160	D	FSDCSR0	250RBB	HASPEL ABRAHAM
07OHTA10C	2007	50	D	FSDCSR0	250RBB	HASPEL ABRAHAM
710000193	2007	134	D	SOSBAM0	040BSA	JAMES E CASON
710000333	2007	19.41	D	SOSBAM0	123RBA	JAMES E CASON
710000333	2007	122.5	D	SOSBAM0	123RBA	JAMES E CASON
710000396	2007	31.04	D	SOSBAM0	151BS3	JAMES E CASON
710000421	2007	14.56	D	SOSBAM0	163RBC	JAMES E CASON
710000421	2007	139.5	D	SOSBAM0	163RBC	JAMES E CASON
710000440	2007	122.5	D	SOSBAM0	170RBA	JAMES E CASON
710000440	2007	10	D	SOSBAM0	170RBA	JAMES E CASON
710000440	2007	14.56	D	SOSBAM0	170RBA	JAMES E CASON
710000295	2007	28.13	D	SOSBAM0	101BSA	JAMES L CASWELL
710000295	2007	852	D	SOSBAM0	101BSA	JAMES L CASWELL
710000295	2007	109.04	D	SOSBAM0	101BSA	JAMES L CASWELL
710000295	2007	59.5	D	SOSBAM0	101BSA	JAMES L CASWELL
710000508	2007	1162	D	SOSBAM0	214BS2	JAMES L CASWELL
710000508	2007	177.15	D	SOSBAM0	214BS2	JAMES L CASWELL
710000508	2007	38.65	D	SOSBAM0	214BS2	JAMES L CASWELL
710000508	2007	26.2	D	SOSBAM0	214BS2	JAMES L CASWELL
710000507	2007	295	D	SOSBAM0	214BS2	JAMES L CASWELL
710000507	2007	43.86	D	SOSBAM0	214BS2	JAMES L CASWELL
710000507	2007	20	D	SOSBAM0	214BS2	JAMES L CASWELL
710000507	2007	26.2	D	SOSBAM0	214BS2	JAMES L CASWELL
710000185	2007	127.12	D	SOSBAM0	039BS1	JENNIFER MARIE HAYES
710000208	2007	114	D	SOSBAM0	054BSB	JENNIFER MARIE HAYES
710000226	2007	183	D	SOSBAM0	066BSA	JENNIFER MARIE HAYES
710000226	2007	6.79	D	SOSBAM0	066BSA	JENNIFER MARIE HAYES
710000226	2007	71.55	D	SOSBAM0	066BSA	JENNIFER MARIE HAYES
710000262	2007	171.5	D	SOSBAM0	087BS2	JENNIFER MARIE HAYES
710000262	2007	31.4	D	SOSBAM0	087BS2	JENNIFER MARIE HAYES
710000262	2007	26.2	D	SOSBAM0	087BS2	JENNIFER MARIE HAYES
710000319	2007	25	D	SOSBAM0	117BSA	JENNIFER MARIE HAYES
710000329	2007	40.5	D	SOSBAM0	122BS2	JENNIFER MARIE HAYES

REQ'D FROM PCS DEPT

710000329	2007	95.55	D	SOSBAM0	122BS2	JENNIFER MARIE HAYES
710000328	2007	31	D	SOSBAM0	122BS2	JENNIFER MARIE HAYES
710000328	2007	6.65	D	SOSBAM0	122BS2	JENNIFER MARIE HAYES
710000342	2007	288	D	SOSBAM0	129BS1	JENNIFER MARIE HAYES
710000466	2007	109	D	SOSBAM0	183BS1	JENNIFER MARIE HAYES
710000532	2007	220.5	D	SOSBAM0	228BS1	JENNIFER MARIE HAYES
710000546	2007	342.44	D	SOSBAM0	247BS1	JENNIFER MARIE HAYES
710000209	2007	160	D	SOSBAM0	054BSB	JOESPH M SMITH
790000239	2007	175.25	D	SOSBAM0	074BS1	JOESPH M SMITH
710000263	2007	24	D	SOSBAM0	087BS2	JOESPH M SMITH
710000263	2007	56.85	D	SOSBAM0	087BS2	JOESPH M SMITH
710000285	2007	122.5	D	SOSBAM0	093DS1	JOESPH M SMITH
710000285	2007	31	D	SOSBAM0	093DS1	JOESPH M SMITH
710000297	2007	224	D	SOSBAM0	107BS1	JOESPH M SMITH
710000297	2007	37	D	SOSBAM0	107BS1	JOESPH M SMITH
710000318	2007	40	D	SOSBAM0	117BSB	JOESPH M SMITH
710000370	2007	329	D	SOSBAM0	147BS2	JOESPH M SMITH
710000370	2007	65	D	SOSBAM0	147BS2	JOESPH M SMITH
710000407	2007	160	D	SOSBAM0	158BS1	JOESPH M SMITH
710000463	2007	1230	D	SOSBAM0	180BS1	JOESPH M SMITH
710000463	2007	10	D	SOSBAM0	180BS1	JOESPH M SMITH
710000571	2007	81	D	SOSBAM0	257GS1	JOESPH M SMITH
710000581	2007	1338.5	D	SOSBAM0	261BS2	JOESPH M SMITH
710000581	2007	40	D	SOSBAM0	261BS2	JOESPH M SMITH
710000044	2007	1135.9	D	SOSBAM0	304BS3	JORDAN M FISCHER
710000155	2007	364.05	D	SOSBAM0	006BS3	JORDAN M FISCHER
710000238	2007	160	D	SOSBAM0	075BS1	JOSHUA MAUTHE
710000251	2007	147.5	D	SOSBAM0	079BS1	JOSHUA MAUTHE
710000301	2007	188.5	D	SOSBAM0	113BS2	JOSHUA MAUTHE
710000405	2007	288	D	SOSBAM0	158BS2	JOSHUA MAUTHE
710000405	2007	21.07	D	SOSBAM0	158BS2	JOSHUA MAUTHE
710000405	2007	38	D	SOSBAM0	158BS2	JOSHUA MAUTHE
710000479	2007	1012.43	D	SOSBAM0	194BSA	JOSHUA MAUTHE
710000548	2007	505.25	D	SOSBAM0	250BS1	JOSHUA MAUTHE
710000548	2007	29.44	D	SOSBAM0	250BS1	JOSHUA MAUTHE
710000548	2007	11.64	D	SOSBAM0	250BS1	JOSHUA MAUTHE
710000569	2007	81	D	SOSBAM0	257BS1	JOSHUA MAUTHE

710000570	2007	40.5	D	SOSBAM0	257GS1	JOSHUA MAUTHE
710000094	2007	172.5	D	SOSBAM0	326BSA	JUSTIN R HALL
710000112	2007	101	D	SOSBAM0	339BSD	KAMERAN L ONLEY
710000272	2007	73.5	D	SOSBAM0	087BS2	KAMERAN L ONLEY
710000272	2007	40	D	SOSBAM0	087BS2	KAMERAN L ONLEY
710000272	2007	23.28	D	SOSBAM0	087BS2	KAMERAN L ONLEY
710000280	2007	304.75	D	SOSBAM0	089BS2	KAMERAN L ONLEY
710000292	2007	73.5	D	SOSBAM0	101BSA	KAMERAN L ONLEY
710000292	2007	21	D	SOSBAM0	101BSA	KAMERAN L ONLEY
710000399	2007	20	D	SOSBAM0	158BS1	KAMERAN L ONLEY
710000399	2007	160	D	SOSBAM0	158BS1	KAMERAN L ONLEY
710000400	2007	773.6	D	SOSBAM0	163RBE	KAMERAN L ONLEY
710000429	2007	147.5	D	SOSBAM0	163RBD	KAMERAN L ONLEY
710000431	2007	222	D	SOSBAM0	170RBB	KAMERAN L ONLEY
710000431	2007	64.53	D	SOSBAM0	170RBB	KAMERAN L ONLEY
710000450	2007	205.5	D	SOSBAM0	194BSA	KAMERAN L ONLEY
710000450	2007	48	D	SOSBAM0	194BSA	KAMERAN L ONLEY
710000478	2007	48	D	SOSBAM0	194BSA	KAMERAN L ONLEY
710000478	2007	12	D	SOSBAM0	194BSA	KAMERAN L ONLEY
710000556	2007	110	D	SOSBAM0	250BS2	KAMERAN L ONLEY
710000556	2007	82	D	SOSBAM0	250BS2	KAMERAN L ONLEY
710000388	2007	2804	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000388	2007	83	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000388	2007	305.26	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000387	2007	1040	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000387	2007	77.08	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000387	2007	390	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000387	2007	146.42	D	SOSBAM0	151BS3	LAVERTY, LYLE
710000518	2007	1840	D	SOSBAM0	214BS2	LAVERTY, LYLE
710000518	2007	226	D	SOSBAM0	214BS2	LAVERTY, LYLE
710000518	2007	187.92	D	SOSBAM0	214BS2	LAVERTY, LYLE
710000587	2007	305	D	FSDCMO0	263BS1	LINDI L HARVEY
710000587	2007	78.33	D	FSDCMO0	263BS1	LINDI L HARVEY
710000587	2007	30	D	FSDCMO0	263BS1	LINDI L HARVEY
710000587	2007	44.84	D	FSDCMO0	263BS1	LINDI L HARVEY
710000067	2007	583.2	D	SOSBAM0	307BS2	LYNN SCARLETT
710000102	2007	168.5	D	SOSBAM0	326BSD	LYNN SCARLETT

REQ'D FROM PCS DEPT

710000118	2007	231.6	D	SOSBAM0	340BS1	LYNN SCARLETT
710000126	2007	61.25	D	SOSBAM0	356BS2	LYNN SCARLETT
710000146	2007	104	D	SOSBAM0	006BS3	LYNN SCARLETT
710000161	2007	77	D	SOSBAM0	012BSB	LYNN SCARLETT
710000170	2007	108	D	SOSBAM0	024BS1	LYNN SCARLETT
710000194	2007	271	D	SOSBAM0	043BSB	LYNN SCARLETT
710000202	2007	237	D	SOSBAM0	051BSA	LYNN SCARLETT
710000210	2007	61	D	SOSBAM0	054BSB	LYNN SCARLETT
710000298	2007	96	D	SOSBAM0	107BS3	LYNN SCARLETT
710000298	2007	90	D	SOSBAM0	107BS3	LYNN SCARLETT
710000298	2007	35.47	D	SOSBAM0	107BS3	LYNN SCARLETT
710000316	2007	175.25	D	SOSBAM0	117BSA	LYNN SCARLETT
710000316	2007	137	D	SOSBAM0	117BSA	LYNN SCARLETT
710000317	2007	25	D	SOSBAM0	117BSA	LYNN SCARLETT
710000315	2007	40.5	D	SOSBAM0	122BS2	LYNN SCARLETT
710000340	2007	69	D	SOSBAM0	129BS2	LYNN SCARLETT
710000340	2007	14.56	D	SOSBAM0	129BS2	LYNN SCARLETT
710000338	2007	96	D	SOSBAM0	129BS2	LYNN SCARLETT
710000338	2007	45	D	SOSBAM0	129BS2	LYNN SCARLETT
710000339	2007	44.25	D	SOSBAM0	129BS2	LYNN SCARLETT
710000339	2007	90	D	SOSBAM0	129BS2	LYNN SCARLETT
710000356	2007	45	D	SOSBAM0	136BS1	LYNN SCARLETT
710000356	2007	206.5	D	SOSBAM0	136BS1	LYNN SCARLETT
710000442	2007	25	D	SOSBAM0	171BS2	LYNN SCARLETT
710000451	2007	200.5	D	SOSBAM0	178BS3	LYNN SCARLETT
710000464	2007	314.25	D	SOSBAM0	180BS1	LYNN SCARLETT
710000464	2007	17	D	SOSBAM0	180BS1	LYNN SCARLETT
710000481	2007	48	D	SOSBAM0	199BS2	LYNN SCARLETT
710000495	2007	29.25	D	SOSBAM0	207BS1	LYNN SCARLETT
710000504	2007	33	D	SOSBAM0	211BS3	LYNN SCARLETT
710000504	2007	66	D	SOSBAM0	211BS3	LYNN SCARLETT
710000588	2007	837.75	D	FSDCMO0	263BS1	LYNN SCARLETT
710000588	2007	60	D	FSDCMO0	263BS1	LYNN SCARLETT
710000589	2007	147.5	D	FSDCMO0	263BS1	LYNN SCARLETT
710000589	2007	90	D	FSDCMO0	263BS1	LYNN SCARLETT
710000277	2007	581	D	SOSBAM0	099BS1	MARK JOHNSON
710000277	2007	54.52	D	SOSBAM0	099BS1	MARK JOHNSON

REQ'D FROM PCS DEPT

710000545	2007	484	D	SOSBAM0	240BS1	MOORE, DWIGHT C
710000545	2007	85.98	D	SOSBAM0	240BS1	MOORE, DWIGHT C
710000545	2007	83	D	SOSBAM0	240BS1	MOORE, DWIGHT C
710000166	2007	599.03	D	SOSBAM0	024BS1	PIPER MONICA N
710000410	2007	284	D	SOSBAM0	159BS1	RINNE, WILLIAM E
710000410	2007	27.26	D	SOSBAM0	159BS1	RINNE, WILLIAM E
710000410	2007	81	D	SOSBAM0	159BS1	RINNE, WILLIAM E
SIWROFY07M4	2007	1026.93	D	NBCJLM0	023VSA	ROBERT LAIDLAW
SIWRO07W4	2007	54.32	D	NBCJLM0	082VSB	ROBERT LAIDLAW
SIWRO07W4	2007	144	D	NBCJLM0	082VSB	ROBERT LAIDLAW
SIWRO07W4	2007	64	D	NBCJLM0	082VSB	ROBERT LAIDLAW
2007RUSSELL	2007	311.26	D	NBCJLM0	229VSE	RUSSELL, MAJEL
2007RUSSELL	2007	38	D	NBCJLM0	229VSE	RUSSELL, MAJEL
710000123	2007	62.7	D	SOSBAM0	356BS1	SCHUSTER, REID P
710000412	2007	288	D	SOSBAM0	158BS2	SCHUSTER, REID P
710000412	2007	34.92	D	SOSBAM0	158BS2	SCHUSTER, REID P
710000482	2007	507.5	D	SOSBAM0	199BS2	SCHUSTER, REID P
710000482	2007	28.98	D	SOSBAM0	199BS2	SCHUSTER, REID P
710000482	2007	34.92	D	SOSBAM0	199BS2	SCHUSTER, REID P
710000554	2007	288	D	SOSBAM0	254BS3	SCHUSTER, REID P
710000554	2007	34.92	D	SOSBAM0	254BS3	SCHUSTER, REID P
710500217	2007	160	D	SOSBAM0	058BS1	SHANE B WOLFE
710000563	2007	1054.25	D	SOSBAM0	254BS1	SHANE B WOLFE
710000563	2007	31.4	D	SOSBAM0	254BS1	SHANE B WOLFE
710000563	2007	2.25	D	SOSBAM0	254BS1	SHANE B WOLFE
7103000010	2007	101.6	D	NBCJLM0	060BSB	SHARON E WARREN
710000131	2007	319	D	SOSBAM0	362BSB	SMITH, GARY
710000223	2007	182	D	SOSBAM0	064BSA	SMITH, GARY
710000223	2007	190	D	SOSBAM0	064BSA	SMITH, GARY
710000223	2007	9	D	SOSBAM0	064BSA	SMITH, GARY
710000249	2007	153	D	SOSBAM0	079BS1	SMITH, GARY
710000249	2007	37	D	SOSBAM0	079BS1	SMITH, GARY
710000286	2007	37	D	SOSBAM0	093DS1	SMITH, GARY
710000286	2007	160	D	SOSBAM0	093DS1	SMITH, GARY
710000299	2007	44	D	SOSBAM0	107BS3	SMITH, GARY
710000326	2007	4	D	SOSBAM0	122BS2	SMITH, GARY
710000334	2007	110.25	D	SOSBAM0	127RBA	SMITH, GARY

710000334	2007	71	D	SOSBAM0	127RBA	SMITH, GARY
710000372	2007	0	D	SOSBAM0	149BS2	SMITH, GARY
710000397	2007	174.25	D	SOSBAM0	151BS1	SMITH, GARY
710000397	2007	37	D	SOSBAM0	151BS1	SMITH, GARY
710000439	2007	136.5	D	SOSBAM0	170RBB	SMITH, GARY
710000439	2007	5	D	SOSBAM0	170RBB	SMITH, GARY
710000439	2007	36	D	SOSBAM0	170RBB	SMITH, GARY
710000503	2007	147	D	SOSBAM0	211BS3	SMITH, GARY
710000519	2007	37	D	SOSBAM0	226BS2	SMITH, GARY
710000519	2007	140.25	D	SOSBAM0	226BS2	SMITH, GARY
710000576	2007	73.5	D	SOSBAM0	261BS1	SMITH, GARY
710000576	2007	37	D	SOSBAM0	261BS1	SMITH, GARY
710000584	2007	62	D	SOSBAM0	261BS2	SMITH, GARY
710000045	2007	433	D	SOSBAM0	304BS3	WAIDMANN, BRIAN
710000060	2007	159.75	D	SOSBAM0	305BS1	WAIDMANN, BRIAN
710000113	2007	33	D	SOSBAM0	339BSD	WAIDMANN, BRIAN
710000245	2007	100	D	SOSBAM0	074BS1	WAIDMANN, BRIAN
710000245	2007	92	D	SOSBAM0	074BS1	WAIDMANN, BRIAN
710000261	2007	52.5	D	SOSBAM0	087BS2	WAIDMANN, BRIAN
710000311	2007	12	D	SOSBAM0	117BSB	WAIDMANN, BRIAN
710000311	2007	15	D	SOSBAM0	117BSB	WAIDMANN, BRIAN
710000311	2007	86.5	D	SOSBAM0	117BSB	WAIDMANN, BRIAN
710000320	2007	73.72	D	SOSBAM0	117BSB	WAIDMANN, BRIAN
710000449	2007	22	D	SOSBAM0	178BS1	WAIDMANN, BRIAN
710000449	2007	2.5	D	SOSBAM0	178BS1	WAIDMANN, BRIAN
710000449	2007	73.72	D	SOSBAM0	178BS1	WAIDMANN, BRIAN
710000448	2007	97.73	D	SOSBAM0	178BS1	WAIDMANN, BRIAN
710000468	2007	37.83	D	SOSBAM0	192BSA	WAIDMANN, BRIAN
710000483	2007	282.75	D	SOSBAM0	199BS1	WAIDMANN, BRIAN
710000483	2007	95.88	D	SOSBAM0	199BS1	WAIDMANN, BRIAN
710000483	2007	9.7	D	SOSBAM0	199BS1	WAIDMANN, BRIAN
SIWROFY07J1	2007	405.25	D	NBCJLM0	038RB1	WILLIAMS, PAMELA
SIWROQ807	2007	352	D	NBCJLM0	075VSD	WILLIAMS, PAMELA
SIWROQ807	2007	20	D	NBCJLM0	075VSD	WILLIAMS, PAMELA
SIWROQ807	2007	22.25	D	NBCJLM0	075VSD	WILLIAMS, PAMELA
710000158	2007	107.34	D	SOSBAM0	006BS1	YATES, LORI K.
710000547	2007	258	D	SOSBAM0	247BS1	ZOLLER, ROBERT

710000547	2007	18	D	SOSBAM0	247BS1	ZOLLER, ROBERT
710000547	2007	76	D	SOSBAM0	247BS1	ZOLLER, ROBERT

3/09/07 Left message
532940

Need 07 TA TV1021607V

TRAVEL VOUCHER
(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE

2. TYPE OF TRAVEL
☒ TEMPORARY DUTY
☐ PERMANENT CHANGE OF STATION

3. VOUCHER NO. Sewall021607V

4. SCHEDULE NO.

5. a. NAME (Last, first, middle initial)
Sewall, Bella

b. SOCIAL SECURITY NO. (b) (6) [redacted]

6. PERIOD OF TRAVEL
a. FROM 02/21/2007 b. TO 02/24/2007

c. MAILING ADDRESS (Include ZIP Code)
1849 C Street, NW
Room 6249
Washington, DC 20240

3/13/07 Left message need 07 TA

d. OFFICE TELEPHONE NO. 202-208-7696

7. TRAVEL AUTHORIZATION
a. NUMBER(S) Sewall022107-01
b. DATE(S) 02/16/2007

e. PRESENT DUTY STATION
Washington, DC

f. RESIDENCE (City and State) (b) (6) [redacted]

10. CHECK NO.

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government (Attached ☐ Check ☐ Cash)
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

11. PAID BY

Document ACCEPTED MAR 16 2007

07 MAR 7 PM 12:07

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
WN2372100039	159.40	WN	ECO	02/21/2007	RES-WASHIGNTON, DC
UA7818873362	274.30	UA	ECO	02/21/2007	San Diego, CA
					SAN DIEGO, CA
					Los Angeles, CA

COMMENTS:
Trip Number 1. Please refer to the Reclamation IA number 07AA811298. This number will also correspond to the Interior Account number 100DDR15 BR0012 68.

Lodging not to exceed 300% as authorized--approved;
Signing Official
Does Not Need

211D-224.00
211T68.00
211I336.00

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ Bella Katy [signature] DATE 2-28-07 AMOUNT CLAIMED ▶ 659.00

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ [signature] DATE 3-1-07

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION
a. DIFFERENCES, IF ANY (Explain and show amount) Shuttle C/B $ 31.00
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $
c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00
d. NET TO TRAVELER ▶ $ ~~659.00~~ 628.00

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO.
b. D.O. SYMBOL
c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION
RECLAMATION-DOI-2007.1000DDR15BR0012--68..... - 659.00 NR- 611.70

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

PR

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES TRIP# 1

TRAVEL AUTHORIZATION NO. Sewall1022107-01

TRAVELER'S LAST NAME Sewall

DATE 20 07 (a)	TIME (Hours and am/pm) (b)										AMOUNT CLAIMED MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
02/21	6:0												
02/21													
02/21	10:55P	A-:SAN DIEGO,CA	(13/64)			48 00		89 00	48.00			48 00	
02/21	—	Taxi - Cash											8 00
02/21		Conference Reg. Fee											330 00
02/21		Misc.-Amtrak											6 00
02/22	—	Taxi - Cash											25 00
02/22		Subsistence				64 00		89 00	64.00			64 00	
02/23	7:50P	D-:SAN DIEGO,CA		PAC									
02/23		Airline Flight											
02/23	—	Taxi - Cash											35 00
02/23	.	Subsistence				64 00			64.00			64 00	
02/24	6:37A	A:RES: Washington,											
02/24		Subsistence				48 00			48.00			48 00	
02/24		Misc. - Super Shuttle											(31 00)
						224.00							
										SUBTOTALS ▶	0 00	224 00	435 00
										TOTALS ▶	0 00	224 00	435 00

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 659.00

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

02/28/07 ACCOUNTING DETAIL |Doc No: Sewall1021607V
Copyright 1989-2004 Gelco Information Network, Inc |Sewall, Bella (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			433.70
LODGING-409			178.00
M&IE-409			224.00
OTHER-409			37.00
REG. FEES-409			330.00
TAXI CASH-			68.00
RECLAMATION-DOI	0.00	0.00	1,270.70

Organization:
2007.1000DDR15BR0012--68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,270.70
NON-REIMBURSABLE EXPENSES		611.70
TOTAL AMOUNT CLAIMED		659.00
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		659.00
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		659.00

Expenses for Belle's Trip to San Diego

1. Conference Registration fee - $330.00

2. Air fare - to San Diego - $159.40
   from San Diego - $274.30
   433.70

3. Hotel - $178 ($89/night x 2)

4. Cab to Union Station from MIB - $8.00

5. Amtrak train Union Station - BWI Airport - $6.00

6. Cab SD Airport to Coronado Island Inn - $25.00

7. Cab Coronado Hotel to SD Airport - $35.00

8. Super Shuttle BWI Airport - home - $31.00.

9. per diem Wed - Friday

YOUR CARLSON WAGONLIT CONFIRMATION CODE IS FSWYWJ

SALES PERSON: ZZ
CUSTOMER NBR: (b) (6) [redacted]

ITINERARY/INVOICE NO. 0359547
DUPLICATE FSWYWJ

DATE: 20 FEB 07
PAGE: 01

TO: DOI

FOR: SEWALL/BELLA K

YOUR SOUTHWEST CONFIRMATION NBR IS 56NPME

21 FEB 07 - WEDNESDAY
AIR SOUTHWEST AIRLINES FLT:2349 ECONOMY
LV BALTIMORE WASHNTN 800P
EQ : BOEING 737-700
05HR 55MIN
NON-STOP
REF: 56NPME

AR SAN DIEGO 1055P
ARRIVE: TERMINAL 1

20 AUG 07 - MONDAY
OTHER INFORMATION
THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL.

ELECTRONIC TICKET CONFIRMATION - WN - 56NPME

AIR TICKET WN2372100039
ELEC TKT

BILLED TO MASTERCARD 159.40*

SUB TOTAL 159.40
NET CC BILLING 159.40*

THIS IS YOUR RECEIPT

TOTAL AMOUNT DUE 0.00

NOTICE- PAYMENT MADE DIRECTLY TO TRANSPORTING CARRIER.

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT
CARLSON PHONE RESERVATIONS IS 866-227-5638
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CARLSON FAX TO SEND TRAVEL ORDERS IS 877-834-3459
PREASSIGNED SEATING NOT AVAILABLE ON SOUTHWEST
SOUTHWEST WILL NOT REFUND LOST/STOLEN TICKETS
PLEASE CHECK IN 60 TO 90 MINUTES PRIOR TO DEPARTURE
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

TO: DOI

YOUR CARLSON WAGONLIT CONFIRMATION CODE IS GHASTC

SALES PERSON: ZZ ITINERARY/INVOICE NO. 0360191 DATE: 21 FEB 07
CUSTOMER NBR: M283OXJ DUPLICATE GHASTC PAGE: 01

TO: DOI

FOR: SEWALL/BELLA K

23 FEB 07 - FRIDAY
AIR UNITED AIRLINES FLT:6074 ECONOMY
OPERATED BY /UNITED EXPRESS/SKYWEST
LV SAN DIEGO 750P EQ : EMBRAER TPROP
DEPART: COMMUTER TERMINAL 50MIN
AR LOS ANGELES 840P NON-STOP
ARRIVE: TERMINAL 8 REF: QWMT76
SEWALL/BELLA K SEAT-8C
AIR UNITED AIRLINES FLT:308 ECONOMY FOOD-BEV/PUR
LV LOS ANGELES 1048P EQP: AIRBUS A320
DEPART: TERMINAL 7 04HR 49MIN

24 FEB 07 - SATURDAY
AR BALTIMORE WASHNTN 637A NON-STOP
RE : QWMT76
SEWALL/BELLA K SEAT-22B

Overnight on Plane

22 AUG 07 - WEDNESDAY
OTHER INFORMATION
THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL.

MCO XD1962686706 BILLED TO MASTERCARD 10.50* Processing fee

AIR TICKET UA781887336 2 SEWALL BELLA K
ELEC TKT BILLED TO MASTERCARD 263.80*

SUB TOTAL 274.30
NET CC BILLING 274.30*

TOTAL AMOUNT DUE 0.00

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT
CARLSON PHONE RESERVATIONS IS 866-227-5638
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CARLSON FAX TO SEND TRAVEL ORDERS IS 877-834-3459

FOR: SEWALL/BELLA K

THIS INVOICE WILL SERVE AS YOUR PASSENGER RECEIPT
YOU MAY ALSO OBTAIN A PASSENGER RECEIPT OF EACH TICKET
BY REQUESTING IT FROM THE AIRLINES UPON CHECKIN

GET THERE
U15-C3
U3-OS
U4-IOSOS
H/1497 USED LOWER NON-CC PUBLISHED FARE
U7-0-10.50-0

Carlson Wagonlit Travel - Local Presence, Global Power

CORONADO ISLAND INN
301 ORANGE AVE
CORONADO, CA 92118

TIME 12:06 AM DATE 02/22/07
TERM# 00004BSB MER# 000355510261884
TRAN TYPE SALE
(b) (6) [redacted]
CARD TYPE MASTERCARD
ROOM 106
TICKET # 0000002099
AUTH CODE 084306 SEQ # 006
TOTAL $178.00

CUSTOMER COPY

do
Inn
Avenue
92118
436-0935

131/64

ROOM RECEIPT

NAME Sewall, Bella
ROOM# 106
LENGTH OF STAY 2 NIGHTS.

DATES	RATE	TAX	TOTAL
21 Feb07	89-	EXEMPT	89-
22 Feb07	89-		89-
	178-		

TOTAL PAID $178-

THANK YOU FOR STAYING WITH US AND HOPE TO HAVE YOU AS ONE OF OUR GUESTS IN THE FUTURE,

Martha Ann Morrison
MANAGER
23 Feb 2007

Taxi Cab Receipts

DATE: 2/21 TIME:

TRIP ORIGIN: MIB

DESTINATION: Union Station

FARE: $ 8 SIGNATURE

SuperShuttle

Call (800) BLUE-VAN at least one day in advance for return reservations

PASSENGER RECEIPT

2/24/2007 7:26:28AM

CONF#:
ADULT: 1
CHILD: 0

SEWALL, MS

WASHINGTON 20009

PAYMENT TYPE: CC

TOTAL DUE: $ 31.00
TOTAL PAID: $ 31.00
CHANGE DUE: $ 0.00

THIS IS A RECEIPT
NOT VALID FOR TRANSPORTATION

DRIVER GRATUITY NOT INCLUDED IN FARE
BWI

Riders AMTRAK Baggage

1

Name of Passenger
SEWALL BELLA

From
WASHINGTON, DC

To
BWI AIRPORT STA, MI

Carrier MD Train Date

Accom U Space/Car UNRESERVED

Form of Payment
IK6.00 9158

Rail Fare $6.00 Accom Charge $.0

Fare Plans Total $6.0

MDOW

Ticket Number
05299783655 16

No. of Reservation # 01 0 /TR

Date of Issue
21FEB07

PASSENGER RECEIPT

Silver Cabs

(619) 280-5555

Radio Service

Trade Name:

Amount: $25 Date 2/22

Driver: Cab#

DATE 2/23 AMT $35
FROM Hotel Del Coronado
TO San Diego Airport
NAME: Bella Sewell
SGN:
PHT/CMD
DRIVER Car 30

CORONADO CAB CORP

SERVING OVER 35 YEARS
SEDANS / WAGONS / VANS

(619) 542-1926 / 435-6211
BASE ACCESS

Welcome, Bella
myABA | Log Out

American Bar Association

Defending Liberty, Pursuing Justice

Payment Authorization

Thank you for your order.

Your confirmation number for this order is: **146527**

Itinerary | Badges | Guests

Your Credit Card Payment was approved.

Order No.	Item Code	Description	Price	Qty	Subtotal
3000689759	NR0702	**25th Annual Water Law Conference** From: Feb-22-2007 To: Feb-23-2007	$330.00	1	$330.00
3000689759	NR0702 THLUNCH	**Thursday Luncheon with Keynote Speaker** From: Feb-22-2007 To: Feb-22-2007	$0.00	1	$0.00
3000689759	NR0702 FRLUNCH	**Hot Topics Luncheon** From: Feb-23-2007 To: Feb-23-2007	$0.00	1	$0.00
				Order Total:	$330.00
				Total Paid:	$330.00

Date: February-02-2007

Confirmation Number: 146527

Name: Bella Sewall

Address: MS 6242 MIB 1849 C St NW

City: Washington

State: DC

Zip: 20240

Country: United States of America

An E-Mail confirmation of this order has been sent to (b) (6) [redacted]

Back to Meetings home page

Print

AMERICAN BAR ASSOCIATION | 321 NORTH CLARK STREET | CHICAGO ILLINOIS 60610

MEMORANDUM

TO: **DENVER ACCOUNTING OPERATIONS OFFICE**

FROM: **OFFICE OF CONGRESSIONAL AND LEGISLATIVE AFFAIRS (OCL)**

DATE: **Friday, March 02, 2007**

THE FOLLOWING DOCUMENTS ARE ENCLOSED FOR PAYMENT:

Travel voucher for Bella Sewall
From Washington, D.C. to San Diego 02/21/07 thru 02/23/07
Net to traveler $659.00

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:
Patricia Richmond on 202-208-4373

SPECIAL INSTRUCTIONS: N/A

DOI
NATIONAL BUSINESS
CENTER
07 MAR -7 PM 12: 07

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

Agent Fee	1050
Airfare	15940 26380
Lodging	17800
Rental Car	
Gas	
Parking	
Taxi / Shuttle	3100
VXRF	
TAVD	

CHECKED MAR 20 2007

EPG 15
3-12

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO. Sewa11022107-01

2. TRAVELER *(first name, middle initial, last name)*: ella Sewall

3. TITLE: Attorney Advisor

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED:
1849 C Street, NW
Room 6249
Washington, DC 20240

6A. OFFICE/SERVICE AND DIVISION: RECEIVED MAR 1 8 2007

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Washington, DC

8. OFFICE PHONE NO.: 202-208-7696

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [ ] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [X] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: Travel to San Diego, California to attend the ABA Water Law conference on behalf of the Bureau of Reclamation.

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: RES: Washington	DC						
02/21/2007	WED	TO: SAN DIEGO	CA	64	131	195		AIR	
02/23/2007	FRI	SAN DIEGO	CA	64	131	195			
---	---	TO: ---	--	---	---	---	---	---	---
---	---	---	--	---	---	---	---	---	---
02/24/2007	SAT	TO: RES: Washington	DC						

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? *(If NO, justify in item 22)*
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED? *(If YES, justify in item 22)*
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? *(If YES, check one box below and complete item 17B)* [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE.
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? *(If YES, justify in item 22)* IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINER [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: If item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED — A. INITIALS — B. DATE

22. REMARKS

Please refer to the Reclamation IA number 07AA811298. This number will also correspond to the Interior Account number 100DDR15 BR0012 68.
THE MILEAGE RATE IS .15 CENTS A MILE. I will be driving from my residence in (DC) via POV to BWI and returning to my residence via POV

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 423.20
B. TOTAL PER DIEM AND OTHER	$ 454.00
C. TOTAL ESTIMATED COST	$ 877.20
25. ADVANCE AUTHORIZED	$ 0.00

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B
	2007	1000DDR15B								

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: M. Eames Director OCL -

27B. SIGNATURE *(PRESS FIRMLY—USE BALL POINT PEN)*: M. Eames

27C. DATE: 2/20/07

GSA FORM 87 (REV. 6/86)

GENERAL SERVICES ADMINISTRATION

TRANSACTION REPORT

MAR-13-2007 TUE 08:55 AM

FOR: DOI-OS-DENVER 303 969 6631

RECEIVE

DATE	START	SENDER	RX TIME	PAGES	TYPE	NOTE	M#	DP
MAR-13	08:54 AM	202 208 7619	1'22"	3	FAX RX	OK		

U .S. Department of the Interior **Notice of Action Taken**

National Business Center - Denver
7401West Mansfield Ave. D-2777
Denver, CO 80235 – 2230

Bella Sewall
1849 C. street, NW RM 6249
Washington, DC 20240

VOUCHER NUMBER : TV11021607V			
Amount Claimed	**Suspended**	**Disallowed**	**Allowed**
$659.00		31.00	$628.00
Tax Withheld	**Applied to Advance**	**Under Claimed**	**Amount of Check**
			$628.00

EXPLANATION:

Disallowed $31.00– Fees for Shuttles are a Centrally Billed Item, charged on your Government Credit card creating a direct expense to the Government rather than the traveler, therefore this expense cannot be reimbursed.

\

Please direct any inquiries to Barbara Smith 303-969-5697

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE: **Barbara Smith**	REVIEWING TECHNICIAN	**3/16/2007**

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	O

Julian Date	Prep Unit	Sequence Number
075	BS	B

Batch Totals

Input Date	Number of Documents
3/16/7	2

System Checked By: BS

Batch Approval

Approved By: gm

Date Approved: 3/16/07

0000532540

07-211C-0016

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE

2. TYPE OF TRAVEL
[X] TEMPORARY DUTY
[ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO. sewall 051107v

4. SCHEDULE NO. Sewal051107

5. a. NAME *(Last, first, middle initial)*
Sewall, Bella

b. SOCIAL SECURITY NO. (b) (6) [redacted]

6. PERIOD OF TRAVEL
a. FROM 05/15/2007
b. TO 05/19/2007

c. MAILING ADDRESS *(Include ZIP Code)*
1849 C Street, NW
Room 6249
Washington, DC 20240

d. OFFICE TELEPHONE NO.

7. TRAVEL AUTHORIZATION
a. NUMBER(S) Sewall051107
b. DATE(S) 05/11/2007

e. PRESENT DUTY STATION
Washington, DC

f. RESIDENCE *(City and State)* (b) (6) [redacted]

10. CHECK NO.

8. TRAVEL ADVANCE
a. Outstanding
b. Amount to be applied
c. Amount due Government *(Attached [ ] Check [ ] Cash)*
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

Document ACCEPTED JUN 06 2007

11. PAID BY
TOT-0

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials* LLM

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
UA7045826454/55 518.10	UA	ECO	05/11/2007	OFC-WASH, DC	FRESNO, CA

COMMENTS:
Trip Number 1. Please refer to the Reclamation IA number 07AA811298. This number will also correspond to the Interior Account number 1000DDR15 BR0012.....68.

Lodging not to exceed 300% as authorized--approved;
Signing Official

COMMENTS continued on next page

211B = 201.75
211L = 6.00
211T = 73.00

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ Bella Katy Sll DATE 5/25/2007 AMOUNT CLAIMED ▶ 280.75

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ Matt Emmer DATE 5/25/07

17. *FOR FINANCE OFFICE USE ONLY* COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* $

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO.
b. D.O. SYMBOL
c. MONTH & YEAR

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):* $ 0.00

d. NET TO TRAVELER ▶ $ 280.75

18. ACCOUNTING CLASSIFICATION
RECLAMATION-DOI-2007.1000DDR15BR0012--68..... - 280.75 NR- 845.10

6-1-07 TA

TRAVEL VOUCHER
(b)(6)
Sewall, Bella

TRAVEL AUTHORIZATION NUMBER(S)/DATE(S)
Sewall051107 05/11/2007

COMMENTS: (cont'd)
Please note, On 05/17 thru 05/18 the allowed lodging expense was $60.00.
The actual cost for lodging in Tracy was $69.00 .

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only *for actual expense travel* — Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. Sewall1051107

TRAVELER'S LAST NAME Sewall

MILEAGE RATE: 0.000

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
05/15	7:55P	D-:OFC: Washington											
05/15		Red Eye-Airline Flight											
05/15	10:13P	A-:FRESNO,CA				40 50		79 00	40.50			40 50	T 8 00
05/15		Taxi - Cash 75/54											L 6 00
05/15		Public Transit											T 25 00
05/15		Taxi - Cash											
05/16		Subsistence				54 00		79 00	54.00			54 00	
05/17	8:30A	D-:FRESNO,CA											
05/17	4:00P	A-:TRACY,CA 75/44				39 00		69 00	39.00			39 00	T 40 00
05/18		Taxi - Cash											
05/18	3:00P	D-:TRACY,CA											
05/18		Subsistence				39 00		69 00	39.00			39 00	
05/19		Shuttle Service - Govtc											
05/19	6:46A	A:RES: Washington,											
05/19		Subsistence				29 25			29.25			29 25	
										SUBTOTALS ▶	0 00	201 75	79 00
										TOTALS ▶	0 00	201 75	79 00

Under claimed

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 280.75

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

05/25/07 ACCOUNTING DETAIL |Doc No: sewall 051107v

Copyright 1989-2004 Gelco Information Network, Inc

|Sewall, Bella (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			518.10
LODGING-409			296.00
M&IE-409			201.75
TAXI CASH-			73.00
TAXI CGVCC-			31.00
TRANSPORT-409			6.00
RECLAMATION-DOI	0.00	0.00	1,125.85

Organization:
2007.1000DDR15BR0012--68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,125.85
NON-REIMBURSABLE EXPENSES		845.10
TOTAL AMOUNT CLAIMED		280.75
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		280.75
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		280.75

Bella's Expenses - 5/15 trip

1. per diem
2. air - $518.10 - Gov't CC
3. lodging $158 + $69 - Gov't CC
4. transport
   - A $8 - Cab DOI - Union Station
   - B $6 - train Union Station - BWI
   - C $25 - Cab Fresno airport - hotel
   - D $40 - Cab Sacramento downtown - airport
   - E $31 - SuperShuttle BWI airport - home

paid w/ gov't credit card - should direct bill.

Riders AMTRAK Baggage

1

Name of Passenger

WALL/BELLA K

WASHINGTON,DC

BWI AIRPORT STA,MD

MD Carrier Train Date

U Accom Space/Car

UNRESERVED

K6:00 0054

Rail Fare $6.00 Accom Charge $0.00

Fare Plans Total $6.00

OW

51182317608 01 01 of

MAY07 /TR

Date of Issue Reservation #

PASSENGER RECEIPT

TAXICAB RECEIPT

Date: 5/15/07

Time: 3:00

Company:

Origin of Trip: DOI - MIB

Destination: Union Station

Fare: $8 Sign:

Hope you had a pleasant ride.
Thank you for your business

PACIFIC CAB Co.

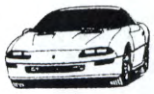
(916)870-6879

Date: 5/18/07 Fare: $40

Driver: SHAH Flat rate out of town

Sacramento downtown - airport

Driver: PINDER
Date: 5/15/07
Fare: $25



A-1 Taxi Cab Co.
(559) 284-8510

10 to 15 Minute Service

Clean and Comfortable

SuperShuttle

Call (800) BLUE-VAN at least one day
in advance for return reservations

PASSENGER RECEIPT

5/19/2007 7:23:03AM

CONF#:
ADULT: 1
CHILD: 0

SEWALL, BELLA

WASHINGTON 20009

PAYMENT TYPE: CC

TOTAL DUE: $ 31.00
TOTAL PAID: $ 31.00
CHANGE DUE: $ 0.00

TRACY FAIRFIELD INN
2410 NAGLEE RD
TRACY CA 95376
209-833-0135

75|44

San Joaquin County

BELLA SEWALL
2298 17 ST NW
WASHINGTON WA 20009

BUEREU OF RECLAMATION

Room:	323	GOVA
Room Type:	QNQN	
No. Of Guests:	1	
Rate:	69.00	
Clerk:	JBT	

Arrive 17May07 **Time** 05:21p **Depart** 18May07 **Time** 08:27a **Folio#** TO-70810

Date	Reference Number	Description	Charges	Credits
17May07	RB323	ROOM CHARGE	69.00	
17May07	T1323	Occupancy Sales Ta	6.90	
18May07	XB323	ROOM CHARGE REBATE	75.90	69.00-
18May07	T1323	Occupancy Sales Tax		6.90-
18May07	RB323	ROOM CHARGE	69.00	
18May07	MC08:27AM	Master Card		69.00-

```
********************
* THIS CARD WAS    *
* ELECTRONICALLY   *
* SWIPED ON 17May07 *
********************
```

```
*************************************
*  CARD #: (b) (6) [redacted]       *
*  Amount:      69.00   Auth: 047432 *
*       ** Signature on File **     *
*************************************
```

** BALANCE ** .00

Want your final hotel bill by email? Just ask the Front Desk!

See "Internet Privacy Statement" on Marriott.com

FOUR POINTS
BY SHERATON

FOUR POINTS BY SHERATON FRESNO · 3737 NORTH BLACKSTONE · FRESNO, CALIFORNIA 93726
FOURPOINTS.COM/FRESNO · TEL (559) 226 2200 · FAX (559) 222 7147

79/54

GUEST
Ms. Bella Sewall
(b) (6) [redacted]
USA

ROOM	311		TRAVEL AGENT
RATE	79.00		
# PERSONS	1		
FOLIO	470574	A	
PAGE	1		CHARGE TO
ARRIVE	15-MAY-07	22:35	
DEPART	17-MAY-07	07:05	
PAYMENT	VM		

DATE	REFERENCE	DESCRIPTION	DEBIT	CREDIT
15-MAY-07	RT311	Room Government		79.00
16-MAY-07	RT311	Room Government		79.00
17-MAY-07	VM	Visa/Mastercard		158.00-

For Authorization Purposes Only
(b) (6) [redacted]

Auth Date	Code	Authorized
15-MAY-07	021797	205.40

Total Charges	158.00
Total Credits	158.00-
Balance Due	0.00

EXPENSE REPORT SUMMARY

Date	Other	Total	Payment
15-MAY-07	79.00	79.00	0.00
16-MAY-07	79.00	79.00	0.00
17-MAY-07	158.00-	158.00-	0.00
Total	0.00	0.00	0.00

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

SIGNATURE

As a Starwood Preferred Guest, you could have earned 316 Starpoints for this visit. Please provide your member number or enroll today.

Ms. Bella Sewall		ROOM	DEPART	AGENT
FOLIO 470574	15-MAY-07	311	17-MAY-07	SR

FOR RESERVATIONS DIAL **(800) 368 7764** IN THE UNITED STATES AND CANADA

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO.: Sewall1051107

2. TRAVELER *(first name, middle initial, last name)*: Bella Sewall

3. TITLE: Attorney

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED:
1849 C Street, NW
Room 6249
Washington, DC 20240

6A. OFFICE/SERVICE AND DIVISION:

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Washington, DC

8. OFFICE PHONE NO.:

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [ ] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [X] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: Travel to Fresno, CA and Tracy CA--to tour the San Joaquin River--Delta for Brenda Burman, et al tour for Brenda Burman, et al

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: OFC: Washington	DC						
05/15/2007	TUE	TO: FRESNO	CA	54	79	133		AIR	
05/17/2007	THU	FRESNO	CA	54	79	133			
05/17/2007	THU	TO: TRACY	CA	39	60	99			
05/18/2007	FRI	TRACY	CA	39	60	99			
05/19/2007	SAT	TO: RES: Washington	DC						

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? *(If NO, justify in item 22)*
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED? *(If YES, justify in item 22)*
	X	17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? *(If YES, check one box below and complete item 17B)* [ ] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE.
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? *(If YES, justify in item 22)* IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: if item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED: A. INITIALS / B. DATE

22. REMARKS

Please refer to the Reclamation IA number 07AA811298. This number will also correspond to the Interior Account number 1000DDR15 BR0012.....68.

Lodging not to exceed 300% as authorized--approved; Signing Official

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 518.10
B. TOTAL PER DIEM AND OTHER	$ 419.75
C. TOTAL ESTIMATED COST	$ 937.85

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

25. ADVANCE AUTHORIZED: $ 0.0

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST
	2007	1000DDR15B								

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Matt Eames - Director

27B. SIGNATURE *(PRESS FIRMLY, USE BALL POINT PEN)*: Matt Eames

27C. DATE: 5

GENERAL SERVICES ADMINISTRATION — GSA

05/11/07 ACCOUNTING DETAIL |Doc No: sewall 051107

Copyright 1989-2004 Gelco Information Network, Inc

|Sewall, Bella (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			518.10
LODGING-409			218.00
M&IE-409			201.75
RECLAMATION-DOI	0.00	0.00	937.85

Organization:
2007.1000DDR15BR0012--68.....

"Tammy White"
<TWHITE@usbr.gov>

05/04/2007 02:35 PM

To: Bella Sewall/OCL/OS/DOI@DOI
cc: Laura C Curlett/SIO/OS/DOI@DOI, Margaret Kuyumjian/POB/OS/DOI@DOI, Nancy Appler/OCL/OS/DOI@DOI, "Brenda Burman" <BBURMAN@usbr.gov>
Subject: Re: account numbers for San Joaquin trip?

Bella,

Here's what we're going to do:

We already have an interagency agreement in place with the Immediate Office of the Secretary for travel costs. I'm going to modify that IA to add your Office of Legislative Counsel (I just received that information from Margaret Kuyumjian).

For your travel authorization, you need to reference the Reclamation IA #07AA811298. Do you have a cost estimate for this trip yet?

Tammy

>>> <Bella_Sewall@ios.doi.gov> 5/4/2007 1:27 PM >>>
Tammy-

I'm going to go with Brenda Burman on the tour of San Joaquin the week of
May 14th and Reclamation is going to cover my costs. I was wondering if
you have accounting codes for my travel authorization? Let me know if you
have any questions! Thanks in advance,

Bella

Bella K. Sewall
Attorney Advisor
Office of Legislative Counsel, U.S. Department of the Interior
Phone: 202-208-7693
Fax: 202-208-7619
E-mail: bella_sewall@ios.doi.gov

LASKFV

YOUR CARLSON WAGONLIT CONFIRMATION CODE IS LASKFV

SALES PERSON: ZA ITINERARY/INVOICE NO. 0417027 DATE: 11 MAY 07
CUSTOMER NBR: M283OXJ DUPLICATE LASKFV PAGE: 01

TO: DOI

FOR: SEWALL/BELLA K

15 MAY 07 - TUESDAY

AIR	UNITED AIRLINES	FLT:165	ECONOMY	FOOD-BEV/PUR
	LV BALTIMORE WASHNTN		608P	EQ : BOEING 757-200
				03HR 47MIN
	AR DENVER		755P	NON-STOP
				REF: K3JRRY
	SEWALL/BELLA K SEAT-17A			
AIR	UNITED AIRLINES	FLT:6737	ECONOMY	
	OPERATED BY /UNITED EXPRESS/SKYWEST			
	LV DENVER		855P	EQP: CANADAIR REG JET
				02HR 18MIN
	AR FRESNO		1013P	NON-STOP
				REF: K3JRRY
	SEWALL/BELLA K SEAT-2A			

18 MAY 07 - FRIDAY

AIR	UNITED AIRLINES	FLT:334	ECONOMY	
	LV SACRAMENTO		800P	EQP: BOEING 737 300
	DEPART: TERMINAL B			01HR 30MIN
	AR LOS ANGELES		930P	NON-STOP
	ARRIVE: TERMINAL 7			REF: K3JRRY
AIR	UNITED AIRLINES	FLT:308	ECONOMY	FOOD-BEV/PUR
	LV LOS ANGELES		1045P	EQP: BOEING 757-200
	DEPART: TERMINAL 7			05HR 01MIN

19 MAY 07 - SATURDAY

AR BALTIMORE WASHNTN	646A	NO-STOP
		REF: K3JRRY

11 NOV 07 - SUNDAY

OTHER INFORMATION
THANK YOU FOR USING CARLSON WAGONLIT TRAVEL.

MCO	XD1966678615		
		BILLED TO MASTERCARD	10.50*
AIR TICKETS	UA7045826454/55	SEWALL BELLA K	
ELEC TKT		BILLED TO MASTERCARD	507.60*

FOR: SEWALL/BELLA K

11 NOV 07 - SUNDAY

SUB TOTAL	518.10
NET CC BILLING	518.10*

LASKFV
TOTAL AMOUNT DUE 0.00

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT
CARLSON PHONE RESERVATIONS IS 866-227-5638
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CARLSON FAX TO SEND TRAVEL ORDERS IS 877-834-3459

THIS INVOICE WILL SERVE AS YOUR PASSENGER RECEIPT
YOU MAY ALSO OBTAIN A PASSENGER RECEIPT OF EACH TICKET
BY REQUESTING IT FROM THE AIRLINES UPON CHECKIN
GET THERE
U15-CO
U3-OS
U4-IOSOS
A/3138 CONTRACT CARRIER USED
U7-0-10.50-0

Carlson Wagonlit Travel - Local Presence, Global Power

San Joaquin River – Delta Tour for Brenda Burman, et al

May 16-18, 2007

Transportation provided by: Jeff McCracken, Public Affairs Officer
Cell Phone: 916-769-1109

Tuesday, May 15

Arrive in Fresno

Lodging: Four Points by Sheraton $79
3737 North Blackstone Avenue
559-226-2200
Cancellation Policy: 4:00 p.m. day of arrival

Wednesday, May 16

8:00 a.m. Breakfast/Briefing at Hotel

667 503 784

Participants:
Tom Birmingham, General Manager, Westland Water District
Cell Phone:

8:30 a.m. Depart Hotel

Tour Drainage Impacted Land

10:30 a.m. Meet Dennis Falaschi, General Manager, Panoche Water District
Tour Panoche Treatment Plant

12:30 p.m. Lunch

1:30 p.m. Tour continues

4:30 p.m. Return to Fresno

Thursday, May 17

7:30 a.m. Breakfast/Briefing at hotel

Participants:
Michael Jackson, Manager, South-Central California Area Office

Cell Phone: (b) (6) [redacted]
Ron Jacobsma, Manager, Friant Water Users Association
Dan Dooley, Attorney, Friant Water Users Association

8:30 a.m. Depart Hotel for Friant Dam

9:00 a.m. Tour Friant Dam

10:00 a.m. Tour San Joaquin River Restoration Sites

Participants:
Jason Philips, Manager, San Joaquin River Restoration Program
Cell Phone: (b) (6) [redacted]
Mario Santoyo, Friant Water Users Authority
Monte Schmitt, Natural Resources Defense Council Representative

12:00 p.m. Lunch

1:30 p.m. Arrive at Los Banos Airport

2:00 p.m. Aerial Tour of:
Delta/Mendota Canal – Tracy Pumping Plant – Delta - San Luis Reservoir – San Joaquin River

4:00 p.m. Plane lands at Byron Airport

4:45 p.m. Lodging: Fairfield Inn by Marriott $69
2410 Naglee Road
209-833-0135
Cancellation Policy: 6 p.m. day of arrival

70810

Friday, May 18

8:30 a.m. Depart hotel for Tracy Pumping Plant (C.W. "Bill" Jones Pumping Plant)

8:50 a.m. Tour Pumping Plant

Ron Silva, Chief, Biological Resources Branch
Cell Phone: (b) (6) [redacted]

10:00 a.m. Depart Tracy

Tour Delta Area

Paul Fujitani, Chief, Water Operations, Central Valley Operations Office
Cell Phone: (b) (6) [redacted]

12:00 p.m. Lunch in Walnut Grove

Met by: Joe Grindstaff, Director, California Bay-Delta Authority
Keith Coolidge, CALFED Public Affairs Office
Cell Phone: (b) (6) [redacted]
Briefing: Delta Vision

1:30 p.m. Depart Walnut Grove for Sacramento

Tour Delta Cross Channel Gates

3:00 p.m. Arrive in Sacramento

Depart for Washington, DC or overnight in Sacramento

TOUR COORDINATOR:

Loredana (Donna) Potter Office phone: 916-978-5103 Cell Phone: (b) (6) [redacted]
e-mail: lpotter@mp.usbr.gov

TOUR PARTICIPANTS

Brenda Burman	Deputy Commissioner for Legislative and Public Affairs
Barbara Geigle	DOI Solicitor
Jason Alberts	Special Assistant to Mark Limbaugh
Tera Conrad	Special Counselor to Mark Limbaugh
Bella Sewall	Office of Congressional and Legal Affairs
Federico Barajas	Special Assistant

MEMORANDUM

TO: **DENVER ACCOUNTING OPERATIONS OFFICE**

FROM: **OFFICE OF CONGRESSIONAL AND LEGISLATIVE AFFAIRS (OCL)**

DATE: **Tuesday, May 29, 2007**

THE FOLLOWING DOCUMENTS ARE PROVIDED AS PROOF FOR REIMBURSEMENT

(1) Travel voucher entry for Bella Sewall to Fresno, California and Tracy for the purposes of touring the San Joaquin River and the Delta.

Net to traveler $280.75

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:
Patricia Richmond on 202-208-4373

SPECIAL INSTRUCTIONS: N/A

CENTRALLY BILLED ITEMS
CHECKED ON CARD TABLE

AIRFARE 507.60 Fee 10.50

RENTAL CAR _____

GAS _____

PARKING _____

TAXI/ SHUTTLE 31.00

CHARGES NOT ON CARD TABLE _____

CREDIT CARD NOT ON CARD TABLE _____

INCORRECT CARD NUMBER ON TABLE _____

CHECKED VXRF _____

CHECKED TADV _____

EA 9/5 5.25

Lodge 158.00 69.00

CHECKED JUN 05 2007

Department of the Interior

OFFICE OF THE SECRETARY
TRAVEL

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	O

Julian Date	Prep Unit	Sequence Number
155	35	A

Batch Totals

Input Date	Number of Documents	N
6/5/7	5	

System Checked By: _____ Date _____

Batch Approval

Approved By: Jm

Date Approved: 6/6 & 6/7/07

CHECKED JUN 08 2007

TRAVEL VOUCHER (Read Privacy Act Statement on the back)	1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: SIWRO	2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION	3. VOUCHER NO.: SIWRO.FY07.K2
			4. SCHEDULE NO.

5.			
a. NAME (Last, first, middle initial): Bezdek, John		b. SOCIAL SECURITY NO.: (b) (6) [redacted]	6. PERIOD OF TRAVEL: a. FROM 12/13/2006 b. TO 12/15/2006
c. MAILING ADDRESS (Include ZIP Code): 18 Dublin Drive, Lutherville, MD 21093		d. OFFICE TELEPHONE NO.	7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWRO.FY07.K2 b. DATE(S) 01/12/2007
e. PRESENT DUTY STATION: Washington, DC	f. RESIDENCE (City and State): (b) (6) [redacted]		10. CHECK NO.

8. TRAVEL ADVANCE		9. CASH PAYMENT RECEIPT		11. PAID BY
a. Outstanding	0.00	a. DATE RECEIVED	b. AMOUNT RECEIVED $	HDT
b. Amount to be applied	0.00			
c. Amount due Government (Attached [ ] Check [ ] Cash)		c. PAYEE'S SIGNATURE: 0000458260		
D. Balance outstanding				

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	347.70				BWI-Baltimore, MD	LAS-Las Vegas Airp

Document ACCEPTED JAN 19 2007 J.L.M.

'07 JAN 16 AM 10:2 REC'D NBC

COMMENTS:
Trip Number 1. Travel paid by BOR thru RSA attached
A10152340004000001/070291DN014

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 1/12/07 AMOUNT CLAIMED ▶ 525.25

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ Pamela Witt DATE 1/12/06

17. FOR FINANCE OFFICE USE ONLY COMPUTATION

a. DIFFERENCES, IF ANY (Explain and show amount): CB lodging/travel business center $ 287

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION — Certifier's initials: $

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00

d. NET TO TRAVELER ▶ $ 525.25

RB 1/18/07

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION

BOR.12.06-070291DN014.A10152340004000001..... - 525.25 NR- 407.70 238.25

REIM. AGREEMENT → 1000 DDR14 BR0156 68

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

114/64

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. SIWRO.FY07.K2

TRAVELER'S LAST NAME Bezdek

DATE 20 06 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.445 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
12/13	12:01A	D-:Lutherville, MD											
12/13		Airline Flight									<109>	48- ~~157.00~~	
12/13	12:00A	A-:LAS VEGAS,NV				48.00		109.00	~~157.00~~				
12/13		Taxi - Cash											26.00
12/13		Airport Parking GVCC CBill											4.00
12/13		ATM Service Fee											<9.00> CB+ double charge
12/13		Taxes for Lodging								50	22.25	64-	
12/14		Private Vhcle									<109>	~~173.00~~	
12/14		Subsistence				64.00		109.00	~~173.00~~				<1.00> CB
12/14		Fax Documents - Govcc											<50.00> CB
12/14		Fax Documents - Govcc											<9.00> CB+ double charge
12/14		Taxes for Lodging											
12/15	12:00A	D-:LAS VEGAS,NV											26.00
12/15		Taxi - Cash											
12/15	12:01A	A:Lutherville, MD				48.00			48.00			48.00	
12/15		Subsistence											
											22.25	160.00	56.00
												<318>	<19>
										SUBTOTALS ▶	22.25	378.00	125.00
										TOTALS ▶	22.25	378.00	125.00

If additional space

In compliance with th
vided: Solicitation of
Chap. 57 as impleme
E.O. 11609 of July 2
November 22, 1943,
of the requested infor
eligible individuals fo
under appropriate ad
costs of such reimbu
used by officers and
performance of their
appropriate Federal,

with the hiring or firing of an
e, or investigations of the per-
ervice. Your Social Security
the authority of the Internal
and E.O. 9397, November 22,
lentification number; disclosure
l and/or relocation allowance
axable income. Disclosure of
luntary in all other instances;
other than SSN) required to
eimbursement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 238.25 ~~525.25~~

STANDARD FORM 1012 BACK (10-77)

01/12/07 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.K2

Copyright 1989-2004 Gelco Information Network, Inc

|Bezdek, John (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
ATM-			4.00
COM CARRIER-408			347.70
HOTEL TAXES-			18.00
LODGING-409			218.00
M&IE-409			160.00
MILEAGE-408			22.25
MISC-GOVCC-			51.00
PARK-			60.00
TAXI CASH-			52.00
BOR.12.06	0.00	0.00	932.95

Organization:
070291DN014.A10152340004000001.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		932.95
NON-REIMBURSABLE EXPENSES		407.70
TOTAL AMOUNT CLAIMED		525.25
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		525.25
GOV'T CHARGE CARD EXPENSES -	73.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	73.00	
PAY TO GOV'T CHARGE CARD		73.00
PAY TO TRAVELER		452.25

FILE COPY

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO. SIWRO.FY07.K2

2. TRAVELER *(first name, middle initial, last name)*: John Bezdek

3. TITLE: Policy Analyst/Lawyer

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED:
18 Dublin Drive
Lutherville, MD 21093

6A. OFFICE/SERVICE AND DIVISION: SIWRO

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Washington, DC

8. OFFICE PHONE NO.:

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [X] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: Colorado River Water Rights Meeting Soboba; SLR; Navajo.

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: RES: Washington	DC						
12/13/2006	WED	TO: LAS VEGAS	NV	64	114	178		AIR	1POC
12/15/2006	FRI	LAS VEGAS	NV	64	114	178			
--------	---	TO: ----------	--	---	---	---	---	----	----
--------	---	----------	--	---	---	---	---	----	----
12/15/2006	FRI	TO: RES: Washington	DC						

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? *(If NO, justify in item 22)*
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED? *(If YES, justify in item 22)*
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? *(If YES, check one box below and complete item 17B)* [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE. 0.445
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? *(If YES, justify in item 22)* IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: if item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED: A. INITIALS / B. DATE

22. REMARKS

23. EST. COST TO GOVERNMENT:
A. TOTAL COMMON CARRIER COST $ 347.70
B. TOTAL PER DIEM AND OTHER $ 510.75
C. TOTAL ESTIMATED COST $ 858.45

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

25. ADVANCE AUTHORIZED $ 0.00

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B
	2007	1000	WSW20							

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Pamela Williams - Director, SIWRO

27B. SIGNATURE *(PRESS FIRMLY, USE BALL POINT PEN)*: Pamela Williams

27C. DATE: 11/14/06

11/13/06 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.K2

Copyright 1989-2004 Gelco Information Network, Inc

|Bezdek, John (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			347.70
HOTEL TAXES-			50.00
LODGING-409			228.00
M&IE-409			160.00
MILEAGE-408			22.25
PARK-			40.00
TRAVEL AGENT-			10.50
SIWRO	0.00	0.00	858.45

Organization:
2007.1000.WSW20.....

TRAVEL AUTHORIZATION COVER SHEET

NAME OF TRAVELER: John Bezdek

DATES OF TRAVEL: December 13-15, 2006

PURPOSE AND LOCATION OF TRAVEL: Travel to Las Vegas with Counselor to negotiate final settlement for Soboba (12/13-14/06) and meet with the 5 Tribes involved the San Luis Rey Water settlement (12/13/06).

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL: The San Luis Rey settlement discussions also are extremely time sensitive with the potential dismissal of a pending FERC license application on 12/31/06, should these discussions fail. These two negotiation sessions have been scheduled back to back and in coordination with other IOS obligations to conserve funds.

ESTIMATED COST OF TRIP: $858.45

COSTS FOR THIS TRAVEL WOULD BE PAID BY (check one):

OS Travel Account

Bureau Travel Account _____

Name of Bureau: Bureau of Reclamation thru a RSA fm SIWRO

==========

OFFICE SURNAME: (Office Director must surname.) _____

For IOS Offices – Assistant Secretary or Office Director Approval/Date: _____

For PMB – DAS Approval/Date: _____

==========

APPROVAL:

This travel is: ☒ APPROVED ☐ NOT APPROVED

Signature: _____

Brian Waidmann, Chief of Staff/Tom Weimer, ASPMB

Solutions

Record Locator (PNR): JECORQ

Baltimore (BWI) to Denver (DEN)

Wednesday, Dec 13

UNITED
Flight 263
Coach
Boeing 757-200
Fare Rules

Departs	Arrives	Notes
Baltimore (BWI) Dec 13 6:00 AM	Denver (DEN) Dec 13 7:57 AM	non-stop flight 3:57 **Seat(s)** Passenger 1: 11A

Denver (DEN) to Las Vegas (LAS)

Wednesday, Dec 13

UNITED
Flight 1483
Coach
Fare Rules

Departs	Arrives	Notes
Denver (DEN) Dec 13 4:48 PM	Las Vegas (LAS) Dec 13 5:44 PM	non-stop flight 1:56 **Seat(s)** Passenger 1: 3F

Las Vegas (LAS) to Denver (DEN)

Friday, Dec 15

UNITED
(/United For Ted)
Flight 1644
Coach
Airbus 32S
Fare Rules

Departs	Arrives	Notes
Las Vegas (LAS) Dec 15 11:59 AM	Denver (DEN) Dec 15 2:48 PM	non-stop flight 1:49 **Seat(s)** Passenger 1: 1F

Denver (DEN) to Baltimore (BWI)

Friday, Dec 15

UNITED
Flight 208
Coach
Boeing 737-300
Fare Rules

Departs	Arrives	Notes
Denver (DEN) Dec 15 4:05 PM	Baltimore (BWI) Dec 15 9:20 PM	non-stop flight 3:15 **Seat(s)** Passenger 1: 3F

Details

Record Locator (PNR): JECORQ
Airline Confirmation1: UA-MSMC2V
Airline Confirmation2: null
Deliver To: John Bezdek
1849 C Street NW
Washington, DC20240
USA

Passenger Information

JOHN C BEZDEK
standard meal

Frequent Traveler Program
United (b) (6) [redacted]

Travel Agency Information

Travel Agency Information:
CW Government Travel, Inc.
1777 NE Loop 410
Suite 1001A
San Antonio, TX 78217

Toll-free 866-227-5638
Fax 877-834-3459

Monday Thru Friday 5:30am - 5:30pm

Seat Assignment

CI: JETRAN 12/13/06 10:31 PM
CO: JPARK 12/15/06 4:08 AM

Arrival Date: 12/13/06
Departure Date: 12/15/06

CAESARS PALACE
LAS VEGAS

3570 Las Vegas Blvd. South Las Vegas, NV 89109
FOR RESERVATIONS CALL 1-800-634-6661
702-731-7110

Name: **JOHN BEZDEK**
DEP OF THE INTERIOR

Address: 1849 C STREET N W
RM 2321
WASHINGTON DC WA 20420

Group Code: QCGOVT6

Casino ID:
Room #: RT 690

Resv ID: 390270140953
Folio ID: 390631287876

Page: 1

Date	Reference	Description	Charges	Credits	Balance
12/13/06	RT 690	ROOM CHARGE RT 690	100.00		
		TAX	9.00		109.00
12/13/06		APPLIED DEPOSIT (b) (6) [redacted]		109.00	
12/14/06	RT 690	ROOM CHARGE RT 690	100.00		
		TAX	9.00		109.00
12/14/06	0798832	BUSINESS CENTER	1.00		110.00
12/14/06	0798833	BUSINESS CENTER	50.00		160.00
12/15/06		FRONT DESK MASTERCARD (b) (6) [redacted]		160.00	
					.00

#109.00 — Room
tax 9.00 - Tax 4 Room

Thank You for Staying at Caesars Palace

Driver#_____ Cab#_____

To: CAESERS

From: Airport

Date: _____ Amount: $ 25.00

YELLOW-CHECKER-STAR
"THE" CAB COMPANIES
Las Vegas, Nevada
873-2227
COMPUTER RADIO DISPATCHED

DRIVER#_____ DATE_____
(CHARGE THE ACCT. OF)
(RECEIVED OF)_____

FOR TAXI FARE FROM_____

TO_____ $ 26.00

(X) DRIVER NAME_____

(X) PASSENGER SIGNATURE_____

L.A.X. AIRPORT PARKING
MAIN TERMINAL GARAGE
MARYLAND PARKING

Rcpt# 24970
12/15/06 16:23 LA16 AM 2 Txn#132602
12/13/06 04:48 In 12/15/06 16:23 Out
Fee ..... $ 58.20
Tolls Tax $ 1.80
Total Fee $ 60.00
MASTER CARD $ 60.00-
(b) (6) [redacted]
Approval No.: 007052
Reference No.: 34915023
Change Due $ 0.00
THANK YOU
HAVE A SAFE TRIP

CASINO CASH ATM

DATE TIME
12/15/06 04:03
1790093061122
CARD NUMBER
(b) (6) [redacted]

TRANSACTION

[redacted] CREDIT CARD CASH ADVANCE [redacted]
3487 $ 40.00
GLOBAL CASH ACCESS
TERMINAL FEE $ 4.00
TOTAL $ 44.00
AVAILABLE $ 0.00

3570 LAS VEGAS BLVD
LAS VEGAS NV

Think.
Be Responsible.
FOR INFORMATION ABOUT HELP FOR A GAMBLING PROBLEM, CALL
1-800-522-4700

To learn more about our company
please visit www.globalcashaccess.com

Business Center
Caesars Palace
Las Vegas, NV

12/14/2006 17:56

==========

Business Center

Check: 798832
Server: Judith M
Terminal: 79

==========

Regular Check

1 Incoming Faxes	1.00
Subtotal	1.00
Total	1.00
Room Charge RT690 BEZDEK,JOHN	1.00
GRAND TOTAL	1.00

==========

T79 C356816 12/14/2006 17:56

==========

TIP_____

Total_____

Room #_____

_____
Print Name

X_____
Signature

Appropriate Tax Applied
Thank You*

Business Center
Caesars Palace
Las Vegas, NV

12/14/2006 17:57

==========

Business Center

Check: 798833
Server: Judith M
Terminal: 79

==========

Regular Check

50 Incoming Faxes @ 1.00	50.00
Subtotal	50.00
Total	50.00
Room Charge RT690 BEZDEK,JOHN	50.00
GRAND TOTAL	50.00

==========

T79 C356816 12/14/2006 17:58

==========

TIP_____

Total_____

Room #_____

_____
Print Name

X_____
Signature

Appropriate Tax Applied
Thank You*

UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

Reimbursable Support Agreement
Fiscal Year 200 7

Parties to the Agreement

Customer Agency *(Paying Agency)*	Provider Agency *(Billing Agency)*
Bureau/Agency Name: DOI, Bureau of Reclamation	Bureau/Agency Name: DOI, OS, SIWRO
Address: 1849 C Street, NW Washington DC 20240	Address: 1849 C Street, NW MS 2321 Washington, DC 20240
Project Coordinator: Arlene R. Riley	Project Coordinator: J. Jamie Coaster-Barrington
Signature: Arlene Riley	Signature: J. Jamie Coaster-Barrington
telephone: 202.513.0629	telephone: (202) 219-1384

Accounting Data

Document Number: 07.02.91.DN014	Document Number: RA7W0156
Appropriation: 14X0680	Appropriation: 14 70102
Account Info: A10.1523.4000.400.00.0.1	Account Info: 1000DDR14 BR0156 68
Agency Location Code: 14X06-0905	Agency Location Code: 14-01-0001

Description and Cost of Goods and/or Services to be Provided

This agreement is to be accomplished on the following basis:
☒ Time and Materials ☐ Fixed Price

Description of Service: (Include time frame involved, estimated costs by object class and a brief description of the service. Attach additional backup data as needed.)

Travel to Las Vegas to negotiate final settlement for Soboba (12/13-12/14) and meet with the 5 tribes involved with the San Luis Rey Water Settlement. CRWUA support w/Secretary Kempthorne (12/15). Travel to include: Airfare, taxi, pov, per diem, ticket agent fee, airport parking, lodging, and lodging taxes. This travel is for John Bezdek 436411004.

Obligational Authority Available		
Until (date)	8-1-2007	
Initial or Current Amount	$	1,000.00
Amendment Number	#	
Amount	$	
New Total Amount	$	1,000.00

Approvals

CONDITIONS OF AGREEMENT: The Office of the Secretary is willing to enter into this agreement subject to the conditions stated on the second page of this form.

APPROVAL BY PAYING AGENCY	APPROVAL BY CUSTOMER AGENCY
Signature: Arlene Riley	Signature: Gary Weitzner
Date: 11/17/2006	Date: 11/21/06
Name: Arlene Riley	Name: Gary Weitzner
Title: Budget Officer / Program Analyst	Title: Budget Officer

This form was electronically produced by Elite Federal Forms, Inc.

DI-2017 (11/2001)

CENTRALLY BILLED ITEMS CHECKED WITH CARD TABLE

Agent Fee	26.00
Airfare	407.70
Lodging	160.00
Rental Car	
Gas	
Parking	Ø 60.00
Taxi / Shuttle	Ø
VXRF	
TAVD	

CHECKED JAN 22 2007

09:04:51 Thu Jan 18, 2007

ACTION: **R** SCREEN: **CARD** USERID: **FSDR**
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ
CARDHOLDER#: (b) (6) [redacted] CARDHOLDER: **BEZDEK, JOHN C**
INVOICE DATE: **12 19 2006** TRANSACTION#: **63521930575**
SEQ NUM: **005 OF 006** DOC NUM/LINE: **BC BC061219001 106** REVIEWED? **N**
==========< DETAIL PURCHASE INFORMATION >==========
PURCHASE DATE: **12 15 2006** PURCHASE AMOUNT: **160.00**
MERCHANT: **CAESARS HOTEL & CASINO** PURCHASE ADJUSTED: **0.00**
CITY/ST: **LAS VEGAS NV** BALANCE (DEFAULT): **160.00**
LAST REF#: **55541866351004055152590** MCC: (b) (6) [redacted] VENDOR CODE: **BANKAMER**
SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
000	**2007**		**9100**		**WAS60**		**XX**	**211D**

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
000									**0.00**

REF DOC NO/LINE: P/F: QUANTITY: **0.00** USER:
DESCRIPTION: ADJUST DATE: ADJ POST? **Y**

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?
02-*L009 HEADER CHANGE

U.S. Department of the Interior
OS TRAVEL
National Business Center – Denver
7401 W. Mansfield Ave. D-2730
Denver, CO 80235

Notice of Action Taken

John Bezdek
18 Dublin Dr.
Lutherville, MD 21093

Voucher Identification: SIWROFY07K2

Amount Claimed	Suspended	Disallowed	Allowed
$525.25		$287.00	$238.25
Tax Withheld	**Applied to Advance**	**Other**	**Amount of Check**
			$238.25

EXPLANATION:

1. **Disallowed $287.00** - This Notice of Action is to disallow the lodging, lodging taxes and "business center" charges claimed. Effective October 20, 2006, all lodging for OS and NBC is posted as centrally billed. OS and NBC travelers will no longer be reimbursed for lodging charged to their Government charge card. If you paid for this lodging with a personal credit card or personal funds, you may submit a reclaim voucher, along with a copy of your receipt that shows how the lodging was paid for.

*Please direct any inquiries to Rebekah Beatty 303-969-5689

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE:	REVIEWING TECHNICIAN	DATE: January 18, 2007

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	N

Julian Date	Prep Unit	Sequence Number
018	RB	1

Batch Totals

Input Date	Number of Documents	Net Total (Required)
1/18/07	3	627.58

System Checked By: RB Date 1/18/07

Batch Approval

Approved By: Jm

Date Approved: 1-19-07

CHECKED JAN 22 2007

759790

TRAVEL VOUCHER (Read Privacy Act Statement on the back)	1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Office of Secretary	2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION	3. VOUCHER NO.: BOGERT3
			4. SCHEDULE NO.

5.			
a. NAME (Last, first, middle initial): Bogert, Michael	b. SOCIAL SECURITY NO.: (b) (6) [redacted]	6. PERIOD OF TRAVEL: a. FROM 10/07/2006	b. TO 10/10/2006
c. MAILING ADDRESS (Include ZIP Code): Direct Deposit	d. OFFICE TELEPHONE NO.: 202/208-4123	7. TRAVEL AUTHORIZATION: a. NUMBER(S) BOGERT3	b. DATE(S) 10/13/2006
e. PRESENT DUTY STATION: Washington, DC	f. RESIDENCE (City and State): (b) (6) [redacted]	10. CHECK NO.	

8. TRAVEL ADVANCE		9. CASH PAYMENT RECEIPT		11. PAID BY
a. Outstanding	0.00	a. DATE RECEIVED	b. AMOUNT RECEIVED $	Document ACCEPTED OCT 30 2006
b. Amount to be applied	0.00			
c. Amount due Government (Attached [ ] Check [ ] Cash)		c. PAYEE'S SIGNATURE		
D. Balance outstanding				

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
UA-002770174 31	263.20	UA		10/06/2006	Wash/Reagan	Portland, OR
Same Ticket	0.00			OCT 19 2006	Portland, OR	Wash/Reagan Airport

COMMENTS:
Trip Number 1 NOTE: No lodging per diem or M&IE were claimed for Sunday, October 8 or Monday, Oct. 9 even though Mr. Bogert was participating in the Cooperative Conservation Listening Session in Boise, Idaho, on Monday, October 9. Mr. Bogert's personal check in the amount of $92.97 made payable to DOI is attached to reimburse the Federal Government for use of the rental car on October 8 and 9.
COMMENTS continued on next page

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE October 18, 2006 AMOUNT CLAIMED ▶ 267 50 / - 10 40* / $257 10

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ [signature] DATE

17. FOR FINANCE OFFICE USE ONLY

a. DIFFERENCES, IF ANY (Explain and s... amou...)

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION — Certifier's initials: $ 10/26/06

c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $

d. NET TO TRAVELER ▶ $ 257.10

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION
SIO/A-2006.1000DD01 68..... - NR- 402.66 *SEE NOTE ON PAGE 2

TRAVEL VOUCHER
(b) (6) [redacted]
Bogert, Michael

TRAVEL AUTHORIZATION NUMBER(S)/DATE(S)
BOGERT3 10/13/2006

COMMENTS: (cont'd)

NOTE: Mr. Bogert received a credit of $10.40 on his BOA statement for hotel taxes in Redmond, OR, on 8/21. Since that amount was already claimed for reimbursement on a previous voucher, $10.40 has been deducted from the amount claimed on this voucher.

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES TRIP# 1

TRAVEL AUTHORIZATION NO. BOGERT3

TRAVELER'S LAST NAME Bogert

DATE 20 06 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.000 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
10/07	6:00A	D-:WASH/REAGAN AIR											
10/07		Airline Flight						94.00	130.75			130.75	Cash
10/07	10:33A	A-:PORTLAND,OR				36.75							50.00
10/07		Taxi - Cash											
10/08		Subsistence											Cash
10/09		Subsistence											
10/10	11:33P	D-:PORTLAND,OR											
10/10		Airline Flight											50.00
10/10		Taxi - Cash											
10/10		Rental Car - Govcc											
10/10	11:33P	A:WASH/REAGAN AIRP							36.75			36.75	
10/10		Subsistence				36.75							
									SUBTOTALS ▶		0.00	167.50	100.00
									TOTALS ▶		0.00	167.50	100.00

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 267.50

STANDARD FORM 1012 BACK (10-77)

= 10.40

J. MICHAEL ROGERT
(b) (6) [redacted]

1983

OCT 13, 2006

92-379/1241.3144
5535938079

Date

Pay to the Order of DOI $ 92.97

Nty-Two and 97/100 Dollars

Security Features Details on Back.

WELLS FARGO
Wells Fargo Bank, N.A.
Idaho
wellsfargo.com

For
(b) (6) [redacted]

MP

CENTRALLY BILLED ITEMS
CHECKED ON CARD TABLE

AIRFARE 263.20 fee 24.50

RENTAL CAR_____

GAS _____

PARKING _____

TAXI/ SHUTTLE_____

CHARGES NOT ON CARD TABLE _____

CREDIT CARD NOT ON CARD TABLE_____

INCORRECT CARD NUMBER ON TABLE_____

CHECKED VXRF _____

CHECKED TADV_____

CHECKED NOV 0 1 2006

U.S. Department of the Interior
Office of the Secretary
1849 C Street, NW
Washington, DC 20240

Phone: (202) 208-4123
Fax: (202) 208-4561

Date: 10/27/06
Number of Pages (including cover): 3

To: Michelle Jackson
Office: NBC - Denver
Fax: 303/969-6681
Phone: ~~Doris Johnston~~ - assistant to:
From: Michael Bogert, Counselor to the Secretary

Message:

NOTICE OF CONFIDENTIALITY: This transmission is intended only for the addressee listed above. It may contain information that is privileged or otherwise protected from disclosure. Any review, dissemination or use of this transmission or its contents by persons other than the above listed addressee(s) is strictly prohibited. If you have received this transmission in error, please notify us immediately by telephone and return the original document by mail. Thank you.

UNITED STATES
EPARTMENT OF THE INTERIOR
FORM NO. DI-1020
ORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 6, 1949

TRAVEL AUTHORIZATION

1. No. BOGERT
2. 09-28-2006 (DATE)

3. Office of the Secretary (BUREAU OR OFFICE)

. NAME L. Michael Bogert SSN: (b) (6) [redacted]

5. OFFICIAL STATION Washington, DC

. TITLE Counselor to the Secretary

7. ACCOUNTING OFFICE Washington, DC

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and egulations.

PLACES OF TRAVEL

. FROM: Washington, DC
. TO: Portland, Oregon, to Boise, Idaho, and return to Portland and back to DC

10. PURPOSE AND REMARKS:

Mr. Bogert is traveling to Portland, Oregon, to speak at the Lower Columbia River Estuary Partnership Annual Dinner on Saturday, Oct. 7. He plans to leave Portland on Sunday, Oct. 8 to travel to Boise, Idaho, to attend the Cooperative Conservation Listening Session on Monday, October 9. The Federal Government is paying for the travel from DC to Portland and return DC. Mr. Bogert will pay for the travel from Portland to Boise and return Portland. No lodging will be claimed in Boise -- Mr. Bogert will stay with friends.

The travel expenses in connection with the speaking engagement in Portland, Oregon, will be charged to the FWS through a reimbursable agreement that is already in place.

11. PER DIEM ALLOWANCE:

Per diem allowance is authorized in accordance with Federal Travel Regulations as issued by GSA and published in the Federal Register.

12. PERIOD OF TRAVEL: Beginning on or about 10-07-2006 Ending on or about 10-10-2006

MODE OF TRAVEL

13. X Common carrier
14. [ ] Extra fare
15. [ ] Government-owned conveyance
16. X Privately owned at a mileage rate of cents, subject to:
   (a) XX Administratively determined to be the advantage of the Government
   (b) [ ] A showing of advantage to the Government
   (c) [ ] Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. Transportation immediate family
18. XX Other *(specify)*
Taxi fares, phone calls, faxes, etc. in accordance with FPMR 101-7, et.seq.
rental car
19. [ ] Shipment household goods and personal effects

ESTIMATED COST

20. Transportation	$	263.50
21. Per Diem		167.50
22. Other		100.00
23. TOTAL	$	531.00

24. CHARGED TO:
2007 1000 DD D01

25. (FISCAL OFFICER'S SIGNATURE)

26. (REQUESTER'S SIGNATURE)

27. Counselor to the Secretary (TITLE)

28. (AUTHORIZING OFFICER'S SIGNATURE)

29. Chief of Staff (TITLE)

This form was electronically produced by Elite Federal Forms, Inc.

Lower Columbia River Estuary Partnership

811 SW Naito Parkway, Suite 120, Portland, Oregon 97204-3330

Taxpayer Identification Number (b) (6) [redacted]

→ INVOICE←

Bill To: L. Michael Bogert
ATTN: Doris Johnston
1849 C Street NW
Washington, DC 20240

Invoice Date: 9/27/06
Invoice Due Date: 10/27/06

Invoice Number: FY07-42

Description	Qty.	Rate/Cost	Total Expense
Hilton Hotel Reimbursement for Lower Columbia River Estuary Partnership - October 7, 2006			$94.00
Sub Total			**$94.00**
Total Invoice Amount			**$94.00**

Thank You!

TRANSACTION REPORT

OCT-27-2006 FRI 09:20 AM

FOR: DOI-OS-DENVER 303 969 6631

RECEIVE

DATE	START	SENDER	RX TIME	PAGES	TYPE	NOTE	M#	DP
OCT-27	09:20 AM		31″	3	FAX RX	OK		

ACTION: **R** SCREEN: **SALT** USERID: **NBCJ**

*** SUBALLOTMENT INQUIRY TABLE ***

KEY IS BFYS, FUND, DIVISION, ORG, PGM, BOC

BFYS: **2007** FUND: **DM** DIVN: **O** ORG: **1000** PGM: **DDD01** BOC: **OTH**

STATUS IND: **A** SPENDING CONTROL OVR: BUDGETED FTES/QTY: **0**

APPROVED IND: **Y** POST QTR: **1** TRANS TYPES - PENDING: APPROVED: **AP** POSTED: **PT**

APPROVED SUBALOT AMT: **31,000.00** YTD SUBALOT AMT: **31,000.00**

YTD UNLIQ COMM AMT: **0.00** AVAILABLE AMT: **4,762.78**

YTD UNLIQ OBLG AMT: **0.00** EXPENDED AMT: **26,237.22**

DESCRIPTION: **SECRETARY S IMMEDIATE OFFICE**

EST REIM TC/TT: **BT** EST REIM AMT: **0.00**

ACT REIM AMT: **0.00** UNDISTRIB EST REIM: **0.00**

QTR	ORIGINAL SUBALLOT AMT	PENDING SUBALLOT AMT	APPROVED SUBALLOT AMT	ALLOCATED AMT
1	31,000.00	0.00	31,000.00	0.00
2	0.00	0.00	0.00	0.00
3	0.00	0.00	0.00	0.00
4	0.00	0.00	0.00	0.00

QTR	UNLIQ COMM AMT	UNLIQ OBLG AMT	EXPENDED AMT	UNALLOCATED AMT
1	0.00	0.00	26,237.22	31,000.00
2	0.00	0.00	0.00	0.00
3	0.00	0.00	0.00	0.00
4	0.00	0.00	0.00	0.00

Department of the Interior

OS

Office of the Secretary
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	N

Julian Date	Prep Unit	Sequence Number
300	OCJ	6

Batch Totals

Input Date	Number of Documents	Net Total (Required)
10/24/06	3	11 1006

System Checked By: _____ Date _____

Batch Approval

Approved By: _____

Date Approved: _____

CHECKED NOV 01 2006

0000343777 O

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE
OS/SIO

2. TYPE OF TRAVEL
☒ TEMPORARY DUTY TV
☐ PERMANENT CHANGE OF STATION

3. VOUCHER NO. 05-21-07-CA
4. SCHEDULE NO.

5. a. NAME *(Last, first, middle initial)*
HASPEL, ABRAHAM E.

b. SOCIAL SECURITY NO.
(b) (6) [redacted]

c. MAILING ADDRESS *(Include ZIP Code)*
(b) (6) [redacted]

d. OFFICE TELEPHONE NO.
202-208-7471

e. PRESENT DUTY STATION
Washington, DC

f. RESIDENCE *(City and State)*
(b) (6) [redacted]

6. PERIOD OF TRAVEL
a. FROM 05/21/2007 b. TO 05/25/2007

7. TRAVEL AUTHORIZATION
a. NUMBER(S) TA-07OHTA10
b. DATE(S) 05/25/2007

10. CHECK NO.

11. PAID BY

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government *(Attached ☐ Check ☐ Cash)*
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

Document ACCEPTED JUN 12 2007

OCT JUL 16 PM 12:1

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7). ▶ *Traveler's Initials* AM

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	984.80	UA	05/18/2007	IAD-Washington,	DuSFO-San Francisco A
					243.00

COMMENTS:
Trip Number 1 FYI. Traveler moved his return flight up to an earlier flight, Flight #220, Leaving San Francisco Airport arriving at Washington, Dulles at 12:04 a.m.

BM

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ AE Haspel DATE 5/29/07 **AMOUNT CLAIMED** ▶ 288.00

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ DATE 6/4/07

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* OVER 1.5 MI + TE $ (45.00)

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):* $ 0.00

d. **NET TO TRAVELER** ▶ $ (243.00)

6-7-07 AM

18. ACCOUNTING CLASSIFICATION
~~OHTA-2007.1060OTX01M6~~ ..... - 288.00 NR- 1,826.26
SIO-2007 1000 DD001 68 TOL-I

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel

- *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.
- *(h)* Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).
- *(i)* Complete for per diem and actual expense travel.
- *(j)* Show total subsistence expense incurred for actual expense travel.
- *(m)* Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
- *(n)* Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. TA-07OHTA10

TRAVELER'S LAST NAME HASPEL

MILEAGE RATE: 0.000

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	BREAKFAST (d)	LUNCH (e)	DINNER (f)	MEALS TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
05/20		Misc.											
05/21	6:45A	D-:RES: Annandale,											
05/21		Airline Flight											
05/21	11:25A	A-:SAN FRANCISCO,C				48 00		107 00	48.00			48 00	
05/21		Rental Car - Govcc											
05/21		Ticket Agent Fee											
05/22		Subsistence				64 00		107 00	64.00			64 00	
05/23		Subsistence				64 00		107 00	64.00			64 00	
05/23		Ticket Agent Fee											
05/24	3:57P	D-:SAN FRANCISCO,C											
05/24		Fuel-Rental/GovCar-Govcc											
05/24		Subsistence				64 00			64.00			64 00	
05/25	1:00A	A:RES: Annandale,V											
05/25		Subsistence				48 00			48.00			48 00	
										SUBTOTALS	0 00	288 00	0 00
										TOTALS	0 00	288 00	0 00

48• +
48• +
64• +
64• +
64• +
288• *

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requiremen employee, t formance o Account N Revenue C 1943, for u is MANDA expense re you SSN a however, support the claim may result in delay or loss of reimbursement. ring of an of the per- ial Security he Internal ovember 22, ; disclosure allowance sclosure of instances; required to

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 288.00

216.00

STANDARD FORM 1012 BACK (10-77)

05/29/07 ACCOUNTING DETAIL |Doc No: 05-21-07-CA

Copyright 1989-2004 Gelco Information Network, Inc

|HASPEL, ABRAHA (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			984.80
FUEL-GOVCC-			21.01
LODGING-409			321.00
M&IE-409			288.00
MISC EXPENSE-409			180.00
RENTAL CAR-409			264.01
TRAVEL AGENT-			55.44
OHTA	0.00	0.00	2,114.26

Organization:
2007.1060OTX01M6.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		2,114.26
NON-REIMBURSABLE EXPENSES		1,826.26
TOTAL AMOUNT CLAIMED		288.00
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		288.00
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		288.00

U.S. DEPARTMENT OF THE INTERIOR
ABRAHAM E. HASPEL, PH.D.
ASSISTANT DEPUTY SECRETARY

Menlo park - to chair Climate Change Subcommittee on Land + Water Managment.

cash advance - no fee

5/21 leave home 6:45 A
UA 871 to SFO
Hotel $107
per diem

5/22 Hotel $107
per diem

5/23 Hotel $107
per diem

5/24 per diem $264.01
rental car — $21.01
fuel
UA 220 to IAD

(over)

Bank of America

Bank of America

USA

Official Sponsor
2004-2008 U.S. Olympic Teams

For Customer Service call
1-800-432-1000

KEEP THE CHANGE (TM) HELPS YOU SAVE
bankofamerica.com/aboutktc

05/20/07 16:33 WVAN0622

(b) (6) [redacted]
*TURNPIKE
FAIRFAX VA

Ser. No. 3769
Credit Card Advance $180.00
From CREDIT CARD

KEEP THE CHANGE (TM) HELPS YOU SAVE

Every time you use a
Bank of America Visa (R) Check Card
for everyday purchases,
you save automatically.

www.bankofamerica.com
95-32-2889B 06-2006
A4596764

* You buy a cappuccino for $3.43
* We round that up to $4.00
* That 57 cents is transferred
from your checking
into your savings

Bank of America

USA

Official Sponsor
2004-2008 U.S. Olympic Teams

To grow your savings, enroll online at
Bankofamerica.com/aboutktc

AVIS® We try harder®

TRANSACTION RECORD

RENTAL NUMBER	CAR NUMBER	CAR GROUP
177654481	9950813	V

HASPEL, ABRAHAM E
WIZ = Y7T57F AWD = A555500
CV - (b) (6) [redacted]
FTN UA/03029547741 KX

* Please check your car for personal effects. *

OUT SFO 21MAY07/1210 MI	=	9924
IN SFO 24MAY07/1325 MI	=	10029
105 MI@ .30	=	
1 HR@ 25.51	=	25.51
3 DY@ 51.00	=	153.00
**11.11% FEE	=	22.59
**VLF FEE	=	4.84
FTP SR$.50DY$2MX	=	1.50
TAXABLE SUBTOT	=	207.44
TAX 8.250%	=	17.11
GARS $ 5.00/DAY	=	20.00
#2.5% TAF	=	4.46
* $15.00/RENTAL	=	15.00
* TOTAL CHARGES	=	264.01

**CONCESSION RECOVERY FEE
* TRANSP & FAC FEE
#2.5% TOURISM ASSMT FEE
**VEH LICENSE FEE$1.21/DY
FF MLS/PNTS EARNED 150

Thank you for renting from Avis.
We value your business. Have a safe trip.
[redacted]

ARSH ROAD CHEVRON
110 MARSH RD.
ENLO PARK, CA
TN 00206855

5/24/07 13:21:27

CFLEET
(b) (6) [redacted]
nvoice# [illegible]
uth# 238686

ump#: 4
5.803 3 0 $ 3.[illegible]
nle/Self $ 21.21

otal $ 21.21

Tell us about
your shopping
experience by
logging onto
Survey.Chevron.com

HANK YOU FOR

Holiday Inn EXPRESS

Abraham Haspel **1849 C St** **Washington, DC 20240** US	A/R Number Group Code DOI Folio/Invoice No. 3476 / Reference #

Room No.	**219**	Page No.	1 of 1
Arrival	05-21-07	Cashier No.	107
Departure	05-24-07	User ID	JADIRAS

www.hiexpress.com/rwcca

Date	Description	Charges	Credits
05-21-07	*Accommodation	107.00	
05-22-07	*Accommodation	107.00	
05-23-07	*Accommodation	107.00	
05-24-07	MasterCard (b) (6) [redacted]		321.00
	Total	**321.00**	**321.00**
	Balance	0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

SAN MATEO CO ✓

98/54

107/54

Holiday Inn Express Redwood City Central
1836 El Camino Real
Redwood City, CA 94063
Telephone: (650) 299-0909 Fax: (650) 299-0907

~5818550

YOUR CARLSON WAGONLIT CONFIRMATION CODE IS LSATSM

SALES PERSON: AN
CUSTOMER NBR: (b) (6) [redacted]

ITINERARY
DATE: 03 MAY 07
LSATSM PAGE: 01

TO: DOI

FOR: [redacted]

YOUR ESTIMATED AIRFARE ON 01MAY AT 1532 IS 984.80

21 MAY 07 - MONDAY

AIR	UNITED AIRLINES	FLT:871	ECONOMY	FOOD FOR PURCHASE
	LV WASHINGTON DULLES		849A	EQ: BOEING 777
				05HR 36MIN
	AR SAN FRANCISCO		1125A	NON-STOP
	ARRIVE: TERMINAL 3			REF: N4QNTO
	HASPEL/ABRAHAM	SEAT-23G	UA-03029547741	
HOTEL	SAN FRANCISCO		HOLIDAY INN	
	HI HOLIDAY INN EXP REDWOOD		3 NIGHTS OUT-24MAY	
	1836 EL CAMINO REAL		1 ROOM	
	REDWOOD CITY CA 94063		RATE-107.00 PER NIGHT	
	FONE 1-650-299-0909/		GUARANTEED LATE ARRIVAL	
	CONFIRMATION 61484298			
OTHER	SAN FRANCISCO			
	HOTEL GUARANTEED CANCEL 24 HOURS PRIOR TO DATE OFARRIVAL			
	TO AVOID BILLING			

24 MAY 07 - THURSDAY

AIR	UNITED AIRLINES	FLT:224	ECONOMY	FOOD-BEV/PUR
	LV SAN FRANCISCO		1108P	EQP: AIRBUS A319
	DEPART: TERMINAL 3			05HR 07MIN

25 MAY 07 - FRIDAY

	AR WASHINGTON DULLES		715A	NON-STOP
				REF: N4QNTO
	HASPEL/ABRAHAM	SEAT-24C	UA-03029547741	

20 NOV 07 - TUESDAY

OTHER INFORMATION

THANK YOU FOR CALLING CARLSON WAGONL

flight was changed / moved up to flight # 220, departing San Francisco, CA @ 3:59 PM, Arriving at Washington, Dulles @ 12:04 a.m.

FOR: HASPEL/ABRAHAM E

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CAR DECLINED/A//01MAY

~5818550

LODGING DECLINED//01MAY
ECONOMY PLUS SEATS TAKEN ON RETURN FLIGHT
CANCEL HOLIDAY INN 24 HOURS PRIOR TO ARRIVAL TO AVOID
PENALTIES TO YOUR CREDIT CARD

Carlson Wagonlit Travel - Local Presence, Global Power

Monday May 21, 2007

Other Service
May 21, 2007 - May 21, 2007
Departure City: SAN FRANCISCO/SFO
HOTEL GUARANTEED CANCEL 24 HOURS PRIOR TO DATE OF ARRIVAL T
O AVOID BILLING

Thursday May 24, 2007

United Airlines
Class of Service: Coach Class U
Depart: SAN FRANCISCO/SFO
Arrive: WASHINGTON/DULLES
Total Flight Time:
Equipment: 319
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 8E
Frequent Flyer Number:
DEP-TERMINAL 3
STAR ALLIANCE

Flight Number: 220

3:57 Pm May 24, 2007
12:04 Am May 25, 2007
5 Hours 7 Minutes Non-Stop

Confirmation Number: N4QNTO

(b) (6) [redacted] HASPEL/ABRAHAM E

Tuesday November 20, 2007

Other Service
Nov 20, 2007 - Nov 20, 2007
INFORMATION/THANK YOU FOR CALLING CARLSON WAGONL

Name	Invoice / Ticket	Base	Tax1	Tax2	Tax3	Total
HASPEL ABRAHAM E	2583/1966651283	27.72				27.72
HASPEL ABRAHAM E	2582/0167035340410	448.37USD	33.63US	3.40ZP	7.00XT	492.40
HASPEL ABRAHAM E	422097/0167047752309	896.74USD	67.26US	6.80ZP	14.00XT	984.80
HASPEL ABRAHAM E	422097/1966974108	27.72				27.72
					Total Amount:	1,532.64

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CAR DECLINED/A//01MAY
LODGING DECLINED//01MAY
ECONOMY PLUS SEATS TAKEN ON RETURN FLIGHT
CANCEL HOLIDAY INN 24 HOURS PRIOR TO ARRIVAL TO AVOID
PENALTIES TO YOUR CREDIT CARD
TICKETS WILL BE ISSUED TO INDIVIDUAL GOVT CREDIT CARD
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.
.....REFUND INFORMATION.....

Carlson Wagonlit Travel

May 21, 2007

For: ABRAHAM E HASPEL

To: DOI

Sales Person: AN
Locator: LSATSM
Customer Number: (b) (6) [redacted]

THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.
YOUR AIRFARE ON 21MAY AT 1034 IS 492.40

Monday May 21, 2007

United Airlines
Class of Service: Coach Class U
Depart: WASHINGTON/DULLES
Arrive: SAN FRANCISCO/SFO
Total Flight Time:
Equipment: 777
Meal Service: Available For Purchase
Status: Confirmed
Reserved Seat: HASPEL/ABRAHAM E 23G
Frequent Flyer Number:
ARR-TERMINAL 3
STAR ALLIANCE

Flight Number: 871

8:49 Am May 21, 2007
11:25 Am May 21, 2007
5 Hours 36 Minutes Non-Stop

Confirmation Number: N4QNTO

(b) (6) [redacted] HASPEL/ABRAHAM E

Monday May 21, 2007

AVIS
Pick Up: May 21, 2007 11:25 Am

Return: May 24, 2007 11:08 Pm
Daily Rate: 51.00 USD
Unlimited Free Miles
Confirmation Number: 46932840US3PEXP
Membership Number: (b) (6) [redacted]
Supplemental Information: BA-MDITOMA

Intermediate Car
Location: SAN FRANCISCO/SFO
SAN FRANCISCO/SFO

Extra Days: 51.00 Extra Hours: 26.00

Monday May 21, 2007

SAN FRANCISCO/SFO
HOLIDAY INNS HOLIDAY INN EXP REDWOOD
1836 EL CAMINO REAL
REDWOOD CITY CA 94063
Phone Number: 1-650-299-0909
Number of Rooms: 1
Rate: 107.00 Per Night
Check In: May 21, 2007
Check Out: May 24, 2007
CF-61484298

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 8, 1949

TRAVEL AUTHORIZATION

1. No. TA-07OHTA10
2. 10-01-2006 (DATE)

3. Office of Historical Trust Accounting (BUREAU OR OFFICE)

4. NAME Abraham E. Haspel 072-42-6264
5. OFFICIAL STATION Washington, DC
6. TITLE Assistant Deputy Secretary
7. ACCOUNTING OFFICE Washington, DC

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Washington, DC
9. TO: All places in the contiguous United States , Alaska, Hawaii, Puerto Rico, and the Virgin Islands as may e required and returned.

10. PURPOSE AND REMARKS:

To conduct official business, as may be required. I certify that the travel herein was reviewed and determined to be essential for the accomplishment of departmental programs and missions. Payment from a non Federal source for travel related expenses is authorized under 31 USC 1353 provided that prior to acceptance the conditions for each case comply with 41 CFR 304-1.

11. PER DIEM ALLOWANCE:

Per diem or actual subsistence within a high cost area is authorized in accordance with Federal Travel Regulations as issued by GSA and published in the Federal Register.

12. PERIOD OF TRAVEL: Beginning on or about 10-01-06 Ending on or about 09-30-07

MODE OF TRAVEL

13. X Common carrier
14. X Extra fare
15. X Government-owned conveyance
16. X Privately owned at a mileage rate of .445 cents, subject to:
   - (a) X Administratively determined to be the advantage of the Government
   - (b) X A showing of advantage to the Government
   - (c) X Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. Transportation immediate family
18. X Other *(specify)*
   Rental Car, Excess baggage, Taxi fares, Telephone calls, Conference Room and Facilities, in accordance with FTR-101-7
19. Shipment household goods and personal effects

ESTIMATED COST

20. Transportation _____ $
21. Per Diem _____
22. Other _____
23. TOTAL _____ $ 25,000.00
24. CHARGED TO:
   OHTA 1060-OTX-01 M6
25. _____ (FISCAL OFFICER'S SIGNATURE)

26. A.E. Haspel (REQUESTER'S SIGNATURE)
27. Assistant Deputy Secretary (TITLE)
28. James E Cason (AUTHORIZING OFFICER'S SIGNATURE)
29. Associate Deputy Secretary (TITLE)

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

HNPOL, ABRAHAM E

AIR 984.80 492.40 (492.40)

AGENT FEE 27.72 27.72

LODGING 322.00

RENTAL CAR 264.01

GAS 21.01 (1.21)

PARKING

TAXI / SHUTTLE 54.00

VXRF checked

CHECKED JUN 12 2007

U .S. Department of the Interior

Notice of Action Taken

National Business Center - Denver
7401West Mansfield Ave. D-2777
Denver, CO 80235 – 2230

Abraham E. Haspel
(b) (6)
[redacted]

VOUCHER NUMBER 05-21-07-CA			
Amount Claimed	**Suspended**	**Disallowed**	**Allowed**
$288.00		$45.00	$243.00
Tax Withheld	**Applied to Advance**	**Under Claimed**	**Amount of Check**
			$243.00

EXPLANATION:

1. **Disallowed $45.00** – The allowable M & IE rate per day for Redwood City, San Mateo County, CA is $54.00.

Please direct any inquiries to Bradley Rarick 303-969-5484

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE:	REVIEWING TECHNICIAN	6/12/2007
Bradley a Rarick		

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	0

Julian Date	Prep Unit	Sequence Number
158	BR	A

Batch Totals

Input Date	Number of Documents	Net Total (Required)
7 JUN 07	5	953.45

System Checked By: BAK Date 7 JUN 07

Batch Approval

Approved By: Jm

Date Approved: 6-12-07

CHECKED JUN 12 2007

216.+
117.+
247.7+
148.75+
224.+
953.45 *

Jan 16 07 08:16a Robert Laidlaw 916 978-4659 p.2
01/16/2007 10:57 2022084867 DOI POLICY ANALYSIS PAGE 03/15

TPT Attached

SIWROFY07M4

TRAVEL VOUCHER (Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Ofc of the Secretary

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: SIWRO.FY07.M4

4. SCHEDULE NO.:

5. a. NAME (Last, first, middle initial): Laidlaw, Robert M.

b. SOCIAL SECURITY NO.: [redacted] (b) (6)

6. PERIOD OF TRAVEL: a. FROM 12/10/2006 b. TO 12/14/2006

c. MAILING ADDRESS (Include ZIP Code): P.O. Box 1970, Shingle Springs, CA 95682

d. OFFICE TELEPHONE NO.: (916) 978-4643

7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWRO.FY07.M4 b. DATE(S) 11/14/2006

e. PRESENT DUTY STATION: Sacramento, CA

f. RESIDENCE (City and State): [redacted] (b) (6)

10. CHECK NO.:

11. PAID BY: TDT-13

07 JAN 18 PM 2:19

8. TRAVEL ADVANCE
a. Outstanding 0.00
b. Amount to be applied 0.00
c. Amount due Government (Attached [ ] Check [ ] Cash)
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

Document ACCEPTED JAN 24 2007

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	488.59			SMF-Sacramento Sacramento, CA	AirIAD-Washington, Las Vegas, NV
See Attached Ticket 2	257.10				

1/22/07 - Left msg. for Bob. Please send orig. sig.

Traveler has a BLM-issued charge card. BLM does not centrally-bill lodging/taxi/parking, etc. Therefore, traveler should be reimbursed.

COMMENTS:
Trip Number 1 Travel paid thru RSA from SIWRO to Bureau of Reclamation attached.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 1/16/07 AMOUNT CLAIMED ▶ 1040.93

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287, Ind. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ Pamela Williams Director DATE SIWRO 1/16/07

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION
a. DIFFERENCES, IF ANY (Explain and show amount) $ <14.00>
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION Certifier's Initials: $
c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol): $ 0.00
d. NET TO TRAVELER ▶ $ 1040.93

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION
BOR/SIWRO-2007.1000 DDR14.BR0155 68..... - 1,040.93 NR- 770.19

1026.93

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

1/22/07 VS

1/19/07 - Spoke to Robert, told him we needed a orig signature - faxed copy - will be sending in mail 916-978-4659

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

188/164

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. SIWRO.FY07.M4

TRAVELER'S LAST NAME Laidlaw

DATE 2006 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.445 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
12/10	4:30A	D-:RES: Shingle Sp											
12/10	3:00P	A-:WASHINGTON,DC				48 00		188 00	236.00			236 00	
12/10		Private Vhcle								56	24 92		
12/10		Taxi - Cash											65 00
12/11		Airline Flight											
12/11		Subsistence				64 00		188 00	252.00			252 00	
12/11		Airport Parking GVCC CBill											28 00
12/11		Ticket Agent Fee											
12/12	6:00P	D-:WASHINGTON,DC											
12/12	10:00P	A-:SACRAMENTO,CA				44 25			44.25			44 25	
12/12		Private Vhcle								56	24 92		
12/12		Taxi - Cash											70 00
12/13	4:00P	D-:SACRAMENTO,CA											
12/13		Airline Flight											
12/13	6:00P	A-:LAS VEGAS,NV				48 00		114 00	162.00			162 00	
12/13		Private Vhcle								56	24 92		
12/13		Taxi - Cash											15 00
12/13		Parking-cash (non-airport)											12 00
12/13		Taxes for Lodging											9 00
12/14	4:00P	D-:LAS VEGAS,NV											
12/14		Private Vhcle								56	24 92		
12/14	6:00P	A:RES: Shingle Spr											
12/14		Subsistence				48 00			48.00			48 00	
									SUBTOTALS ▶		99 68	742 25	199 00
									TOTALS ▶			1287.25	

188/164 · 114/164 · 114.00 · 48 · 114 00 · 114 00 · 14 00

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)*: Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet TRIP#

PAGE 3 OF 1 PAGES

TRAVEL AUTHORIZATION NO. SIWRO.FY07.M4

TRAVELER'S LAST NAME Laidlaw

MILEAGE RATE: 0.45

DATE 20 06 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
									SUBTOTALS ▶		0 00	0 00	0 00
									TOTALS ▶		99 68	742 25	199 00

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 1,040.93

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

TRAVEL VOUCHER
(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT, BUREAU, DIVISION OR OFFICE: Ofc of the Secretary

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: SIWRO.FY07.M4

4. SCHEDULE NO.:

3. a. NAME (Last, first, middle initial): Laidlaw, Robert M.

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

c. MAILING ADDRESS (Include ZIP Code): P.O. Box 1970, Shingle Springs, CA 95682

d. OFFICE TELEPHONE NO.: (916) 978-4643

5. PERIOD OF TRAVEL: a. FROM 12/10/2006 b. TO 12/14/2006

7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWRO.FY07.M4 b. DATE(S) 11/14/2006

e. PRESENT DUTY STATION: Sacramento, CA

f. RESIDENCE (City and State): (b) (6) [redacted]

10. CHECK NO.:

11. PAID BY:

8. TRAVEL ADVANCE
a. Outstanding $ 0.00
b. Amount to be applied $ 0.00
c. Amount due Government (Attached [ ] Check [ ] Cash) $
D. Balance outstanding $

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's initials

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	488.59			SMF-Sacramento Air	IAD-Washington,
See Attached Ticket 2	257.10			Sacramento, CA	Las Vegas, NV

Traveler has a BLM-issued charge card. BLM does not centrally-bill lodging/taxi/parking, etc. Therefore, traveler should be reimbursed.

COMMENTS:
Trip Number 1 Travel paid thru RSA from SIWRO to Bureau of Reclamation attached.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ DATE 1-16-07 AMOUNT CLAIMED ▶ 1040.93

original signature

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287, id. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ Pamela Williams Director SIWRO DATE 1/16/07

17. FOR FINANCE OFFICE USE ONLY COMPUTATION
a. DIFFERENCES, IF ANY (Explain and show amount) $
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION (Certifier's initials) $
c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol) $ 0.00
d. NET TO TRAVELER ▶ $ 1040.93

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO. b. D.D. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION
BOR/SIWRO-2007.1000 DDR14.BR0155 68..... - 1,040.93 NR- 770.19

NATIONAL BUSINESS CENTER
2007 JAN 22 PM 10:47
DOI

MEMO

ROBERT M. LAIDLAW
SENIOR POLICY ANALYST
OFFICE OF POLICY ANALYSIS
UNITED STATES DEPARTMENT OF THE INTERIOR

(202) 262-3158 phone
(202) 208-4867 fax

To: Michelle Jackson

Date: January19,2007

Subject: Travel Voucher SIWRO.FY07.M4

Michelle,

I received a call from Vicki indicating that you were processing this voucher and required an original signature on the first page of the package. Attached is a copy of the first page of the voucher Vicki sent me on Friday with an original signature. You have the balance of the original voucher package for processing. Please let me know if you need anything else and thanks again as always.

Bob Laidlaw

(202) 262-3158

01/12/07 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.M4
Copyright 1989-2004 Gelco Information Network, Inc
|Laidlaw, Rober (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			745.69
HOTEL TAXES-			9.00
LODGING-409			490.00
M&IE-409			252.25
MILEAGE-408			99.68
MISC EXPENSE-409			12.00
PARK-			28.00
TAXI CASH-			150.00
TRAVEL AGENT-			24.50
BOR/SIWRO	0.00	0.00	1,811.12

Organization:
2007.1000 DDR14.BR0155 68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,811.12
NON-REIMBURSABLE EXPENSES		770.19
TOTAL AMOUNT CLAIMED		1,040.93
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		1,040.93
GOV'T CHARGE CARD EXPENSES -	9.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	9.00	
PAY TO GOV'T CHARGE CARD		9.00
PAY TO TRAVELER		1,031.93

UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

Reimbursable Support Agreement
Fiscal Year 200 7

Parties to the Agreement

Customer Agency *(Paying Agency)*	Provider Agency *(Billing Agency)*
Bureau/Agency Name: Bureau of Reclamation	Bureau/Agency Name: DOI, OS, SIWRO
Address: 1849 C Street, NW Washington, DC 20240	Address: 1849 C Street, NW MS 2321 Washington, DC 20240
Project Coordinator: Arlene Riley	Project Coordinator: J. Jamie Coaster-Barringotn
Signature: Arlene Riley	Signature: J. Jamie C B
telephone:	telephone: (202) 219-1384

Accounting Data

Document Number: 07.02.91.DN015	Document Number: RA7W0155
Appropriation: 14X0680	Appropriation: 14 7 0102
Account Info: A10.1523.4000.400.00.0.1	Account Info: 1000 DDR14 BR0155 68
Agency Location Code: 14X06X0905	Agency Location Code: 14-01-0001

Description and Cost of Goods and/or Services to be Provided

This agreement is to be accomplished on the following basis:
☒ Time and Materials ☐ Fixed Price

Description of Service: (Include time frame involved, estimated costs by object class and a brief description of the service. Attach additional backup data as needed.)

Robert Laidlaw will be traveling to Washington DC for pre-meetings (12/11) and a one day retreat (12/12) w/Counselor and Assistant Secretaries to strategize on water right Settlements and time sensitive Secretarial commitments for water settlements. Travel to Las Vegas to negotiate a final settlement for Soboba (12/13-12/14) and meet with the 5 Tribes involved in the San Luis Rey water Settlement. Attend CRWUA on (12/15) w/ Secretary Kempthorne. Travel to be reimbursed is Airplane, lodging, per diem, parking, lodging taxes, pov, rental car, and taxi as needed.

Obligational Authority Available	
Until (date)	8-1-2007
Initial or Current Amount	$ 2,100.00
Amendment Number	#
Amount	$
New Total Amount	$ 2,100.00

Approvals

CONDITIONS OF AGREEMENT: The Office of the Secretary is willing to enter into this agreement subject to the conditions stated on the second page of this form.

APPROVAL BY PAYING AGENCY	APPROVAL BY CUSTOMER AGENCY
Signature: Arlene Riley	Signature: Gary Weitzner
Date: 11/17/2006	Date: 11/21/07
Name: Arlene Riley	Name: Gary Weitnzer
Title: Budget Officer / Program Analyst	Title: Budget Officer

This form was electronically produced by Elite Federal Forms, Inc.

DI-2017 (11/2001)

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO.: SIWRO.FY07.M4

2. TRAVELER *(first name, middle initial, last name)*: Robert M. Laidlaw

3. TITLE: Policy Analyst

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED:
P.O. Box 1970
Shingle Springs, CA 95682

6A. OFFICE/SERVICE AND DIVISION: Ofc of the Secretary

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Sacramento, CA

8. OFFICE PHONE NO.: (916) 978-4643

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [X] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: SIWRO Retreat 12/12; Mtgs on SLR, Soboba, Navajo San Juan, CRWUA presentation attendance w/Secretary Kempthorne

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: RES: Shingle Spr	CA						
12/10/2006	SUN	TO: WASHINGTON	DC	64	188	252			
12/13/2006	WED	WASHINGTON	DC	64	188	252			
12/13/2006	WED	TO: LAS VEGAS	NV	64	114	178			
12/15/2006	FRI	LAS VEGAS	NV	64	114	178			
12/15/2006	FRI	TO: RES: Shingle Spr	CA						

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? *(If NO, justify in item 22)*
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED? *(If YES, justify in item 22)*
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? *(If YES, check one box below and complete item 17B)* [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE: 0.445
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? *(If YES, justify in item 22)* IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: if item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED: A. INITIALS / B. DATE

22. REMARKS
Travel paid thru RSA from SIWRO to Bureau of Reclamation attached.

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 712.00
B. TOTAL PER DIEM AND OTHER	$ 1311.88
C. TOTAL ESTIMATED COST	$ 2023.88

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

25. ADVANCE AUTHORIZED: $ 0.00

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Pamela Williams - Director, SIWRO

27B. SIGNATURE *(PRESS FIRMLY USE BALL POINT PEN)*: Pamela Williams

27C. DATE: 11/17/06

GENERAL SERVICES ADMINISTRATION

GSA FORM 87 (REV. 8/86)

11/17/06 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.M4

Copyright 1989-2004 Gelco Information Network, Inc

|Laidlaw, Rober (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			712.00
HOTEL TAXES-			60.00
LODGING-409			792.00
M&IE-409			352.00
MILEAGE-408			33.38
PARK-			50.00
TRAVEL AGENT-			24.50
NO ACCT CODE	0.00	0.00	2,023.88

Organization:

THE·RIVER·INN

Luxury Suites in Historic Foggy Bottom

924 Twenty-Fifth Street NW
Washington 20037

Room No. : 702
Arrival : 12-10-06
Departure : 12-12-06
Page No. : 1 of 1
Folio No. : 43043
Cashier No. : 123

Laidlaw, Robert Mr
1849 C Street, NW
Rm. 3411
Washington 20049

Date	Description	Charges	Credits
12-10-06	ROOM CHARGE	188.00	
12-10-06	ROOM TAX	27.26	
12-11-06	ROOM CHARGE	188.00	
12-11-06	ROOM TAX	27.26	
12-12-06	MASTERCARD (b) (6) [redacted]		430.52
12-12-06	ROOM TAX	54.52	
	TAX EXEMPT		-54.52
12-12-06	MASTERCARD (b) (6) [redacted]		
	Total	**376.00**	**376.00**
	Balance		**0.00**

Cardholder acknowledges receipt of goods and/or services in the amount of the total shown above and agrees to perform the obligations and terms in the cardholder agreement with the seller.

CI: GREVERE 12/13/06 7:08 PM
CO:

CAESARS PALACE
LAS VEGAS

Arrival Date: 12/13/06
Departure Date: 12/14/06

3570 Las Vegas Blvd. South Las Vegas, NV 89109
FOR RESERVATIONS CALL 1-800-634-6661
702-731-7110

Name: **ROBERT LAIDLAW**

Address: PO BOX 1970
SHINGLE SPRINGS CA 95682

Group Code: QCGOVT6

Casino ID:
Room #: RT 764

Resv ID: 390341713145
Folio ID: 390631274780

Page: 1

Date	Reference	Description	Charges	Credits	Balance
12/13/06	RT 764	ROOM CHARGE RT 764	100.00		
		TAX	9.00		109.00
12/13/06		APPLIED DEPOSIT		109.00	
		(b) (6) [redacted]			
12/14/06	0294017	CAFE LAGO COFFEE SHOP	15.62		15.62
12/14/06		CAFE LAGO COFFEE SHOP TIP	2.00		17.62
12/14/06		CASH		17.62	
					.00

Thank You for Staying at Caesars Palace

E-Ticket ℠Receipt and Itinerary

YOUR ELECTRONIC TICKET WAS ISSUED

This Document is for reference only
Your electronic airline ticket is stored in our computer system.
As with all airline tickets, your electronic ticket is not transferable.
Thank you for choosing United Airlines

Record Locator: NL4S31

Party of (1)	Ticket Number	Mileage Plus #	Base Fare	Tax	Total
LAIDLAW/ROBERT M MR	0162150387357		USD 435.34	USD 53.25	USD 488.59

Fare Details: (b) (6) [redacted] EXP0209/ 74622 FC 11DEC SAC UA WAS 217.67YCAIAD UA SAC 217.67YCAIAD USD435.34END ZPSMFIAD XT 6.60ZP 5.00AY 9.00XFSMF4.5IAD4.5

Baggage Allowance - 2PC

Penalty:

Grand Total: USD 488.59

Billing Information
ROBERT LAIDLAW
PO BOX 1970
SHINGLE SPRINGS CA 95682-1970
USA

Note: Bring a valid PHOTO ID to check-in.

Original E-Ticket information (Please see active itineraries)

Flight/Equip	Depart	Arrive	MP Miles	Seats	Class	Stops	Status
Sacramento, CA (SMF) to Washington, DC (IAD)							
United Airlines 0290 Airbus 319	Sacramento California (SMF) Dec 10 07:40 AM	Washington Dulles (IAD) Dec 10 03:39 PM	2358 mi traveled	Seat: 12A	United Economy	Non-stop	Confirmed
Washington, DC (IAD) to Sacramento, CA (SMF)							
United Airlines 0291 Airbus 319	Washington Dulles (IAD) Dec 12 06:00 PM	Sacramento California (SMF) Dec 12 08:48 PM	2358 mi traveled	Seat: 06C	United Economy	Non-stop	Confirmed

Issued Mon Nov 27 2006

R. Laidlaw

From: "Southwest Airlines" <SouthwestAirlines@mail.southwest.com>
To: <RL11@pacbell.net>
Sent: Tuesday, December 12, 2006 4:52 AM
Subject: Ticketless Confirmation - LAIDLAW/ROBERT - 5D4PKH

********** RECEIPT AND ITINERARY **********

Beginning 24 hours prior to your scheduled departure, you may
check in online for your flight and print a boarding pass at
southwest.com by visiting:
http://www.southwest.com/travel_center/retrieveCheckinDoc.html?src=receipt

Receipt and Itinerary as of 12/12/06 6:52AM

```
*******************************
*                             *
*    Confirmation Number      *
*         5D4PKH              *
*                             *
*******************************
```

Confirmation Date: 12/12/06

Received: ROBERT

Passenger(s):
LAIDLAW/ROBERT 526-2760823130-6
Account Number: (b) (6) [redacted]

Itinerary:
Wednesday, December 13 - SACRAMENTO CA(SMF) to LAS VEGAS NV(LAS)
Flight 972 Y
Depart SACRAMENTO CA(SMF) at 6:20PM and
Arrive in LAS VEGAS NV(LAS) at 7:35PM

Thursday, December 14 - LAS VEGAS NV(LAS) to SACRAMENTO CA(SMF)
Flight 1372 Y
Depart LAS VEGAS NV(LAS) at 3:25PM and
Arrive in SACRAMENTO CA(SMF) at 4:55PM

********** COST **********

Total for 1 Passenger(s)
AIR: .....$ 221.40
TAX: .....$ 23.20

PFC FEE: .....$ 7.50
SECURITY FEE: .....$ 5.00

Total Fare: $257.10

********** PAYMENT SUMMARY **********

Current payment(s)
12/12/06 MASTERCARD (b) (6) [redacted] Ref 526-2760823130-6 $257.10

Total Payments: $257.10

********** FARES RULE(S) **********
VALID ONLY ON SOUTHWEST AIRLINES

All travel involving funds from this Confirm no. must be
completed by 12/12/07
Any change to this itinerary may result in a fare increase.

Fare Calculation:
GVT- 1 SMFWNLAS YCASMF 119.00 LASWNSMF YCASMF 119.00 $238.00
ZP6.60 XFSMF4.50 LAS3.00 AYSMF2.50 LAS2.50 $257.10

Important:

********** FREE BAGGAGE ALLOWANCE **********
Checked Baggage Allowance: Three (3) pieces of baggage, each
piece of which having outside measurements (i.e., the sum of
the greatest outside length plus the greatest outside width
plus the greatest outside height) not exceeding sixty-two (62)
inches, not weighing more than fifty (50) pounds per piece,
and provided such baggage is checked for carriage in the cargo
hold of the aircraft. Baggage that exceeds these limits is
subject to an additional charge.

Carryon Baggage Allowance: One (1) item of carryon baggage
that does not exceed external dimensions of ten inches by
sixteen inches by twenty-four inches (10 x 16 x 24) plus
one (1) smaller personal-type item (e.g., purse, briefcase,
laptop computer case, backpack, small camera), provided that
such items are capable of being carried onboard the aircraft
by one person without additional assistance and are capable of
being stowed under a seat or in an overhead compartment.

********** CHECKIN REQUIREMENTS **********
Southwest Airlines Ticketless Travel is nontransferable.
Positive identification is required at time of checkin.

Taxi Cab Receipts

DATE: 12.10.06 TIME: _____

TRIP ORIGIN: Dulles

DESTINATION: DC

FARE: $65.00 SIGNATURE _____

YELLOW-CHECKER-STAR
"THE" CAB COMPANIES
Las Vegas, Nevada
873-2227
COMPUTER RADIO DISPATCHED

DRIVER# _____ DATE 12.13.06
(CHARGE THE ACCT. OF)
(RECEIVED OF) _____

FOR TAXI FARE FROM _____

TO _____ $ 15.00

(X) DRIVER NAME _____

(X) PASSENGER SIGNATURE _____

CENTRAL PARKING SYSTEMS
1209 L STREET
SACRAMENTO CALIFORNIA
95814
WE APPRICATE YOUR BUSINESS
COME AGAIN

12/13/06 16:20 L# 1 A# 9 Txn#713752
12/13/06 06:53 In 12/13/06 16:20 Out
Tkt# 177655

Fee 4	$ 12.00
Total Fee	$ 12.00
CASH PAID	$ 12.00-
Cash Tender	$ 12.00
Change Due	$ 0.00

THANK YOU
PLEASE DRIVE CAREFULLY

Sacramento Int'l
Airport

Card Account : (b) (6) [redacted]
Card Type : Master Card
Authorization Code : 034846

Cashier : 83 Seq # 21954
License Plate : XX NOPLATE
Ent : 16:38 12/13/06 Lane 49
Exit: 17:04 12/14/06 Lane 60

FEE $	28.00
AMOUNT TEND $	28.00
CASH $	0.00
CREDIT CARD $	28.00
CHECK $	0.00
CHANGE CALC $	0.00

PAID AT CT $ 28.00
Taxes Included

*** Start Calculation Details ***

1 Day(s) @$26.00 = $26.00
1 Hour(s) @$2.00 = $2.00

*** End Calculation Details ***

*** Thank You ***

Sign : _____

Taxi Cab Receipts

DATE: Dec 12 TIME: 4pm

TRIP ORIGIN: IOS

DESTINATION: Dulles

FARE: $ 70.00 SIGNATURE _____

CENTRALLY BILLED ITEMS CHECKED WITH CARD TABLE

NGB

Agent Fee _____

Airfare _____

Lodging _____

Rental Car _____

Gas _____

Parking _____

Taxi / Shuttle _____

VXRF _____

TAVD _____

Not in Card table

U .S. Department of the Interior

Notice of Action Taken

National Business Center - Denver
7401West Mansfield Ave. D-2777
Denver, CO 80235 – 2230

Robert Laidlaw
POB 1970
Shingle Springs, CA 95682

VOUCHER NUMBER SIWROFY07M4			
Amount Claimed	**Suspended**	**Disallowed**	**Allowed**
$1040.93		$14.00	1026.93
Tax Withheld	**Applied to Advance**	**Under Claimed**	**Amount of Check**
			$1026.93

EXPLANATION:

Disallowed $14.00 – The per diem rate is based on the allowable lodging rate per night for Las Vegas, NV is $114.00. Your hotel charge was $100.00 and you claimed the maximum.

Please direct any inquiries to Vickie Stwalley 303-969-5652

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE: **Vickie Stwalley**	REVIEWING TECHNICIAN	**1/24/2007**

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV ~~TAR~~	N

Julian Date	Prep Unit	Sequence Number
023	VS	A

Batch Totals

Input Date	Number of Documents
1/23/07	5

1,026•93 +
72•76 +
248•98 +
390•80 +
131•09 +
1,870•56 *

System Checked By: _____ Date _____

Batch Approval

Approved By: Jm

Date Approved: 1-24-07

CHECKED JAN 25 2007

186744

SIWRO0764

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Ofc of the Secretary

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: SIWRO.FY07.W-4

4. SCHEDULE NO.:

5. a. NAME *(Last, first, middle initial)*: Laidlaw, Robert M.

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

c. MAILING ADDRESS *(Include ZIP Code)*: (b) (6) [redacted]

d. OFFICE TELEPHONE NO.: (916) 978-4643

e. PRESENT DUTY STATION: Sacramento, CA

f. RESIDENCE *(City and State)*: (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 02/20/2007 b. TO 02/22/2007

7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWRO.FY07.W-4 b. DATE(S) 01/12/2007

10. CHECK NO.:

8. TRAVEL ADVANCE

a. Outstanding 0.00

b. Amount to be applied 0.00

c. Amount due Government *(Attached [ ] Check [ ] Cash)*

D. Balance outstanding

9. CASH PAYMENT RECEIPT

a. DATE RECEIVED

b. AMOUNT RECEIVED $

c. PAYEE'S SIGNATURE

11. PAID BY: TDT-

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER *(Initials)* (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	246.80			SMF-Sacramento	AirSAN-San Diego Ai

211D-54.32
211D 144.00
211T-64.00

Document ACCEPTED MAR 27 2007 J.L.M.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ DATE 3/14/07 AMOUNT CLAIMED ▶ 262.32

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ Mark Limbaugh Asst Sec WS DATE 3/1/07

17. *FOR FINANCE OFFICE USE ONLY* COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* $

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION $ 3/12/07 RS

Certifier's initials:

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol)*: $ 0.00

d. NET TO TRAVELER ▶ $ 262.32

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION

BOR/SIWRO-2007.1000 DDR14.BR0155 68..... - 262.32 NR- 538.80

27•16	+
27•16	+
64•00	+
64•00	+
16•00	+
15•00	+
14•00	+
15•00	+
15•00	+
5•00	+
262•32	*

5B

48•00	+
48•00	+
64•00	+
27•16	+
27•16	+
15•00	+
14•00	+
15•00	+
15•00	+
5•00	+
278•32	*

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

13/64

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES. TRIP# 1

TRAVEL AUTHORIZATION NO. SIWRO.FY07.W-4

TRAVELER'S LAST NAME Laidlaw

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.485 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
02/20	5:01A	D-:Sacramento, CA											
02/20		Airline Flight											
02/20	12:00A	A-:SAN DIEGO,CA				~~64.00~~	48.00	131.00	64.00			64.00	
02/20		Private Vhcle								56	27.16		
02/21		Taxi-Cash-hotel to meeting											15.00
02/21		Subsistence				64.00	64.00	131.00	64.00			64.00	
02/21		Taxi-Cash-meeting to hote											14.00
02/22	12:00A	D-:SAN DIEGO,CA											
02/22		Private Vhcle								56	27.16		
02/22	12:01A	A:Sacramento, CA											
02/22		Subsistence				~~16.00~~	48.00		16.00			16.00	
02/22		Airport Parking GVCC CBill											
02/22		Taxi-Cash-Hotel to meeting											15.00
02/22		Taxi-Cash-meeting to hotel											15.00
02/22		Taxi-Cash-hotel to airport											5.00
									SUBTOTALS ▶		54.32	144.00	64.00
									TOTALS ▶		54.32	144.00	64.00

144.00 / 160.00 Should be

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 262.32

PAC

02/26/07 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.W-4

Copyright 1989-2004 Gelco Information Network, Inc

|Laidlaw, Rober (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			246.80
LODGING-409			262.00
M&IE-409			144.00
MILEAGE-408			54.32
PARK-			30.00
TAXI CASH-			64.00
BOR/SIWRO	0.00	0.00	801.12

Organization:
2007.1000 DDR14.BR0155 68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		801.12
NON-REIMBURSABLE EXPENSES		538.80
TOTAL AMOUNT CLAIMED		262.32
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		262.32
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		262.32

Exception to SF 1012

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (41 CFR 301-304), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of Nov. 22, 1943 and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C 6011(b) and 6109) and E.O. 9397, Nov. 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel; and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

SAN DIEGO 2/20 - 2/22

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO.: SIWRO.FY07.W-4

2. TRAVELER (first name, middle initial, last name): Robert M. Laidlaw

3. TITLE: Policy Analyst

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED: (b) (6) [redacted]

6A. OFFICE/SERVICE AND DIVISION: Ofc of the Secretary

6B. COST SYMBOL:

7. OFFICIAL DUTY STATION: Sacramento, CA

8. OFFICE PHONE NO.: (916) 978-4643

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA [ ] COST [ ] NO COST

11. TRAVEL PURPOSE (check one): [ ] SITE VISIT [X] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER (SPECIFY)

12. SPECIFIC TRAVEL PURPOSE: San Luis Rey mtg; Soboba mtg; Ad Hoc group mtg;

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal itineraries or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE: MEAL RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
[redacted]		FROM: Sacramento	CA	[redacted]					
02/20/2007	TUE	TO: SAN DIEGO	CA	64	131	195		AIR	1 POC
02/23/2007	FRI	SAN DIEGO	CA	64	131	195			
---	---	TO: ---	--	---	---	---	---	---	---
---	---	---	--	---	---	---	---	---	---
02/23/2007	FRI	TO: Sacramento	CA	[redacted]					[redacted]

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? (If YES, explain in item 22, REMARKS; (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? (If NO, justify in item 22)
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroliner, sleeper, etc.) AUTHORIZED? (If YES, justify in item 22)
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? (If YES, check one box below and complete item 17B) [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE: 0.445
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? (If YES, justify in item 22) IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS (check one): [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS (check one) (Note: If item 19B was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER (explain in item 22)

21. FUNDS OBLIGATED: A. INITIALS B. DATE

22. REMARKS

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 435.00
B. TOTAL PER DIEM AND OTHER	$ 749.75
C. TOTAL ESTIMATED COST	$ 1184.75
25. ADVANCE AUTHORIZED	$ 0.00

24. TRAVEL ADVANCE WILL BE OBTAINED BY (check one): [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 6 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Mark Limbaugh, Asst. Secy., WS

27B. SIGNATURE (PRESS FIRMLY USE BALL POINT PEN): [signature]

27C. DATE: 2/12/07

01/23/07 ACCOUNTING DETAIL | Doc No: SIWRO.FY07.W-4

Copyright 1989-2004 Gelco Information Network, Inc

Laidlaw, Rober (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			435.00
HOTEL TAXES-			60.00
LODGING-409			393.00
M&IE-409			224.00
MILEAGE-408			22.25
PARK-			40.00
TRAVEL AGENT-			10.50
NO ACCT CODE	0.00	0.00	1,184.75

Organization:

UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

Reimbursable Support Agreement
Fiscal Year 200 7

Parties to the Agreement

Customer Agency *(Paying Agency)*	Provider Agency *(Billing Agency)*
Bureau/Agency Name: Bureau of Reclamation	Bureau/Agency Name: DOI, OS, SIWRO
Address: 1849 C Street, NW Washington, DC 20240	Address: 1849 C Street, NW MS 2321 Washington, DC 20240
Project Coordinator: Arlene Riley	Project Coordinator: J. Jamie Coaster-Barringotn
Signature: Arlene Riley	Signature: J. Jamie C B
telephone:	telephone: (202) 219-1384

Accounting Data

Document Number: 07.02.91.DN015	Document Number: RA7W0155
Appropriation: 14X0680	Appropriation: 14 7 0102
Account Info: A10.1523.4000.400.00.0.1	Account Info: 1000 DDR14 BR0155 68
Agency Location Code: 14x06x0905	Agency Location Code: 14-01-0001

Description and Cost of Goods and/or Services to be Provided

This agreement is to be accomplished on the following basis:
☒ Time and Materials ☐ Fixed Price

Description of Service: (Include time frame involved, estimated costs by object class and a brief description of the service. Attach additional backup data as needed.)

Robert Laidlaw will be traveling to Washington DC for pre-meetings (12/11) and a one day retreat (12/12) w/Counselor and Assistant Secretaries to strategize on water right Settlements and time sensitive Secretarial commitments for water settlements. Travel to Las Vegas to negotiate a final settlement for Soboba (12/13-12/14) and meet with the 5 tribes involved in the San Luis Rey water Settlement. Attend CRWUA on (12/15) w/ Secretary Kempthorne. Travel to be reimbursed is Airplane, lodging, per diem, parking, lodging taxes, pov, rental car, and taxi as needed.

Obligational Authority Available		
Until (date)		8-1-2007
Initial or Current Amount	$	2,100.00
Amendment Number	#	
Amount	$	
New Total Amount	$	2,100.00

Approvals

CONDITIONS OF AGREEMENT: The Office of the Secretary is willing to enter into this agreement subject to the conditions stated on the second page of this form.

APPROVAL BY PAYING AGENCY	APPROVAL BY CUSTOMER AGENCY
Signature: Arlene Riley	Signature: Gary Weitzer
Date: 11/17/2006	Date: 11/21/07
Name: Arlene Riley	Name: Gary Weitzer
Title: Budget Officer / Program Analyst	Title: Budget Officer

This form was electronically produced by Elite Federal Forms, Inc.

Mark

DI-2017 (11/2001)

HUMPHREY'S
HALF MOON INN & SUITES

2303 Shelter Island Drive
San Diego, CA 92106
(619) 224-3411
Fax (619) 224-3478
For reservations, dial toll free
800-542-7400
www.halfmooninn.com

BOB LAIDLAW
(b) (6) [redacted]

Arrival Date	02/20/07
Departure Date	02/22/07
Account #	304412
Room #	244

DATE	DESCRIPTION	CHARGES	PAYMENTS
02/20/07	RO - Tax Exempt Rm Charge--Room # 244	$131.00	
02/21/07	RO - Tax Exempt Rm Charge--Room # 244	$131.00	
02/22/07	MC - MasterCard--(b) (6) [redacted]		($262.00)

13/bal

Multiple winner of San Diego's Finest Service Award!!!

Balance Due **$0.00**

Union Tribune included in room charge of $.20 per day excluding weekends

In the event that I do not officially check out at my time of departure, or if I incurred charges subsequent to my checkout, I hereby authorize you to charge my credit card. I further acknowledge, regardless of billing instructions, that I am liable until the balance is paid in full.

X_____

Sacramento Int'l
Airport

Card Account : (b) (6) [redacted]
Card Type : Master Card
Authorization Code : 043196

Cashier : 25 Seq # 47614
License Plate : XX NOPLATE
Ent : 12:25 02/20/07 Lane 39
Exit: 14:37 02/22/07 Lane 52

FEE	$	30.00
AMOUNT TEND	$	30.00
CASH	$	0.00
CREDIT CARD	$	30.00
CHECK	$	0.00
CHANGE CALC	$	0.00

PAID AT CT $ 30.00
Taxes Included

*** Start Calculation Details ***
2 Day(s) @$12.00 = $24.00
3 Hour(s) @$2.00 = $6.00

*** End Calculation Details ***

*** Thank You ***

R. Laidlaw Southwest San Diego

From: "Southwest Airlines" <SouthwestAirlines@mail.southwest.com>

Sent: Sunday, February 18, 2007 11:17 AM
Subject: Ticketless Confirmation - LAIDLAW/ROBERT - 55XEW6

Southwest Airlines Receipt and Itinerary

Receipt and Itinerary as of 02/18/07 1:17 PM

Confirmation Number
55XEW6

Check In Online

Check In Online

Confirmation Date: 02/13/07
Received: ROBERT

Passenger Information

Passenger Name	Ticket#	Account Number
LAIDLAW/ROBERT	526-2372444722-1	(b) (6) [redacted]

Itinerary:

Date	Flight	Routing Details
Tue Feb 20	2643	Depart SACRAMENTO CA (SMF) at 1:50 PM Arrive in SAN DIEGO CA (SAN) at 3:15 PM
Thu Feb 22	2525	Depart SAN DIEGO CA (SAN) at 2:10 PM Arrive in SACRAMENTO CA (SMF) at 3:40 PM

Cost and Payment Summary

Air	$ 210.24
Tax	$ 22.56
PFC Fee	$ 9.00
Security Fee	$ 5.00

Total Payment: $246.80
Prior payment(s)
02/13/07 MASTERCARD (b) (6) [redacted] Ref 526-2371466130-2 $246.80

Fare Rule(s)
Valid only on Southwest Airlines. All travel involving funds from this Confirm no. must be completed by 02/13/08. Any change to this itinerary may result in a fare increase.

Fare Calculation:

GVT- 1 SMFWNSAN YCASMF 113.00 SANWNSMF YCASMF 113.00 $226.00 ZP6.80 XFSMF4.50 SAN4.50 AYSMF2.50 SAN2.50 $246.80

Important Checkin Requirement

TRAVEL AUTHORIZATION COVER SHEET

NAME OF TRAVELER: Robert Laidlaw

DATES OF TRAVEL: February 20-23, 2007

PURPOSE AND LOCATION OF TRAVEL:
Location is San Diego, California. Purpose is to assist Counselor to the Secretary Michael Bogert with Indian water rights negotiations involving proposed settlements of water rights claims of the Soboba Band of Luiseno Indians and the five Indian Bands having rights in the San Luis Rey River basin, California. Meetings will be scheduled with team chairmen and tribal leaders involved in several Montana water rights settlements and settlements in New Mexico. Additionally, will staff Counselor Bogert in a meeting scheduled with representatives of the Ad Hoc Group on Indian Water Rights (composed of Native American Rights Fund, Western Governor's Association, Western Regional Council and Western States Water Council) to discuss Secretary Kempthorne's policies/initiatives on Indian water rights settlements.

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL:
Negotiations involving the Soboba Band are critical to allow Secretary Kempthorne, in conjunction with his remarks at the ABA water conference, to announce an Administration-supported Indian water rights settlement. Other meetings are essential to fulfill commitments made by Counselor Bogert to become actively and personally involved in the San Luis Rey settlement and to communicate with Western water rights stakeholders represented by the Ad Hoc Group on Water Settlements.

ESTIMATED COST OF TRIP:

Airfare =	$ 200.00
Hotel =	$ 450.00
Per diem=	$ 224.00
Total charges for travel	$925.00

Total charges for 4 days travel = $ 925.00

COSTS FOR THIS TRAVEL WOULD BE PAID BY (check one):

- ☐ OS Travel Account
- ☒ Bureau Travel Account by reimbursable agreement already in place.

Name of Bureau: Bureau of Reclamation

OFFICE SURNAME: (Office Director must surname.) SIWRO/Date 1/27/06

For IOS Offices – Assistant Secretary or Office Director Approval/Date: 2/1/07

For PMB – DAS Approval/Date: _____

APPROVAL:

This travel is: ☒ APPROVED ☐ NOT APPROVED.

Signature: _____

Doug Dentenech, Deputy COS, Brian Waidmann, COS, Tom Weimer, ASPMB

TRAVEL: Robert M LAIDLAW 2/20-22/07

TA # SIWRO FY07 W-4

PURPOSE CHAIR SETTLEMENT NEGOTIATIONS WITH SOBOBA, SAN LUIS REY & MTC W/ COUNSELOR TO THE SECRETARY

PER DIEM BASIS

2.20.07 LV. SACRAMENTO @ 1:30pm, ARRIVE SD @ 4pm

2.20.07 ON GUTS SAN DIEGO

2.22.07 LV SAN DIEGO @ 1pm, ARRIVE SACRAMENTO @ 4pm

Hotel

Two Nights @ $131.00

MISC.

TAXI

2.21	Hotel to Mtg	$15.00 CASH
2.21	MEETING TO HOTEL	$14.00 " "
2.22	Hotel to Downtown SD	$15.00
2.22	Meeting to Hotel	$15.00
2.22	Hotel to Airport	$5.00

POV Milage 112 miles Residence to Airport & Return

Airport Parking $30.00

FAX TRANSMISSION

ROBERT M. LAIDLAW
SENIOR POLICY ANALYST
OFFICE OF POLICY ANALYSIS
UNITED STATES DEPARTMENT OF THE INTERIOR

(202) 262-3158 phone
(202) 208-4867 fax

To: Cathy Gulac
(202) 208-4867

Total Pages Attached: 8

Date: February 23, 2007

Subject: Travel

Comments:

Cathy,

I have attached the Travel Authorization and Voucher information for this week's trip to San Diego with the Counselor. The Southwest Airline charge you noted earlier was for this trip.

BLM paid for air fare for my Portland trip earlier this month. BOR/SIWRO 2007 1000 DDR14

Could you please prepare a voucher for this trip and as noted in my previous Email, I will need an authorization for 3/11-3/15 for Tar Creek, Klamath and Soboba and completion of the Secretarial finding for the Snake River basin Settlement (Nez Perce) BR0155 68

Thanks Again

Have a great weekend!

attachments: as stated

R. Laidlaw Southwest San Diego

From: "Southwest Airlines" <SouthwestAirlines@mail.southwest.com>

Sent: Sunday, February 18, 2007 11:17 AM
Subject: Ticketless Confirmation - LAIDLAW/ROBERT - 55XEW6

Southwest Airlines Receipt and Itinerary

Receipt and Itinerary as of 02/18/07 1:17 PM

Confirmation Number
55XEW6

Check In Online

Check In Online

Confirmation Date: 02/13/07
Received: ROBERT

Passenger Information

Passenger Name	Ticket#	Account Number
LAIDLAW/ROBERT	526-2372444722-1	(b) (6) [redacted]

Itinerary:

Date	Flight	Routing Details
Tue Feb 20	2643	Depart SACRAMENTO CA (SMF) at 1:50 PM Arrive in SAN DIEGO CA (SAN) at 3:15 PM
Thu Feb 22	2525	Depart SAN DIEGO CA (SAN) at 2:10 PM Arrive in SACRAMENTO CA (SMF) at 3:40 PM

Cost and Payment Summary

Air	$ 210.24
Tax	$ 22.56
PFC Fee	$ 9.00
Security Fee	$ 5.00

Total Payment: $246.80
Prior payment(s)
02/13/07 MASTERCARD (b) (6) [redacted] Ref 526-2371466130-2 $246.80

Fare Rule(s)
Valid only on Southwest Airlines. All travel involving funds from this Confirm no. must be completed by 02/13/08. Any change to this itinerary may result in a fare increase.

Fare Calculation:

GVT- 1 SMFWNSAN YCASMF 113.00 SANWNSMF YCASMF 113.00 $226.00 ZP6.80 XFSMF4.50 SAN4.50 AYSMF2.50 SAN2.50 $246.80

Important Checkin Requirement

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Ofc of the Secretary

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: SIWRO.FY07.W-4

4. SCHEDULE NO.:

5. a. NAME *(Last, first, middle initial)*: Laidlaw, Robert M.

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 02/20/2007 b. TO 02/22/2007

c. MAILING ADDRESS *(Include ZIP Code)*: (b) (6) [redacted]

d. OFFICE TELEPHONE NO.: (916) 978-4643

7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWRO.FY07.W-4 b. DATE(S) 01/12/2007

e. PRESENT DUTY STATION: Sacramento, CA

f. RESIDENCE *(City and State)*: (b) (6) [redacted]

10. CHECK NO.:

8. TRAVEL ADVANCE

a. Outstanding	0.00
b. Amount to be applied	0.00
c. Amount due Government *(Attached [ ] Check [ ] Cash)*	
D. Balance outstanding	

9. CASH PAYMENT RECEIPT

a. DATE RECEIVED

b. AMOUNT RECEIVED $

c. PAYEE'S SIGNATURE

11. PAID BY

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	246.80				SMF-Sacramento	AirSAN-San Diego Ai

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 3/14/07 AMOUNT CLAIMED ▶ 262.32

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ Mark Limbaugh Asst Sec WS DATE 3/1/07

17. *FOR FINANCE OFFICE USE ONLY* COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* $

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION *Certifier's initials:* $

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol)*: $ 0.00

d. NET TO TRAVELER ▶ $ 262.32

18. ACCOUNTING CLASSIFICATION

BOR/SIWRO-2007.1000 DDR14.BR0155 68..... - 262.32 NR- 538.80

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES

TRIP# 1

TRAVEL AUTHORIZATION NO. SIWRO.FY07.W-4

TRAVELER'S LAST NAME Laidlaw

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.485 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
02/20	5:01A	D-:Sacramento, CA											
02/20		Airline Flight											
02/20	12:00A	A-:SAN DIEGO,CA				64.00		131.00	64.00			64.00	
02/20		Private Vhcle								56	27.16		
02/21		Taxi-Cash-hotel to meeting											15.00
02/21		Subsistence				64.00		131.00	64.00			64.00	
02/21		Taxi-Cash-meeting to hote											14.00
02/22	12:00A	D-:SAN DIEGO,CA											
02/22		Private Vhcle								56	27.16		
02/22	12:01A	A:Sacramento, CA											
02/22		Subsistence				16.00			16.00			16.00	
02/22		Airport Parking GVCC CBill											
02/22		Taxi-Cash-Hotel to meeting											15.00
02/22		Taxi-Cash-meeting to hotel											15.00
02/22		Taxi-Cash-hotel to airport											5.00
									SUBTOTALS ▶		54.32	144.00	64.00
									TOTALS ▶		54.32	144.00	64.00

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 262.32

02/26/07 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.W-4
Copyright 1989-2004 Gelco Information Network, Inc
|Laidlaw, Rober (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			246.80
LODGING-409			262.00
M&IE-409			144.00
MILEAGE-408			54.32
PARK-			30.00
TAXI CASH-			64.00
BOR/SIWRO	0.00	0.00	801.12

Organization:
2007.1000 DDR14.BR0155 68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		801.12
NON-REIMBURSABLE EXPENSES		538.80
TOTAL AMOUNT CLAIMED		262.32
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		262.32
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		262.32

Exception to SF 1012

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (41 CFR 301-304), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of Nov. 22, 1943 and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C 6011(b) and 6109) and E.O. 9397, Nov. 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel; and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

FEB-14-2007

SAN DIEGO 2/20 - 2/22

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO.: SIWRO.FY07.W-4

2. TRAVELER (first name, middle initial, last name): Robert M. Laidlaw

3. TITLE: Policy Analyst

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED: (b) (6) [redacted]

6A. OFFICE/SERVICE AND DIVISION: Ofc of the Secretary

6B. COMP. SYMBOL:

7. OFFICIAL DUTY STATION: Sacramento, CA

8. OFFICE PHONE NO.: (916) 978-4643

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA [ ] COST [ ] NO COST

11. TRAVEL PURPOSE (check one): [ ] SITE VISIT [X] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER (SPECIFY)

12. SPECIFIC TRAVEL PURPOSE: San Luis Rey mtg; Soboba mtg; Ad Hoc group mtg;

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal itineraries or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE: MEAL RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
[redacted]		FROM: Sacramento	CA	[redacted]					
02/20/2007	TUE	TO: SAN DIEGO	CA	64	131	195		AIR	1 POC
02/23/2007	FRI	SAN DIEGO	CA	64	131	195			
--------	---	TO: ----------	--	---	---	---	---	----	----
--------	---	----------	--	---	---	---	---	----	----
02/23/2007	FRI	TO: Sacramento	CA	[redacted]					[redacted]

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? (If YES, explain in item 22, REMARKS) on the SF 1012, Travel Voucher.) (Note: any deviations from the authorized itinerary requires a comparative cost statement)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? (If NO, justify in item 22)
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (sleepers, coaches, etc.) AUTHORIZED? (If YES, justify in item 22)
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? (If YES, check one box below and complete item 17B) [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE: 0.445
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? (If YES, justify in item 22) IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS (check one): [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD OBOLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS (Check one) (Note: If item 19b was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER (Explain in item 22)

21. FUNDS OBLIGATED: A. INITIALS B. DATE

22. REMARKS

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 435.00
B. TOTAL PER DIEM AND OTHER	$ 749.75
C. TOTAL ESTIMATED COST	$ 1184.75
25. ADVANCE AUTHORIZED	$ 0.00

24. TRAVEL ADVANCE WILL BE OBTAINED BY (check one): [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Mark Limbaugh, Asst. Secy., WS

27B. SIGNATURE (PRESS FIRMLY USE BALL POINT PEN): [signature]

27C. DATE: 2/12/07

GENERAL SERVICES ADMINISTRATION — GSA FORM 87 (REV. 6/98)

UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

Reimbursable Support Agreement
Fiscal Year 200 7

Parties to the Agreement

Customer Agency *(Paying Agency)*	Provider Agency *(Billing Agency)*
Bureau/Agency Name: Bureau of Reclamation	Bureau/Agency Name: DOI, OS, SIWRO
Address: 1849 C Street, NW washington, DC 20240	Address: 1849 C Street, NW MS 2321 Washington, DC 20240
Project Coordinator: Arlene Riley	Project Coordinator: J. Jamie Coaster-Barringotn
Signature: Arlene Riley	Signature: J. Jamie C B
telephone:	telephone: (202) 219-1384

Accounting Data

Document Number: 07.02.91.DN015	Document Number: RA7W0155
Appropriation: 14X0680	Appropriation: 14 7 0102
Account Info: A10.1523.4000.400.00.0.1	Account Info: 1000 DDR14 BR0155 68
Agency Location Code: 14X06X09.05	Agency Location Code: 14-01-0001

Description and Cost of Goods and/or Services to be Provided

This agreement is to be accomplished on the following basis:
☒ Time and Materials ☐ Fixed Price

Description of Service: (Include time frame involved, estimated costs by object class and a brief description of the service. Attach additional backup data as needed.)

Robert Laidlaw will be traveling to Washington DC for pre-meetings (12/11) and a one day retreat (12/12) w/Counselor and Assistant Secretaries to strategize on water right Settlements and time sensitive Secretarial commitments for water settlements. Travel to Las Vegas to negotiate a final settlement for Soboba (12/13-12/14) and meet with the 5 tribes involved in the San Luis Rey water Settlement. Attend CRWUA on (12/15) w/ Secretary Kempthorne. Travel to be reimbursed is Airplane, lodging, per diem, parking, lodging taxes, pov, rental car, and taxi as needed.

Obligational Authority Available	
Until (date)	8-1-2007
Initial or Current Amount	$ 2,100.00
Amendment Number	#
Amount	$
New Total Amount	$ 2,100.00

Approvals

CONDITIONS OF AGREEMENT: The Office of the Secretary is willing to enter into this agreement subject to the conditions stated on the second page of this form.

APPROVAL BY PAYING AGENCY	APPROVAL BY CUSTOMER AGENCY
Signature: Arlene Riley	Signature: Gary Weitzer
Date: 11/17/2006	Date: 11/21/07
Name: Arlene Riley	Name: Gary Weitzer
Title: Budget Officer / Program Analyst	Title: Budget Officer

This form was electronically produced by Elite Federal Forms, Inc.

DI-2017 (11/2001)

HUMPHREY'S
HALF MOON INN & SUITES

2303 Shelter Island Drive
San Diego, CA 92106
(619) 224-3411
Fax (619) 224-3478
For reservations, dial toll free
800-542-7400
www.halfmooninn.com

BOB LAIDLAW
(b) (6) [redacted]

Arrival Date	02/20/07
Departure Date	02/22/07
Account #	304412
Room #	244

DATE	DESCRIPTION	CHARGES	PAYMENTS
02/20/07	RO - Tax Exempt Rm Charge--Room # 244	$131.00	
02/21/07	RO - Tax Exempt Rm Charge--Room # 244	$131.00	
02/22/07	MC - MasterCard-(b) (6) [redacted]		($262.00)

Multiple winner of San Diego's Finest Service Award!!!

Balance Due **$0.00**

Union Tribune included in room charge of $.20 per day excluding weekends

In the event that I do not officially check out at my time of departure, or if I incurred charges subsequent to my checkout, I hereby authorize you to charge my credit card. I further acknowledge, regardless of billing instructions, that I am liable until the balance is paid in full.

X_____

Sacramento Int'l
Airport

Card Account : (b) (6) [redacted]
Card Type : Master Card
Authorization Code : 043196

Cashier : 25 Seq # 47614
License Plate : XX NOPLATE
Ent : 12:25 02/20/07 Lane 39
Exit: 14:37 02/22/07 Lane 52

FEE	$	30.00
AMOUNT TEND	$	30.00
CASH	$	0.00
CREDIT CARD	$	30.00
CHECK	$	0.00
CHANGE CALC	$	0.00

PAID AT CT $ 30.00
Taxes Included

*** Start Calculation Details ***
2 Day(s) @$12.00 = $24.00
3 Hour(s) @$2.00 = $6.00

*** End Calculation Details ***

*** Thank You ***

R. Laidlaw Southwest San Diego

From: "Southwest Airlines" <SouthwestAirlines@mail.southwest.com>

Sent: Sunday, February 18, 2007 11:17 AM
Subject: Ticketless Confirmation - LAIDLAW/ROBERT - 55XEW6

Southwest Airlines Receipt and Itinerary

Receipt and Itinerary as of 02/18/07 1:17 PM

Confirmation Number
55XEW6

Check In Online

Check In Online

Confirmation Date: 02/13/07
Received: ROBERT

Passenger Information

Passenger Name	Ticket#	Account Number
LAIDLAW/ROBERT	526-2372444722-1	(b) (6) [redacted]

Itinerary:

Date	Flight	Routing Details
Tue Feb 20	2643	Depart SACRAMENTO CA (SMF) at 1:50 PM Arrive in SAN DIEGO CA (SAN) at 3:15 PM
Thu Feb 22	2525	Depart SAN DIEGO CA (SAN) at 2:10 PM Arrive in SACRAMENTO CA (SMF) at 3:40 PM

Cost and Payment Summary

Air	$ 210.24
Tax	$ 22.56
PFC Fee	$ 9.00
Security Fee	$ 5.00

Total Payment: $246.80
Prior payment(s)
02/13/07 MASTERCARD (b) (6) [redacted] Ref 526-2371466130-2 $246.80

Fare Rule(s)
Valid only on Southwest Airlines. All travel involving funds from this Confirm no. must be completed by 02/13/08. Any change to this itinerary may result in a fare increase.

Fare Calculation:

GVT-1 SMFWNSAN YCASMF 113.00 SANWNSMF YCASMF 113.00 $226.00 ZP6.80 XFSMF4.50 SAN4.50 AYSMF2.50 SAN2.50 $246.80

Important Checkin Requirement

TRAVEL AUTHORIZATION COVER SHEET

NAME OF TRAVELER: Robert Laidlaw

DATES OF TRAVEL: **February 20-23, 2007**

PURPOSE AND LOCATION OF TRAVEL:
Location is San Diego, California. Purpose is to assist Counselor to the Secretary Michael Bogert with Indian water rights negotiations involving proposed settlements of water rights claims of the Soboba Band of Luiseno Indians and the five Indian Bands having rights in the San Luis Rey River basin, California. Meetings will be scheduled with team chairmen and tribal leaders involved in several Montana water rights settlements and settlements in New Mexico. Additionally, will staff Counselor Bogert in a meeting scheduled with representatives of the Ad Hoc Group on Indian Water Rights (composed of Native American Rights Fund, Western Governor's Association, Western Regional Council and Western States Water Council) to discuss Secretary Kempthorne's policies/initiatives on Indian water rights settlements.

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL:
Negotiations involving the Soboba Band are critical to allow Secretary Kempthorne, in conjunction with his remarks at the ABA water conference, to announce an Administration-supported Indian water rights settlement. Other meetings are essential to fulfill commitments made by Counselor Bogert to become actively and personally involved in the San Luis Rey settlement and to communicate with Western water rights stakeholders represented by the Ad Hoc Group on Water Settlements.

ESTIMATED COST OF TRIP:

Airfare =	$ 200.00
Hotel =	$ 450.00
Per diem=	$ 224.00
Total charges for travel $925.00	

Total charges for 4 days travel = $ 925.00

COSTS FOR THIS TRAVEL WOULD BE PAID BY (check one):

- ■ OS Travel Account
- ☒ Bureau Travel Account by reimbursable agreement already in place.

Name of Bureau: Bureau of Reclamation

OFFICE SURNAME: (Office Director must surname.) SIWRO/Date 1/27/07

For IOS Offices – Assistant Secretary or Office Director Approval/Date: 2/1/07

For PMB – DAS Approval/Date: _____

APPROVAL:

This travel is: ☒ APPROVED ☐ NOT APPROVED.

Signature: _____

Doug Domenech, Deputy COS, Brian Waidmann, COS, Tom Weimer, ASPMB

TRAVEL: Robert M LARDLAW 2/20-22/07

TA # SIWRO FY07 W-4

PURPOSE CHAIR SETTLEMENT NEGOTIATIONS WITH SOBOBA, SAN LUIS REY & MTC W/ COUNSELOR TO THE SECRETARY

PER DIEM EXPS

2.20.07 LV. SACRAMENTO @ 1:30pm, ARRIVE SD @ 4pm

2.21.07 ON DUTY SAN DIEGO

2.22.07 LV SAN DIEGO @ 1pm, Arrive SACRAMENTO @ 4pm

Hotel

Two Nights @ $ 131.00

MISC

TAXI

2.21	Hotel to Mtg	$ 15.00 CASH
2.21	MEETING TO HOTEL	$ 14.00 " "
2.22	Hotel to Downtown SD	$ 15.00
2.22	Meeting to Hotel	$ 15.00
2.22	Hotel to Airport	$ 5.00

POV Milage 112 miles Residence to Airport & Return

Airport Parking $30.00

R. Laidlaw Southwest San Diego

From: "Southwest Airlines" <SouthwestAirlines@mail.southwest.com>

Sent: Sunday, February 18, 2007 11:17 AM
Subject: Ticketless Confirmation - LAIDLAW/ROBERT - 55XEW6

Southwest Airlines Receipt and Itinerary

Receipt and Itinerary as of 02/18/07 1:17 PM

Confirmation Number
55XEW6

Check In Online

Check In Online

Confirmation Date: 02/13/07
Received: ROBERT

Passenger Information

Passenger Name	Ticket#	Account Number
LAIDLAW/ROBERT	526-2372444722-1	(b) (6) [redacted]

Itinerary:

Date	Flight	Routing Details
Tue Feb 20	2643	Depart SACRAMENTO CA (SMF) at 1:50 PM Arrive in SAN DIEGO CA (SAN) at 3:15 PM
Thu Feb 22	2525	Depart SAN DIEGO CA (SAN) at 2:10 PM Arrive in SACRAMENTO CA (SMF) at 3:40 PM

Cost and Payment Summary

Air	$ 210.24
Tax	$ 22.56
PFC Fee	$ 9.00
Security Fee	$ 5.00

Total Payment: $246.80
Prior payment(s)
02/13/07 MASTERCARD (b) (6) [redacted] Ref 526-2371466130-2 $246.80

Fare Rule(s)
Valid only on Southwest Airlines. All travel involving funds from this Confirm no. must be completed by 02/13/08. Any change to this itinerary may result in a fare increase.

Fare Calculation:

GVT- 1 SMFWNSAN YCASMF 113.00 SANWNSMF YCASMF 113.00 $226.00 ZP6.80 XFSMF4.50 SAN4.50 AYSMF2.50 SAN2.50 $246.80

Important Checkin Requirement

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

AIR 246.80 E Ticket 10-40

AGENT FEE

LODGING 262.00

RENTAL CAR

GAS

PARKING 30.00

TAXI / SHUTTLE

VXRF checked

CHECKED MAR 2 8 2007

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	D

Julian Date	Prep Unit	Sequence Number
082	VS	B

Batch Totals

Input Date	Number of Documents
3/23/07	5

206.50	+
[illegible].50	+
110.53	+
278.[illegible]0	+
[illegible]62.32	+
1,077.85	*

System Checked By: _____ Date _____

Batch Approval

Approved By: Jm

Date Approved: 3-27-07

CHECKED MAR 28 2007

no Card

2007 Russell

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE

2. TYPE OF TRAVEL
[X] TEMPORARY DUTY
[ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO. 2007-Russell

4. SCHEDULE NO.

5. a. NAME *(Last, first, middle initial)*: Russell, Majel

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

c. MAILING ADDRESS *(Include ZIP Code)*: Washington, DC

d. OFFICE TELEPHONE NO.

e. PRESENT DUTY STATION: Washington, DC

f. RESIDENCE *(City and State)*: (b) (6) [redacted]

6. PERIOD OF TRAVEL
a. FROM 05/28/2007 b. TO 05/29/2007

7. TRAVEL AUTHORIZATION
a. NUMBER(S) 2007-Russell
b. DATE(S) 07/26/2007

8. TRAVEL ADVANCE
a. Outstanding
b. Amount to be applied 0.00
c. Amount due Government 0.00
(Attached [ ] *Check* [ ] *Cash)*
D. Balance outstanding

9. CASH PAYMENT RECEIPT
a. DATE RECEIVED
b. AMOUNT RECEIVED $
c. PAYEE'S SIGNATURE

Document ACCEPTED AUG 17 2007

10. CHECK NO.

11. PAID BY

TDY

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	1,349.10	NA	Y	05/22/2007	Billings, Montana DCA-Washington Nati

211d - 311.26

211I - 38.00

COMMENTS:
Trip Number 1. Actual lodging and per diem NTE 300% as authorized in accordance with the Federal Travel Regulations CWT Administrative Fee is $26.00.
Approved ____ signing official.

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ Majel Russell DATE 7/31/07 AMOUNT CLAIMED ▶ 349.26

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ Doug Domenech Depty Chief of Staff DATE

17. *FOR FINANCE OFFICE USE ONLY*
COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* $

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION
a. VOUCHER NO.
b. D.O. SYMBOL
c. MONTH & YEAR

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION
Certifier's initials: $

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):* $ 0.00

d. NET TO TRAVELER ▶ $ 349.26

18. ACCOUNTING CLASSIFICATION
SIO-2007.1000DDD01...68..... - 349.26 NR- 1,375.10

8/17/07

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel:
- Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.
- (h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).
- (i) Complete for per diem and actual expense travel.
- (j) Show total subsistence expense incurred for actual expense travel.
- (m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
- (n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

188/64

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. 2007-Russell

TRAVELER'S LAST NAME Russell

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.000 NO. OF MILES (k)	MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
05/28	2:10P	D-:RES: Billings,M											
05/28		Airline Flight											
05/28	2:10P	A-:WASHINGTON,DC				48 00		188 00	236.00			236 00	
05/28		Parking-cash (non-airport)											38 00
05/28		Ticket Agent Fee											
05/28		Taxes for Lodging											27 26
05/29	11:00P	D-:WASHINGTON,DC											
05/29	11:00P	A:RES: Billings,MO											
05/29		Subsistence				48 00			48.00			48 00	
									SUBTOTALS ▶		0 00	284 00	65 26
									TOTALS ▶		0 00	284 00	65 26

If ad

In co... videc... Chap... E.O. ... Nove... of th... eligi... und... cost... use... pert... app...

64 × 75 % 48.00 * 48.00 + 48.00 + 96.00 * 96.00 + 188.00 + 284.00 * 38.00 + 27.26 + 65.26 * 65.26 + 284.00 + 349.26 *

... this agency in connection with the hiring or firing of an ... issuance of a security clearance, or investigations of the per... ...cial duty while in Government service. Your Social Security ...er (SSN) is solicited under the authority of the Internal ... (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, ...s a tax payer and/or employee identification number; disclosure ...RY on vouchers claiming travel and/or relocation allowance ...bursement which is, or may be, taxable income. Disclosure of other requested information is voluntary in all other instances; ...re to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 349.26

DOI NATIONAL BUSINESS CENTER 07 AUG 13 PM 12:38

STANDARD FORM 1012 BACK (10-77)

07/27/07 ACCOUNTING DETAIL |Doc No: 2007-Russell
Copyright 1989-2004 Gelco Information Network, Inc
|Russell, Majel (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			1,349.10
HOTEL TAXES-			27.26
LODGING-409			188.00
M&IE-409			96.00
MISC EXPENSE-409			38.00
TRAVEL AGENT-			26.00
SIO	0.00	0.00	1,724.36

Organization:
2007.1000DDD01...68.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,724.36
NON-REIMBURSABLE EXPENSES		1,375.10
TOTAL AMOUNT CLAIMED		349.26
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED	0.00	
		0.00
NET TO TRAVELER (GOVT)		349.26
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		349.26

UNITED STATES
DEPARTMENT OF THE INTERIOR
FORM NO. DI-1020
FORM APPROVED BY COMP. GEN. U.S.
NOVEMBER 8, 1949

TRAVEL AUTHORIZATION

1. No. 2000-1000-Russell
2. 05-16-2007 (DATE)

3. OS (BUREAU OR OFFICE)

4. NAME Majel Russell, (b) (6) [redacted]

5. OFFICIAL STATION Washington, DC

6. TITLE

7. ACCOUNTING OFFICE Washington, DC

You are authorized to travel as indicated below and to incur necessary expenses in accordance with applicable laws and regulations.

PLACES OF TRAVEL

8. FROM: Billings, Montana
9. TO: Such places in the contigous US, AK., Hi, PR and US Territories as may be necessary, and return. Accomplish & missions. Official business.

10. PURPOSE AND REMARKS:

Official business as may be required. I certify that the travel herein was reviewed and determined to be essential for accomplishments of DOI programs and missions. Payments from a non-Federal source for travel-related expenses is authorized under 31 U.S.C. 1353, provided that prior to acceptance, the conditions for each case comply with 41 CFR 304-1 and Part 274 DM 5, and are fully documented and approved via DI 2000.

11. PER DIEM ALLOWANCE:

Actual lodging and per diem NTE 300% as authorized in accordance with the Federal Travel Regulations as issued by GSA and published in the Federal Travel Register. Candidate for position with the Deputy Assistant Secretary for Indian Affairs.

12. PERIOD OF TRAVEL: Beginning on or about 05-28-2007 **Ending on or about** 05-30-2007

MODE OF TRAVEL

13. ☐ Common carrier
14. ☐ Extra fare
15. ☐ Government-owned conveyance at a mileage rate of cents, subject to:
16. ☐ Privately owned
    - *(a)* ☐ Administratively determined to be the advantage of the Government
    - *(b)* ☐ A showing of advantage to the Government
    - *(c)* ☐ Not to exceed cost by common carrier, including consideration of Per Diem allowance

MISCELLANEOUS

17. ☐ Transportation immediate family
18. ☐ Other *(specify)*
    Excess baggage, taxi fares, telephone calls, rental cars/fuel, conference rooms, POV, public transportation, tolls, newspapers, faxes, misc. supplies, registrations/ATM fees in accordance with FPMR 101-7, et. seq.
19. Shipment household goods and personal effects

ESTIMATED COST

20. Transportation	$	1,349.10
21. Per Diem		564.00
22. Other		200.00
23. TOTAL	$	2,113.10

24. CHARGED TO:
2007-1000-DDD01 68

25. (FISCAL OFFICER'S SIGNATURE)

26. Majel Russell (REQUESTER'S SIGNATURE)

27. (TITLE)

28. (AUTHORIZING OFFICER'S SIGNATURE)

29. Doug Domenech, Deputy Chief of Staff (TITLE)

This form was electronically produced by Elite Federal Forms, Inc.

Carlson Wagonlit Travel

May 22, 2007

For: MAJEL RUSSELL
To: DOI

Sales Person: AN
Locator: LCMTAX
Customer Number: (b) (6) [redacted]

THIS INVOICE IS PROOF OF YOUR ELECTRONIC TICKET TRANSACTION.
IF A REFUND IS NEEDED PLEASE CALL CARLSON WAGONLIT TRAVEL.
YOUR AIRFARE ON 22MAY AT 1317 IS 1186.10

Monday May 28, 2007

Northwest Airlines — Flight Number: 1046
Class of Service:Coach Class Y
Depart: BILLINGS, MT — 2:10 Pm May 28, 2007
Arrive: MINNEAPOLIS,MN — 5:04 Pm May 28, 2007
Total Flight Time: 1 Hour 54 Minutes Non-Stop
Equipment: 319
Meal Service: None
Status: Confirmed — Confirmation Number: 2EP980
Reserved Seat: RUSSELL/MAJEL 8E
ARR-LINDBERGH TERMINAL

Monday May 28, 2007

Other Service
May 28, 2007 - May 28, 2007
SEAT/MIDDLE SEAT BEST AVAILABLE AT TIME OF BOOKING, PLEASE
RE-CHECK AT GATE FOR BETTER SELECTION.

Monday May 28, 2007

Northwest Airlines — Flight Number: 1274
Class of Service:Coach Class Y
Depart: MINNEAPOLIS,MN — 6:50 Pm May 28, 2007
Arrive: WASHINGTON/NATL,DC — 10:07 Pm May 28, 2007
Total Flight Time: 2 Hours 17 Minutes Non-Stop
Equipment: Airbus Industrie 320
Meal Service: Available For Purchase
Status: Confirmed — Confirmation Number: 2EP980
Reserved Seat: RUSSELL/MAJEL 17C
DEP-LINDBERGH TERMINAL ARR-TERMINAL A

Monday May 28, 2007

WASHINGTON/NATL,DC
UTELL INTERNATIONAL STATE PLAZA HOTEL
2117 E STREET NW
WASHINGTON DC 20037
Phone Number: 202-861-8200
Fax Number: 202-659-8601

Number of Rooms: 1
Rate: 188.00 USD Per Night
Check In: May 28, 2007
Check Out: May 29, 2007
Confirmation Number: 110282687
Cancellation Policy: Cancel 1 day prior
NONSMOKING-2QUEEN

Monday May 28, 2007

Other Service
May 28, 2007 - May 28, 2007
SEAT/MIDDLE SEAT BEST AVAILABLE AT TIME OF BOOKING, PLEASE
RE-CHECK AT GATE FOR BETTER SELECTION.

Tuesday May 29, 2007

Frontier Airlines — Flight Number: 725
Class of Service:Business Class D
Depart: WASHINGTON/NATL,DC — 6:00 Pm May 29, 2007
Arrive: DENVER, CO — 7:52 Pm May 29, 2007
Total Flight Time: — 3 Hours 52 Minutes Non-Stop
Equipment: 319
Meal Service: Snack
Status: Confirmed — Confirmation Number: GSOING
Reserved Seat: RUSSELL/MAJEL 6E
DEP-TERMINAL C

Tuesday May 29, 2007

Other Service
May 29, 2007 - May 29, 2007
SEAT/MIDDLE SEAT BEST AVAILABLE AT TIME OF BOOKING, PLEASE
RE-CHECK AT GATE FOR BETTER SELECTION.

Tuesday May 29, 2007

Frontier Airlines — Flight Number: 4314
Class of Service:Business Class D
Depart: DENVER, CO — 9:40 Pm May 29, 2007
Arrive: BILLINGS, MT — 11:00 Pm May 29, 2007
Total Flight Time: — 1 Hour 20 Minutes Non-Stop
Equipment: CR7
Meal Service: None
Status: Confirmed — Confirmation Number: GSOING
Reserved Seat: RUSSELL/MAJEL 12D
*DEN-BIL OPERATED BY FRONTIER JETEXPRESS - HORIZON AIR

Monday November 26, 2007

Other Service
Nov 26, 2007 - Nov 26, 2007
INFORMATION/THANK YOU FOR USING CARLSON WAGONLIT TRAVEL

2:30

Delta - 71 lt
leaves @ 3:45 pm
Dulles -
Billings 8:59 -

taxi shuttle

ELK RIVER LAW OFFICES, P.L.L.P.

Attorneys at Law

Majel M. Russell
Sam S. Painter
Nancy L. Rohde

Office: (406) 259-8611
Facsimile: (406) 259-3251
elkriverlaw@elkriverlaw.com

P.O. Box 928
Billings, MT 59103-0928
3317 3rd Avenue North
Billings, MT 59101

MEMO

TO: Diane Calhoun

FROM: Lynne Walksalong

SUBJECT: Reimbursement on Lodging and Taxi

DATE: 7/25/07

Ms. Calhoun, Here is a copy of the Lodging stay in DC and Majel's parking at the Airport for the 2 days she was gone. She did not give me any Taxi receipts for this trip. Sorry for the Delay in getting this to you. We sent for the receipt and then misplaced it so I sent for another one. The Routing # for our bank Account is 092905249 the account # is (b) (6) [redacted] Thanks, Lynne

TRAVEL / EXPENSE REPORT

Employee/Traveler Name: Majel Russell

Dates of Travel and Destination:

Date: ~~5~~ 5-28-07 Destination: Washington DC.

Date: 5-29-07 Destination: ~~Denver~~ Billings MT

Date: _____ Destination: _____

Air Travel Expense (✈): $ _____

Lodging Expense (⌂): $ 215.26

Cab Fare (✇): $ _____

Car Rental (©): $ _____

Per diem (Food @ $42.00/day): $ _____

Registration Fee: $ _____

Miscellaneous Expenses: $ 19.00 | 19.00
(Please list) Airport Parking

$ _____

$ _____

$ _____

TOTAL: $ 234.26

(Attach receipts for all items except food.)

Less Travel Advance: - _____

Amount Due Traveler/Employee: $ _____

Complete the information below for Billing purposes.

Bill (Amount) $ _____

To (Client Name): _____

Reason for Travel / Expense: _____

Reason for Travel / Expense: _____

RB properties, inc.

The Henley Park Hotel • State Plaza Hotel • Hotel Lombardy
Morrison-Clark Inn • Washington Plaza
Sea Catch Restaurant

Russell, . Majel

Arrival Date: 05/28/07
Departure Date: 05/29/07
No. In Party: 1
Folio Number: 656349

State Plaza Hotel
S329

Date	Transaction		Description			Charges	Payment
05/28/07	ROOM	1	NIGHTLY RATE		--	188.00	
05/28/07	TX1	1	ROOM SALES TAX		--	27.26	
05/29/07	MC	1	(b) (6) [redacted]	0111	MY		215.26
			Subtotals			$ 215.26	215.26

PAID IN FULL --- THANK YOU!

188/64

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person or company or association fails to pay for any part of the full amount of these charges. I also agree that all charges contained in this account and any disputes or requests for copies must be made within five days of my departure.

Guest Signature _____

Standard Parking
1901 Terminal Cr
Billings MT 59105

Fee Computer Number:	7
Cashier:	MARVA ID #7
Transaction Number:	69
Entered:	05/28/07 13:07
Exited:	05/31/07 19:27
Ticket #58435	Dispenser #1
Rate:	Short Term Nov 2005
Total Fee:	**$38.00**
Master Card	$38.00

(b) (6) [redacted]

Thank you for choosing
Standard Parking
Have a nice day

To: **Sheila Wilson**
Accounting Operations, FNMS
Office of the Secretary

From: Dianne Calhoun, OS

Date: **May 18, 2007**

Approving Official: Patricia Connally
Staff Assistant, Office of the Secretary

SUBJECT: Request to Authorize Use of the Corporate Travel Account

This memorandum requests authorization for use of the Office of the Secretary Corporate Travel Account (transportation tickets only) for the following travelers:

Traveler's Name	Majel Russell
Travel Authorization Number::	2007-1000-
Cost Accounting Number:	2007-1000-DDD01-68
Destination:	Washington, D.C
Purpose:	Candidate for position with the Deputy Assistant Secretary For Indian Affairs

Thank you,

Dianne

AUG 1 3 2007

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	0

Julian Date	Prep Unit	Sequence Number
229	VS	e

Batch Totals

Input Date	Number of Documents	Net Total (Required)
8/17/07	5	

System Checked By: _____ Date _____

Batch Approval

Approved By: Jm

Date Approved: 8-17-07

CHECKED AUG 20 2007

New Emp 2/28/07 - left message used

02/20/07 VOUCHER
PAGE 1 ** Read Privacy Act On Last Page **

Voucher: Bank 7103000010
TA Num: 7103000010

1) NAME: Warren, Sharon E.

SSN: (b) (6) [redacted]

ADDR: 1689 C Street
Suite 100
Anchorage, AK 99501

PHONE: 907-271-5485
MAIL CD:
ORG: DOI/OS - Alaska
TITLE: Special Assistant
SEC CLR:
CARD: CARD HOLDER

DUTY: Anchorage, AK TZ:11
RES: Anchorage, AK
HOURS: 8

Rec'd Fat 02/28/07

2) FROM	TO	TA NUM	TA DATE	TRIP PURPOSE	TRIP TYPE
02/08/2007	02/08/2007	7103000010	02/02/2007	OTHER (see below)	

Recvd my Dest 2/23/07 BD

3) GTR/TICKET NO	VALUE	CR	CLS	DATE	FROM	TO
027781468173	773.80			02/05/2007		
Service Fee 814015783	26.00					
37						

4) ACCT CLASS CODE	TRIP 3	TRIP 2	TRIP 1
BLM - 2007			901.40
1000.DDR06LM008568.BLM AK.AK910.1310PP.ARAC....			

5) FINANCE OFFICE

RECD '07 FEB 22 AM 11:55

Document ACCEPTED MAR 05 2007

CHECKED MAR 06 2007

07 FEB 22 AM 11:14

6) NON-REIMBURSABLE EXPENSES		799.80
TOTAL AMOUNT CLAIMED		101.60
ADVANCE OUTSTANDING	0.00	
ADVANCE APPLIED	0.00	0.00
NET TO TRAVELER (GOVT)		101.60

=Copyright 2002 Gelco Information Network GSD, Inc.

I certify that this Voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. I hereby assign the United States any right I may have against any parties in connection, with reimbursable transportation charges described above, purchased under cash payment procedures (41 CFR Part 301-10).

7) TRAVELER SIGNATURE Sharon E Warren DATE 2/20/07

8)
VOUCHER NO:
SCHEDULE NO:
CERTIFIED BY:
DATE:

This Voucher is approved. Long distance telephone calls, if any, are certified as necessary in the interest of the Government. (Note: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a)).

9) APPROVED, Hans Neidig, Special Assistant DATE 2/20/07

Hans Neidig

10)
CASH RECEIPT DATE
AMOUNT
SIGNATURE

(11) ITINERARY AND TRANSPORTATION EXPENSES - TRIP NO 1

DATE	TIME	DEPARTED/ARRIVED LOCATIONS	MODE	COST	DESCRIPTION
02/08/2007		D-RES: Anchorage,AK			
02/08/2007			AIR	26.00*	Airline Flight
02/08/2007			AIR	773.80*	Airline Flight
02/08/2007			1POC	[redacted]	Private Vhcle
02/08/2007				Distance: 30 Rate: .445	
02/08/2007			PARK	[redacted]	Parking Fees
02/08/2007			CAB	[redacted]	Taxi
02/08/2007		A-BARROW,AK			
02/08/2007		D-BARROW,AK			
02/08/2007		A RES: Anchorage,AK			
		TOTAL TRANSPORTATION EXPENSES		830.15	

159/96

(12) SUBSISTENCE AND OTHER REIMBURSABLE EXPENSES

DATE	ALS L D	M&IE ALLOW	P-DIEM RATE	OTHER EXPENSES	AMOUNT
02/08		71.25	159/95		0.00
		71.25			0.00

===(13
Trave
BLM C
1000D
BLM C

VERCIV

* Ex

======

SA - RA7W0085

P-ARAC

=Copyright 2002 Gelco Information Network GSD, Inc.

eimbursement.

907-271-5485

ception to SF 1012

NOTE: m in an expense account works a forfeiture of claim y result in a fine of not more than $10,000 or impris n 5 years or both (18 U.S.C. 287; i.d. 1001).

In con y Act of 1974, the following information is provided: ormation on this form is authorized by 5 U.S.C. Chap. e Federal Travel Regulations (41 CFR 301-304), E.O. 1 E.O. 11012 of March 27, 1962, E.O. 9397 of Nov. 22, 19) and 6109. The primary purpose of the requested inform ayment or reimbursement to eligible individuals for a elocation expenses incurred under appropriate admin and to record and maintain costs of such reimburse The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by

02/20/07 ACCT DETAIL | Doc No: 7103000010
Copyright 2002 Gelco Information Network, Inc. | Warren, Sharon (b)(6) [redacted]

ACCT CLASS CODE			TRIP 1
COM. CARRIER-408			799.80
M&IE-409			71.25
MILEAGE-408			13.35
TRANSPORT-409			17.00
BLM - 2007	0.00	0.00	901.40

Organization:
1000.DDR06LM008568.BLM AK.AK910.1310PP.ARAC....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		901.40
NON-REIMBURSABLE EXPENSES		799.80
TOTAL AMOUNT CLAIMED		101.60
GOV'T ADVANCE OUTSTANDING	0.00	
GOV'T ADVANCE APPLIED	0.00	
		0.00
NET TO TRAVELER (GOVT)		101.60
GOV'T CHARGE CARD EXPENSES	0.00	
GOV'T CHARGE CARD ATM ADV	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		101.60

Carlson Wagonlit Travel

WARREN/SHARON E

05-Feb-2007 11:34 am

Page 1 of 1

Booking locator: KALFKS

DOI
OK 02FEB .

YOUR ESTIMATED AIRFARE ON 02FEB AT 1342 IS 773.80

08-Feb-2007
07:30am
Thursday

Air Alaska Airlines
From: Anchorage AK, USA
Meal: None
Equip: 73Q
Depart: 08-Feb-2007 Thursday [redacted]
Arrival: 08-Feb-2007 Thursday 10:30am

Flight# 143 Class: Y
To: Barrow AK, USA
Seats: Seat:21D
Status: Confirmed
Stops: 1 (Fairbanks Intl AK)

Alaska Airlines locator: FTMEDD
AS Frequent Flyer# (b) (6) [redacted]-WARREN/SHARON E
Flight Duration: minutes

08-Feb-2007
07:20pm
Thursday

Air Alaska Airlines
From: Barrow AK, USA
Meal: None
Equip: 73Q
Depart: 08-Feb-2007 Thursday 07:20pm
Arrival: 08-Feb-2007 Thursday [redacted]

Flight# 146 Class: Y
To: Anchorage AK, USA
Seats: Seat:22C
Status: Confirmed
Stops: 1 (Fairbanks Intl AK)

Alaska Airlines locator: FTMEDD
AS Frequent Flyer# (b) (6) [redacted]WARREN/SHARON E
Flight Duration: 1 hours 20 minutes

07-Aug-2007
Tuesday

Other

INFORMATION
THANK YOU FOR CALLING CARLSON WAGONLIT TRAVEL

12 hrs

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
THANK YOU FOR BOOKING CARLSON WAGONLIT TRAVEL
PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT
LOCAL CALLS FOR ANCHORAGE 907-565-4400
CARLSON RESERVATIONS 800 NUMBER 877-565-4480
AFTER HOURS EMERGENCY 866-697-8916 PASSCODE SL3GB
CARLSON FAX LOCAL NUMBER 907-565-4401
CARLSON FAX TOLL FREE 877-565-4481
CAR DECLINED/A//02FEB
LODGING DECLINED//02FEB
TICKETS WILL BE ISSUED TO INDIVIDUAL GOVT CREDIT CARD
THE TRANSACTION FEE WILL APPEAR SEPARATELY ON YOUR
CREDIT CARD STATEMENT.
THE TRANSACTION FEE IS A NON-REFUNDABLE CHARGE.

Ticket Information

WARREN SHARON E
Ticket#: 0277814681763
Invoice#: 0181278

Ticket Base Fare: 708.84
Ticket Tax: 64.96
Total Ticket Amount: 773.80

Electronic: YES

Service Fee Document #: 8140157837 Fee: 26.00

ResFAX® Copyright© 2007 Cornerstone Information Systems, Inc., Bloomington, IN

Travel Barrow 2/28/2007 – Sharon Warren

5:45 a.m. POV/to airport 15 miles - OW

7:20 am to 10:30 a.m. – Travel to Barrow via Alaska Airlines
Taxi to Meeting $6.00
10:30 a.m. to 6:30 p.m. – Meeting n Barrow

7:20 p.m. to 10:30 p.m. Return Travel to Anchorage via Alaska Airlines
Travel to airport was provided by Ben Nageak

11:00 p.m. – Arrive home by POV – 15 miles Airport parking $11.00

Parking Receipt attached.

RECEIPT
ANCHORAGE INTL AIRPORT
------0630 22:38:48 02-08-2007 05-----

491 4 286701 06:04 02/08 22:38 02/08

PARKING 11.00

CASH 11.00

REPUBLIC PARKING SYSTEM
PHONE 907-677-1074
-----THANK YOU FOR PARKING WITH US----

TRAVEL AUTHORIZATION COVER SHEET

Instructions: Please fill out this sheet and submit it with your completed Travel Authorization Request sheet.

NAME OF TRAVELER: Sharon Warren, Resource Program Analyst, SIO-AK Affairs

DATES OF TRAVEL: February 8, 2007

PURPOSE AND LOCATION OF TRAVEL: To attend BLM announcement meeting with community and tribal leaders regarding the Secretary's announcement of Ben Nageak as BLM representative in Barrow, Alaska, per the Secretary's North Slope Initiative.

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL: _____

ESTIMATED COST OF TRIP: $919.15

FOR THIS TRAVEL WOULD BE PAID BY (check one):

☐ OS Travel Account

☒ Bureau Travel Account by reimbursable agreement already in place.

Name of Bureau: **Bureau of Land Management, Anchorage, Alaska**

==========

OFFICE SURNAME: (Office Director must surname.)

For IOS Offices – Assistant Secretary or Office Director Approval/Date: _____

For PMB – DAS Approval/Date: _____

==========

APPROVAL:

This travel is: ☒ APPROVED ☐ NOT APPROVED

Signature: _____

Brian Waidmann, Chief of Staff/Tom Weimer, ASPMB

02/15/07 AUTHORIZATION | DOC NO: 7103000010
PAGE 1 ** Read Privacy Act On Last Page ** | TA NUM: 7103000010

1) NAME: Warren, Sharon E. SSN: (b) (6) [redacted]

ADDR: 1689 C Street
Suite 100
Anchorage, AK 99501

PHONE: 907-271-5485
MAIL CD:
ORG: DOI/OS - Alaska
TITLE: Special Assistant
SEC CLR:
CARD: CARD HOLDER

DUTY: Anchorage, AK TZ:11
RES: Anchorage, AK
HOURS: 8

2) TA NUM: 7103000010 DATE: 02/02/2007 TYPE:

3) TRAVEL PURPOSE: OTHER (see below)
To Attend BLM & Secretary's Announcement Meeting w/Community & Tribal Leade
rs regarding Ben Nageak as BLM Rep in Barrow per Secretary's NSI.

4) GENERAL ITINERARY

DATE	TIME	DEPARTED/ARRIVED LOCATIONS	PER DIEM RATE
02/08/2007		D-RES: Anchorage,AK	
02/08/2007		A-BARROW,AK	159/95
02/08/2007		D-BARROW,AK	
02/08/2007		A RES: Anchorage,AK	

5) OTHER AUTHORIZATIONS
OTHER PRIVATELY-OWNED VEHICLE

6)	EST COST	ADV AMT
COM. CARR	799.00	0.00
M&IE	71.25	71.25
MILEAGE	8.90	8.90
TRANSPORT	40.00	40.00
TOTAL	919.15	120.15
ADVANCE AUTHORIZED		0.00

7) ACCT CLASSIFICATIONS EST COST
BLM - 919.15

8) REMARKS
BLM Client-funded Travel

9) AUTHORIZED BY	TITLE	DATE	INITIALS	DATE
Hans Neidig	Special Assistant	2/7/07		

Hans

~~10) FUNDS OBLIGATED~~

==VERSION CIV==========Copyright 2002 Gelco Information Network GSD, Inc.======

11) GTR/TICKET NO	VALUE	CR	CLS	DATE	FROM	TO
See Attached Ticket	773.00					
Service Fee	26.00					

12) ITINERARY AND TRANSPORTATION EXPENSES - TRIP NO 1

DATE	TIME	DEPARTED/ARRIVED LOCATIONS	MODE	COST	DESCRIPTION
02/08/2007		D-RES: Anchorage,AK			
02/08/2007			AIR	26.00*	Airline Flight
02/08/2007			AIR	773.00*	Airline Flight
02/08/2007			1POC	8.90	Private Vhcle
Distance: 20 Rate: .445					
02/08/2007			PARK	25.00	Parking Fees
02/08/2007			CAB	15.00	Taxi
02/08/2007		A-BARROW,AK			
02/08/2007		D-BARROW,AK			
02/08/2007		A RES: Anchorage,AK			
		TOTAL TRANSPORTATION EXPENSES		847.90	

13) SUBSISTENCE AND OTHER REIMBURSABLE EXPENSES

DATE	ACTUAL LODGING	LODGING ALLOWED	MEALS B L D	M&IE ALLOW	P-DIEM RATE	OTHER EXPENSES	AMOUNT
02/08	0.00	0.00		71.25			0.00
		0.00		71.25			0.00

VRCIV=RATE TABLE DATE=12/01/06=Copyright 2002 Gelco Information Network GSD, Inc

* Expense not claimed for reimbursement.

Exception to GSA Form 87

In compliance with the Privacy Act of 1974, the following information is provided: Basic authority for requiring the requested information is contained in 5 USC 5701-5733, particularly sections 5721-5733, 30 USC 905 and Executive Order 9397. Disclosure of the data by you is voluntary. The principal purpose for collecting the data is to determine the amount to reimburse an employee for expenses incurred in connection with temporary duty travel. Information may be transferred to appropriate Federal, State, local or foreign agencies when relevant to civil, criminal or regulatory investigations or prosecutions. There is no personal liability to you if you do not furnish the requested information; however, we shall not be able to reimburse you for your expenses.

02/15/07 ACCT DETAIL | Doc No: 7103000010
Copyright 2002 Gelco Information Network, Inc. | Warren, Sharon (b) (6) [redacted]

ACCT CLASS CODE			TRIP 1
COM. CARRIER-408			799.00
M&IE-409			71.25
MILEAGE-408			8.90
TRANSPORT-409			40.00
BLM	0.00	0.00	919.15

Organization:
.....

Margaret Kuyumjian/POB/OS/DOI
02/13/2007 10:04 AM

To Ann Jurva/SIO/OS/DOI@DOI
cc Ron McCoy/SIO/OS/DOI@DOI, Laura C Curlett/SIO/OS/DOI@DOI
bcc
Subject Re: BLM Reimbursable Account Number

Okay, I think I am remembering now ..... The account to charge for her travel is (b) (6) [redacted] and the RSA number is (b) (6) [redacted] You will need to work with Laura Curlett to ensure that the trip gets posted to the correct account.

Hope this works.

Margaret Kuyumjian
202 208-3996
Ann Jurva/SIO/OS/DOI

Ann Jurva/SIO/OS/DOI
02/13/07 12:33 PM

To Margaret Kuyumjian/POB/OS/DOI@DOI
cc Ron McCoy/SIO/OS/DOI@DOI
Subject Re: BLM Reimburseable Account Number

It defaults to our OS account. She had to get a card from us when she came over here. When her detail is done she will have to go back to a BLM card.

2007 1030 WSW01 68211C

Ann Jurva
U.S. Department of the Interior
Office of the Secretary - Alaska
1689 C Street, Suite 100
Anchorage, AK 99501
(907) 271-5485 Ph.
(907) 271-4102 Fax
Margaret Kuyumjian/POB/OS/DOI

Margaret Kuyumjian/POB/OS/DOI
02/13/2007 06:17 AM

To Ann Jurva/SIO/OS/DOI@DOI
cc Ron McCoy/SIO/OS/DOI@DOI
Subject Re: BLM Reimburseable Account Number

Where does her credit card default too??

Margaret Kuyumjian
202 208-3996
Ann Jurva/SIO/OS/DOI

Ann Jurva/SIO/OS/DOI
02/12/07 06:44 PM

To Margaret Kuyumjian/POB/OS/DOI@DOI
cc Ron McCoy/SIO/OS/DOI@DOI
Subject BLM Reimburseable Account Number

Sharon Warren/SIO/OS/DOI
02/05/2007 11:22 AM

To Ann Jurva/SIO/OS/DOI@
cc
bcc
Subject Fw: barrow travel/ cost c

It looks like the code Leah sent is a little different than what was sent befor
Leah sent. Thanks

Sharon E. Warren
Resource Program Analyst
U.S. Department of the Interior
Office of the Secretary-Alaska
1689 C Street, Suite 100
Anchorage, AK 99501
(907) 271-4399
(907) 271-4102
----- Forwarded by Sharon Warren/SIO/OS/DOI on 02/05/2007 11:22 AM -----

Leah Dailey/AKSO/AK/BLM/DOI@BLM
02/05/2007 11:20 AM

To Danielle Allen/AKSO/AK/E
cc Sharon Warren/SIO/OS/D
Wilson/AKSO/AK/BLM/DC
Subject Re: barrow travel/ cost co

The correct cost code is: AK910-1310PP-ARAC

Leah Dailey
Editorial Assistant
Office of Communications, Bureau of Land Management
222 W. 7th Avenue #13
Anchorage, AK 99513-7599
Phone: (907) 271-5555
FAX: (907) 271-5421
Email: leah.dailey@blm.gov
Danielle Allen/AKSO/AK/BLM/DOI

Danielle Allen/AKSO/AK/BLM/DOI
02/02/2007 03:49 PM

To Sharon Warren/SIO/OS/DC
cc Leah Dailey/AKSO/AK/BLM
Wilson/AKSO/AK/BLM/DOI

Fax Cover Sheet

U.S. Department of the Interior
Office of the Secretary
1689 C Street, Suite 100
Anchorage, Alaska 99501
907-271-5485 Phone
907-271-4102 Fax

To: Barbara Smith, NBC

Fax: 303-969-6631
Phone: 303-969-5697
From: Sharon Waren
Date: February 28, 2007
Subject: **Travel Payment**
Total Pages: 1
Comments:

Barb -

Here is the form. If you need any additional information please contact me at 907-271-4399.

Much Thanks

Sharon

Contact Person: Ann Jurva
907-271-5485 ph.
907-271-4102 fax
ann_Jurva@ios.doi.gov

Margaret Kuyumjian
03/05/2007 08:50 AM

To: Jina L Miller/NBC/OS/DOI@DOI
cc: Kelley R Gee/NBC/OS/DOI@DOI, Linda Mayfield/NBC/OS/DOI@DOI
Subject: Re: Account Number

that's a good account number; I assume it is not accepting because it has not been entered into the PCAS system.

Please check with Linda Mayfield/Kelley Gee.

Thanks.

Margaret Kuyumjian
202 208-3996
Jina L Miller/NBC/OS/DOI

Jina L Miller/NBC/OS/DOI
03/05/07 10:46 AM

To Margaret Kuyumjian/POB/OS/DOI@DOI
cc
Subject Account Number

Hi Margaret:

I have a travel voucher that won't accept in FFS. Please let me know what account number we should use.

Sharon Warren
$101.60
2007 1000 DDR06 LM0085 68
Error: Invalid Project, Invalid Subproject

Thanks,
Jina Miller
Fiscal Services Specialist, Lead
7301 W. Mansfield Ave. D-2777
Denver, CO 80235
303-969-5714
Fax 303-969-6631

3-5-07
Linda Mayfield called - entered the info so O.K. to pay.
JM

08:26:38 Thu Mar 01, 2007

ACTION: **R** SCREEN: **SALT** USERID: **FSDB**

*** SUBALLOTMENT INQUIRY TABLE ***

KEY IS BFYS, FUND, DIVISION, ORG, PGM, BOC

BFYS: **2007** FUND: **DR** DIVN: **O** ORG: **1000** PGM: **DDR06** BOC: **OTH**

STATUS IND: **A** SPENDING CONTROL OVR: BUDGETED FTES/QTY: 0

APPROVED IND: **Y** POST QTR: **1** TRANS TYPES - PENDING: APPROVED: **AP** POSTED: **PT**

APPROVED SUBALOT AMT: 9,000.00 YTD SUBALOT AMT: 9,000.00

YTD UNLIQ COMM AMT: 0.00 AVAILABLE AMT: 9,000.00

YTD UNLIQ OBLG AMT: 0.00 EXPENDED AMT: 0.00

DESCRIPTION: **OS TRAVEL - BLM**

EST REIM TC/TT: **BE** EST REIM AMT: 0.00

ACT REIM AMT: 0.00 UNDISTRIB EST REIM: 0.00

QTR	ORIGINAL SUBALLOT AMT	PENDING SUBALLOT AMT	APPROVED SUBALLOT AMT	ALLOCATED AMT
1	9,000.00	0.00	9,000.00	0.00
2	0.00	0.00	0.00	0.00
3	0.00	0.00	0.00	0.00
4	0.00	0.00	0.00	0.00

QTR	UNLIQ COMM AMT	UNLIQ OBLG AMT	EXPENDED AMT	UNALLOCATED AMT
1	0.00	0.00	0.00	9,000.00
2	0.00	0.00	0.00	0.00
3	0.00	0.00	0.00	0.00
4	0.00	0.00	0.00	0.00

Invalid Project
Invalid Subproject
E-mailed - 3/5/07

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	0

Julian Date	Prep Unit	Sequence Number
060	BS	B

Batch Totals

Input Date	Number of Documents
3/1/7	5

System Checked By: BO Date 7/1/7

Batch Approval

Approved By: 3-5-07

Date Approved: Jm

CHECKED MAR 06 2007

TRAVEL VOUCHER (Read Privacy Act Statement on the back)	1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Ofc of the Secretary	2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION	3. VOUCHER NO.: SIWRO.FY07.J1
			4. SCHEDULE NO.

5.			
a. NAME (Last, first, middle initial): Williams, Pamela S.		b. SOCIAL SECURITY NO.: (b) (6) [redacted]	6. PERIOD OF TRAVEL: a. FROM 12/10/2006 b. TO 12/15/2006
c. MAILING ADDRESS (Include ZIP Code): 3442 East Mountain Vista Phoenix, AZ 85048 974801699		d. OFFICE TELEPHONE NO.: (202) 208-1442	7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWRO.FY07.J1 b. DATE(S) 01/29/2007
e. PRESENT DUTY STATION: Washington, DC	f. RESIDENCE (City and State): (b) (6) [redacted]		10. CHECK NO.

8. TRAVEL ADVANCE		9. CASH PAYMENT RECEIPT		11. PAID BY
a. Outstanding	0.00	a. DATE RECEIVED	b. AMOUNT RECEIVED $	TD
b. Amount to be applied	0.00			
c. Amount due Government (Attached [ ] Check [ ] Cash)		c. PAYEE'S SIGNATURE		
D. Balance outstanding				

07 FEB -5 AM 12:56

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH (List by number below and attach passenger coupon; if cash is used show claim on reverse side)

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials

	AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	654.40				IAD-Washington,	DuLAS-Las Vegas Airpo

07 FEB -5 A10:28 REC'D NBC

Document ACCEPTED FEB 08 2007 J.L.M.

COMMENTS:
Trip Number 1. Travel paid thru RSA DCN RS07KX3033
Appropriation: 14-7/8-2100
Acct:K7ASIA0708A5000253G
Lodging at no cost to govt in WashDC
Rental Car authorized

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ [signature] DATE 1/29/07 AMOUNT CLAIMED ▶ 478.25

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)

APPROVING OFFICIAL SIGN HERE ▶ Doug Domenech Deputy DATE [signature]

17. FOR FINANCE OFFICE USE ONLY
COMPUTATION

a. DIFFERENCES, IF ANY (Explain and show amount)	Taxis CB	$ 73.00
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION Certifier's initials:		$
c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol):		$ 0.00
d. NET TO TRAVELER ▶		$ 478.25

405.25

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO.	b. D.O. SYMBOL	c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION

1000 DDR14 IA0161 68

12/10-48
12/11-64
12/12-64
12/13-64
12/14-64
12/15-48
352
<18.62> ← hotel cafe charge
333.38 ← Total M+IE should have been

Travel
Trav. charged
336.00
- 333.38
2.62 difference
PAC

SCHE
OF
EXPE
AND
AMOU
CLAIM

d items are self explanatory)

Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.
(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).
(i) Complete for per diem and actual expense travel.
(j) Show total subsistence expense incurred for actual expense travel.
(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.
(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES
TRIP# 1

TRAVEL AUTHORIZATION NO.
SIWRO.FY07.J1

TRAVELER'S LAST NAME
Williams

MILEAGE RATE: 0.445

DATE 20 06 (a)			ITEMIZED SUBSISTENCE EXPENSES: MEALS LUNCH (e)	MEALS DINNER (f)	MEALS TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
12/1												
12/1												
12/10	12:00A	A-:WASHINGTON,DC			64.00			64.00			64.00	
12/10		Private Vhcle							50	22.25		
12/10		Rental Car - Govcc										36.00
12/10		Taxi - Cash										
12/10		Airport Parking GVCC CBill										9.00
12/10		Taxes for Lodging										
12/11		Subsistence			64.00			64.00			64.00	
12/12		Subsistence			64.00			64.00			64.00	
12/13	12:00A	D-:WASHINGTON,DC										
12/13	12:00A	A-:LAS VEGAS,NV			64.00		109.00	64.00			64.00	
12/13		Taxi - Cash										38.00
12/13		Ticket Agent Fee										
12/14		Taxi - Cash										37.00
12/14		Subsistence			64.00			64.00			64.00	
12/15	12:01A	D-:LAS VEGAS,NV DEP 3:07PM										
12/15	12:01A	A:Phoenix, AZ ARR 5:14PM										
12/15		Subsistence			16.00			16.00			16.00	
								SUBTOTALS ▶		22.25	336.00	120.00
								TOTALS ▶		22.25	336.00	120.00

188/64
114/64
only charged 16.00 on first day PAC
CB
CB
OK
PAC
336.00
47.00
22.25
73.00

TOTAL AMOUNT CLAIMED ▶ 405.25 383.00 478.25

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

If additional space is n

In compliance with the P
vided: Solicitation of the
Chap. 57 as implemente
E.O. 11609 of July 22, 19
November 22, 1943, and
of the requested informat
eligible individuals for allo
under appropriate admini
costs of such reimbursem
used by officers and emp
performance of their offici
appropriate Federal, State

ement by this agency in connection with the hiring or firing of an
oyee, the issuance of a security clearance, or investigations of the per-
nce of official duty while in Government service. Your Social Security
nt Number (SSN) is solicited under the authority of the Internal
nue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22,
for use as a tax payer and/or employee identification number; disclosure
NDATORY on vouchers claiming travel and/or relocation allowance
se reimbursement which is, or may be, taxable income. Disclosure of
SN and other requested information is voluntary in all other instances;
er, failure to provide the information (other than SSN) required to
rt the claim may result in delay or loss of reimbursement.

STANDARD FORM 1012 BACK (10-77)

01/29/07 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.J1

Copyright 1989-2004 Gelco Information Network, Inc

|Williams, Pame (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			654.40
HOTEL TAXES-			9.00
LODGING-409			109.00
M&IE-409			336.00
MILEAGE-408			22.25
PARK-			50.00
RENTAL CAR-409			98.39
TAXI CASH-			111.00
TRAVEL AGENT-			24.50
NO ACCT CODE	0.00	0.00	1,414.54

Organization:

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,414.54
NON-REIMBURSABLE EXPENSES		936.29
TOTAL AMOUNT CLAIMED		478.25
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		478.25
GOV'T CHARGE CARD EXPENSES -	9.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	9.00	
PAY TO GOV'T CHARGE CARD		9.00
PAY TO TRAVELER		469.25

FILE COPY

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO. SIWRO.FY07.J.1

2. TRAVELER *(first name, middle initial, last name)*: Pamela S. Williams

3. TITLE: Director, SIWRO

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED: (b) (6) [redacted]

6A. OFFICE/SERVICE AND DIVISION: Ofc of the Secretary

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Washington, DC

8. OFFICE PHONE NO.: (202) 208-1442

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [X] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: Colorado River Water Rights Meeting Soboba; SLR mtgs; Navajo mtgs

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: Phoenix	Ari						
12/10/2006	SUN	TO: WASHINGTON	DC	64	188	252			
12/13/2006	WED	WASHINGTON	DC	64	188	252			
12/13/2006	WED	TO: LAS VEGAS	NV	64	114	178		AIR	
12/15/2006	FRI	LAS VEGAS	NV	64	114	178			
12/15/2006	FRI	TO: Phoenix	Ari						

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? *(If NO, justify in item 22)*
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED? *(If YES, justify in item 22)*
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? *(If YES, check one box below and complete item 17B)* [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER — 17B. MILEAGE RATE AUTHORIZED PER MILE. 0.445
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? *(If YES, justify in item 22)* IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: If item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED: A. INITIALS / B. DATE

22. REMARKS

Rental Car Authorized
Lodging in WashDC at no cost to Govt
Travel to be paid by BIA thru RSA attached

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 654.40
B. TOTAL PER DIEM AND OTHER	$ 924.88
C. TOTAL ESTIMATED COST	$ 1579.28

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

25. ADVANCE AUTHORIZED: $ 0.00

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Doug Domenech - Deputy COS

27B. SIGNATURE *(PRESS FIRMLY USE BALL POINT PEN)*

27C. DATE: NOV 28 2006

GENERAL SERVICES ADMINISTRATION — GSA FORM 87 (REV. 8/86)

11/17/06 ACCOUNTING DETAIL |Doc No: SIWRO.FY07.J.1

Copyright 1989-2004 Gelco Information Network, Inc

|Williams, Pame (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			654.40
HOTEL TAXES-			50.00
LODGING-409			228.00
M&IE-409			352.00
MILEAGE-408			22.25
PARK-			50.00
RENTAL CAR-409			187.13
TRANSPORT-409			25.00
TRAVEL AGENT-			10.50
NO ACCT CODE	0.00	0.00	1,579.28

Organization:

UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

FILE COPY

Reimbursable Support Agreement
Fiscal Year 200 7

Parties to the Agreement

Customer Agency *(Paying Agency)*	Provider Agency *(Billing Agency)*
Bureau/Agency Name: Bureau of Indian Affairs	Bureau/Agency Name: DOI, OS, SIWRO
Address: 1849 C Street, NW Washington, DC 20240	Address: 1849 C Street, NW MS 2321 Washington, DC 20240
Project Coordinator: Iris C. WINSTON	Project Coordinator: J. Jamie Coaster-Barringotn
Signature: Iris C. Winston	Signature: J. Jamie Coaster-Barringotn
telephone: (202) 208-6033 11/16/06	telephone: (202) 219-1384

Accounting Data

Document Number: RS07KX3033	Document Number: RA7W0161
Appropriation: 14-7/8-2100	Appropriation: 14 7 0102
Account Info: K7ASIA 0708 A5000253G $1,600.00	Account Info: 1000 DDR14 1A0161 68
Agency Location Code: 14-20-0699	Agency Location Code: 14-01-0001

Description and Cost of Goods and/or Services to be Provided

This agreement is to be accomplished on the following basis:
☒ Time and Materials [_ Fixed Price

Description of Service: (Include time frame involved, estimated costs by object class and a brief description of the service. Attach additional backup data as needed.)

Pamela Williams will be traveling to Washington DC for pre-meetings (12/11) and a one day retreat (12/12) w/Counselor and Assistant Secretaries to strategize on water right Settlements and time sensitive Secretarial commitments for water settlements. Travel to Las Vegas to negotiate a final settlement for Soboba (12/13-12/14) and meet with the 5 tribes involved in the San Luis Rey water Settlement. Attend CRWUA on (12/15) w/ Secretary Kempthorne. Travel to be reimbursed is Airplane, lodging, per diem, parking, lodging taxes, pov, rental car, and taxi as needed.

Obligational Authority Available	
Until (date)	8-1-2007
Initial or Current Amount	$ 1,600.00
Amendment Number	#
Amount	$
New Total Amount	$ 1,600.00

Approvals

CONDITIONS OF AGREEMENT: The Office of the Secretary is willing to enter into this agreement subject to the conditions stated on the second page of this form.

APPROVAL BY PAYING AGENCY	APPROVAL BY CUSTOMER AGENCY
Signature: Mary Jane Miller	Signature: Gary Weitzner
Date: 11/20/2006	Date: 11/30/06
Name: MARY JANE MILLER	Name: Gary Weitzner
Title: Budget Officer	Title: Budget Officer

This form was electronically produced by Elite Federal Forms, Inc.

DI-2017 (11/2001)

TRAVEL AUTHORIZATION COVER SHEET

NAME OF TRAVELER: **Pamela Williams**

DATES OF TRAVEL: **December 10-15, 2006**

PURPOSE AND LOCATION OF TRAVEL: 1. Travel to Washington DC for pre-meetings (12/11/06) and one day retreat (12/12/06) with Counselor and Assistant Secretaries to strategize on water rights Settlements and time sensitive Secretarial commitments for water settlements. 2. Travel to Las Vegas with Counselor to negotiate final settlement for Soboba (12/13-14/06) and meet with the 5 Tribes involved the San Luis Rey Water settlement (12/13/06).

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL: The DOI retreat on Indian water rights which, has take three months to schedule and been twiced delayed, is critical to our progress in New Mexico water settlement discussions scheduled for early 2007. The final Soboba negotiations must be completed in early December to allow completion of the settlement agreement, approvals and companion legislative language prior to introduction of legislation anticipated in January. The San Luis Rey settlement discussions also are extremely time sensitive with the potential dismissal of a pending FERC license application on 12/31/06, should these discussions fail. These two negotiation sessions have been scheduled back to back and in coordination with other IOS obligations to conserve funds.

ESTIMATED COST OF TRIP: $1579.28

COSTS FOR THIS TRAVEL WOULD BE PAID BY (check one):

OS Travel Account

Bureau Travel Account _____

Name of Bureau: Bureau Indian Affairs thru a RSA fm SIWRO

==========

OFFICE SURNAME: (Office Director must surname.) _____

For IOS Offices – Assistant Secretary or Office Director Approval/Date: _____

For PMB – DAS Approval/Date: _____

==========

APPROVAL:

This travel is: ☒ APPROVED ☐ NOT APPROVED.

Signature: _____

Brian Waidmann, Chief of Staff/Tom Weimer, ASPMB

Record Locator (PNR): HPFZNR

Phoenix (PHX) to Washington (IAD)

Sunday, Dec 10

	Departs	Arrives	Notes
UNITED Flight 952 Coach Airbus A319	Phoenix (PHX) Dec 10 9:30 AM	Washington (IAD) Dec 10 3:37 PM	non-stop flight 4:07 **Seat(s)** Passenger 1: 6C

	Pick Up Location	Drop Off Location	Notes
National.	Washington (IAD) Dec 11 4:00 PM	Washington (IAD) Dec 13 8:00 AM	Car Confirmation: 338229912RESRV compact 2 door Air Conditioning Automatic Transmission **Special Requests**

Washington (IAD) to Las Vegas (LAS)

Wednesday, Dec 13

	Departs	Arrives	Notes
UNITED (/United For Ted) Flight 1549 Coach Airbus 32S	Washington (IAD) Dec 13 8:15 AM	Las Vegas (LAS) Dec 13 10:32 AM	non-stop flight 5:17 **Seat(s)** Passenger 1: 4C

	Pick Up Location	Drop Off Location	Notes
National.	Las Vegas (LAS) Dec 13 11:00 AM	Las Vegas (LAS) Dec 15 5:00 PM	Car Confirmation: 633195369RESRV compact 2 door Air Conditioning Automatic Transmission **Special Requests**

Las Vegas (LAS) to Phoenix (PHX)

Friday, Dec 15

	Departs	Arrives	Notes
US Airways (America West Airline) Flight 291 Coach Airbus A320	Las Vegas (LAS) Dec 15 3:07 PM	Phoenix (PHX) Dec 15 5:14 PM	non-stop flight 1:07 **Seat(s)** Passenger 1: No information entered

Details

Record Locator (PNR): HPFZNR
Airline Confirmation1: null
Airline Confirmation2: null
Airline Confirmation3: null
Car Confirmation 1: ZL-338229912RESRV
Car Confirmation 2: ZL-633195369RESRV
Deliver To: Pamela Williams
(b) (6) [redacted]

Passenger Information

(b) (6) [redacted]

03/06 - 03/09 K
PAMELA S WILLIAMS

(b) (6) [redacted]

QUAN.	CLASS	DESCRIPTION	PRICE	AMOUNT

DATE 12-12-06 AUTHORIZATION
REFERENCE NO. REG/DEPT.
FOLIO/CHECK NO. SERVER CLERK

SUB TOTAL
TAX
TIPS MISC.
TOTAL 37 00

SALES SLIP

CUSTOMER COPY

PURCHASER SIGN HERE
X
Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with Issuer.

IMPORTANT: RETAIN THIS COPY FOR YOUR RECORDS

(b) (6) [redacted]

03/06 - 03/09 K
PAMELA S WILLIAMS

DATE	SERVER/CASHER
12-11-06	658
AUTHORIZATION NO.	REFERENCE NO.
	10573

5719338

QTY.	DESCRIPTION	AMOUNT	
	TAXI	36	00
	TAX		
	TIP MISC		
	TOTAL	36	00

SALES SLIP

CUSTOMER COPY

PURCHASER SIGN HERE
X
Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer.

IMPORTANT: RETAIN THIS COPY FOR YOUR RECORDS

YELLOW-CHECKER-STAR
"THE" CAB COMPANIES
Las Vegas, Nevada
873-2227
COMPUTER RADIO DISPATCHED

DRIVER#_____ DATE_____
(CHARGE THE ACCT. OF)
(RECEIVED OF) 73.00

FOR TAXI FARE FROM_____

TO_____ $_____

(X) DRIVER NAME_____

(X) PASSENGER SIGNATURE_____

CI: YPALAVICIN 12/13/06 11:16 AM
CO:

Arrival Date: 12/13/06
Departure Date: 12/14/06

CAESARS PALACE
LAS VEGAS

3570 Las Vegas Blvd. South Las Vegas, NV 89109
FOR RESERVATIONS CALL 1-800-634-6661
702-731-7110

Name: **PAMELA WILLIAMS**
DEP OF THE INTERIOR

Address: 1849 C STREET N W
RM 2321 ***12PM C/O
WASHINGTON DC WA 20420

Group Code: QCGOVT6

Casino ID:
Room #: RT 1168

Resv ID: 390270140652
Folio ID: 390631217125

Page: 1

Date	Reference	Description	Charges	Credits	Balance
12/13/06	RT 1168	ROOM CHARGE RT 1168	100.00		
		TAX	9.00		109.00
12/13/06		APPLIED DEPOSIT		109.00	
		(b) (6) [redacted]			
					.00

Thank You for Staying at Caesars Palace

CENTRALLY BILLED ITEMS CHECKED WITH CARD TABLE

Agent Fee	10.50 / 604.60
Airfare	106.80 - 49.80
Lodging	
Rental Car	98.34
Gas	116.23 1.73 -1.26
Parking	
Taxi / Shuttle	36.00 / 37.00
VXRF	
TAVD	

- 1 rav. deducted from M&IE.

Ceasars Cafe Lago 18.62

CHECKED FEB 12 2007

CHECKED FEB 12 2007

SOSA 02-07-07

12:46:57 Wed Feb 07, 2007

ACTION: R SCREEN: CARD USERID: FSDR
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ
CARDHOLDER#: (b) (6) [redacted] CARDHOLDER: WILLIAMS, PAMELA S
INVOICE DATE: 12 15 2006 TRANSACTION#: 63481923507
SEQ NUM: 001 OF 001 DOC NUM/LINE: BC BC061215001 245 REVIEWED? Y
==========< DETAIL PURCHASE INFORMATION >==========
PURCHASE DATE: 12 10 2006 PURCHASE AMOUNT: 36.00
MERCHANT: DISCOUNT CAB & MEDITRA PURCHASE ADJUSTED: 36.00
CITY/ST: PHOENIX AZ BALANCE (DEFAULT): 0.00
LAST REF#: 55460296347141347276573 MCC: (b) (6) [redacted] VENDOR CODE: BANKAMER
SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
001	2007		1000		WSW20	000000	68	211T

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
001	2007		1000		DDR14	IA0161	68	211T	36.00

REF DOC NO/LINE: P/F: QUANTITY: 0.00 USER: SOSAZW0
DESCRIPTION: ADJUST DATE: ADJ POST? N

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?
02-*L009 HEADER CHANGE

12:47:28 Wed Feb 07, 2007

ACTION: R SCREEN: CARD USERID: FSDR
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ

CARDHOLDER#: (b) (6) [redacted] CARDHOLDER: WILLIAMS, PAMELA S
INVOICE DATE: 12 19 2006 TRANSACTION#: 63521930509
SEQ NUM: 001 OF 003 DOC NUM/LINE: BC BC061219001 470 REVIEWED? Y

==========< DETAIL PURCHASE INFORMATION >==========

PURCHASE DATE: 12 15 2006 PURCHASE AMOUNT: 37.00
MERCHANT: ALLSTATE CAB COMPANY PURCHASE ADJUSTED: 37.00
CITY/ST: 520-888-2996 AZ BALANCE (DEFAULT): 0.00
LAST REF#: 85486156349980004868821 MCC: (b) (6) [redacted] VENDOR CODE: BANKAMER

SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
001	2007		1000		WSW20	000000	68	211T

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
001	2007		1000		DDR14	IA0161	68	211T	37.00

REF DOC NO/LINE: P/F: QUANTITY: 0.00 USER: SOSAZW0
DESCRIPTION: ADJUST DATE: ADJ POST? N

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?

02-*L009 HEADER CHANGE

12:48:03 Wed Feb 07, 2007

ACTION: R SCREEN: **CARD** USERID: **FSDR**
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ

CARDHOLDER#: (b)(6) [redacted] CARDHOLDER: **WILLIAMS, PAMELA S**
INVOICE DATE: 12 19 2006 TRANSACTION#: 63521930519
SEQ NUM: 002 OF 003 DOC NUM/LINE: **BC BC061219001 471** REVIEWED? Y

==========< DETAIL PURCHASE INFORMATION >==========

PURCHASE DATE: 12 14 2006 PURCHASE AMOUNT: 18.62
MERCHANT: **CAESERS CAFE LAGO** PURCHASE ADJUSTED: 18.62
CITY/ST: **LAS VEGAS NV** BALANCE (DEFAULT): 0.00
LAST REF#: **55541866349004078004302** MCC: (b)(6) [redacted] VENDOR CODE: **BANKAMER**

SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
001	**2007**		**1000**		**WSW20**	**000000**	**68**	**211D**

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
001	**2007**		**1000**		**DDR14**	**IA0161**	**68**	**211D**	**18.62**

REF DOC NO/LINE: P/F: QUANTITY: **0.00** USER: **SOSAZW0**
DESCRIPTION: ADJUST DATE: ADJ POST? **N**

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?
02-*L009 HEADER CHANGE

Trav.
made deduction from M&IE

U.S. Department of the Interior
OS TRAVEL
National Business Center – Denver
7401 W. Mansfield Ave. D-2730
Denver, CO 80235

Notice of Action Taken

Pamela S. Williams
3442 East Mountain Vista
Phoenix, AZ 85048

Voucher Identification: SIWROFY07J1

Amount Claimed	Suspended	Disallowed	Allowed
$478.25		$73.00	405.25
Tax Withheld	**Applied to Advance**	**Other**	**Amount of Check**
			$405.25

EXPLANATION:

1. **Disallowed $73.00** – Cab fares on 12/10/07 and 12/15/07 were centrally billed.

*Please direct any inquiries to Rebekah Beatty 303-969-5689.

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE:	REVIEWING TECHNICIAN	DATE: February 7, 2007

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	N

Julian Date	Prep Unit	Sequence Number
038	RB	1

Batch Totals

Input Date	Number of Documents	Net Total (Required)
2/7/07	4	~~[illegible]~~ 878.66

System Checked By: RB Date 2/7/07

Batch Approval

Approved By: Jm

Date Approved: 2-8-07

CHECKED FEB 12 2007

9748016199

SIWROQ807

SIWROU2.07

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Ofc of the Secretary

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: SIWROU2.FY07

4. SCHEDULE NO.:

5. a. NAME *(Last, first, middle initial)*: Williams, Pamela S.

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 02/20/2007 b. TO 02/23/2007

c. MAILING ADDRESS *(Include ZIP Code)*: 3442 East Mountain Vista, Phoenix, AZ 85048

d. OFFICE TELEPHONE NO.: (202) 208-1442

7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWROU2.FY07 b. DATE(S) 03/08/2007

e. PRESENT DUTY STATION: Washington, DC

f. RESIDENCE *(City and State)*: (b) (6) [redacted]

10. CHECK NO.:

8. TRAVEL ADVANCE

a. Outstanding	0.00
b. Amount to be applied	0.00
c. Amount due Government *(Attached [ ] Check [ ] Cash)*	
D. Balance outstanding	

9. CASH PAYMENT RECEIPT

a. DATE RECEIVED

b. AMOUNT RECEIVED $

c. PAYEE'S SIGNATURE

11. PAID BY: TDT

07 MAR 12 12:32

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials*

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER *(Initials)* (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	TO (f)
See Attached Ticket 1	161.00			PHX-Phoenix AZ	AirSAN-San Diego Airpo

3/13/07 - Called & sent email to get a receipt for registration fee

3/14/07 - rec'd fax

COMMENTS:
Trip Number 1 Rental car authorized
Travel paid for by BIA
N0002 K00462 N3410

3/16/07 - Called on acct codes

Document ACCEPTED MAR 22 2007

211D - 210.86
211P - 24.25

16. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ Pamela Williams DATE 3/8/07 AMOUNT CLAIMED ▶ 679.53

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ Doug Domenech Deputy DATE

17. FOR FINANCE OFFICE USE ONLY

COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)*

Conf. CB	$ <390.00>
lodging tax CB	<41.28>
food CB	<15.14>

b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION *Certifier's initials:* $ 444.42

c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):* $ 0.00

d. NET TO TRAVELER ▶ $ 679.53

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION

5020 DDP07 IAD 0001 66

3/16/07 VS 235.11

1012-16 NSN 7540-00-634-4180 STANDARD FORM 1012 (REV. 10-77) Prescribed by GSA, FPMR (41 CFR) 101-7

0•	C
483•00	+
0•	C
48•00	+
48•00	+
64•00	+
64•00	+
24•25	+
390•00	+
41•28	+
679•53	*
48•00	+
48•00	+
64•00	+
64•00	+
24•25	+
248•25	*
0•	C
0•	C
679•53	+
390•00	-
41•28	-
13•14	-
235•11	*

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel — *Col. (d) thru (g)* Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

131 | 64

Complete this information if this is a continuation sheet. PAGE 2 OF PAGES TRIP# 1

TRAVEL AUTHORIZATION NO. SIWROU2.FY07

TRAVELER'S LAST NAME Williams

MILEAGE RATE: 0.485

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAK-FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCEL-LANEOUS SUBSIS-TENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
02/20	12:01A	D-:Phoenix, AZ											
02/20		Airline Flight											
02/20	12:00A	A-:SAN DIEGO,CA				48 00		131 00	48.00			48 00	
02/20		Private Vhcle								50	24 25		
02/20		Shuttle Service - Govcc											
02/20		Taxi - Govcc											
02/20		Conference Reg. Fee											390 00
02/20		Taxes for Lodging for 3 n											41 28
02/21		Subsistence				64 00		131 00	64.00			64 00	
02/22		Subsistence				64 00		131 00	64.00			64 00	
02/23	12:00A	D-:SAN DIEGO,CA											
02/23		Taxi - Govcc											
02/23	12:01A	A:Phoenix, AZ				48 00			48.00			48 00	
02/23		Subsistence											
									SUBTOTALS ▶		24 25	224 00	431 28
									TOTALS ▶		24 25	224 00	431 28

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

248.25

TOTAL AMOUNT CLAIMED ▶ 679.53

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

03/08/07 ACCOUNTING DETAIL |Doc No: SIWROU2.FY07

Copyright 1989-2004 Gelco Information Network, Inc

|Williams, Pame (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			161.00
LODGING-409			393.00
M&IE-409			224.00
MILEAGE-408			24.25
OTHER-409			41.28
REG. FEES-409			390.00
TAXI CGVCC-			80.00
NO ACCT CODE	0.00	0.00	1,313.53

Organization:

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		1,313.53
NON-REIMBURSABLE EXPENSES		634.00
TOTAL AMOUNT CLAIMED		679.53
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		679.53
GOV'T CHARGE CARD EXPENSES -	0.00	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	0.00	
PAY TO GOV'T CHARGE CARD		0.00
PAY TO TRAVELER		679.53

Jam'esetta J Coaster-Barrington

03/16/2007 09:15 AM

To: Victoria S Stwalley/NBC/OS/DOI@DOI
cc: pamela_williams@ios.doi.gov, valerie_smith@ios.doi.gov
Subject: Pamela Travel Code

Morning, for SIWROU2-FY07 is 5020 DDR 07 IA 000 16 (BIA) please charge to this number the other one was incomplete and incorrect on BIA's part. Working on BOR's correct cost code, will get it to you as soon as I can.

Thanks
J. Jamie Coaster
Mgmt Program Analyst
Secretary's Indian Water Rights
Office of the Secretary, Dept of Interior
1849 C. Street MIB-2321 Room 2327
Washington, DC 20240
202-208-1442 office
202-594-3294 blackberry
202-208-1320 fax
Jam'esetta_Coaster-Barrington@ios.doi.gov

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO.: SIWROU2.FY07

2. TRAVELER *(first name, middle initial, last name)*: Pamela S. Williams

3. TITLE: Director, SIWRO

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED:
3442 East Mountain Vista
Phoenix, AZ 85048

6A. OFFICE/SERVICE AND DIVISION: Ofc of the Secretary

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Washington, DC

8. OFFICE PHONE NO.: (202) 208-1442

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [ ] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [X] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: ABA Annual Water Law Conference; Soboba, SLR, and Ad Hoc Group Mtgs

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: Phoenix	AZ						
02/20/2007	TUE	TO: SAN DIEGO	CA	64	131	195		AIR	FUEL
02/23/2007	FRI	SAN DIEGO	CA	64	131	195			
--------	---	TO: ----------	--	---	---	---	---	----	----
--------	---	----------	--	---	---	---	---	----	----
02/23/2007	FRI	TO: Phoenix	AZ						

YES	NO	
	X	14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE? *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS? *(If NO, justify in item 22)*
	X	16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED? *(If YES, justify in item 22)*
X		17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS? *(If YES, check one box below and complete item 17B)* [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER. — 17B. MILEAGE RATE AUTHORIZED PER MILE: 0.445
	X	18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED? *(If YES, justify in item 22)* IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY: (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: if item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED: A. INITIALS / B. DATE

22. REMARKS
Rental car upgrade to full size 4 passenger traveling w/traveler to conference daily

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 160.80
B. TOTAL PER DIEM AND OTHER	$ 1315.75
C. TOTAL ESTIMATED COST	$ 1476.55
25. ADVANCE AUTHORIZED	$ 0.00

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B
	N0002	K00462	N3410							

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Doug Domenech - Deputy COS

27B. SIGNATURE *(PRESS FIRMLY USE BALL POINT PEN)*: [signature]

27C. DATE:

01/23/07 ACCOUNTING DETAIL |Doc No: SIWROU2.FY07

Copyright 1989-2004 Gelco Information Network, Inc

|Williams, Pame (b)(6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			160.80
FUEL-GOVCC-			50.00
HOTEL TAXES-			40.00
LODGING-409			393.00
M&IE-409			224.00
MILEAGE-408			22.25
MISC-GOVCC-			48.00
PARK-			40.00
REG. FEES-409			380.00
RENTAL CAR-409			108.00
TRAVEL AGENT-			10.50
NO ACCT CODE	0.00	0.00	1,476.55

Organization:

The Westgate Hotel

Guest Folio: 1

PAMELA WILLIAMS

X 00000-0000

Account: 634046 1186 Folio: 01 Clerk: MMOESENBIC

Date	Description	Reference	Amount
2/22/07	3 NIGHTS @ 131.00		393.00
	Tax		41.28
2/21/07	ROOM SERVICE	26602687	10.17
2/21/07	FOOD SERVICE II	70365	3.24
	022107 MINIBAR		
2/23/07	CREDIT CARD PAY	MC	447.69-
	(b) (6) [redacted]		
			.00

713.14

Folio printed: 02/23/2007 at 06:48 AM

Charge to: PAMELA WILLIAMS $447.69-
Acct no : MASTERCARD #(b) (6) [redacted]

Signature :_____

131|64

Record Locator (PNR): FFGNPN

Phoenix (PHX)

	Pick Up Location	Drop Off Location	Notes
Alamo off-term	San Diego (SAN) Feb 20 8:00 AM	San Diego (SAN) Feb 23 3:00 PM	Car Confirmation: 928579782COUNT full size 2 door Air Conditioning Automatic Transmission **Special Requests** non-smoking car, hand controls-right, 4 door

San Diego (SAN) to Phoenix (PHX)

Friday, Feb 23

	Departs	Arrives	Notes
US Airways (America West Airline) Flight 239 Coach Airbus A319	San Diego (SAN) Feb 23 3:40 PM	Phoenix (PHX) Feb 23 5:52 PM	non-stop flight 2:12 **Seat(s)** Passenger 1: 6C

Details

Record Locator (PNR): FFGNPN
Airline Confirmation1: null
Car Confirmation 1: AL-928579782COUNT
Deliver To: Pamela Williams
3442 east mountain vista
Phoenix, AZ85048
USA

Passenger Information

PAMELA S WILLIAMS
standard meal

Frequent Traveler Program
No information entered

Travel Agency Information

Travel Agency Information:
CW Government Travel, Inc.
1777 NE Loop 410
Suite 1001A
San Antonio, TX 78217

Toll-free 866-227-5638
Fax 877-834-3459

Monday Thru Friday 5:30am - 5:30pm

© 2003-2007 GetThere L.P. - All rights reserved
Send us your feedback

YOUR CARLSON WAGONLIT CONFIRMATION CODE IS EUXXYW

SALES PERSON: 50 ITINERARY DATE: 21 FEB 07
CUSTOMER NBR: (b) (6) [redacted] EUXXYW PAGE: 01

TO: DOI

FOR: WILLIAMS/PAMELA S

YOUR ESTIMATED AIRFARE ON 21FEB AT 0854 IS 109.40

23 FEB 07 - FRIDAY
AIR SOUTHWEST AIRLINES FLT:2179 ECONOMY EQ : BOEING 737 300
LV SAN DIEGO 255P 01HR 10MIN
DEPART: TERMINAL 1 NON-STOP
AR PHOENIX 505P REF: C4C4YI
ARRIVE: TERMINAL 4

22 AUG 07 - WEDNESDAY
OTHER INFORMATION
THANK YOU FOR CALLING CARLSON WAGONLIT TRAVEL

THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
NO FARE IS GUARANTEED UNTIL TICKETED
RESERVED SEATS SUBJECT TO CANCEL 30 MIN PRIOR TO FLIGHT
THANK YOU FOR BOOKING WITH CARLSON WAGONLIT TRAVEL
PLEASE NOTE OUR PHONE NUMBERS FOR YOUR ACCOUNT
CARLSON PHONE RESERVATIONS IS 866-227-5638
CARLSON AFTER HOURS EMERGENCY 866-697-8916
CARLSON FAX TO SEND TRAVEL ORDERS IS 877-834-3459
CAR DECLINED/A//21FEB
LODGING DECLINED//21FEB
TICKETS WILL BE ISSUED TO INDIVIDUAL GOVT CREDIT CARD
PREASSIGNED SEATING NOT AVAILABLE ON SOUTHWEST
SOUTHWEST WILL NOT REFUND LOST/STOLEN TICKETS
PLEASE CHECK IN 60 TO 90 MINUTES PRIOR TO DEPARTURE

Carlson Wagonlit Travel - Local Presence, Global Power

TRAVEL AUTHORIZATION COVER SHEET

NAME OF TRAVELER: Pamela Williams

DATES OF TRAVEL: **February 20-23, 2007**

PURPOSE AND LOCATION OF TRAVEL:
Location is San Diego, California. Purpose is to assist Counselor to the Secretary Michael Bogert with Indian water rights negotiations involving proposed settlements of water rights claims of the Soboba Band of Luiseno Indians and the five Indian Bands having rights in the San Luis Rey River basin, California. In conjunction with attending the annual ABA Water Law Conference, meetings will also be scheduled with team chairmen and tribal leaders involved in several Montana water rights settlements and settlements in New Mexico. Additionally, will staff Counselor Bogert in a meeting scheduled with representatives of the Ad Hoc Group on Indian Water Rights (composed of Native American Rights Fund, Western Governor's Association, Western Regional Council and Western States Water Council) to discuss Secretary Kempthorne's policies/initiatives on Indian water rights settlements.

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL:
Negotiations involving the Soboba Band are critical to allow Secretary Kempthorne, in conjunction with his remarks at the ABA water conference, to announce an Administration-supported Indian water rights settlement. Other meetings are essential to fulfill commitments made by Counselor Bogert to become actively and personally involved in the San Luis Rey settlement and to communicate with Western water rights stakeholders represented by the Ad Hoc Group on Water Settlements.

ESTIMATED COST OF TRIP:

Registration fee=	$ 380.00
Airfare =	$ 160.80
Hotel =	$ 450.00
Per diem=	$ 224.00
Rental Car=	$107.67
Total charges for travel	$1,475.00

Total charges for 4 days travel = $ 1,475.00

COSTS FOR THIS TRAVEL WOULD BE PAID BY (check one):

☐ OS Travel Account

☒ Bureau Travel Account by reimbursable agreement already in place.

Name of Bureau: BIA

==========

OFFICE SURNAME: (Office Director must surname.) SIWRO/Date 1/24/07

For IOS Offices – Assistant Secretary or Office Director Approval/Date:

For PMB – DAS Approval/Date:

==========

APPROVAL:

This travel is: ☐ APPROVED ☐ NOT APPROVED.

Signature: _____

Doug Domenech, Deputy COS, Brian Waidmann, COS, Tom Weimer, ASPMB

BIA will pay for this.
MDO 2/15/07

(b) (6) [redacted]

(b) (6) [redacted]

DATE	AUTHORIZATION	CLERK	
2/20/07			

QTY	DESCRIPTION	PRICE	AMOUNT
1	SAN TO WH		8.00
		SUB TOTAL	
		SALES TAX	
		TOTAL	8.00

EXPIRATION DATE CHECKED

The issuer of the card identified on this form is authorized to pay the amount shown as TOTAL upon proper presentation. I agree to pay such TOTAL together with any other charges due thereon, subject to and in accordance with the Agreement governing the use of such card.

SIGN HERE X

SALES SLIP

SALES SLIP CUSTOMER COPY

5120301013256
5046816088
6011010276358 93
CLOUD 9 SHUTTLE
800-9 SHUTTLE

MasterCard OR VISA

Tel 4 8 0 6 5 4 7 6 8

2 P 5 0 4 8

Date: 2/20/07

P/U Location: E. Mtn Vista 85048

Amount: $ 36.00

Cab #: 52

Driver: [signature]

HOMEWOOD SUITES Hilton

lost recpt for taxi home 2/23/07 — same fare I think not sure

All cabs + Shuttles were charged to credit card - so centrally billed? or not

Thx

homewoodsuites.com
1-800-CALL-HOME®

American Bar Association
Section of Environment, Energy, and Resources
321 N. Clark St
Chicago, Il 60610

Page No.: 1 of 1
Phone: (312) 988-5724
Fax : (312) 988-5572

Meeting Confirmation

FEIN # 36-0723150

larch 12, 2007

HIP TO :
0442862
amela Williams
OI OS SIWRO
IS 3411
849 C St NW
Vashington, DC 20240-0001

PO #:

ORDER / CONFIRMATION NO: 3000702386

MEETING INFORMATION

2/22/2007 08:00 AM to 02/23/2007 09:00 PM
5th Annual Water Law Conference

FEES/BALANCE DUE

REG.FEES	:	$330.00
*EVENT FEES	:	$0.00
PACKAGE FEES	:	$0.00
PREPAYMENTS	:	$330.00
REFUNDS/ADJ.	:	$0.00
BALANCE DUE	:	$0.00

EVENT INFORMATION

Type of Payment : CC Last 4 digits of (MasterCard) : 6199

Description	Package Id	Date/Time: Start	Date/Time: End	No.	Fees

14:46:43 Tue Mar 13, 2007

ACTION: R SCREEN: CARD USERID: NBCV
BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ

CARDHOLDER#: (b) (6) [redacted] CARDHOLDER: WILLIAMS, PAMELA S
INVOICE DATE: 02 27 2007 TRANSACTION#: 70571927062
SEQ NUM: 002 OF 002 DOC NUM/LINE: BC BC070227001 734 REVIEWED? N

==========< DETAIL PURCHASE INFORMATION >==========

PURCHASE DATE: 02 23 2007 PURCHASE AMOUNT: 5.50
MERCHANT: HOTEL DEL CORONADO RET PURCHASE ADJUSTED: 0.00
CITY/ST: CORONADO CA BALANCE (DEFAULT): 5.50
LAST REF#: 55541867056072007267234 MCC: (b) (6) [redacted] VENDOR CODE: BANKAMER

==========< DEFAULT ACCOUNTING INFORMATION >==========

SUB SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
000	2007		1000		WSW20	000000	68	252R

==========< ADJUSTMENT ACCOUNTING LINES >==========

SUB SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
000									0.00

REF DOC NO/LINE: P/F: QUANTITY: 0.00 USER:
DESCRIPTION: ADJUST DATE: ADJ POST? Y

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?

02-*L009 HEADER CHANGE

08:28:02 Fri Mar 16, 2007

ACTION: R SCREEN: CARD USERID: NBCV
* BANK CARD ACCOUNTING RE-DISTRIBUTION TABLE
KEY IS CARDHOLDER#, INVOICE DATE, SEQ NUM, SUB SEQ
CARDHOLDER#: (b) (6) [redacted] CARDHOLDER: WILLIAMS, PAMELA S
INVOICE DATE: 03 10 2007 TRANSACTION#: 70681932545
SEQ NUM: 003 OF 006 DOC NUM/LINE: BC BC070310001 231 REVIEWED? N
==========< DETAIL PURCHASE INFORMATION >==========
PURCHASE DATE: 03 07 2007 PURCHASE AMOUNT: 3.24
MERCHANT: WESTGATE HOTEL LODGING PURCHASE ADJUSTED: 0.00
CITY/ST: SAN DIEGO CA BALANCE (DEFAULT): 3.24
LAST REF#: 05140487067710009313050 MCC: (b) (6) [redacted] VENDOR CODE: BANKAMER
SUB ==========< DEFAULT ACCOUNTING INFORMATION >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC
000	2007		1000		WSW20	000000	68	211D

SUB ==========< ADJUSTMENT ACCOUNTING LINES >==========

SEQ	BUDGT FYS	FUND	BUD ORG	CST ORG	PROGRAM	JOB NUM	RPTG	BOC	ADJUST AMOUNT
000									0.00

REF DOC NO/LINE: P/F: QUANTITY: 0.00 USER:
DESCRIPTION: ADJUST DATE: ADJ POST? Y

REF DOC NO/LINE: P/F: QUANTITY: USER:
DESCRIPTION: ADJUST DATE: ADJ POST?
02-*L009 HEADER CHANGE

CENTRALLY BILLED ITEMS
CHECKED WITH CARD TABLE

109.40.

AIR 109.40. 51.40. (109.40). 51.40. (51.40)

AGENT FEE 10.50. 26.00.

LODGING 447.69

RENTAL CAR

GAS

PARKING

8.00

TAXI / SHUTTLE

VXRF checked

5.50

3.24

CHECKED MAR 23 2007

U .S. Department of the Interior

Notice of Action Taken

National Business Center - Denver
7401West Mansfield Ave. D-2777
Denver, CO 80235 – 2230

PAMELA WILLIAMS
3442 E MOUNTAIN VISTA
PHOENIX, AZ 85048

VOUCHER NUMBER:	SIWROU207		
Amount Claimed	**Suspended**	**Disallowed**	**Allowed**
679.53		444.42	235.11
Tax Withheld	**Applied to Advance**	**Under Claimed**	**Amount of Check**
			235.11

EXPLANATION:

Disallowed $41.28 - This Notice of Action is to disallow the lodging claimed. Effective October 20, 2006, all charges placed on your lodging receipt for OS and NBC are posted as centrally billed. OS and NBC travelers will no longer be reimbursed for lodging charged to their Government charge card. If you paid for this lodging with a personal credit card or personal funds, you may submit a reclaim voucher, along with a copy of your receipt that shows how the lodging was paid for.

Disallowed $13.14P - Personal, miscellaneous expenses (room services, movies, etc.) are not an allowable claim.

Disallowed $390.00 – Conference fee was a Centrally Billed Item, charged on your Government Credit card creating a direct expense to Office of the Secretary than the traveler, therefore this expense cannot be reimbursed.

Please direct any inquiries to Vickie Stwalley 303-969-5652

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE: **Vickie Stwalley**	REVIEWING TECHNICIAN	**3/16/2007**

Pam Williams

Jam'esetta J Coaster-Barrington
03/19/2007 11:59 AM

To: Victoria S Stwalley/NBC/OS/DOI@DOI
cc:
Subject: SIWROU-2-FY07

5020 DDR07 IA 000 166 is the correct cost structure.

SMILE
J. Jamie Coaster
Mgmt Program Analyst
Secretary's Indian Water Rights
Office of the Secretary, Dept of Interior
1849 C. Street MIB-2321 Room 2327
Washington, DC 20240
202-208-1442 office
202-594-3294 blackberry
202-208-1320 fax
Jam'esetta_Coaster-Barrington@ios.doi.gov

D

9748016199

04207

SIWRO

TRAVEL VOUCHER

(Read Privacy Act Statement on the back)

1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE: Ofc of the Secretary

2. TYPE OF TRAVEL: [X] TEMPORARY DUTY [ ] PERMANENT CHANGE OF STATION

3. VOUCHER NO.: SIWROQ8.FY07

4. SCHEDULE NO.:

5. a. NAME *(Last, first, middle initial)*: Williams, Pamela S.

b. SOCIAL SECURITY NO.: (b) (6) [redacted]

6. PERIOD OF TRAVEL: a. FROM 01/28/2007 b. TO 02/03/2007

c. MAILING ADDRESS *(Include ZIP Code)*: 3442 East Mountain Vista, Phoenix, AZ 85048

d. OFFICE TELEPHONE NO.: (202) 208-1442

7. TRAVEL AUTHORIZATION: a. NUMBER(S) SIWROQ8.FY07 b. DATE(S) 03/08/2007

e. PRESENT DUTY STATION: Washington, DC

f. RESIDENCE *(City and State)*: (b) (6) [redacted]

10. CHECK NO.:

8. TRAVEL ADVANCE

a. Outstanding	0.00
b. Amount to be applied	0.00
c. Amount due Government *(Attached [ ] Check [ ] Cash)*	
D. Balance outstanding	

9. CASH PAYMENT RECEIPT

a. DATE RECEIVED:

b. AMOUNT RECEIVED: $

c. PAYEE'S SIGNATURE:

Document ACCEPTED MAR 2 2 2007

11. PAID BY: TDT

12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH *(List by number below and attach passenger coupon; if cash is used show claim on reverse side)*

I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ *Traveler's Initials* J.L.M.

AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER *(Initials)* (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL FROM (e)	POINTS OF TRAVEL TO (f)
See Attached Ticket 1	543.80			PHX-Phoenix AZ	AirIAD-Washington, Du

3/15/07 - Called on Acct Codes

211D-352.00
211P-22.25
211I 20

COMMENTS:
Trip Number 1. Rental car authorized. Lodging at no cost to govt on 1/28 and 1/29. Travel paid by BOR A1R-1759-1309-001-00-0-0 (9). Was not on A/L on 1/29/07 due to Discovery request by DOJ, worked in DC that day. No AL charged.

'07 MAR 13 A9:51 REC'D MBC

13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.

TRAVELER SIGN HERE ▶ Pamela Williams DATE 3/8/07 AMOUNT CLAIMED ▶ 531.78

NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than $10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).

14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. *(NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)*

APPROVING OFFICIAL SIGN HERE ▶ Doug Dorrenech Deputy DATE

17. FOR FINANCE OFFICE USE ONLY COMPUTATION

a. DIFFERENCES, IF ANY *(Explain and show amount)* 2/3 NO PER Diem	$ <48.00>
See TA	
last Not 3/4	<16.00>
lodging TAX CB	<73.53>
b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION *Certifier's initials:*	$ 197.53
c. APPLIED TO TRAVEL ADVANCE *(Appropriation symbol):*	$ 0.00
d. NET TO TRAVELER ▶	$ 531.78

15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION

a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR

16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT

AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE

18. ACCOUNTING CLASSIFICATION

BOR/Guest-2007.A1R1759130900100009..... - 531.78 NR- 1,607.45

391.25

3/16/07 - Per Iris Winston

48•00	+
48•00	+
64•00	+
64•00	+
64•00	+
64•00	+
64•00	+
22•25	+
73•53	+
20•00	+
531•78	*

48•00	+
48•00	+
64•00	+
64•00	+
64•00	+
64•00	+
22•25	+
20•00	+
394•25	*

531•78	+
394•25	-
137•53	*

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

INSTRUCTIONS TO TRAVELER *(Unlisted items are self explanatory)*

Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.)

Complete only for actual expense travel

Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.

(h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).

(i) Complete for per diem and actual expense travel.

(j) Show total subsistence expense incurred for actual expense travel.

(m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.

(n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc.

18/61

Complete this information if this is a continuation sheet. PAGE 2 OF TRIP# 1 PAGES

TRAVEL AUTHORIZATION NO. SIWROQ8.FY07

TRAVELER'S LAST NAME Williams

DATE 20 07 (a)	TIME (Hour and am/pm) (b)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses) (c)	ITEMIZED SUBSISTENCE EXPENSES: MEALS: BREAKFAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)	MISCELLANEOUS SUBSISTENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)	MILEAGE RATE: 0.445 NO. OF MILES (k)	AMOUNT CLAIMED: MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
01/28	12:01A	D-:Phoenix, AZ											
01/28		Airline Flight											
01/28	12:00A	A-:WASHINGTON,DC				48.00			48.00			48.00	
01/28		Fuel-Rental/GovCar-Govcc											
01/28		Private Vhcle								50	22.25		
01/28		Rental Car - Govcc											
01/28		Airport Parking GVCC CBill											73.53
01/28		Taxes for Lodging											20.00
01/28		Parking-govcc(non-airport)											
01/28		Ticket Agent Fee											
01/28		Taxes for Lodging Parking											
01/29		Subsistence				64.00			64.00			64.00	
01/30		Subsistence				64.00		169.00	64.00			64.00	
01/31		Subsistence				64.00		169.00	64.00			64.00	
02/01		Subsistence				64.00		169.00	64.00			64.00	
02/02		Subsistence				64.00		169.00	64.00			64.00	
02/03	12:00A	D-:WASHINGTON,DC											
02/03	12:01A	A:Phoenix, AZ											
02/03		Subsistence				48.00			48.00			48.00	
									SUBTOTALS ▶		22.25	416.00	93.53
									TOTALS ▶		22.25	416.00	93.53

If additional space is required, continue on another 1012-A BACK, leaving the front blank.

Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.

TOTAL AMOUNT CLAIMED ▶ 531.78

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil, requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.

STANDARD FORM 1012 BACK (10-77)

03/08/07 ACCOUNTING DETAIL |Doc No: SIWROQ8.FY07

Copyright 1989-2004 Gelco Information Network, Inc

|Williams, Pame (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			543.80
FUEL-GOVCC-			22.48
HOTEL TAXES-			73.53
LODGING-409			676.00
M&IE-409			416.00
MILEAGE-408			22.25
MISC-GOVCC-			20.00
PARK-			56.00
RENTAL CAR-409			284.67
TRAVEL AGENT-			24.50
BOR/Guest	0.00	0.00	2,139.23

Organization:
2007.A1R1759130900100009.....

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES		2,139.23
NON-REIMBURSABLE EXPENSES		1,607.45
TOTAL AMOUNT CLAIMED		531.78
GOV'T ADVANCE OUTSTANDING --	0.00	
GOV'T ADVANCE APPLIED ------	0.00	
		0.00
NET TO TRAVELER (GOVT)		531.78
GOV'T CHARGE CARD EXPENSES -	93.53	
GOV'T CHARGE CARD ATM ADV --	0.00	
ADD'L GOV'T CHARGE CARD PYMT	0.00	
TOTAL GOV'T CHARGE CARD AMT	93.53	
PAY TO GOV'T CHARGE CARD		93.53
PAY TO TRAVELER		438.25

OFFICIAL TDY TRAVELER AUTHORIZATION

(Note: See Privacy Act Statement on reverse)

1. AUTHORIZATION NO.: SIWROQ8.FY07

2. TRAVELER *(first name, middle initial, last name)*: Pamela S. Williams

3. TITLE: Director, SIWRO

4. SOCIAL SECURITY NO.: (b) (6) [redacted]

5. ADDRESS TO WHICH REIMBURSEMENT CHECK WILL BE MAILED:
3442 East Mountain Vista
Phoenix, AZ 85048

6A. OFFICE/SERVICE AND DIVISION: Ofc of the Secretary

6B. CORR. SYMBOL:

7. OFFICIAL DUTY STATION: Washington, DC

8. OFFICE PHONE NO.: (202) 208-1442

9. TYPE: [X] ORIGINAL [ ] AMENDMENT

10. CATEGORY: [X] SINGLE TRIP [ ] LOA ([ ] COST [ ] NO COST)

11. TRAVEL PURPOSE *(check one)*: [ ] SITE VISIT [X] INFORMATION MEETING [ ] TRAINING ATTENDANCE [ ] SPEECH OR PRESENTATION [ ] CONFERENCE ATTENDANCE [ ] ENTITLEMENT [ ] SPECIAL MISSION [ ] OTHER *(SPECIFY)*

12. SPECIFIC TRAVEL PURPOSE: Taos Meetings w/tribe and VIPs; Mtg w/BOR Commissioner. 1/29/07 Reviewing documents selected by DOJ for disovery release deadline.

13. AUTHORIZED OFFICIAL ITINERARY

NOTE: DO NOT include any personal sidetrips or modes of transportation that are for personal convenience and/or preference.

DATE (a)	WEEK-DAY (b)	ITINERARY POINT (c) CITY	STATE	PER DIEM RATE M&IE RATE (d)	MAXIMUM LODGING (e)	TOTAL MAXIMUM (f)	ACTUAL EXPENSE RATE (g)	MODE OF TRANS. BETWEEN ITINERARY POINTS (h)	MODE OF LOCAL TRANSPORTATION (i)
		FROM: Phoenix	AZ						
01/28/2007	SUN	TO: WASHINGTON	DC	64	188	252		AIR	1POC
02/03/2007	SAT	WASHINGTON	DC	64	188	252			
--------	---	TO: ----------	--	---	---	---	---	----	----
--------	---	----------	--	---	---	---	---	----	----
02/03/2007	SAT	TO: Phoenix	AZ						

YES	NO	
	X	**14. IS THE EMPLOYEE MAKING ANY DEVIATIONS FROM THE AUTHORIZED ITINERARY FOR PERSONAL CONVENIENCE, TAKING ANY ANNUAL LEAVE OR USING A DIFFERENT MODE OF TRANSPORTATION FOR PERSONAL CONVENIENCE?** *(If YES, explain in item 22, REMARKS)* (Note: any deviations from the authorized itinerary requires a comparative cost statement on the SF 1012, Travel Voucher.)
X		**15. IF AIR TRANSPORTATION IS THE AUTHORIZED MODE OF TRAVEL BETWEEN ITINERARY POINTS, IS THE LOWEST PRICED CONTRACT CARRIER BEING USED BETWEEN ALL ITINERARY POINTS?** *(If NO, justify in item 22)*
	X	**16. IS EXTRA AIR FARE (first class, business class, etc.) OR RAIL (Metroclub, pullman, etc.) AUTHORIZED?** *(If YES, justify in item 22)*
X		**17A. WILL POV BE USED FOR ANY TRAVEL BETWEEN ITINERARY POINTS?** *(If YES, check one box below and complete item 17B)* [X] USE OF POV IS ADVANTAGEOUS TO THE GOVERNMENT. [ ] USE OF POV IS NOT ADVANTAGEOUS TO THE GOVERNMENT. USE OF POV HAS BEEN DETERMINED TO BE FOR PERSONAL CONVENIENCE AND REIMBURSEMENT LIMITED TO CONSTRUCTIVE COST OF COMMON CARRIER — 17B. MILEAGE RATE AUTHORIZED PER MILE: 0.445
	X	**18. IS ACTUAL EXPENSE UNUSUAL CIRCUMSTANCES AUTHORIZED?** *(If YES, justify in item 22)* **IF ACTUAL EXPENSE IS AUTHORIZED, THE FOLLOWING APPLY:** (1) EXPENSES MUST BE ITEMIZED EACH DAY. (2) RECEIPTS ARE REQUIRED FOR LODGING AND EACH MEAL OVER $25.00. (3) REIMBURSEMENT FOR MEALS AND MISCELLANEOUS SUBSISTENCE EXPENSE MAY NOT EXCEED 150% OF THE AMOUNT IN ITEM 13(d).

19. TRAVELER IS *(check one)*: [X] a. GOV'T CHARGE CARD HOLDER [ ] b. GOV'T CHARGE CARD DECLINEE [ ] c. INFREQUENT TRAVELER

20. METHOD OF OBTAINING COMMON CARRIER TICKETS *(check one)* (Note: If item 19a was checked and you check 20b or c, explain in item 22): [ ] a. INDIVIDUAL GOVERNMENT CHARGE CARD [ ] b. BLANKET GOVERNMENT CHARGE CARD [ ] c. GOVERNMENT TRANSPORTATION REQUEST [X] OTHER *(explain in item 22)*

21. FUNDS OBLIGATED: A. INITIALS / B. DATE

22. REMARKS
Travel being paid by BOR Cost structure below A1R-1759-1309-001-00-0-0 (9) Please charge to this cost structure. Lodging at no cost to govt on 1/28 and 2/2 same for rental car charges. Per Diem on 1/28 & 2/3 75%. No per diem on 2/3.

23. EST. COST TO GOVERNMENT

A. TOTAL COMMON CARRIER COST	$ 543.80
B. TOTAL PER DIEM AND OTHER	$ 1421.75
C. TOTAL ESTIMATED COST	$ 1965.55
25. ADVANCE AUTHORIZED	$ 0.00

24. TRAVEL ADVANCE WILL BE OBTAINED BY *(check one)*: [X] a. GOVERNMENT ISSUED CHARGE CARD [ ] b. SF 1038, ADVANCE OF FUNDS APPLICATION AND ACCOUNT

IMPORTANT: SAFETY BELT USE IS MANDATORY. DRIVE SAFELY

A SF 1012, TRAVEL VOUCHER MUST BE SUBMITTED TO THE VOUCHER APPROVING OFFICIAL WITHIN 5 WORKING DAYS OF COMPLETION OF TRIP.

26. NEAR ACCOUNT CLASS.	FUND		BUDGET ACTIVITY	OBJECT CLASS	FUNCTION	COST ELEMENT	PROJECT / PROSPECTUS	COST CENTER A	WORK ITEM	COST CENTER B
		A1R-1759-1								

27A. NAME AND TITLE OF AUTHORIZING OFFICIAL: Doug Domenech - Deputy COS

27B. SIGNATURE *(PRESS FIRMLY USE BALL POINT PEN)*

27C. DATE

01/26/07 ACCOUNTING DETAIL |Doc No: SIWROQ8.FY07

Copyright 1989-2004 Gelco Information Network, Inc

|Williams, Pame (b) (6) [redacted]

ACCOUNTING CLASS CODE			TRIP 1
COM CARRIER-408			543.80
HOTEL TAXES-			90.00
LODGING-409			752.00
M&IE-409			352.00
MILEAGE-408			22.25
PARK-			50.00
RENTAL CAR-409			145.00
TRAVEL AGENT-			10.50
BOR/Taos	0.00	0.00	1,965.55

Organization:
.A1R-1759-1309-001-00.....

Date Scanned / OS 12/1/06
Scanned by Iris Winston
E-mailed to Denver 12/1/06

Date Scanned / BIA 12/1/06
Scanned by Iris Winston
E-mailed to BIA Recipients 12/1/06

UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

Reimbursable Support Agreement
Fiscal Year 2007

Parties to the Agreement

Customer Agency (Paying Agency)	Provider Agency (Billing Agency)
Bureau/Agency Name: Bureau of Indian Affairs	Bureau/Agency Name: DOI, OS, SIWRO
Address: 1849 C Street, NW Washington, DC 20240	Address: 1849 C Street, NW MS 2321 Washington, DC 20240
Project Coordinator: Iris C. WINSTON	Project Coordinator: J. Jamie Coaster-Barringotn
Signature: Iris C. Winston	Signature: J. Jamie Coaster-Barrington
telephone: (202) 208-6033 11/16/06	telephone: (202) 219-1384

Accounting Data

Document Number: RS07KX3033	Document Number: RA7W0161
Appropriation: 14-7/8-2100	Appropriation: 14 7 0102
Account Info: K7ASIA 0708 A5000253G $1,600.00	Account Info: 1000 DDR14 1A0161 68
Agency Location Code: 14-20-0699	Agency Location Code: 14-01-0001

Description and Cost of Goods and/or Services to be Provided

This agreement is to be accomplished on the following basis:
☒ Time and Materials ☐ Fixed Price

Description of Service: (Include time frame involved, estimated costs by object class and a brief description of the service. Attach additional backup data as needed.)

Pamela Williams will be traveling to Washington DC for pre-meetings (12/11) and a one day retreat (12/12) w/Counselor and Assistant Secretaries to strategize on water right Settlements and time sensitive Secretarial commitments for water settlements. Travel to Las Vegas to negotiate a final settlement for Soboba (12/13-12/14) and meet with the 5 tribes involved in the San Luis Rey water Settlement. Attend CRWUA on (12/15) w/ Secretary Kempthorne. Travel to be reimbursed is Airplanc, lodging, per diem, parking, lodging taxes, pov, rental car, and taxi as needed.

Obligational Authority Available	
Until (date)	8-1-2007
Initial or Current Amount	$ 1,600.00
Amendment Number	#
Amount	$
New Total Amount	$ 1,600.00

Approvals

CONDITIONS OF AGREEMENT: The Office of the Secretary is willing to enter into this agreement subject to the conditions stated on the second page of this form.

APPROVAL BY PAYING AGENCY	APPROVAL BY CUSTOMER AGENCY
Signature: Mary Jane Miller	Signature: Gary Weitzner
Date: 11/20/2006	Date: 11/30/06
Name: MARY JANE MILLER	Name: Gary Weitzner
Title: Budget Officer	Title: Budget Officer

This form was electronically produced by Elite Federal Forms, Inc.

DI-2017 (11/2001)

Pam 1-28 to 2-3

Solutions

Record Locator (PNR): KLEMVG

Phoenix (PHX) to Washington (IAD)

Sunday, Jan 28

	Departs	Arrives	Notes
UNITED Flight 952 Coach Airbus A320 Fare Rules	Phoenix (PHX) Jan 28 9:20 AM	Washington (IAD) Jan 28 3:39 PM	non-stop flight 3:19 **Seat(s)** Passenger 1: 8F

	Pick Up Location	Drop Off Location	Notes
Alamo terminal	Washington (IAD) Jan 28 4:00 PM	Washington (IAD) Feb 3 5:00 PM	Car Confirmation: 338845650COUNT compact 2 door Air Conditioning Automatic Transmission **Special Requests** non-smoking car, hand controls-right, 4 door

Washington (IAD) to Phoenix (PHX)

Saturday, Feb 3

	Departs	Arrives	Notes
UNITED Flight 953 Coach Airbus A320 Fare Rules	Washington (IAD) Feb 3 5:15 PM	Phoenix (PHX) Feb 3 8:17 PM	non-stop flight 6:02 **Seat(s)** Passenger 1: 8F

Details

Base Airfare:	$486.51
Taxes:	$57.29
Subtotal:	$543.80
Passengers:	1
Total Airfare:	**$543.80**

Alamo - Washington, DC

Daily Car Rate:	$14.00
Days:	6
Location Total:	$84.00
Car Cost Estimate:	**$165.29**

(may not include taxes/fees)

Record Locator (PNR): KLEMVG
Airline Confirmation1: UA-M2NSQ6
Car Confirmation 1: AL-338845650COUNT
Special Instructions: N/A
Deliver To: Pamela Williams
(b) (6) [redacted]
USA

Passenger Information

Pamela S Williams
standard meal

Frequent Traveler Program
United: (b) (6) [redacted]

Travel Agency Information

Travel Agency Information:
CW Government Travel, Inc.
1777 NE Loop 410
Suite 1001A
San Antonio, TX 78217

Toll-free 866-227-5638
Fax 877-834-3459

ALAMO

RA 411054442 Inv 40011209223
Rental 28-JAN-2007 04:00 PM
WASHINGTON DULLES INTL ARPT
Return 03-FEB-2007 03:07 PM
WASHINGTON DULLES INTL ARPT

PAMELA SUE WILLIAMS
Vehicle # 77171323
Model COBALT 4DR
Class Driven CCAR Class Charged CCAR
License# (b) (6) [redacted] State/Province MA
M/Kms Driven 209
M/Kms Out 9568
M/Kms In 9777

CARLSON TRAVEL
Contract ID 506126

Charges	No Unit	Price	Amount
T & M	1 Week	231.00	231.00*
UNLIM M/KM	0 M/Kms		0.00*
AP CONCESSION FEE RECOV			25.88*
STATE IMPOSED RENTAL FEE			5.17
VEH LIC FEE RECOV			1.92*
MOTOR VEH TAX @8.000 %			20.70

Total Charges USD 284.67

Paid By (b) (6) [redacted] -284.67

Amount Due USD 0.00

* Taxable Items
Subject to Audit
Customer service Number 1(800) 445-5664

Alamo®

44910 Rudder Rd
Dulles Va 20166

EXXON EXPRESS PAY

DULLES AIRPORT, 4715884

DULLES I, VA

02/03/2007 2:58:32 PM 6337

MasterCard (b) (6) [redacted] MCFT15
WILLIAMS/PAMELA
INVOICE Q1Q9380
AUTH 011854

PUMP#21
Regular 10.412G
PRICE/GAL $ 2.159
FUEL TOTAL $22.48

Total = $22.48

CRIND Credit $22.48

Credit

buy 4 car washes and get 1 FREE
gallon milk 2 for $6

Phoenix Intl. Airport
Sky Harbor Intl
4200 E. Sky Harbor Blvd.
Phoenix, AZ 85034
Phone. 602-273-4545 or 4546
Fax. 602-392-0149
Car park 0000007309

Receipt 0181/7805/808 02/03/07 21:48:17

000104 104 Unrecd. Ticket$ 56.00
Entry Time : 01/28/07 07:27
Entry Lane : 808

Total Amount $ 56.00

Credit MasterCard $ 56.00
Tax 0.00 % $ 0.00

MasterCard

WILLIAMS/PAMELA
Amount = $ 56.00
Account (b) (6) [redacted] 8376
Authorization Code

Thank you
Open 24 hours

THE·RIVER·INN

Luxury Suites in Historic Foggy Bottom

924 Twenty-Fifth Street NW
Washington 20037

Room No. : 415
Arrival : 01-30-07
Departure : 02-02-07
Page No. : 1 of 1
Folio No. : 44868
Cashier No. : 123

Williams, Pamela
1849 C St.
Washington 20240

Date	Description	Charges	Credits
01-30-07	GARAGE FEE	20.00	
01-30-07	GARAGE TAX	2.40	
01-30-07	ROOM CHARGE	169.00	
01-30-07	ROOM TAX	24.51	
01-31-07	ROOM CHARGE	169.00	
01-31-07	ROOM TAX	24.51	
02-01-07	GARAGE FEE	20.00	
02-01-07	GARAGE TAX	2.40	
02-01-07	ROOM CHARGE	169.00	
02-01-07	ROOM TAX	24.51	
02-02-07	MASTERCARD		625.33
	(b) (6) [redacted] (b) (6) [redacted]		
	Total	625.33	625.33
	Balance		0.00

1/8/07

X

Cardholder acknowledges receipt of goods and/or services in the amount of the total shown above and agrees to perform the obligations and terms in the cardholder agreement with the seller.

TRAVEL AUTHORIZATION COVER SHEET

NAME OF TRAVELER: Pamela Williams

DATES OF TRAVEL: **January 28-February 2, 2007**

PURPOSE AND LOCATION OF TRAVEL:
Location is Washington, DC. Purpose is to assist Counselor to the Secretary Michael Bogert with Indian water rights negotiations involving proposed settlements of water rights claims of the Taos. Attending this meeting will be the Tribes and VIP's. Important meeting scheduled w/BOR Commissioner in reference to Indian water right issues..

TIME SENSITIVE/ESSENTIAL NATURE OF THE TRAVEL:
To work w/Counselor to the Secretary to establish and maintain a better relationship with Taos reps for completed of Negotiation talks.

ESTIMATED COST OF TRIP: **Lodging @ no cost to Govt on 1/28 & 2/2; no per diem 2/2.; Per diem at 75% 1/28 & 2/3;**

Airfare =	$ 543.80
Hotel =	$ 752.00
Per diem=	$ 288.00
Rental Car=	$165.29
Total charges for travel $2000.00	

Total charges for 4 days travel = $ 2,000.00

COSTS FOR THIS TRAVEL WOULD BE PAID BY (check one):

☐ OS Travel Account

☒ Bureau Travel Account by ~~reimbursable~~ agreement already in place.

Name of Bureau: Bureau of Reclamation cost code attached to Authorization

==========

OFFICE SURNAME: (Office Director must surname.) SIWRO/Date BN 1/26/07

For IOS Offices – Assistant Secretary or Office Director Approval/Date:_____

For PMB – DAS Approval/Date: _____

==========

APPROVAL:

This travel is: ☒ APPROVED ☐ NOT APPROVED.

Signature: _____
Doug Domenech, Deputy COS, Brian Waidmann, COS, Tom Weimer, ASPMB

U .S. Department of the Interior

Notice of Action Taken

National Business Center - Denver
7401West Mansfield Ave. D-2777
Denver, CO 80235 – 2230

PAMELA WILLIAMS
3442 E MOUNTAIN VISTA
PHOENIX, AZ 85048

VOUCHER NUMBER: SIWROQ807			
Amount Claimed	**Suspended**	**Disallowed**	**Allowed**
531.78		137.53	394.25
Tax Withheld	**Applied to Advance**	**Under Claimed**	**Amount of Check**
			394.25

EXPLANATION:

Disallowed $73.53 - This Notice of Action is to disallow the lodging claimed. Effective October 20, 2006, all charges placed on your lodging receipt for OS and NBC are posted as centrally billed. OS and NBC travelers will no longer be reimbursed for lodging charged to their Government charge card. If you paid for this lodging with a personal credit card or personal funds, you may submit a reclaim voucher, along with a copy of your receipt that shows how the lodging was paid for.

Disallowed $16.00 - Only 75 percent of the allowable M&IE can be claimed on the first and last day of travel. The M&IE rate per day for Washington, DC is $64.00 therefore the reduced rate is 48.00.

Disallowed $48.00 - M&IE rate on Feb 3, 2007 due to Travel Authorization stating NO PER DEIM on 2/3.

Please direct any inquiries to Vickie Stwalley 303-969-5652

Note: If reclaiming, use a new SF-1012 with original signatures and the same travel voucher number with an "S" on the end. Submit with any supporting documents, a copy of this letter and a copy of the travel authorization for this trip.

SIGNATURE: **Vickie Stwalley**	REVIEWING TECHNICIAN	**3/16/2007**

Department of the Interior

OFFICE OF THE SECRETARY
Travel

FFS Batch Control Document

Batch ID

Trans Type	Division
TV	0

Julian Date	Prep Unit	Sequence Number
075	VS	D

Batch Totals

Input Date	Number of Documents	Net Total (Required)
3/16/04	5	1242.42

System Checked By: _____ Date _____

Batch Approval

Approved By: Jm

Date Approved: 3/19/07 & 3/22/07

CHECKED MAR 23 2007