Your Name	: Eric Arm	strong	Supervisor	John W	/illiams	You	r Department:	IS	
			<u>-</u> -						·
Leave Date Return Date	06/08/19		Destination: Trip Purpose:	Cisco Live 2019	San Diego, CA			Per Diem:	71.00
		ahaak ana)	•						
Me	thod of Travel: (City Vehicle:	Check one)	Air:	avel Advance:	•		use M&IE column	ov/portal/conter	11/1048/8
P	ersonal Vehicle:				Evolain				
	_		_						
Attach applicable receipts for motel/lodg									
Date		06/09/19	06/10/19	06/11/19	06/12/19	06/13/19	06/14/19		Category
Allowable Lodging	139.59	139.59	139.59	139.59	139.58	139.58	00/14/10		837.52
Lodging paid w/ City VISA	139.59	139.59	139.59	139.59	139.58	139.58			837.52
Breakfast (20%)		14.20	Provided	Provided	Provided	Provided	14.20		28.40
Lunch (30%)		21.30	Provided	Provided	Provided	Provided	21.30		42.60
Dinner (50%) Total Meals (w/per diem)		35.50 71.00	35.50 35.50	35.50 35.50	35.50 35.50	35.50 35.50	35.50 71.00		248.50 319.50
Fuel/Parking Air Fare	+						52.50		52.50 464.99
Toll/Shuttle Bus/Taxi	11.50						11.50		23.00
Mileage (Enter as miles)		18.0	The Section of the Control of the Co	ST THE STATE OF TH			54.00		108.00
Total Transportation		Site periods of		•			95.32		603.13
Transportation paid w/ City VISA							64.00		540.49
Registrations *See Below*						7			-
Registration paid w/ City VISA									-
Total Cost	682.90	210.59	175.09	175.09	175.08	175.08	166.32	_	1,760.15
City VISA Charges (Total)		139.59	139.59	139.59	139.58	139.58	64.00		1,378.01
Non-Visa Charge	66.82	71.00	35.50	35.50	35.50	35.50	102.32	-	382.14
"If registration has been reported on previous expense statement leave blank"							Advance	Received (-):	\$0.00
Line							City Ow	es Employee:	\$382.14
							Employ	ee Owes City	-ZERO-
If splitting between mult		ease use box			.				
001-1-1070.2022 Travel			\$ 603.13		City Acco	ount Number:[001-1-10	70-2022	
001-1-1070-2130 Hotel & Me	eals		\$ 1,157.02		City Acco	ount Number:[001-1-1070-213	3O	
				г					
						Travel Requ	est Filled out:	☑ts	
		TOTAL	\$ 1,760.15	L				_	
	that the travel inc							that	
intorma	ation shown is co	orrect; that he	part of the co	mpensation cla	imed was of a i	non-City busin	ess nature.		
Emplo	yee Signature: 🤇	14/14	<u> </u>			Date:	6/27/1	<u>Î</u>	
Superv	risor Approval:	The desired in the second	RIN D			Date:	1/20	12014	
·			N.	,			7/2/0		
Dept. F	lead Approval	THE	Mina			Date: _	113/2	019	
(Out of State Travel)	City Manager.	Lase	11/10	may	_	Date:	7/21	2019	
(If Required)	Mayor:		<i>J</i> . (O		Date:	1 -1	•	
Approved by Acco	ounts Payable:					Date:			
		a. se wake som beginning	and some property of the source of the sourc	n managem society as passent	Special Control	and the second second			24 4. 74. 91. 24.
Comments:						Market Name of State			
				ıll food per dier questions rega			Ci until 11:45 p	<u>m.</u>	
	Cisco Live provid	es excellent le	earning opportur	nities including e	ducational semi	niars, hands on			
How did this apply to your job?	configration labs,							tches and ask spe	ecific
	questions and giv	- apecine iee		, are engineers v	viio uesign the e	quipment the C	ny uses.		
	Yes						**************************************		
Would recommend attending again?									
	K								
How will this add value to the City of	Knowledge gain f equipment and ge	rom seminars et the most ou	and direct interact of it, as well as	actions with Cisc to insite into wh	co professionals	can be translat	ed directly to ho	w we use our net s headed as a wh	working ole.
Lawrence?	,,				Jonning Out	. Joon and MIG	- and madding to	us a WII	

Your Name:	Stephen	Bond	Supervisor			You	ur Department:	: MSO	
Leave Date:	: 06/19/19		Destination:		Wichita KS				The observer of the
Return Date:				: Construction S		ning	-	Per Diem:	61.00
Ме	ethod of Travel: City Vehicle:	(check one)		ravel Advance:		l	www.gsa.ge	ov/portal/cont	ent/104878
Pe	ersonal Vehicle:	X	Other:		Explain:				
Attach applicable receipts for motel/lodgi	ing expenses, pı	ublic carrier tick	cets, personal a	uto mileage/gas/	/tolls, regist fees	s, etc.			
	Wednesday	Thursday							Category
Date Allowable Lodging Lodging paid w/ City VISA		06/20/19							Totals -
		12.20							-
Breakfast (20%) Lunch (30%)	-	12.20 18.30							12.20 18.30
Dinner (50%) Total Meals (w/per diem)		30.50 61.00				·		-	61.00 91.50
Fuel/Parking			Garage State		18 18 18 O 18 O 18 O 18 O 18 O 18 O 18				<u>-</u>
Air Fare Toll/Shuttle Bus/Taxi									-
Mileage (Enter as miles) Calculated mileage (x.58)		167.00 96.86			-				334.00 193.72
Total Transportation Transportation paid w/ City VISA	96.86	96.86	-	-	-	-	-	-	193.72
Registrations *See Below*	400.00								400.00
Registration paid w/ City VISA									400.00
Total Cost	527.36	157.86	-	-	-	-	-	-	685.22
City VISA Charges (Total)	400.00		-	-	-				400.00
Non-Visa Charge	127.36	157.86	-	-		-	-		285.22
If registration has been reported on previous expense statement leave blank						Carlotte and the Teams	Advanc	e Received (-):	\$0.00
previous expense statement	1						City Ov	wes Employee:	\$285.22
If little a between mult	et la Alabania	ba	tratan,				Emplo	yee Owes City	-ZERO-
If splitting between mult Transportation & Meals	ipie Accounts	olease use box	\$ 285.22]	City Acc	count Number:	505-3-31	910-2022	
Conference registration			\$ 400.00	}	City Acc	count Number:	505-3-3910-20)30	1
				}				☑rES	1
		TOTAL	\$ 685.22	1		Travel Requ	uest Filled out:	□ lo	
							OR A CONTRACTOR OF THE PARTY OF		I.
I hereby certify to	that the travel in							d that	
	yee Signature:	M	WALL OF THE S.	Mipeusation of	dilileu was oi a	Date:	1/-	1/2019	
		mali	1	Tall			2 4 201	10	r.
	visor Approval:	47	The A	HUW	jer	Date:	1	lic	r.
	lead Approval:	Kry	~			Date:	101	19.	
→	City Manager:		\vee			Date:			
(If Required)	→ Mayor:			-		Date:			
Approved by Acco						Date:	Particular and the second second		•
Attach applicable Comments:	e receipts for m	iotel/lodging e	xpenses, publ	ic carrier ticket	s, personal aut	to mileage/gas/	tolls, regist ree	es, etc.	
1 / 1				questions rega			1 - 1-		
How did this apply to your job?				by the Kansas D KDOT funded p		ansportation (KI	DOT) to perform	n sediment & ero	sion control
Would recommend attending again?	Yes					P			

Your Name:	Britt C	rum-Can	Supervisor	Diame	STOO	<i>a C</i> DYour	Department:	Cital	Man.
			U.					1	
Leave Date: Return Date:			Destination: Trip Purpose: T		s Angeles, CA 0-201)			Per Diem:	66.00
Me	thod of Travel: City Vehicle:	(check one)	Trav <i>Air:</i>	vel Advance:		(<u>www.gsa.go\</u> ise M&IE column	r/portal/conte	nt/104878
Pe	ersonal Vehicle:		Other:		Explain:				
h applicable receipts for motel/lodg	ing expenses, pu	blic carrier ticke	ets, personal auto	miteage/gas/tol	ls, regist fees, e	tc.			
Day of Week		Monday			***************************************	Friday			Category
Date Allowable Lodging	06/02/19 208.25	06/03/19 208,25	06/04/19 208.25	06/05/19 208.25	06/06/19 208.25	06/07/19			Totals 1,041.25
Lodging paid w/ City VISA		208.25	208.25	208.25	208.25				1,041.25
		70000 700			40.00	40.00	September 1		***
Breakfast (20%) Lunch (30%)		13.20 19.80	13.20 19.80	13.20 19.80	13.20 19.80	13.20 19.80			66.00 99.00
Dinner (50%)	33.00	33.00	33,00	33,00	33,00	33.00			198.00
Total Meals (w/per diem)	33,00	66,00	66.00	66.00	66.00	66.00	-	-	363.00
					répas dia dia .		TEMPO		
Fuel/Parking	387.60								387.60
Air Fare Toll/Shuttle Bus/Taxi	387.60 140,54					140.54			281.08
Mileage (Enter as miles)	1,10,04		+		<u> </u>	1.10101			-
Calculated mileage (x.58)	9	-	9	-	4	•	-	-	. (.
Total Transportation	528.14				-	140.54			668,68
Transportation paid w/ City VISA	450.14		1 3 1 7 to 1 to 1			62,54			512.68
Registrations *See Below*	 	1							_
Registration paid w/ City VISA									•
Total Cost	769.39	274.25	274.25	274.25	274.25	206.54	-	-	2,072.93
City VISA Charges (Total)	658.39	208.25	208.25	208.25	208.25	62.54	- -	-	1,553.93
	144.00					444.00			F10.00
Non-Visa Charge	111.00	66,00	66.00	66.00	66.00	144.00	-	- 1	519.00
us expense statement leave blank* If splitting between muli	llala Accounts	Nossa usa bay	bolow				-	s Employee: ee Owes City	\$519.00 -ZERO-
n spirting between mun	ipie Accounts (nease use box	pelow		City Accou	nt Number:	001-1-102	0-2022	
		t			•				
					City Accou	int Number:	S. 657,949,003,000,00	640,650,455,1654,465	
		1		-					
		}				Travel Reque	st Filled out:	⊒ YES	
		TOTAL	\$ -					□ N0	
l hereby certify	that the travel in	ndicated hereo	n was incurred i	n the discharge	e of official City	of Lawrence	business and	that	
			part of the com					V)	
Emplo	yee Signature:	1211	Mari		A	Date:	19-11-1	r.1	
e	isor Approval.	0-0.	M-	JO .0 M	rol	Date:	6 1	1-19	
Superv	isor Approvat.	was	MOU	<u> naa</u>		Date.	- 11		
Dept. H	lead Approval:			_		Date:	_		
(Out of State Travel)	City Manager:	10115	llan	et Por	1 TW	Date:	ر - ب	11-19	
·	•	- W() V		- U-	• ,	-	<u> </u>		
(If Required)	→ Mayor:					Date: _			
Approved by Acc	ounts Payable:					Date: _			
Attach applicabl	e receipts for m	iotel/lodging e	xpenses, public	carrier tickets,	personal auto i	nileage/gas/t	olls, regist fees	, etc.	
Comments:									
			r the following q						
low did this apply to your Job?			sses required to o s (NDC)EDFP Ce			al economic de	evelopment finar	icial analysis th	rough the
ould recommend attending again?	Yes								
	Expands staff k	nowledge and s	kill set in econom	nic development	financial analysi	s			
w will this add value to the City of Lawrence?		-		•	•				

Your Name:	Stever	n Craig	Supervisor	Leah I	Viorris	Υοι	ur Department:	MS	0
Leave Date:	06/09/19 06/13/19		Destination:		Denver, Colorado			Por Diam:	76.00
Return Date:					ence / Operator (Challenge		Per Diem:	76.00
iviet	chod of Travel: City Vehicle:	(check one)		ravel Advance:			use M&IE column	ov/portal/conte	<u>:nt/104876</u>
Pe	rsonal Vehicle:		Other:		Explain:				
Attach applicable receipts for motel/lodgin	ng expenses, pı	ıblic carrier tick	ets, personal au	ıto mileage/gas/	olls, regist fees,	etc.			
Day of Week	Sunday 06/09/19	Monday 06/10/19	Tuesday 06/11/19	Wednesday 06/12/19	Thursday 06/13/19				Category Totals
Allowable Lodging Lodging paid w/ City VISA	247.71 247.71	247.71 247.71	247.71 247.71	247.71 247.71	06/13/19	attention they shad a research			990.84 990.84
	747.71		Na Grand State		15.20			200000000000000000000000000000000000000	
Breakfast (20%) Lunch (30%)	22.80	15.20	15.20	15.20 22.80	15.20 22.80				60.80 68.40
Dinner (50%) Total Meals (w/per diem)	38.00 60.80	38.00 53.20	38.00 53.20	38.00 76.00	38.00			_	152.00 281.20
ALERSON SHEKARATAR ALUTARA									机等的图片等的
Fuel/Parking Air Fare	95.57	68.14	40.00	40.00	60.47				304.18
Toll/Shuttle Bus/Taxi Mileage (Enter as miles)									-
Calculated mileage (x.58)		102-103-103	erreraria.		Signal Care				16.00 Sec 16.2
Total Transportation Transportation paid w/ City VISA	95.57	68.14	40.00	40.00	60.47	-	-	-	304.18
Registrations *See Below*	495.00								495.00
Registration paid w/ City VISA	495.00								495.00
Total Cost	899.08	369.05	340.91	363.71	98.47	-	-	-	2,071.22
City VISA Charges (Total)	742.71	247.71	247.71	247.71	-		-		1,485.84
Non-Visa Charge	156.37	121.34	93.20	116.00	98.47				585.38
*If registration has been reported on			7. 123 1. 12				Advanc	e Received (-):	\$281.20
previous expense statement leave blank*									\$304.18
								ves Employee:	
If splitting between mult	iple Accounts	please use box	x below				Empio	yee Owes City	-ZERO-
501-7-7100-2030 501-7-7100-2022			\$ 495.00 \$ 1,272.04		City Acc	ount Number:	1111	(New March	
501-7-7100-2022			\$ 304.18	1	City Acc	ount Number:	to History	[{ to .	
		TOTAL	\$ 2,071,22	1		Travel Requ	uest Filled out:		
		TOTAL	\$ 2,071.22	1				□ NO	
I hereby certify t	that the travel i	ndicated here	on was incurre	d in the discha	rge of official C	ity of Lawrence	ce business an	d that	
informa	tion shown is	correct that n	o part of the co	mpensation cl	aimed was of a	non-City busi	ness nature.	1	
Employ	yee Signature:		50			Date:	6/20/	19	
Superv	isor Approval:(Sen 1	-			Date:	6/24/	191	
Dept. H	ead Approval:	1	5		1	Date:	6/261	15	
	City Manager:		0		ć.	Date:		-/	
(If Required)	Mayor:				6		BATTOLIS TELEFORE PORTUGUIS (INC. 18 COLUMN STOCKES)		
	•				c .	Date:			
Approved by Acco			nuhl	· · · · · · · · · · · · · · · · · · ·		Date:		on oto	
Comments:) receipts for it	10tel/loaging e	xpenses, publi	IC Carrier ucker	S, personai aud	0 mileage/yas.	/tolis, regist led	etc.	DESTRUCTION OF THE REAL
		Please answe	er the following	questions reg	arding your trav	vel:			
How did this apply to your job?	Attending the T wastewater trea		ition, workshops	s and visting wit	n vendors on adv	vanced treatme	ents and technol	logies for water a	and
Would recommend attending again?	Definitely.								
How will this add value to the City of Lawrence?	Increased knov	ledge of advar	nced treatments	and technologie	s that can be us	ed to improve p	plant processes.		

Your Name:	Sam	n Hiatt	Supervisor	Dave	Hogue	You	ur Department:	Polce De	epartment
Leave Date:			Destination:		Oklahoma City, C	OK	_		27.00
Return Date:		-		:			. !	Per Diem:	
Met	thod of Travel: City Vehicle:	(check one)		Fravel Advance:		1	www.gsa.go use M&IE column	ov/portal/conte	ent/104878
Pe.	rsonal Vehicle:		_ Other:		_ Explain:				
Attach applicable receipts for motel/lodging	ng expenses, pı	ublic carrier tick	cets, personal a	uto mileage/gas/	/tolls, regist fees	s, etc.			
Day of Week	Thursday 06/20/19	Friday 06/21/19							Category Totals
Allowable Lodging Lodging paid w/ City VISA		OOILIII							Totals
Breakfast (20%)		<u>-</u>		detales Case					-
Lunch (30%) Dinner (50%)		18.30 30.50							36.60 61.00
Total Meals (w/per diem)						-	-	-	97.60
Fuel/Parking Air Fare									-
Toll/Shuttle Bus/Taxi									=
Mileage (Enter as miles) Calculated mileage (x.58)		-		-	(Marie 1971)				
Total Transportation Transportation paid w/ City VISA	-	-	-	-	-	-	-	-	:
Registrations *See Below* Registration paid w/ City VISA									-
AND STATE OF THE S	19.90	49.90	(A) 20 h (B)	100000000					
Total Cost	48.80	48.80			-	-	-		97.60
City VISA Charges (Total)							-		-
Non-Visa Charge	48.80	48.80	·	-	-		-	- %	97.60
If registration has been reported on previous expense statement leave blank							Advance	e Received (-):	\$0.00
previous expense statement is a second							City Ov	wes Employee:	\$97.60
							Emplo	yee Owes City	-ZERO-
If splitting between multi	iple Accounts	please use box	x below	٦	City Ac	count Number:			1
		1							<u>.</u>
		1	<u> </u>	-	City Acc	count Number:			1
		4		1 '		Travel Reg	uest Filled out:	□ YES	
		TOTAL	_\$ -	<u>.</u>		Hurvins	lest i med	□ NO]
		- 17	_		, ,				
I hereby certify t informa			on was incurre no part of the co					d that	
Employ	yee Signature:¿	1/-	1/2	10811	/	Date:	0813	2019	
Superv	اد. :isor Approval	DIE	A			Date:	8/13/	2019	
	lead Approval:	OD D	- CF	Con	•	Date:	8/10	2118	
	City Manager:		19		•	Date:		11.	,
(If Required)	Mayor:	l .			•	Date:			•
Approved by Acco	→ ounts Payable:	l .			_	Date:			_
Attach applicable	e receipts for n	notel/lodging e	expenses, publ	lic carrier ticker	ts, personal au	to mileage/gas	/tolls, regist fee	es, etc.	
Comments:							e-Escalation Tra	raining	
	often encount	Please answe	er the following	g questions rega	garding your tra	avel:	e training was an		'dantify the
		ses of the escal					e training was an calate the individ		
	l would recomn	nend others attr	end the training	or for the depart	tment to host the	e training and se	end several office	ers/detectives.	
Would recommend attending again?									,
How will this add value to the City of	force incidence	es. This will redu	uce potential inju	jury to the public	and officers and	s/tactical readine d associated me	ess, there is a po edical and legal e	expenses. This	cing use of may also have

Your Name:	Kristen	Kennedy	Supervisor	Capta	in Cory	You	ur Department:	Police De	partment
Leave Date:			Destination:	0	klahoma City, C	OK	-		07.00
Return Date:	06/21/19	•	Trip Purpose:	ravel Advance:	-	1	www.gsa.go	Per Diem:	
Pe	City Vehicle: rsonal Vehicle:	Х					use M&IE çolumn		
Attach applicable receipts for motel/lodgi									`
Day of Week	Friday	Saturday							Category
Date Allowable Lodging Lodging paid w/ City VISA	06/21/19	06/22/19		• ,					Totals -
Breakfast (20%)									
Lunch (30%)	18.30	18.30							36.60
Dinner (50%) Total Meals (w/per diem)	30.50 48.80	30.50 48.80	_	-		-	_	_	61.00 97.60
Fuel/Parking									*
Air Fare Toll/Shuttle Bus/Taxi								3	
Mileage (Enter as miles)									-
Calculated mileage (x.58) Total Transportation	-	-	-	-	-	-	-	-	-
Transportation paid w/ City VISA									
Registrations *See Below* Registration paid w/ City VISA									-
Total Cost	48.80	48.80		-	-	-	-	<u></u>	97.60
	-	•					- The state of the		
City VISA Charges (Total)						A. (A. A.)		•	
Non-Visa Charge	48.80	48.80	Garage Mar.	-	-		-		97.60
If registration has been reported on previous expense statement leave blank		, , , , , , , , , , , , , , , , , , , ,					Advance	Received (-):	\$0.00
provide opposed statement taxts plant							City Ow	es Employee:	\$97.60
							Emplo	yee Owes City	-ZERO-
If splitting between mult	iple Accounts	please use bo	x below	1	City Ass	arimė Nirimiliani			-
1					-	count Number:			
					City Acc	count Number:			
								□res	
		TOTAL	\$ -	,		Travel Requ	uest Filled out:	_ □••	
A				•					
I hereby certify informa				d in the discha empensation cla				l that	
Emplo	yee Signature:	b. V	runne	ly		Date:	8/14	119	
Superv	isor Approval:	W1				Date:	03/14/20	9	
Dept. H	ead Approval:	, The	$a \in \mathbb{R}$	Deed?		Date:	8/14	19	
(Out of State Travel)	City Manager:		Ø	V		Date:	1. 1		
(If Required)	Mayor:	_	×			Date:			
Approved by Acco	ounts Payable:					Date:	**		
Attach applicable	e receipts for n	notel/lodging e	expenses, publ	ic carrier ticket	s, personal aut	to mileage/gas	/tolls, regist fee	s, etc.	
Comments:		Please answe	er the following	questions rega	arding your tra	vel·			
How did this apply to your job?		The street of th	ionoming	,	and Jean du			0	
	£		·					2 4	
Would recommend attending again?		×			<i>y</i>				
How will this add value to the City of	,								

Your Name:	Jessica	Mortinger	Supervisor	Scott Mc	Cullough	You	r Department:	PE	os
Leave Date: Return Date:			Destination:	Federal Trainin	Chicago, IL			Per Diem:	76.00
	thod of Travel:		Tr	avel Advance:				ov/portal/cont	
Pe	ersonal Vehicle:	X		Х	Explain:		use M&IE column		
Attach applicable receipts for motel/lodg	ing expenses, po	ublic carrier tick				etc.			
Day of Week		Wednesday		Friday	Saturday	Sunday			Category
Allowable Lodging Lodging paid w/ City VISA	255.37	06/19/19 255,37	06/20/19 510.74	06/21/19	06/22/19	06/23/19			Totals 510.74 510.74
Breakfast (20%)		15.20	15,20					THE RESERVE	30.40
Lunch (30%) Dinner (50%)		22.80 38.00	22.80 38.00						45.60 114.00
Total Meals (w/per diem)	38.00	76.00	76.00						190.00
Fuel/Parking		7.50	7.50						22.50
Air Fare Toil/Shuttle Bus/Taxi						1.70			289.96 28.40
Mileage (Enter as miles) Calculated mileage (x.58)						48.20			96,40
Total Transportation	352.12	7.50	7.50	VELUE LESSON		27.96 29.66			55.91 396.77
Transportation paid w/ City VISA	314.96	NEW COLUMN	eresi il comi				A THE RES		314.96
Registrations *See Below* Registration paid w/ City VISA			-						•
Total Cost	645,49	338.87	83.50		-	29.66			1,097.51
City VISA Charges (Total)	314.96		510.74				4-14-15-16		> 825.70
		220.07			Title I				
Non-Visa Charge	330.53	338.87	(427.24)			29.66	Let Market	U-S-I-III)	271.81
"if registration has been reported on previous expense statement leave blank"	Project (A CONTRACTOR OF THE PARTY OF TH	below	Split	split		City Ow	e Received (-): ves Employee: vee Owes City	\$186.00 \$85.81 -ZERO-
641-1-1030-2030 001-1-1030-2030	PLIGTP	E	\$ 660.56 \$ 165.14	7 /	City Acco	ount Number:	641-1-10	30-2030	JOTP
641-1-1030-2030	DI IATP		\$ 68.65	YIL	City Acco	ount Number:	001-1-1030-203	30	19TP
001-1-1030-2030 641-1-1030-2030 001-1-1030-2030	OLIATE PLIATE	TOTAL	\$ 17.16 \$ 148.80 \$ 37.20	Sept		Travel Requ	est Filled out:	 ₹ES	
	-	TOTAL	\$ 1,097.51	L				Шио	
l hereby certify informa	that the travel i	ndicated herec	on was incurred	I in the dischar	ge of official Ci	ity of Lawrence	e business and less nature.	I that	
Emplo	yee Signature:	The state of the s	1111	12_	_	Date:	6/24/2	2019	
Superv	isor Approval:	Ahr	100	-		Date:	1012	-119	
·	92.8	1 9	Wh.	_			· l.	7:0	
	lead Approval:	(O)		and d	ton The	Date:	6100	1/10	
		Jan 1	m	7	אין זיין	Date:	4/ax	117	
(If Required)	→ Mayor:			-		Date:			
Approved by Acco		notel/lodging e.	xpenses, public	c carrier tickets	s, personal auto	Date:	tolls, regist fee	s. etc.	
Comments:									
		Please answe	r the following	questions rega	rding your trav	el:			
How did this apply to your job?		regulations for	performance ba		lucting transporta his workshop ex				
Would recommend attending again?	Yes, workshops carrying out me				sources for informations.	mation gatherin	g and peer lean	ning to ensure w	e are
How will this add value to the City of Lawrence?		istrations. Perfo	rmance Based		and spend federa st practice nation				

Your Name:	Gregg	Pruett	Supervisor	Capta	n Cory	You	ur Department:	Police De	partment
Leave Date:	06/20/19		Destination:	0	klahoma City, 0	nk	Mary San Carlo South Street		A STORY THE STATE OF
Return Date:			Trip Purpose:		Manoria Otty, C			Per Diem:	97.60
Ме	thod of Travel: City Vehicle:	(check one)		ravel Advance:			www.gsa.go	ov/portal/conte	ent/104878
Pe	ersonal Vehicle:		Other:		Explain:				
Attach applicable receipts for motel/lodg	ing expenses, po	ublic carrier tick	ets, personal au	ıto mileage/gas/	tolls, regist fees	s, etc.			
Day of Week		Friday							Category
Date Allowable Lodging Lodging paid w/ City VISA		06/21/19							Totals -
THE RESERVE THE PARTY OF THE PA									•
Breakfast (20%) Lunch (30%)	18.30	18.30							36.60
Dinner (50%) Total Meals (w/per diem)		30.50 48.80	-	-		-	-	-	61.00 97.60
Fuel/Parking									
Air Fare Toll/Shuttle Bus/Taxi									-
Mileage (Enter as miles) Calculated mileage (x.58)	-		•			1188 - 118 - 118			
Total Transportation Transportation paid w/ City VISA	-	-	-	-	-		-	-	
Registrations *See Below* Registration paid w/ City VISA									
Total Cost	48.80	48.80		-					97.60
City VISA Charges (Total)		-		-		Control of the Control			V1.00
Non-Visa Charge		48.80			Alamana da Santa da S				97.60
*If registration has been reported on	40.00	40.00						e Received (-):	\$0.00
previous expense statement leave blank*								ves Employee:	\$97.60
							-	yee Owes City	-ZERO-
If splitting between mult	tiple Accounts	olease use box	below	İ	City Acc	count Number:		yee ones ony	-ZLI(O
					-	count Number:			
		2			——————————————————————————————————————	Journ Number.	,		
		TOTAL	4			Travel Requ	uest Filled out:	□ YES	
		IOIAL	φ -					□ NO	
I hereby certify								d that	
	ation shown is yee Signature:	1	<i></i>		aimed was of a		a last t		
		0	11/2	wa		Date:	8/19/2	219	
· ·	isor Approval:	Da	as as	2 (Date:	8 125	017	
	lead Approval:	100	N N	Dogse	¥	Date:	8119	113	
_	City Manager:					Date:			
(If Required)	→ Mayor:					Date:			
Approved by Acco		notel/lodging e	vnansas nubli	a carrier ticket	norconal aut	Date:	to lla regiot for		
Comments:	l receipte for in	lote//louging e/	kpenses, publi		s, personar aut	o iiiieage/gas/	tolis, regist lee	s, etc.	
		Please answe	r the following	questions rega	rding your tra	vel:			
How did this apply to your job?	knowledge base						cience de-escala study.	ition model incre	eased my
Would recommend attending again?	I would recomm	nend all crisis ne	egotiators be tra	ined in this mod	el.	S		***************************************	
	The tools from t	his training will	directly impact	my abilities as a	crisis negotiato	or and help as I	train others in th	is field of study	
How will this add value to the City of Lawrence?		•			3				

Your Name:	Dustir	n Smith	Supervisor	Melinda	a Harger	You	ır Department:	MS	80
					FARRIST CO.				
Leave Date:			Destination:		Wichita, KS	-		D. Di	64.00
Return Date:	06/20/19		Trip Purpose:	KDOT Constru	ction Stormwate	r Training		Per Diem:	61.00
Me	thod of Travel: City Vehicle:	(check one)		ravel Advance:			www.gsa.go use M&IE column	ov/portal/conte	ent/104878
Pe	ersonal Vehicle:		Other:		Explain:				
Attach applicable receipts for motel/lodg	ing expenses, p	ublic carrier tick	kets, personal au	ıto mileage/gas/	tolls, regist fees	, etc.			
Day of Week		Wednesday							Category
Date Allowable Lodging	06/18/19 117.42	06/19/19 117.42							Totals 234.84
Lodging paid w/ City VISA	117.42	117.42							234.84
Donald Control (00%)			40.00			4 1 21 3 25 1 2 2			40.00
Breakfast (20%) Lunch (30%)			12.20 18.30						12.20 18.30
Dinner (50%)		30.50	30.50						61.00
Total Meals (w/per diem)	-	30.50	61.00	-	-	-			91.50
Fuel/Parking			25.00						25.00
Air Fare			23.00						-
Toll/Shuttle Bus/Taxi									
Mileage (Enter as miles)									
Calculated mileage (x.58) Total Transportation	•		25.00	• • • • • • • • • • • • • • • • • • •		-	<u>.</u> .	-	25.00
Transportation paid w/ City VISA			25.00						25.00
				74 B		(44)			
Registrations *See Below*		400.00 400.00							400.00 400.00
Registration paid w/ City VISA		400.00		- 15 a 5 kg					400.00
Total Cost	117.42	547.92	86.00			-	-	. 1 -	751.34
				2000					
City VISA Charges (Total)	117.42	517.42	25.00	•	-	-	•	Sex Section	659.84
Non-Visa Charge	-	30.50	61.00	-	-		-	-	91.50
SAN THE SAN TH	THE REPORT OF				1 TO SO SO		15 P. 15 P. 15		
If registration has been reported on previous expense statement leave blank							Advanc	e Received (-):	\$0.00
expense statement leave blank							City Ov	ves Employee:	\$91.50
							-		
IS an italian in a ferror and			. balanı				Emplo	yee Owes City	-ZERO-
If splitting between multiplied to be between to be between the between to be between the between		please use bo	\$ 351.34	Ī	City Acc	ount Number:	505-3-39	910-2022	
Loughilg, Modio a Transporte		1	7 55.115.		,				
Conference Registration]	\$ 400.00	.e	City Acc	ount Number:	505-3-39	910-2030	
		-							ı
		1				Travel Requ	est Filled out:	■YES	
		TOTAL	\$ 751.34					пNO	
I hereby certify	that the travel	indicated here	on was incurre	d in the discha	rge of official C	ity of Lawrence	e business an	d that	
					aimed was of a				
		7		-			1/2	2/19	
Emplo	yee Signature:			101	•	Date:	6/6	8/11	
Superv	isor Approval:	Mesti	nda	Y. Has	all.	Date:	7/28	2/19	
,	• •	1///	10 6	2 11	7		7/2	2/10	
Dept. H	lead Approval:	1 Mul	5/	and s		Date:	1/2	211	
(Out of State Travel)	City Manager:	V				Date:			
					•				
(If Required)	→ Mayor:					Date:			
Approved by Acc	ounts Payable:		•		_	Date:			
Attach applicabl	e receipts for r	notel/lodging e	expenses, publ	ic carrier ticket	Is, personal aut	o mileage/gas/	tolls, regist fee	es, etc.	
Comments:									
					arding your tra				
		tormwater Train	ning - Certified b	y the Kansas De	epartment of Tra		OT) to perform	sediment and e	rosion control
How did this apply to your job?	inspections. Th	nis will be partic	ularly useful for	KDOT funded p	rojects.				
	Yes								
Would recommend attending again?									
	,								
	This class prov	rided certification	n for the inspec	tion of erosion a	nd sediment cor	ntrol. This will a	id in the City sta	ying compliant v	with the City's
How will this add value to the City of Lawrence?									

Your Name:	Toni W	heeler	Supervisor	Craig (Owens	You	ır Department:	City Attorne	ey's Office
Leave Date: Return Date:	06/13/19 06/14/19		Destination:	CAAK Spring C	Michita, Kansas LE			Per Diem:	61.00
	hod of Travel:	(check one)	Tı	ravel Advance:			www.gsa.gov	1000 USE 240 34	manage concentration
Pe	rsonal Vehicle:				Explain:				
Attach applicable receipts for motel/lodgin	ng expenses, pu	blic carrier tick	ets, personal au	to mileage/gas/t	olls, regist fees,	etc.			
Day of Week	Thursday	Friday							Category
Date Allowable Lodging	06/13/19 125.06	06/14/19							Totals 125.06
Lodging paid w/ City VISA									125.06
Breakfast (20%)		12.20							12.20
Lunch (30%)	20.50								30.50
Dinner (50%) Total Meals (w/per diem)	30.50 30.50	12.20	•	-	•	•	į	•	42.70
Fuel/Parking	NEW WATER	- Commercial	in the state of th			ألمسينها			
Air Fare									
Toll/Shuttle Bus/Taxi Mileage (Enter as miles)	6.95 154.00	6.95 153.00							13.90 307.00
Calculated mileage (x.58)	89.32	88.74	(a) (b) (b) (b)				• 10		178.06
Total Transportation Transportation paid w/ City VISA	96.27	95.69			•	•	•	•	191.96
Transportation paid w/ City VISA									Allen Archite
Registrations *See Below* Registration paid w/ City VISA	65.00 65.00								65.00 65.00
Registration paid w/ City VISA	65,00		*					511-15	05.00
Total Cost	316.83	107.89	**************************************	A CONTRACTOR DESIGNATION	-		-		424.72
City VISA Charges (Total)	190.06	-	- Same Company of the	EXCHIPITATION CONT.	-		SERVERO CHERY TRUPE EST.		190.06
Non-Visa Charge	126.77	107.89							234.66
Non-visa Charge	120.77	107.09							
If registration has been reported on previous expense statement leave blank							Advance	Received (-):	\$61.00
	Ŀ						City Ow	es Employee:	\$173.66
							Employ	ee Owes City	-ZERO-
If splitting between mult	iple Accounts	please use bo	x below	1	City Ann	ount Number:	001-1-108	20.2020	
					1-40-00-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-			00-2030	
				1	City Acc	ount Number:			
				1				₽ES	
		TOTAL	\$ -]		Travel Requ	uest Filled out:	□ko	
		TOTAL	- Ψ					Li-v	l _b
I haraby cortify	that the travel i	ndicated here	on was Incurre	d in the discha	rge of official C	ity of Lawren	ce business and	that	
200 00 - 200 00				ompensation cl		Alternative Parkers of the Control o			
Emplo	yee Signature:	Mi	12 (1)	111		Date:	7.81	2019	
-		1000	1-100	vu					•31
Superv	isor Approval:					Date:			•)
Dept. H	lead Approval:	111			c	Date:)	•S
(Out of State Travel)	City Manager:	13110	1			Date:	7/8/	19	
• -	Mayor:					Doto	1 1		10
(If Required)	→ Wayor.					Date:			3
Approved by Acc						Date:			•
Attach applicabl	e receipts for n I	notel/lodging	expenses, publ	ic carrier ticket	s, personal aut	o mileage/gas	/tolls, regist fee	s, etc.	
Comments:									
<u></u>	The seminar w			questions reg			luded CLE credit	which helps to	meet the
How did this apply to your job?			in my law licens		at lace Italisas c	illes. It also life	nuded OLL Credit	William Helps to	THOCK THO
1000 00 1000 00									
1000 1000 100 100 100 100 100 100 100 1	Vee this is one	of the more e	conomical CLE's	available					
Would recommend attending again?	1 63, 1113 13 6116	01 1110 111010 0		deallable.					
1	1 63, 1113 13 0116	or the mere e		deallasio.					
				and topics relati	ive to the work a	f the City			