

Employee Name (Last, First, MI) **Walker, Scott** Title **County Executive** Emp Location (Bldg & Rm #) **Airport**

Resp Agency #	Resp Org Unit #	Travel Advance TE	ID (if travel advance was made)	504	007832	Document Total	\$ 857.22
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Start Date	Time	End Date	Time	Purpose of Trip	Trip Code (3)
6/11/2008		6/12/2008		Meeting with FAA	002 MEETINGS

Destination (City, County and State)	Destination Code	2nd Destination Code
Washington, DC	DC DC Washington HI CST	

TYPE OF EXPENSE	AMOUNT	EXPLANATION
TRANSPORTATION <small>(Attach ticket stub)</small>	air	\$497.00
HOTEL <small>(Attach ticket stub)</small>	No. NIGHTS	1
MEALS/INCIDENTAL EXPENSES	17.86	Receipts attached.
REGISTRATION FEES <small>(Attach paid receipt)</small>		
TELEPHONE/FAX <small>(Business only)</small>		
TAXI/LIMOUSINE <small>(Receipt required for any one-way fare over \$15.00)</small>		
AUTOMOBILE RENTAL <small>(Attach vendor's receipted invoice)</small>		
OTHER EXPENSE <small>(Attach receipts)</small>		
<b>TOTAL EXPENSE</b>	<b>\$ 857.22</b>	Additional Information  <b>Mr. Walker covered hotel &amp; airfare for Ed Eberle.</b>
<b>TRAVEL ADVANCE</b>		
Type	Trav Adv # (if different)	
Amt \$	497.00	
TOTAL ADV	\$ 497.00	
AMOUNT DUE EMPLOYE IF EXPENSE EXCEED ADVANCE	\$ 360.22	
AMOUNT DUE TREASURER IF ADVANCE EXCEEDS EXPENSE		

ACCOUNT CODING FOR CHARGES								
Line # (R)	Agcy (R)	Org Unit (R)	Approp Unit (R)	Activity (4)	Function (4)	Object (R) (4)	ACCOUNT CODE NAME	DOLLAR AMOUNT
						5324	ONE DAY TRIP MEALS	
						6805	EDUCATION/SEMINAR FEES	
						6807	DP EDUCATION	
						6809	CONVENTION EXPENSE	
01	504	5041				6812	MEETINGS AND OTHER AUTHORIZED TRAVEL	857.22

**Expense Report Balances** TOTAL EXPENSE \$ 857.22

**CERTIFICATION**

*I hereby certify that the above expenses were incurred on County business and are correctly stated. I further certify that if I am being reimbursed for the use of my private automobile, I carry minimum liability insurance coverage of \$100,000/\$300,000/\$50,000 or a combined single limit of bodily injury and property damage of \$250,000 in any one accident, and said insurance is in force and that at the time of the trip I had a valid vehicle driver's license.*

EMPLOYEE SIGNATURE DATE 07/07/08

APPROVED BY (SIGNATURE OF AUTHORIZED COUNTY ADMINISTRATOR) DATE 07/07/08