

**CLAIM AGAINST PIMA COUNTY, ARIZONA
BY MEMBER OF THE BOARD OF SUPERVISORS**

VOUCHER #

The following claim is presented in compliance with A.R.S. §11-626*

This form is to be used for reimbursement to a member of the Board of Supervisors for mileage, travel, petty cash expenditure or other authorized out-of-pocket expenditures incurred in the conduct of County business. Receipts must be attached when applicable.

(1) NAME: Ray Carroll

(2) DELIVERY INSTRUCTIONS: Please call Paula Maxwell for pick up 724-8094

(3) DESCRIPTION/USE: NACo 2014 Legislative Conference - Washington D.C.

(4) INVOICE LINE AMOUNT	(5) INVOICE NUMBER	(6) INVOICE DATE	(7) FUND	(8) ACCOUNT NUMBER	(9) CENTER	(10) INVOICE GROSS
\$ 604.16	02/27/2014	02/27/2014	1000	5141	0024	\$ 604.16

(11) SUPERVISOR CERTIFICATION:

I have examined this demand; expenditure is for a valid purpose and funds have been appropriated or are otherwise available for payment of this demand; and if the funds are from a grant, contract or other funding source, this demand is allowable under the terms of such grant, contract or source; and payment of the amount claimed is hereby requested.

Ray Carroll
SIGNATURE OF SUPERVISOR

4/8/14
DATE

(12) APPROVALS:

I have reviewed the expenses for this action and find them to be satisfactory for reimbursement.

Sharon Benson
MEMBER BOARD OF SUPERVISORS
DATE *4-8-14*

Bob Ford
COUNTY TREASURER
DATE *4-8-14*

A.R.S. §11-626, Claims by Supervisors: "A claim against the county presented by a member of the board of supervisors shall be verified as other claims, and shall bear the written approval of at least one member of the board other than the claimant, and of the county treasurer".

FOR FINANCE DEPARTMENT USE ONLY: AUDIT DATE _____ AUDITED BY _____ APPROVED BY _____ DUE DATE _____ VENDOR # _____

**PIMA COUNTY
FINAL TRAVEL RECONCILIATION**
(to be completed upon traveler's return)

Traveler's Name:	Raymond J. Carroll	Destination:	Washington D.C
Vendor Number:		Purpose:	NACo Legislative Conference
Department Name:	Board of Supervisors - District 4	Departure Date/Time:	Thursday, 2/27/2014
		Return Date/Time:	Thursday, 3/6/2014

Travel Expenditures Itemized Per Day							
Date	Registration	Transportation	Mileage Expense (Mileage x Rate)	Lodging	Per Diem	Other	Line Total
	515.00	753.16		411.06	312.00		1,991.22
							0.00
							0.00
							0.00
Total Allowable Expense:							\$1,991.22

Advances/Prepaid Expenses					
Type Of Expense	Document Type	Document Number	Amount	Prepaid Payee	Line Total
Registration:	P-card	98368	515.00		515.00
Transportation:	P-card		461.00	American Airlines	461.00
Lodging:	P-card		411.06		411.06
Per Diem:					0.00
Other:					0.00
Total Advances/Pre-Paid Expenses					\$1,387.06

Amount Due Employee: **\$604.16**

Travel Payment No.: _____ Date: _____

Amount Due Pima County: _____

Cash Receipt No.: _____ Date: _____

I hereby certify that the above travel was completed in the performance of official duties, that the information given above is true in all respects, and that no travel payment (TP) document has been made for any part thereof, and that I am not indebted to Pima County in any manner.



 Traveler's Signature _____ Date: 4/8/14

*Note: Receipts must be attached for Lodging, Transportation, and Miscellaneous expenses.

Raymond J Carroll
 NACo Legislative Conference D.C.

Date	Registration	Transportation	Mileage	Lodging	Per Diem	Other	Line Total
2/27/2014	515	496		125.95	39		714.95
2/28/2014		28		125.95	39		192.95
3/1/2014		78		0	39		117
3/2/2014		0		0	39		39
3/3/2014		64			39		103
3/4/2014		26.5			39		65.5
3/5/2014		25.66		159.16	39		223.82
3/6/2014		35			39		74
Totals	515	753.16		411.06	312		1530.22

Present this ticket for Admittance

Invoice #: 98368

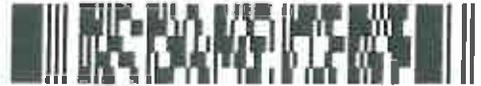
Conference Registration Fee
Pre-Conference Seminar

Amount Billed: \$515.00

Amount Paid: \$515.00

Balance Due: \$0.00

3/1/2014



Itinerary

Carrier	Flight #	Departing	Arriving	Fare Code
American Ray Carroll	1100	HOUSTON THEIASTDF 10/21 AM	MEMPHIS MEMPHIS 11/21 PM	Y
American Ray Carroll	1101	MEMPHIS MEMPHIS 11/21 PM	HOUSTON THEIASTDF 10/21 AM	Y Food For Purchase
American Ray Carroll	1102	HOUSTON THEIASTDF 10/21 AM	MEMPHIS MEMPHIS 11/21 PM	Y
American Ray Carroll	1103	MEMPHIS MEMPHIS 11/21 PM	HOUSTON THEIASTDF 10/21 AM	Y Food For Purchase
American Ray Carroll	1104	HOUSTON THEIASTDF 10/21 AM	MEMPHIS MEMPHIS 11/21 PM	Y
American Ray Carroll	1105	MEMPHIS MEMPHIS 11/21 PM	HOUSTON THEIASTDF 10/21 AM	Y Food For Purchase

Receipt

Passenger	Ticket #	Fare-USD	Taxes and Carrier-Imposed Fees	Ticket Total
Ray Carroll	011/1100/1101/1102/1103/1104/1105	387.90	73.10	461.00
Visa XXXXX22123456789				\$ 461.00

Paula Maxwell

From: americanairlines@aa.com
Sent: Thursday, February 06, 2014 11:36 AM
To: Paula Maxwell
Subject: R. CARROLL 02/27/14 Itinerary



[Reservations](#) [AAdvantage Account](#) [Fare Sales & Offers](#)

Status: **Purchased**

Your Itinerary

Carrier	Flight Number	Departing City	Date & Time	Arriving City	Time	Booking Code	Meals
 AMERICAN AIRLINES	1330	TUS Tucson	Feb 27, 2014 09:55 AM	DFW Dallas/ Fort Worth	Feb 27, 2014 01:05 PM	O	Food for Purchase
 AMERICAN AIRLINES	2237	DFW Dallas/ Fort Worth	Feb 27, 2014 01:55 PM	DCA Washington	Feb 27, 2014 05:40 PM	O	Food for Purchase
 AMERICAN AIRLINES	127	DCA Washington	Mar 06, 2014 11:00 AM	DFW Dallas/ Fort Worth	Mar 06, 2014 01:15 PM	S	Food for Purchase
 AMERICAN AIRLINES	1404	DFW Dallas/ Fort Worth	Mar 06, 2014 02:05 PM	TUS Tucson	Mar 06, 2014 03:25 PM	S	Food for Purchase

Traveler Information

Passenger	Cabin Class	Seat Assignment
RAY CARROLL	Economy	18E
RAY CARROLL	Economy	26F
RAY CARROLL	Economy	27F
RAY CARROLL	Economy	24F

DC Trip

Traveling passengers may check in and obtain boarding passes for U.S. domestic electronic tickets within 24 hours of the flight time online at AA.com by using www.aa.com/checkin or at a Self-Service Check-In machine at the airport. Check-in options may be found at www.aa.com/options. For information regarding American Airlines checked baggage policies, please visit www.aa.com/baggageinfo.

Travelers must present a government-issue photo ID with either a boarding pass or a priority verification card at the security screening checkpoint

Please remember flight details are subject to change. In order to check a flight's status, gate, or departure and arrival time, go to www.aa.com and enter the flight information in the Gates and Times search area. In order to receive automatic notifications of flight changes, click on the Flight Status Notifications section on the www.aa.com homepage and enter the required flight and contact information.

Paula Maxwell

From: windsorparkhotel@erols.com
Sent: Monday, March 03, 2014 10:39 AM
To: Paula Maxwell
Subject: Custom Statement

Windsor Park Hotel
2116 Kalorama Rd NW
Washington , DC 20008
202-483-7700
windsorparkhotel@erols.com

Guest Name: Raymond Carroll

Room #: 387
Confirmation #: 50475C48897
Status: HIST
Arrive: 2014-02-27 **Depart: 2014-03-01**

<u>Date</u>	<u>Description</u>	<u>Charges</u>	<u>Credits</u>
2014-02-12, Wed	DEPOSIT VISA (*****9764)		251.90
2014-02-27, Thu	ROOM CHARGE - Room #: 387	110.00	
2014-02-27, Thu	Sales Tax - Room #: 387	15.95	
2014-02-28, Fri	ROOM CHARGE - Room #: 387	110.00	
2014-02-28, Fri	Sales Tax - Room #: 387	15.95	
	Folio Balance		0.00

Signature: _____

Paula Maxwell

From: windsorparkhotel@erols.com
Sent: Monday, March 03, 2014 11:04 AM
To: Paula Maxwell
Subject: Custom Statement

Windsor Park Hotel
2116 Kalorama Rd NW
Washington , DC 20008
202-483-7700
windsorparkhotel@erols.com

Guest Name: Raymond Carroll

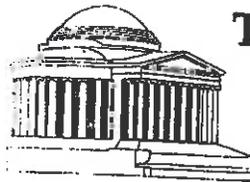
Arrive: 2014-03-05 Depart: 2014-03-06 Room #: Confirmation #: 50476C48898
Status: RESV

<u>Date</u>	<u>Description</u>	<u>Charges</u>	<u>Credits</u>
2014-02-12, Wed	DEPOSIT VISA (*****9764)		159.16
	Folio Balance		-159.16

Signature: _____

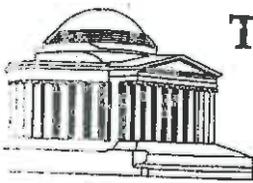
TAXI DRIVER'S CUSTOMER RECEIPT
www.whitetopcab.com

Cab #: _____ ID # _____
Charge Account _____
To: Hotel Kalamazoo / Comm
From: Airport / Reagan
of Luggages 2 # of Passengers 1
Total Fare \$ 35.00 Time / Date: 2/27 6:30 pm
Driver Signature: Roy Carroll Passenger



TAXICAB RECEIPT

Time: 11:00 am
Date: 3/1/14
Origin of trip: Omni Shoreham
Destination: Alexandria / THE SMITHSONIAN
Fare: 24.00 Sign: RK



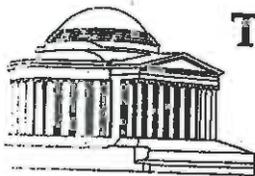
TAXICAB RECEIPT

Time: 8:50 AM
Date: 2/28
Origin of trip: Hotel Kalamazoo/Comm.
Destination: Press Club 14/E
Fare: 13.00 Sign: R Carroll



Taxi Cab Receipts

DATE: 3/1/14 TIME: 5:50 pm
TRIP ORIGIN: Gatsby Rest
DESTINATION: Omni Shoreham
FARE: \$ 24.00 SIGNATURE RK



TAXICAB RECEIPT

Time: 5:30 pm
Date: 2/28
Origin of trip: Press Club
Destination: Hotel Windsor Park
Fare: 15.00 (rush hour) Sign: R Carroll



TAXICAB RECEIPT

Time: 9:30 pm
Date: 3/1/14
Origin of trip: Windsor Park
Destination: Bullfenthon
Fare: 14.00 Sign: RK



TAXICAB RECEIPT

Time: 7 pm
Date: 3/1/14

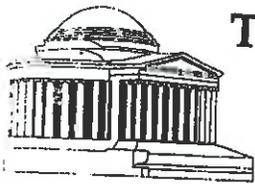
Origin of trip: CAPITAL HILL CLUB
Destination: WINDSOR PARK
Fare: 16.00 Sign: [Signature]



TAXICAB RECEIPT

Time: 4:00
Date: 3/3

Origin of trip: CONVENTION CENTRE
Destination: OMNI SHOREHAM
Fare: 15.00 Sign: [Signature]



TAXICAB RECEIPT

Time: 11:00
Date: 3/3

Origin of trip: OMNI SHOREHAM
Destination: CONV. CENTRE
Fare: 14.00 Sign: [Signature]

-TAXICAB RECEIPT-

TIME 9:00 pm DATE 3/3/14

REC'D FROM [Signature]

FARE AMOUNT \$ 18.00

TRIP FROM CAPITAL SOUTH

TRIP TO SHOREHAM HOTEL

ASSN. CEA CAB NO. _____

I.D. NO. _____ TAG NO. _____

SIGNATURE _____

-TAXICAB RECEIPT-

TIME 5:30 DATE 3/3/14

REC'D FROM Ray Carroll

FARE AMOUNT \$ 17.00

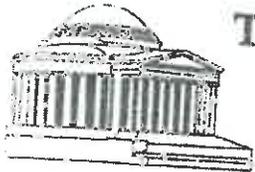
TRIP FROM OMNI SHOREHAM

TRIP TO JOHNNY HALF SHELL OYSTER BAR

ASSN. CEA CAB NO. _____

I.D. NO. _____ TAG NO. _____

SIGNATURE [Signature]

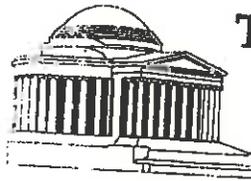


TAXICAB RECEIPT

Time: 3/5/14
Date: 3/4/14

Origin of trip: Wardman
Destination: Crystal City Pentagon
Fare: \$23.00
Sign: [Signature]

Bob Nealen / Charlie Palmers



TAXICAB RECEIPT

Time: _____
Date: 3-6-14

Origin of trip: Windsor Park
Destination: Japan Air
Fare: 25.00
Sign: [Signature]

ONE CITY
Washington, DC

CASH RECEIPT

DRIVER: 00053816
CAB #: A908
DATE: 03/04/14
Time: 11:46-11:46
RATE #: 1

STANDARD RATE
Miles R1: 0.00
TRIP #: 568
FARE: \$3.25
EXTRAS: \$0.25
SURCH.: \$0.00
Total: \$3.50
#Passengers: 01

OTC COMPLAINTS
LINES TTY 711
FH: 855-484-4967
w.dc.gov

DRIVERS COPY
TAXI CAB OF DC
202-269-9000
TAXI CAB D674
MISSIE TEMOLDE
Face ID: 74579

3/5/2014

Trip ID: 10076
Start: 10:32AM
2072-2086 Columb
End: 10:37AM
2500 Calvert St
Dist: 0.70mi
Fare: \$5.68
Extras: \$0.25
Tip: \$2.00

Total: \$7.93

Signature

CC: ****9963
Exp: 02/16
Voucher: 614733
Auth: 974090

DRIVER COPY

LUXURY CAB
WASHINGTON, DC
(202) 269-1100
PLATE# H91490

TRX: 406574
VISA 9963
APRV: 862481
CUSTOMER
START TIME
03/05/14 07:41
END TIME
3/5/14 07:59
DIST: 5.1 MI
FARE: \$16.48
EXTRAS: \$0.25
TIP: \$1.00
TOTAL: \$17.73
VEHICLE: 0130
DRIVER: 142

COMPLAINTS CALL
(202) 645-6018