



Welcome Grimes, Alexandra N.

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Tuesday March 17, 2015

Local Travel

Nonlocal Travel

Approval

Administration

My Profile



Printer Friendly PDF

Nonlocal Travel Reimbursement Request - View

Traveler Information

Traveler's Name

KING, NARDOS E

Reimbursement Document: TP1410007479

SAP Document: 6300583636

Reimbursement Status: C - Complete

Approval Document: TR1410000357

SAP Document: 1000021032

Office/School: MOUNT VERNON HIGH SCHOOL

Departure Date: November 11, 2013

Return Date: November 17, 2013

Destination: Detroit, MI

Index: 220217 Subobject: 5024

Purpose of Travel: School Based Staff Professional Development

Travel Method: Air

Travel Sponsor: National Alliance of Black School Educators NABSE

Total Estimated Expenses: \$ 1912.84
 Travel Amount Limit: \$ 0.00
 Amount of Advance Received: \$ 0.00

Grant Amount: \$ 0.00

Description of Expense	Monday 11/11/13	Tuesday 11/12/13	Wednesday 11/13/13	Thursday 11/14/13	Friday 11/15/13	Saturday 11/16/13	Sunday 11/17/13	Total Costs	Paid By FCPS	Paid by Traveler
✓ Air/Train/Bus Fare								\$324.84	✓ \$0.00	\$324.84
Registration Fee								\$0.00	✓ \$0.00	\$0.00
✓ Lodging (tax included)								\$752.10	✓ \$752.10	\$0.00
Car Rental								\$0.00	\$0.00	\$0.00
Breakfast (M&IE Per Diem)	\$6.75	\$9.00	\$9.00	\$9.00	\$9.00	\$9.00	\$6.75	\$58.50	\$0.00	\$58.50
Lunch (M&IE Per Diem)	\$9.75	\$13.00	\$13.00	\$13.00		\$13.00	\$9.75	\$71.50	\$0.00	\$71.50
Dinner (M&IE Per Diem)	\$21.75	\$29.00	\$29.00	\$29.00	\$29.00		\$21.75	\$159.50	\$0.00	\$159.50
Incidentals (M&IE Per Diem)	\$3.75	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00	\$3.75	\$32.50	\$0.00	\$32.50
POV Mileage Amount								✓ \$0.00	\$0.00	\$0.00
Parking							\$98.00	✓ \$98.00	\$0.00	\$98.00
Transportation	\$50.30	✓					\$55.00	✓ \$105.30	\$0.00	\$105.30
Other Expenses	\$60.00	✓					\$60.00	✓ \$120.00	\$120.00	\$0.00
Total								\$1722.24	\$872.10	\$850.14
Travel Amount Limit										\$0.00
Amount of Advance Received										\$0.00
Balance Due Traveler										\$850.14
Balance Due FCPS										\$0.00

Entered By: Heroth, Karen M.

Phone: 703-619-3100

Travel Notes

Mrs. King is requesting reimbursement for airline ticket, parking, transportation to and from airport to conference site.

Action by Approving Authority

Level	Level Title	Approval Type	Approved By	Approved Date	Approval Status	Notes
0100	Funds Verification	Nonlocal Travel	<u>mibrown</u>	12/06/2013	Approved	None
1000	FAMIS Review	Nonlocal Travel	<u>KVGarcia</u>	12/06/2013	Approved	None

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General Travel Questions Contact Accounts Payable at 571-423-3739 or [TravelInfo](#). Technical Support Contact Financial Services FASTeam at 571-423-3636 or [Financial Services FASTeam](#).

Heroth, Karen M.

From: King, Nardos E.
Sent: Wednesday, October 23, 2013 9:04 AM
To: Heroth, Karen M.
Subject: FW: Package Confirmation | Detroit Mon, Nov 11, 2013

Nardos E. King
Principal
Mount Vernon High School
"A Culture of Excellence"
<http://www.fcps.edu/MtVernonHS/>

From: NKing0284@aol.com [mailto:NKing0284@aol.com]
Sent: Wednesday, October 23, 2013 9:04 AM
To: King, Nardos E.
Subject: Fwd: Package Confirmation | Detroit Mon, Nov 11, 2013

From: travelercare@cheaptickets.com
To: nking0284@aol.com
Sent: 10/1/2013 9:55:08 P.M. Eastern Daylight Time
Subj: Package Confirmation | Detroit Mon, Nov 11, 2013



CheapTickets record locator PBCTIX8979121264

Package Confirmation | Detroit Mon, Nov 11, 2013

You can always [view your itinerary online](#) for the most up-to-date information.

Your promotion code for extra savings at select hotels will be coming in a separate e-mail within 48 hours.



See great hotel deals for your trip.

Traveler information

Traveler names, loyalty programs, and ticket type

Traveler 1 **NARDOS KING**
Airline Ticket Number: [REDACTED] [Electronic](#)
Primary phone number: [REDACTED]

Cost and Billing Summary

This booking is subject to our [Privacy Policy](#) and our [Terms and Conditions](#)

Trip cost

Flight

Airline Ticket(1) \$304.71

Meal (if available): Standard


Flight itinerary

CheapTickets record locator: [REDACTED]

To make changes to your trip, go to

[Trip details](#) | [Modify Seat Requests](#) | [Terms and conditions](#)

Leave **Mon, Nov 11** **1hr 35min Total time**

Depart **Washington DC, District of Columbia**  **Delta Air Lines 1444**
Economy | Boeing 737
391 mi | 1hr 35min


9:44 AM Reagan Airport (DCA) | Terminal B

Arrive **Detroit, Michigan**

11:19 AM Detroit Wayne County Airport (DTW) | Terminal EM

On-time performance: 90%

Return **Sun, Nov 17** **1hr 36min Total time**

Depart **Detroit, Michigan**  **Delta Air Lines 2062**
Economy | Boeing Douglas MD-88
391 mi | 1hr 36min

3:40 PM Detroit Wayne County Airport (DTW) | Terminal EM

Arrive **Washington DC, District of Columbia**

5:16 PM Reagan Airport (DCA) | Terminal B

On-time performance: 70%

Delta Air Lines record locator: GXRULA

Security update: Airports and airlines now require that you obtain a boarding pass before entering the security checkpoint. Review the latest airport security rules.

Travel Insurance Plan 2505 policy information

Policy holder:

Nardos King

Policy number:

Status

Purchased

Description:

7 days DCA - DTW

Travel Insurance Plan 2505 is provided by and billed separately by Allianz Global Assistance, a brand of AGA Service Company. A separate e-mail, which you may need to access on your trip, has been sent confirming the details of your policy. If you need any assistance with your travel protection, please contact Allianz Global Assistance, a brand of AGA Service Company at 1-800-269-9726.

[Learn more](#)

(Adult: 1)

Insurance

Travel Insurance Plan 2505 \$20.13

Total due at booking \$324.84

Taxes and fees included

Additional baggage fees may apply.

This reservation was made on Tue, Oct 1, 2013 8:44 PM CDT.

Billing information

Card holder's name:

Nardos King

Card type:

American Express

Card number:

Billing Address:

US

Air policies and additional billing information

Changes to this ticket will incur change fees.

Fairfax County Public Schools PURCHASE REQUISITION, ORDER, AND RECEIVING REPORT

NUMBER AND PREFIX LETTERS APPEARING
AT RIGHT MUST APPEAR ON ALL DELIVERIES,
PACKAGES, INVOICES, PACKING SLIPS AND
RELATED CORRESPONDENCE

C3680

Name of School and Address

Mount Vernon High School
8515 Old Mt. Vernon Rd.
Alexandria, Virginia 22309
Telephone: (703) 619-3100
Fax: (703) 619-3197

Date _____

1 Oct 2013

Account To Be Charged

Staff Development

Purchase From

NABSE Conference
Marriott Detroit
Detroit, MI

Please Furnish, Deliver, and Bill to the Following:

Mount Vernon High School
8515 Old Mt. Vernon Rd.
Alexandria, Virginia 22309

TAX EXEMPT #

CHARGE
SALES TAX

**DO NOT CHARGE
SALES TAX**

1 QUANTITY	2 ARTICLE AND DESCRIPTION	3 UNIT	4 UNIT PRICE	5 AMOUNT	6 QUANTITY RECEIVED
	Airline Flight				
	Cheap Tickets				
	Depart 11/18/13 - Washington DC		304	71	
	Return 11/17/13 - Washington DC				
	plus Travel Insurance		20	13	
	Total		324	84	
	V				

REMARKS Reimburse Mrs. King
for airline ticket

SEND INVOICES
ATTN: FINANCE OFFICE
TELEPHONE (703) 619-3115
FAX (703) 619-3356

FINANCE OFFICE CLOSED
THE MONTH OF JULY

APPROVED BY PRINCIPAL

DATE _____

REQUESTED BY

APPROVED BY TEACHER SPONSOR

ACCEPTANCE ACKNOWLEDGEMENT*

DELIVERY IS: ☒ PARTIAL ☐ FINAL

DATE OF PAYMENT

QUANTITY IN COLUMN 6 HAS BEEN:

☐ RECEIVED ☐ ACCEPTED AND CONFORMS
☐ INSPECTED TO THE PURCHASE ORDER,
EXCEPT AS NOTED

RECEIVING EMPLOYEE'S SIGNATURE _____

DATE RECEIVED _____

To secure your next stay, go to Marriott.com

To secure your next stay, go to Marriott.com



JPMORGAN CHASE BANK NA
PO BOX 15918
MAIL SUITE DE1-1404
WILMINGTON DE 19850

MEMO STATEMENT
THIS IS NOT A BILL

ACCOUNT NUMBER

STATEMENT DATE

11-27-13

NET CHARGES

\$872.10

MOUNT VERNON HS SD
MOUNT VERNON HS SD
8515 OLD MT VERNON RD
ALEXANDRIA VA 22309-2009

**N0001502

*Nards & L
Michelle Brown 12/7/13*

FOR RECONCILIATION PURPOSES ONLY. DO NOT SEND PAYMENT.

NAME: MOUNT VERNON HS SD

CYCLE LIMIT: \$4,000

ACCOUNTING CODE:

CARDHOLDER ACTIVITY

Travel Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
11-12	11-11		DELTA 00682281380911 WASHINGTON DC KING/NARDOSELEA DEPARTURE: 11-11-13 P.O.S.: SALES TAX: \$0.00 DCA DL X DCA	60.00 ✓
11-18	11-17		DELTA 00682290099724 DETROIT MI KING/NARDOSELEA DEPARTURE: 11-17-13 P.O.S.: SALES TAX: \$0.00 DTW DL X DTW	60.00 ✓
11-19	11-18		MARRIOTT 337U7 DETROIT DETROIT MI 23835 ARRIVAL: 11-17-13	752.10 ✓
Total Travel Activity				872.10

FOR CUSTOMER SERVICE CALL:

FOR LOST/STOLEN CARDS CALL:

FOR TTY/TDD SERVICE CALL:

ACCOUNT NUMBER

STATEMENT DATE:

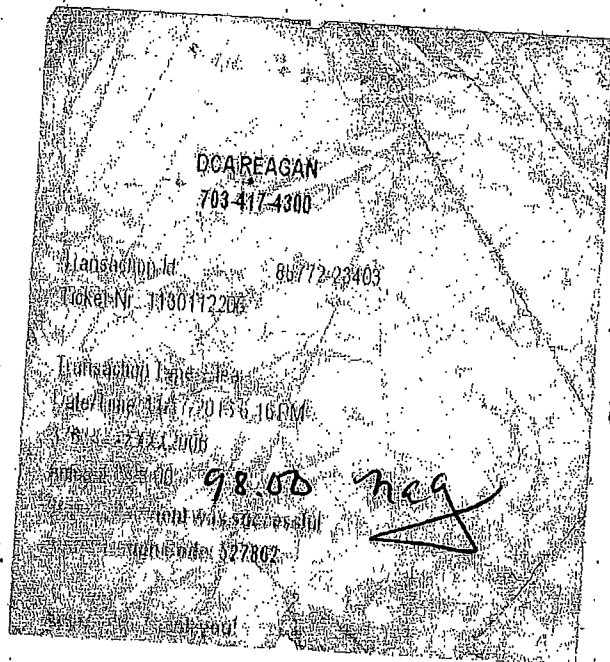
11/27/13

ACCOUNT SUMMARY

PURCHASES & OTHER CHARGES	872.10
CASH ADVANCES	.00
CREDITS	.00
CASH ADVANCE FEE	.00
NET CHARGES	\$872.10
DISPUTE AMOUNT	.00

SEND BILLING INQUIRIES TO:

JPMORGAN CHASE BANK NA
COMMERCIAL CARD SOLUTIONS
P.O. BOX 2015
MAIL SUITE IL1-6225
ELGIN, IL 60121



Metro Cab KHAN



313-455-2125

On demand and scheduled service 24 hours a day
Airport service • Package delivery
RESERVATIONS MADE THROUGH DRIVER'S CELL PHONE ARE GUARANTEED

DCA REAGAN
703-417-4300

Ticket No. 1130112200

to Cars
17 Brest Rd.
Lor, Michigan
30
ne #: 7349465700

#: 11/11/13
Start:
Time: 11/11/13
om: FLAGGED

partment:
ight Info:
j:

ar: 5071 Driver: 8355
nsite: 11/11/13 11:45
Actual Pu: 11/11/13 11:45
Done time: 11/11/13 12:10
Notes:

Charges:

Tip: 10.00
Tolls:
Fare Amount:

Total Amount: 60.30

Payment Method: CREDIT CARD
Card Number: [REDACTED]
Expiry: [REDACTED]
Auth #: [REDACTED]

Signature:

Confirmation #: [REDACTED]



1-800-995-1008
(313) 995-8000 Fax: (313) 359-2050

Luxury Sedan Service
Serving Metropolitan Detroit

Receipt

Date 11-17-13 Driver Andr

Guest _____

Company Name _____

From Don'ton Marriott

To DPT Metro

Fare 55.00

Gratuity _____

Total _____

Thank You!

DELTA

PASSENGER RECEIPT
17NOV13 00:00
DL/KI DTW

EXCESS BAGGAGE
TICKET

KING/NARDOSE ELEANOR
NOT VALID FOR
TRANSPORTATION

PSGR TICKET [REDACTED]

THIS IS YOUR RECEIPT

DTW DL DCA

00:00 60.00

00:00 60.00

USD 60.00

GXRULA /DL

FOR CONDITIONS OF
CONTRACT - SEE
PASSENGER TICKET AND
BAGGAGE CHECK

NOT VALID FOR TRAVEL

1 006 8229009972 3

1 006 8229009972 3

USD 60.00

DELTA

PASSENGER RECEIPT
11NOV13 00:00
DL/NG DCA FTO

00
US

EXCESS BAGGAGE
TICKET

MOUNT/VERNON
NOT VALID FOR
TRANSPORTATION

PSGR TICKET [REDACTED]

THIS IS YOUR RECEIPT

XCA DL DTW

00:00 60.00

00:00 60.00

USD 60.00

GXRULA /DL

NON REFUNDABLE/
NO CHANGES/NON TR
ANSFERABLE/NOT
VALID FOR TRAVEL

NOT VALID FOR TRAVEL

0 006 8228138091 1

0 006 8228138091 1

USD 60.00



Welcome Grimes, Alexandra N.

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Tuesday March 17, 2015

Local Travel

Nonlocal Travel

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Nonlocal Travel Reimbursement Request - View

Traveler Information

Traveler's Name

RICCI, GARY T.

Reimbursement Document: [REDACTED]

SAP Document: [REDACTED]

Reimbursement Status: C - Complete

Approval Document: [REDACTED]

SAP Document: [REDACTED]

Office/School: SS - STUDENT SAFETY AND WELLNESS

Departure Date: March 17, 2014

Return Date: March 18, 2014

Destination: Allentown / Easton / Bethlehem, PA

Index: 590000 Subobject: 5024

Purpose of Travel: School Based Staff Professional Development

Travel Method: Private Vehicle

Travel Sponsor: International Institute for Restorative Practices

Total Estimated Expenses: \$ 923.06

Travel Amount Limit: \$ 0.00

Amount of Advance Received: \$ 0.00

Grant Amount: \$ 0.00

Description of Expense	Monday 03/17/14	Tuesday 03/18/14	Total Costs	Paid By FCPS	Paid by Traveler
Air/Train/Bus Fare			\$0.00	\$0.00	\$0.00
Registration Fee			\$320.00	\$320.00	\$0.00
Lodging (tax included)			\$191.40	\$191.40	\$0.00
Car Rental			\$0.00	\$0.00	\$0.00
Breakfast (M&IE Per Diem)		\$6.00	\$6.00	\$0.00	\$12.00
Lunch (M&IE Per Diem)		\$9.00	\$9.00	\$0.00	\$18.00
Dinner (M&IE Per Diem)		\$19.50	\$19.50	\$0.00	\$39.00
Incidentals (M&IE Per Diem)		\$3.75	\$3.75	\$0.00	\$7.50
POV Mileage Amount		\$234.64	\$234.64	\$0.00	\$234.64
Parking			\$0.00	\$0.00	\$0.00
Transportation			\$0.00	\$0.00	\$0.00
Other Expenses			\$0.00	\$0.00	\$0.00
Total			\$822.54	\$511.40	\$311.14
Travel Amount Limit					\$0.00
Amount of Advance Received					\$0.00
Balance Due Traveler					\$311.14
Balance Due FCPS					\$0.00

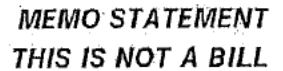
Travel Notes

Action by Approving Authority

Level	Level Title	Approval Type	Approved By	Approved Date	Approval Status	Notes
0100	Funds Verification	Nonlocal Travel	JSGiron	04/01/2014	Rejected	
0100	Funds Verification	Nonlocal Travel	JSGiron	04/02/2014	Approved	None
1000	FAMIS Review	Nonlocal Travel	angrimes	04/02/2014	Approved	None

[Back to List](#)

[illegible]



JPMORGAN CHASE BANK NA
PO BOX 15918
MAIL SUITE DE1-1404
WILMINGTON DE 19850

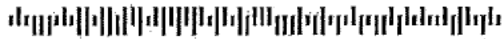
ACCOUNT NUMBER

STATEMENT DATE

03-27-14

NET CHARGES

\$1,677.80



==T0003614

DSS
DSS-3877 FAIRFAX RIDGE ROAD
BETTY HATT- SUITE 3202
FAIRFAX VA 22030

FOR RECONCILIATION PURPOSES ONLY. DO NOT SEND PAYMENT.

NAME: DSS INTRVNTION&PRVNTN

ACCOUNTING CODE:



CYCLE LIMIT \$7,500

ACCOUNTING CODE: [REDACTED]
SNI 5601064 545120

CARDHOLDER ACTIVITY

Purchasing Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-06	03-05	[REDACTED]	[REDACTED]	[REDACTED]
03-11	03-10	[REDACTED]	IIRP 6108079221 PA	320.00
03-11	03-10	[REDACTED]	IIRP 6108079221 PA	320.00
03-21	03-20	[REDACTED]	IIRP 6108079221 PA	300.00
03-21	03-20	[REDACTED]	IIRP 6108079221 PA	300.00
Certified Correct			Total Purchasing Activity	1,295.00



 Signature Date

FOR CUSTOMER SERVICE CALL: [REDACTED]		ACCOUNT NUMBER	ACCOUNT SUMMARY
FOR LOST/STOLEN CARDS CALL: [REDACTED]		[REDACTED]	PURCHASES & OTHER CHARGES [REDACTED]
FOR TTY/TTY SERVICE CALL: [REDACTED]		STATEMENT DATE:	CASH ADVANCES .00
		03/27/14	CREDITS .00
			CASH ADVANCE FEE .00
			NET CHARGES [REDACTED]
			DISPUTE AMOUNT .00

SEND BILLING INQUIRIES TO:

JPMORGAN CHASE BANK NA
 COMMERCIAL CARD SOLUTIONS
 P.O. BOX 2015
 MAIL SUITE IL1-6225
 ELGIN, IL 60121

5011
4/15/14

RECEIVED

Historic Hotel Bethlehem

437 Main Street
Bethlehem, PA 18018
Phone No. 610-625-6000 Fax No. 610-625-2218
info@hotelbethlehem.com

Page: 1 of 1

Guest Name: Gary Ricci (R/t)

Room #: 510

Confirmation #: [REDACTED]

Arrive: 3/16/2014

Depart: 3/18/2014

Status: FOL

Date	Description	Charges	Credits
03/16/14	ROOM CHARGE - Room #: 510	87.00	
03/16/14	STATE TAX - Room #: 510	5.22	
03/16/14	OCCUPANCY TAX - Room #: 510	3.48	
03/17/14	ROOM CHARGE - Room #: 510	87.00	
03/17/14	STATE TAX - Room #: 510	5.22	
03/17/14	OCCUPANCY TAX - Room #: 510	3.48	
03/18/14	MAST - PAYMENT [REDACTED]		191.40

Merchant ID: 329856 Invoice #: 168887 Authorization: [REDACTED] Date/Time: 3/18/2014 4:25:29 PM

Folio Balance 0.00

Signature: _____



DSS INTRVNTION&PRVNTN
DSS
DSS-3877 FAIRFAX RIDGE ROAD
BETTY HATT- SUITE 3202
FAIRFAX VA 22030

ACCOUNT NUMBER
[REDACTED]

STATEMENT DATE: 03/27/14

CARDHOLDER ACTIVITY

Travel Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-20	03-18	[REDACTED]	HISTORIC HOTEL BETHLEH BETHLEHEM PA 168885 ARRIVAL: 03-16-14	191.40
03-20	03-18	[REDACTED]	HISTORIC HOTEL BETHLEH BETHLEHEM PA 168887 ARRIVAL: 03-16-14	191.40
Total Travel Activity				382.80



Welcome Grimes, Alexandra N.

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Tuesday March 17, 2015

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Nonlocal Travel Reimbursement Request - View

Traveler Information

Traveler's Name

VAERST, ULRIKE

Reimbursement Document:

SAP Document:

Reimbursement Status: C - Complete

Approval Document:

SAP Document:

Office/School: SS - STUDENT SAFETY AND WELLNESS

Departure Date: March 17, 2014

Return Date: March 18, 2014

Destination: Allentown / Easton / Bethlehem, PA

Index: 590000 Subobject: 5024

Purpose of Travel: School Based Staff Professional Development

Travel Method: Private Vehicle

Travel Sponsor: International Institute for Restorative Practices

Total Estimated Expenses: \$ 923.06
 Travel Amount Limit: \$ 0.00
 Amount of Advance Received: \$ 0.00
 Grant Amount: \$ 0.00

Description of Expense	Monday	Tuesday	Total Costs	Paid By FCPS	Paid by Traveler
	03/17/14	03/18/14			
Air/Train/Bus Fare			\$0.00	\$0.00	\$0.00
Registration Fee			\$320.00	\$320.00	\$0.00
Lodging (tax included)			\$191.40	\$191.40	\$0.00
Car Rental			\$0.00	\$0.00	\$0.00
Breakfast (M&IE Per Diem)		\$6.00	\$12.00	\$0.00	\$12.00
Lunch (M&IE Per Diem)		\$9.00	\$18.00	\$0.00	\$18.00
Dinner (M&IE Per Diem)		\$19.50	\$39.00	\$0.00	\$39.00
Incidentals (M&IE Per Diem)		\$3.75	\$7.50	\$0.00	\$7.50
POV Mileage Amount		\$259.84	\$259.84	\$0.00	\$259.84
Parking		\$7.00	\$14.00	\$0.00	\$14.00
Transportation			\$0.00	\$0.00	\$0.00
Other Expenses			\$0.00	\$0.00	\$0.00
Total			\$861.74	\$511.40	\$350.34
Travel Amount Limit					\$0.00
Amount of Advance Received					\$0.00
Balance Due Traveler					\$350.34
Balance Due FCPS					\$0.00

Travel Notes

Action by Approving Authority

Level	Level Title	Approval Type	Approved By	Approved Date	Approval Status	Notes
0100	Funds Verification	Nonlocal Travel	JSGiron	04/01/2014	Rejected	
0100	Funds Verification	Nonlocal Travel	JSGiron	04/02/2014	Approved	None
1000	FAMIS Review	Nonlocal Travel	anqrimes	04/02/2014	Rejected	
0100	Funds Verification	Nonlocal Travel	JSGiron	04/04/2014	Approved	None

Invoice No: 22701-1
Invoice Date: 3/10/2014
Order No: 22701
Order Date: 3/10/2014
P.O.No:
Terms: Net 30
Ship via: N/A



P.O. Box 229
Bethlehem, PA 18016-0229
610-807-9221

Bill to:
Ulli Vaerst
Fairfax County Public Schools
6400 Quander Road
Quad 2
Alexandria, VA 22307

Ship to:
Ulli Vaerst
Fairfax County Public Schools
6400 Quander Road
Quad 2
Alexandria, VA 22307

Quantity	Description	Unit Price	Disc.	Extended Price
1	Facilitating Restorative Conferences (2 Day)	\$320.00	%	\$320.00
PLEASE NOTE: Invoice number must appear on check when sending payment. All currency in U.S. dollars. Remit payment to: IIRP P.O. Box 229 Bethlehem, PA 18016-0229		Subtotal:	\$320.00	
		Shipping:	\$0.00	
		Tax:	\$0.00	
		Total:	\$320.00	
		Paid:	\$320.00	
		Balance Due:	\$0.00	



MEMO STATEMENT

THIS IS NOT A BILL

JPMORGAN CHASE BANK NA
PO BOX 15918
MAIL SUITE DE1-1404
WILMINGTON DE 19850

ACCOUNT NUMBER [REDACTED]

STATEMENT DATE

03-27-14

NET CHARGES [REDACTED]



DSS INTRVNTION&PRVNTN

**T0001634

DSS

DSS-3877 FAIRFAX RIDGE ROAD
BETTY HATT- SUITE 3202
FAIRFAX VA 22030

FOR RECONCILIATION PURPOSES ONLY. DO NOT SEND PAYMENT.

NAME: DSS INTRVNTION&PRVNTN

ACCOUNTING CODE: [REDACTED]

CYCLE LIMIT \$7,500

CARDHOLDER ACTIVITY

Purchasing Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-06	03-05	[REDACTED]	[REDACTED]	[REDACTED]
03-11	03-10	[REDACTED]	IIRP 6108079221 PA	320.00
03-11	03-10	[REDACTED]	IIRP 6108079221 PA	320.00
03-21	03-20	[REDACTED]	IRP 6108079221 PA	300.00
03-21	03-20	[REDACTED]	IIRP 6108079221 PA	300.00

Certified Correct

Total Purchasing Activity [REDACTED]

May Ann Paravalli 4/9/14
Signature Date

FOR CUSTOMER SERVICE CALL: [REDACTED]	ACCOUNT NUMBER [REDACTED]	ACCOUNT SUMMARY
FOR LOST/STOLEN CARDS CALL: [REDACTED]	STATEMENT DATE: 03/27/14	PURCHASES & OTHER CHARGES [REDACTED]
FOR TTY/TDD SERVICE CALL: [REDACTED]		CASH ADVANCES .00
		CREDITS .00
		CASH ADVANCE FEE .00
		NET CHARGES [REDACTED]
		DISPUTE AMOUNT .00

SEND BILLING INQUIRIES TO:
JPMORGAN CHASE BANK NA
COMMERCIAL CARD SOLUTIONS
P.O. BOX 2015
MAIL SUITE IL1-6225
ELGIN, IL 60121

RECEIVED
APR 30 2014
BY: [REDACTED]

Historic Hotel Bethlehem

437 Main Street
Bethlehem, PA 18018
Phone No. 610-625-5000 Fax No. 610-625-2218
Info@hotelbethlehem.com

Page: 1 of 1

Guest Name: Ulrike Vaerst (R/t)

Room #: 705

Confirmation #: [REDACTED]

Arrive: 3/16/2014

Depart: 3/18/2014

Status: FOL

Date	Description	Charges	Credits
03/16/14	ROOM CHARGE - Room #: 705	87.00	
03/16/14	STATE TAX - Room #: 705	5.22	
03/16/14	OCCUPANCY TAX - Room #: 705	3.48	
03/17/14	ROOM CHARGE - Room #: 705	87.00	
03/17/14	STATE TAX - Room #: 705	5.22	
03/17/14	OCCUPANCY TAX - Room #: 705	3.48	
03/18/14	MAST - PAYMENT [REDACTED]		191.40

Merchant ID: 329666 Invoice #: 168885 Authorization [REDACTED] Date/Time: 3/18/2014 11:15:47 AM

Folio Balance 0.00

Signature: _____



DSS INTRVNTION&PRVNTN
DSS
DSS-3877 FAIRFAX RIDGE ROAD
BETTY HATT- SUITE 3202
FAIRFAX VA 22030

ACCOUNT NUMBER

STATEMENT DATE: 03/27/14

CARDHOLDER ACTIVITY

Travel Activity

Post Date	Tran Date	Reference Number	Transaction Description	Amount
03-20	03-18		HISTORIC HOTEL BETHLEH BETHLEHEM PA 168885 ARRIVAL: 03-16-14	191.40 ✓
03-20	03-18		HISTORIC HOTEL BETHLEH BETHLEHEM PA 168887 ARRIVAL: 03-16-14	191.40 ✓
Total Travel Activity				382.80



Enter Vendor Invoice: Company Code FFX1

Tree on Hold Simulate Park Editing options

Transactn Invoice Bal. 0.00

Basic data Payment Details Tax Withholding tax Notes

Vendor	1000021036	SGL Ind	
Invoice date	02/19/2015	Reference	32685
Posting Date	03/30/2015		
Document Type	KR (Vendor Invol..)		
Amount	2,345.00	USD	<input type="checkbox"/> Calculate tax
Tax Amount			
Text			
Paymt terms	30 Days net		
Baseline Date	02/19/2015		
Company Code	FFX1 Fairfax Fairfax		
Lot No.			

Vendor

Address

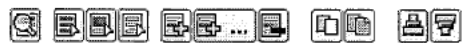
MPM COMMUNICATIONS LLC
 ABR SERVICES
 3480 CATTERTON PLACE SUITE 1..
 WALDORF MD 20602

Bank data: not available

015

1 Items (No entry variant selected)

S...	G/L acct	Short Text	D/C	Amount I...	Cost center	Order	WBS elem...	Func. Area	Fund	Business ...	Gran
<input checked="" type="checkbox"/>	515078	Mailing / Shi..	De...	2,345.00				125515400..	100-S1..	2000	NOT
<input type="checkbox"/>			De...								
<input type="checkbox"/>			De...								
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Page: 1 of 1

Guest Name: Ulrike Vaerst (Incidentals)

Room #: 705.

Confirmation #: [REDACTED]

Arrive: 3/16/2014

Depart: 3/18/2014

Status: FOL

Date	Description	Charges	Credits
03/16/14	PARKING CHARGE	14.00	
03/16/14	STATE TAX	0.84	
03/17/14	TAP ROOM CHARGE - #2444	17.07	
03/18/14	[REDACTED] PAYMENT [REDACTED]		31.91

Merchant ID: 329656 Invoice #: 169030 Authorization: [REDACTED] Date/Time: 3/18/2014 11:14:15 AM

Folio Balance 0.00

Signature: _____