



Office of Administrative Services
FOIA Requester Service Center

March 15, 2018

Ms. Danielle M. Lang
Campaign Legal Center
1411 K Street NW, Suite 1400
Washington, DC 20005

Dear Ms. Lang:

This is in response to your U.S. General Services Administration (GSA) Freedom of Information Act (FOIA) request, (GSA-2018-000711), dated February 2, 2017, regarding the Presidential Advisory Commission on Election Integrity (PACEI), in which you requested:

"[c]opies of the following documents for the time period from May 11, 2017 to the present, any and all documents—including reimbursement requests, pay orders, travel vouchers, memorandum, contracts, or receipts—within the following categories:

- (1) Any documents related to the funding and expenditures of the Commission;
- (2) Any documents related to any provision to or acquisition of any equipment of or for the Commission;
- (3) Any document pertaining to facilities, staff, equipment or other support services provided to the Commission;
- (4) Any document related to any reimbursements made to the Commission, the Commission's members, or other government staff who worked on behalf of the Commission;
- (5) Any document related to requests for funds by the Commission or its members or staff;
- (6) Any budget documents for or related to the Commission."

In response to items 1, 4, 5 and 6 of your request, please find attached a copy of the Interagency Agreement (IAA) between GSA and the Office of the Vice President as well as PACEI member travel and voter data expenses incurred and documented by GSA. Please be advised that we withheld personally identifiable information, specifically, the actual signatures and cell phone numbers of federal employees in accordance with the sixth exemption of FOIA, 5 U.S.C. § 52(b)(6). This is done because public disclosure of this information would constitute an unwarranted invasion of personal privacy.

U.S. General Services Administration
1800 F. Street, Northwest
Washington, DC 20405
Telephone: (202) 501-0800
Fax: (202) 501-2727

In response to items 2 and 3, GSA has processed one (1) payment in the amount of \$576 to the Federal Register for public notification of the July 18 meeting, per Federal Advisory Committee Act guidelines. Attached is a copy of the invoice for that payment. No other expenses beyond travel and the meeting notice publication have been processed by GSA. GSA has not provided furniture, computers, televisions, fax machines, copy machines, or cell phones for the Commission, as referenced in your request.

Since the agency does not have some of the specific records stated in your request, this does not constitute a denial of records. However, you have the right to appeal the adequacy of GSA's search. As such, you may administratively submit an appeal online at the following link (<https://foiaonline.regulations.gov/foia/action/public/home>) or in writing to the following address:

U.S. General Services Administration
FOIA Requester Service Center (H1F)
1800 F St. NW, Room 7308
Washington, DC 20405

Your appeal must be postmarked or electronically transmitted within 120 days of the date of the response to your request. In addition, your appeal must contain a brief statement of the reasons why the requested information should be released. Please enclose a copy of your initial request and this denial. Both the appeal letter and envelope or online appeal submission should be prominently marked, "Freedom of Information Act Appeal."

This completes our action on this request. Should you have any questions, please contact me at (202) 219-3078 or by email at travis.lewis@gsa.gov. If you need additional assistance, you may also contact Ms. Audrey Brooks, GSA's FOIA Public Liaison at (202) 205-5912 or via email at audrey.brooks@gsa.gov.

Additionally, you may contact the Office of Government Information Services (OGIS) at the National Archives and Records Administration to inquire about the FOIA mediation services they offer. The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, 8601 Adelphi Road-OGIS, College Park, Maryland 20740-6001, e-mail at ogis@nara.gov; telephone at (202) 741-5770; toll free at (877) 684-6448; or facsimile at (202) 741-5769.

Sincerely,

Travis Lewis

Travis Lewis

Director, Office of Freedom of Information Act and Records Management
Office of Administrative Services
General Services Administration

Enclosures

1. REQ. NO. (ACT NO. GSA ONLY)		REQUISITION FOR REPRODUCTION SERVICES <i>(See Instructions on Back of Part 6)</i>	THIS SECTION FOR PLANT USE ONLY		
GX0012866			SHOP JOB NO.		
2. BLANKET REQ. (Period covered)			CHARGE(S) FOR SERVICES		
FROM	TO		IN PLANT 01 \$	OUT PROC 12 \$	TOTAL COST \$

3a. ORDERING OFFICE (Complete mailing address, include ZIP Code)		4. DATE OF ORDER	5. DATE REQUIRED AT DESTINATION
Office of Governmentwide Policy Presidential Commission on Election Integrity (PCEI) 1800 F Street, NW Washington, DC 20405		07/03/2017	07/05/2017
3b. PERSON TO CONTACT (Name and Telephone number)		6. APPROPRIATION AND ALLOTMENT CHARGEABLE	
(b) (6)		(b) (6) - \$576.00	
9. TYPE OF SERVICE (Check all that apply)		7. BILLING ADDRESS CODE (BOAC)	8. CUSTOMER CONV. CODE (GSA Only)
<input type="checkbox"/> PRINTING/BINDING <input type="checkbox"/> ADDRESS/MAILING <input type="checkbox"/> DISTRIBUTION <input type="checkbox"/> ELECTRONIC PREP/DESIGN		470262	
<input type="checkbox"/> ELECTRONIC REPRODUCTION <input type="checkbox"/> GRAPHIC ARTS (Atlanta Only) <input type="checkbox"/> OTHER (Specify)		10. DESCRIPTION OF SERVICES AND/OR MATERIAL TO BE REPRODUCED (i.e., Form No. and title, name of pamphlet or brochure, etc.) Federal Register Notice Publication(s) for Presidential Commission on Election Integrity (PCEI)	

11. SPECIFICATIONS										
a. QUANTITY REQUIRED	b. NO. OF PAGES SUBMITTED	c. PAPER AND INK								
		COVER			TEXT					
		TYPE AND COLOR	WEIGHT	INK COLOR	TYPE AND COLOR	WEIGHT	INK COLOR			
d. PRINT		e. COMPLETED SIZE		f. MARGINS			g. FOLD TO: X	h. ASSEMBLE		
<input type="checkbox"/> ONE SIDE	<input type="checkbox"/> OTHER (Specify)	8-1/2 X 11"	17" X 22"	FRONT		BACK		OTHER	<input type="checkbox"/> AS FOLIOED	
<input type="checkbox"/> HEAD TO HEAD		8-1/2 X 14"	OTHER (Specify)	TOP	LEFT	TOP		LEFT	<input type="checkbox"/> AS PAGED	
<input type="checkbox"/> HEAD TO FOOT		11" X 17"							<input type="checkbox"/> PER DUMMY	
12. BINDERY										
a. TYPE		b. STAPLE(S)	c. PAD	d. PUNCHING				13. PACKAGING		
<input type="checkbox"/> SADDLE STITCH	<input type="checkbox"/> PLASTIC COMB	<input type="checkbox"/> TOP	NUMBER OF SHEETS PER PAD	<input type="checkbox"/> TOP		<input type="checkbox"/> RIGHT SIDE		<input type="checkbox"/> SHRINK WRAP		
<input type="checkbox"/> SIDE WIRE	<input type="checkbox"/> HOT TAPE	<input type="checkbox"/> LEFT SIDE		<input type="checkbox"/> BOTTOM		<input type="checkbox"/> LEFT SIDE		<input type="checkbox"/> BAND		
<input type="checkbox"/> PERFECT	<input type="checkbox"/> OTHER (Specify)	NO. OF STAPLES		NO. OF HOLES		DIAMETER		C TO C		
<input type="checkbox"/> LOOSELEAF								PACKAGE IN SETS OF		

14. SPECIAL INSTRUCTIONS (If additional space is necessary, attach separate sheets and key answers to item No(s).)

Federal Register Notice Publication(s) for Presidential Commission on Election Integrity (PCEI)
for meeting on Wednesday, July 19, 2017.
Billing Code 6820-14

GSA POC:
Theresa Ottery
Director
GSA, OAS, Executive Secretariat
Phone: 202-590-7465
Email: theresa.ottery@gsa.gov

15. DISTRIBUTION					
a. NO. OF COPIES	b. NAME OF PERSON TO WHOM WORK IS TO BE DELIVERED	c. BUILDING	d. ROOM NO.	E. MAIL OR DISTRIBUTE FROM:	
				<input type="checkbox"/> HANDLIST ATTACHED	<input type="checkbox"/> LABELS ATTACHED
				<input type="checkbox"/> PRINTOUT ATTACHED	<input type="checkbox"/> OTHER (Specify)
				<input type="checkbox"/> DISK ATTACHED	
				MAIL LIST NUMBER/CODE	

16. CERTIFICATION			
a. THIS WORK IS AUTHORIZED BY REGULATIONS AND IS NECESSARY TO THE CONDUCT OF OFFICIAL BUSINESS AND THE SPECIFICATIONS ARE THE MINIMUM NECESSARY TO MEET AGENCY REQUIREMENTS VALERIE WHITTINGTON		b. GPO WAS CONTACTED AND THEY ADVISED THAT THE WORK WAS NOT COMMERCIALY PROCURABLE AT A LOWER COST OR WITHIN THE TIME FRAME REQUIRED.	
c. THE USE OF MORE THAN ONE COLOR IS IN ACCORDANCE WITH DEPARTMENT REGULATIONS. THE ILLUSTRATIONS USED IN THIS PUBLICATION ARE FUNCTIONAL AND RELATED ENTIRELY TO OFFICIAL BUSINESS.			
APPROVING OFFICER	DATE	SIGNATURE	DATE
		APPROVAL (Signature and Date)	

GENERAL SERVICES ADMINISTRATION

GSA FORM 50 (REV. 9-91)



AUTHORIZATION

Document Summary for TA0002DDG (View Only)

Traveler

Traveler ID: E00045688

Traveler Name: Alan King

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DDG Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PECI Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
		ALEXANDRIA, VA	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Indigo Hotels	7/18/2017 6:35:00 AM EST	172.00	Hotel Indigo Old Town Alexandria, VA	1003288417	07/18/2017 00:00	N/A	Alan L King
COMM-CARR	American Airlines	7/18/2017 6:35:00 AM EST	176.40		1003288417	07/18/2017 14:35	326.799988 lbs CO2	Alan L King
COMM-CARR	American Airlines	7/18/2017 6:35:00 AM EST	0.00		1003288417	07/19/2017 17:45	326.799988 lbs CO2	Alan L King

^ Expenses

Total Per Diem Expenses: 275.50

Total Non-Per Diem Expenses: 225.45

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/17/2017		Estimated TDY Voucher Fee	Transxn Fees	14.75	EFT	
		07/17/2017		Estimated Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	176.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
Comments: Conf Num: 66830246 Cmt: Must cancel 1 day(s) prior to arrival.								
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
▼			07/18/17	69.00	172.00	172.00	51.75	51.75					
▼			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Additional Authorizations

Special Authorizations Exist

Other Authorization

Remarks

Contract fare used or No contract fare exists for city-pair market

No Fedrooms/FEMA facilities within a reasonable proximity of TDY

^ Accounting Allocations

Accounting Total: 500.95

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	500.95	100.00 %

^ Totals

Total Reimbursable: 275.50

Disbursement Type	Amount
Estimated Cost	500.95
Advance Requested	0.00

Trip Comments

No Comments Entered

Document Status

Current Status: AUTH APPROVED

Awaiting:

for Status:

Document Routing

Name	Status	Level
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Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
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07/17/2017 9:02:24 AM	AUTH APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**
07/17/2017 8:07:52 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**
07/17/2017 8:06:47 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**
07/17/2017 7:50:50 AM	CREATED	Alan King	Auto-created from reservation - NEW DOCUMENT (TA0002DDG)

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	



VOUCHER

AMOUNT PAID TO TRAVELER

\$413.09

Document Summary for VCH79042 (View Only)

Trip No. 1 

Traveler

Traveler ID: E00045688

Traveler Name: Alan King

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DDG Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PEI Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
		ALEXANDRIA, VA	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Indigo Hotels	7/18/2017 6:35:00 AM EST	172.00	Hotel Indigo Old Town Alexandria Alexandria, VA	1003288417	07/18/2017 00:00	N/A	Alan L King
COMM-CARR	American Airlines	7/18/2017 6:35:00 AM EST	176.40		1003288417	07/18/2017 14:35	296.399994 lbs CO2	Alan L King
COMM-CARR	American Airlines	7/18/2017 6:35:00 AM EST	0.00		1003288417	07/19/2017 17:45	296.399994 lbs CO2	Alan L King

^ Expenses

Total Per Diem Expenses: 275.50

Total Non-Per Diem Expenses: 363.04

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/17/2017		Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	176.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
⚠	Default Payment Method for this expense is not being used. Please verify for accuracy.							
⚠	Receipt required for this expense							
Comments: Conf Num: 66830246 Cmt: Must cancel 1 day(s) prior to arrival.								
		07/18/2017		Lodging Tax	Lodging	24.94	CASH	

⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.

07/18/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/18/2017	Taxi	Transportation	44.32	CASH	
⚠ Receipt required for this expense					
⚠ Verify travel mode is accurate.					
07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/19/2017	Taxi	Transportation	68.33	CASH	
⚠ Verify travel mode is accurate.					
⚠ Receipt required for this expense					
07/27/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT	

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
▼			07/18/17	69.00	172.00	172.00	51.75	51.75					
▼			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Accounting Allocations

Accounting Total: 638.54

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	638.54	100.00 %

^ Totals and Travel Advances

Total Reimbursable: 413.09

Disbursement Type	Amount
Total Expenses	638.54
Non-Reimbursable Expenses	225.45
Advance Applied	0.00
Pay To Charge Card	0.00
Pay To Traveler	413.09

Trip Comments

No Comments Entered

Document Status

Current Status: CLOSED Awaiting: for Status:

Document Routing

Name	Status	Level
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Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/31/2017 4:02:33 PM	CLOSED	EAI, EAI	EAI Document Status Update WS : 6T1720800052	
07/27/2017 12:04:57 PM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update WS : Travel Voucher Received and Processed Successfully	
07/27/2017 10:19:06 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
07/27/2017 10:19:05 AM	APPROVED	BRIZZI, GIANCARLO	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 10:12:48 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 10:10:03 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 9:58:56 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DDG)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	



RECEIPTS



07-19-17

Alan King

(b) (6)

Folio No. :

A/R Number :

Group Code :

Company :

Membership No. : PC (b) (6)

Invoice No. :

Room No. : 421

Arrival : 07-18-17

Departure : 07-19-17

Conf. No. : 66830246

Rate Code : IMGOV

Page No. : 1 of 1

Date	Description	Charges	Credits
07-18-17	*Accommodation	172.00	
07-18-17	State Tax 6%	10.32	
07-18-17	City Tax 8.5%	14.62	
07-18-17	Occupancy Tax	1.00	
07-19-17	MasterCard		197.94
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihgrewardsclub.com/review . We look forward to welcoming you back soon.		Total	197.94
		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 associate 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.

Hotel Indigo Old Town Alexandria
220 South Union Street
Alexandria, VA 22314
Telephone: (703) 721-3800 Fax: (703) 721-3801

Owned by Carr 220 South Union Street LLC and managed by IHG Management (Maryland) LLC

TO: kris.palmer@gsa.gov

FROM: Judge Alan King

**Election Integrity Commission
Organization Meeting
July 18-19, 2017
Washington, D.C.**

Judge Alan L. King

	Hotel Indigo, Alexandria, VA (GOVT rate \$172.00, plus tax) (folio attached)	\$197.94
7/18/17	Transportation from Polynesian Resort at Disney World to Orlando International Airport for first Commission meeting (Uber, attached)	\$28.96
7/18/17	Transportation from Reagan National Airport to Hotel Indigo in Alexandria (Uber, attached)	\$15.36
7/19/17	Transportation from Hotel Indigo to the Eisenhower Executive Office Bldg. (EEOB) (Uber, attached)	\$15.41
7/19/17	Transportation from the EEOB to the Reagan National Airport (Uber, attached)	\$16.38
7/19/17	Transportation from Orland International to the Polynesian Resort (Uber, attached)	\$36.54

TOTAL TRAVEL EXPENSES \$310.59

Plus: Per Diem

King, Alan

From: Alan L. King - (b) (6)
Sent: Tuesday, July 18, 2017 9:55 AM
To: King, Alan
Subject: Fwd: Your Tuesday morning trip with Uber

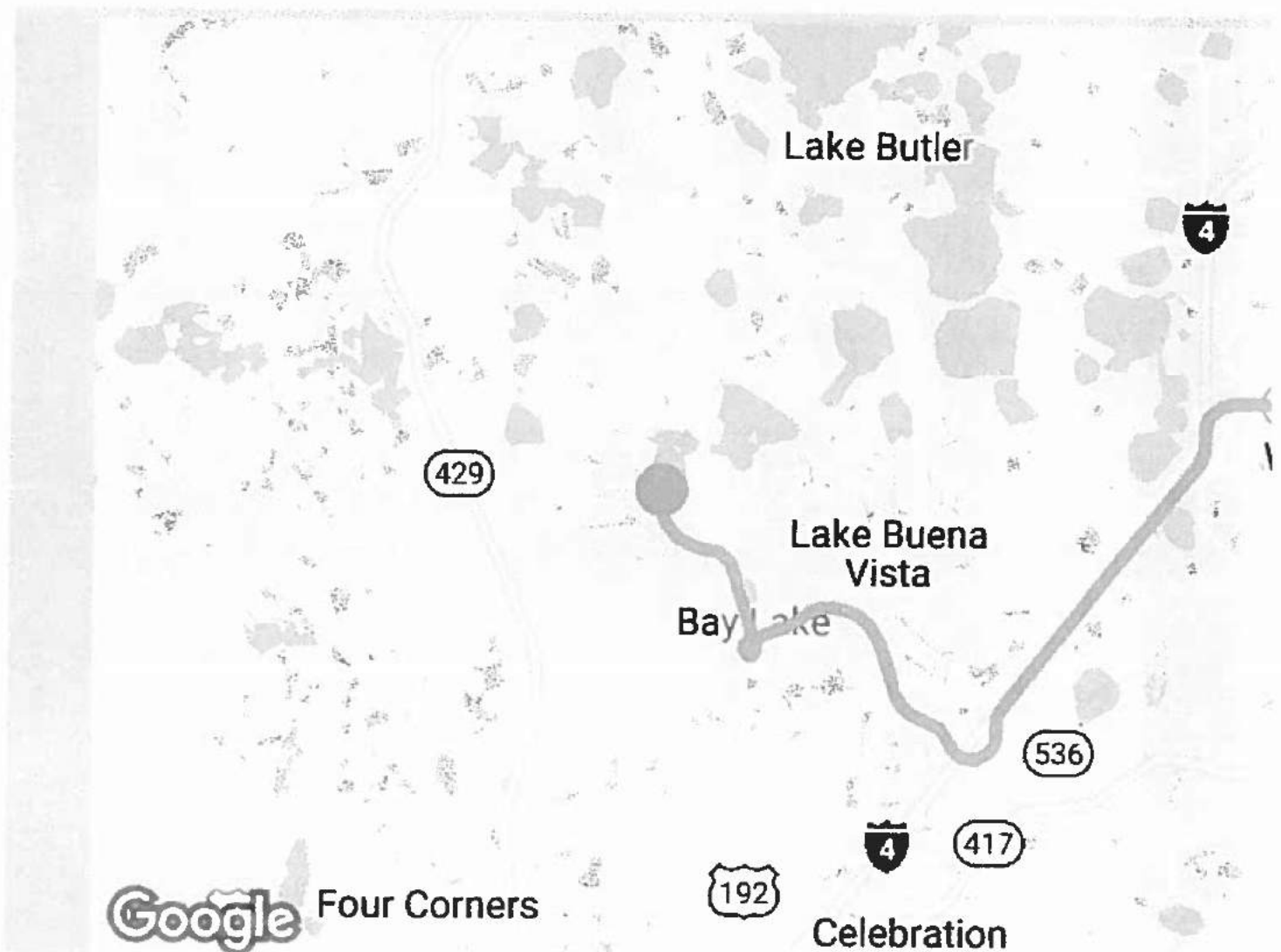
7/18/17

ORLANDO HOTEL TO
ORLANDO INT'L.

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <uber.us@uber.com>
Date: July 18, 2017 at 10:52:10 AM EDT
To: (b) (6)
Subject: Your Tuesday morning trip with Uber



\$28.96

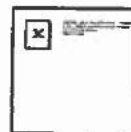
Thanks for choosing Uber, Alan

July 18, 2017 | uberX



10:21am | Polynesian Drive, Orlan

10:51am | 27 Jeff Fuqua Blvd, Orla



You rode w
25.18
miles



Add a tip

Your Fare



King, Alan

From: Alan L. King (b) (6)
Sent: Tuesday, July 18, 2017 4:39 PM
To: King, Alan
Subject: Fwd: Your Tuesday afternoon trip with Uber

7/18/17

Sent from my iPhone

Begin forwarded message:

REAGAN NATIONAL TO
HOTEL INDIANO IN
ALEXANDRIA, VA.

From: Uber Receipts <uber.us@uber.com>
Date: July 18, 2017 at 5:12:46 PM EDT
To: (b) (6)
Subject: Your Tuesday afternoon trip with Uber



\$15.36

Thanks for choosing Uber, Alan

July 18, 2017 | uberX



04:51pm | 4 Aviation Cir, Arlington

05:12pm | 208-210 Strand St, Alex



You rode w
4.78
miles



Add a tip

Your Fare



King, Alan

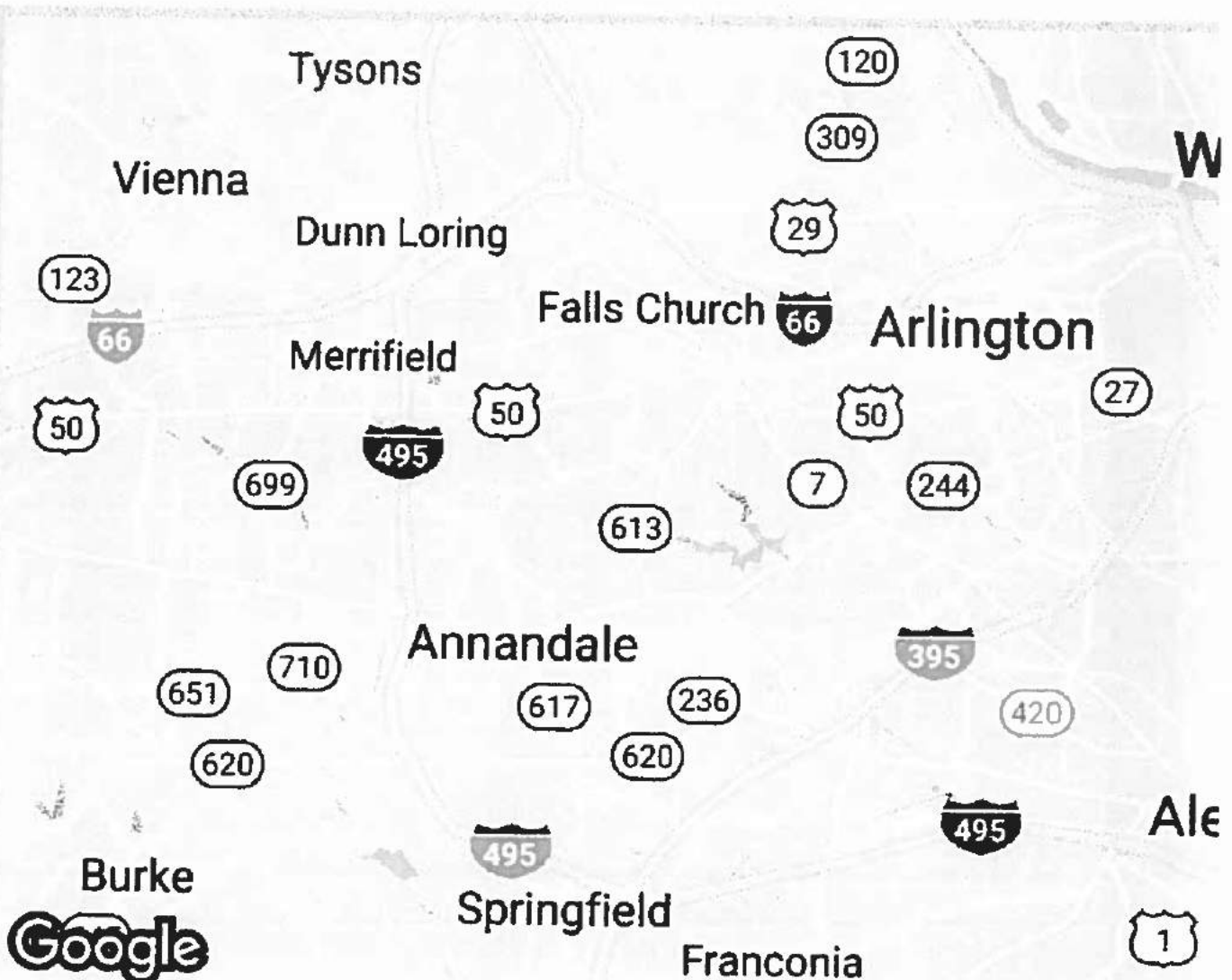
From: Alan L. King (b) (6)
Sent: Wednesday, July 19, 2017 6:32 AM
To: King, Alan
Subject: Fwd: Your Wednesday morning trip with Uber

Sent from my iPhone

7/19/17
HOTEL INDOGO IN ALEXANDRIA
TO EEB

Begin forwarded message:

From: Uber Receipts <uber.us@uber.com>
Date: July 19, 2017 at 7:08:47 AM EDT
To: (b) (6)
Subject: Your Wednesday morning trip with Uber



\$15.41

Thanks for choosing Uber, Alan

July 19, 2017 | uberX



06:48am | 210 S Union St, Alexandria

07:08am | 727-741 17th St NW, Washington



You rode w
8.88
miles



Add a tip

Your Fare



King, Alan

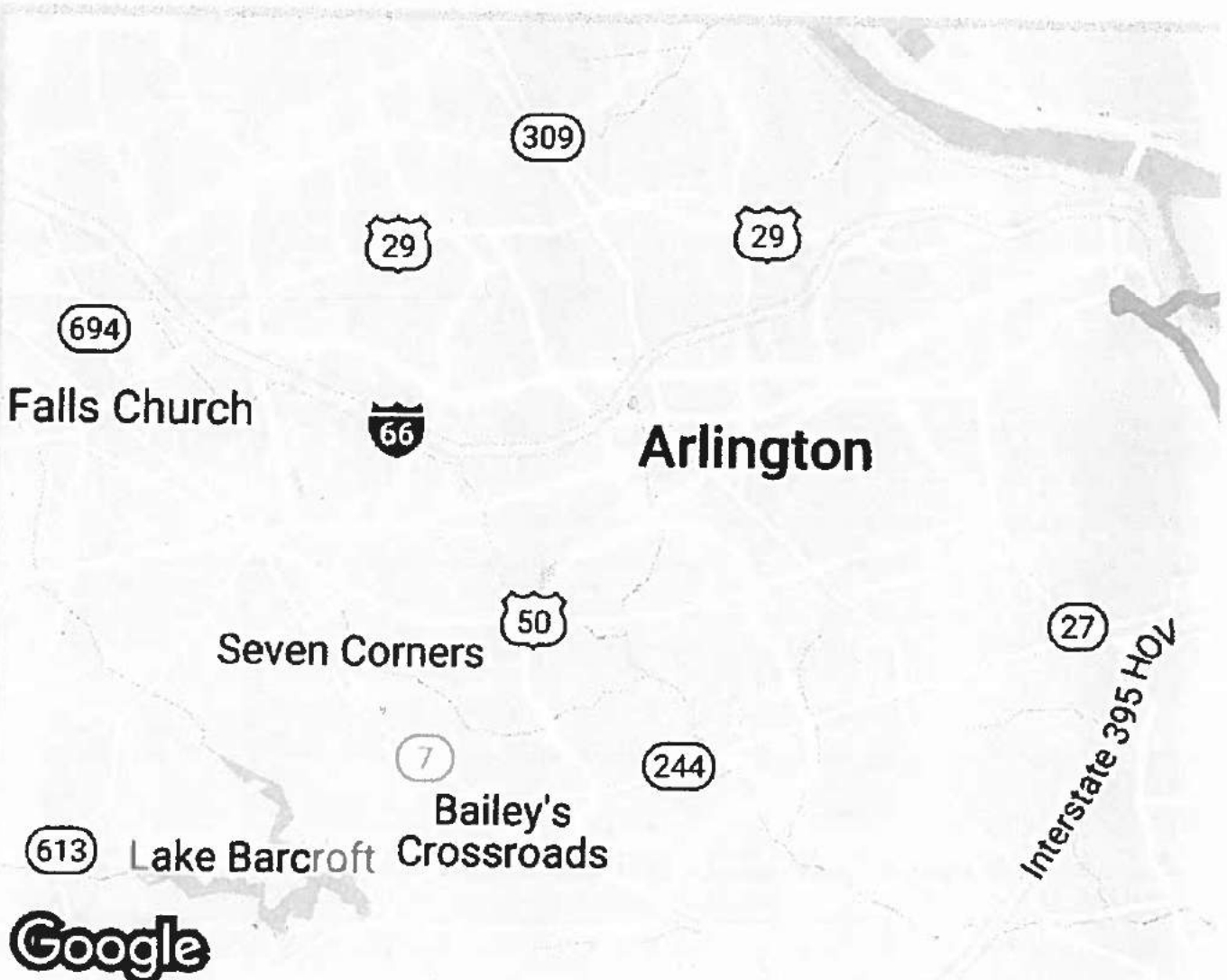
From: Alan L. King (b) (6)
Sent: Wednesday, July 19, 2017 2:53 PM
To: King, Alan
Subject: Fwd: Your Wednesday afternoon trip with Uber

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <uber.us@uber.com>
Date: July 19, 2017 at 3:10:31 PM EDT
To: (b) (6)
Subject: Your Wednesday afternoon trip with Uber

7/19/17
WH TO REAGAN INT'L.
(BEOB)



\$16.38

Thanks for choosing Uber, Alan

July 19, 2017 | uberX



02:54pm | 727-741 17th St NW, W

03:10pm | 4 Aviation Cir, Arlington,



You rode w
6.77
miles



Add a tip

Your Fare



King, Alan

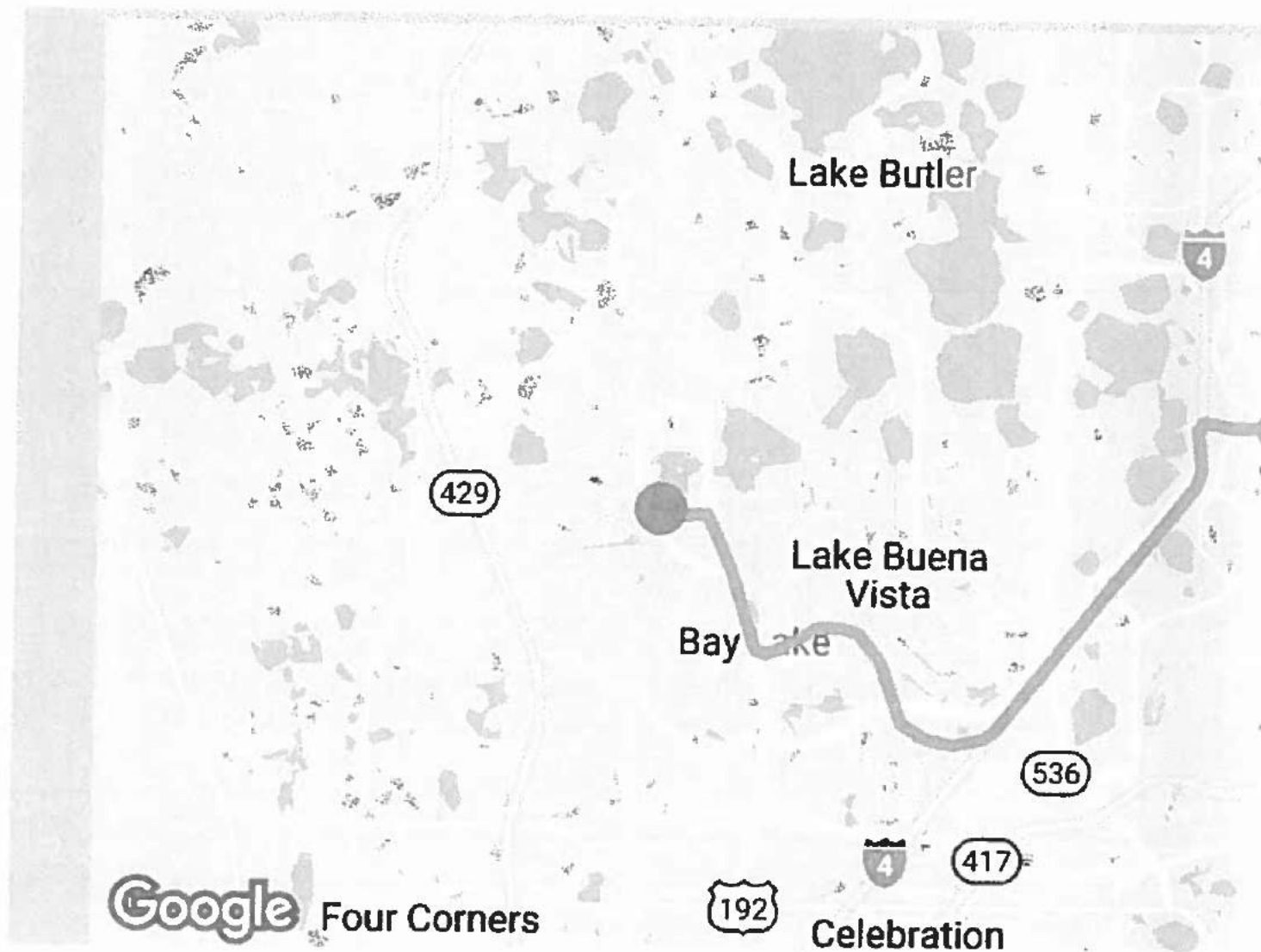
From: Alan L. King (b) (6)
Sent: Wednesday, July 19, 2017 8:56 PM
To: King, Alan
Subject: Fwd: Your Wednesday evening trip with Uber

Sent from my iPhone

7/19/17
ORLANDO INT'L.
TO HOTEL (POLYNESIA)

Begin forwarded message:

From: Uber Receipts <uber.us@uber.com>
Date: July 19, 2017 at 9:09:49 PM EDT
To: (b) (6)
Subject: Your Wednesday evening trip with Uber



\$36.54

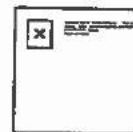
Thanks for choosing Uber, Alan

July 19, 2017 | uberX



08:34pm | 20 Jeff Fuqua Blvd, Orlando

09:09pm | Polynesian Drive, Orlando



You rode w
24.70
miles



Add a tip

Your Fare





AUTHORIZATION

Document Summary for TA0002DAN (View Only)

Traveler **Traveler ID:** E00045685 **Traveler Name:** Connie Lawson **Organization:** GSA-M-2

^ Document Information

Currency: U.S. Dollar **Type:** INVITATIONAL

TA Num: TA0002DAN **Purpose:** MISSION (OPERATIONAL) **Location Type:** CONUS
Document Details: PEGI COMMITTEE MEETING

Location Purpose	Alert	Location	From	To	Per Diem Rates
MISSION (OPERATIONAL)		WASHINGTON, DC	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History **PNR Status:** BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM-CARR	American Airlines	7/16/2017 2:50:00 PM EST	447.40		1003284880	07/18/2017 16:50	214.139999 lbs CO2	Connie S Lawson
COMM-CARR	American Airlines	7/16/2017 2:50:00 PM EST	0.00		1003284880	07/19/2017 19:46	214.139999 lbs CO2	Connie S Lawson

^ Expenses

Total Per Diem Expenses: 275.50 **Total Non-Per Diem Expenses:** 496.45

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Estimated TDY Voucher Fee	Transxn Fees	14.75	EFT	
		07/14/2017		Estimated Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	447.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
▼			07/18/17	69.00	172.00	172.00	51.75	51.75					
▼			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Additional Authorizations

Special Authorizations Exist

Other Authorization

Remarks

No hotel required, Non-conventional Lodging Used

Contract fare used or No contract fare exists for city-pair market

^ Accounting Allocations

Accounting Total: 771.95

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational Travel - FY17	(b) (6)	771.95	100.00 %

^ Totals

Total Reimbursable: 275.50

Disbursement Type	Amount
Estimated Cost	771.95
Advance Requested	0.00

Trip Comments

No Comments Entered

Document Status

Current Status: AUTH APPROVED

Awaiting:

for Status:

Document Routing

Name	Status	Level
------	--------	-------

Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/14/2017 11:42:27 AM	AUTH APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:40:22 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:39:05 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	

07/14/2017 10:49:51 AM	RESERVATIONS UPDATED	Connie Lawson	Auto-updated from reservation - Reservations updates for tripnum 1
07/14/2017 10:49:27 AM	CREATED	Connie Lawson	Auto-created from reservation - NEW DOCUMENT (TA0002DAN)

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	




VOUCHER

AMOUNT PAID TO TRAVELER

\$373.90

Document Summary for VCH79025 (View Only)

Trip No. 1 

Traveler

Traveler ID: E00045685

Traveler Name: Connie Lawson

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DAN

Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PECI COMMITTEE MEETING

Location Purpose	Alert	Location	From	To	Per Diem Rates
MISSION (OPERATIONAL)		WASHINGTON, DC	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM-CARR	American Airlines	7/16/2017 2:50:00 PM EST	447.40		1003284880	07/18/2017 16:50	194.220001 lbs CO2	Connie S Lawson
COMM-CARR	American Airlines	7/16/2017 2:50:00 PM EST	0.00		1003284880	07/19/2017 19:46	194.220001 lbs CO2	Connie S Lawson

^ Expenses

Total Per Diem Expenses: 275.50

Total Non-Per Diem Expenses: 594.85

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	447.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.								
⚠ Receipt required for this expense								
		07/18/2017		Lodging Tax	Lodging	24.94	CASH	
⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.								
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/18/2017		Taxi	Transportation	22.30	CASH	
⚠ Verify travel mode is accurate.								

07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/19/2017	Taxi	Transportation	51.16	CASH	
<div> <div></div> Verify travel mode is accurate. </div>					
<div> <div></div> Receipt required for this expense </div>					
07/27/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT	

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
✓			07/18/17	69.00	172.00	172.00	51.75	51.75					
✓			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Accounting Allocations

Accounting Total: 870.35

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	870.35	100.00 %

^ Totals and Travel Advances

Total Reimbursable: 373.90

Disbursement Type	Amount
Total Expenses	870.35
Non-Reimbursable Expenses	496.45
Advance Applied	0.00
Pay To Charge Card	0.00
Pay To Traveler	373.90

Trip Comments

[View Comment History](#)

No Comments Entered

Document Status

Current Status: CLOSED

Awaiting:

for Status:

Document Routing

Name	Status	Level
------	--------	-------

Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
08/02/2017 3:07:40 PM	CLOSED	EAI, EAI	EAI Document Status Update WS : 6T1720800050	
08/01/2017 11:03:12 AM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update WS : Travel Voucher Received and Processed Successfully	
08/01/2017 9:27:57 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
08/01/2017 9:27:56 AM	APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 7:38:52 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 7:37:33 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 7:36:53 AM	ADJUSTED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/28/2017 2:32:24 AM	RETURNED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:13:45 AM	SUBMIT TO TRAVELER	WHITTINGTON, VALERIE R	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:12:22 AM	ADJUSTED	WHITTINGTON, VALERIE R	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:04:53 AM	REJECTED BY FIN SYS	EAI, EAI	EAI Document Status Update WS : Errors encountered - see Claim History. The following problems were found: (Third Party Payment\Third Party Payment Line 1\Org Code) GS5555E - The specified Org Code, S00PC110, cannot be used for new transactions for BFY 2017. (Third Party Payment\Third Party Payment Line 2\Org Code) GS5555E - The specified Org Code, S00PC110, cannot be used for new transactions for BFY 2017.	
07/27/2017 9:58:24 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
07/27/2017 9:58:23 AM	APPROVED	BRIZZI, GIANCARLO	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 8:22:09 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 8:15:52 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 8:01:22 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DAN)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
3	08/01/17	7:36AM	KRIS PALMER **	
2	07/27/17	11:12AM	VALERIE WHITTINGTON	

1	07/27/17	8:01AM	PALMER, KRIS L
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RECEIPTS



07-19-17

Connie Lawson	Folio No. :	Room No. : 207
(b) (6)	A/R Number :	Arrival : 07-18-17
	Group Code :	Departure : 07-19-17
United States	Company :	Conf. No. : 67186323
	Membership No. : PC (b) (6)	Rate Code : IMG0V
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
07-18-17	*Accommodation	172.00	
07-18-17	State Tax 6%	10.32	
07-18-17	City Tax 8.5%	14.62	
07-18-17	Occupancy Tax	1.00	
07-19-17	American Express		197.94
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihgwardsclub.com/review . We look forward to welcoming you back soon.		Total	197.94
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown herein. 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 associate 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.

Hotel Indigo Old Town Alexandria
220 South Union Street
Alexandria, VA 22314
Telephone: (703) 721-3800 Fax: (703) 721-3801

Owned by Carr 220 South Union Street LLC and managed by IHG Management (Maryland) LLC

Taxi Cab Receipt

DATE: 7/18/17 TIME: 7:25pm
TRIP ORIGIN: Washington National
DESTINATION: Metrolia, Alexandria
FARE: \$ 22.30
SIGNATURE: **(b) (6)**

PRINTED CODE RECEIPT

* copy *
Alexandria Yellow
Cab #189
(703) 549-2500
Alexandria, VA
07/19/17 07:36

--ORIGINAL--
CLASSIC CAB
CAB # F938
CUSTOMER COPY
07/19/17 TR 1865
START END MILES
14:39 15:00 5.9
REGULAR FARE
FARE: \$ 19.18
EXTRA: \$ 0.00
TDLL: \$ 0.00
SRCH: \$ 0.75
TIP: \$ 3.85
TOTAL: \$ 23.28

CARD: 2007
AUTH: 827941

DFHV COMPLAINTS
LINE AND
WEBSITE ADDRESS:
855-484-4966
TTY 711 HTTP://
DFHV.DC.GOV/

TRIP ID:
START TIME: 07:10
END TIME: 07:36
DIST: 8.10

FARE: \$ 24.24
TIP: \$ 3.64
EXTRAS: \$ 0.00

TOTAL: \$ 27.88
CARD BAL: \$
OWED: \$ 0.00

xxxx2007
MID445100001996
AUTHchL1AhGTaG03LaAMHFpCA01vr8E

SIGN HERE:

4 WAYS TO BOOK A RIDE:
- Call (703) 549-2500
- AlexandriaYellowCab.com
- Download occurb.com/app
- Scan QR Code



AUTHORIZATION

Document Summary for TA0002DAX (View Only)

Traveler

Traveler ID: E00045684

Traveler Name: David Dunn

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DAX Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PEI COMMITTEE MEETING

Location Purpose	Alert	Location	From	To	Per Diem Rates
		WASHINGTON, DC	07/18/17	07/20/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Hilton	7/16/2017 10:00:00 AM EST	430.00	Capital Hilton Washington, DC,DC	1003285176	07/18/2017 00:00	N/A	David K Dunn
COMM-CARR	American Airlines	7/16/2017 10:00:00 AM EST	448.90		1003285176	07/18/2017 11:00	326.799988 lbs CO2	David K Dunn
COMM-CARR	American Airlines	7/16/2017 10:00:00 AM EST	0.00		1003285176	07/20/2017 11:27	326.799988 lbs CO2	David K Dunn

^ Expenses

Total Per Diem Expenses: 516.50

Total Non-Per Diem Expenses: 497.95

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Estimated TDY Voucher Fee	Transxn Fees	14.75	EFT	
		07/14/2017		Estimated Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	448.90	CBA	
		07/18/2017		Lodging	Lodging	215.00	CASH	Yes
Comments: Conf Num: 3359568094 Cmt: Must cancel 2 day(s) prior to arrival.								
		07/18/2017		Lodging Owed by Traveler	Lodging	-43.00	CASH	Yes
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		Lodging	Lodging	215.00	CASH	Yes

Comments: Conf Num: 3359568094 Cmt: Must cancel 2 day(s) prior to arrival.

07/19/2017	Lodging Owed by Traveler	Lodging	-43.00	CASH	Yes
07/19/2017	M&IE	M&IE-PerDiem	69.00	CASH	Yes
07/20/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 516.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
✓			07/18/17	69.00	215.00	172.00	51.75	51.75					
✓			07/19/17	69.00	215.00	172.00	69.00	69.00					
✓			07/20/17	69.00	0.00	0.00	51.75	51.75					

^ Additional Authorizations

Special Authorizations Exist

Other Authorization

Remarks

Contract fare used or No contract fare exists for city-pair market

Higher rate booked - lower cost room type sold out

No Fedrooms/FEMA facilities within a reasonable proximity of TDY

^ Accounting Allocations

Accounting Total: 1,014.45

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational Travel - FY17	(b) (6)	1,014.45	100.00 %

^ Totals

Total Reimbursable: 516.50

Disbursement Type	Amount
Estimated Cost	1,014.45
Advance Requested	0.00

Trip Comments

No Comments Entered

Document Status

Current Status: AUTH APPROVED Awaiting: for Status:

Document Routing

Name	Status	Level
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Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/14/2017 12:05:26 PM	AUTH APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:58:31 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:57:23 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:26:45 AM	RESERVATIONS UPDATED	David Dunn	Auto-updated from reservation - Reservations updates for tripnum 1	
07/14/2017 11:26:15 AM	CREATED	David Dunn	Auto-created from reservation - NEW DOCUMENT (TA0002DAX)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	




VOUCHER

AMOUNT PAID TO TRAVELER

\$562.81

Document Summary for VCH78854 (View Only)

Trip No. 1 

Traveler

Traveler ID: E00045684

Traveler Name: David Dunn

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DAX

Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PECI COMMITTEE MEETING

Location Purpose	Alert	Location	From	To	Per Diem Rates
		WASHINGTON, DC	07/18/17	07/20/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Hilton	7/16/2017 10:00:00 AM EST	430.00	Capital Hilton Washington, DC,DC	1003285176	07/18/2017 00:00	N/A	David K Dunn
COMM-CARR	American Airlines	7/16/2017 10:00:00 AM EST	448.90		1003285176	07/18/2017 11:00	296.399994 lbs CO2	David K Dunn
COMM-CARR	American Airlines	7/16/2017 10:00:00 AM EST	0.00		1003285176	07/20/2017 11:27	296.399994 lbs CO2	David K Dunn

^ Expenses

Total Per Diem Expenses: 516.50

Total Non-Per Diem Expenses: 544.26

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	448.90	CBA	
		07/18/2017		Lodging	Lodging	215.00	CASH	Yes
⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.								
⚠ Receipt required for this expense								
Comments: Conf Num: 3359568094 Cmt: Must cancel 2 day(s) prior to arrival.								
		07/18/2017		Lodging Owed by Traveler	Lodging	-43.00	CASH	Yes

▲ Default Payment Method for this expense is not being used. Please verify for accuracy.					
07/18/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/19/2017	Lodging	Lodging	215.00	CASH	Yes
▲ Default Payment Method for this expense is not being used. Please verify for accuracy.					
▲ Receipt required for this expense					
Comments: Conf Num: 3359568094 Cmt: Must cancel 2 day(s) prior to arrival.					
07/19/2017	Lodging Owed by Traveler	Lodging	-43.00	CASH	Yes
▲ Default Payment Method for this expense is not being used. Please verify for accuracy.					
07/19/2017	Lodging Tax	Lodging	24.94	CASH	
▲ Default Payment Method for this expense is not being used. Please verify for accuracy.					
07/19/2017	M&IE	M&IE-PerDiem	69.00	CASH	Yes
07/20/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/20/2017	Taxi	Transportation	21.37	CASH	
▲ Verify travel mode is accurate.					
07/25/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT	

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 516.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
▼			07/18/17	69.00	215.00	172.00	51.75	51.75					
▼			07/19/17	69.00	215.00	172.00	69.00	69.00					
▼			07/20/17	69.00	0.00	0.00	51.75	51.75					

^ Accounting Allocations

Accounting Total: 1,060.76

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	1,060.76	100.00 %

^ Totals and Travel Advances

Total Reimbursable: 562.81

Disbursement Type	Amount
Total Expenses	1,060.76
Non-Reimbursable Expenses	497.95
Advance Applied	0.00
Pay To Charge Card	0.00
Pay To Traveler	562.81

Trip Comments

[View Comment History](#)

No Comments Entered

Document Status

Current Status: CLOSED

Awaiting:

for Status:

Document Routing

Name	Status	Level
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Document History (Current)

[Display Full History](#)

Date/Time	Status	Name	Remarks	Reason Desc
08/02/2017 3:07:52 PM	CLOSED	EAI, EAI	EAI Document Status Update WS : 6T1720800048	
08/01/2017 11:03:12 AM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update WS : Travel Voucher Received and Processed Successfully	
08/01/2017 9:29:22 AM	APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 9:29:22 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
08/01/2017 7:40:58 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 7:40:22 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 7:39:48 AM	ADJUSTED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 5:21:40 AM	ADJUSTED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/28/2017 1:31:31 PM	SUBMIT TO TRAVELER	WHITTINGTON, VALERIE R	**AUTO SIGNATURE WAS APPLIED**	
07/28/2017 1:30:24 PM	ADJUSTED	WHITTINGTON, VALERIE R	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:14:22 AM	ADJUSTED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:04:53 AM	REJECTED BY FIN SYS	EAI, EAI	EAI Document Status Update WS : Errors encountered - see Claim History. The following problems were found: (Third Party Payment\Third Party Payment Line 1\Org Code) GS5555E - The specified Org Code, S00PC110,	

cannot be used for new transactions for BFY 2017.
 (Third Party Payment\Third Party Payment Line 2\Org
 Code) GS5555E - The specified Org Code, S00PC110,
 cannot be used for new transactions for BFY 2017.

07/27/2017 9:58:21 AM	PENDING	SYSUTILITY	EAI Voucher Submitted
07/27/2017 9:58:20 AM	APPROVED	BRIZZI, GIANCARLO	**AUTO SIGNATURE WAS APPLIED**
07/25/2017 9:38:38 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**
07/25/2017 9:37:40 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**
07/25/2017 8:43:32 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DAX)

Document Adjustments

Level	Date	Time	Adjustor	Remarks
5	08/01/17	7:39AM	KRIS PALMER **	
4	08/01/17	5:21AM	KRIS PALMER	
3	07/28/17	1:30PM	VALERIE WHITTINGTON	
2	07/27/17	11:14AM	KRIS PALMER	
1	07/25/17	8:43AM	PALMER, KRIS L	



RECEIPTS



CAPITAL HILTON
1001 16th Street | Washington, DC | 20036
T: 202 393 1000 | F: 202 639 5784
W: capital.hilton.com

NAME AND ADDRESS:

DUNN, DAVID K

Room: 837/Q1D
Arrival Date: 7/18/2017 3 52 00 PM
Departure Date: 7/20/2017

Adult/Child: 0/0
Room Rate: 215.00

Rate Plan: G3
HH #: (b) (6)
AL:
Car:

Confirmation Number: *****

7/19/2017

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
7/18/2017	GUEST ROOM	GMEL	7907053	\$215.00		
7/18/2017	ROOM TAX	GMEL	7907053	\$31.18		
7/19/2017	THE STATLER LOUNGE	LINTR	7907664	\$45.15		
7/19/2017	GUEST ROOM	GMEL	7908148	\$215.00		
7/19/2017	ROOM TAX	GMEL	7908148	\$31.18		
	WILL BE SETTLED TO VS*3023					\$537.51
	EFFECTIVE BALANCE OF					\$0.00



ACCOUNT NO.

DATE OF CHARGE

FOUO NO./CHECK NO.
1512261 A

CARD MEMBER NAME

AUTHORIZATION

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT ACRES (S TO TRANSFER TO CARD HOLDER FOR PAYMENT)

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

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

PAYMENT DUE UPON RECEIPT



AMERICAS • EUROPE • MIDDLE EAST • AFRICA • ASIA • AUSTRALASIA

American

BAGGAGE CHARGE RECEIPT

PASSENGER NAME

DUNN/DAVID K

UPT050LB 23KG AND62LI

1

25.00 USD

DCA MEM - AA

Total with Applicable TFC

Credit Card

VI XXXXXXXXXXXXX3023

25.00 USD

Fare 25.00USD

FLIGHT

DATE

4281

JULY 20, 2017

TFC=TAXES, FEES & CHARGES

TFC

TFC

PNR: AEWNYE

Agent: DCA-CM

001

0287888785

2

NOT VALID FOR TRAVEL

Total

25.00USD

PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT

ISSUED BY

AMERICAN AIRLINES

PASSENGER RECEIPT

18 JUL 17 14:32:00

(AMERICAN AIRLINES
REFUNDABLE ONLY WITH
US RELATED FLIGHT CPN
RETAIN THIS RECEIPT
THROUGHOUT JOURNEY

NAME OF PASSENGER (NOT TRANSFERABLE)

DUNN/DAVID K

ISS. AGENT

MEM VDS

FARE BASIS

Y

NOT VALID FOR

TRANSPORTATION

PSGR TICKET 0018637928290

MEMO: AA

UPT050LB 23KG AND62LI

ISSUED IN EXCHANGE FOR

25.00

American Airlines
DUNN/DAVID K
18 JUL
1A 464818 DCA

PNR:
AEWNYE

WASHINGTON REAGAD
1001751040

FARE

USD

25.00

EQUITY FARE PAID

FORM OF PAYMENT

FP CASH

TAXES/CHARGE

TAXES/CHARGE

TAXES/CHARGE

TOTAL

USD

25.00

PCS OK WT UNCL WT

STOCK CONTROL NUMBER TX

COUPON AIRLINE

ISS NO

ALLOY

PCS OK WT UNCL WT

FORM CONTROL NO

OK

0 001 0287704616 0

Do not expose to excessive heat or direct sunlight.

STAPLE
HERE

PRINTED IN U.S.A. BY AMERICAN AIRLINES AND LABEL CORP., DALLAS, TX

* COPY *
HITCH
CAB
#PRESIDENTIAL
CAB 6867
(202) 810-4482
WASHINGTON, DC
07/20/17 09:52
DIST... 5.30
FARE... 17.56
TIP... 3.56
EXTRAS... 0.25
TOTAL... \$ 21.37
VISA XXXX6935
MID 445100500997
AUTH 078138
SIGN HERE:



AUTHORIZATION

Document Summary for TA0002DE6 (View Only)

Traveler

Traveler ID: E00039621

Traveler Name: Kris Kobach

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DE6 Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PEI Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
MISSION (OPERATIONAL)		WASHINGTON, DC	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM-CARR	Southwest	7/18/2017 2:25:00 AM EST	478.40		1003289148	07/18/2017 09:25	406.779999 lbs CO2	Kris Kobach
COMM-CARR	Southwest	7/18/2017 2:25:00 AM EST	0.00		1003289148	07/19/2017 16:40	406.779999 lbs CO2	Kris Kobach

^ Expenses

Total Per Diem Expenses: 275.50

Total Non-Per Diem Expenses: 527.45

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/17/2017		Estimated TDY Voucher Fee	Transxn Fees	14.75	EFT	
		07/17/2017		Estimated Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	478.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes

Receipts

Manage receipts or other document attachments:

View Receipts

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
▼			07/18/17	69.00	172.00	172.00	51.75	51.75					
▼			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Additional Authorizations

Special Authorizations Exist

Other Authorization

Remarks

No hotel required, Non-conventional Lodging Used

Contract fare used or No contract fare exists for city-pair market

^ Accounting Allocations

Accounting Total: 802.95

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	802.95	100.00 %

^ Totals

Total Reimbursable: 275.50

Disbursement Type	Amount
Estimated Cost	802.95
Advance Requested	0.00

Trip Comments

View Comment History

No Comments Entered

Document Status

Current Status: AUTH APPROVED

Awaiting:

for Status:

Document Routing

Name	Status	Level
------	--------	-------

Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/17/2017 9:42:44 AM	AUTH APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
07/17/2017 9:37:17 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/17/2017 9:30:37 AM	ADJUSTED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	

07/17/2017 9:29:13 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**
07/17/2017 9:11:24 AM	RESERVATIONS UPDATED	Kris Kobach	Auto-updated from reservation - Reservations updates for tripnum 1
07/17/2017 9:11:00 AM	CREATED	Kris Kobach	Auto-created from reservation - NEW DOCUMENT (TA0002DE6)

Document Adjustments

Level	Date	Time	Adjustor	Remarks
2	07/17/17	9:30AM	KRIS PALMER **	
1	07/17/17	9:11AM	Kris Kobach	Auto-created from reservation -



VOUCHER

AMOUNT PAID TO TRAVELER

\$375.18

Document Summary for VCH78723 (View Only)

Trip No. 1 

Traveler

Traveler ID: E00039621

Traveler Name: Kris Kobach

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DE6

Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PECO Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
MISSION (OPERATIONAL)		WASHINGTON, DC	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History




PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Marriott	7/18/2017 2:25:00 AM EST	172.00	JW Marriott Hotel Washington DC Washington, DC,DC	1003289148	07/18/2017 00:00	N/A	Kris Kobach
COMM-CARR	Southwest	7/18/2017 2:25:00 AM EST	478.40		1003289148	07/18/2017 09:25	368.940002 lbs CO2	Kris Kobach
COMM-CARR	Southwest	7/18/2017 2:25:00 AM EST	0.00		1003289148	07/19/2017 16:40	368.940002 lbs CO2	Kris Kobach

^ Expenses

Total Per Diem Expenses: 275.50

Total Non-Per Diem Expenses: 627.13

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/17/2017		Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017		Airline Flight	Com. Carrier	478.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
 Default Payment Method for this expense is not being used. Please verify for accuracy.								
 Receipt required for this expense								
Comments: Conf Num: 97264486 Cmt: Must cancel 1 day(s) prior to arrival.								

07/18/2017	Lodging Tax	Lodging	24.94	CASH	
⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.					
07/18/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/18/2017	Taxi	Transportation	6.74	CASH	
⚠ Verify travel mode is accurate.					
07/18/2017	Taxi	Transportation	18.00	CASH	
⚠ Verify travel mode is accurate.					
Comments: From airport to hotel					
07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
07/19/2017	Parking	Transportation	31.00	CASH	
⚠ Verify travel mode is accurate.					
Comments: Airport Parking					
07/19/2017	Taxi	Transportation	19.00	CASH	
⚠ Verify travel mode is accurate.					
07/24/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT	

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
✓			07/18/17	69.00	172.00	172.00	51.75	51.75					
✓			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Accounting Allocations

Accounting Total: 902.63

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	902.63	100.00 %

^ Totals and Travel Advances

Total Reimbursable: 375.18

Disbursement Type	Amount
Total Expenses	902.63

Non-Reimbursable Expenses	527.45
Advance Applied	0.00
Pay To Charge Card	0.00
Pay To Traveler	375.18

Trip Comments

No Comments Entered

Document Status

Current Status: CLOSED Awaiting: for Status:

Document Routing

Name	Status	Level
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Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/26/2017 3:05:57 PM	CLOSED	EAI, EAI	EAI Document Status Update WS : 6T1720500058	
07/24/2017 12:03:16 PM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update WS : Travel Voucher Received and Processed Successfully	
07/24/2017 10:08:38 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
07/24/2017 10:08:37 AM	APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
07/24/2017 10:00:41 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/24/2017 9:54:28 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/24/2017 9:26:24 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DE6)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	



RECEIPTS

GUEST FOLIO

JW MARRIOTT
WASHINGTON DC



JW Marriott® Washington, DC • 1331 Pennsylvania Avenue NW, Washington, District of Columbia, 20004 • 202.393.2000 • jwmarriott.com

1087	KOBACH/K	172.00	07/19/17	12:00	5042
Room	Name	Rate	Depart	Time	ACCT#
GK			07/18/17	13:19	
Type			Arrive	Time	
93					
Room					MRW#: XXXXX7963
Clerk	Address	Payment			
DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE	

07/18 ROOM	1087, 1	172.00	
07/18 ROOMTX	1087, 1	24.94	
07/19 VS CARD			\$196.94

CURRENT BALANCE .00

----- EXP. REPORT SUMMARY -----
07/18 ROOM&TAX 196.94

GET ALL YOUR HOTEL BILLS BY EMAIL BY UPDATING YOUR
REWARDS PREFERENCES. OR, ASK THE FRONT DESK TO EMAIL YOUR
BILL FOR THIS STAY. SEE "INTERNET PRIVACY STATEMENT" ON
MARRIOTT.COM

Complaints
(855) 484-4966
TTY 711
www.dfhw.dc.gov

[Handwritten signature]

ESSENCE 6327
202-554-7900
TAG # 01286H
FACE ID:63716
07/19/17 03:25P
07/19/17 03:41P
TRIP # 3182
DIST 5.33 mi
Rate 1 \$ 15.67
EXTRAS \$ 0.25
TOTAL \$ 15.92
Complaints Call:
(202)645-6018
WWW.DCVIPCAB.COM
(202)269-9000

TRANSCO INC.
202 398 0500

CASH RECEIPT
DRIVER: 00073903
CAB #: K228
DATE : 07/18/17
TIME:13:49-13:55
RATE #: 1
STANDARD RATE
MILES R1: 1.80
TRIP#: 4442
FARE : \$6.49
SURCH.: \$0.25
TOTAL : \$6.74
#PASSENGERS: 01

DCTC COMPLAINTS
LINES TTY 711
PH: 855-484-4966
DCTAXI.DC.GOV

SOUTHLAND PRINTING - SHREVEPORT, LA. RA1682
0627 07/18 08:30 07/19 18:23 \$31.00 6203



TAXI CAB RECEIPT

Time: _____
Date: 7/18/17

Origin of trip: DCA

Destination: JW Marriott

Fare: 18.00 Sign: **(b) (6)**



AUTHORIZATION

Document Summary for TA0002DC3-1 (View Only)

Traveler

Traveler ID: E00045687

Traveler Name: Mark Rhodes

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DC3 Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PECI Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
		ARLINGTON, VA	07/18/17	07/21/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Holiday Inn	N/A	468.00	Holiday Inn Rosslyn at Key Bridge Arlington, VA	1003286810	07/18/2017 00:00	N/A	Mark D Rhodes

^ Expenses

Total Per Diem Expenses: 657.75

Total Non-Per Diem Expenses: 30.82

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Estimated TDY Voucher Fee	Transxn Fees	14.75	EFT	
		07/17/2017		Estimated Travel Fee	Travel Transxn Fees	16.07	Invoice	
Comments: LB ATRS Domestic-Intl w-o Air-Rail _Lodging and-or Car Only_								
		07/18/2017		Lodging	Lodging	156.00	CASH	Yes
Comments: Conf Num: 61205301 Cmt: Must cancel by 6 PM								
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		Lodging	Lodging	156.00	CASH	Yes
Comments: Conf Num: 61205301 Cmt: Must cancel by 6 PM								
		07/19/2017		M&IE	M&IE-PerDiem	69.00	CASH	Yes
		07/20/2017		Lodging	Lodging	156.00	CASH	Yes
Comments: Conf Num: 61205301 Cmt: Must cancel by 6 PM								
		07/20/2017		M&IE	M&IE-PerDiem	69.00	CASH	Yes
		07/21/2017		M&IE	M&IE-PerDiem	0.00	CASH	Yes

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 657.75

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
▼			07/18/17	69.00	156.00	156.00	51.75	51.75					
▼			07/19/17	69.00	156.00	156.00	69.00	69.00					
▼			07/20/17	69.00	156.00	156.00	69.00	69.00					
▼			07/21/17	69.00	0.00	0.00	0.00	0.00	Yes				



Actuals have been claimed. Please verify they are correct.

^ Additional Authorizations

Special Authorizations Exist

Other Authorization

Remarks

ACTUAL EXPENSE

^ Accounting Allocations

Accounting Total: 688.57

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	688.57	100.00 %

^ Totals

Previous Reimbursable Amount: 709.50

Total Reimbursable Amount: 657.75

Amended Reimbursable Amount: -51.75

Disbursement Type	TA0002DC3 Amount	TA0002DC3-1 Amount	Amended Net
Estimated Cost	740.32	688.57	-51.75
Advance Requested	0.00	0.00	0.00

Trip Comments

[View Comment History](#)

No Comments Entered

Document Status

Current Status: AUTH APPROVED

Awaiting:

for Status:

Document Routing

Name	Status	Level
------	--------	-------

Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/17/2017 9:03:28 AM	AUTH APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
07/17/2017 8:01:13 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/17/2017 7:58:21 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/17/2017 7:42:41 AM	CREATED	PALMER, KRIS L	AMENDMENT (TA0002DC3)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
2	07/17/17	7:42AM	KRIS PALMER **	
1	07/17/17	7:42AM	PALMER, KRIS L	



VOUCHER

AMOUNT PAID TO TRAVELER

\$876.93

Document Summary for VCH79389 (View Only)

Trip No. 1

Traveler

Traveler ID: E00045687

Traveler Name: Mark Rhodes

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DC3 Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PEGI Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
		ARLINGTON, VA	07/18/17	07/21/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History

PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Holiday Inn	N/A	468.00	Holiday Inn Rosslyn at Key Bridge Arlington, VA	1003286810	07/18/2017 00:00	N/A	Mark D Rhodes

^ Expenses

Total Per Diem Expenses: 501.75

Total Non-Per Diem Expenses: 406.00

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/17/2017		Travel Fee	Travel Transxn Fees	16.07	Invoice	
Comments: LB ATRS Domestic-Intl w-o Air-Rail _Lodging and-or Car Only_								
		07/18/2017		Lodging	Lodging	156.00	CASH	Yes
▲ Default Payment Method for this expense is not being used. Please verify for accuracy.								
▲ Receipt required for this expense								
Comments: Conf Num: 61205301 Cmt: Must cancel by 6 PM								
		07/18/2017		Lodging Tax	Lodging	20.67	CASH	
▲ Default Payment Method for this expense is not being used. Please verify for accuracy.								
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		Lodging	Lodging	156.00	CASH	Yes
▲ Default Payment Method for this expense is not being used. Please verify for accuracy.								
▲ Receipt required for this expense								

Comments: Conf Num: 61205301 Cmt: Must cancel by 6 PM

07/19/2017	Lodging Tax	Lodging	20.67	CASH	
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⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.

07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
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07/19/2017	M&IE Due Traveler	M&IE-PerDiem	17.25	CASH	Yes
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07/19/2017	Mileage - Priv Auto (Advantageous)	Mileage	333.84	CASH	
------------	------------------------------------	---------	--------	------	--

⚠ Verify travel mode is accurate.

Comments: Roundtrip mileage from West Virginia to Arlington, Va

07/20/2017	Lodging	Lodging	0.00	CASH	Yes
------------	---------	---------	------	------	-----

⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.

Comments: Conf Num: 61205301 Cmt: Must cancel by 6 PM

07/20/2017	M&IE	M&IE-PerDiem	0.00	CASH	Yes
------------	------	--------------	------	------	-----

07/20/2017	M&IE Due Traveler	M&IE-PerDiem	69.00	CASH	Yes
------------	-------------------	--------------	-------	------	-----

07/21/2017	M&IE	M&IE-PerDiem	0.00	CASH	Yes
------------	------	--------------	------	------	-----

08/01/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT	
------------	-----------------	--------------	-------	-----	--

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 501.75

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
✓			07/18/17	69.00	156.00	156.00	51.75	51.75					
✓			07/19/17	69.00	156.00	156.00	51.75	69.00					
✓			07/20/17	69.00	0.00	0.00	0.00	69.00					
✓			07/21/17	69.00	0.00	0.00	0.00	0.00	Yes				

⚠ Actuals have been claimed. Please verify they are correct.

^ Accounting Allocations

Accounting Total: 907.75

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	2017-N/A-262X-00-EX10-S00PC120-D20-PCOEI-N/A-N/A-N/A-N/A-N/A-N/A-N/A	907.75	100.00 %

^ Totals and Travel Advances

Total Reimbursable: 876.93

Disbursement Type	Amount
Total Expenses	907.75
Non-Reimbursable Expenses	30.82
Advance Applied	0.00
Pay To Charge Card	0.00
Pay To Traveler	876.93

Trip Comments

No Comments Entered

Document Status

Current Status: CLOSED

Awaiting:

for Status:

Document Routing

Name	Status	Level
------	--------	-------

Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
08/07/2017 3:03:32 PM	CLOSED	EAI, EAI	EAI Document Status Update WS : 6T1721400019	
08/02/2017 9:03:32 AM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update WS : Travel Voucher Received and Processed Successfully	
08/02/2017 7:21:47 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
08/02/2017 7:21:46 AM	APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
08/02/2017 3:59:51 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/02/2017 3:58:00 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
08/01/2017 8:32:50 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DC3)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	



RECEIPTS



Holiday Inn

07-20-17

Mark Rhodes	Folio No.	:		Room No.	:	0606
	A/R Number	:		Arrival	:	07-18-17
	Group Code	:		Departure	:	07-20-17
	Company	:	Fedrooms	Conf. No.	:	61205301
	Membership No.	:		Rate Code	:	IL5FP
	Invoice No.	:		Page No.	:	1 of 1

Date	Description	Charges	Credits
07-18-17	*Room	156.00	
07-18-17	Occupancy Tax	20.67	
07-19-17	*Room	156.00	
07-19-17	Occupancy Tax	20.67	
Total		353.34	0.00
Balance		353.34	

Guest Signature

(b) (6)

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 associate 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.

Holiday Inn Rosslyn at Key Bridge
1900 North Fort Myer Drive
Arlington, VA 22209
Telephone: (703) 807-2000 Fax: (703) 522-8864



(b) (6) Parkersburg, WV 26101 Drive 312 miles, 4 h 54 min to 1900 N Fort Myer Dr, Arlington, VA 22209














(b) (6) (b) (6)
Parkersburg, WV 26101

Get on I-79 N in Clarksburg from US-50 E/Northwestern Turnpike





1 h 18 min (77.1 mi)

- ↑ 1. Head southwest on (b) (6) toward Sycamore St
Continue to follow 11th Ave 0.2 mi
- ➡ 2. Turn right onto Pike St 0.4 mi
- ↩ 3. Turn left onto Camden Ave 0.4 mi
- ➡ 4. Turn right onto Division St 0.2 mi
- ⤴ 5. Turn right to merge onto US-50 E/Northwestern Turnpike 75.3 mi
- ⤴ 6. Use the right lane to merge onto I-79 N via the ramp to Fairmont 0.6 mi

Continue on I-79 N. Take I-68 E, I-70 E and I-270 S to Cabin John Pkwy in Potomac. Take exit 40 from I-495 S

-  7. Merge onto I-79 N 3 h 21 min (227 mi)
-  8. Use the right 2 lanes to take exit 148 for I-68 E toward Cumberland 29.0 mi
-  9. Continue onto I-68 E 0.3 mi
 Entering Maryland
-  10. Use the right 2 lanes to take exit 82A-82B to merge onto I-70 E/US-40 E toward Hagerstown 112 mi
 Continue to follow I-70 E
-  11. Use the right 2 lanes to take exit 53 to merge onto I-270 S toward Washington 52.0 mi
-  12. Take the exit toward North Virginia/Washington/Interstate 495 S 30.1 mi
-  13. Continue onto I-270 Spur S 0.6 mi
-  14. Merge onto I-495 S 1.5 mi
-  15. Take exit 40 for Cabin John Pkwy toward Glen Echo 1.3 mi
- 0.3 mi

Follow Cabin John Pkwy, Clara Barton Pkwy and Canal Rd NW to N Fort Myer Dr in Arlington

-  16. Keep left to continue on Cabin John Pkwy, follow signs for Glen Echo 16 min (8.6 mi)
-  17. Merge onto Clara Barton Pkwy 1.5 mi
 May be closed at certain times or days
 Entering District of Columbia
-  18. Continue onto Canal Rd NW 3.3 mi
 Parts of this road may be closed at certain times or days
-  19. Continue onto M St NW 3.1 mi
-  20. Use the right 2 lanes to turn right onto Francis Scott Key Bridge/Key Bridge 341 ft
 Entering Virginia
-  21. Continue onto N Fort Myer Dr 0.3 mi
- 0.1 mi

- ↑ 22. Continue straight to stay on N Fort Myer Dr

 Destination will be on the right

0.1 mi

1900 N Fort Myer Dr

Arlington, VA 22209

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.



AUTHORIZATION

Document Summary for TA0002DAO (View Only)

Traveler Traveler ID: E00036052 Traveler Name: Matthew Dunlap Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar Type: INVITATIONAL

TA Num: TA0002DAO Purpose: MISSION (OPERATIONAL) Location Type: CONUS
Document Details: PECIAL Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
MISSION (OPERATIONAL)		WASHINGTON, DC	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM-CARR	American Airlines	7/16/2017 10:23:00 AM EST	482.40		1003284881	07/18/2017 12:23	253.270004 lbs CO2	Matthew G Dunlap
COMM-CARR	American Airlines	7/16/2017 10:23:00 AM EST	0.00		1003284881	07/19/2017 22:05	253.270004 lbs CO2	Matthew G Dunlap

^ Expenses

Total Per Diem Expenses: 275.50 Total Non-Per Diem Expenses: 531.45

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Estimated TDY Voucher Fee	Transxn Fees	14.75	EFT	
		07/14/2017		Estimated Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017	✈	Airline Flight	Com. Carrier	482.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/19/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes

Receipts

Manage receipts or other document attachments: View Receipts

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
✓			07/18/17	69.00	172.00	172.00	51.75	51.75					
✓			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Additional Authorizations

Special Authorizations Exist

Other Authorization

Remarks

No hotel required, Non-conventional Lodging Used

Contract fare used or No contract fare exists for city-pair market

^ Accounting Allocations

Accounting Total: 806.95

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational Travel_FY17	(b) (6)	806.95	100.00 %

^ Totals

Total Reimbursable: 275.50

Disbursement Type	Amount
Estimated Cost	806.95
Advance Requested	0.00

Trip Comments

No Comments Entered

Document Status

Current Status: AUTH APPROVED

Awaiting:

for Status:

Document Routing

Name	Status	Level
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Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
07/14/2017 12:03:08 PM	AUTH APPROVED	CLINTON, JONATHAN PATRICK	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:50:35 AM	REVIEWED	WHITTINGTON, VALERIE R	**AUTO SIGNATURE WAS APPLIED**	
07/14/2017 11:49:47 AM	SUBMIT TO APPROVER	WHITTINGTON, VALERIE R	**AUTO SIGNATURE WAS APPLIED**	

07/14/2017 11:11:01 AM	RESERVATIONS UPDATED	Matthew Dunlap	Auto-updated from reservation - Reservations updates for tripnum 1
07/14/2017 10:50:05 AM	RESERVATIONS UPDATED	Matthew Dunlap	Auto-updated from reservation - Reservations updates for tripnum 1
07/14/2017 10:49:41 AM	CREATED	Matthew Dunlap	Auto-created from reservation - NEW DOCUMENT (TA0002DAO)

Document Adjustments

Level	Date	Time	Adjustor	Remarks
1			**	




VOUCHER

AMOUNT PAID TO TRAVELER

\$475.80

Document Summary for VCH78838 (View Only)

Trip No. 1 

Traveler

Traveler ID: E00036052

Traveler Name: Matthew Dunlap

Organization: GSA-M-2

^ Document Information

Currency: U.S. Dollar

Type: INVITATIONAL

TA Num: TA0002DAO Purpose: MISSION (OPERATIONAL)

Location Type: CONUS

Document Details: PECCI Committee Meeting

Location Purpose	Alert	Location	From	To	Per Diem Rates
MISSION (OPERATIONAL)		WASHINGTON, DC	07/18/17	07/19/17	172.00 / 69.00 (07/01/17-08/31/17)

^ Reservations

View Reservation History





PNR Status: BOOKED

Reservation Type	Vendor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM-CARR	American Airlines	7/16/2017 10:23:00 AM EST	482.40		1003284881	07/18/2017 12:23	229.710007 lbs CO2	Matthew G Dunlap
COMM-CARR	American Airlines	7/16/2017 10:23:00 AM EST	0.00		1003284881	07/19/2017 22:05	229.710007 lbs CO2	Matthew G Dunlap

^ Expenses

Total Per Diem Expenses: 275.50

Total Non-Per Diem Expenses: 731.75

Details	Alert	Date	Source	Expense Description	Expense Category	Cost	Payment Method	PerDiem
		07/14/2017		Travel Fee	Travel Transxn Fees	34.30	Invoice	
Comments: LB ATRS Domestic w-Air-Rail								
		07/18/2017		Airline Flight	Com. Carrier	482.40	CBA	
		07/18/2017		Lodging	Lodging	172.00	CASH	Yes
 Default Payment Method for this expense is not being used. Please verify for accuracy.								
 Receipt required for this expense								
		07/18/2017		M&IE	M&IE-PerDiem	51.75	CASH	Yes
		07/18/2017		Parking	Transportation	20.00	CASH	
 Verify travel mode is accurate.								
Comments: Airport Parking								
		07/18/2017		Taxi	Transportation	16.33	CASH	

⚠ Verify travel mode is accurate.

07/19/2017	Baggage Fees - 1st & 2nd Checked Bags	Baggage Fees	50.00	CASH
------------	---------------------------------------	--------------	-------	------

⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.

07/19/2017	Lodging Tax	Lodging	50.75	CASH
------------	-------------	---------	-------	------

⚠ Default Payment Method for this expense is not being used. Please verify for accuracy.

07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Yes
------------	------	--------------	-------	------	-----

07/19/2017	Taxi	Transportation	63.22	CASH
------------	------	----------------	-------	------

⚠ Verify travel mode is accurate.

⚠ Receipt required for this expense

07/25/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT
------------	-----------------	--------------	-------	-----

Receipts

Manage receipts or other document attachments: [View Receipts](#)

^ Per Diem Allowances

Total Per Diem Allowance: 275.50

Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	B	L	D	Conf %
✓			07/18/17	69.00	172.00	172.00	51.75	51.75					
✓			07/19/17	69.00	0.00	0.00	51.75	51.75					

^ Accounting Allocations

Accounting Total: 1,007.25

Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	1,007.25	100.00 %

^ Totals and Travel Advances

Total Reimbursable: 475.80

Disbursement Type	Amount
Total Expenses	1,007.25
Non-Reimbursable Expenses	531.45
Advance Applied	0.00
Pay To Charge Card	0.00
Pay To Traveler	475.80

Trip Comments

View Comment History

No Comments Entered

Document Status

Current Status: CLOSED

Awaiting:

for Status:

Document Routing

Name	Status	Level
------	--------	-------

Document History (Current)

Display Full History

Date/Time	Status	Name	Remarks	Reason Desc
08/02/2017 3:07:52 PM	CLOSED	EAI, EAI	EAI Document Status Update WS : 6T1720800049	
07/31/2017 12:02:52 PM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update WS : Travel Voucher Received and Processed Successfully	
07/31/2017 10:15:57 AM	APPROVED	BRIZZI, GIANCARLO	**AUTO SIGNATURE WAS APPLIED**	
07/31/2017 10:15:57 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
07/28/2017 2:28:29 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:21:48 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED****AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:20:47 AM	ADJUSTED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/27/2017 11:04:53 AM	REJECTED BY FIN SYS	EAI, EAI	EAI Document Status Update WS : Errors encountered - see Claim History. The following problems were found: (Third Party Payment\Third Party Payment Line 1\Org Code) GS5555E - The specified Org Code, S00PC110, cannot be used for new transactions for BFY 2017. (Third Party Payment\Third Party Payment Line 2\Org Code) GS5555E - The specified Org Code, S00PC110, cannot be used for new transactions for BFY 2017.	
07/27/2017 9:58:23 AM	PENDING	SYSUTILITY	EAI Voucher Submitted	
07/27/2017 9:58:21 AM	APPROVED	BRIZZI, GIANCARLO	**AUTO SIGNATURE WAS APPLIED**	
07/25/2017 8:42:37 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/25/2017 8:37:48 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**	
07/25/2017 7:17:14 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DAO)	

Document Adjustments

Level	Date	Time	Adjustor	Remarks
2	07/27/17	11:20AM	KRIS PALMER **	
1	07/25/17	7:17AM	PALMER, KRIS L	



RECEIPTS

Canelli, Dorothy

From: Dunlap, Matthew
Sent: Monday, July 17, 2017 5:51 AM
To: Canelli, Dorothy
Subject: Fwd: Custom Confirmation

Get [Outlook for iOS](#)

From: Hotel Tabard Inn <hotel@tabardinn.com>
Sent: Sunday, July 16, 2017 10:51:17 PM
To: Dunlap, Matthew
Subject: Re: Custom Confirmation

Matthew Dunlap (Main Folio)

Stay Info	Nights	Folio Def
Confirmation #: 69220C130617 Status RESV[...]	Folio Name Main Folio	Projected Balance: <u>400</u>
Arrive on Tue, 07-18-2017 to Wed, 07-19-2017 for 1 night(s).	Rate 350.00	

Many thanks,

Tabard Inn
1739 N St NW Washington, DC 20036
Tel 202-785-1277 Fax 202-785-6173
www.tabardinn.com

On Sun, Jul 16, 2017 at 2:05 PM, <hotel@tabardinn.com> wrote:

Hotel Tabard Inn
1739 N Street NW
Phone No. 202.785.1277 Fax No. 202.785.6173
hotel@tabardinn.com

We are pleased to confirm your reservation at the Tabard Inn as follows:

Reservation Confirmation 69220C130617

Please note our 48 hour cancellation policy.

Matthew Dunlap
(b) (6)
Old Town, ME 04468
US

Arrival Date: 07-16-2017
Departure Date: 07-17-2017

No. of Adults: 1

No. of Children: 0

<u>Room Type</u>	<u>Room Nights</u>	<u>Rate</u>
Penthouse	1	350.00
TOTAL:	1	

Taxes Balance: 50.75

Proj Balance: 400.75

Do not expose to excessive heat or direct sunlight.

STAPLE
HERE

PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT

ISSUED BY
AMERICAN AIRLINES

NAME OF PASSENGER (NOT TRANSFERABLE)
DUNLAP/MATTHEW G

TO
NOT VALID FOR**

TO
TRANSPORTATION*

FROM
BGR-XMG

FLIGHT
18JUL17

CLASS
20101184

TIME
0018637928289

FARE CODE
25.00

FARE
USD 25.00

TAXES
NA

TOTAL
USD 25.00

STOCK CONTROL NUMBER
00123745473581

COPY
001 0287709194 0

5 AMERICAN AIRLINES
REFUNDABLE ONLY WITH
RELATED FLIGHT CPN
RETAIN THIS RECEIPT
THROUGHOUT YOUR
JOURNEY

FOR CONDITIONS OF
CONTRACT - SEE
PASSENGER TICKET AND
BAGGAGE CHECK

NOT VALID FOR TRAVEL

American

BAGGAGE CHARGE RECEIPT

PASSENGER NAME
DUNLAP/MATTHEW G

UPT050LB 23KG AND 621 I 1 25.00 USD

DCA BGR - AA

Total with Applicable Tax 25.00 USD

Credit Card MC XXXXXXXXXX6998

Fare 25.00 USD

TFC

TFC

TFC

Total 25.00 USD

FLIGHT
4435

DATE
JULY 19, 2017

001 0287842370 3

TFC-TAXES, FEES & CHARGES

NOT VALID FOR TRAVEL

HITCH
CAB #MERITT 167
WASHINGTON, DC
07/18/17 19:58

DIST.... 6.40
BASE...\$ 18.10
EXTRAS.\$ 1.25

TOTAL..\$ 23.22

MASTER CARD
XXXX6998
MID 445100500997

AUTH
CH_1AHS3HGQ3LAAM

HFPAL34J77

SIGN HERE:

VIF CRE OF DC
202-263-3000
Taxi CAB F456
FRANCIS B ODEB
Face ID: 53247
Tax #: 00836H
PASSENGER COPY
RECEIPT

7-18-2017

Trip ID: 2672
Start: 08:50PM
124 Massachusetts
End: 09:06PM
1734-1738 H Stre
Dist: 2.20mi
Fare: \$11.08
Extras: \$2.25
Tip: \$3.00

Total: \$16.33

Signature

CC: XXXX6998
Exp: 12/02
Merchant: 400662
Auth: 045562

THANK YOU

PASSENGER COPY

DFWU complaints
(855) 484-4966
TAXI



BANGOR INTERNATIONAL AIRPORT

RECEIPT

SOUTHLAND PARKING - BANGOR, ME

003358

\$20.00
Airport Parking



TAXICAB RECEIPT

Time: _____
Date: 7/18/17 7/19/17

Origin of trip: HOTEL

Destination: AIRPORT

Fare: 40 - Sign: _____

0116

Server: FATIMA P (#101) Rec: 71
07/19/17 19:18, Swiped T: 44 Term: 5

TABARD INN
1739 N STREET NW
WASHINGTON DC 20036
(202)331-8528
MERCHANT #:

CARD TYPE ACCOUNT NUMBER
MASTER CARD XXXXXXXXXXXX6998
Name: MATTHEW DUNLAP
GO TRANSACTION APPROVED
AUTHORIZATION #: 034342
Reference: 0719010000116
TRANS TYPE: Credit Card SALE

CHECK: 134.09

TIP: _____

TOTAL: 159.09

X _____

PHONE: ()
Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
SIGNED COPY --> MERCHANT

0004

Server: WILFREDO A (#123) Rec: 1
07/19/17 07:17, Swiped T: 10 Term: 5

TABARD INN
1739 N STREET NW
WASHINGTON DC 20036
(202)331-8528
MERCHANT #:

CARD TYPE ACCOUNT NUMBER
MASTER CARD XXXXXXXXXXXX6998
Name: MATTHEW DUNLAP
GO TRANSACTION APPROVED
AUTHORIZATION #: 008112
Reference: 0719010000004
TRANS TYPE: Credit Card SALE

CHECK: 17.60

TIP: _____

TOTAL: 25.60

X _____

PHONE: ()
Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
SIGNED COPY --> MERCHANT



Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Travel Instructions - Members Can Begin Booking

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Fri, Jul 14, 2017 at 10:30 AM

To: (b) (6)

Cc: Kris Palmer - M <kris.palmer@gsa.gov>, "Valerie Whittington (M)" <valerie.whittington@gsa.gov>, "elizabeth.cain@gsa.gov" <elizabeth.cain@gsa.gov>, Christine Courter - H1CT <christine.courter@gsa.gov>, (b) (6)

(b) (6)

All traveling members' accounts have been established (with the exceptions of Ms. McCormick and Mr. Adams, who we understand are DC based).

The members or their support staff can now call our travel agent directly to book their travel.

ADTRAV (GSA travel agent): [877-472-6716](tel:877-472-6716), available 24/7

Key Information when calling the travel agent:

- ADTRAV will recognize members by first and last name and agency—which is the General Services Administration (GSA) for the purposes of this travel.
- Have a personal credit card available--hotel will be booked using a personal card. Members can choose their hotel and will be reimbursed at the maximum per diem rate for DC (\$172/night) (keep hotel receipts)
- The committee has budgeted for travel for up to 3 days per member between 7/18 and 7/20. Arrangements should be made within those parameters.
- Members (or their staff) should tell the agent the traveler's date of birth if making airline reservations. This is a requirement in order for tickets to be issued.

Travelers will need to follow federal regulations governing travel. Key points:

- Hotel: Max lodging per diem rate reimbursed for Washington, DC in July: \$172 (keep hotel receipts--reimbursed for max of \$172. Lodging taxes will be reimbursed separately as well.)
- Airfare: Must use coach class and the contract carrier fare (booked by travel agent)
 - Exceptions to contract fare must be documented/justified--e.g., Timing of contract fare flights do not allow traveler to meet mission or non-contract fare is less expensive
- Meals & Incidental Expenses (MI&E): reimbursed \$69 per day for DC; \$51.75 on first & last day of travel (no receipts needed, reimbursed full amount regardless of expenses--above or below)
- Rental cars: Receipt required for all expenses
- Taxis/metro: reimbursed for official business related to the committee--e.g., to/from airport, to/from committee meetings (keep receipts)
- Other (i.e. airline baggage fees): Reimbursed (keep receipts)

Airfare will be booked through the travel agent and paid directly by GSA. All other approved travel expenses (hotel; MI&E; taxis) will be paid for using the member's personal card and will subsequently be reimbursed. Details on reimbursement process will be provided upon completion of the travel.

If members or their staff have questions regarding the above that the travel agent can't answer, please don't hesitate to have the members' staff reach out to Valerie Whittington or Kris Palmer.

valerie.whittington@gsa.gov - 202-501-3395

kris.palmer@gsa.gov - 202-501-0525

Best,

Jon



Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Reimbursement Process for Members' Travel

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Wed, Jul 19, 2017 at 11:28 AM

To: (b) (6)

Cc: Christine Courter - H1CT <christine.courter@gsa.gov>, "Valerie Whittington (M)" <valerie.whittington@gsa.gov>, Kris Palmer - M <kris.palmer@gsa.gov>

(b) (6)

As the members complete their travel, these are the brief instructions to ensure they are reimbursed for authorized expenses.

Each traveler (or their support staff) should scan all of their receipts into a single document file and email to kris.palmer@gsa.gov. Once she receives, she'll process, and the funds will be reimbursed to the traveler's account on file.

If/when in doubt, members should err on the side of providing the receipt. Most importantly, receipts must be provided for:

- Hotel bill
- Airport parking
- Taxis/metro for travel to/from airport and committee meetings
- Airline baggage fees

If you have any questions, feel free to contact me.

Best,

Jon

--

Jon Clinton
Chief of Staff
Office of Government-wide Policy
U.S. General Services Administration
[202-549-2430](tel:202-549-2430)



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PCEI 1st meeting - July 19th

1 message

Christine Courter - H1CT <christine.courter@gsa.gov>

Wed, Jul 12, 2017 at 7:20 PM

To: Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Co: Kris Palmer - M <kris.palmer@gsa.gov>, Valerie Whittington <valerie.whittington@gsa.gov>, Tom Mueller - H1D <Thomas.mueller@gsa.gov>, Duane Smith <duane.smith@gsa.gov>, Lorelei Kowalski - M1AK <lorelei.kowalski@gsa.gov>, Lennard Loewenritt <lenny.loewenritt@gsa.gov>, "giancarlo brizzi@gsa.gov" <giancarlo.brizzi@gsa.gov>, Stefan Grabas - BAF <stefan.grabas@gsa.gov>, "elizabeth.cain@gsa.gov" <elizabeth.cain@gsa.gov>

Jonathan,

Tom Mueller and I had a conference call with Andrew Kossack this morning. Andrew has been sending me the **completed EFT forms** today and so far I have received 5. Once I receive them, I forward them to finance for issuance of the vendor ID. You can start sending me:

- **Concur Access Request forms** for each individual- once I get the vendor ID from finance I will setup their profile in ConcurGov.
- Name of the Host arranger who will be submitting vouchers on behalf of the members. The host must be in the same org code as the approver will be in.
- The line of accounting (I need the full string) that will be used for the travel expenses (once it is known- we must have this before travel can be booked).

Andrew also sent me an updated list of members (see below).

I think the topic of payment method may still have to be revisited. Arrangers can reserve airfare/rail with **Adtrav** for the members of the commission and it will be billed to the GSA Centrally Billed Account (CBA). If we have the members use their personal cards for hotel and rental car, they will have to call to make reservations themselves. Andrew may have been under the impression that GSA would be making all the travel reservations for the members but that would require a CBA. If you do want to continue with the members using a personal credit card for hotel and rental car, you may want to let Andrew know that is the plan.

	<u>Commission Member</u>	<u>Title</u>	<u>Phone</u>	<u>Secondary Phone</u>	<u>Geographic Location</u>	<u>Email</u>
1	Michael R. Pence	Vice President	N/A		D.C.	N/A
2	Kris Kobach	SoS - KS	(b)(6)		Kansas	(b)(6)
3	Connie Lawson	SoS - IN			Indiana	
4	Bill Gardner	SoS - NH			New Hampshire	
5	Matt Dunlap	SoS - ME			Maine	
6	Ken Blackwell	Fmr. SoS - OH			Ohio	
7	Christy McCormick	Commissioner, EAC			D.C.	
8	David Dunn	Fmr. St. Rep. - AR			Arkansas	
9	Mark Rhodes	Wood Cty. Clerk - WV			West Virginia	
10	Hans von Spakovsky	Sr. Legal Fellow, Heritage Fdn.			D.C.	
11	Christian Adams	Election Law Attorney			D.C.	
12	Alan King	Judge, Jefferson County			Alabama	

Thanks,

Christine Courter

Branch Chief, Travel & Event Programs Div. (H1CT)
Office of Travel and Charge Card Services (H1C)
Office of Administrative Services (H1)
U.S. General Services Administration
202.501.9136 (desk)

(b)(6)

christine.courter@gsa.gov

CREDIT CARD WORKSHEET

		DATE
ITEM	Alaska Statewide Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/6/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/7/17
<input checked="" type="checkbox"/>	Create CL	9/8/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/8/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/8/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/8/17
<input type="checkbox"/>	Reconciled	
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		
<u>COMMENTS</u>		
AMOUNT <u>\$21.00</u>		
CL NUMBER <u>CL2158195</u>		
SCANNED DOCUMENT NAME <u>PACET Alaska Voters Data</u>		
COPY CL DOCUMENT <u>CL2157730</u>		



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Tue, Sep 5, 2017 at 10:11 AM

To: Kris Palmer - M <kris.palmer@gsa.gov>

Approved.

On Fri, Sep 1, 2017 at 5:13 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams

OFFICE SYMBOL: M/PACEI

ITEM: Statewide Voters Registration Data for Alaska

ESTIMATED COST: \$21,000

ACCOUNTING CODE: (b) (4), (b) (6)

DATE NEEDED: ASAP

VENDOR: Alaska State Government

JUSTIFICATION: Information is being requested by the Presidential Advisory Commission on Election Integrity.

Thanks



U.S. General Services Administration

Kris L. Palmer

Kris L. Palmer

Program Analyst

Office of Governmentwide Policy (M)

1800 F Street, NW - 2461X

Washington, DC 20405

Office: (202) 501-0525

Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

9/7/17 - 10:47 AM
Left voice mail
message.
cost: 21.00
paid via phone
on 9/7/17
on willentent

Jon Clinton

Chief of Staff

Office of Government-wide Policy

U.S. General Services Administration

202-549-2430

RECEIPT		Date <u>9/7/17</u>	No. <u>164071</u>
Received From <u>Chris L. Palmer</u>			
Address <u>1800 F Street NW</u>			
<u>Washington DC 20405</u>			Dollars (\$ <u>21</u> ⁰⁰ / ₁₀₀)
For <u>Voter List for Presidential Advisory</u>			
<u>Commission on Election Integrity</u>			
How Paid <input checked="" type="checkbox"/> Credit Card		Balance Due <input checked="" type="checkbox"/>	(b) (6)

AN DIV OF ELECTIONS
240 MAIN ST SUITE 4
JANEAU, PA 15460
907 465 3319

Merchant ID: 2527520105
Ter a IC: 001734000252752010501

Phone Order

XXXXXXXXXXXX3330
MASTERCARD

Amount: \$ 21.00
Tax: \$ 0.00
Total: \$ 21.00

09/07/17
Inv #: 000001
Acq'd: Online
AVS Code: ZIP MATCH Z

Entry Method: Manual

09:04:22
Acq Code: 030140

Customer Entry
TIMED 10K1



Kris Palmer - M <kris.palmer@gsa.gov>

RE: Publicly available voter registration data

1 message

FN-OVP-Election Integrity Staff <(b) (6)>

Wed, Sep 6, 2017 at 1:54 PM

To: "Thompson, Michaela R (GOV)" <michaela.thompson@alaska.gov>

Cc: "Bahnke, Josephine H (GOV)" <josie.bahnke@alaska.gov>, Kris Palmer - M <kris.palmer@gsa.gov>

Good afternoon Ms. Thompson,

Thank you again for taking the time to speak with me and answer my questions. Per our conversation, I have copied my colleague, Ms. Kris Palmer, who will provide you with the credit card information to purchase your state's publicly available voter registration data. Ms. Palmer's direct number is [202.501.0525](tel:202.501.0525). Kris, please coordinate with Michaela on a time that works best the both of you to purchase the data.

Also, the address where the DVD can be sent is: Ron Williams, Policy Advisor, Presidential Advisory Commission on Election Integrity, 1650 Pennsylvania Avenue, NW, EEOB-Rom. 268, Washington, D.C. 20504.

Please advise if we need to provide anything additional.

Many thanks in advance,
Ron Williams

-----Original Message-----

From: Thompson, Michaela R (GOV) [mailto:(b) (6)]

Sent: Wednesday, September 6, 2017 1:07 PM

To: FN-OVP-Election Integrity Staff (b) (6)

Cc: Bahnke, Josephine H (GOV) (b) (6)

Subject: RE: Publicly available voter registration data

Good Morning Mr. Williams,

I have attempted to call the number your provided below, but it seems that the voicemail box is not set up. Please give me a call at my direct line (b) (6) and I can assist you with the purchase of the statewide voter list.

Thank you,

Michaela R. Thompson
Election Coordinator
State of Alaska, Division of Elections
Director's Office
Work: (b) (6)

-----Original Message-----

From: FN-OVP-Election Integrity Staff [mailto:(b) (6)]

Sent: Wednesday, September 06, 2017 5:14 AM

To: Bahnke, Josephine H (GOV)

Cc: Thompson, Michaela R (GOV)

Subject: RE: Publicly available voter registration data

Thank you! Ms. Thompson, I look forward to speaking with you.

Thank you,
Ron Williams

-----Original Message-----

From: Bahnke, Josephine H (GOV) [mailto:(b) (6)]

Sent: Wednesday, September 6, 2017 9:12 AM

To: FN-OVP-Election Integrity Staff (b) (6)
Cc: Thompson, Michaela R (GOV) (b) (6)
Subject: Re: Publicly available voter registration data

Mr. Williams,

Thank you for the reminder email. Our Election Coordinator, Ms. Michaela Thompson will assist you with the purchase of the statewide voter list. I've copied her on this email so she has your contact information.

Thanks again,
JHB

Sent from my iPhone

> On Sep 6, 2017, at 4:31 AM, FN-OVP-Election Integrity Staff (b) (6) wrote:

>

> Good morning Ms. Bahnke,

>

> I am following-up with you regarding purchasing your state's publicly available voter registration data. We have a few questions pertaining to the payment method. If you, or someone from your office can call me at (b) (6) I would greatly appreciate it.

>

> Thank you,

> Ron Williams

>

> -----Original Message-----

> From: FN-OVP-Election Integrity Staff

> Sent: Thursday, August 31, 2017 2:54 PM

> To: (b) (6) (b) (6)

> Cc: FN-OVP-Election Integrity Staff (b) (6)

> Subject: Publicly available voter registration data

>

> Greetings Ms. Bahnke!

>

> On August 21, 2017 the Presidential Advisory Commission on Election Integrity received the response from Lt. Governor Byron Mallot regarding our request to obtain your state's publicly available voter registration data. Lt. Governor Mallot noted that the Alaska Division of Elections will prepare a statewide voter registration list - with applicable data fields - to the Commission for a fee of \$21. We are prepared to purchase your state's publicly available voter registration data. Can you please advise with whom we need to speak to provide payment?

>

> If you have any questions, please feel free to contact me via e-mail or by phone at (b) (6).

>

> Respectfully,

>

> Ron Williams

> Policy Advisor

> Presidential Advisory Commission on Election Integrity

> Email: (b) (6)

> Phone: (b) (6)



Kris Palmer - M <kris.palmer@gsa.gov>

RE: FW: GEORGIA VOTERS DATA

1 message

Hallman, John (b)(6)
To: Kris Palmer - M <kris.palmer@gsa.gov>

Thu, Sep 21, 2017 at 11:22 AM

Good Morning Kris,

Tax Id - (b) (4), (b) (6)

06201709210000
created on 9/21/17
\$255.00
Check Pmt.

Remit Address

Secretary of State

Attn: Procurement Administration

2 MLK Jr. Drive

Suite 820, West Tower

Atlanta, GA 30334

Thanks,

John

From: Kris Palmer - M [mailto:kris.palmer@gsa.gov]

Sent: Thursday, September 21, 2017 11:02 AM

To: Hallman, John (b)(6)

Subject: Fwd: FW: GEORGIA VOTERS DATA

Good Morning John,

In order for me to initiate the paperwork to have a check cut to pay the invoice for \$255.00. I will need some additional information:

- What is the tax id for The Georgia Secretary of State's Office?
- Remit Address - Should the check be mail to the 2 MLK Jr. Drive SE address?

Thanks

Elections Division

**2 MLK Jr. Drive SE
Suite 802, West Tower
Atlanta, GA 30334
404-656-7610**

INVOICE

ORDER #: 09142017-868
DATE: 9/14/17

TO:

Ron Williams, Policy Advisor
Presidential Advisory Commission on Election Integrity
1650 Pennsylvania Ave. NW
EOOB, Room 268
Phone: (b) (6)

SHIP TO:

Ron Williams, Policy Advisor
Presidential Advisory Commission on Election Integrity
1650 Pennsylvania Ave. NW
EEOB, Room 268
Phone: (b) (6)

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
1	Georgia Statewide Voter File	\$250.00	\$250.00
		SUBTOTAL	\$250.00
		SALES TAX	0.00
		SHIPPING & HANDLING	\$5.00
		TOTAL DUE	\$255.000

Make all checks payable to The Georgia Secretary of State's Office.

If you have any questions concerning this invoice, please contact us at 404-656-2871.



Kris Palmer - M <kris.palmer@gsa.gov>

RE: GEORGIA VOTERS DATA

1 message

Williams, Ronald E. EOP/OVP <(b) (6)>

Thu, Sep 14, 2017 at 11:30 AM

To: "Hallman, John" <(b) (6)>, Kris Palmer - M <kris.palmer@gsa.gov>

Good morning Mr. Hallman –

Please find attached the completed Voter List Order Form. I could not access the "Description of Order" dropdown menu. Please advise if either Ms. Palmer or myself know if we need to provide any additional information.

Respectfully,

Ron Williams

From: Hallman, John [mailto:(b) (6)]

Sent: Thursday, September 14, 2017 8:04 AM

To: Kris Palmer - M <kris.palmer@gsa.gov>; Williams, Ronald E. EOP/OVP <(b) (6)>

Subject: RE: GEORGIA VOTERS DATA

Ron,

A link to a fillable PDF order form can be found on our website here, >http://sos.ga.gov/admin/uploads/Voter_List_Order_Form_3-27-171.pdf<.

Please complete this form and return it to me via email.

Thanks,

John Hallman

Election Systems Manager, State Elections Division

Georgia Secretary of State Brian P. Kemp

2 MLK Jr. Drive, SE

Suite 802 West Tower

Atlanta, GA 30334

404.656.2871 (main)

(b) (6) (direct)

From: Kris Palmer - M [mailto:kris.palmer@gsa.gov]

Sent: Thursday, September 14, 2017 7:43 AM

To: (b) (6); Hallman, John <(b) (6)>

Subject: GEORGIA VOTERS DATA

Good Morning Ron,

John Hallman from Georgia State left me a voice mail message in regards to purchasing the Georgia State Voters Data via invoice. Mr. Hallman stated that he thinks they can invoice. Please complete the order form on Georgia's website and email it to Mr. Hallman at (b) (6).

If you have any additional questions, you can reach Mr. Hallman at (b) (6) and they were shutdown for a few days because of the weather.

Thanks

Kris L. Palmer

Kris L. Palmer

Program Analyst

Office of Governmentwide Policy (M)

1800 F Street, NW - 2461X

Washington, DC 20405

Office: (202) 501-0525

Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

 **Georgia Voter List Order Form_9.14.2017.pdf**
111K

Secretary of State
Elections Division

2 Martin Luther King Jr. Dr. Suite 802 - West Tower Atlanta, GA 30334-1505

VOTER LIST ORDER FORM

ORDER NUMBER: _____

DATE: 9/14/2017

NAME: Ron Williams, Police Advisor

SHIPPING ADDRESS: (Please provide a physical mailing address. All files will be delivered by UPS)

President. Advisory Commission on Election Integrity
1650 Pennsylvania Avenue, N.W. #2000
Washington, DC 20501

EMAIL ADDRESS: (b) (6)

CONTACT PERSON: Ron Williams

CONTACT PHONE: (b) (6)

NOTE: All lists will be delivered on a CD.

FOR COUNTY USE ONLY - Payment Only _____ County provided list by (list county name) _____

Date Customer Received Voters List _____ Date Payment Mailed to SOS _____

Check ☒ Money Order ☐ Check/Money Order Number _____

Amount \$255.00 Date Payment Mailed _____

Access http://sos.ga.gov/index.php/elections/order_voter_registration_lists_and_files for list prices, etc. Electronic file only includes date last voted for each registered voter. Contact us via email at bphifer@sos.ga.gov with any questions. Normal production time is 1-2 weeks upon receipt of payment. Please make check or money order payable to Secretary of State. Voters List is a CSV file and can be opened in Microsoft Excel. Voters List does not include telephone numbers, Date of Birth, SSN# or DL#. * Statewide Voter Files will be in a text file format and has to be imported into a data spreadsheet program.

NOTE - All files are password protected. In order to open the Electronic file, WinZip has to be installed on your computer. There will be instructions on the disc provided to you by the Georgia Secretary of State IT Department for the use of unzipping the password protected file. This option provided to you, has been successfully tested by Election staff members and approved for use. If you encounter any issues with administrative access or other issues, please consult your IT Department or a WinZip Customer Service Representative.

* STATEWIDE VOTER FILE ☒ If you are ordering the Statewide Voter File check the box, skip Voter List Order below and just sign.

VOTERS LIST ORDER

(Please include a detailed description of your request including county and/or municipality.)

Description of Order: SELECT LIST TYPE FROM DRODOWN MENU ☒ Active Voters ☒ Active and Inactive Voters

County(s): (Required) _____

Municipality(s): (Only include Municipality if you are requesting a Municipal list) City of _____

☐ District Number (s) _____

☐ Precinct Number (s) _____

☐ Neither _____

Warning: In accordance with O.C.G.A. §21-2-601, any person who uses the list of electors provided for in §21-2-225 for commercial purposes shall be guilty of a misdemeanor.

(b) (6)
Signature

PRINT FORM



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>
To: Kris Palmer - M <kris.palmer@gsa.gov>

Tue, Sep 5, 2017 at 10:12 AM

Approved.

On Tue, Sep 5, 2017 at 6:54 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:
Good Morning Jon,

I didn't receive your approval for this request.

Thanks



U.S. General Services Administration

Kris L. Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov

Description: Description: MC900437801[1] **Go GREEN Keep It On The S**

----- Forwarded message -----

From: Kris Palmer - M <kris.palmer@gsa.gov>
Date: Fri, Sep 1, 2017 at 5:18 AM
Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL
To: Jonathan Clinton <jonathan.clinton@gsa.gov>

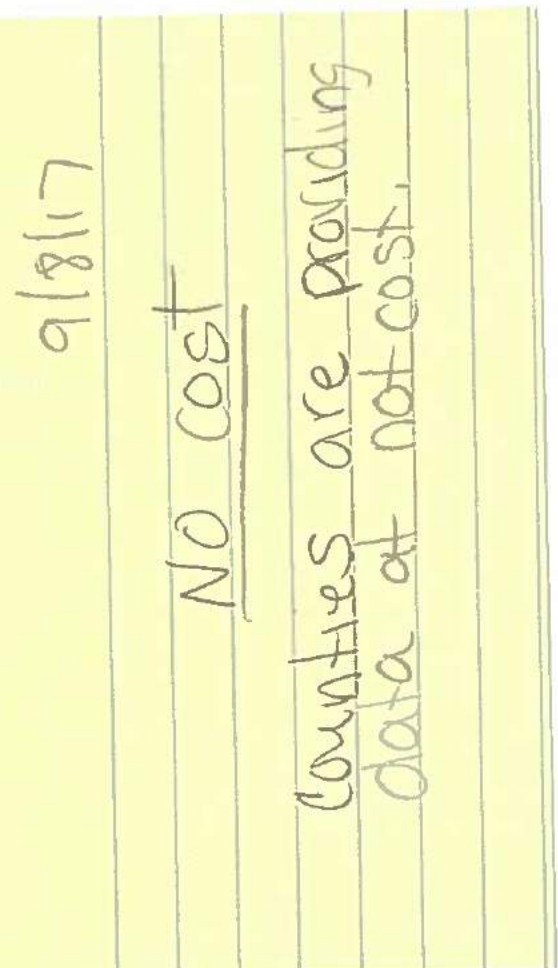
Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams
OFFICE SYMBOL: M/PACEI
ITEM: Statewide Voters Registration Data for Hawaii (Honolulu County)
ESTIMATED COST: \$200.00
ACCOUNTING CODE: (b) (4), (b) (6)
DATE NEEDED: ASAP
VENDOR: Hawaii State Government
JUSTIFICATION: Information is being requested by the Presidential Advisory
Commission on Election Integrity.

Thanks





U.S. General Services Administration

Kris L. Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

--
Jon Clinton
Chief of Staff
Office of Government-wide Policy
U.S. General Services Administration
[202-549-2430](tel:202-549-2430)

CREDIT CARD WORKSHEET

		DATE
ITEM	Idaho statewide Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/5/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/5/17
<input checked="" type="checkbox"/>	Create CL	9/8/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/8/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/8/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/8/17
<input type="checkbox"/>	Reconciled	
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		
<u>COMMENTS</u> AMOUNT <u> \$21.00 </u> CL NUMBER <u> CL215 8182 </u> SCANNED DOCUMENT NAME <u> PACEI Idaho Voters Data </u> COPY CL DOCUMENT <u> CL215 7730 </u>		



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>
To: Kris Palmer - M <kris.palmer@gsa.gov>

Tue, Sep 5, 2017 at 10:13 AM

Approved.

On Tue, Sep 5, 2017 at 7:08 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:
Good Morning Jon,

I didn't receive your approval for this request.

Thanks



U.S. General Services Administration

Kris L Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

----- Forwarded message -----

From: Kris Palmer - M <kris.palmer@gsa.gov>
Date: Fri, Sep 1, 2017 at 5:20 AM
Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL
To: Jonathan Clinton <jonathan.clinton@gsa.gov>

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams
OFFICE SYMBOL: M/PACEI
ITEM: Statewide Voters Registration Data for Idaho
ESTIMATED COST: \$20.00
ACCOUNTING CODE: (b) (4), (b) (6)
DATE NEEDED: ASAP
VENDOR: Idaho State Government
JUSTIFICATION: Information is being requested by the Presidential Advisory
Commission on Election Integrity.

IDAHO

Thank you**PURCHASE RECEIPT****Secretary of State
Secretary of State**450 N. 4th Street
Boise ID 83720
(208)334-2300
OTC Local Ref ID: 18687562
9/1/2017 07:56 AM

Status:

APPROVED

Customer Name:

Kris L Palmer

Type:

MasterCard

Credit Card Number:

(b) (6)**Idaho total amount charged****USD\$21.00**

Items	Location	Quantity	TPE Order ID	Total Amount
350- Voter Registration List	Secretary of State	1	14538118	\$20.00
Note: Statewide Voter File with History				
Clerk Initials: bk 2025010525				
Total remitted to the Secretary of State				\$20.00

Signature

IDAHO SECRETARY OF STATE
09/05/2017 05:00
CK:14538118 CT:172099 BH:1601151
1@ 20.00 = 20.00 VOTER LIST #2

STATE OF IDAHO
OFFICE OF THE SECRETARY OF STATE

LAWRENCE DENNEY
SECRETARY OF STATE
(208) 334-2852
FAX (208) 334-2282



700 W JEFFERSON, STE E-205
PO BOX 83720
BOISE, IDAHO 83720-0080

VOTER REGISTRATION DATA REPORT ORDER FORM

Extract File

This extract is a zip file containing two files. The first is a HTML file containing the field information while the second is a pipe delimited text file containing all of the Voter Registration data. The text file can be imported into any database program that will accomodate the number or records contained in the file.

Printed Reports

This report can be run and printed out on paper for County Data Only.

1. TYPE OF REPORT:

- ☒ Statewide
- ☐ 1st Congressional District
- ☐ 2nd Congressional District
- ☐ Legislative District [circle all that apply]

1	8	15	22	29
2	9	16	23	30
3	10	17	24	31
4	11	18	25	32
5	12	19	26	33
6	13	20	27	34
7	14	21	28	35

2. SCOPE OF REPORT:

- ☒ Voter Registration Information
- ☒ Voter Registration Information and Voter History

3. OUTPUT MEDIA:

- ☒ CD [\$20 per CD copy]
- ☐ Paper [\$.25 per page]

4. REQUESTING PARTY:

Name: Ron Williams

Address: 1650 Penosy Avenue NW
LEOB - Room 208

Telephone: (b) (6)

Send the above order to:
[If different from requesting party]

- ☐ Countywide
County Name: _____
- ☐ County Precinct
County Name: _____
Precinct Name/Number: _____

Name: _____

Address: _____

Telephone: _____



STATE OF IDAHO
OFFICE OF THE SECRETARY OF STATE
LAWRENCE DENNEY

Voter Registration Data Report Acknowledgement Form

Pursuant to Section 34-437A (3), Idaho Code:

"No person to whom a list of statewide electors is furnished and no person who acquires a list of statewide electors prepared from such list shall use any information contained therein for the purpose of mailing or delivering any advertisement or offer for any property, establishment, organization, product, or service or for the purpose of mailing or delivering any solicitation for money, services, or anything of value. Provided however, that any such list and label may be used for any political purpose."

I Ron Williams, have read the statutory prohibitions concerning the use of any information contained in the list of registered electors of the State of Idaho.

DATE: 8.31.2017

(b) (6)

Ron Williams

Printed Name

1650 Pennsylvania Ave, NW, EC08-Rm. 265

Washington, DC 20504

Address

(b) (6)

Telephone



Kris Palmer - M <kris.palmer@gsa.gov>

Voter Registration Data Report Order Form - Presidential Advisory Commission on Election Integrity

1 message

FN-OVP-Election Integrity Staff <(b) (6)>
To: "elections@sos.idaho.gov" <elections@sos.idaho.gov>
Cc: "kris.palmer@gsa.gov" <kris.palmer@gsa.gov>

Thu, Aug 31, 2017 at 12:09 PM

Greetings!

Attached is the completed "Voter Registration Data Report Order Form" submitted by the Presidential Advisory Commission on Election Integrity. Please advise if we need to provide anything additional.

Respectfully,

Ron Williams
Policy Advisor
Presidential Advisory Commission on Election Integrity
Email: (b) (6)
Phone: (b) (6)

IdahoVoterRegistrationDataReportOrderForm_8.31.17.pdf
143K



[Click here to clear form.](#)

Credit Card Payment Transmittal Form

[all fields on form are required]

Order Information:

Voter Registration Data Report

[description of what payment is for - for example, name of filing this form is attached to]

Name:

Kris L Palmer

[enter name exactly as it appears on credit card]

Billing Address:

1800 F Street, NW

Washington

[city]

DC

[state]

20405

[zip code]

Telephone Number:

202 501-0525

Type of Card:



Mastercard



Visa



Discover

Card Number

(b) (4), (b) (6)

Expiration [mm/yy]

02

18

Authorized Charge:

\$20.00

All fields on the transmittal form are required.

Your payment cannot be processed if all fields are not complete.

Note: In accordance with the contract between the State of Idaho and our service provider Access Idaho, a \$1 non-refundable fee is added to each transaction. The Secretary of State's office does not keep any part of this fee.

Privacy Notice: This form is used to process your credit card payment for a filing or service with the Idaho Secretary of State's office. Your credit card information is NOT retained in our office. The transmittal form is shredded after your filing or service request is processed.

Department Direct Fax Numbers:

Business Entities: (208) 334-2080

UCC / Liens: (208) 334-2847

Elections: (208) 334-2282

Fiscal: (208) 334-5224

All Other Departments: (208) 334-2282

CREDIT CARD WORKSHEET

		DATE
ITEM	Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/5/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/8/17
<input checked="" type="checkbox"/>	Create CL	9/18/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/18/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/18/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/18/17
<input checked="" type="checkbox"/>	Reconciled	9/18/17
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		
<u>COMMENTS</u>		
AMOUNT <u>\$1,061.00</u>		
CL NUMBER <u>CL2160314</u>		
SCANNED DOCUMENT NAME <u>Iowa State Voters Data</u>		
COPY CL DOCUMENT <u>CL2158174</u>		



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Tue, Sep 5, 2017 at 10:13 AM

To: Kris Palmer - M <kris.palmer@gsa.gov>

Approved.

On Tue, Sep 5, 2017 at 7:09 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:

Good Morning Jon,

I didn't receive your approval for this request.

Thanks



U.S. General Services Administration

Kris L Palmer

Kris L. Palmer
 Program Analyst
 Office of Governmentwide Policy (M)
 1800 F Street, NW - 2461X
 Washington, DC 20405
 Office: (202) 501-0525
 Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

----- Forwarded message -----

From: Kris Palmer - M <kris.palmer@gsa.gov>
 Date: Fri, Sep 1, 2017 at 5:21 AM
 Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL
 To: Jonathan Clinton <jonathan.clinton@gsa.gov>

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams
 OFFICE SYMBOL: M/PACEI

ITEM: Statewide Voters Registration Data for Iowa

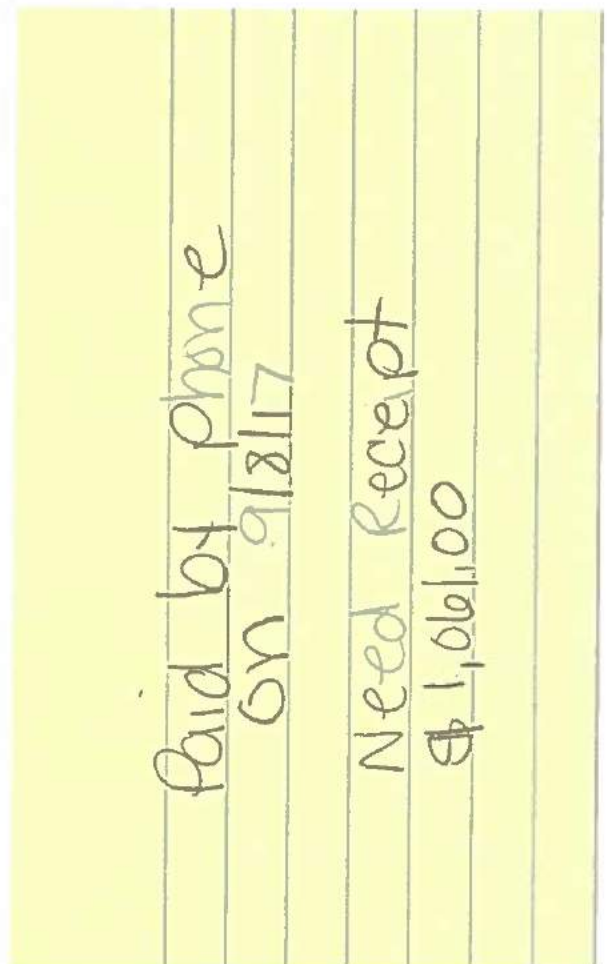
ESTIMATED COST: \$1,500.00

ACCOUNTING CODE: (b) (4), (b) (6)

DATE NEEDED: ASAP

VENDOR: Iowa State Government

JUSTIFICATION: Information is being requested by the Presidential Advisory
 Commission on Election Integrity.



Thanks



U.S. General Services Administration

Kris L. Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov

**Go GREEN Keep It On The Screen!**

—
Jon Clinton
Chief of Staff
Office of Government-wide Policy
U.S. General Services Administration
[202-549-2430](tel:202-549-2430)

INVOICE



PAUL D. PATE
IOWA SECRETARY OF STATE
LUCAS BUILDING, FIRST FLOOR
DES MOINES, IOWA 50319
PHONE: (515) 281-5204

Date:	9/8/2017
Account:	MCVD

Invoice Number: 094111
Invoice Date: 9/ 8/2017
Agent Name: MIKE

KRIS L PALMER
1800 F ST NW
WASHINGTON, DC 20405

Billing Information

CARD NUMBER: XXXX-XXXX-XXXX-3330
0218 KRIS L PALMER 202-881-7807

Quantity	Code	Item Description	Price	Extended Price
1	VDC	DATA CHARGE STATEWIDE EX-005 AIP	\$1,061.0000	\$1,061.0000

Total: \$1,061.00

COMMENT:

THIS IS NOT A BILL

**State of Iowa
Specifications and Order Form for Voter List**

Requestor Name: Ron Williams

Daytime Phone: (b) (6)

Address: 1650 Pennsylvania Avenue, N.W., Eisenhower Executive Office Building, Rm. 268, Washington, D.C. 20504

Information from voter registration records can only be used:

- To request a registrant's vote at an election.
- For a bona fide political research, or
- For a genuine political purpose.
- For a bona fide official purpose by an elected official.

I am aware that information from voter registration records may only be used lawfully for the reasons listed above. I understand that misuse of the information, including commercial use, is a serious misdemeanor under Iowa law. I agree to pay the cost of the above ordered list before delivery.

Intended Use of List: To assist with verification of voter registration data research of the Presidential Advisory Commission on Election Integrity.

Signature: (b) (6)

Date: 09/01/2017

List Information

☒ Option 1: Voter List

A. Jurisdiction(s) of voters to include: Statewide voter registration list and vote history

B. Type of Voters:

☐ Active Only ☒ Active, Inactive, and Pending

C. Type of Information:

☐ Contact Information Only
☒ Contact Information and Election Participation (electronic lists only)

Election Participation Options:

☒ Last 5 elections of every type

☐ Specify elections: _____

☐ Option 2: Absentee List

A. Jurisdiction(s) of voters to include: _____

B. Election(s): _____

C. Do you want to receive updates to the list?

☐ No ☐ Yes

Frequency of Updates: ☐ Daily

☐ Weekly

☒ Monthly

2017 SEP - 1 PM 2:55
SECRETARY OF STATE

2,122,000
\$1,061.00

List Format

☒ Excel or Comma Delimited (CSV) - Email ☐ Excel or Comma Delimited (CSV) - CD-ROM

☐ Paper - describe the order you want the voters listed: _____

Payment Method

Note: Payment must be received before list is provided. If paying by credit card, you will be contacted to request your credit card information.

☐ Cash/Check

☒ Credit Card

Office Use Only: _____

Delivery Method

Note: Orders that are shipped will be charged for shipping.

☒ Email the list to: (b) (6)

☐ Pick up at Secretary of State's Office or at the County Auditor's Office: _____

☐ For governmental agencies only: Send with invoice; payment will be made within 60 days

CREDIT CARD WORKSHEET

ITEM		DATE
	Missouri Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/5/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/8/17
<input checked="" type="checkbox"/>	Create CL	9/8/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/8/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/8/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/8/17
<input type="checkbox"/>	Reconciled	
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		

COMMENTS

AMOUNT \$ 36.25

CL NUMBER CL2158180

SCANNED DOCUMENT NAME PACEI Missouri Voters Data

COPY CL DOCUMENT CL2157730



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Tue, Sep 5, 2017 at 10:12 AM

To: Kris Palmer - M <kris.palmer@gsa.gov>

Approved.

On Tue, Sep 5, 2017 at 6:56 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:

Good Morning Jon,

I didn't receive your approval for this request.

Thanks



U.S. General Services Administration

Kris L. Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

----- Forwarded message -----

From: Kris Palmer - M <kris.palmer@gsa.gov>

Date: Fri, Sep 1, 2017 at 5:24 AM

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

To: Jonathan Clinton <jonathan.clinton@gsa.gov>

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams

OFFICE SYMBOL: M/PACEI

ITEM: Statewide Voters Registration Data for Missouri

ESTIMATED COST: \$35.00

ACCOUNTING CODE: (b) (4), (b) (6)

DATE NEEDED: ASAP

VENDOR: Missouri State Government

JUSTIFICATION: Information is being requested by the Presidential Advisory Commission on Election Integrity.



Kris Palmer - M <kris.palmer@gsa.gov>

Receipt : Missouri : Secretary of State

1 message

customerservice@collectorsolutions.com <customerservice@collectorsolutions.com>

Fri, Sep 8, 2017 at 12:25 PM

To: kris.palmer@gsa.gov

Receipt
Missouri : Secretary of State

9/8/2017 - 11:25:48 AM (CT)

name Kris L. Palmer

12284943

effective date 9/8/2017

payment method Credit Card

account number (b) (4), (b) (6)

\$35.00

convenience fee amount \$1.25

total remitted \$36.25

Elections

(*****9999) - \$35.00

The charge will show on your account as :

CSI Office of Secretary of St

JetPay

Powered by...

CREDIT CARD WORKSHEET

ITEM		DATE
	<i>Montana Statewid Voters Registration Data</i>	
<input checked="" type="checkbox"/>	Submit for Approval	<i>9/6/17</i>
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	<i>8/30/17</i>
<input checked="" type="checkbox"/>	Create CL	<i>9/7/17</i>
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	<i>9/7/17</i>
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	<i>9/7/17</i>
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	<i>9/7/17</i>
<input checked="" type="checkbox"/>	Reconciled	<i>9/7/17</i>
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		

COMMENTS

AMOUNT \$1,000.00

CL NUMBER CL 2157733

SCANNED DOCUMENT NAME PACEI MT Voters Data

COPY CL DOCUMENT CL 2157730



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Tue, Sep 5, 2017 at 10:13 AM

To: Kris Palmer - M <kris.palmer@gsa.gov>

Approved.

On Tue, Sep 5, 2017 at 6:57 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:

Good Morning Jon,

I didn't receive your approval for this request.

Thanks



U.S. General Services Administration

Kris L Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

----- Forwarded message -----

From: Kris Palmer - M <kris.palmer@gsa.gov>

Date: Fri, Sep 1, 2017 at 5:25 AM

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

To: Jonathan Clinton <jonathan.clinton@gsa.gov>

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams
OFFICE SYMBOL: M/PACEI
ITEM: Statewide Voters Registration Data for Montana
ESTIMATED COST: \$1,000.00
ACCOUNTING CODE: (b) (4), (b) (6)
DATE NEEDED: ASAP
VENDOR: Montana State Government
JUSTIFICATION: Information is being requested by the Presidential Advisory
Commission on Election Integrity.

Montana Secretary of State

Voter File

Corey Stapleton
Secretary of State[Instructions](#) | [Fees](#) | [Feedback](#)

Receipt

Thank you for your purchase. This is your receipt, please print this page for your records.

Your file(s) will be sent via the State of Montana's File Transfer Service.

Unique ID: (b) (4), (b) (6)

Date: 2017-08-30

File(s) purchased:

Statewide Voter File

\$1000 Via FTS

Total Cost: \$1000

[Home](#)[Print](#)

CREDIT CARD WORKSHEET

		DATE
ITEM	Oregon Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/1/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/8/17
<input checked="" type="checkbox"/>	Create CL	9/8/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/8/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/8/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/8/17
<input type="checkbox"/>	Reconciled	
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		
<u>COMMENTS</u>		
AMOUNT <u>\$ 500.00</u>		
CL NUMBER <u>CL 2158174</u>		
SCANNED DOCUMENT NAME <u>PACEI Oregon Voters Data</u>		
COPY CL DOCUMENT <u>CL 215 7730</u>		



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>
To: Kris Palmer - M <kris.palmer@gsa.gov>

Fri, Sep 1, 2017 at 8:14 AM

Approved.

Sent from my iPhone

On Sep 1, 2017, at 5:28 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams

OFFICE SYMBOL: M/PACEI

ITEM: Statewide Voters Registration Data for Oregon

ESTIMATED COST: \$500.00

ACCOUNTING CODE: (b) (4), (b) (6)

DATE NEEDED: ASAP

VENDOR: Oregon State Government

JUSTIFICATION: Information is being requested by the Presidential Advisory Commission on Election Integrity.

Thanks



U.S. General Services Administration

Kris L Palmer

Kris L. Palmer

Program Analyst

Office of Governmentwide Policy (M)

1800 F Street, NW - 2461X

Washington, DC 20405

Office: (202) 501-0525

Email: kris.palmer@gsa.gov

Description: Description: MC900437801[1] Go GREEN Keep It On The Screen!



Kris Palmer - M <kris.palmer@gsa.gov>

Request for Oregon Statewide Voter List - Presidential Advisory Commission on Election Integrity - Receipt

1 message

MIFSUD Candy L * SOS <Candy.L.MIFSUD@oregon.gov>
To: Kris Palmer - M <kris.palmer@gsa.gov>
Cc: MIFSUD Candy L * SOS <Candy.L.MIFSUD@oregon.gov>

Fri, Sep 8, 2017 at 1:33 PM



SECRETARY OF STATE ELECTIONS
255 CAPITOL ST NE STE 501
SALEM, OR 97310
503-986-1518

ELECTIONS

Date: 09/08/2017 10:26:55 AM

CREDIT CARD SALE

MASTERCARD
CARD NUMBER: *****3330 K
TRAN AMOUNT: \$500.00
APPROVAL CD: 002290
RECORD #: 000
CLERK ID: canmif
First Name: Kris
Last Name: Palmer
Reference: Federal voter list request

Thank you!

Customer Copy

Best Regards,

Carmella "Candy" Mifsud



Oregon Secretary of State | Elections Division

Public Service Building

9/8/2017

GSA.gov Mail - Request for Oregon Statewide Voter List - Presidential Advisory Commission on Election Integrity - Receipt

255 Capitol Street NE, Suite 501

Salem, OR 97310-1327

(b) (6)

(b) (6) Office | 503.373.7414 FAX



www.oregonvotes.gov

From: Kris Palmer - M [mailto:kris.palmer@gsa.gov]

Sent: Tuesday, September 05, 2017 8:15 AM

To: FN-OVP-Election Integrity Staff (b) (6)

Cc: MIFSUD Candy L * SOS <(b) (6)>

Subject: Re: Request for Statewide Voter List - Presidential Advisory Commission on Election Integrity

Good Morning All,

Sure, you can give me a call at 202 501-0525 and I will provide you with the credit card information. I am currently in a meeting but will be available from 12:30 - 2:00.

Thanks

Kris L. Palmer

Kris L. Palmer

Program Analyst

Office of Governmentwide Policy (M)

1800 F Street, NW - 2461X

Washington, DC 20405

Office: (202) 501-0525

Email: kris.palmer@gsa.gov

Request for Statewide and Less Than Statewide Voter List

SEL 510

rev 07/13: OAR 165-002-0020

Obtaining a Voter List: Any person may obtain an electronic copy of a statewide or less than statewide voter list from the Office of the Secretary of State, Elections Division, or any county elections official. All requests for a hardcopy of a less than statewide voter list, labels, or other non-electronic formats must be made with the county elections official of each county in which voters to be listed reside.

File Generation: A statewide voter list consists of 11 separate .txt files that are zipped and delivered on dvd or posted to an ftp or dropbox site. The statewide voter list is separated into Oregon's five congressional districts. For each congressional district one file is generated that contains detailed registration information for the registered voters in that district and a second file is generated that contains the registrant's associated vote history. The final .txt file contains a list of districts by precinct and split. This file may be used to determine the districts in which a voter is eligible to vote in.

Note: Due to file size limitations the statewide voter list may be separated in a manner other than described above.

File Format: The following is the file layout of both the voter registration and vote history files:

VOTER ID	PHONE NUMB	POST DIRECTION	EFF ADDRESS 3
FIRST NAME	UNLISTED	UNIT TYPE	EFF ADDRESS 4
MIDDLE NAME	COUNTY	UNIT NUM	EFF CITY
LAST NAME	RES ADDRESS 1	ADDR NON STD	EFF STATE
NAME SUFFIX	RES ADDRESS 2	CITY	EFF ZIP CODE
BIRTH DATE	HOUSE NUM	STATE	EFF ZIP PLUS FOUR
CONFIDENTIAL	HOUSE SUFFIX	ZIP CODE	ABSENTEE TYPE
EFF REGN DATE	PRE DIRECTION	ZIP PLUS FOUR	PRECINCT NAME
STATUS	STREET NAME	EFF ADDRESS 1	PRECINCT
PARTY CODE	STREET TYPE	EFF ADDRESS 2	SPLIT

Note: The vote history files also include voter participation information for each requested election and appears at the end of the layout provided above.

Cost: The fee for the statewide voter list is \$500. The fee to provide a less than statewide list consists of a \$25 set up fee plus 2.5 cents per 100 records provided.

Request Information	
Date of Request 8-31-2017	Contact Phone Number or Email Address (b) (6)
Person and/or Organization Making Request Ron Williams - Presidential Advisory Commission on Election Integrity	
Request is for: <input checked="" type="checkbox"/> Statewide Voter List <input type="checkbox"/> Less than Statewide Voter List:	
Please Include:	
<input checked="" type="checkbox"/> Voter Registration AND Vote History Information	<input checked="" type="checkbox"/> Active AND Inactive Registered Voters
<input type="checkbox"/> Voter Registration Information ONLY	<input type="checkbox"/> Active Registered Voters ONLY
<input type="checkbox"/> Vote History Information ONLY	<input type="checkbox"/> Inactive Registered Voters ONLY
Elections Requested:	
<input type="checkbox"/> ALL Statewide Elections since 2006	
<input type="checkbox"/> Specific Election:	
Delivery Method: DVD <input type="checkbox"/> Pick Up <input type="checkbox"/> Mail <input checked="" type="checkbox"/> SFTP <input checked="" type="checkbox"/>	
For Mailed DVD please provide: Address: 1650 Pennsylvania Ave., NW LEOB-Rm. 265 City: Washington State: DC Zip: 20504	SFTP Site Information: Please contact the Elections Division for the site address and to obtain a user name and password if you would like to receive the voter registration and voter history files by this method.
Contact Information: phone: 503.986.1518 toll free: 866.673.8683 Email: elections.sos@state.or.us	
Payment: <input checked="" type="checkbox"/> Credit Card (will be contacted at Contact Phone Number) <input type="checkbox"/> Check	

By signing below you agree not to use the statewide voter list or less than statewide voter list for commercial purposes in accordance with ORS 247.955.

(b) (6)

8/31/2017
Date Signed

For Office Use Only

Total Number of Records Provided

Cost

Payment Method

Staff Person Who Filled Request

Date File was Produced

Date Request was Filled/Shipped

CREDIT CARD WORKSHEET

		DATE
ITEM	Pennsylvania Voters Registration Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/5/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	8/31/17
<input checked="" type="checkbox"/>	Create CL	9/7/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/7/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/7/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/7/17
<input checked="" type="checkbox"/>	Reconciled	9/7/17
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		

COMMENTS

AMOUNT \$20.00

CL NUMBER CL2157730

SCANNED DOCUMENT NAME PACE I PA Voters Data

COPY CL DOCUMENT CL2117355

(b) (4), (b) (6) Region: 00



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>
To: Kris Palmer - M <kris.palmer@gsa.gov>

Tue, Sep 5, 2017 at 10:13 AM

Approved.

On Tue, Sep 5, 2017 at 6:59 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:
Good Morning Jon,

I didn't receive your approval for this request.

Thanks



U.S. General Services Administration

Kris L. Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

----- Forwarded message -----

From: Kris Palmer - M <kris.palmer@gsa.gov>
Date: Fri, Sep 1, 2017 at 5:31 AM
Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL
To: Jonathan Clinton <jonathan.clinton@gsa.gov>

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams
OFFICE SYMBOL: M/PACEI
ITEM: Statewide Voters Registration Data for Pennsylvania
ESTIMATED COST: \$20,000
ACCOUNTING CODE: (b) (4), (b) (6)
DATE NEEDED: ASAP
VENDOR: Pennsylvania State Government
JUSTIFICATION: Information is being requested by the Presidential Advisory
Commission on Election Integrity.



Kris Palmer - M <kris.palmer@gsa.gov>

FW: Transaction Receipt from PA BCEL VOTER LIST

1 message

FN-OVP-Election Integrity Staff <(b) (6)>
To: "kris.palmer@gsa.gov" <kris.palmer@gsa.gov>

Thu, Aug 31, 2017 at 3:06 PM

Hi Kris,

Below is the transaction receipt for the PA voter roll data.

Thanks,

Ron

From: PA BCEL VOTER LIST [mailto:(b) (6)]
Sent: Wednesday, August 30, 2017 3:13 PM
To: FN-OVP-Election Integrity Staff <(b) (6)>
Subject: Transaction Receipt from PA BCEL VOTER LIST

This is the receipt for your purchase at PA Voter Services Payment Page.

Order Information

Quantity	Item	Unit		Price
1	PA Full Voter Export (All Counties)	20.00	USD	20.00
		Total	USD	20.00

This order is now complete. Transaction approved!

Here is your receipt:

===== TRANSACTION RECORD =====

PA BCEL VOTER LIST
401 NORTH ST 308 NOB
HARRISBURG, PA 17120
United States

>WWW.DOS.PA.GOV/RUNNINGFOROFFICE<

TYPE: Purchase

ACCT: Mastercard \$ 20.00 USD

CARDHOLDER NAME : Kris L. Palmer

CARD NUMBER

(b) (6)

DATE/TIME : 30 Aug 17 15:12:34

REFERENCE # : 003 0460793 M

AUTHOR. # : 028736

TRANS. REF. :

Approved - Thank You 100

Please retain this copy for your records.

Cardholder will pay above amount to
card issuer pursuant to cardholder
agreement.

=====

CREDIT CARD WORKSHEET

		DATE
ITEM	Texas Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/19/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/19/17
<input checked="" type="checkbox"/>	Create CL	9/22/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/22/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/22/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/22/17
<input type="checkbox"/>	Reconciled	
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		
<u>COMMENTS</u> AMOUNT <u>\$ 3,437.30</u> CL NUMBER <u>CL216 1768</u> SCANNED DOCUMENT NAME <u>Texas Voters Data</u> COPY CL DOCUMENT <u>CL215 1730</u>		



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>
To: Kris Palmer - M <kris.palmer@gsa.gov>

Tue, Sep 19, 2017 at 11:07 AM

Approved.

On Tue, Sep 19, 2017 at 10:19 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:
Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams
OFFICE SYMBOL: M/PACEI
ITEM: Statewide Voters Registration Data for Texas
ESTIMATED COST: \$3,437.30
ACCOUNTING CODE: (b) (4), (b) (6)
DATE NEEDED: ASAP
VENDOR: Texas State Government
JUSTIFICATION: Information is being requested by the Presidential
Advisory Commission on Election Integrity.

Thanks

Kris L Palmer

Kris L. Palmer
Program Analyst
Office of Governmentwide Policy (M)
1800 F Street, NW - 2461X
Washington, DC 20405
Office: (202) 501-0525
Email: kris.palmer@gsa.gov



Go GREEN Keep It On The Screen!

--
Jon Clinton
Chief of Staff
Office of Government-wide Policy
U.S. General Services Administration
202-549-2430

Financial Division
P.O.Box 12887
Austin, Texas 78711-2887



Rolando B. Pablos
Secretary of State

Office of the Secretary of State
Packing Slip

September 19, 2017

Page 1 of 1

Kris L Palmer
1800 F Street NW
Washington DC 20405

Batch Number: 76226842

Batch Date: 09-19-2017

Client ID (b) (6)

Return Method: Mail

Document Number	Document Detail	Fee	
762268420002	Public Information - Statewide VH/VD, active/suspense/cancelled, Hispanic surname flag, voted in Gen Elec's '06, '08, '10, '12, '14, '16	\$3,437.30	
Total Document Fees		\$3,437.30	
Payment Type	Payment Status	Payment Reference	Amount
Credit Card	Accepted	*****3330	\$3,437.30
Total Payments Received			\$3,437.30
Total Amount Charged to Client Account			\$0.00
Total Amount Credited to Client Account			\$0.00

Note: This is not a bill. Please do not send any payments until the monthly statement is received.
Any amount credited to Client Account may be refunded upon request.
Refunds (if applicable) will be processed upon Request.
Acknowledgement of Filing Document(s) (if present) is attached.

User ID (b) (4), (b) (6)

Come visit us on the Internet @ <http://www.sos.state.tx.us/>

The State of Texas

Elections Division
P.O. Box 12060
Austin, Texas 78711-2060
www.sos.state.tx.us



Rolando B. Pablos
Secretary of State

Phone: 512-463-5650
Fax: 512-475-2811
Dial 7-1-1 For Relay Services
(800) 252-VOTE (8683)

INVOICE

PIR# 20172159-20180011

September 15, 2017

Mr. Ron Williams
Policy Advisor
The Presidential Advisory Commission on Election Integrity
1650 Pennsylvania Avenue, N.W.
Washington, DC 20504

Total Records Extracted: **49,570,748**

Extract Rate	\$ 328.13
Extract Charges: Total Records Extracted: 49,570,748	\$ 3,098.17
CD	\$ 11.00
Total Charges	\$ 3,437.30

Voter Data File:

List of Registered Voters in Texas, in active, suspense and cancelled status, statewide, Hispanic surname flagged.

Voting History:

List of Registered Voters in Texas, in active, suspense and cancelled status, statewide, Hispanic surname flagged, who voted in the General Elections of 2006, 2008, 2010, 2012, 2014, 2016.

Secretary of State
Elections Division
Credit Card Payment Form

*Master Card, Visa, American Express & Discover are
accepted*

For Office Use Only

DATE: _____ STAFF TAKING ORDER: _____

Please provide all requested information so your request may be processed.

NAME ON CARD: Kris L Palmer

BUSINESS NAME: Kris L Palmer

NAME OF REQUESTOR: Ronald Williams

MAILING ADDRESS: PACET/1650 Pennsylvania Avenue NW

CITY: Washington STATE: DC ZIP CODE: 20504

HOME PHONE: _____ BUSINESS PHONE: (b) (6)

CELL PHONE: _____ EMAIL: (b) (6)

BILLING ADDRESS: General Services Administration
1800 F Street, NW Washington, DC 20405

☐ Billing Address same as Mailing Address

TYPE OF CREDIT CARD: Master Card

CREDIT CARD #: _____

EXPIRATION DATE: _____

***3 OR 4 DIGIT SECURITY CODE: _____ (required)

AMOUNT OF CHARGE: \$3,437.30

Please email receipt to Kris Palmer at
Kris.palmer@gsa.gov.
Thanks

CREDIT CARD WORKSHEET

		DATE
ITEM	WV Voters Data	
<input checked="" type="checkbox"/>	Submit for Approval	9/1/17
<input checked="" type="checkbox"/>	Order, Pay Invoice, Register, etc.	9/27/17
<input checked="" type="checkbox"/>	Create CL	9/28/17
<input checked="" type="checkbox"/>	Log Into Google Credit Card Log	9/28/17
<input checked="" type="checkbox"/>	Scan (approvals with receipt)	9/28/17
<input checked="" type="checkbox"/>	Upload Documents to CL & Process CL	9/28/17
<input checked="" type="checkbox"/>	Reconciled	10/25/17
<input type="checkbox"/>	Date Received	
<input type="checkbox"/>	Date Delivered	
<input type="checkbox"/>		

COMMENTS

AMOUNT \$1,000.00

CL NUMBER CL2163327

SCANNED DOCUMENT NAME West Virginia Voters Data

COPY CL DOCUMENT CL2161768

(b) (4), (b) (6)

02/2018

> System would not process the AR for cost to come out of FY17 funds.



Kris Palmer - M <kris.palmer@gsa.gov>

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov>

Fri, Sep 1, 2017 at 8:13 AM

To: Kris Palmer - M <kris.palmer@gsa.gov>

Approved.

Sent from my iPhone

On Sep 1, 2017, at 5:36 AM, Kris Palmer - M <kris.palmer@gsa.gov> wrote:

Good Morning Jon,

I submitting the following for payment via credit card:

Subject: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

REQUESTER: PACEI Committee/ Ronald Williams

OFFICE SYMBOL: M/PACEI

ITEM: Statewide Voters Registration Data for West Virginia

ESTIMATED COST: \$500.00

ACCOUNTING CODE: (b) (4), (b) (6)

DATE NEEDED: ASAP

VENDOR: West Virginia State Government

JUSTIFICATION: Information is being requested by the Presidential Advisory Commission on Election Integrity.

Thanks



U.S. General Services Administration

Kris L Palmer

Kris L. Palmer

Program Analyst

Office of Governmentwide Policy (M)

1800 F Street, NW - 2461X

Washington, DC 20405

Office: (202) 501-0525

Email: kris.palmer@gsa.gov

Description: Description: MC900437801[1] Go GREEN Keep It On The Screen!

Mac Warner
Secretary of State
Bldg. 1, Suite 157-K
1900 Kanawha Blvd. East
Charleston, WV 25305-0770
Phone: 304-558-6000
Toll-free: 866-767-8683



Invoice

Date: 09/08/2017
Invoice #: 441517

Bill to: Kris L Palmer
Presidential Advisory Commission on Election Integrity
1800 F Street, NW
Washington, DC 20405

Invoice summary

Service	Service #	Qty	Unit Cost	Subtotal	Description
Voter Registration List	13567	1	Variable	\$1,000.00	State VR List Sales
Credit Card		1		(\$1,000.00)	
Remaining balance (pay this amount):				\$0.00	



Kris Palmer - M <kris.palmer@gsa.gov>

West Virginia Request for Voter Registration Data

1 message

FN-OVP-Election Integrity Staff (b) (6)

Tue, Sep 5, 2017 at 5:08 PM

To: (b) (6)

Cc: Kris Palmer - M <kris.palmer@gsa.gov>

Greetings!

Attached is the completed "Request for Voter Registration Data" form submitted by the Presidential Advisory Commission on Election Integrity. I have copied Ms. Kris Palmer who will provide you with the payment method information. Her direct number is [202.501.0525](tel:202.501.0525). Please advise if we need to submit anything additional.

Respectfully submitted,

Ron Williams

Policy Advisor

Presidential Advisory Commission on Election Integrity

Email: (b) (6)

Phone: (b) (6)

**West Virginia Request for Voter Registration Data_9.1.17.pdf**

229K



Office of the West Virginia Secretary of State

Request for Voter Registration Data Instructions

In accordance with West Virginia Code §3-2-30, voter registration data will be made available through the West Virginia Secretary of State's office. The West Virginia Secretary of State's office relies on information recorded by County voter registration offices in the statewide voter registration system (ElectioNet). Although every effort is made to ensure the accuracy of the information we distribute, we cannot assume liability for inaccurate or incomplete data. The user assumes all liability associated with the use of such data.

How to Order Voter Registration Data

The attached "Voter Registration Data Services Request Form" must be used when requesting voter data. The request may be mailed, faxed, or e-mailed using the contact information below. The total cost due is payable before delivery of voter data. Requests are filled on a first-come, first-served basis.

NOTE: West Virginia Code §3-2-30(f) states that "No voter registration lists or data files containing voter names, addresses or other information derived from voter data files may be used for commercial or charitable solicitations or advertising, sold or reproduced for resale."

Fees for Statewide Voter Lists

(1) Election Cycle Subscription Service*	\$1,000
(2) Statewide Voter Registration List	\$500
(3) Master Voter History List Export	\$500
(4) Statewide Early Voters List	\$200
(5) Statewide Absentee Requests List	\$200
(6) Statewide Absentee Received List	\$200

Fees for Partial Voter Lists/List Updates**

(7) Partial Voter Registration List	\$25/hour
(8) Voter History List	\$25/hour
(9) Complex Research Query	\$25/hour
(10) Update to (2), (4), (5), or (6) during the election year in which the list was requested	\$25/hour
(11) Update to (3) between the day following the request date and the completion of voter history	\$25/hour

* The subscription service includes (1) Statewide Voter Registration List updated monthly throughout the year and updated daily starting thirty days prior to election day through election day; (2) Master Voter History List Export following certification of the primary, general and odd-year elections; (3) Statewide Mail-in Absentee Requests List and Statewide Mail-in Absentee Received List for the primary, general and odd-year elections, updated daily starting thirty days prior to election day through ten days following election day; and (4) Statewide Early Voters List for the primary, general and odd-year elections, updated daily starting on the first day of early voting through election day.

**The price of partial voter registration lists and list updates are based on the current hourly rate as determined by the Secretary of State. The staff generating your request will contact you with an estimate of the number of hours needed to fulfill your request.

Payment Options: Cash . Check (made payable to the WV Secretary of State) . Prepaid Account
Credit Card (MasterCard, Visa, Discover, or American Express)

***** Please return your completed form by mail, fax, or e-mail to: *****

West Virginia Secretary of State's Office

Attn: Elections Division

1900 Kanawha Blvd East

Building 1, Suite 157-K

Charleston WV 25305

Fax: 304-558-8386 E-mail: svrs@wvsos.com



Request for Voter Registration Data Services

Election Year 2016

Delivery Style (subject to file size)	Data Format
<input checked="" type="checkbox"/> Cloud storage/transfer (FTP, Dropbox, etc.)	<input type="checkbox"/> Spreadsheet (MS Excel, etc.)
<input type="checkbox"/> E-mail	<input checked="" type="checkbox"/> Delimited Text File (.csv, .txt, etc.)
<input type="checkbox"/> Mail (CD-Rom, Paper List, etc.)	<input type="checkbox"/> Paper List (PDF File)
	<input type="checkbox"/> Other _____

Voter Information									
<p>Your voter list will automatically include the following voter information:</p> <ul style="list-style-type: none">✓ Name✓ Residence Address (+ County)✓ Party Affiliation✓ Status (Active or Inactive)✓ Registration Date	<p>Select any additional voter information you want to include in your voter list.</p> <table border="0"><tr><td><input checked="" type="checkbox"/> Birthdate</td><td><input type="checkbox"/> State Senate District</td></tr><tr><td><input checked="" type="checkbox"/> Mailing Address</td><td><input type="checkbox"/> State Delegate District</td></tr><tr><td><input checked="" type="checkbox"/> Precinct number</td><td><input type="checkbox"/> State Magisterial District</td></tr><tr><td><input type="checkbox"/> Congressional District</td><td><input type="checkbox"/> Other _____</td></tr></table>	<input checked="" type="checkbox"/> Birthdate	<input type="checkbox"/> State Senate District	<input checked="" type="checkbox"/> Mailing Address	<input type="checkbox"/> State Delegate District	<input checked="" type="checkbox"/> Precinct number	<input type="checkbox"/> State Magisterial District	<input type="checkbox"/> Congressional District	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Birthdate	<input type="checkbox"/> State Senate District								
<input checked="" type="checkbox"/> Mailing Address	<input type="checkbox"/> State Delegate District								
<input checked="" type="checkbox"/> Precinct number	<input type="checkbox"/> State Magisterial District								
<input type="checkbox"/> Congressional District	<input type="checkbox"/> Other _____								
Sort Order (If Paper List)									
<p>Enter up to three of the above categories in the order you want to sort your printable voter list.</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>									

<input type="checkbox"/> Statewide Voter Lists			
Select from the options below to receive a statewide voter registration list or subscription:			
<input type="checkbox"/> Election Cycle Subscription Service	\$1000	<input checked="" type="checkbox"/> Statewide Early Voters List	\$200
		<input type="checkbox"/>update (\$25/hour)	
<input checked="" type="checkbox"/> Statewide Voter Registration List	\$500	<input type="checkbox"/> Statewide Absentee Requests List	\$200
<input type="checkbox"/>update (\$25/hour)		<input type="checkbox"/>update (\$25/hour)	
<input checked="" type="checkbox"/> Master Voter History List Export	\$500	<input type="checkbox"/> Statewide Absentee Received List	\$200
<input type="checkbox"/>update (\$25/hour)		<input type="checkbox"/>update (\$25/hour)	



Office of the West Virginia Secretary of State

☐ **Partial Voter List \$25/hour**

The price of a partial voter registration list is based on the current hourly rate as determined by the Secretary of State. The staff generating your request will contact you with an estimate of the number of hours needed to fulfill your request. Follow the steps below to complete your partial voter registration list request.

1. Select ONE of the categories below and enter the jurisdiction OR district of your choice.

- ☐ Partial Statewide Voter Registration List*
- ☐ Countywide Voter Registration List for _____ Co.
- ☐ District Voter Registration List
- WV House of Delegates District _____
 - WV Senate District _____
 - US Congressional District _____
- ☐ Municipal Voter Registration List for _____ Co.
- ☐ Precinct Voter Registration List for Pct. _____ Co.

*If you select the Partial Statewide Voter Registration List, you must filter your list below. Go to the section for Statewide Voter Lists if you want a full list of registered voters in the state.

2. Do you want all registered voters in the jurisdiction or district selected above?

- ☐ Yes (proceed to number 4)
- ☐ No, filter my list

3. If you choose to filter your list, please select the voters you want to include.

Political Party

- ☐ Democrat
- ☐ Libertarian
- ☐ Mountain
- ☐ Republican
- ☐ Other
- ☐ All of the above

Voter Registration Status

- ☐ Active voters
- ☐ Inactive voters
- ☐ Both Active and Inactive voters

Voter History (optional)

4. If want to include voter history in your voter registration list, please enter the elections you want to include.

Election: Presidential Year: 2016

Election: Presidential Year: 2012

Election: Presidential Year: 2008

5. OR if you want your list to only include the voters you selected above who voted in a specific election, early voted, or participated in mail-in absentee voting, select from the options below.

- ☐ Voter History List Election: _____ Year: _____
- ☐ Early Voters List Election: _____ Year: _____
- ☐ Absentee Requests List Election: _____ Year: _____
- ☐ Absentee Received List Election: _____ Year: _____



Office of the West Virginia Secretary of State

☐ **Complex Research Query**

If you have a more complex data request, please describe your request in detail below. Attach additional pages if needed.

N/A

Purchaser Contact Information

Name: Kris Palmer

Phone: 202.501.0525

Address: 1800 F Street, NW

E-mail: kris.palmer@gsa.gov

Washington DC 20405

Method of Delivery

☐ I will pick up my order at the WV Secretary of State's Office

Ship my order to:

☐ Same as contact information

E-mail my order to:

☐ Same as contact information

☐ Address: _____

☒ E-mail: _____

(b) (6)

The statement below must be completed before purchasing a voter list from the West Virginia Secretary of State's office:

I, Kris L Palmer for GSA/Presidential Advisory Commission
(name of purchaser) (organization, if any)

understand that West Virginia law prohibits the sale and use of the list of registered voters for commercial or charitable solicitations or advertising, and that I or my organization may not sell the list or reproduce it for resale. I hereby certify that the purposes for which the names and addresses of voters will be used are not in violation of this prohibition.

Signature

(b) (6)

Date: _____

9/5/17

Election
Integrity

United States Government
Interagency Agreement (IAA) – Agreement Between Federal Agencies
General Terms and Conditions (GT&C) Section

IAA Number _____ - 0000 - _____
 GT&C # _____ Order # Amendment/Mod # _____

DEPARTMENT AND/OR AGENCY

1.	Requesting Agency of Products/Services	Servicing Agency Providing Products/Services
	Name Office of the Vice President	General Services Administration Office of Governmentwide Policy
	Address 725 17th Street, NW Washington, DC 20503	1800 F Street, NW Washington, DC 20405

2. Servicing Agency Agreement Tracking Number (Optional) _____

3. Assisted Acquisition Agreement Yes ☐ No ☒

4. GT&C Action (Check action being taken)

☒ **New**

☐ **Amendment** – Complete only the GT&C blocks being changed and explain the changes being made.

☐ **Cancellation** – Provide a brief explanation for the IAA cancellation and complete the effective End Date.

5. Agreement Period Start Date _____ Last Signature _____ End Date 09-30-2019 of IAA or effective cancellation date
 MM-DD-YYYY MM-DD-YYYY

6. Recurring Agreement (Check One) A Recurring Agreement will continue, unless a notice to discontinue is received.

Yes ☐ If Yes, is this an: Annual Renewal ☐
 Other Renewal ☐ State the other renewal period: _____

No ☒

7. Agreement Type (Check One) ☒ Single Order IAA ☐ Multiple Order IAA

8. Are Advance Payments Allowed for this IAA (Check One) ☐ Yes ☒ No

If Yes is checked, enter Requesting Agency's Statutory Authority Title and Citation

Note: Specific advance amounts will be captured on each related Order.

United States Government
Interagency Agreement (IAA) – Agreement Between Federal Agencies
General Terms and Conditions (GT&C) Section

IAA Number _____ - 0000 - _____
 GT&C # _____ Order # Amendment/Mod # _____

9. Estimated Agreement Amount (The Servicing Agency completes all information for the estimated agreement amount.)

(Optional for Assisted Acquisitions)

Direct Cost	\$359,000.00
Overhead Fees & Charges	\$0.00
Total Estimated Amount	\$359,000.00

Provide a general explanation of the Overhead Fees & Charges

10. STATUTORY AUTHORITY

a. Requesting Agency's Authority (Check One)

Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority

b. Servicing Agency's Authority (Check One)

Franchise Fund	Revolving Fund	Working Capital Fund	Economy Act (31 U.S.C. 1535/FAR 17.5)	Other Authority
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority

11. Requesting Agency's Scope (State and/or list attachments that support Requesting Agency's Scope.)

To the extent permitted by law, and subject to the availability of appropriations, the General Services Administration, the Office of Government-wide Policy shall provide the Commission with such administrative services, funds, facilities, staff, equipment, and other support services as may be necessary to carry out its mission on a reimbursable basis.

12. Roles & Responsibilities for the Requesting Agency and Servicing Agency (State and/or list attachments for the roles and responsibilities for the Requesting Agency and the Servicing Agency.)

Insofar as the Federal Advisory Committee Act, as amended (5 U.S.C. App.) (the "Act"), may apply to the Commission, any functions of the President under that Act, except for those in section 6 of the Act, shall be performed by the Administrator of General Services.

United States Government
Interagency Agreement (IAA) – Agreement Between Federal Agencies
General Terms and Conditions (GT&C) Section

IAA Number _____ - 0000 - _____
 GT&C # _____ Order # _____ Amendment/Mod # _____

13. Restrictions (Optional) (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA).
 The Commission shall terminate within 30 days after it presents its final report to the President, consistent with the Presidential Executive Order on the Establishment of Presidential Advisory Commission on Election Integrity of May 11, 2017.

14. Assisted Acquisition Small Business Credit Clause (The Servicing Agency will allocate the socio-economic credit to the Requesting Agency for any contract actions it has executed on behalf of the Requesting Agency.)

15. Disputes: Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume I, Part 2, Chapter 4700, Appendix 10; Intragovernmental Business Rules.

16. Termination (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)

30

If this agreement is canceled, any implementing contract/order may also be canceled. If the IAA is terminated, the agencies shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.

If the Servicing Agency incurs costs due to the Requesting Agency's failure to give the requisite notice of its intent to terminate the IAA, the Requesting Agency shall pay any actual costs incurred by the Servicing Agency as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.

17. Assisted Acquisition Agreements – Requesting Agency's Organizations Authorized To Request Acquisition Assistance for this IAA. (State or attach a list of Requesting Agency's organizations authorized to request acquisition assistance for this IAA.)
 NA

18. Assisted Acquisition Agreements – Servicing Agency's Organizations authorized to Provide Acquisition Assistance for this IAA. (State or attach a list of Servicing Agency's organizations authorized to provide acquisition for this IAA.)
 NA

19. Requesting Agency Clause(s) (Optional) (State and/or attach any additional Requesting Agency clauses.)

United States Government
Interagency Agreement (IAA) – Agreement Between Federal Agencies
General Terms and Conditions (GT&C) Section

IAA Number _____ - 0000 - _____
 GT&C # _____ Order # _____ Amendment/Mod # _____

20. Servicing Agency Clause(s) (Optional) (State and/or attach any additional Servicing Agency clauses.)

N/A

21. Additional Requesting Agency and/or Servicing Agency Attachments (Optional) (State and/or attach any additional Requesting Agency and/or Servicing Agency attachments.)

N/A

22. Annual Review of IAA

By signing this agreement, the parties agree to annually review the IAA if the agreement period exceeds one year. Appropriate changes will be made by amendment to the GT&C and/or modification to any affected Order(s).

AGENCY OFFICIAL

The Agency Official is the highest level accepting authority or official as designated by the Requesting Agency and Servicing Agency to sign this agreement. Each Agency Official must ensure that the general terms and conditions are properly defined, including the stated statutory authorities, and, that the scope of work can be fulfilled per the agreement.

The Agreement Period Start Date (Block 5) must be the same as or later than the signature dates.

Actual work for this IAA may NOT begin until an Order has been signed by the appropriate individuals, as stated in the Instructions for Blocks 37 and 38.

23.	Requesting Agency	Servicing Agency
Name	Katherine Purucker	Allison Brigati
Title	Director of Administration	Associate Administrator, OGP
Telephone Number(s)	(b)(6)	
Fax Number		
Email Address	(b)(6)	allison.brigati@gsa.gov
SIGNATURE	(b)(6)	(b)(6)
Approval Date	07-13-2017	7/13/2017

United States Government
Interagency Agreement (IAA) – Agreement Between Federal Agencies
Order Requirements and Funding Information (Order) Section

IAA Number SPEI17C001037 - 000 - 01 Servicing Agency's Agreement
GT&C # Order # Amendment/Mod # Tracking Number (Optional) _____
MBOGP-OVPSPEI17C001

PRIMARY ORGANIZATION/OFFICE INFORMATION

24.	Requesting Agency	Servicing Agency
Primary Organization/Office Name	Office of the Vice President	General Services Administration Office of Governmentwide Policy
Responsible Organization/Office Address	725 17th Street, NW Washington, DC 20503	1800 F Street, NW Washington, DC 20405

ORDER/REQUIREMENTS INFORMATION

25. Order Action (Check One)

 New

☒ **Modification (Mod)** – List affected Order blocks being changed and explains the changes being made. For Example: for a performance period mod, state new performance period for this Order in Block 27. **Fill out the Funding Modification Summary by Line** (Block 26) if the mod involves adding, deleting or changing **Funding for an Order Line**. This is a zero dollars modification. This agreement adjusts accounting classification data for this customer order between OEP/QVP and GSA.

☐ **Cancellation** – Provide a brief explanation for Order cancellation and fill in the Performance Period End Date for the effective cancellation date.

26. Funding Modification Summary by Line	Line # _____	Line # _____	Line # _____	Total of All Other Lines (attach funding details)	Total
Original Line Funding	\$ 215,000.00	\$	\$	\$	\$215,000.00
Cumulative Funding Changes From Prior Mods [addition (+) or reduction (-)]	\$	\$	\$	\$	\$ 0.00
Funding Change for This Mod	\$0.00	\$	\$	\$	\$ 0.00
TOTAL Modified Obligation	\$ 215,000.00	\$ 0.00	\$0.00	\$ 0.00	\$215,000.00
Total Advance Amount (-)	\$	\$	\$	\$	\$ 0.00
Net Modified Amount Due	\$ 215,000.00	\$0.00	\$0.00	\$ 0.00	\$215,000.00

27. Performance Period	Start Date	<u>Last Signature</u>	End Date	<u>09-30-2017</u>
For a performance period mod, insert the start and end dates that reflect the new performance period.		MM-DD-YYYY		MM-DD-YYYY

IAA Order

 IAA Number SPEI17C001037 - 000 - 01
 GT&C # Order # Amendment/Mod #

 Servicing Agency's Agreement
 Tracking Number (Optional) MBOGP-OVPSPEI17C001

28. Order Line/Funding Information										Line Number _____							
				Requesting Agency Funding Information						Servicing Agency Funding Information							
ALC		11-03-0001								47-00-0016							
Component TAS Required by 10/1/2014	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	E POA	A	MAIN	SUB	
			011	2016	2017		0037	000			047				4540	001	
OR Current TAS format										47X4540.001							
BETC		DISB								COLL							
Object Class Code (Optional)																	
BPN		031649358								964253686							
BPN + 4 (Optional)																	
Additional Accounting Classification/Information (Optional)		(b) (4)															
Requesting Agency Funding Expiration Date 09-30-2017 MM-DD-YYYY									Requesting Agency Funding Cancellation Date 09-30-2022 MM-DD-YYYY								
The Presidential Advisory Commission on Election Integrity																	
Project Number & Title																	
Description of Products and/or Services, including the Bona Fide Need for this Order (State or attach a description of products/services, including the bona fide need for this Order.) Support activities consistent with the Presidential Executive Order on the Establishment of Presidential Advisory Commission on Election Integrity of May 11, 2017.																	
North American Industry Classification System (NAICS) Number (Optional) _____																	
Breakdown of Reimbursable Line Costs									OR Breakdown of Assisted Acquisition Line Cost:								
Unit of Measure								Contract Cost		\$							
Quantity		Unit Price		Total				Servicing Fees		\$							
1		\$0.00		\$ 0.00				Total Obligated Cost		\$ 0.00							
Overhead Fees & Charges				\$ 0.00				Advance for Line (-)		\$							
Total Line Amount Obligated				\$ 0.00				Net Total Cost		\$ 0.00							
Advance Line Amount (-)				\$ 0.00				Assisted Acquisition Servicing Fees Explanation									
Net Line Amount Due				\$ 0.00													
Type of Service Requirements																	
<input type="checkbox"/> Severable Service <input type="checkbox"/> Non-severable Service <input checked="" type="checkbox"/> Not Applicable																	

IAA Order

IAA Number SPEI17C001037 - 000 - 01
 GT&C # Order # Amendment/Mod #

Servicing Agency's Agreement
 Tracking Number (Optional) MBOGP-OVPSPEI17C001

35. Funding Clauses/Instructions (Optional) (State and/or list funding clauses/instructions.)

36. Delivery/Shipping Information for Products (Optional)

Agency Name	
Point of Contact (POC) Name & Title	
POC Email Address	
Delivery Address /Room Number	
POC Telephone Number	
Special Shipping Information	

APPROVALS AND CONTACT INFORMATION
37. PROGRAM OFFICIALS

The Program Officials, as identified by the Requesting Agency and Servicing Agency, must ensure that the scope of work is properly defined and can be fulfilled for this Order. The Program Official may or may not be the Contracting Officer depending on each agency's IAA business process.

	Requesting Agency	Servicing Agency
Name	Katie Purucker	Allison Brigati
Title	Director of Administration	Associate Administrator, OGP
Telephone Number	(b)(6)	
Fax Number		
Email Address	(b)(6)	allison.brigati@gsa.gov
SIGNATURE	(b)(6)	<small>Digitally signed by ALLISON BRIGATI DN: cn=US, o=U.S. Government, ou=General Services Administration, cn=ALLISON BRIGATI, 0.9.23.2.15000300.100.1.1= 7001003 5 073 Date: 2017.07.25 15: 25 -0 102</small>
Date Signed	07-12-2017	07-25-2017

38. FUNDING OFFICIALS - The Funds Approving Officials, as identified by the Requesting Agency and Servicing Agency, certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order. The Requesting Agency Funding Official signs to obligate funds. The Servicing Agency Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Requesting Agency, in accordance with the agreement.

	Requesting Agency	Servicing Agency
Name	Katie Purucker	Stefan Grabas
Title	Director of Administration	Funding Official
Telephone Number	(b)(6)	(202) 501-0254
Fax Number		
Email Address	(b)(6)	stefan.grabas@gsa.gov
SIGNATURE	(b)(6)	<small>Digitally signed by STEFAN GRABAS DN: cn=US, o=U.S. Government, ou=General Services Administration, cn=STEFAN GRABAS, 0.9.23.2.15000300.100.1.1= 700100282578 Date: 2017.07.25 09:31:3 -0 00</small>
Date Signed	07-25-2017	07-25-2017

