

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

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

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AUTHORIZATION

Document Summary for TA0002DDG (View Only)

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Receipts

Manage receipts or other document attachments: View Receipts

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∧ Totals	Total Reimbursable: 275.50
Disbursement Type	Amount
Estimated Cost	500.95
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Trip Comments		No Comments Entered

Document S	tatus		Current Status: AUTH APPROVED	Awaiting:	for Status:
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AMOUNT PAID TO TRAVELER \$413.09

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Trip Comments

No Comments Entered

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07-18-17	City Tax 8.5%		14.62	
07-18-17	Occupancy Tax		1.00	
07-19-17	MasterCard			197.94
your accour	or staying with us! Qualifying points for this stay will automatically be credited to t. Please tell us about your stay by writing a review here - ardsclub.com/review. We look forward to welcoming you back soon.	Total	197.94	197.94
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Hotel Indigo Old Town Alexandria 220 South Union Street Alexandria, VA 22314 Telephone: (703) 721-3800 Fax: (703) 721-3801

TO: <u>kris.palmer@gsa.gov</u>

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)	\$197.9 4
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
7/1 9/17	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

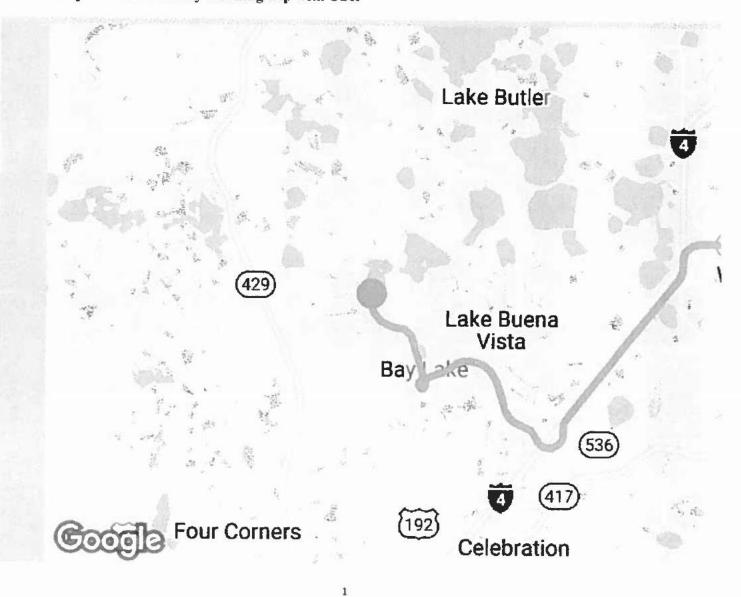
From: Sent: To: Subject: Alan L. King **(b) (6)** Tuesday, July 18, 2017 9:55 AM King, Alan Fwd: Your Tuesday morning trip with Uber

> 7/18/17 ORLANDO HOTEZ TO ORLANDO TINT'L.

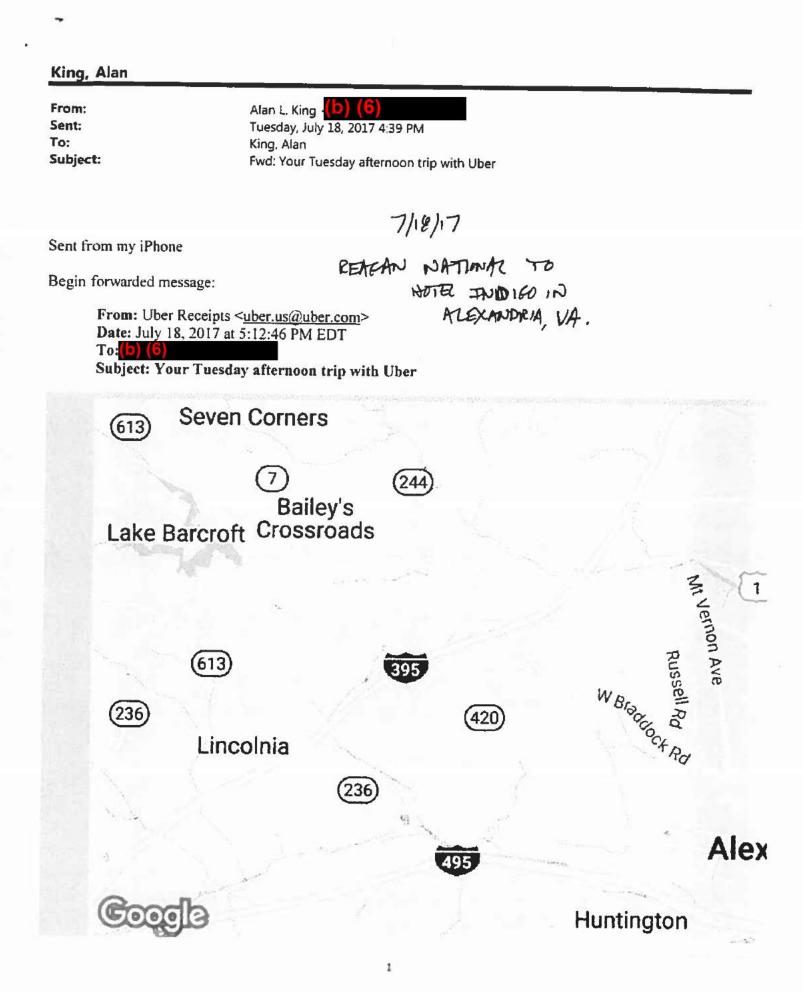
Sent from my iPhone

Begin forwarded message:

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



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\$15.36

Thanks for choosing Uber, Alan July 18, 2017 | uberX

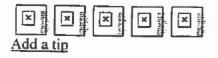


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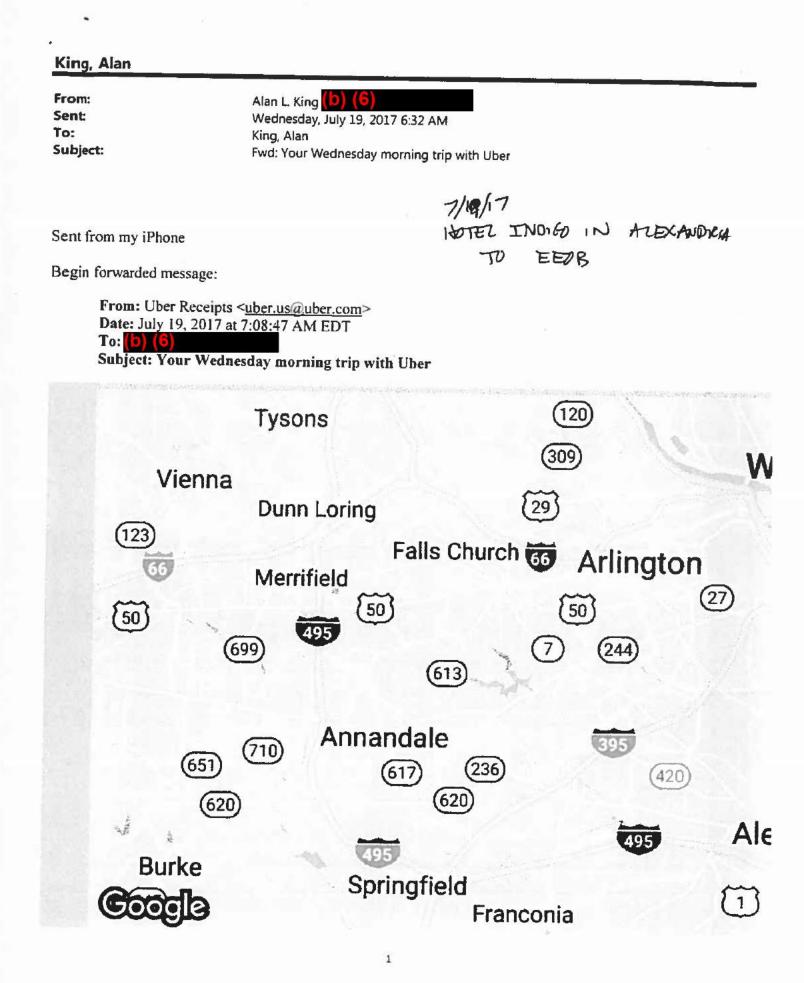
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You rode w 4.78 miles



Your Fare





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King, Alan

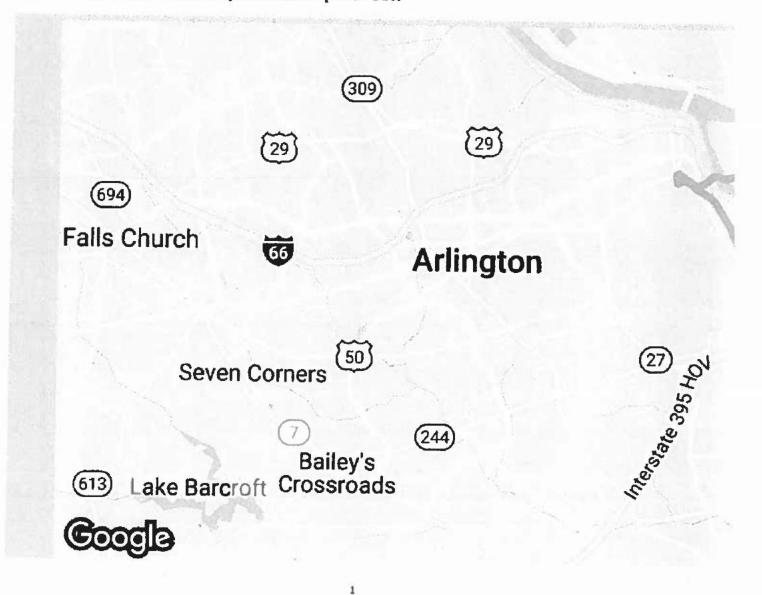
From: Sent: To: Subject: Alan L. King (D) (6) Wednesday, July 19, 2017 2:53 PM King, Alan Fwd: Your Wednesday afternoon trip with Uber

Sent from my iPhone

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

Begin forwarded message:

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



\$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

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King, Alan

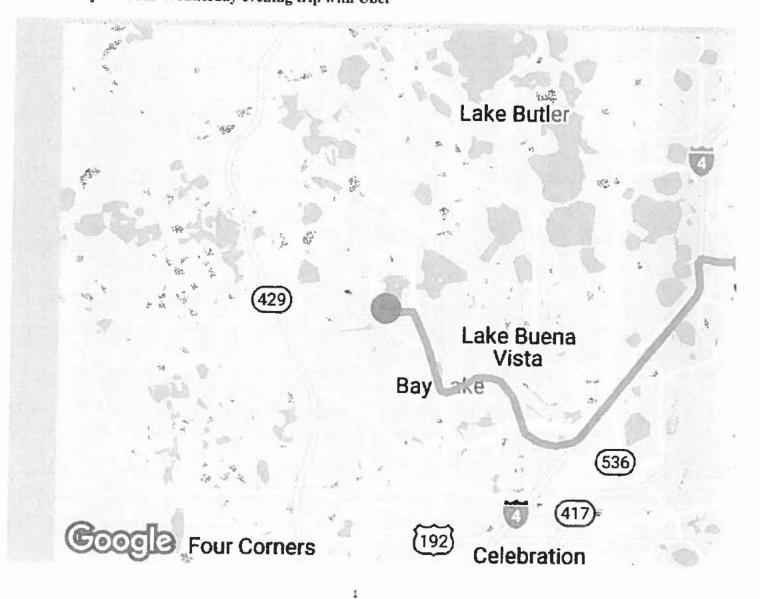
From: Sent: To: Subject: Alan L. King**(b) (6)** Wednesday, July 19, 2017 8:56 PM King, Alan Fwd: Your Wednesday evening trip with Uber

7/19/17 OPLANDU JUTIL. TO HOTEL (POLYNEMO)

Sent from my iPhone

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



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Thanks for choosing Uber, Alan July 19, 2017 | uberX



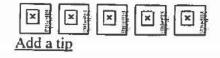
08:34pm | 20 Jeff Fuqua Blvd, Orla

09:09pm | Polynesian Drive, Orland



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You rode w 24.70 miles



Your Fare





AUTHORIZATION

Document Summary for TA0002DAN (View Only)

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Purpose		Alert			From	То	Per Diem			
MISSIOI (OPERA		NL)	WAS DC	HINGTON,	07/18/17	07/19/1	7 172.00/69	0.00 (07/01/	17-08/31/17)	
^ Res	serva	ations					View Reservati	on History	PNR Status	BOOKE
Reserva Type		Vendor/Ca	arrier	Last Date to Ticket		Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM- CARR		American Airlines		7/16/2017 2:50:00 PM EST	447.40		1003284880	07/18/201 16:50	7 214.139999 lbs CO2	Connie S Lawson
COMM- CARR		American Airlines		7/16/2017 2:50:00 PM EST	0.00		1003284880	07/19/201 19:46	7 214.139999 lbs CO2	Connie S Lawson
∧ Exp	oense	es		Total	Per Diem	Expenses	: 275.50 Te	otal Non-Pe	er Diem Expens	es: 496.4
			s		Per Diem ense Des	-	:: 275.50 To Expense Category		er Diem Expens Payment Method	es: 496.4 PerDiem
			, -	ource Exp Esti		cription	Expense		Payment Method	
		Date	17	burce Exp Estin Vou	ense Des mated TD	Y Y Vel Fee	Expense Category	Cost 14.75	Payment Method	
		Date 07/14/201 07/14/201	17 17	burce Exp Estin Vou	ense Des mated TD cher Fee mated Tra	Y Y vel Fee	Expense Category Transxn Fees Travel Transxn	Cost 14.75	Payment Method EFT	
		Date 07/14/201 07/14/201	17 17 ts: LB	ource Exp Estin Vou Estin ATRS Dom	ense Des mated TD cher Fee mated Tra	Y Y vel Fee r-Rail	Expense Category Transxn Fees Travel Transxn	Cost 14.75	Payment Method EFT Invoice	
		Date 07/14/201 07/14/201 Comment	17 17 ts: LB 17	ource Exp Estin Vou Estin ATRS Dom	ense Des mated TD cher Fee mated Tra estic w-Ain ne Flight	vel Fee r-Rail	Expense Category Transxn Fees Travel Transxn Fees	Cost 14.75 34.30	Payment Method EFT Invoice CBA	
		Date 07/14/201 07/14/201 Comment 07/18/201	17 17 ts: LB 17	ource Exp Estin Vou Estin ATRS Dom Airlin	ense Des mated TD cher Fee mated Tra estic w-Ai ne Flight ging	r-Rail	Expense Category Transxn Fees Travel Transxn Fees Com. Carrier	Cost 14.75 34.30 447.40	Payment Method EFT Invoice CBA CASH	PerDiem
		Date 07/14/201 07/14/201 Comment 07/18/201 07/18/201	17 17 ts: LB 17 17	ource Exp Estin Vou Estin ATRS Dom Airlin Lodg	ense Des mated TD cher Fee mated Tra estic w-Air ne Flight ging E	r-Rail	Expense Category Transxn Fees Travel Transxn Fees Com. Carrier Lodging	Cost 14.75 34.30 447.40 172.00	Payment Method EFT Invoice CBA CASH CASH	PerDiem
∧ Exp Details	Alert	Date 07/14/201 07/14/201 Comment 07/18/201 07/18/201 07/18/201	17 17 ts: LB 17 17	ATRS Dom ATRS Dom ATRS Mirlin Lode	ense Des mated TD cher Fee mated Tra estic w-Air ne Flight ging E	r-Rail	Expense Category Transxn Fees Travel Transxn Fees Com. Carrier Lodging M&IE-PerDiem	Cost 14.75 34.30 447.40 172.00 51.75	Payment Method EFT Invoice CBA CASH CASH	PerDiem Yes Yes

^ 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	в	L	D	Conf %
~			07/18/17	69.00	172.00	172.00	51.75	51.75					
\sim			07/19/17	69.00	0.00	0.00	51.75	51.75			17 T		

	Additional Authorizations	Special Autho	rizations Exist
ĺ	Other Authorization	Remarks	
	No hotel required, Non-conventional Lodging Used		
	Contract fare used or No contract fare exists for city-pair market		

~ Ac	ccounting /	Allocations		Accounting T	otal: 771.95
Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational Travel - FY17	(b) (6)	771.95	100.00 %

	Total Reimbursable: 275.50
Disbursement Type	Amount
Estimated Cost	771.95
Advance Requested	0.00

Trip	Comments	

No Comments Entered

Document	Status	Current Sta	g: for Status:	
Document R Name	outing Status	Lev	el	
Document H	istory (Current)		C	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**	mini i antini a difettare de constituir ser adde ser adamendar
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 I	Lawson		ed from reservation - ns updates for tripnum 1
07/14/2017 10:49:27 AM	CREATED	Connie I	Lawson	Auto-created from reservation - NEW DOCUMENT (TA0002DAN)	
Document A	djustments				
	Date	Time	Adju	stor	Remarks
Level					



VOUCHER

AMOUNT PAID TO TRAVELER \$373.90

Document Summary for VCH79025 (View Only)

Fraveler			Irav	eler ID:	E00	045685	Traveler	Name: Conni	e Lawson		Organization	: G5A-M-
へ Docun	nen	it Infor	ma	tion		5 () () () () () () () () () (Currency:	U.S. Doli	ar	Type: INV	
TA Num: TA Document D						•	RATIONAL) Location	Type: CO	UNC	S	
Location Purpose		Alert	Loca	ition		From	То	Per Diem i	Rates			
MISSION (OPERATION	VAL)		WAS DC	HINGTO	DN,	07/18/17	07/19/17	172.00 / 69	9.00 (07/01	/17-	08/31/17)	
^ Reserv	/ati	ons					١	/iew Reservat	ion History		PNR Status	: BOOKE
Reservation Type		ndor/Ca	rrier	Last D to Ticl		Cost	Lodging Location	Ticket #/Res. #	Date & Time		Emissions	Traveler
COMM- CARR		nerican lines		7/16/20 2:50:00 PM ES	0	447.40		1003284880	07/18/20 16:50		194.220001 lbs CO2	Connie S Lawson
001414											The second secon	
		nerican lines		7/16/20 2:50:00 PM ES	D	0.00		1003284880	07/19/20 19:46		194.220001 lbs CO2	Connie S Lawson
CARR	Air	lines		2:50:00 PM ES	D ST		Expenses:		19:46			S Lawson
CARR	Air SeS	lines	S	2:50:00 PM ES To	o ST Stal P Expe	Per Diem	Exp		19:46	Per D Pay	lbs CO2	S Lawson es: 594.8
≻Expens	Air SeS rt D	lines	1	2:50:00 PM ES To	o ST Stal P Expe Desc	Per Diem	Expe	275.50 To ense egory el Transxn	19:46 Dtal Non-F	Per D Pay Met	lbs CO2 Nem Expens	S Lawson
≻Expens	Air Ses rt D	lines Date 7/14/201	7	2:50:00 PM ES To purce	otal P Expe Desc Trave	Per Diem Inse ription	Expo Cate Trav Fees	275.50 To ense egory el Transxn	19:46 Dtal Non-F Cost	Per D Pay Met	lbs CO2 Nem Expens	S Lawson es: 594.8
CARR	Air Ses rt D	lines Date 7/14/201	7 s: LB	2:50:00 PM ES To burce	otal P Expe Desc Trave	Per Diem Inse ription el Fee	Exp Cate Trav Fees -Rail	275.50 To ense egory el Transxn	19:46 Dtal Non-F Cost	Per D Pay Met	lbs CO2 Diem Expens rment thod	S Lawson es: 594.8
CARR	Air Ses rt D 0 C 0	lines Date 7/14/201 Comment	7 s: LB 7	2:50:00 PM ES To purce	otal P Expe Desc Trave	Per Diem Inse Iription I Fee Stic w-Air E Flight	Exp Cate Trav Fees -Rail	275.50 To ense egory el Transxn carrier	19:46 Dtal Non-F Cost 34.30	Per D Pay Met Invo	lbs CO2 Nem Expens Iment thod Dice	S Lawson es: 594.8
CARR	Air Ses rt D 0 C 0 0	lines 20ate 7/14/201 20mment 7/18/201 7/18/201	7 s: LB 7 1 7	2:50:00 PM ES To Durce	o btal P Expe Desc Trave Dome Airlin Lodgi	Per Diem Inse Iription I Fee Stic w-Air Istic w-Air Ing	Expo Cate Trav Fees -Rail Com Lodg	275.50 To ense egory el Transxn carrier	19:46 Dtal Non-F Cost 34.30 447.40 172.00	Per D Pay Met Invo	lbs CO2 Diem Expens Yment thod Dice A SH	S Lawson es: 594.8 PerDiem
> Expens	Air Ses rt D 0 C 0 0 0 0	lines 20ate 7/14/201 20mment 7/18/201 7/18/201	7 5: LB 7 7 aymer	2:50:00 PM ES To Durce	D ST Expe Desc Trave Dome Airlind Lodgi	Per Diem ription el Fee stic w-Air e Flight ing this expe	Expo Cate Trav Fees -Rail Com Lodg	275.50 To ense gory el Transxn carrier	19:46 Dtal Non-F Cost 34.30 447.40 172.00	Per D Pay Met Invo	lbs CO2 Diem Expens Yment thod Dice A SH	S Lawson es: 594.8 PerDiem
CARR Expense Details Aler Aler	Air Ses rt D 0 C 0 0 0 R	ate 7/14/201 comment 7/18/201 7/18/201 Pefault Pa	7 s: LB 7 7 aymen	2:50:00 PM ES To burce	o tal P Expe Desc Trave Airlin Lodgi od for s exp	Per Diem ription el Fee stic w-Air e Flight ing this expe	Expo Cate Trav Fees -Rail Com Lodg	275.50 To ense egory el Transxn . Carrier ing eing used. Ple	19:46 Dtal Non-F Cost 34.30 447.40 172.00	Per D Pay Met Invo CB/ CAS for a	lbs CO2 Nem Expens Iment thod Dice A SH accuracy.	S Lawson es: 594.8 PerDiem
CARR CARR Details Aler Aler	Air Ses rt D 0 C 0 0 0 R 0 0	Date 7/14/201 Comment 7/18/201 7/18/201 Default Pa Receipt re 7/18/201	7 s: LB 7 7 aymer equire 7	2:50:00 PM ES To burce	otal P Expe Desc Trave Oome Airlin Lodgi od for s exp	Per Diem inse ription el Fee stic w-Air e Flight ing this expe ense ing Tax	Expo Cate Trav Fees -Rail Com Lodg ense is not b	275.50 To ense egory el Transxn . Carrier ing eing used. Ple	19:46 Dtal Non-F Cost 34.30 447.40 172.00 Dease verify 24.94	Per D Pay Met Invo CB/ CAS for a	lbs CO2 Diem Expens Vment thod Dice A SH accuracy.	S Lawson es: 594.8 PerDiem
A	Air Ses rt D 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Date 7/14/201 Comment 7/18/201 7/18/201 Default Pa Receipt re 7/18/201	7 s: LB 7 7 aymer 2 aymer 7	2:50:00 PM ES To Durce	otal P Expe Desc Trave Oome Airlin Lodgi od for s exp	Per Diem inse ription el Fee stic w-Air e Flight ing this expe ense ing Tax this expe	Expo Cate Trav Fees -Rail Com Lodg ense is not b	275.50 To ense gory el Transxn carrier ing eing used. Ple	19:46 Dtal Non-F Cost 34.30 447.40 172.00 Dease verify 24.94	Per D Pay Met Invo CB/ CAS for a	lbs CO2 Diem Expens yment thod Dice A SH accuracy. SH accuracy.	S Lawson es: 594.8 PerDiem

	07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Ye
	07/19/2017	Taxi	Transportation	51.16	CASH	
	Verify travel mod	e is accurate.			denne dhanak ar a manak manananan , ma,	
A	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	Per Diem Allowances Total Per Diem Allowance: 275.5								275.50				
Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	в	L	D	Conf %
\sim			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					ramanii aaraanayaana. 35.

^ Accounting Allocations				Accounting Total: 8				
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	Status	Level				

Document	History	(Current)
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Document History (Current)			Displa	ay Full Histor	
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 3:22:09 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**		
07/27/2017 3:15:52 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**		
07/27/2017 3:01:22 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002DAN)		
ocument	Adjustment	s			
_evel	Date	Time	Adjustor Rema	rks	
3	08/01/17	7:36AM	KRIS PALMER **		

2 07/27/17 VALERIE WHITTINGTON 11:12AM

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



				07-19-17
Connie	Lawson Folio No. :		Room No. :	207
	A/R Number :		Arrival :	07-18-17
	Group Code :		Departure :	07-19-17
onned	Company :		Conf. No. :	67186323
	Membership No. : PC (b) (6)		Rate Code :	IMGOV
	Invoice No.		Page No. :	1 of 1
Date	Description		Charges	Credits
07-18-17	*Accommodation		172.00	
7-18-17	State Tax 6%		10 32	
17-18-17	City Tax 8.5%		14 62	
7-18-17	Occupancy Tax		1.00	
17-19-17	American Express			197.94
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tall us about your stay by writing a review here -		^{d to} Total	197.94	197.94
in a million	wardsclub.com/review. We look forward to welcoming you back soon.	Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown heron. Lagree that my liability for this bill is not walved 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

Taxi Cab Receipt <u>25 pm</u> <u>Peterul</u> <u>legandulo</u> TIME: DATE: TRIP ORIGIN: DESTINITION: 22.30 FARE: \$ SIGNATURE:

- PI VINO CODE RELEITI

* сору * Alexandria Yellow Ca5 #189 (703) 549-2500 Alexandria. VA 07/19/17 07:36

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

FARE:\$ 24.24 TIP:5 3.64 EXTRAS:\$ 0.00

TOTAL: \$ 27. 88 CARD BAL OWED:\$ 0.00

XXXX2007 WID445100001996 AUTHCIL IAhGTaGO3LaAMHFpCADIvr8E

SIGN HERE:

4 WAYS TO BOOK A RIDE:

- Call (703) 549-2500

- AlexandriaYellowCab. com

- Download gocurb. com/app

CARD: 2067 AUTH: 8279/1

--ORIGINAL--CLASSIC CAB

CUSTOMER COPY 07/19/17 TR 1865

START END MILIS

14:39 15:00 5.9

FARE: \$ 19.18 EXTRA: \$

\$

TOTAL: \$ (23.78)

0.00

0,00

0.75

3.85

REGULAR FARE

TDLL: \$

SRCH: \$

TIP:

CAB # F938

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



AUTHORIZATION

Document Summary for TA0002DAX (View Only)

Travelei	•			Travele	r ID:	E000456	584 Tra	vel	er Name: Dav	/id Dunn	/ c	Organization	GSA-M-
^ Docu TA Num: 1	-A00	02DAX	Pur	pose: I			ERATIONA	AL)	Currency: Location			Type: INVI	TATIONA
Document	Det	ails: PEC		IMITTE	ΕM	EETING							
Location Purpose		Alert	Loca	tion		From	То		Per Diem Rat	tes			
			WASI DC	HINGTO	N,	07/18/17	07/20/17	7	172.00 / 69.00) (07/01/1	7-08	9/31/17)	
^ Rese	rva	tions		5 · · · · · · · · · · · · · · · · · · ·			4 - 14	Vi	ew Reservatio	n History		PNR Status:	BOOKE
Reservatio Type		/endor/C	arrier	Last Date f Ticke		Cost	Lodging Location		Ticket #/Res. #	Date & Time		Emissions	Travele
LODGE	ŀ	lilton		7/16/2 10:00: AM ES	00	430.00	Capital Hilton Washingto DC,DC	on,	1003285176	07/18/2 00:00	017	N/A	David K Dunn
COMM- CARR		merican Airlines		7/16/2 10:00: AM ES	00	448.90			1003285176	07/18/2 11:00	017	326.799988 lbs CO2	David K Dunn
COMM- CARR		American Airlines		7/16/2 10:00: AM ES	00	0.00	-		1003285176	07/20/20 11:27	017	326.799988 lbs CO2	David K Dunn
^ Exper	nse	S		T.	otal	Per Diem	I Expense			al Non-P	er D	iem Expense	s: 497.9
Details Al	ert	Date	s	ource	Ехр	ense Des	scription	Ex _[Cat	pense tegory	Cost	Pay Mei	/ment thod	PerDiem
		07/14/20	17			mated TD cher Fee			nsxn Fees	14.75	EFT	1	
		07/14/20	17		Esti	mated Tra		Tra Fee	vel Transxn es	34.30	Invo	bice	
		Commer	nts: LB	ATRS	Dom	estic w-Ai	ir-Rail			-shiddle adaram samainin		1993, BBLA ABA AA Bu-RAu-sia - announces - announces	
		07/18/20	17	ŀ	Airli	ne Flight		Cor	m. Carrier	448.90	CB	4	
		07/18/20	17		Lod	ging		Loc	lging	215.00	CAS	SH	Yes
	ir era alleranardi i	Commer	nts: Co	onf Num:	335	9568094	Cmt: Must	car	icel 2 day(s) p	rior to arr	ival.		
		07/18/20	17			ging Ower reler	d by	Lod	lging	-43.00	CAS	SH	Yes
							and the second sec						
		07/18/20	17		M&I	E	0.00	M&	IE-PerDiem	51.75	CAS	SH '	Yes

Comments: Cont	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	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	в	L	D	Conf %
\sim			07/18/17	69.00	215.00	172.00	51.75	51.75					
\sim			07/19/17	69.00	215.00	172.00	69.00	69.00					
\sim			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	

^ A	ccounting /	Allocations		Accounting Tol	tal: 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

Page 3 of 3

Trip Comments

No Comments Entered

Document	Status	Curre	ent Status: AUTH	APPROVED Awaiting:	for Status:
Document R Name	outing Status		Level		
Document H	istory (Current)			Disp	lay Full Histor
Date/Time	Status	Name	Remarks	6	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, KR	RIS L **AUTO APPLIED	SIGNATURE WAS	
07/14/2017 11:57:23 AM	SUBMIT TO APPROVER	PALMER, KR	RIS L **AUTO APPLIED	SIGNATURE WAS	
07/14/2017 11:26:45 AM	RESERVATIONS UPDATED	David Dunn		lated from reservation - tions updates for tripnum 1	
07/14/2017 11:26:15 AM	CREATED	David Dunn		ated from reservation - NEW ENT (TA0002DAX)	V
Document A	djustments				
Level	Date	Time	Adjustor	Remarks	
1			**		
-			· · · · · · · · · · · · · · · · · · ·		



VOUCHER

AMOUNT PAID TO TRAVELER \$562.81

Document Summary for VCH78854 (View Only)

					mighted daminated which also and and				11	ip No. 1	
Travele	r		Trav	eler 1D	: E000456	684 Trav	Organization	Organization: GSA-M-2			
∧ Docι	Jme	ent Inforr	natio	n			Currency:	U.S. Dolla	ar Type: INV	ITATIONA	
TA Num: ⁻ Document		002DAX ails: PECI (*		-	ERATIONAL	-) Location	Type: CC	NUS		
Location Purpose		Alert Lo	cation		From	То	Per Diem Ra	tes			
		W. DC	ASHING C	STON,	07/18/17	07/20/17	172.00 / 69.0	0 (07/01/1	7-08/31/17)		
∧ Rese	erva	itions					View Reservation	on History	PNR Status	BOOKEI	
Reservatio Type		Vendor/Car	Da	ist ite to cket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Travele	
LODGE	I	Hilton	10	16/2017 :00:00 / EST	430.00	Capital Hilton Washington DC,DC	1003285176 n,	07/18/2 00:00	017 N/A	David K Dunn	
COMM- CARR		American Airlines	10	16/2017 :00:00 / EST	448.90		1003285176	07/18/2 11:00	017 296.39999 lbs CO2	4 David K Dunn	
COMM- CARR		American Airlines	10	16/2017 :00:00 1 EST	0.00	5	1003285176	07/20/2 11:27	017 296.39999 lbs CO2	4 David K Dunn	
^ Expe	nse	es		Tota	l Per Diem	1 Expenses	: 516.50 To	tal Non-P	er Diem Expens	ses: 544.2	
Details A	lert	Date	Sour		pense scription		kpense ategory	Cost	Payment Method	PerDiem	
		07/14/2017		Tra	vel Fee		avel Transxn ees	34.30	Invoice		
		Comments	LB AT	RS Dor	nestic w-A	ir-Rail		P			
		07/18/2017	Ŧ	Air	line Flight	Co	om. Carrier	448.90	CBA		
		07/18/2017		Loc	dging	Lo	dging	215.00	CASH	Yes	
	4	Default Pay	ment N	lethod t	or this exp	ense is not	being used. Plea	ase verify	for accuracy.		
	A .	Receipt rec	uired fo	r this e	xpense						
		Comments	Conf N	lum: 33	59568094	Cmt: Must	cancel 2 day(s) (prior to an	ival.		
		07/18/2017			dging Owe	d by La	dging	-43,00	CASH	Yes	

https://cge.concursolutions.com/UI/TAVS/Proxy/WService=pc000088/docprep/summary.... 8/10/2017

	A	Default F	ayment Me	thod for thi	s expense	is not being	used. Plea	se verify f	or accur	acy.			
		07/18/20	17	M&IE		M&IE-Pe	rDiem	51.75	CASH			Ye	s
		07/19/20	17	Lodging		Lodging		215.00	CASH			Ye	S
	▲	Default F	ayment Me	thod for thi	s expense i	is not being (used. Plea	se verify fo	or accur	асу.			
	A	Receipt I	equired for	this expens	e								r e ranke an
i - or on - dir ann ain annai - anna		Commer	its: Conf Nu	m: 335956	8094 Cmt:	Must cancel	2 day(s) p	rior to arriv	/al.				
		07/19/20	17	Lodging Traveler	Owed by	Lodging		-43.00	CASH			Ye	S
	A	Default F	ayment Mel	hod for thi	s expense i	is not being (used. Plea	se verify fo	or accur	асу.			
		07/19/20	17	Lodging	Tax	Lodging		24.94	CASH				
	A	Default P	ayment Mel	hod for thi	s expense i	s not being (used. Plea	se verify fo	or accura	acy.			
		07/19/20	17	M&IE		M&IE-Pe	rDiem	69.00	CASH			Ye	s
		07/20/20	17	M&IE		M&IE-Pe	rDiem	51.75	CASH			Ye	S
		07/20/20	17	Taxi		Transpor	tation	21.37	CASH				- 9
	▲	Verify tra	vel mode is	accurate.									
		07/25/20	17	TDY Vol	icher Fee	Transxn	Fees	14.75	EFT				
Recei	pts				0 (20 mm)	9-1994 fl-99-98-98-intervent s							
lanage	receipts	or other d	locument at	achments:	View	Receipts			101 A . B . L . A				
^ Per	Dier	n Allow	ances			h-d-differ H-field - Same Associations		Total Per	Diem A	llow	/an	ce:	516.5
	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Alfowed	Spec	в	L	D	Conf %
Details			07/18/17	69.00	215.00	172.00	51.75	51.75		5	ē		1
				69.00	215.00	172.00	69.00	69.00					8.64 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			07/19/17	05.00									
~	namen an		07/19/17 07/20/17	69.00	0.00	0.00	51.75	51.75			_	9	

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	<mark>.562.81</mark>

Trip	Comments
------	----------

View Comment History No Comme

No Comments Entered

Documen	nt Status		Current Status: CLOSED Awaiting: for Status
Document Name	Routing	Status	Level
Document Date/Time	History (Cur Status	rent) Name	Display Full Histo 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	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,

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Page 4 of 4	1
-------------	---

			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

(d) Capital Hilton

· NAME AND ADDRESS:

DUNN, DAVID K

CAPITAL HILTON

1001 16th Street | Washington, DC | 20036

T: 202 393 1000 | F: 202 639 5784

W: capital.hllton.com

Rate Plan: G HH # AL: Car:

Confirmation Number: *********

7/19/2017

-

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE	H
7/18/2017	GUEST ROOM	GMEL	7907053	\$215.00			HIJON
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			14
7/19/2017	ROOM TAX	GMEL	7908148	\$31.18			
	WILL BE SETTLED					\$537.51	1.40750 817714 1.0000
	TO VS*3023						
	EFFECTIVE BALANCE					\$0.00	
	OF						CHRAT

(ak) Histori

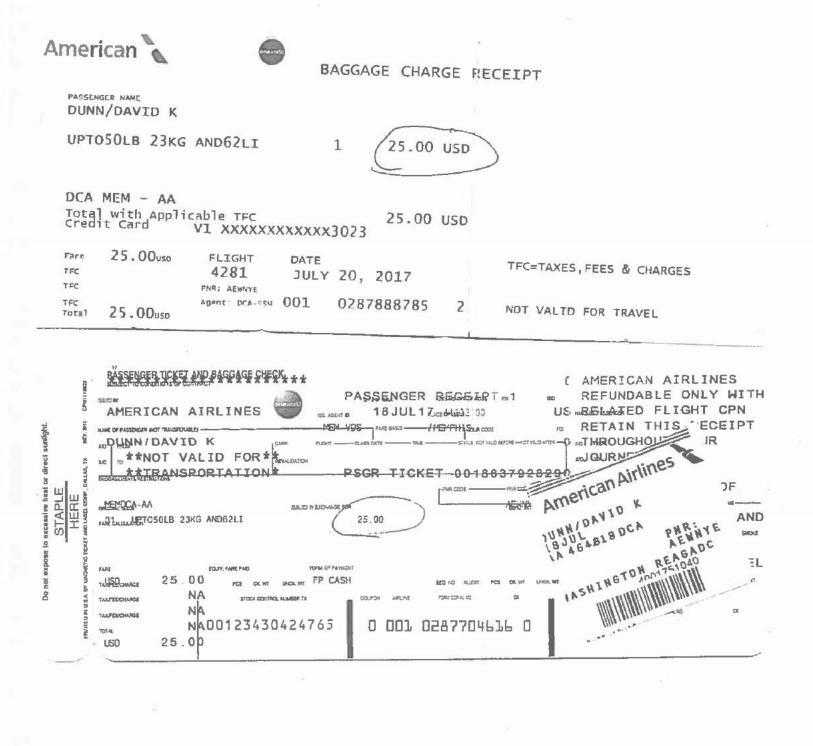


E.

Presenting.

Timer FOLIO NO /CHECK NO. DATE OF CHARGE ACCOUNT NO. 1512261 A INITIAL AUTHORIZATION CARD MEMBER NAME ESTABLISHMENT NO, & LOCATION STABLUMENT ICAS'S TO SMARSHIT TO CAPD INDECT FICE PLYMENT PURCHASES & SERVICES HOWER TAXES TIPS & MISC. A Ros Grant Provident CARD MEMBER'S SIGNATURE TOTAL AMOUNT PAYMENT DUE UPON RECEIPT MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH RETURD.

(1) AMERICAS - EUROPE - MIDDLE EAST - AFRICA - ASIA - AUSTRALASIA



* COPY * HITCH CAB GB67 (202) 810-4482 WASHINGTON, DC 07/20/17 09:52 01ST.... 5.30 FARE...\$ 17.56 TIP....\$ 3.56 TIP....\$ 3.56 TIP....\$ 21.37 VISA XXX6955 MID 445100500997 MID 445100500997 MID 445100500997



AUTHORIZATION

Document Summary for TA0002DE6 (View Only)

Travele	er	19.45, 49.495, 4.49, 4.49, 4.993, 6	T	ravele	r ID:	E0003962	1 Trav	veler Name: K	ris Kobach	Organization	: GSA-M-2
	umei	nt Info	rma	tion				Currency	: U.S. Dolla	r Type: INV	ITATIONAL
TA Num: Documen			-			ION (OPEF	RATIONA	L) Location	Type : CO	NUS	
Location Purpose		Alert	Loca	ition		From	То	Per Diem	Rates		
MISSION (OPERAT	IONAL)	WAS DC	HINGT	ON,	07/18/17	07/19/1	7 172.00/6	9.00 (07/01/	17-08/31/17)	
^ Rese	ervat	ions		1				View Reserva	tion History	PNR Status	: BOOKE C
Reservati Type		endor/Ca	arrier	Last to Tic			Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM- CARR	S	outhwest		7/18/2 2:25:0 AM E	00	478.40		1003289148	07/18/201 09:25	7 406.779999 lbs CO2	Kris Kobach
COMM- CARR	S	outhwest		7/18/2 2:25:0 AM E	00	0.00		1003289148	07/19/201 16:40	7 406.779999 lbs CO2	Kris Kobach
∧ Expe	enses	3		T	otal	Per Diem i	Expenses	:: 275.50 T	otal Non-P	er Diem Expens	es: 527.45
Details A	Alert I	Date	Se	ource	Ехр	ense Desc		Expense Category	Cost	Payment Method	PerDiem
	()7/17/201	7			nated TDY cher Fee		Transxn Fees	14.75	EFT	
	()7/1 7/201	17		Estir	nated Trav		Travel Transxn Fees	34.30	Invoice	
	(Comment	s: LB	ATRS	Dom	estic w-Air-	Rail				
	()7/18/201	7 1	•	Airlir	ne Flight		Com. Carrier	478.40	CBA	
	C	7/18/201	7		Lodg	jing		Lodging	172.00	CASH	Yes
	C	7/18/201	7		M&II	E		M&IE-PerDiem	51.75	CASH	Yes
	C)7/19/201	7		M&I	Ε		M&IE-PerDiem	51.75	CASH	Yes

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 Allowed	Spec	в	. 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				
∧ Ado	lition	al Auth	orization	S				Spei	cial Aut	horiz	ation	s Exis
Other A	uthoriz	ation				Remarks						
			nventional Lo	dging Us	ed							
Contract market	fare us	ed or No	contract fare	exists for	city-pair							
^ Acc	ounti	ing Allo	ocations					A	ccount	ing T	otal:	802.9
Alert C)rganiz	ation La	bel	Classifi	cation Cod	de			Am	ount		ercent ocated
G	SA-M-2	2 Inv	itational	(b)	(6)			-	80	2.95		100.00 %
∧ Tota Disburse Estimate	ement	Туре						łot	al Reim	burs	A	275.50 nount 302.95
Advance	Reque	sted							****		0	0.00
Frip Co	omm	ents		00 -1		View	v Comment	History	No Coi	nmei	nts E	ntered
Docum	nent (Status		annan an star die der barde och ad	Current	Status: A	UTH APPRO	OVED A	waiting		for S	itatus:
)ocum Name	ent Ro	outing	Status			Level						
)ocum	ent Hi	story (C		12					Di	isplay	Full	History
Date/Tim	le	Status		Name	•	Rer	marks				Rea: Desc	
)7/17/20 ⁻):42:44 A		AUTH A	PPROVED	CLINI JONA PATR	THAN		UTO SIGNA PLIED**	TURE WAS	S			
)7/17/20 ⁻):37:17 A		REVIEV	VED	PALM	ER, KRIS I		UTO SIGNA PLIED**	TURE WAS	5			
07/17/20 9:30:37 A		ADJUS	TED	PALM	er, kris i		UTO SIGNA	TURE WAS	3		- lans findle same	

07/17/20 9:29:13		MIT TO ROVER	PALMER, KRIS L	**AUTO SIGNATURE WAS APPLIED**
07/17/20 9:11:24		ERVATIONS	Kris Kobach	Auto-updated from reservation - Reservations updates for tripnum 1
07/17/20 9:11:00		ATED	Kris Kobach	Auto-created from reservation - NEW DOCUMENT (TA0002DE6)
0.11.00				DOCOMENT (TAUGOZDEO)
_	ent Adjust	ments		DODOMENT (TABBOZDED)
_		nents Time	Adjustor	Remarks
Docum	ent Adjust	{	Adjustor KRIS PALMER **	• • •



VOUCHER

AMOUNT PAID TO TRAVELER \$375.18

Document Summary for VCH78723 (View Only)

-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1							-				Τri	p No. 1
Travel	ег	k	Ti	ravelei	D:	E000396	21 <mark>Trav</mark>	eler Name:	Kris Koba	ch 🗾	Organization	: GSA-M-
	ume	ent Infor	mat	ion				Currer	1 cy: U.S. D	ollar	Type: INVI	TATIONA
TA Num: Documer		102DE6 ails: PECI	-			-	RATIONA	.) Locat	ion Type:	CONU	S	
Location Purpose	-	Alert	Loca	tion		From	То	Per Die	em Rates			
MISSION (OPERAT			WASI DC	HINGT	ON,	07/18/17	7 07/19/1	7 172.00	/ 69,00 (07/	/01/17	-08/31/17)	
^ Res	erva	itions		-				View Reser	rvation Histo	огу	PNR Status:	BOOKE
Reservat Type		Vendor/Ca	rrier	Last Date 1 Ticke		Cost	Lodging Location	Ticket #/Res. i	Date ¥ Time		Emissions	Travele
LODGE		Marriott		7/18/2 2:25:0 AM E3	0		JW Marriot Hote! Washingto DC Washingto DC,DC	n	9148 07/18 00:00	3/2017)	' N/A	Kris Kobach
COMM- CARR		Southwest		7/18/2 2:25:0 AM E	0	478.40		1003289	9148 07/18 09:29	3/2017 5	368.940002 Ibs CO2	Kris Kobach
COMM- CARR		Southwest		7/18/2 2:25:0 AM E\$	0	0.00		1003289	91 48 07/1 9 16:40	9/2017)	368.940002 lbs CO2	Kris Kobach
^ Exp	ense) S		Т	otal	Per Diem	Expenses	: 275.50	Total Nor	1-Per (Diem Expense	es: 627.1
Details	Alert	Date	So	urce		ense cription		ense ægory	Cos	Pay t Me	yment thod	PerDiem
		07/17/201	7		Trav	el Fee	Tra Fee	vel Transxn Is	34.3	0 Inv	oice	
		Comments	s: LB /	ATRS	Dom	estic w-Ai	r-Rail					
		07/18/201	7 🛧	•	Airli	ne Flight	Cor	n. Carrier	478.4	0 CB	A	
-della - delanar - set danlara esta		07/18/201	7		Lodg	ging	Loc	ging	172.0	0 CA	SH	Yes
	A	Default Pa	ymen	t Meth	od fo	r this exp	ense is not	being used	Please ver	ify for	accuracy.	dad Malademaren dan bake - Mar val
	A	Receipt re	quirec	l for th	is ex	pense						
		Comments	s: Con	f Num	972	64486 Cn	nt: Must car	ncel 1 dav(s) prior to an	rival		

	07/18/2017	Lodging Tax	Lodging	24.94	CASH	
▲	Default Payment	Method for this expense i	is not being used. Pl	ease verify	for accuracy	1.
	07/18/2017	M&IE	M&IE-PerDiem	51.75	CASH	Ye
	07/18/2017	Taxi	Transportation	6.74	CASH	11.0.0.0.0.000A.00A.00A.4.A.A
A	Verify travel mod	e is accurate.				
	07/18/2017	Taxi	Transportation	18.00	CASH	
A	Verify travel mod	e is accurate.				
	Comments: From	airport to hotel	1			
	07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Ye
	07/19/2017	Parking	Transportation	31.00	CASH	
A	Verify travel mod	e is accurate.	an ann an Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-Al-A		88-88-5-6 ist-isthese ister	
	Comments: Airpo	ort Parking				
	07/19/2017	Тахі	Transportation	19.00	CASH	-
	Verify travel mod	e is accurate.		(B) A. Sh.MAR.S. When the set indexes of an and set of the set		
	07/24/2017	TDY Voucher Fee	Transxn Fees	14.75	EFT	

Receipts

Manage receipts or other document attachments: View Receipts

∧ Per	Dien	n Allow	ances			Total Per Diem Allowance: 275.50							
Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	в	L	D	Conf %
\sim			07/18/17	69.00	172.00	172.00	51.75	51.75					
\sim	999.9.5 B. 999.9.5 LANS 2.5		07/19/17	69.00	0.00	0.00	51.75	51,75					1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -

∧ Ao	ccounting A	Allocations	5	Accounting T	otal: 902.63
Alert	Organization	Label	Classification Code	Amount	Percent Allocated
	GSA-M-2	Invitational	(b) (6)	902.63	100.00 %

	Total Reimbursable: 375.18
Disbursement Type	Amount
Total Expenses	902.63

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Non-Reimbursa	ble Expenses				527.45
Advance Applie	d				0.00
Pay To Charge	Card				0.00
Pay To Travele	r				375.18
Trip Comm	ents		1	No Comments	Entered
Document	Status		Current Status: CLOSED	Awaiting:	for Status:
Document R Name	outing Status		Level		
Document H Date/Time	istory (Current) Status	Name	Remarks	Display	Full History Reason Desc
07/26/2017 3:05:57 PM	CLOSED	EAI, EAI	EAI Document Status Updat 6T1720500058	e WS :	
07/24/2017 12:03:16 PM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Update Voucher Received and Proce 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	SUBMIT TO	PALMER, KRIS L	**AUTO SIGNATURE WAS	APPLIED**	
	A TROVER				
9:54:28 AM 07/24/2017	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002)	DE6)	
9:54:28 AM 07/24/2017 9:26:24 AM Document Ac	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA0002)	DE6)	

https://cge.concursolutions.com/UI/TAVS/Proxy/WService=pc000088/docprep/summary.... 8/10/2017



RECEIPTS

JW MARRIOTT. **GUEST FOLIO** WASHINGTON DC JW Marriott® Washington, DC + 1331 Pennsylvania Avenue NW, Washington, District of Columbia, 20004 + 202.393.2000 + jwmarriott.com 172.00 07/19/17 12:00 5042 1087 KOBACH/K ACCT# 07/18/17 13:19 GK 93 MRW#: XXXXX7963 Payment Clerk Address DATE CHARGES BALLANCE DUE! 07/18 R00M 07/18 R00MTX 07/19 VS CARD 1087, 1 1087, 1 172.00 24.94 \$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 .onelaints (855) 484-4966 TRANSCO INC. TTY 711 202 398 0500 www.dfhv.dc.900 00 CASH RECEIPI A DRIVER: 00073903 CAB #: K228 DATE : 07/18/17 TIME:13:49-13:55 ESSENCE G327 EDUTHLAND PRINTING + SHREYSPORT, LA 841682 0627 07/18 08:30 07/19 18:23 \$31.00 6203 RATE #: 1 202-554-7900 STANDARD RATE TAG # 01286H MILES R1: 1.80

TRIP# :

FARE :

SURCH. :

TOTAL :

#PASSENGERS: 01

DCTC COMPLAINTS

DCTAXI, DC, GOV

LINES TTY 711 PH: 855-484-4965

FACE ID:63716

TRIP #

Rate 1

EXTRAS

TOTAL

DIST

07/19/17 03:25P

07/19/17 03:41F

Complaints Call: (202)645-6018 NUM.DCVIPCAB.COM NO2)269-9000

3182

5.33 mi

\$ 15.67

\$ 0.25

\$ 15.92

4442

\$6,49

\$0.25

\$6.74

	CAB RECEIPT
Entransition .	Time: Date: 7-/18/17
Origin of trip:	A
Destination:	Marribtt
Fare: 18.20	_ Sign: (0) (6)



AUTHORIZATION

Document Summary for TA0002DC3-1 (View Only)

Traveler		Ti	raveler IL	D: E00045	687 Trave	eler Name: Marl	Rhodes	Organization	n: GSA-M-
	ner	nt Informa	tion			Currency:	U.S. Dolla	ar Type: INV	ITATIONA
TA Num: TA Document I		2DC3 Pur Is: PECI Com	-		PERATIONA	L) Location	Type: CO	INUS	
Location Purpose		Alert Locat	tion	From	То	Per Diem Ra	ites		
		ARLIN VA	NGTON,	07/18/1	7 07/21/17	172.00 / 69.0	0 (07/01/1	7-08/31/17)	
^ Reser	vati	ions				View Reservation	on History	PNR Status	: BOOKE[
Reservation Type	-	endor/Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
LODGE	Ho	oliday Inn	N/A	468.00	Holiday Inn Rosslyn at	1003286810	07/18/20 00:00	17 N/A	Mark D Rhodes
					Key Bridge Arlington,VA				
^ Expen	ises	5	 T	otal Per D	Key Bridge		otal Non-	Per Diem Exper	nses: 30.82
					Key Bridge Arlington,VA iem Expense			Per Diem Exper Payment Method	nses: 30.8 PerDiem
	ert [ource E		Key Bridge Arlington,VA iem Expense Description	es: 657.75 T Expense		Payment Method	
	ert (Date S	ource E	Expense D Estimated 1	Key Bridge Arlington,VA iem Expense Description FDY se Fravel Fee	es: 657.75 T Expense Category	Cost 14.75	Payment Method	
	ert (C	Date S 07/14/2017 07/17/2017	iource E	Expense D Estimated 1 Voucher Fe Estimated 1	Key Bridge Arlington,VA iem Expense Description FDY se Travel Fee	es: 657.75 T Expense Category Transxn Fees Travel Transxn	Cost 14.75 16.07	Payment Method EFT Invoice	
	ert [C	Date S 07/14/2017 07/17/2017	ource E	Expense D Estimated 1 Voucher Fe Estimated 1	Key Bridge Arlington,VA iem Expense Description FDY se Travel Fee Il w-o Air-Rai	es: 657.75 T Expense Category Transxn Fees Travel Transxn Fees	Cost 14.75 16.07	Payment Method EFT Invoice	
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	ert I C C C C C C C C C C C C C C C C C C C	Date S 07/14/2017 07/17/2017 Comments: LB 07/18/2017 Comments: Cc 07/18/2017	ource E E ATRS D L onf Num: 0 L onf Num: 0	Expense D Estimated T Joucher Fe Estimated T comestic-In Lodging 61205301 M&IE Lodging	Key Bridge Arlington,VA iem Expense Description FDY se Travel Fee II w-o Air-Rai Cmt: Must ca	es: 657.75 T Expense Category Transxn Fees Travel Transxn Fees I_Lodging and-o Lodging ncel by 6 PM M&IE-PerDiem Lodging	Cost 14.75 16.07 or Car Only 156.00 51.75 156.00	Payment Method EFT Invoice CASH	PerDiem Yes Yes
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∧ Expen Details Ale	ert [C C C C C C C C C C C C C	Date S 07/14/2017	a ATRS D ATRS D L onf Num: (M L onf Num: (M L	Expense D Estimated T Joucher Fe Estimated T comestic-In codging 61205301 M&IE codging 61205301 M&IE	Key Bridge Arlington,VA iem Expense Description FDY se Travel Fee tl w-o Air-Rai Cmt: Must ca Cmt: Must ca	es: 657.75 T Expense Category Transxn Fees Travel Transxn Fees I_Lodging and-o Lodging ncel by 6 PM M&IE-PerDiem Lodging ncel by 6 PM M&IE-PerDiem	Cost 14.75 16.07 rr Car Only 156.00 51.75 156.00 69.00 156.00	Payment Method EFT Invoice CASH CASH CASH CASH	PerDiem Yes Yes Yes Yes

Receipts

Manage receipts or other document attachments: View Receipts

∧ Per	Dier	n Allow	ances	2				Total Per	Diem A	llov	van	ce:	657.7
Details	Alert	Actions	Date	Per Diem Rate	Lodging Cost	Lodging Allowed	M&IE Cost	M&IE Allowed	Spec	в	L	D	Conf %
\sim			07/18/17	69.00	156.00	156.00	51.75	51.75		0.01			
\mathbf{v}_{i}			07/19/17	69.00	156.00	156.00	69.00	69.00				1410-1416	
~			07/20/17	69.00	156.00	156.00	69.00	69.00					
\sim		AU 838	07/21/17	69.00	0.00	0.00	0.00	0.00	Yes				
	A	1	Actuals hav	e been cla	aimed. Plea	se verify the	y are corre	ect.					

Additional Authorizations		Special Authorizations Exist
Other Authorization	Remarks	
ACTUAL EXPENSE		

^ A(ccounting A	Allocations	5	Accounting T	otal: 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 Amended Reimbursable Amount: -51.75

Total Reimbursable Amount: 657.75

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

History I	No Comments Entered
-	

Document Status

Current Status: AUTH APPROVED Awaiting: for Status:

Reason

Desc

Document Routing Name Status Level Document History (Current) **Display Full History** Date/Time Status Name Remarks 07/17/2017 AUTH APPROVED CLINTON, JONATHAN **AUTO SIGNATURE WAS 9:03:28 AM PATRICK APPLIED** 07/17/2017 REVIEWED PALMER, KRIS L **AUTO SIGNATURE WAS 8:01:13 AM 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	an a far an a' an



VOUCHER

AMOUNT PAID TO TRAVELER \$876.93

Document Summary for VCH79389 (View Only)

Trave	ler		Tra	aveler ID	: E00045	687 Travel	er Name: Mark	Rhodes	Organization	: GSA-M
	cum	ent Info	orma	tion	mangang dan kulu da da da da she da	8	Currency:	U.S. Dollar	Type: INV	
		002DC3 tails: PE0	•		•	PERATIONAL) Location	Type: CON	IUS	
Location Purpose	- +	Alert	Locati	on	From	То	Per Diem Ra	hae		
urpoor		Alert		GTON,	07/18/1		172.00 / 69.00		-08/31/17)	
∖ Res	serva	ations				· · · · · · · · · · · · · · · · · · ·	View Reservatio	on History	PNR Status	: BOOKI
Reserva Type	ation	Vendor/(Carrier	Last Date to Ticket	Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Travele
									1	
ODGE		Holiday Ir	าก	N/A	468.00	Holiday Inn Rosslyn at Key Bridge Arlington,VA	1003286810	07/18/2017 00:00	7 N/A	Mark D Rhodes
	pens		חת			Rosslyn at Key Bridge	, ,	00:00	7 N/A r Diem Expens	Rhodes
∖ Exp		es		Tot	al Per Die	Rosslyn at Key Bridge Arlington,VA	, ,	00:00 tal Non-Pe		Rhodes
∖ Exp		es	Sc	Tot burce E	al Per Die	Rosslyn at Key Bridge Arlington,VA em Expenses: Description	501.75 To Expense	00:00 tal Non-Pel Cost	r Diem Expens Payment	Rhodes es: 406.
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∖ Exp	Alert	ES Date 07/17/20 Comme 07/18/20 Default Receipt Comme 07/18/20	D17 nts: LB D17 Paymer require nts: Cor D17 Paymer	Tot burce E T ATRS De L t Method d for this of Num: 6 L at Method	al Per Dia xpense D ravel Fee omestic-In odging 1 for this e expense 51205301 odging Ta	Rosslyn at Key Bridge Arlington,VA em Expenses: Description atl w-o Air-Rail expense is not to Cmt: Must can	501.75 To Expense Category Travel Transx Fees Lodging and-o Lodging being used. Plea cell by 6 PM Lodging	00:00 tal Non-Per Cost n 16.07 r Car Only_ 156.00 ase verify fo 20.67 ase verify fo	r Diem Expens Payment Method Invoice CASH or accuracy.	Rhodes es: 406. PerDier Yes
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	07/19/2017	Lodging Tax	Lodging	20.67	CASH	
A	Default Payment	Method for this expense is n	ot being used. Pleas	e verify f	or accuracy	ç.
	07/19/2017	M&IE	M&IE-PerDiem	51.75	CASH	Ye
	07/19/2017	M&IE Due Traveler	M&IE-PerDiem	17.25	CASH	Ye
	07/19/2017	Mileage - Priv Auto (Advantageous)	Mileage	333.84	CASH	
	Verify travel mod	e is accurate.				
	Comments: Rour	ndtrip mileage from West Virg	inia to Arlington, Va		and the second	
	07/20/2017	Lodging	Lodging	0.00	CASH	Ye
	Default Payment	Method for this expense is no	ot being used. Pleas	e verify f	or accuracy.	
	Comments: Conf	Num: 61205301 Cmt: Must o	ancel by 6 PM			
	07/20/2017	M&IE	M&IE-PerDiem	0.00	CASH	Ye
	07/20/2017	M&IE Due Traveler	M&IE-PerDiem	69.00	CASH	Ye
	07/21/2017	M&IE	M&IE-PerDiem	0.00	CASH	Ye
	08/01/2017	TDY Voucher Fee	Transxn Fees	14.75		

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	в	L	D	Conf %
\checkmark			07/18/17	69.00	156.00	156.00	51.75	51.75					
\sim			07/19/17	69.00	156.00	156.00	51.75	69.00					
\sim			07/20/17	69.00	0.00	0.00	0.00	69.00				1999), 23	
~			07/21/17	69.00	0.00	0.00	0.00	0.00	Yes				
	A		Actuals hav	e been cla	aimed. Plea	se verify the	y are corre	ect.	n water a standard for a				

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

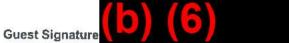
Document	Status		Current Status: CLOSEE	Awaiting:	for Status:
Document I	Routing				
Name	Status		Level		
Document I	History (Current)			Displa	y Full Histor Reason
Date/Time	Status	Name	Remarks		Desc
08/07/2017 3:03:32 PM	CLOSED	EAI, EAI	EAI Document Status Upd 6T1721400019	ate WS :	
08/02/2017 9:03:32 AM	VOUCHER AWAITING PMT	EAI, EAI	EAI Document Status Upd Voucher Received and Pro 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 WA	S APPLIED**	dir-iron Prüfradarklerbin "rinnalan narian
08/02/2017 3:59:51 AM	REVIEWED	PALMER, KRIS L	**AUTO SIGNATURE WA	S APPLIED**	
08/02/2017 3:58:00 AM	SUBMIT TO APPROVER	PALMER, KRIS L	**AUTO SIGNATURE WA	S APPLIED**	dirardo-arcanoris de sensanore adamane ared
08/01/2017 8:32:50 AM	CREATED	PALMER, KRIS L	NEW DOCUMENT (TA000)2DC3)	
Document A	Adjustments	r.			
Level	Date	Time	Adjustor	Remarks	
1			**		



RECEIPTS

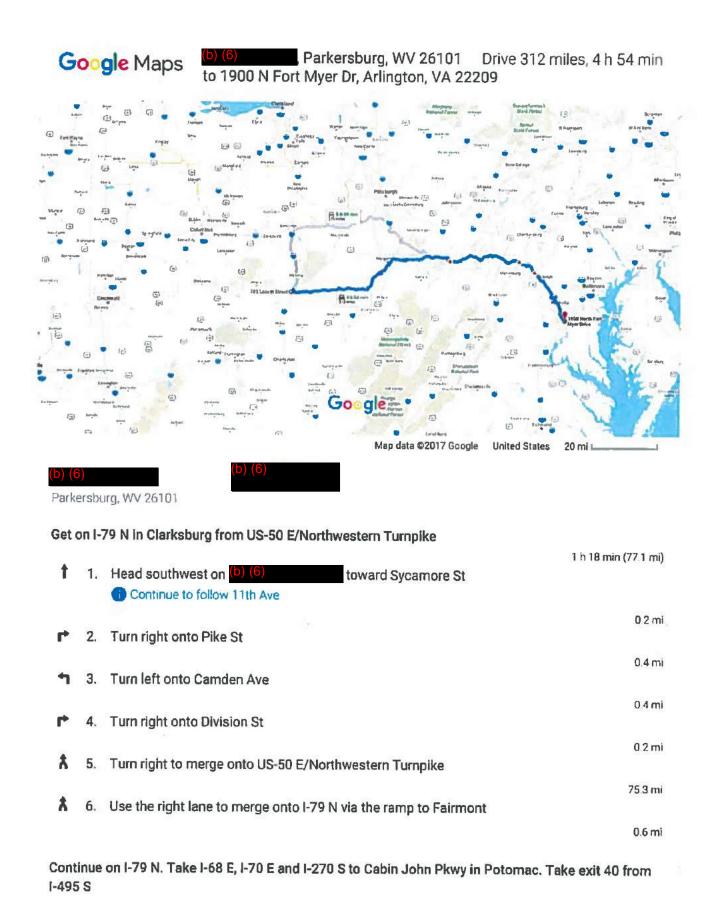


Mark R	hodes	Folio No. A/R Number Group Code Company Membership No. Invoice No.	: : : Fedrooms		Room No.:Arrival:Departure:Conf. No.:Rate Code:Page No.:	0606 07-18-17 07-20-17 61205301 IL5FP 1 of 1
Date		Descrip	otion		Charges	Credits
07-18-17	*Room				156.00	
07-18-17	Occupancy Tax				20.67	
07-19-17	*Room				156.00	
07-19-17	Occupancy Tax				20.67	
				Total	353.34	0.00
				Balance	353.34	



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 07-20-17



https://www.google.com/maps/dir/705+Locust+St,+Parkersburg,+WV+26101/1900+N+F... 07/24/2017

*	7.	Merge onto I-79 N 3h	21 min (2 27 mi)
Ŵ	8.	Use the right 2 lanes to take exit 148 for I-68 E toward Cumberland	29.0 mi
t	9.	Continue onto I-68 E i Entering Maryland	0.3 mi
r	10.	Use the right 2 lanes to take exit 82A-82B to merge onto I-70 E/US-40 E toward H	112 mi lagerstown
r	11.	Use the right 2 lanes to take exit 53 to merge onto I-270 S toward Washington	52.0 mi
٣	12.	Take the exit toward North Virginia/Washington/Interstate 495 S	30.1 mi
t	13.	Continue onto I-270 Spur S	0.6 mi
*	14.	Merge onto I-495 S	1.5 mi
8	15.	Take exit 40 for Cabin John Pkwy toward Glen Echo	1.3 mi
			0.3 mi
Follo	w Ca	bin John Pkwy, Clara Barton Pkwy and Canal Rd NW to N Fort Myer Dr in Arlingtor	
4	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 May be closed at certain times or days Entering District of Columbia	1.5 mi
t	18.		3 3 mi
t	19.	Continue onto M St NW	3.1 mi
r•	20.	Use the right 2 lanes to turn right onto Francis Scott Key Bridge/Key Bridge Entering Virginia	341 ft
t	21.	Continue onto N Fort Myer Dr	0.3 mi
			0.1 mi

Continue straight to stay on N Fort Myer Dr
 Destination will be on the right

01 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)

Trave	ler	T	raveler ID	: E00036052	Traveler	Name: Matthe	w Dunlap	Organizatio	n: GSA-M-2
∧ Do	cume	ent Infor	mation	-99 -99 -8 -9 -9 -9 -9 -9 -9 -9 -9 -9 -9 -9 -9 -9	10 -105 10 -10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Currency:	U.S. Dolla	ar Type: INV	/ITATIONAI
		002DAO ails: PECI (MISSION (OPE Meeting	RATIONA	L) Location	Type: CC	INUS	
Locatio									
Purpos MISSIO				From	То	Per Diem			
(OPERA			DC	TON, 07/18/17	07/19/1	/ 1/2.00/69	1.00 (07/01)	/17-08/31/17)	
^ Res	serva	tions		1999 - al-lai adamadana ar anana ana ar agay a	think the second	View Reservati	ion History	PNR Status	BOOKEE
Reserva Type		Vendor/Car		Date cket Cost	Lodging Location	Ticket #/Res. #	Date & Time	Emissions	Traveler
COMM- CARR		American Airlines	7/16/ 10:23 AM E			1003284881	07/18/201 12:23	7 253.270004 lbs CO2	Matthew G Dunlap
COMM- CARR		American Airlines	7/16/ 10:23 AM E			1003284881	07/19/201 22:05	7 253.270004 Ibs CO2	Matthew G Duniap
^ Exp	ense	26		Total Per Diem	Fynenses	· 275 50 Te	tal Non-P	er Diem Expens	
	ionioc				Expenses	. 210,00		er Diem Expens	Sea. 00 [.40
Details	Alert	Date	Source	Expense Des		Expense Category	Cost	Payment Method	PerDiem
		07/14/2017	,	Estimated TDY Voucher Fee	۲ ۲	Fransxn Fees	14.75	EFT	1
		07/14/2017	•	Estimated Trav		Fravel Transxn Fees	34.30	Invoice	12
		Comments	LB ATRS	Domestic w-Air	-Rail				
		07/18/2017	' ተ	Airline Flight	(Com. Carrier	482.40	CBA	
		07/18/2017	•	Lodging	L	odging	172.00	CASH	Yes
		07/18/2017	•	M&IE	N	A&IE-PerDiem	51.75	CASH	Yes
		07/19/2017	,	M&IE	N	A&IE-PerDiem	51.75	CASH	Yes
Receip	ots			X	1				

^ 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	в	L	D	Conf %
\sim			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					
∧ Ado	dition	al Autl	norizatio	ons			19-binin'i	Spec	ial Aut	horiz	zati	ions	Exis
Other A	uthoriz	ation			1	Remarks							
No hote	l require	ed, Non-c	onventional	Lodging Us	sed								
Contrac market	t fare us	sed or No	contract fai	re exists for	city-pair			99 - A alatti balatti dalam kumanan			1		
^ Acc	counti	ing All	ocations	6	the control λ , in the latent matrix of the			A	ccount	ting 1	Tot	al: 8()6.95
Alert C	Organiz	ation La	abel	Classif	ication Co	de			Am	ount	A	Pero	
G	GSA-M-2		vitational avel_FY17	(b)	(6)				80	6.95	;	10	0.00 %
∧ Tot	als				ana ay amalana niladi kalisalah	nd-arrad arra vala a lamma ana ana		Tota	al Reim	burs	ab	le: 27	75.50
Disburs	ement	Туре		1997 - Y 1998 and have seen a summary				Tota	al Reim	burs	ab	Amo	
Disburs Estimate	ement							Tota	al Reim	burs	ab	Amc 806	ount
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Document Summary

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07/14/2017 10:50:05 AM	RESERVATIONS UPDATED	Matthew	Dunlap		ated from reservation - ons updates for tripnum 1
07/14/2017 10:49:41 AM	CREATED	Matthew	Dunlap		ted from reservation - CUMENT (TA0002DAO)
Document A	djustments				
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1			**		



VOUCHER

AMOUNT PAID TO TRAVELER \$475.80

Document Summary for VCH78838 (View Only)

Trave	ler		Trave	eler ID: E00	036052	Traveler	Name: Matthe	w Dunlap	Organization	: GSA-M-:
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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
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		07/14/201	7	Trav	el Fee		Travel Transx Fees	n 34.30	Invoice	* <u></u>
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		07/18/201	7 1	- Airlii	ne Flight		Com. Carrier	482.40	CBA	
		07/18/201	7	Lodg	ging		Lodging	172.00	CASH	Yes
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		07/18/201	7	M&I	Ε		M&IE-PerDien	n 51.75	CASH	Yes
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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 Com	ments		View Comment History No Comments E			
Documer	nt Status		Current Status: CLOSED Awaiting:	for Status		
Document Name	Routing	Status	Level			
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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	ana a - 1-au ia- 1820-8448-9-6-64		
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

Document Summary

Page 4 of 4

Level	Date	Time	Adjustor	Remarks
2	07/27/17	11:20AM	KRIS PALMER **	
1	07/25/17	7:17AM	PALMER, KRIS L	
	07725/17	7:17AM	PALMER, KRIS L	



RECEIPTS

Canelli, Dorothy

From: Sent: To: Subject: Dunlap, Matthew Monday, July 17, 2017 5.51 AM Canelli, Dorothy Fwd: Custom Confirmation

Get Outlook for iOS

From: Hotel Tabard Inn <<u>hotel@tabardinn.com</u>> 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. 400
Arrive on Tue, 07-18-2017 to Wed, 2017 for L night(s).	07-19- 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. <u>202.785.1277</u> Fax No. <u>202.785.6173</u> <u>hotel@tabardinn.com</u>

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

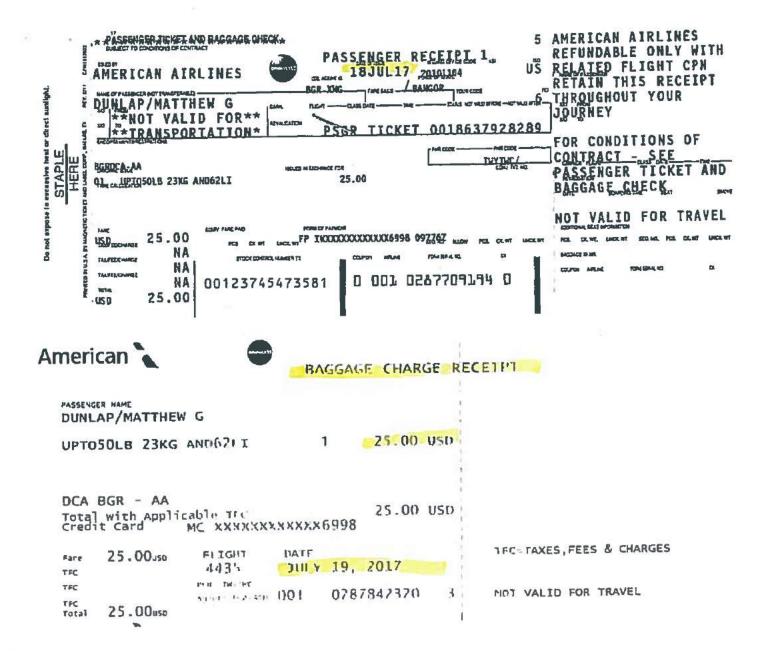
Arrival Date: Departure Date: 07-16-2017 07-17-2017

No. of Adults: 1

No. of Children: 0

Room TypeRoom NightsRatePenthouse1350.00TOTAL:1

Taxes Balance: 50.75 Proj Balance: 400.75



~

UIF CRE OF DC 202-263-3000 TALI CAB F456 FRANCIS B ODEB Face ID: 53247 TAR #: 00836H PHSSEINGER COPV RECEIPT 7:15 2017

Trip IC: 2672 Start: 06:50F9 124 Hassachusett Erdt 07:06FH 1734-1738 II Stra 0ist: 2.2041 Faret \$11.08 Entrast \$2.25 Tip: \$3.00 ----Total: \$16.30

Signature

00: ####6998 Exp: 22/02 Writter: 400660 Auth: 045562

Thank you Fassenger copy

DFHV comelaints (855) 484-4966 pr) 71.

TAXICAB RECEIPT	
Time:	حراورام
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Destination: MNPON	
Fare:	

\$23354



HITCH CAB AMERITI 16T

WASHINGTON, DC 07/19/17 19:58

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

TOTAL .. \$ 23,22

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SIGN HERE:

MASTER CARD

XXXX6998

AUTH

BANGOR INTERNATIONAL AIRPORT

\$ 20.00 Aurport Parking O116 Server: FATIMA P (#101) Rec: 71 07/19/17 19:18, Swiped T: 44 Term: 5 TABARD INN 1739 N STREET NN WASHINGTON DC 20036 (202)331-8528 MERCHANT #:

CARD FYPE ACCOUNT HUMBER MASTER CARD XXXXXXXXX5998 Name: HATTHEN DUNLAP GO TRANSACTION APPROVED AUTHORIZATION #: 034342 Reference: 0719010000116 TRANS TYPE: Credit Card SALE

CHECK: 134.09 TIP: TOTAL: (51.9

0004 Server: HILFREDO A (#123) Rec: 1 07/19/17 07:17, Swiped 1: 18 Term: 5 TABARD INN 1739 N STREET NW WASHINGTON DC 20036 (202)331-8528 MERCHANT #: CARD TYPE ACCOUNT NUMBER MASTER CARD XXXXXXXXXXXX5990 Name: MATTHEW DUNLAP OU THANSACTION APPROVED AUTHORIZATION #: 00811Z Reference: 0719016000004 TRAMS TYPE: Credit Card SALE CHECK : 17.60 TIP: TOTAL : ---25

X_____

PHONE: () ***Duplicate Copy***

CARDHOLDER WILL PAY CARD ISSUER ABOVE ANDUNT PURSUANT TO CARDHOLDER AGREEMENT SIGNED COPY ---> MERCHANT Χ.....

PHONE: () -***Duplicate Copy*+*

CARDHOLDER WILL PAY CARD ISSUER ADOVE AMUUNT PURSUANT TO CARDHOLDER AGREEMENT SIGNED COPY ---> MERLIVANT



Travel Instructions - Members Can Begin Booking

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

Fri, Jul 14, 2017 at 10:30 AM

To:

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>,

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, 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.
- <u>Have a personal credit card available</u>--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 <u>date of birth</u> 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

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

(b) (6)

To:(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 <u>scan all of their receipts into a single document file and email to</u> <u>kris.palmer@gsa.gov</u>. 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



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>, Lorelel Kowalski - M1AK <lorelel kowalski@gsa.gov>, Lennard Loewenkritt <lenny loewentritt@gsa.gov>, "giancarlo brizzi@gsa.gov"
<giancarlo.brizzi@gsa.gov>, Stefan Grabas - BAF <stefan grabas@gsa.gov>, "elizabeth cain@gsa.gov>

Jonalhan.

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 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.

	Commission Member	Title	Phone	Secondary Phone	Geographic Location	Email
t	Michael R. Pence	Vice President	NA		D.C.	N/A
2	Kris Kobach	505 - KS	(b)(6)		Kansos	(b)(6)
3	Connie Lawson	SøS + IN			โตงโลกฉ	
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	Fran St. Rep AR			Arkansas	
9	Mark Rhodes	Wood Cty. Clerk - WV			West Virginia	
10	Hans von Spakovsky	Sr. Legal Feltow, Heritage Fdn			D.C.	
ŧ1	Christian Adams	Election Law Attomey			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 (H) U.S. General Services Administration 202-501-9136 (desk) (6)

CREDIT CARD WORKSHEET

	, <u> </u>	DATE					
ITEM	Alaska Statewide Voters Date	2					
ľ	Submit for Approval	9/6/17					
V	Order, Pay Invoice, Register, etc.	917/17					
Ľ	Create CL	910/17					
⊡∕	Log Into Google Credit Card Log	910/17					
Q	Scan (approvals with receipt)	918/17					
<u>ب</u>	Upload Documents to CL & Process CL	9/8/17					
	Reconciled						
	Date Received						
	Date Delivered						
	D1	3					
COMMEN	TS						
	\$21.00	~					
CL NUMBE	R CLa15 \$195	202					
SCANNED	SCANNED DOCUMENT NAME PACEI Alaska Vaters Data						
COPY CL DOCUMENT CL2157730							

i i



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

Tue, Sep 5, 2017 at 10:11 AM

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

Jonathan Clinton - M <jonathan.clinton@gsa.gov> 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: \$21.00 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

GSA

U.S. General Services Administration

Kris Q. 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

164071 Date <u>9/7/17</u> RECEIPT No. Palmer Received From Mns FSWEDT Address 1800 NID QUI Noshination DC ND405 Dollars (\$...) Pipidentia Advisou Inter IS+ tix For Din Election npanta -COMMESION L How Paid Balance Due -Crecht Cardy 1

1

An DIV UT ELECTIONS 240 MAIN SI SUITE 4 JUNEAU, An SISOJ 907 465 3319 Re-thank If: 2527520105 Feral If: 0017340000252752010501 Phone Order NALAMANANAN (199 MASIERCARD Entry Helhod: Manual Addunt: Tax: 3 21.00 \$ Total: 0.00 09/07/17 Ś 21.00 Inv II: GUANI 15:04:22 Acerid: Online Appr Code: 020140 AVS Code: ZIP MAICH Z

> Customer Europ Hiked Hike



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

Wed, Sep 6, 2017 at 1:54 PM

RE: Publicly available voter registration data

1 message

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

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. 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 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 [mailtantering] 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(D) (6) Sent: Wednesday, September 6, 2017 9:12 AM

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

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 (D) (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** l 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) (b) (D) (b) > Cc: FN-OVP-Election Integrity Staff

> 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?

>

 \geq

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

> Respectfully,

Respectiuily

- > Ron Williams
- > Policy Advisor

> Presidential Advisory Commission on Election Integrity

- > Email; (D)
- > Phone: (b) (6



RE: FW: GEORGIA VOTERS DATA

1 message

Hallman, John <mark>(b)(6)</mark> To: Kris Palmer - M <kris.paimer@gsa.gov></kris.paimer@gsa.gov>	Thu, Sep 21, 2017 at 11:22 AM
	D6201709210000 created on 9/21/17
Good Morning Kris,	
Tax Id - (b) (4), (b) (6)	tha55.00 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.go Sent: Thursday, September 21, 2017 11:02 AM To: Hallman, Johr <mark>(b)(6) Subject: Fwd: FW: GEORGIA VOTERS DATA</mark>	[v]

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

The Georgia Secretary of State's Office

Elections Division

6

- 10

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

TO:

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

INVOICE

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

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

TOTAL	UNIT PRICE	DESCRIPTION	QUANTITY
\$250.00	\$250.00	Georgia Statewide Voter File	1
r			
\$250.0	SUBTOTAL		
0.0	SALES TAX		
\$5.0	SHIPPING & HANDLING		
\$255,00	TOTAL DUE		

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.



1 message		
Williams, Ronald E. EOP/OVP < <mark>(b) (6)</mark> To: "Hallman, John" <mark>(b) (6)</mark>	, Kris Palmer - M <kris.palmer@gsa.gov></kris.palmer@gsa.gov>	Thu, Sep 14, 2017 at 11:30 AM
Good morning Mr. Hallman –		
	oter List Order Form. I could not access the "Des mer or myself know if we need to provide any ad	
Respectfully,	` 85	
Ron Williams		2
From: Hallman, John (mailto: <mark>(b) (6)</mark> Sent: Thursday, September 14, 2017 8 To: Kris Palmer - M <kris.palmer@gs Subject: RE: GEORGIA VOTERS DATA</kris.palmer@gs 		<mark>6)</mark>
Ron,		
A link to a fillable PDF order form can uploads/Voter_List_Order_Form_3	be found on our website here, >http://sos.ga.go -27-171.pdf<.	ov/admin/
Please complete this form and return	it to me via email.	
Thanks,		
John Hallman		
Election Systems Manager, State Election	ions Division	
Georgia Secretary of State Brian P. Ken	np	
2 MLK Jr. Drive, SE		

Suite 802 West Tower

Atlanta, GA 30334

404.656.2871 (main)

(direct)

From: Kris Palmer - M [mailto:kris.palmer@gsa.gov] Sent: Thursday, September 14, 2017 7:43 AM To:(b) (6) Subject: GEORGIA VOTERS DATA

Good Morning Ron,

John Hallman from Georgia State left me a voice mail message in regards to pruchasing 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 Q. 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

1

	STATE G MAN
Secretary of State	The process of the
Elections Division	All and a start of the start
2 Martin Luther King Jr. Dr. Suite 802 - West Towe	r Atlanta, GA 30334-1505
VOTER LIST ORDER F	ORM
ORDER NUMBER: FLAS CHEFT E SUSE OF LA	IT: AN THE REAL
DATE: 4/14/2017	11-2-21 11-11-11-11-11-11-11-11-11-11-11-11-11
NAME: Ron Williams, Police Adviess	X 计 合
SHIPPING ADDRESS: (Please provide a physical mailing address. All files will be delive	vered by UPS)
President. 1 Advers Gammission on Election Interest	
1650 Prinsquer - Alina PAIN 6838-R. 265-1 EVIL	- 1776 S
Washington De 20501	A CELEBRA
EMAIL ADDRESS	
CONTACT PERSON: Ros Williams	
CONTACT PHONE: (b) (6)	
NOTE: All lists will be delivered on a CD.	
FOR COUNTY USE ONLY - Payment Only County provided list by (lis	it county name)
Date Customer Received Voters List Date Payment	Mailed to SOS
Check K Money Order Check/Money Order Number	Tablet L
Amount 255. 20 Date Payment Mailed	
Access http://sos.ga.gov/index.php/elections/order_voter_registration_lists_and_f	iles for list prices, etc. Electronic file only
includes date last voted for each registered voter. Contact us via email at <u>bphifer@s</u> production time is 1-2 weeks upon receipt of payment. Please make check or money	os.ga.gov with any questions. Normal order payable to Secretary of State. Voters
List is a CSV file and can be opened in Microsoft Excel. Voters List does not include to	elephone numbers, Date of Birth, SSN# or DL#.
* Statewide Voter Files will be in a text file format and has to be imported into a da *NOTE* - All files are password protected. In order to open the Electronic file, WinZip has	가 New York, 프레이 이와 가 New York, N
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 appe administrative access or other issues, please consult your IT Department or a WinZip Custom	
* STATEWIDE VOTER FILE If you are ordering the Statewide Voter File check the	
VOTERS LIST ORDER	
(Please include a detailed description of your request including cou	
Description of Order: SELECT LIST TYPE FROM DROPDOWN MENU	Active Voters
County(s): (Required)	
Municipality(s): (Only include Municipality If you are requesting a Municipal list) City of	
ODistrict Number (s)	
OPrecinct Number (s)	
Warning: In accordance with O.C.G.A. §21-2-601, any person who uses the list of el	ectors provided for in §21-2-225 for commercial
purpose s s hall be guilty of a misdemeanor.	
	P
Signature	PRINT FORM

Rev 2-15-2016



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 Q. 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 5 – 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

GSA 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

CREDIT CARD WORKSHEET

		DATE
ITEM Idaho statewide Voters Data		
	Submit for Approval	916/17
Ń	Order, Pay Invoice, Register, etc.	9/5/17
	Create CL	91017
⊿	Log Into Google Credit Card Log	9/8/17
	Scan (approvals with receipt)	9/8/17
D	Upload Documents to CL & Process CL	9/8/17
	Reconciled	
	Date Received	
	Date Delivered	
COMMENTS		
AMOUNT		
CL2158182		
SCANNED DOCUMENT NAME PACEI Idaho Voters Data		
COPY CL DOCUMENT Ch2157730		
	â	3



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 Q. 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.

IDAH	IO Thank.	you when	TSEA	1010
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		
Туре:		MasterCard		
Credit Card Number:		(b) (6)		•
ldaho 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

14538118 \$20,00

\$20.00

Signature

Note: Statewide Voter File with History

Total remitted to the Secretary of State

Clerk Initials: bk 2025010525

IDAHO SECRETARY OF STATE 09/05/2017 05:00 CK: 14538118 CT: 172099 BH: 1601151 16 20.00 = 20.00 VOTER LIST #2

STATE OF IDAHO OFFICE OF THE SECRETARY OF STATE

LAWERENCE 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:

X 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]

4. REQUESTING PARTY:

Name:	Ron Williams
Address:	1650 Pennsy Nania Ave. NW
	EEOB-Room 265
Telephone:	(b) (6)

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

Countywide County Name:	Name: Address:	
County Precinct County Name: Precinct Name/Number:	Telephone:	



STATE OF IDAHO OFFICE OF THE SECRETARY OF STATE LAWERENCE 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 <u>Fon Williams</u>, 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



For Williams

Printed Name 1650 Ransglueniz Ave. NH, ECOB. Rm. 265 Vashington, DC 20504 Address

Telephone



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

Thu, Aug 31, 2017 at 12:09 PM

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

1 message

FN-OVP-Election Integrity Staff

To: "elections@sos.idaho.gov" <elections@sos.idano.gov> Cc: "kris.palmer@gsa.gov" <kris.palmer@gsa.gov>

Greetings!

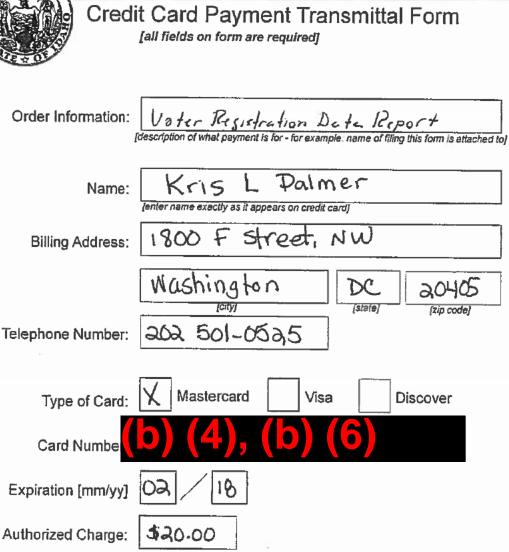
Attached is the completed "Voter Registration Data Report Order Form" submitted by the Presidential Advisory Commission on Election Integrity. Please advise if we need to provide anything additional.

Respectfully,

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

IdahoVoterRegistrationDataReportOrderForm_8.31.17.pdf 143K





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
ooparament breet i ax Nambera.	UCC / Liens:	(208) 334-2847
	Elections:	(208) 334-2282
All Other Departments: (208) 334-228	2 Fiscal:	(208) 334-5224

		DATE	
ITEM	Voters Dat	-9	
	Submit for Approval	91517	
V	Order, Pay Invoice, Register, etc.	9/8/17	
	Create CL	9118/17	
L ک	Log Into Google Credit Card Log	a/18/17	
Y	Scan (approvals with receipt)	9/18/17	
<u>ک</u>	Upload Documents to CL & Process CL	9/10/17	
Q	Reconciled	9/18/17	
	Date Received		
	Date Delivered		
COMMENTS			
AMOUNTJI,0101,00			
CL2160314			
SCANNED DOCUMENT NAME IOWA State Voters Data			
COPY CL DOCUMENT CL2158174			



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 7:09 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 Q. 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.

Raid by phone	ON 9/8/17	Need Receipt	

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



1

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	

2012年1月1日月1日日日日

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

Billing Information

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

KRIS L PALMER 1800 F ST NW WASHINGTON, DC 20405

Quantity	Code	Item Description —	Price	Extended Price
1	VDC	DATA CHARGE STATEWIDE EX-005 AIP	\$1,061.0000	\$1,061.0000
3			Total:	\$1,061.00

INVOICE

THIS IS NOT A BILL

Specifications and Order For		
Requestor Name: Ron Williams	Daytime Phone: (b) (6)	
Address: 1650 Pennsylvania Avenue, N.W., Elsenhower Executive Office Build	ing, Rm. 208, Wasnington, D.C. 20504	
Information from voter registration records can only be used: To request a registrant's vote at an election. For a genuine political purpose. I am aware that information from voter registration records may only be use misuse of the information, including commercial use, is a serious mis above ordered list before	ana fide official purpose by an elected d lawfully for the reasons listed above demeanor under lowa law. I agree to	Junderstand that
Intended Use of List: To assist with verification of voter registration data resea	rch of the Presidential Advisory Commission	an on Election inlegrity.
Signaturo:	Date: 09/01/2017	
List information Option 1: Voter List A.Jurisdiction(s) of voters to include: Statewide voter replaymilies list and vote history	Option 2: Absentee List A. Jurisdiction(s) of volers to inclu	ıde:
B.Type of Voters:	B. Election(s):	
Active Only Active, Inactive, and Pending		
C.Type of Information:	C. Do you want to receive update	is to the list?
Contact Information Only	No Yes	
Contact Information and Election Participation (electronic lists only)	Frequency of Updates:	🔲 Daily
Election Participation Options:	2,122,000 \$1,061.00	国; Month 应
Last 5 elections of every type	\$1 04 00	1 SE
Specify elections:	F 1/ 001.2	Monthall SED -
List Format	-	Y OF
	Delimited (CSV) - CD-ROM	- ST
_	Politiko (004) - 00-KOM	
Paper – describe the order you want the voters listed:		
Payment Method Note: Payment must be received before list is provide your credit card information.	led. If paying by credit card, you will be	contacled to request
Cash/Check Cradit Card Office Use On	Y:	
	· · · · · · · · · · · · · · · · · · ·	an a
Delivery Method Note: Orders that are shipped will be charged for sh	ipping.	
Email the list to: (0) (6)	- Alut (1999) and	
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 80 days	
Revised 7/2017 Prepared by the lower Secretary of State's Off	ice .	Page 1

e

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		DATE
ITEM	Missouri Voters I	cata
V	Submit for Approval	915/17
	Order, Pay Invoice, Register, etc.	918/17
	Create CL	a10/17
Q	Log Into Google Credit Card Log	919/17
V	Scan (approvals with receipt)	918/17
	Upload Documents to CL & Process CL	alolin
	Reconciled	
	Date Received	
	Date Delivered	
COMMENTS		
AMOUNT \$ 36,25		
CLAI58180		
SCANNED DOCUMENT NAME PACEI MISSOURI VOters Data		
COPY CL DOCUMENT CL2157730		



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 6:56 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 Q. 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.



Receipt : Missouri : Secretary of State

1 message

customerservice@collectorsolutions.com <customerservice@collectorsolutions.com> To: kris.palmer@gsa.gov

Fri, Sep 8, 2017 at 12:25 PM

Receipt Missouri : Secretary of State

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

name Kris L. Palmer

12284943

Credit Carr

effective date 9/8/2017

payment method account number

\$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



Powered by ...

P.5		DATE		
ITEM	Montana Statewid Va	oters Registration Dat		
	Submit for Approval	9/5/17		
P	Order, Pay Invoice, Register, etc.	8/30/17		
	Create CL	917/17		
	Log Into Google Credit Card Log	917/17		
Ū	Scan (approvals with receipt)	917/17		
	Upload Documents to CL & Process CL	9/7/17		
	Reconciled	9/7/17		
	Date Received			
	Date Delivered			
COMMENTS				
AMOUNT\$1,000,00				
CL NUMBER CL 2157733				
SCANNED DOCUMENT NAME PACEI MT VOTORS Data				
COPY CL DOCUMENT CL2157730				



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 6:57 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 Q. 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: (D) (4), (D) (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



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.



Date: 2017-00-30

File(s) purchased:

Statewide Voter File

\$1000 Via FTS

Total Cost: \$1000

Home Print

4

	DATE		
ITEM	oregon voters Da	ta	
	Submit for Approval	91,117	
Ń	Order, Pay Invoice, Register, etc.	9/8/17	
Ľ	Create CL	9/9/17	
~	Log Into Google Credit Card Log	9/0/17	
\checkmark	Scan (approvals with receipt)	9/0/17	
V	Upload Documents to CL & Process CL	9/0/17	
	Reconciled		
	Date Received		
	Date Delivered		
COMMENTS			
AMOUNT \$ 500.00			
CL NUMBER CL 2158174			
SCANNED DOCUMENT NAME PACEI Oregon Voter S Date			
COPY CL DOCUMENT CL215 7730			



Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

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

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

GSA

🕙 U.S. General Services Administration

Kris Q. 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!

Fri, Sep 1, 2017 at 8:14 AM



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

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) Office | 503.373.7414 FAX



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. 1 am currently in a meeting but will available from 12:30 - 2:00.

Thanks

Kris Q. 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

Secretary of State Elections Division | 255 Capitol St. NE, Suite 501, Salem, OR 97310 | p.503.986.1518 | f.303.373.7414 | www.oregonvotes.gov Request for Statewide and Less Than Statewide Voter List

SEL 510

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	PHONENUMB	POST DIRECTION	EFF ADDRESS 3
FIRST NAME	UNLISTED	UNIT TYPE	EFF ADDRESS 4
MIDDLE NAME	COUNTY	UNITNUM	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 \$.31.2017	Contact Phone Numb or Email Address	(b) (6) (6)
Person and/or Organization Making Request		
Ron Williams - Presidential Advisory	Commission on Election Integrity	
	Less than Statewide Voter List :	
Please include:		Elections Requested:
Voter Registration AND Vote History Infor O Voter Registration Information ONLY O Vote History Information ONLY	mation Active AND Inactive Register Active Registered Voters ON C Inactive Registered Voters C	ILY O Specific Election:
Delivery Method: DVD O Pick Up C Mail	SFTP	
For Mailed DVD please provide: Address: ICTO Princy Junie Ave., NW ELOB - Ron. 265 City: Weshington 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
	acted at Contact Phone Number)	Check
	atewide voter list or less than statewide voter list f	ange 1. Sa a Malan ana an 1492 - Constant Catalog a sa ang ang ang ang ang ang ang ang ang an
		931/2017
- gintere		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

1

ITEM Rennsylvania Voters Registration Data Submit for Approval 9/5/17 Order, Pay Invoice, Register, etc. 8/8/1/7 Create CL 9/7/17 Create CL 9/7/17 Scan (approvals with receipt) 9/7/17 Scan (approvals with receipt) 9/7/17 Vupload Documents to CL & Process 9/7/17 Reconciled 9/7/17 Date Received 9/7/17 Date Received 9/7/17 Date Received 9/7/17 COMMENTS AMOUNT \$20,00 CL NUMBER CL2/5/130 SCANNED DOCUMENT NAME PACEI PA Voters Data COPY CL DOCUMENT CL2/17355 (0) (4), (0) (6) Region: 00			DATE	
Image: Construction of the construc	ITEM Pennsylvania Voters Registration Data			
Create CL altrian		Submit for Approval	9/5/17	
Image: Second constraints of the second constrand constraints of the second constraints of		Order, Pay Invoice, Register, etc.	8/81/17	
Scan (approvals with receipt) Vpload Documents to CL & Process CL Vpload Documents to CL & Process QI-117 Reconciled Date Received Date Received Date Delivered COMMENTS AMOUNT CL_2157130 SCANNED DOCUMENT NAME_PACEI_ PA Voters Data COPY CL DOCUMENT		Create CL	917/17	
Scan (approvals with receipt) alalia Upload Documents to CL & Process alalia CL alalia Reconciled alalia Date Received Date Delivered Date Delivered COMMENTS AMOUNT	V	Log Into Google Credit Card Log	91717	
CL 917117 Reconciled 91717 Date Received Date Delivered COMMENTS AMOUNT CL NUMBER CL RUMBER SCANNED DOCUMENT NAME_PACEI PA VOTERS Data COPY CL DOCUMENT		Scan (approvals with receipt)	,	
Date Received Date Delivered COMMENTS AMOUNT			9/2/17	
Date Delivered Date Delivered <u>COMMENTS</u> AMOUNT AMOUNT CL_2157730 SCANNED DOCUMENT NAME PACKET PA VOTEVS Data COPY CL DOCUMENT CL2117355		Reconciled	91-117	
COMMENTS AMOUNT CL NUMBER CL RUMBER CL RUMBER CL RUMBER CL RUMENT NAME PACE I PA VOTERS Data COPY CL DOCUMENT CL RUMENT CL RUMENT CL RUMENT CL RUMENT CL RUMENT CL RUMENT CL RUMENT CL RUMENT SCANNED DOCUMENT NAME PACE I PA VOTERS Data COPY CL DOCUMENT CL RUMENT CL RUM		Date Received		
AMOUNT		Date Delivered		
AMOUNT		3		
CL RUMBER <u>CL 2157730</u> SCANNED DOCUMENT NAME PACEI PA VOTEVS Data COPY CL DOCUMENT <u>CL 2117355</u>	COMMENTS			
SCANNED DOCUMENT NAME PACEI PA VOTEVS Data COPY CL DOCUMENT	AMOUNT			
COPY CL DOCUMENT	CL NUMBERCL2157730			
	SCANNED DOCUMENT NAME PACEI PA VOTERS Data			
(b) (4), (b) (6) Region: 00	COPY CL DOCUMENTCL2117355			
(b) (4), (b) (6) Region: 00				
	(b) (b) (6) Region: 00			



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



SA U.S. General Services Administration

Kris Q. 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: \$20,00 ACCOUNTING CODE: (D) (4), (D) (6) DATE NEEDED: ASAP VENDOR: Pennsylvania State Government JUSTIFICATION: Information is being requested by the Presidential Advisory Commission on Election Integrity.



Thu, Aug 31, 2017 at 3:06 PM

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>

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:

======================================
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.

t

		DATE		
ITEM	Texas Voters Dat	rC(
ď	Submit for Approval	9/19/17		
	Order, Pay Invoice, Register, etc.	9/19/17		
V	Create CL	9/22/17		
	Log Into Google Credit Card Log	9/22/17		
	Scan (approvals with receipt)	9/22/17		
	Upload Documents to CL & Process CL	9/22/17		
	Reconciled			
	Date Received			
	Date Delivered			
COMMEN	TS	27		
AMOUNT \$3,437,30				
CL NUMBER CL2161768				
SCANNED DOCUMENT NAME TEXAS JOTEVS Data				
COPY CL (DOCUMENT_ CL2/5 1730			



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 Q. 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

1



Rolando B. Pablos Secretary of State

Page 1 of 1

Office of the Secretary of State Packing Slip

September 19, 2017

Kris L Palmer 1800 F Street NW Washington DC 20405

Batch Number Client ID	(6)	
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	

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

Come visit us on the Internet (i) 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

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

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 <u>Credit Card Payment Form</u> Master Card, Visa, American Express & Discover are accepted

For Office Use Only	
DATE:	STAFF TAKING ORDER:
Please provide all request	ed information so your request may be processed.
NAME ON CARD:	Kris L Palmer
BUSINESS NAME:	Kris L Palmer
NAME OF REQUESTO	DR: Ronald Williams
MAILING ADDRESS:	PACET/1650 Pennsylvania Avenue NW
CITY: Washir	
HOME PHONE:	BUSINESS PHONE: (b) (6)
	EMAIL:
BILLING ADDRESS:	General Services Administration, 1800 F. Street, NW Washington, DC 20405
Billing Address s	ame as Mailing Address
TYPE OF CREDIT CAN	RD: Master Card
CREDIT CARD #:	EXPIRATION DATE.
***3 OR 4 DIGIT SEC	URITY CODE: (required) AMOUNT OF CHARGE: 43,437.30
Plea	se email receipt to Kris Palmer at
Fr	is palmere gsq. gov.
	Thanks

		DATE
ITEM	WV Voters Data	
Ľ	Submit for Approval	alilin
	Order, Pay Invoice, Register, etc.	9/27/17
D.	Create CL	9/28/17
	Log Into Google Credit Card Log	9/28/17
	Scan (approvals with receipt)	9/20/17
I	Upload Documents to CL & Process CL	9/20/17
	Reconciled	10 125/17
	Date Received	
	Date Delivered	
COMMEN	TS	
AMOUNT	\$1,000.00	
CL NUMBE	R CL2163327	
SCANNED	DOCUMENT NAME West Virgin	nia Voters Data
COPY CL I	DOCUMENT CLAIG 176	20
	(b) (4), (b) (6) 0 a 2018	> System would not process lost. the AR for lost. to come out of EVIT FurAs.



Fri, Sep 1, 2017 at 8:13 AM

Re: PURCHASE CARD PRE-AUTHORIZATION APPROVAL

1 message

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

GSA U.S. General Services Administration

. Kris Q. 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: Invoice #: 09/08/2017 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	



West Virginia Request for Voter Registration Data

1 message

FN-OVP-Election Integrity Staff () ((

Tue, Sep 5, 2017 at 5:08 PM

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. 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 Virgina Request for Voter Registration Data_9.1.17.pdf 229K



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

Fees for Partial Voter Lists/List Updates**

(1) Election Cycle Subscription Service*	\$1,000	(7) Partial Voter Registration List	\$25/hour
(2) Statewide Voter Registration List	\$500	(8) Voter History List	\$25/hour
(3) Master Voter History List Export	\$500	(9) Complex Research Query	\$25/hour
(4) Statewide Early Voters List	\$200	(10) Update to (2), (4), (5), or (6) during the	\$25/hour
(5) Statewide Absentee Requests List	\$200	election year in which the list was requested	323/11001
(6) Statewide Absentee Received List	\$200	(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 election day; and (4) Statewide Early Voters List for the primary, general and odd-year election day; and (4) Statewide Early Voters List for the primary, general and odd-year 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)

*** <u>Please return your completed form by mail, fax, or e-mail to:</u> ***

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: <u>svrs@wvsos.com</u>



Request for Voter Registration Data Services

Election Year 2016

Delivery Style (subject to file size)		Data Format			
Cloud storage/transfer (FTP, Dropbox, etc.) E-mail Mail (CD-Rom, Paper List, etc.)		 Spreadsheet (MS Excei, etc.) Delimited Text File (.csv, .txt, etc.) Paper List (PDF File) Other 			
Voter Information	ang ang				
Your voter list will automatically include the following voter information: ✓ Name ✓ Residence Address (+ County) ✓ Party Affiliation ✓ Status (Active or Inactive) ✓ Registration Date	include D Biri D Ma D Pre	any additional voter information you want to in your voter list. thdate State Senate District iling Address State Delegate District cinct number State Magisterial District ngressional District Other			
Enter up to three of the above categories in t 1. 2. 3.		you want to sort your printable voter list.			
Select from the options below to receive a st	atewide	voter registration list or subscription:			
Election Cycle Subscription Service	1000	Statewide Early Voters List 			
Statewide Voter Registration List	500	Statewide Absentee Requests List \$200			
Master Voter History List Export §	500	Statewide Absentee Received List \$200			

1



Office of the West Virginia Secretary of State

1 -	Partial Voter List \$25/	hour	STREET, STREET		
Th	ne price of a partial voter r	registration list is base	d on the cu	irrent hourly ra	ate as determined by the
Se	cretary of State. The staff	f generating your reque	est will con	tact you with a	an estimate of the number of
hc	ours needed to fulfill your	request. Follow the sto	eps below t	to complete yo	our partial voter registration
lis	t request.				
1.	Select ONE of the categ			liction OR dist	rict of your choice.
	🛛 🛛 Partial Statewide V	oter Registration List*	•		
	Countywide Voter I	Registration List for			Co.
	District Voter Regis	itration List			-
	 WV House d 	of Delegates District _			
	 WV Senate 				
	🛛 🔲 Municipal Voter Re	gistration List for			Co.
	🔲 Precinct Voter Regi	stration List for Pct			Co.
se	ction for Statewide Voter Do you want all register Ves (proceed to num	Lists if you want a full red voters in the jurise	l list of regi	stered voters i	your list below. Go to the in the state
		nber 4)			
_	No, filter my list				
	If you choose to filter y	our list, please select t			
PO	litical Party			Registration Si	
	Democrat		_	Active voters	
	Libertarian		느	Inactive vote	
				Both Active a	nd Inactive voters
	Republican				
	Other				
	All of the above				T
	oter History (optional)				
4.	If want to include voter	history in your voter	registratio	n list, please e	nter the elections you want
	to include.				
	Election: Presidentia	1	Year:	2016	
	Election: Presidentia	1	Year:	2012	
		1	Year:	2005	
	Election: Presidentia	1			
_	Election: Presidentia				
5.	OR if you want your list	to only include the vo	oters you s	elected above	who voted in a specific
_	OR if you want your list election, early voted, or	to only include the vo participated in mail-i	oters you s	elected above	who voted in a specific t from the options below.
5.	OR if you want your list election, early voted, or Voter History List	to only include the vo participated in mail-i Election:	oters you s in absentee	elected above e voting, selec	who voted in a specific t from the options below. Year:
_	OR if you want your list election, early voted, or Voter History List Early Voters List	to only include the vo participated in mail-i Election: Election:	oters you s in absentee	elected above e voting, selec	t from the options below.
	OR if you want your list election, early voted, or Voter History List	to only include the vo participated in mail-i Election: Election:	oters you s in absentee	elected above e voting, selec	t from the options below. Year:

Office of the West Virginia Secretary of State

If you have a more complex data request, plea additional pages if needed.	ase describe your request in detail below. Attach
/	u/A
a and an	
Purchaser Contact Information	
Name: Kris Palmer	Phone: 202 Col 6 Co c
Aris Telmer	Phone: 202, 501.0525
Address: 1800 & Striet, NW	E-mail: kris.palmer Cysa.gov
Washington DC 20405	5 0
Method of Delivery I will pick up my order at the WV Secretary	v of State's Office
Ship my order to: Same as contact information	E-mail my order to:
Same as contact mormation	Same as contact information
Address:	E-mail:
Secretary of State's officer	ore purchasing a voter list from the West Virginia
1_ Krus L Palmer	for GSA Presidential Advisory Commission on (organization, if any)
(name of purchaser)	(organization, if any)
	ts the sale and use of the list of registered voters for
	ertising, and that I or my organization may not sell the list that the purposes for which the names and addresses of

voters	will be use	d are not in vio	plation of this prohibi	tion.		
	(\mathbf{b})	(6)		Date:	9/5/17	
Signal					1	

GT&C #

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

IAA Number_

<u>- 0000 -</u> Order # Amendment/Mod #

		DEPARTMENT AND	D/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. Serv	icing Agency	Agreement Tracking Number (Optional)	
3. Assi	sted Acquisi	tion Agreement Yes 🔲 No 🗹	
	New Amendment	Check action being taken) — Complete only the GT&C blocks being changed — Provide a brief explanation for the IAA cancella	
5. Agr	eement Perio		30-2019 of IAA or effective cancellation date
6. Reco Yes		is this an: Annual Renewal	continue, unless a notice to discontinue is received. er renewal period:
8. Are			Multiple Order IAA Yes No and Citation
Note: S	pecific advan	ce amounts will be captured on each related Order.	

GT&C # GT&C # O. Estimated Agreement Amor Optional for Assisted Acquisi Direct Cost Dverhead Fees & Charges Cotal Estimated Amount IO. STATUTORY AUTHORI A. Requesting Agency's Author Franchise Revolving W Fund Fund Cap	eragency Agreement General Terms Order # Amenda ant (The Servicing Ag (tions) \$359,000.00 \$359,000.00 TY Drity (Check One) Vorking Ecor	gency completes all information for the estimated agreement amount.) Provide a general explanation of the Overhead Fees & Charges nomy Act Other
GT&C #	Order # Amends ant (The Servicing Ag (tions) \$359,000.00 \$359,000.00 \$359,000.00 TY ority (Check One) forking Ecor bital Fund (31 U.S.	gency completes all information for the estimated agreement amount.) Provide a general explanation of the Overhead Fees & Charges nomy Act Other
Optional for Assisted Acquisi Direct Cost	ttions) \$359,000.00 \$0.00 \$359,000.00 TY ority (Check One) forking Ecor bital Fund (31 U.S.	Provide a general explanation of the Overhead Fees & Charges
Direct Cost Overhead Fees & Charges Fotal Estimated Amount 0. STATUTORY AUTHORI I. Requesting Agency's Author iranchise Revolving W Fund Fund Cap	\$359,000.00 \$0.00 \$359,000.00 TY ority (Check One) Vorking Ecor bital Fund (31 U.S.	nomy Act Other
Overhead Fees & Charges Total Estimated Amount 0. STATUTORY AUTHORI . Requesting Agency's Author Tranchise Revolving W Fund Fund Cap 	\$0.00 \$359,000.00 TY prity (Check One) Vorking Ecor bital Fund (31 U.S.	
Fotal Estimated Amount 0. STATUTORY AUTHORI . Requesting Agency's Author tranchise Revolving W Fund Fund Cap	\$359,000.00 TY ority (Check One) Vorking Ecor bital Fund (31 U.S.	
. Requesting Agency's Author Tranchise Revolving W Fund Fund Cap	ority (Check One) Vorking Ecor Dital Fund (31 U.S.	
ranchise Revolving W Fund Fund Car	Vorking Ecor Di <u>tal Fund</u> (31 U.S.	
Fund Fund Car	ital Fund (31 U.S.	
		<u>C. 1535/FAR 17.5)</u> Authority
ill in Statutory Authority Tit		
	le and Citation for Fr	ranchise Fund, Revolving Fund, Working Capital Fund, or Other Authority
o. Servicing Agency's Author	ity (Check One)	
	orking Eco	onomy Act Other
Fund Fund Cap	bital Fund (31 U.S.	.C. 1535/FAR 17.5) Authority
In m Statutory Authority In	ie and Chatton for Fr	ranchise Fund, Revolving Fund, Working Capital Fund, or Other Authority
		achments that support Requesting Agency's Scope.) a availability of appropriations, the General Services Administration, the
Office of Government-wide P	olicy shall provide th	he Commission with such administrative services, funds, facilities, staff he commission with such administrative services, funds, facilities, staff e necessary to carry out its mission on a reimbursable basis.
esponsibilities for the Requesting	ng Agency and the Ser	ency and Servicing Agency (State and/or list attachments for the roles and rvicing Agency.) is amended (5 U.S.C. App.) (the "Act"), may apply to the Commission,
ny functions of the President administrator of General Serv	t under that Act, exce	ept for those in section 6 of the Act, shall be performed by the

GT&C #

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

IAA Number_

<u>- 0000 -</u> Order # <u>Amendment/Mod #</u>

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	N	um	ber

<u>- 0000 -</u> GT&C # Order

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 SPEI17C001XXX

GT&C #

Order # Amendment/Mod #

Servicing Agency's Agreement Tracking Number (Optional) ER.2017.099

P	RIMARY ORGA	NIZATION/	OFFICE INFO	DRMATION	
24.	Requ	esting Agency	y	Servicing Ag	ency
Primary Organization/Office Name	Office of the Vi	ce President		General Services Admini Office of Governmentwid	
Responsible Organization/Office Address	725 17th Stree Washington, D			1800 F Street, NW Washington, DC 20405	
	ORDER/REQ	UIREMENT	S INFORMA	FION	
 25. Order Action (Check One) ☑ New ☑ Modification (Mod) – List affa a performance period mod, state ne Summary by Line (Block 26) if the □ Cancellation – Provide a brief effective cancellation date. 	w performance pe e mod involves ad	riod for this O	rder in Block 2 or changing F	7. Fill out the Funding N unding for an Order Line	Iodification
26. Funding Modification Summary by Line	Line #	Line #	Line #	Total of All Other Lines (attach funding details)	Total
Original Line Funding	\$	\$	\$	\$	\$0.00
Cumulative Funding Changes From Prior Mods [addition (+) or reduction (-)]	\$	\$	\$	\$	\$ 0.00
Funding Change for This Mod	\$	\$	\$	\$	\$0.00
TOTAL Modified Obligation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total Advance Amount (-)	\$	\$	\$	\$	\$0.00
Net Modified Amount Due	\$0.00	\$0.00	\$0.00	\$ 0.00	\$0.00
27. Performance Period For a performance period mod, ins the start and end dates that reflect to new performance period.		Last Sign MM-DI	nature D-YYYY	End Date 09-30-2 MM-DD-	

000016FOIA No. GSA-2017-001031 (12/15)

GT&C#

IAA Order

IAA Number SPEI17C001XXX

Order # Amendment/Mod #

Servicing Agency's Agreement Tracking Number (Optional)

28. Order L	ine/Fu	inding I	nform	ation							Line	Numbe	er		n se never se se	
				Reques	ting Ag Inforn			ng		Ser	vicing	Agency	Fundin	g Inf	ormation	1
ALC										47.	-00-00	016				
Component	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	E POA	A	MAIN	SUB
TAS Required by 10/1/2014			011	2016	2017		0037	000			047	2016	2017	+	4540	000
OR Current	TAS fo	ormat		1					47-4	540.1	6/17			1		
BETC			DIS	В					COL	L						
Object Class	Code	(Optional)						100.515								
BPN			031	649358					0574	2317	5					
BPN + 4 (Op	tional)			21											
Additional A Classification (Optional)			() (4	4)											
Requesting Agency Funding Expiration Date R 09-30-2017					(09-30-2	2022		inding C	ancellati	on Da	ate				
MM-DD-YY	YY					lieren	-		M-DD-						an and the second	
Project Num	ber &		he Pr	esident	ial Advi	sory	Comm	ission	on Ele	ection	Integr	ity				
of May 11, 2017 North Americ		ductes C	lassifi	notion St	ustam ()	IAIC	28) Num	hor (O	ntional							
Breakdown						AIC	.s) Null	OR			lown	of Accie	tad A agu	isitio	n Line (loct:
Unit of Meas		moursa	DIC LA	iie Cose	,				ontract		S S	01 ASSIS	ieu Acqu	IISIIIO	n Line (.051:
Quantity		Unit	Price	1	Te	otal		-	rvicing		s					
1		\$215,0	00.00	\$ 2-	15,000.	00		Oł	ligated	Total Cost	\$ 0	.00				
Overhead Fee	es & C	harges		\$ 0.	00				Advand		\$					
Total Line A	mount	Obligat	ed	\$ 2	15,000.	00			Li	ne (-)						
								Ne	et Total	Cost	\$ 0	.00				
	-							As	sisted A	Acquis	ition S	ervicing	g Fees Ex	plana	tion	
Advance	Line	Amount	(-)	\$ 0.	00		-									
Net Liı	ne Am	ount Du	e	\$ 2	15,000.	00										
Type of Serv		equirem ervice	ents] Non-se	everable	Serv	vice	✓ No	t Appli	cable						

FMS Form 7600B

000017FOIA No. GSA-2017-001031 (12/15)	
IAA Orde	r
IAA Number SPEI17C001XXX - GT&C # - Amendment/Mod	
29. Advance Information (Complete Block 29 if the Advance Payr	nent for Products/Services was checked "Yes" on the GT&C.)
Total Advance Amount for the Order \$[All Order Line advance amounts (Block 28) must sum to this total.]
Revenue Recognition Methodology (according to SFFAS 7) (Ident account for the Requesting Agency's expense and the Servicing Age	tify the Revenue Recognition Methodology that will be used to ency's revenue)
Straight-line – Provide amount to be accrued \$	and Number of Months
Accrual Per Work Completed - Identify the accounting posting	g period:
Monthly per work completed & invoiced	
Other – Explain other regular period (bimonthly, quarter amounts will be communicated if other than bille	
30. Total Net Order Amount: \$ 215,000.00 [All Order Line Net Amounts Due for reimbursable agreements and must sum to this total.]	Net Total Costs for Assisted Acquisition Agreements (Block 28)
Other Attachments (Optional)	
BILLING & PAYMEN	NT INFORMATION
32. Payment Method (Check One) [Intra-governmental Paymen If IPAC is used, the payment method must agree with the IPAC Tra	t and Collection (IPAC) is the Preferred Method.] ding Partner Agreement (TPA).
Requesting Agency Initiated IPAC	cy Initiated IPAC
Credit Card Other – Explain	other payment method and reasoning
33. Billing Frequency (Check One)	
[An Invoice must be submitted by the Servicing Agency and acc reimbursed (i.e., via IPAC transaction)]	epted by the Requesting Agency BEFORE funds are
Monthly Quarterly Other Billing Frequency (include explanation)
34. Payment Terms (Check One)✓ 7 days Other Payment Terms (include explanation):	

000018FOIA No. GSA-2017-001031 (12/15)

IAA Order

IAA Number SPEI17C001XXX			Servicing Agency's Agreement
GT&C #	Order #	Amendment/Mod #	Tracking Number (Optional)

26 D.P		
50. Delivery/Snipping J	Information for Products (Optional)	
Agency Name		
Point of Contact (POC) N	Name & Title	
POC Email Address		
Delivery Address /Room	1 Number	
POC Telephone Number		
Special Shipping Informa		
37. PROGRAM OFFIC		
The Program Officials, a	CIALS as identified by the Requesting Agency and Ser n be fulfilled for this Order. The Program Offic	CT INFORMATION rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending of Servicing Agency
The Program Officials, a properly defined and car each agency's IAA busin	CIALS as identified by the Requesting Agency and Sen n be fulfilled for this Order. The Program Offic ness process.	rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending or
The Program Officials, a properly defined and car each agency's IAA busin Name	CIALS as identified by the Requesting Agency and Ser n be fulfilled for this Order. The Program Offic ness process. Requesting Agency	rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending of Servicing Agency
The Program Officials, a properly defined and car each agency's IAA busin Name Title	CIALS as identified by the Requesting Agency and Ser n be fulfilled for this Order. The Program Offic ness process. Requesting Agency Katie Purucker	rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending of Servicing Agency Allison Brigati
The Program Officials, a properly defined and car each agency's IAA busin Name Title Telephone Number	CIALS as identified by the Requesting Agency and Ser n be fulfilled for this Order. The Program Offic ness process.	rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending of Servicing Agency Allison Brigati
The Program Officials, a properly defined and car	CIALS as identified by the Requesting Agency and Ser n be fulfilled for this Order. The Program Offic ness process.	rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending of Servicing Agency Allison Brigati
The Program Officials, a properly defined and car each agency's IAA busin Name Title Telephone Number Fax Number	CIALS as identified by the Requesting Agency and Ser n be fulfilled for this Order. The Program Offic ness process.	rvicing Agency, must ensure that the scope of work is ial may or may not be the Contracting Officer depending or Servicing Agency Allison Brigati Associate Administrator, OGP

	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)	MEIRA FRIED
Date Signed	07-13-2017	7/13/17

IAA Order

IAA Number SPEI17C001XXX

GT&C#

Order # Amendment/Mod #

Servicing Agency's Agreement Tracking Number (Optional)

EDIANCE OFFICE D	CONTACT INFORMA	
	on contact (POCs) contact must ensure that the payment (Requestin ion are accurate and timely for this Order.	g Agency), billing (Servicing Agency), and
39.	Requesting Agency (Payment Office)	Servicing Agency (Billing Office)
Name	Kristin Savercool	General Services Administration
Title	Budget Analyst	Financial Information & Operations Div
Office Address	725 17th Street, NW Washington, DC 20503	USDA (FIOD-A) 2300 Main Street Kansas City, MO 64108
Telephone Number	(b)(6)	(816) 926-4287
Fax Number		
Email Address	(b) (6)	kc.generalfunds.billingrequests@gsa.gov
Signature & Date (Optional)	(b)(6)	
	f Contacts (POCs) (as determined by each Age TING Office Points of Contact (POCs). Requesting Agency	Servicing Agency
Name		Valerie Whittington (Financial POC)
Title		Program Analyst
Office Address		1800 F Street, NW Washington, DC 20405
Telephone Number		(202) 501-3395
Fax Number		
Email Address		valerie.whittington@gsa.gov
Signature & Date (Optional)	-	
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		
Name		
Title		
Office Address		
Telephone Number		
Fax Number		
Email Address		
Signature & Date (Optional)		

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

IAA Number SPEI17C001037 GT&C #

 $\frac{000}{\text{Order }\#} = \frac{01}{\text{Am}}$

01 Servicing Agency's Agreement Amendment/Mod # Tracking Number (Optional)

MBOGP-OVPSPEI17C001

PRIMARY ORGANIZATION/OFFICE INFORMATION

24.	Requesting Agency	Servicing Agency
Primary Organization/Office Name		General Services Administration Office of Governmentwide Policy
Responsible Organization/Office Address		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/OVP 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	Last Signatu	Ire End	Date 09-30-2	017
For a performance period mod, inse the start and end dates that reflect to new performance period.		MM-DD-Y	YYY	MM-DD-Y	TYYY

IAA Order

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

28. Order Line/Funding Information					Line Number											
	Requesting Agency Funding Information					Servicing Agency Funding Information										
ALC			11-0	3-0001						47-00-0016						
Component	SP	ATA	AID	BPOA	EPOA	Α	MAIN	SUB	SP	ATA	AID	BPOA	E POA	A	MAIN	SUB
TAS Required by 10/1/2014			011	2016	2017		0037	000			047				4540	001
OR Current T	TAS fo	rmat		2010	2011		0001	000	17X	1540 (4040	001
BETC	110 10	linat	DIS	B					47X4540.001 COLL							
Object Class	Code ((Optional)														
BPN				649358					9642	964253686						
BPN + 4 (Opt	tional)															
Additional Ac Classification (Optional)			<mark>(b)</mark>	(4)												
Requesting A 09-30-202	17	Funding	g Expi	ration D	ate				9-30-	2022	_	nding C	ancellatio	on Da	te	
MM-DD-YY	ΥY									YYYY						
Project Num	hov &		he Pre	esidenti	al Advis	sory	Comm	ission	on Ele	ection	Integri	ty				
Support activities of May 11, 2017	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.						Integrity									
Breakdown o						AIC	.s) Null			·		£ 1				
Unit of Meas		ndursa	ole Lu	ie Costs				OR	ontract		s s	I ASSIST	ed Acqu	ISITIO	n Line C	OST:
Quantity	Juie	Unit	Drico		Т	tal		_	vicing		\$					
Quantity		Unit	Flice			lai		50	-		Ļ					
1		\$0.00		\$ 0.	00			Ob	ligated	Total Cost	\$ 0.	00				
Overhead Fee	es & C	harges		\$ 0.	00				Advan		\$					
Total Line Ar	nount	Obligate	ed	\$ 0.	00				Li	ne (-)						
								Ne	t Total	Cost	\$ 0.	00				
								As	sisted A	Acquis	ition S	ervicing	Fees Exp	planat	ion	
Advance	Line A	Amount	(-)	\$ 0.	00											
Net Lin	Net Line Amount Due		\$ 0 .	00												
Type of Serv	Type of Service Requirements															
Severable Service Non-severable Service INot Applicable																

000022FOIA No. GSA-2017-00103	31 (12/15)	IAA Order			
		IAA OIUEI			
IAA Number SPEI17C001037	_ 000	- 01	Servicing Agency's Agreement		
GT&C #	Order #	Amendment/Mod #	Tracking Number (Optional) MBOGP-OVPSPEI17C001		
29. Advance Information (Comple	ete Block 29	if the Advance Paymen	t for Products/Services was checked "Yes" on the GT&C.)		
Total Advance Amount for the O	rder \$	[All	Order Line advance amounts (Block 28) must sum to this total.]		
Revenue Recognition Methodolog account for the Requesting Agency			the Revenue Recognition Methodology that will be used to y's revenue)		
Straight-line – Provide amount	to be accrue	ed \$	_ and Number of Months		
Accrual Per Work Completed -	- Identify the	e accounting posting pe	riod:		
Monthly per work comp	leted & invo	viced			
			etc.) for posting accruals and how the accrual		
amounts will be	communicat	ed if other than billed.			
30. Total Net Order Amount: \$ [All Order Line Net Amounts Due : must sum to this total.]	0.00 for reimburs	able agreements and Ne	t Total Costs for Assisted Acquisition Agreements (Block 28)		
31. Attachments (State or list attac	hments.)				
☐ Key project and/or acquisitio	n milestones	(Optional except for As	ssisted Acquisition Agreements)		
Other Attachments (Optional)					
	BIL	LING & PAYMENT	INFORMATION		
32. Payment Method (Check One If IPAC is used, the payment method)			ad Collection (IPAC) is the Preferred Method.] g Partner Agreement (TPA).		
Requesting Agency Initiated	d IPAC	Servicing Agency I	nitiated IPAC		
Credit Card		Other – Explain oth	er payment method and reasoning		
33. Billing Frequency (Check One	e)				
[An Invoice must be submitted by the Servicing Agency and accepted by the Requesting Agency BEFORE funds are reimbursed (i.e., via IPAC transaction)]					
Monthly Quarterly		Billing Frequency (incl	ude explanation)		
34. Payment Terms (Check One) ✓ 7 days Other Paym	ent Terms (i	nclude explanation):			
1					

IAA Order

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

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

36. Delivery/Shipping Information for Produc	ts (Optional)
Agency Name	
Point of Contact (POC) Name & Title	
POC Email Address	
Delivery Address /Room Number	
POC Telephone Number	
Sussial Shinning Information	

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)	Digita iy s gred by ALLISON BRIGATI DK c-u3, o-u3 6. Government, cu-General Services Administration, cn-ALLISON BRIGATI, 0.9 23 2.15200300.100.1.1+ 7001003 5 073 Dete: 2017 JD 254 : 25-0 100
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		h l
Email Address	(b) (6)	stefan.grabas@gsa.gov
SIGNATURE	(b)(6)	D gita 'y signad by STEFAN ORABAS Dir olda, olda, Governmer, our-Centeri Barvose Administration, on-STEFAN GRABAS, 0.0.25.2.16200300.100.1.1= 7001002862578 Date: 2017.07.2.00.013.3
Date Signed	07-25-2017	07-25-2017

Signature & Date (Optional)

Name Title

Office Address

Fax Number Email Address

Office Address

Telephone Number Fax Number Email Address

Name Title

Telephone Number

Signature & Date (Optional)

DEPARTMENT OF THE TREASURY

000024FOIA No. GSA-2017-	001031 (12/15) IAA Order		
IAA Number SPEI17C00103 GT&C #		Servicing Agency's Agreement Tracking Number (Optional)	
	CONTACT INFOR	IATION	
		sting Agency), billing (Servicing Agency),	and
39.	Requesting Agency (Payment Offic) Servicing Agency (Billing	(Office)
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	Contacts (POCs) (as determined by each TING Office Points of Contact (POCs).	Agency)	
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