

# ALASKA STATE LEGISLATURE



DEC 27 2013

REPRESENTATIVE LES GARA

December 27, 2013

Representative Mike Hawker  
Chair, Legislative Council  
733 W. 4th Ave. Suite 211  
Anchorage AK, 99501-2133

Representative Hawker:

Please find enclosed two receipts for approved travel February 15-18 and February 23-15, 2013. I am seeking reimbursement for airfare only. The travel was approved by Minority Leader Rep. Beth Kerttula's office, and those authorizations are included. The trips were to attend a mid-session constituent meeting on February 17 and Anchorage Caucus on February 23.

I apologize for the delay in presenting these expenditures for reimbursement. My office was just contacted today and informed that these travel reimbursement claims were not presented to the Accounting office.

Thank you for consideration of this matter. Please let me know if you need any additional information from my office.

Best Regards,

A handwritten signature in black ink, appearing to read "Les Gara", with a long horizontal flourish extending to the right.

Rep. Les Gara

DEC 27 2013

Legislative Affairs Agency  
Travel Claim - 11/19/2009**Purpose****of Travel:** mid-session constituent meeting/pizza partyTravel Advance Requested: YES ☐ NO ☒**Please attach boarding passes & return to LAA Accounting.**

Return Form to: Shannen Fisk, LAA, State Capitol, Rm 3, Juneau, Alaska 99801-1182 (907) 465-6625 or Fax (907) 465-1772

**ITINERARY**

List each date in travel status and indicate where overnights. Indicate which meals were included with your registration or conference fee. Meal allowances should not be claimed if you consumed a meal included in the fee.

1. On	2/15/2013	I (will travel) (traveled) from:	Juneau	to:	Anchorage	(Check if meal was provided)			ACCOUNTING	
	Date		City		City	Breakfast	Lunch	Dinner	Lodge \$	Meals \$
at:	7:50 AM	(indicate time on official business)								
I overnights on	15-Feb	in	Anchorage							
I overnights on	16-Feb	in	Anchorage							
I overnights on	17-Feb	in	Anchorage							
I overnights on		in								
I overnights on		in								
I overnights on		in								
I overnights on		in								
I returned to	Juneau	on	2/18/2013	at	10:00 AM					
	Home Station		Date		Time					
<b>TOTAL</b>										

(Meals are prorated daily, and are determined by the time of day business travel begins and ends.)

1. If a portion of this trip includes personal business, list dates of personal business:

(or complete form showing shortest time trip could have taken)

2. Attach lodging receipts or check box to receive lodging per diem in lieu of receipt.

3. Check box if you wish to claim meal per diem **only** (no lodging expense incurred).4. Check box if you wish to claim airfare and/or surface travel expenses **only** (no lodging or meal per diem).
☐  
☐  
☒
**FINAL TRAVEL COSTS****ACCOUNTING**1. Was this trip completed as stated above? YES ☒ NO ☐ If NO, note changes below. If YES, continue.2. Airfare or Conference Fee reimbursement. Please attach boarding passes, purchase confirmation email, written quote, or conference fee receipt. **DO NOT** claim if ticket or fee was paid for by LAA or by personal mileage plan.

Airfare \$ 390.10 Conference Fee \$

390.10

3. Taxi, Parking, Car Rental, Rental Car Gas receipts, should be itemized and receipts attached. (Items less than \$15 don't require a receipt but must be itemized.)

4. Mileage: \_\_\_\_\_ miles at Federal Rate.

From:

To:

Accounting Only &gt;

@

5. Business phone calls (attach itemized hotel bill showing phone charges). **Calls to be reimbursed must be initialed.**

Mail or Pouch Check to:

Les Gara 12-27-13

Name of Traveler (please print)

Date

Total

390.10

Boe for LG

Signature of Traveler

Less Advance

0

Claimant certifies by signing the Travel Claim that the facts contained on this form and supporting documents are correct and constitute a valid claim against the State of Alaska.

Signature of Authorizer

Final Pmt \$

390.10

**of Travel:** participate in Anchorage Caucus meeting

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Legislative Affairs Agency  
Travel Claim - 11/19/2009

Travel Advance Requested: YES ☐ NO ☒

**Please attach boarding passes & return to LAA  
Accounting.**

**Return Form to: Shannen Fisk, LAA, State Capitol, Rm 3, Juneau, Alaska 99801-1182 (907) 465-6625 or Fax (907) 465-1772**

## ITINERARY

List each date in travel status and indicate where overnights. *Indicate which meals were included with your registration or conference fee.* Meal allowances should not be claimed if you consumed a meal included in the fee.

1. On 2/23/2013 I (will travel) (traveled) from: Juneau to: Anchorage  
 Date City City  
 at: 7:25 AMPM (Indicate time on official business)  
 (Check if meal was provided)

	DATE		CITY/STATE	Breakfast	Lunch	Dinner	ACCOUNTING	
							Lodge \$	Meals \$
I overnighted on	<u>23-Feb</u>	in	<u>Anchorage</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I overnighted on	<u>24-Feb</u>	in	<u>Anchorage</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I overnighted on		in		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I overnighted on		in		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I overnighted on		in		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I overnighted on		in		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I overnighted on		in		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I returned to	<u>Juneau</u>	on	<u>2/25/2013</u>	at	<u>1:07 AM</u> PM			
	Home Station		Date		Time			

**TOTAL**

*(Meals are prorated daily, and are determined by the time of day business travel begins and ends.)*

1. If a portion of this trip includes personal business, list dates of personal business: \_\_\_\_\_  
(or complete form showing shortest time trip could have taken)
2. Attach lodging receipts or check box to receive lodging per diem in lieu of receipt.
3. Check box if you wish to claim meal per diem **only** (no lodging expense incurred).
4. Check box if you wish to claim airfare and/or surface travel expenses **only** (no lodging or meal per diem).

### FINAL TRAVEL COSTS

1. Was this trip completed as stated above? YES ☒ NO ☐ If NO, note changes below. If YES, continue.

2. Airfare or Conference Fee reimbursement. Please attach boarding passes, purchase confirmation email, written quote, or conference fee receipt. **DO NOT** claim if ticket or fee was paid for by LAA or by personal mileage plan.

Airfare	\$	555.3	Conference Fee	\$
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3. Taxi, Parking, Car Rental, Rental Car Gas receipts, should be itemized and receipts attached. (Items less than \$15 don't require a receipt but must be itemized.)

4. Mileage: \_\_\_\_\_ miles at Federal Rate. From: \_\_\_\_\_ To: \_\_\_\_\_  
Accounting Only > @

5. Business phone calls (attach itemized hotel bill showing phone charges). **Calls to be reimbursed must be initialed.**

**Mail or Pouch Check to:**

Les Gara	12.27.13
<b>Name of Traveler (please print)</b>	<b>Date</b>

Signature of Traveler

**Claimant certifies by signing the Travel Claim that the facts contained on this form and supporting documents are correct and constitute a valid claim against the State of Alaska.**

Signature of Authorizer

**Total**

Less Advance

Final Pmt \$