

T/C 80

KING COUNTY TRAVEL AUTHORIZATION & CLAIM VOUCHER

VOUCHER NO. 11/29/91

TRAVEL AUTHORIZED BY THIS FORM REQUIRES THE INDIVIDUAL UPON HIS RETURN TO SUBMIT A REPORT DESCRIBING THE ACCOMPLISHMENTS OF THE TRIP TO HIS DEPARTMENT DIRECTOR.

REQUEST DATE 11/29/91

DEPARTMENT King County Dist Court

DIVISION Seattle

EMPLOYEES NAME John G. Ritchie

TITLE Judge

EMPLOYEE SOCIAL SECURITY NO.

LINE	ARMS CODING BLOCK					PROJECT OR WORK AUTH.
	ORG. UNIT	ACCOUNT	TASK	OPTION		
1	1588	53310				
2						

COMPTROLLER'S OFFICE USE ONLY

OTHER KING COUNTY EMPLOYEES REQUESTING (OR APPROVED) TO TRAVEL TO THE MEETING N/A

ORGANIZATION TO BE VISITED (COMPANY - ASSOCIATION - ETC. & PLACE OF VISIT) Center for Law Related Education - Phoenix Arizona

PURPOSE OF THE TRIP (IF BROCHURE AVAILABLE PLEASE ATTACH) Course - Law Related Education

DATE LEAVING KING COUNTY 10-2-91

DATE OF MEETING BEGINNING AND LOCATION Phoenix Arizona

DATE MEETING ENDS

DATE RETURNING TO KING COUNTY 10-29-91

BENEFITS OF ATTENDANCE TO KING COUNTY AND INDIVIDUAL - Allowance on Law Related Education

AUTHORIZATION FOR ESTIMATED TRAVEL EXPENSES

TRAVEL MODE: AIR RAIL AUTO

FARES \$258 -

LODGING* N/A

MEALS N/A

REGISTRATION N/A

MISCELLANEOUS Auto Rental 147¹⁶

TOTAL ESTIMATED EXPENSES \$405¹⁶

*EXPLAIN IF OTHER THAN MEETING SITE HOTEL IS USED FOR LODGING.

AUTO RENTAL REQUESTED: YES NO

JUSTIFICATION:

REQUESTER'S SIGNATURE [Signature] DATE 11-4-91

APPROVED DEPARTMENT HEAD (OR DESIGNEE) DATE

APPROVED CO. ADMINISTRATIVE OFFICER DATE

REVIEWED COUNTY EXECUTIVE DATE

CLAIM FOR REIMBURSEMENT

(TO BE PREPARED AFTER RETURN FROM TRAVEL)

FARES (IF NOT PAID IN ADVANCE) \$258 -

LODGING

MEALS

REGISTRATION

MISCELLANEOUS (ITEMIZE) Auto Rental 147¹⁶

TOTAL ACTUAL EXPENSES \$405¹⁶

NOTE: RECEIPTS AND EXPENSE ITEMIZATIONS MUST BE ATTACHED WITH CLAIM VOUCHER.

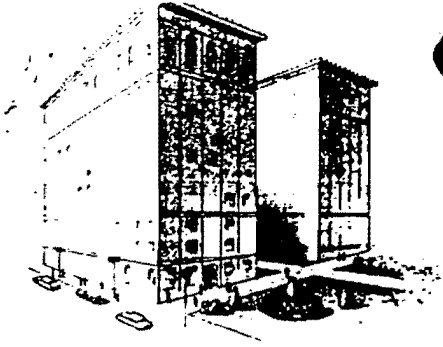
CERTIFICATION I hereby certify under penalty of perjury that this is a true and correct claim for necessary expenses incurred by me and that no payment has been received by me on account thereof.

CLAIMANT'S SIGNATURE [Signature] DATE

APPROVED DEPARTMENT HEAD (OR DESIGNEE) DATE

APPROVED OFFICE OF COMPTROLLER DATE

EXHIBIT F



Seattle District Court

E-326 KING COUNTY COURTHOUSE
SEATTLE, WASHINGTON 98104
296-3625

JOHN G. RITCHIE
JUDGE

MEMORANDUM

TO: Cathy Grindle
FROM: John G. Ritchie
RE: Washington Ctr. for Law-Related Education Conference
DATE: November 4, 1991

I am enclosing the following items which relate to my recent trip concerning the law related education seminar in Arizona:

1. Cancelled check (\$258)
2. Airline reservation
3. Auto rental (\$147.16)

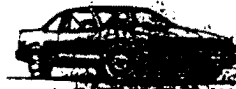
I have prorated the car rental between personal use and use of the vehicle relating to the conference.

Total is \$405.16.

I am making no request for lodging reimbursement.



SUPERIOR RENT-A-CAR
 HARBOR INTERNATIONAL AIRPORT
 Superior Return Office Address
 2511 E. JEFFERSON STREET
 PHOENIX, ARIZONA 85034
 Phone (602) 231-0010
 National Toll Free: 1 - 800 - 237-8106



SUPERIOR FEATURES ON CARS

RENTAL AGREEMENT

LESSEE #1:
 REFERRED BY: RB 042010
 NAME: ROBERT DONOVAN
 STREET: _____
 CITY: PHOENIX PROVINCE OR STATE: AZ ZIP: 85025
 LICENSE NO.: GRN 471 HOME PHONE: _____
 EXPIRATION DATE: 11/1/91 DATE OF BIRTH: 11/1/51 EMP. ID: _____
 SOCIAL SECURITY #: _____
 PLACE OF EMPLOYMENT: Guar County
 LOCAL ADDRESS: 1111 1st LOCAL PH: _____

LESSEE #2:
 NAME: _____
 HOME ADDRESS: _____
 LICENSE NO.: _____ STATE OR COUNTY: _____
 PHONE #: _____ SS#: _____
 EXPIRATION DATE: _____ DATE OF BIRTH: _____

Allowing an unlisted driver to operate the vehicle without written permission from Superior constitutes a breach of this rental agreement

Rental and Leasing Driver's Insurance to be PRIMARY; exception: The valid and collectible liability insurance or personal injury protection insurance providing coverage for the lessor of a motor vehicle for rent or lease shall be primary UNLESS OTHERWISE STATED* In bold type on the face of the rental or lease agreement. Such insurance shall be primary for the limits of liability and personal injury protection coverage as required. *YOU ARE HEREBY NOTIFIED THAT BY SIGNING THIS CONTRACT BELOW YOU AGREE THAT YOUR OWN LIABILITY AND PERSONAL INJURY PROTECTION INSURANCE, IF ANY, WILL PROVIDE PRIMARY INSURANCE COVERAGE UP TO ITS FULL POLICY LIMITS.

LESSEE NO. 1 INSURANCE COMPANY: Allstate
 LESSEE NO. 2 INSURANCE COMPANY: _____

By signing this agreement I hereby authorize any Law Enforcement Agency to release to Superior Rent A Car any reports involving the vehicle rented by me.

CREDIT CARD IMPRINT

9917040205
 5020916
 6112919
 045820 Y
 1234 567890
 SUPERIOR RENT A CAR

STOCK #/COLOR: 040 GRN
 LICENSE #/MAKE: GRN 471
 CONDITION: crack windshield

Lessee agrees to return vehicle on or before the date and at the place specified below.
 CAR DUE BACK: 10/29/91
 TIME DUE BACK: 0007 A.M./P.M.
 PLACE: 2511 E. Jefferson
 DATE IN: 10/27/91 TIME: 9:50 A.M./P.M.
 PLACE: PHOENIX
 DATE OUT: 10/8/91 TIME: 1:35 A.M./P.M.
 PLACE: T-2

RATE SELECTED ON MILEAGE:
 UNLIMITED MILEAGE

<input checked="" type="checkbox"/> 3 Weeks @ 74.99		
Days @		
Drop Off		
Add'l Driver		
Under 25		
Other		
Out of State Charge		
C.D.W.		
P.A.P.		
P.E.C.		
Sub-Total		
Sales Tax 8.7%		
V. Gas		
Deposit		
Total		

COLLISION DAMAGE WAIVER
 Lessee initials to accept or decline at \$1,999 per day. If declined, Collision Damage Waiver (C.D.W.) of Lessee's value of damage to vehicle. Lessee initials to accept or decline day or fraction thereof C.D.W. of Lessee's responsibility for damage to vehicle. Violation of any of the terms of C.D.W. makes Lessee fully liable for damage to vehicle. C.D.W. is not insurance. See reverse side.

Personal Accident
 Personal Accident
 Theft
 Fire

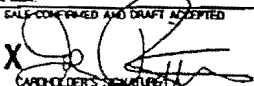
I have read the terms and conditions of this agreement including those on the reverse side and hereby agree to the same.

LESSEE NO. 1: _____
 LESSEE NO. 2: _____

CAR TO BE TAKEN OUT OF THE STATE OF ARIZONA

POINT OF SALE DRAFT

SUPERIOR RENT
 1100891
 5223922166
 03/94 CV
 0215902

License Plate No.-State		Card Type	
		Debit	Credit
Date	AUTHORIZATION NO. 55609		
QUAN.	DESCRIPTION	AMOUNT	
CLERK	SUBTOTAL		
	TAX		
	TIPS		
	TOTAL 294.34		
<small>Cardholder acknowledges receipt of goods and/or services in the amount of the TOTAL shown herein and agrees to purchase the obligations set forth in the Cardholder's Agreement with the issuer.</small>			
SALES CONFIRMED AND DRAFT ACCEPTED  CARDHOLDER'S SIGNATURE			

MERCHANT COPY



Northby Building • Fishermen's Terminal • Seattle, WA 98119-1630
206-285-3715 • 1-800-782-5822

RITCHIE JOHN
9B - Down
7D up -

DATE: OCT 2 1991

INVOICE

AIRLINE	FLIGHT CL	DATE	FROM	TO	DEPARTS	ARRIVES	STAT
ALASKA	612	V 8OCT	SIATLLE	PHOENIX AZ	1015A	1255P	OK
			TUE 725 NONSTOP	LUNCH			
ALASKA	613	V 29OCT	PHOENIX AZ	SEATTLE	1110A	110P	OK
			TUE 800 NONSTOP	LUNCH			

THIS IS A NON REFUNDABLE FARE
YOU MAY CHANGE THE RETURN FLIGHT FOR A
\$75.00 FEE PROVIDING YOU DO SO AT LEAST 7 DAYS IN ADVANCE
AND V SPACE IS AVAILABLE

THANK YOU FOR YOUR BUSINESS

*major time change on
this flight.*

*Thanks
Kirsti*

TERMS: Net upon receipt of invoice. Service charge of 1.5% per month will be charged on unpaid balance.

HN G. RITCHIE

6614

August 28 1991

19 3/12/91

HE of Loomis Travel \$ 258⁰⁰/₁₀₀
Two hundred fifty eight and no DOLLARS
SECURITY PACIFIC BANK WASHINGTON
Private Banking 125-1 - P.O. Box 34433
Seattle, Washington 98124
SECURITY PACIFIC • PRIVATE BANKING

Travel - Law Related Education Conference
180135768
[Signature]