

Travel Approval Form

| Department: | District Clerk | |
|----------------|--|---|
| Event Name: | TDCA 23rd Annual Workshop & Clerks Cc | Court Decision: |
| Location: | Kerrville, TX | This section to be completed by County Judge's Office |
| Event Dates: | October 17-19, 2023 | COMMISSIONERS COURT |
| Purpose: | ✓ Required Continuing Education/Certification✓ Job Training | OCT 1 0 2023 |
| | □ Other: | Approved |
| Name of Atten | dees: | |
| David Lloyd | | |
| Chris Taylor | | |
| Kristine Bock | | |
| | ments Checklist:* Same-Day Travel - Commissioners Court Approval | is not required ** |
| 0 | vernight Travel | |
| | Registration Information or Confirmation | uest Form |
| Fo | or Out of State Travel, please also include: | |
| | Cost Estimation Breakdown for Trip with Airfare, Rental Ca Narrative as to why the Out of State Travel is necessary | r, Meals, Hotel, Etc. |
| Signature of E | lected Official/Department Head: | |



TEXAS DISTRICT COURT ALLIANCE



TDCA 23rd Annual Workshop and "CLERK'S COLLEGE"
Course Study I - 2023

Criminal Cases, Court Costs, Current Issues and Legislative Updates

Dates: October 17 - 19, 2023 YO Ranch Hotel and Conference Center, 2033 Sidney Baker Street, Kerrville, Texas 78028

IMPORTANT THAT EACH ATTENDEE COMPLETE THIS FORM AND

EMAIL TO tdca.treasurer@gmail.com

ALONG WITH A COPY OF REGISTRATION FORM.

Registration Fees:

DEADLINE TO REGISTER IS OCTOBER 6th & payment should be by credit card or paid at the door when checking in for the workshop.

TDCA Member & Staff:\$50 each (official and/or staff) Non-members / Dues\$100 each (official and/or staff) not paid

| Name: | David Lloyd | County: Johnson | | |
|----------|--|---------------------------|--|--|
| Comple | ete mailing address: | P.O. Box 495, Cle | burne, TX 76033 | |
| Phone: | (817) 556-6839 | Fax: () | Email: | |
| X | District Clerk | Deput | ry District Clerk | |
| | County Clerk | Deput | ry County Clerk | |
| - | Combo Clerk | Deput | ty Combo Clerk | |
| | Court Personnel | Other | · | |
| http:// | www.certifiedpaym | ents.net BUREA | reau/Certified Payment's Consumer Website AU: 5107861 IVR System Telephone Number 1-866-549-101 egistration fee is \$50. | |
| If mem | bership dues have r | not been paid <u>,</u> re | gistration fee is \$100. Each clerk and deputy needs to fill out | |
| | rm and email to tdcared redit card purchase. | .treasurer@gmail _ | 1.com Certified Payments will assess an additional 2.50% to | |
| Certifie | ed Payments Confirr | mation Number: | 100278884394 | |



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| Name: | Chris Taylor | County: Johnson | | |
|----------|---|-----------------|---|-------|
| Comple | ete mailing address: | P.O. Box 49 | 495, Cleburne, TX 76033 | |
| Phone: | (817) 556-6839 | Fax: (|) Email: | |
| | District Clerk | X | Deputy District Clerk | |
| | County Clerk | | Deputy County Clerk | |
| | Combo Clerk | | Deputy Combo Clerk | |
| | Court Personnel | | Other | |
| http://v | www.certifiedpaym | ents.net B | via Bureau/Certified Payment's Consumer Website BUREAU: 5107861 IVR System Telephone Number 1-866-549 nber, registration fee is \$50. | -1010 |
| If mem | bership dues have | not been po | paid, registration fee is \$100. Each clerk and deputy needs to fil | l out |
| | m and email to tde edit card purchase. | | @gmail.com Certified Payments will assess an additional 2.50% | to |
| Certifie | ed Payments Confir | mation Nui | umber: 100278884406 | |



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EMAIL TO tdca.treasurer@gmail.com

ALONG WITH A COPY OF REGISTRATION FORM.

County: Johnson

Registration Fees:

Name: Kristine Bock

DEADLINE TO REGISTER IS OCTOBER 6th & payment should be by credit card or paid at the door when checking in for the workshop.

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| Complete mailing address: | P.O. Box 495, C | leburne, TX 76033 |
|--|------------------|---|
| Phone: (817) 556-6839 | Fax: () | Email: |
| District Clerk | XDep | uty District Clerk |
| County Clerk | Dep | uty County Clerk |
| Combo Clerk | Dep | uty Combo Clerk |
| Court Personnel | Othe | er |
| http://www.certifiedpaym If you are currently a paid | | EAU: 5107861 IVR System Telephone Number 1-866-549-1010 registration fee is \$50. |
| If membership dues have | not been paid, ı | registration fee is \$100. Each clerk and deputy needs to fill out |
| this form and email to tdo your credit card purchase. | | ail.com Certified Payments will assess an additional 2.50% to |
| Certified Payments Confir | mation Numbe | r:100278884414 |

Completed registration forms (with checks if not paid by credit card) for each attendee must be <u>mailed</u> to (before October 1ST):

Texas District Court Alliance c/o Sherry Griffis, TDCA Treasurer 200 W. Houston Street, Suite 234 Marshall, TX 75670

If your annual budget does not begin until October 1, 2023, you will need to pay by credit card, make personal payment or bring your payment to be paid at the door, but your Registration form must be emailed to the TDCA Treasurer by the 1st of October.

Some of the costs needed to provide the TDCA workshop will possibly be provided for with a grant from the Court of Criminal Appeals. If the grant application is approved the following information must be provided to participants: Registration fees will be used to provide future expenses or for items the grant cannot sufficiently cover, all of which must be allowable under the grant guidelines of the Court of Criminal Appeals. The registration fee is not mandatory under the grant conditions however, TDCA requests payment since, at this time, it is unknown if the grant application will be approved.

| TDCA TREASURER | USE ONLY: | | |
|----------------|-----------|--|--|
| DATE RECEIVED: | | | |
| CHECK NUMBER: | | | |
| COUNTY | PERSONAL | | |
| DUES PAID | | | |
| AMOUNT PAID | | | |
| | | | |

TDCA Workshop Cancellation, Refund and Materials Policy

Materials will be provided in your notebook and forms will be provided on a flash drive. Non-registrations not eligible to receive either forms or speaker materials.

Full payment of \$50/\$100 per registrant is required. We will not accept partial payments.

Registration payment will be available through Certified Payments (credit card) or checks mailed to Sherry Griffis at address above. You will not receive materials and forms until payment is received.

Select Language



CERTIFIED PAYMENTS - PRINT RECEIPT

| Harrison Co, | ΤX | TDCA | WEB |
|--------------|----|------|-----|
| 5107861 | | | |

| I-30 Alpha Numeric David Lloyd Member | Payment Amount \$50.00 | Conv Fee \$1.25 | Total | Status | |
|--|---|---|---|---|---|
| • | \$50.00 | \$1.25 | ¢E4.0E | 00/00/00 | |
| Registration | | 7 | \$51.25 | 09/28/23 4:23 PM 028817 | ⊘ APPROVED |
| Chris Taylor Staff Registration | \$50.00 | \$1.25 | \$51.25 | 09/28/23 4:23 PM 028424 | ⊘ APPROVED |
| Kristine Bock Staff Registration | \$50.00 | \$1.25 | \$51.25 | 09/28/23 4:23 PM 028478 | ⊘ APPROVED |
| 2 3 7 | chris Taylor taff tegistration tristine Bock | chris Taylor \$50.00 taff Registration cristine Bock \$50.00 taff | Chris Taylor \$50.00 \$1.25 Itaff Registration Cristine Bock \$50.00 \$1.25 Itaff | Chris Taylor \$50.00 \$1.25 \$51.25 staff segistration \$50.00 \$1.25 \$51.25 staff | thris Taylor \$50.00 \$1.25 \$51.25 09/28/23 4:23 PM 028424 eristine Bock \$50.00 \$1.25 \$51.25 09/28/23 4:23 PM |

\$150.00

\$3.75 \$153.75

BUREAU INFORMATION

BILLING INFORMATION

| First Name | Christopher | First Name | Christopher |
|-------------|---------------|-------------|---------------|
| Middle Name | | Middle Name | |
| Last Name | Taylor | Last Name | Taylor |
| Name Suffix | | Name Suffix | |
| Telephone | | Telephone | |
| Address | | Address | |
| City | CLEBURNE | City | CLEBURNE |
| State | Texas | State | Texas |
| Zip Code | | Zip Code | |
| Country | United States | Country | United States |

BANK CARD INFORMATION

| Card Type | Card Number |
|-----------|---------------|
| Exp. Date | Security Code |



WORKSHOP AGENDA Y.O. Hotel ~ Kerrville, Texas October 17-19, 2023

TUESDAY, OCTOBER 17

| TUESDAY, OCTOBER | <u>17</u> |
|------------------|--|
| 1:00 – 2:00 | INMATE MAIL Tammy Shelby, Supervisor of Mail System Coordinator Panel, TDCJ |
| 2:00 – 3:15 | <u>DESTRUCTION OF EXHIBITS</u> Amy Manor, Travis County Deputy District Clerk |
| 3:15 – 4:15 | CYBER SECURITY FOR COURTS Casey Kennedy, Director of Information Services, Office of Court Administration |
| 4:15 – 5:15 | GRAND and PETIT JURY PROCESS Hon. Clarissa Webster, Ector County District Clerk |
| WEDNESDAY, OCTOR | BER 18 |
| 9:00 – 9:30 | TDCA BUSINESS MEETING |
| 9:30 - 11:30 | <u>LEGISLATIVE UPDATE</u> Hon. Angelia Orr, Texas State Representative, House District 13 |
| 11:30 – 1:00 | WORKING LUNCH Chet Garner, The Daytripper |
| 1:00 - 1:15 | ~~BREAK~~ |
| 1:15 – 2:15 | EVERYTHING WRITS/APPEALS Hon. Deanna Williamson/Kelly Reyes, Court of Criminal Appeals Clerk |
| 2:15 – 3:15 | APPEALS/NISIs Gabe Price, McClennan County Assistant District Attorney |
| 3:15 – 5:00 | SOVERIGN CITIZENS/REPUBLIC OF TEXAS Ariane Flores, Civil Division Chief, Williamson County Attorney's Office |
| THURSDAY, OCTOBE | <u>R 19</u> |
| 9:00 – 10:00 | MENTAL HEALTH/CRIMINAL REPORTING Sheri Woodfin, Court Consultant, Office of Court Administration |
| 10:00 – 11:00 | JUVENILE LAW PROCESS Kaci Singer, Deputy General Counsel, Texas Juvenile Justice Department |
| | |

CLERK'S ROUNDTABLE

11:00 - 12:00

| Archived: Thursday, September 28, 2023 4:58:51 PM From: reservations@yoranchhotel.com Sent: Thu, 28 Sep 2023 18:05:12 +0000Received: from SA1PR09MB10170.namprd09.prod.outlook.com (2603:cipher=TLS_ECDHE_RSA_WITH_AES_256_GCM_SBL0GCC02FT039.eop To: Chris Taylor Subject: Confirmation# Y.O. Ranch Hotel and Importance: Normal | :10b6:806:280::12) with Micros :HA384) id 15.20.6838.25; Thu | soft SMTP Server (version=TLS1_2, |
|---|---|---|
| You don't often get email from reservations@yoranchhotel.com | m. <u>Learn why this is important</u> | |
| | email originated from outside of the nen opening links or attachments | the Johnson County email system. Report suspicious emails. |
| | | |
| 09-28-23 CHRIS TAYLOR | | |
| , Thank you for making your reservation at reserved the following accommodations fo | | Conference Center. We have |
| Arrival Date Departure Date 10-17-23 10-19-23 Your Confirmation Number is necessary to cancel or change plans, pleasyour arrival date to avoid one night's room | | Central Standard Time on |
| Again, thank you for choosing the Y.O. Ra to having you as our guest. | nch Hotel and Conferenc | e Center. We look forward |
| Best regards, | | |
| Reservations Office | | |