

AGENDA PLACEMENT FORM

(Submission Deadline - Monday, 5:00 PM before Regular Court Meetings)

Date: January 6, 2025	Court Decision: This section to be completed by County Judge's Office			
Meeting Date: January 13, 2025 Submitted By: Rexann Knowles Department: County Judge Signature of Elected Official/Department Head:	* APPROVED *			
Description: Consider and Approve Travel Reimbursen of \$518.84 to be Paid from Non-Department				
Districts 4 & 5 TAMU Extension Service Conferences for Judges and Commissioners in Nacogdoches and Mt. Pleasant, Texas. Travel Approved CC 11/25/24				
(May attach additional	sheets if necessary)			
Person to Present: Rexann Knowles				
(Presenter must be present for the item unless the item is on the Consent Agenda)				
Supporting Documentation: (check one) ✓ PUBLIC CONFIDENTIAL (PUBLIC documentation may be made available to the public prior to the Meeting)				
Estimated Length of Presentation: 1 minu	utes			
Session Requested: (check one)				
☐ Action Item ☑ Consent ☐ Workshop ☐ Executive ☐ Other				
Check All Departments That Have Been Notified:				
☑ County Attorney ☐ IT	✓ Purchasing ✓ Auditor			
☐ Personnel ☐ Public Wo	orks			
Other Department/Official (list)				

Please List All External Persons Who Need a Copy of Signed Documents In Your Submission Email

JOHNSON COUNTY TRAVEL REIMBURSEMENT' FORM

*This form is to be used <u>only</u> to request <u>reimbursement</u> of expenses paid by traveler's <u>personal</u> cash or credit card. Completed & signed by traveler <u>after</u> return from travel.

RECEIPT AGAINST APPROVED PURCHASE ORDER

PLEASE TYPE OR PRINT THE FOLLOWING:

TODAY'S DATE: 6-Jan-25				
TRAVELER'S NAME : Larry Wo	oolley	_		
PURPOSE OF TRIP : Districts	4 & 5 TAMU Extension Ser	vice Conferences for Ju	dges and Commissioner	s-Speaker
DESTINATION CITY: Nacogdo	ches and Mt. Pleasant, Texas	3		
DEPARTURE DATE: 4-Dec-24		RETURN	DATE:	5-Dec-24
TR	AVEL COSTS		AMOUNT	Auditor Use Only
AIR FARE		S		\$
AUTO RENTAL		\$		\$
	MILES	(AS OF 01/01/24)		NOT SELECT
MILEAGE	****	PER MILE ** \$	316.24	The same of the sa
MEALS (ACTUAL)	NOTE: If there is	no overnight stay, m	eals are reimbursed thr	ough payroll!
PHIL DAY	# OF DAYS	(AS OF 10/01/24)		
FULL DAY	X \$63	PER DAY \$	_	S
FIRST/LAST DAY	# OF DAYS			
		5 PER DAY \$	94.50	\$
SAME-DAY	# OF DAYS			
(SUBMIT TO PERSONNEL)	X \$31.5	PER DAY \$	A STATE OF THE PARTY OF THE PAR	\$
HOTEL/MOTEL	movi nen		108.10	S
SEMINAR/TRAINING REGISTRA		S		\$
MISCELLANEOUS (Taxi, parking	g, etc.)	S		\$
				10
LESS AMOUNTS ADVANCED (fr			5 -	S
TOTAL AMOUNT REQUESTE	D FOR REIMBURSEME	NT S	518.84	\$
I have reviewed the County's Transfall within the limits of county po	licy and I have attached a	Il appropriate receipts	S.	
CERTIFICATION OF OFFICE proper authorization for official control of the control			approve the same for p	payment."
Signature of Elected Official/De		UIRED**	6-Jan	-25
	0100 - 510	0 - 54100 -	GG	
	FUND DEP		FUNC	
		OUNT#		



TRAVEL APPROVAL FORM

Department:	Pct. 4 Commissioner	
Event Name:	District 4&5 Extension Service Conference	Court Decision:
Location:	Nacogdoches & Mt. Pleasant	This section to be completed by County Judge's Office
Event Dates:	December 4&5, 2024	con Co
Purpose:	 □ Required Continuing Education/Certification □ Job Training ☑ Other: <u>Speaker/Presenter</u> 	* (APPROVED) *
Name of Atten Larry Woolle		11-25-2024
	ments Checklist: * Same-Day Travel - Commissioners Court Appro	val is not required **
0	vernight Travel	
	Registration Information or Confirmation Itinerary, Agenda, or Breakdown	Request Form
Fo	or Out of State Travel, please also include:	
	Cost Estimation Breakdown for Trip with Airfare, Renta	
Signature of El	ected Official/Department Head: Tury	Challey