## AFGE Council 171 Expense Voucher REQUEST DATE: 30Sept 2002 Reimbusement: \_\_\_\_\_ OR Advance: (407 444-4133 **AFGE COUNCIL 171** 1014 PO BOX 200157 DENVER, CO 80220 PH. 303-676-7304 23-2/1020 232 DATE 30 September 2002 PAY TO THE ORDER OF Constance Townes 130062089 3050 3069 DOLLARS FDY 13-18Oct Collective Burgaritainis Collective Bargaining Training (Examples: Article 46 Negotiations, District Training, National Convention, etc.) Dates of Travel: FROM 13 Oct 2002 TO 180ct2002 Place of Meetings: DFAS Hq Washington DC, Salt Lake Hilton, Crystal City Mariott DC. etc.) PURCHASE: If these funds are for purchasing goods and/or services, Please attach receipts, circling the items to be reimbursed and complete the description of what is purchased below and what it was used for: Description: Air Fare Train Tolfrom fuil & Connies Loca Taxi Tolfron Home Needs to Return \$ 12938 (one Dis) Didnot Mivise on Sunly Act months

Signature of Person Receiving Funds

Treasurer's Section:

Date of Check: 30 Sept 2002 Check Number:

Amount of Check: \$\_

Portland & Executive Tower

921 SW Sixth Avenue • Portland, OR 97204 Phone (503) 226-1611 • Fax (503) 220-2562 Reservations www.hilton.com or 1 800 HILTONS

1522/K1RRC '

Room Arrival Date Departure Date

10/13/02 10/18/02 5:18AM

Adult/Child

1/0

Room Rate

\$ 125.00

RATE PLAN: C-AFG

НН#

BONUS AL:

CONFIRMATION NUMBER: 3156894357

Name & Address

TOWNES, CONSTANCE 14349 BENDING BRANCH CT

ORLANDO, FL 32824

10/16/02

US

PAGE 1

10/13/02	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
	GUEST ROOM	JAPILA	52712	\$125.00		
10/13/02	ROOM TAX	JAPILA	52712	\$14.38		
10/14/02	MC ********8912 05/03	CDEVIN	53228		\$139.38	
10/14/02	GUEST ROOM	JAPILA	55016	\$125.00	*******	
10/14/02	ROOM TAX	JAPILA	55016	\$14.38		
10/15/02	GUEST ROOM	ETJOEN	57381	\$125.00		
10/15/02	ROOM TAX	ETJOEN	57381	\$14.38		
10/16/02	FAX-INCOMING	CJORDA	58146	\$10.00	6000 70	
10/16/02	CASH	KALBER	58312		\$288.76	
10/16/02	MC *******8912 05/03	KALBER	58321		\$567.52	
	BALANCE					(\$567.52)
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CCOUNT NO.					DATE OF CHARGE	FOLIO NO./CHECK NO.
CCOUNT NO.					DATE OF CHARGE	FOLIO NO./CHECK NO. 35383 A
ACCOUNT NO. CARD MEMBER N	AME				DATE OF CHARGE	
ARD MEMBER N		ES TO TRANSMIT TO CAR	D HOLDER FOR PAYME	nt.		35383 A INITIAL
ARD MEMBER NA	NO. & LOCATION ESTABLISHMENT AGREE			NI	AUTHORIZATION	35383 A INITIAL
STABLISHMENT I				N	AUTHORIZATION	35383 A INITIAL
STABLISHMENT I	NO. & LOCATION BSTABLISHMENT AGREE  OU FOR STAYING AT HILTON			nt	AUTHORIZATION  PURCHASES & SERVICE	35383 A INITIAL