

State of Oregon  
Department of Environmental Quality

Memorandum

**Date:** May 27, 2015  
**To:** Environmental Quality Commission  
**From:** Joni Hammond, Deputy Director  
**Subject:** Agenda item H, Action item: Director's transactions for commission review and approval  
June 10-11, 2015, EQC meeting

**Why this is important** Oregon Accounting Policy 10.90.00.PO and DEQ Policy 010.008.2010 require than the commission review and approve certain financial transactions of the DEQ director on an annual basis.

**Background** In 2001, the Department of Administrative Services adopted a policy requiring EQC review and approval of certain transactions of the DEQ director, including monthly time reports, vacation pay, travel expense and the small purchase order transaction system credit card use. In September 2001, EQC adopted a policy delegating review and approval of these transactions to the Central Services Division administrator, known at that time as the Management Services Division administrator, with annual EQC review of the approved transactions. The annual review is documented in EQC meeting minutes as directed by State of Oregon policy.

**DEQ recommendation** DEQ recommends that the Oregon Environmental Quality Commission review and accept the DEQ director's approved transactions as seen in attachment C.

**Attachments** A. Oregon Accounting Manual Policy Number 10.90.00.PO  
B. DEQ policy regarding approval of the director's transactions  
C. Summary of Director Pedersen's financial transaction as defined by OAM 10.90.00.PO for the period 1/1/2014 to 12/31/2014

Approved:

Division:   
Kerri Nelson, Central Services Division administrator

Section: Richard A. Lawrence 5/27/2015  
Richard Lawrence, Accounting manager

*Report prepared by Kathy Murphy*

<b>OREGON ACCOUNTING MANUAL</b>		Number 10.90.00.PO
Oregon Department of Administrative Services State Controller's Division		Effective Date  July 16, 2001
Chapter	Internal Control	.1 OF .3
Part	Approval of Agency Head Transactions	
Section		Approval  Signature on file at SCD

#### Accountability and Control Standards

- .101 This policy sets accountability and control standards for the determination and delegation of review and approval authority for the agency head's monthly time report, requests for vacation payoff, use of exceptional performance leave, travel expense reimbursement claims, and Small Purchase Order Transaction System (SPOTS) card purchases. This policy is intended to ensure that these transactions are reviewed for completeness and accuracy and that they are in conformance with and measured against the documentation and compliance standards provided herein. In the case of agency heads that are elected, this policy may be applied at the option of that elected official.

#### Establishing Review and Approval Authority

- .102 Agency heads appointed by the Governor shall delegate review and approval authority for agency head financial transactions to the chief financial officer or to the person who holds the position of second-in-command to the agency head. The delegation shall be in writing.

Agency heads appointed by or reporting to a board or commission shall work with that body to create a review and approval structure for financial transactions of the agency head. The board or commission may delegate the review and approval authority, by direct designation or motion, in writing, to the board or commission chair or ranking officer. Or, the board or commission may delegate to the agency second-in-command, chief financial officer, or may choose to retain an active role in the approval process. Boards and commissions choosing to take an active role in the review and approval process must make the review and approvals of financial transactions a part of their regular meetings and document them in the minutes.

Boards and commissions delegating the review and approval process must at least annually review the financial transactions of the agency head approved as delegated. These post transaction reviews and approvals must be documented in the minutes of the board or commission annual meeting.

#### Requirement for Internal Procedure and Review

- .103 This policy requires agencies to develop internal procedures for the review and approval of the following agency head transactions:
- (a) Time reporting: Review and approve the agency head's monthly report of sick leave, vacation, holiday or other leave hours used. Review for completeness and accuracy and to ensure that all time that has been taken has been reported. Ensure that leave hours comply with HRSD 60.000.01 Sick Leave, 60.000.05 Vacation Leave, 60.010.01 Holidays, 60.000.15 Family Medical Leave, 60.005.01 Leave Without Pay and 60.000.10

Special Leaves with Pay. Time reporting (leave usage) must be documented using either paper or electronic timekeeping methods. The documentation must show that the time reports have been reviewed and approved by the appropriate authority, which, in the case of a board or commission, may be the ranking officer of the board. Note: Heads of agencies are classified as exempt from the Fair Labor Standards Act (FLSA) and as such should not be required to report actual hours worked. The time reporting review is intended to focus only on hours related to the categories defined above. The documentation must provide evidence for an audit trail and must be maintained by the agency for the prescribed IRS retention schedule for time records of three years and one quarter as well as the current record retention standards per Secretary of State, Archives Division.

- (b) Travel expense reimbursements: Review and approve all travel claims submitted by the agency head, whether for in-state or out-of-state travel. Ensure compliance with DAS Travel Rules OAM 40.10.00 as well as OAM 10.40.00, Expenditures. The review and approval of travel transactions must be documented to provide an audit trail and evidence that the review complies with and was conducted in accordance with the prevailing state policies as listed.
- (c) Exceptional Performance Leave: This leave shall be granted to agency heads using the criteria set forth in HRSD 60.000.10 "Special Leaves With Pay". For agency heads appointed by the Governor, this leave shall only be granted by the Governor or by the Director of the Department of Administrative Services on behalf of the Governor. For agency heads reporting to a board or commission, this leave shall be granted by that body or by the board or commission chair and documented in the minutes of the board or commission. The review and approval responsibility is to ensure that the Exceptional Performance leave was granted based on appropriate criteria and authority and is in compliance with HRSD policy 60.000.10. The review and approval of these transactions must be documented to provide an audit trail and evidence that the review complies with and was conducted in accordance with the prevailing state policies as listed. The documentation must clearly demonstrate the criteria upon which the leave was granted. The documentation must include copies of the written request and approval granting the leave and copies of the board or commission minutes, if applicable. The documentation must be retained according to the current record retention standards per Secretary of State, Archives Division.
- (d) Vacation Payoff: Review and approve ensuring compliance with HRSD policy 60 000.05 "Vacation Leave". The review and approval of these transactions must be documented to provide an audit trail and evidence that the review complies with and was conducted in accordance with HRSD 60.000.05. That review must clearly demonstrate that the vacation payoff was approved in accordance with Section (6)(b) of that policy which mandates that a vacation payoff is only granted when taking vacation leave is not appropriate. Copies of the written request and approval granting the vacation payoff and copies of the board or commission minutes, if applicable, must be part of the documentation for these transactions.
- (e) Use of the Small Purchase Order Transaction System (SPOTS) purchase card: Review purchases to ensure that they are appropriate expenditures that further the business of the state and the mission of the agency and that the use of the SPOTS card complies with OAM 55.30.00. The review must be conducted by someone other than the person whose name appears on the card. The review and approval of transactions must be documented to provide an audit trail and evidence that the review complies with and was conducted in accordance with the prevailing state policies as listed.

The documentation for all of the above should be retained according to the current record retention standards per Secretary of State, Archives Division.

**Fiscal Officer Responsibility**

- .104 Agency fiscal officers processing these financial transactions for the agency head have a duty to pre-audit and verify that the transactions comply with this policy.

**Seeking Guidance from Chief Financial Office**

- .105 For the purposes of this policy, those persons delegated to review and approve financial transactions for state agency heads have a duty to comply with the provisions of this policy. Any agency head requests to deviate from this policy must be approved by the Chief Financial Officer. Those persons delegated review and approval authority that have reservations or questions about an agency head financial transaction may seek guidance from the Chief Financial Office.

**Transactions Subject to Audit**

- .106 All financial transactions of state agency heads are subject to periodic audit by the Secretary of State Audits Division.

**DEQ Policy**

State of Oregon  
Department of  
Environmental  
Quality

**Approval of Director's Transactions**

Policy Number 010.008.2010	
Effective Date: January 11, 2010	Next Scheduled Revision Date: 2015
Approval:  Kerri Nelson (signature on file)	Title:  MSD Administrator

<b>Intent/Purpose/ Statement of Need</b>	To set accountability and control standards for the review and approval of the DEQ director's financial transactions.
<b>Authority</b>	Oregon Accounting Manual <u>10.09.00.PO</u>
<b>Applicability</b>	DEQ director, MSD administrator, Environmental Quality Commission members

**POLICY**

<b>MSD administrator review</b>	<p>As delegated by the Environmental Quality Commission, the Management Services Division administrator will review and approve the director's:</p> <ul style="list-style-type: none"> <li>• Monthly time reports</li> <li>• Requests for vacation payoff</li> <li>• Use of exceptional performance leaves</li> <li>• Travel expense reimbursement claims</li> <li>• Small Purchase Order Transaction System (SPOTS) card purchases</li> </ul> <p>This review will be performed in accordance with OAM 10.90.00.PO.</p>
<b>EQC review</b>	Annual, at the time of the director's evaluation, the Environmental Quality Commission will review the transactions approved as delegated. These post transaction reviews and approvals will be documented in EQC meeting minutes.
<b>History</b>	Updated formatting: January 11, 2010

OREGON STATE PAYROLL SYSTEM

EMPLOYEE MONTHLY TIMESHEET

PAYROLL AGENCY #		PERSONNEL AGENCY #	SHIFT	CHECK DIST	EMPLOYEE NAME	EMPLOYEE ID #	CONC JOB	POSITION #	CLASS MEAH	PAY BASIS	APPT TYPE	WORK SCHED	TIME SHEET #
34000		34000	1	11000	PEDERSEN, RICHARD J	000127253	1	00000001	Z7014	\$	P	AA7	2-O HD
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LEAVE BALANCES													
AS OF:													
TIMESHEET													
START DATE													
END DATE													
FULL TIME HOURS:													
184.00													
EMPLOYEE: <i>[Signature]</i>													
SUPERVISOR: <i>[Signature]</i>													
8.5X11TIMESHEET													

OTHER ADJUSTMENTS BASED ON NUMBER OF INCIDENTS:

PAYROLL AGENCY #	PERSONNEL AGENCY #	SHIFT	CHECK DIST	EMPLOYEE NAME	EMPLOYEE ID #	CONC JOB	POSITION #	CLASS MEAH	PAY BASIS	APPT TYPE	WORK SCHED	TIME SHEET #
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31 MO				

OTHER ADJUSTMENTS BASED ON NUMBER OF INCIDENTS:

LEAVE BALANCES AS OF:	START DATE	END DATE	FULL TIME HOURS:	EMPLOYEE:	SIGNED/CERTIFYING TRUE AND ACCURATE	SUPERVISOR:
	03/01/14	03/31/14	168.00			

8 SX11 TIMESHEET



8.5X11TIMESHEET

OREGON STATE PAYROLL SYSTEM EMPLOYEE MONTHLY TIMESHEET

PAYROLL AGENCY #		PERSONNEL AGENCY #	SHIFT	CHECK DIST	EMPLOYEE NAME	EMPLOYEE ID #	CONC JOB	POSITION #	CLASS MEAH	PAY BASIS	APPT TYPE	WORK SCHED	TIME SHEET #	
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<p>OTHER ADJUSTMENTS BASED ON NUMBER OF INCIDENTS:</p> <p>LEAVE BALANCES between May 20-May 23: I spent 6 hours lobbying Federal Legislators on behalf of EOCs. These hours were volunteered time and are not reflected on this timesheet</p>														
TIMESHEET		START DATE		END DATE		FULL TIME HOURS		DAYS WORKED		FORECAST		PRELIM FINAL		
		05/01/14		05/31/14		176.00		21						
								SIGNED, CERTIFYING TRUE AND ACCURATE		SUPERVISOR				

OREGON STATE PAYROLL SYSTEM

EMPLOYEE MONTHLY TIMESHEET

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**OREGON STATE PAYROLL SYSTEM**

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# OREGON STATE PAYROLL SYSTEM

**EXCISE SHEET**

OREGON STATE PAYROLL SYSTEM EMPLOYEE MONTHLY TIMESHEET

PAYROLL AGENCY # 34000		PERSONNEL AGENCY # 34000		SHIFT CHECK DIST 1 11000		EMPLOYEE NAME PEDERSEN, RICHARD J		EMPLOYEE ID # 0R0127253		CONC JOB 1		POSITION # 0000001		CLASS MEAH Z7014		PAY BASIS S		APPT TYPE P		WORK SCHED AA7		TIME SHEET # 4-0	
START TIME 0800		O/T BEN PKG NE XX		COST CENTER DISTRIBUTION 154100414010		100.00%		OR0127253		1		0000001		Z7014		S		P		AA7		PERIOD ENDING 10/31/14	
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# OREGON STATE PAYROLL SYSTEM

PAYROLL AGENCY #	PERSONNEL AGENCY #	SHIFT	CHECK DIST	EMPLOYEE NAME	EMPLOYEE ID #	CONC JOB	POSITION #	CLASS MEAH	PAY BASIS	APPT TYPE	WORK SCHED	TIME SHEET #
34000	34000	1	11000	PEDERSEN, RICHARD J	0R0127253	1	00000001	Z7014	S	P	AA7	4-0
START TIME	0800	NE	XX	154100414010	100.00%							PERIOD ENDING 11/30/14
<p>OTHER ADJUSTMENTS BASED ON NUMBER OF INCIDENTS:</p> <p>LEAVE BALANCES AS OF:</p> <p>TIMESHEET START DATE 11/01/14 END DATE 11/30/14 FULL TIME HOURS: 160.00</p> <p>EMPLOYEE: <i>[Signature]</i> SUPERVISOR: <i>[Signature]</i></p> <p>8.5X11 TIMESHEET</p>												



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**Summary of Director's Financial Transactions**  
**as required by OAM 10.90.00.PO**  
**1/1/14 - 12/31/14**  
**DICK PEDERSEN**

**TIME REPORTING****Summary of leave taken:**

Exceptional Performance Leave	0 hours
Governor's Leave	8 hours
Holiday	72 hours
Personal Business	34 hours
Sick Leave	7 hours
Vacation	160 hours
Furlough	0 hours
Comp Time	0 hours
Miscellaneous Paid Leave	0 hours

**VACATION LEAVE PAYOFF:** None**USE OF SMALL PURCHASE ORDER TRANSACTION SYSTEM (SPOTS) PURCHASING CARD:** None**TRAVEL EXPENSE REIMBURSEMENTS**

<u>Date</u>	<u>Destination</u>	<u>Reason for Travel</u>	<u>Total Cost</u>	<u>Amount Reimbursed by Outside Party</u>	<u>Net Cost to DEQ</u>
1/26 - 1/30/14	Washington DC	Participated in interviews for ECOS Executive Director. Attended ECOS Executive Meeting, made Legislative visits and dealt with DEQ related matters.	\$1,539.71	\$706.02	\$833.69
3/11 - 3/13/14	Salem, Eugene, Coos Bay & Medford DEQ offices	Gave the Statewide Tour presentation on DEQ Reorganization & the Legislative Session.	\$292.64	\$0.00	\$292.64
3/25 - 3/27/14	Bend, The Dalles, & Pendleton DEQ offices.	Gave the Statewide Tour presentation on DEQ Reorganization & the Legislative Session.	\$311.72	\$0.00	\$311.72
3/30 - 4/2/14	Sausalito, CA	ECOS Spring Meeting	\$1,148.10	\$1,148.10	\$0.00

**Summary of Director's Financial Transactions**  
**as required by OAM 10.90.00.PO**  
**1/1/14 - 12/31/14**  
**DICK PEDERSEN**

TRAVEL EXPENSE REIMBURSEMENTS			Total Cost	Amount Reimbursed by Outside Party	Net Cost to DEQ
Date	Destination	Reason for Travel			
4/9 - 4/13/14	Washington DC	Testified at House Budget Hearing. Met with legislators & colleagues.	\$1,839.63	\$1,828.68	\$10.95
4/17 - 4/18/14	Klamath Falls	Attended Klamath Basin Water Agreement Signing and Celebration.	\$147.97	\$0.00	\$147.97
5/19 - 5/23/14	Washington DC	Attended E-Enterprise Leadership Council meeting & an EPA Budget meeting.	\$2,596.28	\$2,600.78	(\$4.50) *
6/3 - 6/5/14	Pendleton	Visited with Pendleton DEQ staff & met with the Confederated Tribes of the Umatilla Indian Reservation.	\$298.94	\$0.00	\$298.94
6/18 - 6/19/14	The Dalles	Attended June EQC Meeting.	\$136.47	\$0.00	\$136.47
6/25 - 6/27/14	Washington DC & Vancouver, WA	Attended EPA Budget meetings. Parking receipt is from 6/13/14 Lower Columbia Estuary Partnership Science to Policy Summit held in Vancouver, WA.	\$1,944.96	\$1,940.46	\$4.50
7/10 - 7/12/14	Victoria, BC	Attended the Pacific Northwest Director's Meeting.	\$645.99	\$0.00	\$645.99
7/22 - 7/26/14	Bend	Attended & gave a presentation at the ACWA Conference. Met with Bob Perciasepe, Deputy Administrator for the EPA in Washington DC.	\$701.44	\$0.00	\$701.44
7/29 - 8/1/14	Washington DC	Attended the ECOS STEP Conference and participated in a Georgetown Climate meeting.	\$1,776.92	\$1,754.42	\$22.50
8/19 - 8/22/14	Florence & Coos Bay	Attended and participated on a panel at the Coastal Summit hosted by Senator Roblan. On 8/22/14 met with the Coquille Tribe.	\$372.00	\$0.00	\$372.00

**Summary of Director's Financial Transactions**  
**as required by OAM 10.90.00.PO**  
**1/1/14 - 12/31/14**  
**DICK PEDERSEN**

TRAVEL EXPENSE REIMBURSEMENTS			Total Cost	Amount Reimbursed by Outside Party	Net Cost to DEQ
Date	Destination	Reason for Travel			
8/26 - 8/29/14	Medford & Coos Bay	Attended the EQC Meeting. Met with the Coquille Tribe.	\$441.54	\$0.00	\$441.54
9/7 - 9/9/14	Bend	Attended Leadership Team Retreat. Met with Bend DEQ office staff.	\$350.08	\$0.00	\$350.08
9/13 - 9/18/14	Santa Fe, NM	Attended ECOS Fall Meeting.	\$1,688.09	\$1,664.59	\$23.50
10/21 - 10/23/14	Ontario	Attended a Pesticide Event. Met with Representative Bentz.	\$618.12	\$0.00	\$618.12
11/12 - 11/14/14	Medford	Met with legislators & community members.	\$297.60	\$0.00	\$297.60
11/17 - 11/19/14	Eugene	Attended Leadership Team Retreat. Met with legislators & was a speaker at the Association of Oregon Counties.	\$352.30	\$0.00	\$352.30
12/17 - 12/19/14	Tillamook & Astoria	Met with various community members, businesses and ports along the northern Oregon coast.	\$347.50	\$0.00	\$347.50
<b>TOTAL:</b>			<b>\$17,848.00</b>	<b>\$11,643.05</b>	<b>\$6,204.95</b>

\* Excess reimbursement due to differences in travel per diem calculation methodology.

## TRAVEL EXPENSE DETAIL SHEET



300/VPT37421

1. Name of Employee <b>Dick Pedersen</b>		2. Agency <b>DEQ</b>		3. Period (Month and Year) <b>1.2014 Washington DC</b>				
4. Official Station <b>HQ / Portland</b>		5. Division/ Work Unit <b>OD</b>		6. Regular Schedule Work Shift <input type="checkbox"/> ## 8 am - 5 pm <input checked="" type="checkbox"/> # Other to				
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Staff <input type="checkbox"/> Board/Commissioner <input type="checkbox"/> Volunteer <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> <b>AFSCME</b>		Other <input type="checkbox"/>				
8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement Breakfast Lunch Dinner Lodging	14. Total Meals and Lodging		
01/26/14	8:30am		Travel to Washington DC 184/71	53.25 ✓	17.75 17.75 35.50	53.25		
01/27/14				71.00 ✓	17.75 17.75 35.50	71.00		
01/28/14				71.00 ✓	17.75 17.75 35.50	71.00		
01/29/14				71.00 ✓	17.75 17.75 35.50	184.00 ✓ 255.00		
01/30/14	8:30pm		Return to Portland	53.25 ✓ 71.00	17.75 17.75 35.50	53.25		
				337.25	177.50			
15. Totals				319.50	71.00 88.75 469.75	184.00 \$503.50 521.25		
16. Accounting Codes		17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses		19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
10001-42004- m20000		1/29/14	Personal Vehicle Mileage			0.555		
4151 248.50			Taxi 1/27 - ECOS					9.00 ✓
4160 23.83			1/29/14 - ECOS					8.55 7.55
14010-41004			Taxi 1/29 - ECOS					9.28 7.28
4151 88.75			Taxi 1/29 - DEQ					10.44 8.09
4150 210.68			Taxi 1/30 - DEQ					6.47 ✓
4160 14.56								
Totals		586.32						65.07 ✓ \$70.09
24. I did/will <input type="checkbox"/> did not/will not <input checked="" type="checkbox"/> accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.								
25. REASON FOR TRAVEL: (Be specific.) Travel was to participate in the interviews for ECOS Executive Director. Original travel was for 1/26-1/28. The trip was extended to 1/29 for EXOS Executive meetings. The trip was then extended again to 1/30 for Legislative visits and DEQ related matters. ECOS will be paying for 1/26-1/29. DEQ will be covering the airfare change and hotel for 1/29 along with meals/incidental for that day + for 1/30.								
I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.					26. Grand Total Amount 586.32 ✓ \$573.59			
30. Signature of Employee 					27. Travel Advance Amount			
32. Approved By 					28. Amount Due Employee/State ① 586.32 SE \$573.59			
					29. Received Training Conducted Training			
					31. Title Date Director 02/04/14			
					33. Title Date MSD Administrator 3/3/14			

OS rec.

- ① \$586.32
- ② \$953.39 (see pages 3 + 4)
- ③ \$706.02 (Reimbursed by ECOS. see page 5.)
- ④ \$833.69



Azumano Company does not accept responsibility for discrepancies reported to us more than 24 hours after reservations are made.

Changes or cancellations to this itinerary may result in additional airfare, airline-imposed fees and agency service fees. Any flight changes or cancellations MUST be made prior to flight departure time or the value of the ticket(s) could be forfeited.

Travel Summary						Reservation: PTDP0W
TRAVELER: PEDERSEN/RICHARD JOHN						
Reference: 34000.KATIE.5032295990						
Date	From/To	Flight/Vendor	Depart/Arrive	Class/Type	Confirmation	
01/26/2014	PDX-DCA	AS 764	09:45 AM/05:40 PM	Economy	DECKSP	
01/30/2014	DCA-PDX	AS 773	05:10 PM/08:15 PM	Economy	DECKSP	

Ticket Detail					
PEDERSEN/RICHARD JOHN:					
Issued:	16 Jan				
Carrier:	Alaska Airlines				
E-Ticket Number:	0277343216041				
Payment Type:	Credit Card V0165				
	Total Ticket:	746.00			
	Exchanged Fare:	-379.80	Exchanged Ticket:	0273341389364	
	Exchange Penalty:	125.00			
			Total Charged:		491.20
PEDERSEN/RICHARD JOHN:					
Issued:	10 Dec				
Carrier:	Alaska Airlines				
E-Ticket Number:	0277341389364				
Payment Type:	Credit Card V0165				
	Total Ticket:	379.80			
	Exchanged Fare:	-379.80	Exchanged Ticket:	0277340085041	
	Exchange Penalty:	125.00			
			Total Charged:		125.00
PEDERSEN/RICHARD JOHN:					
Issued:	26 Nov				
Carrier:	Alaska Airlines				
E-Ticket Number:	0277340085041				
Payment Type:	Credit Card V0165				
	Total Ticket:	379.80			
	Exchanged Fare:	-199.80	Exchanged Ticket:	0277270454499	
	Exchange Penalty:	75.00			
			Total Charged:		255.00

Service Fee Detail					
PEDERSEN/RICHARD JOHN:					
Issued:	16 Jan				
Service Fee:	8900602362793				
Payment Type:	Credit Card V0165				
			Total Fee:		28.50
PEDERSEN/RICHARD JOHN:					
Issued:	10 Dec				
Service Fee:	8900602360525				
Payment Type:	Credit Card V0165				
			Total Fee:		28.50
PEDERSEN/RICHARD JOHN:					
Issued:	27 Nov				
Service Fee:	8900602359978				
Payment Type:	Credit Card V0165				
			Total Fee:		25.19

<b>Total of Tickets and Service Fees:</b>	
	953.39

2

**AIR - Sunday, January 26 2014** **Confirmation: DEOKSP**

<b>Alaska Airlines Flight AS764 Economy Class</b>	
<b>Depart:</b>	Portland International Airport Portland, Oregon, United States 09:45 AM Sunday, January 26 2014
<b>Arrive:</b>	Ronald Reagan National, Terminal B Washington, Dist. of Columbia, United States 06:40 PM Sunday, January 26 2014
<b>Duration:</b>	4 hour(s) and 55 minute(s) Non-stop
<b>Meal:</b>	Food For Purchase, Food For Purchase
<b>Equipment:</b>	Boeing 737-800 (winglets) Passenger
<b>Seat:</b>	26F Confirmed
<b>Baggage Allowance :</b>	Visit Alaska Airlines at <a href="http://www.alaskaair.com">www.alaskaair.com</a> for baggage and check-in information.

**AIR - Thursday, January 30 2014** **Confirmation: DEOKSP**

<b>Alaska Airlines Flight AS773 Economy Class</b>	
<b>Depart:</b>	Ronald Reagan National, Terminal B Washington, Dist. of Columbia, United States 05:10 PM Thursday, January 30 2014
<b>Arrive:</b>	Portland International Airport Portland, Oregon, United States 08:15 PM Thursday, January 30 2014
<b>Duration:</b>	6 hour(s) and 5 minute(s) Non-stop
<b>Meal:</b>	Food For Purchase, Food For Purchase
<b>Equipment:</b>	Boeing 737-800 (winglets) Passenger
<b>Seat:</b>	26E Confirmed
<b>Baggage Allowance :</b>	Visit Alaska Airlines at <a href="http://www.alaskaair.com">www.alaskaair.com</a> for baggage and check-in information.
<b>Remarks:</b>	AISLE OR WINDOW SEAT N/A - CONFIRMED MIDDLE - CHECK AT AIRPORT.

<b>Remarks</b>
TRAVEL AWARDS ACCEPTED BY STATE EMPLOYEES BECOME THE PROPERTY OF THE STATE OF OREGON. YOU MUST NOTIFY YOUR AGENCY OF ANY AWARDS RECEIVED. EMERGENCY AFTERHOURS: 677-849-0183

<b>Online Resources</b>
<a href="#">Current TSA Security Information</a> <a href="#">Prepaid Airport Parking Reservations</a> <a href="#">TravelGuard Trip Cancellation Insurance</a> <a href="#">Viewtrip Itinerary &amp; Ticket Receipt</a> <a href="#">Register International Trips</a> <a href="#">International Aircraft Disinfection Information</a>

<b>Contact Us</b>
800-777-5149 Corporate Travel, Portland / 8:00am-5:30pm Pacific 866-281-6350 Corporate Travel, Vancouver / 8:00am-5:30pm Pacific 866-291-0460 Government Travel / 8:00am-5:30pm Pacific 800-770-2638 Anchorage / 8:00am-5:00pm Alaska Time Zone 800-334-2929 Corvallis / 8:30am-5:30pm Pacific

Dick Pedersen's Airfare Ticket Detail  
Washington DC  
1/26/14 - 1/30/14

ECOS amounts:

Exchanged Ticket: 0277340085041	\$ 125.00
Exchanged Ticket: 0277270454499	\$ 255.00 *
Service Fee: 8900602360525	\$ 28.50
Service Fee: 8900602359978	\$ 25.19
	<u>\$ 433.69</u>

DEQ amounts:

Exchange Ticket: 0273341389364	\$ 491.20
Service Fee: 8900602362793	\$ 28.50
	<u>\$ 519.70</u>

Total amount of ticket: \$ 953.39 (2)

\* Note: Ticket 7270454499 was for an  
October 23 day trip to Boise but  
the trip was canceled.



DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #
CHECK NAME		REASON FOR PAYMENT		INV #
45124	774.17	ASTSWMO		M20000
		TRAVEL REIMBURSEMENT FOR MITCH SCHEEL		
23654	③ 706.02	ENVIRONMENTAL COUNCIL OF THE STATES		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
	1,480.19	TOTAL		

Travel Reimbursement Form Oct.-07.xls



DEQ

Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147501297  
Issued Date: 01/16/2014  
Agent: ENTERPRISE ONLINE



Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : PTDP0W



Your Flight Selection

This is Exchange Record. Original Ticket# was 7341389364

Ticket Number (s) / Confirmation Number (s) : 7343216041-

Departure:	Sunday	01/26/2014	9:45 am	Portland( PDX )			
Arrival:	Sunday	01/26/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : G	Mileage : 2350	
Departure:	Thursday	01/30/2014	5:10 pm	Washington( DCA )			
Arrival:	Thursday	01/30/2014	8:15 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 773	Class : S	Mileage : 2350	
		Air Fare: \$465.47		Taxes: \$25.73		Total Air Fare: \$491.20	



Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0602362793-

Total : \$28.50

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$491.20
Credit Card	VI-310165	\$28.50
		\$519.70 (4)

DEQ

Total Air Fare: \$491.20  
Total Rail Fare: \$0.00  
Service Fee : \$28.50  
Invoice Total : \$519.70  
Amount Paid : \$519.70  
Balance : \$0.00



ECOS

Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 137538267  
Issued Date: 11/26/2013  
Agent: ENTERPRISE ONLINE



Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : PTDP0W



Your Flight Selection

This is Exchange Record. Original Ticket# was 7270454499

Ticket Number (s) / Confirmation Number (s) : 7340085041-

Departure:	Sunday	01/26/2014	9:45 am	Portland( PDX )			
Arrival:	Sunday	01/26/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : G	Mileage : 2350	
Departure:	Tuesday	01/28/2014	5:10 pm	Washington( DCA )			
Arrival:	Tuesday	01/28/2014	8:15 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 773	Class : G	Mileage : 2350	

Air Fare: \$242.44

Taxes: \$12.56

Total Air Fare: \$255.00



Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0602359978-

Total : \$25.19

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$255.00
Credit Card	VI-310165	\$25.19
		\$280.19

ECOS

Total Air Fare:	\$255.00
Total Rail Fare:	\$0.00
Service Fee :	\$25.19
Invoice Total :	\$280.19
Amount Paid :	\$280.19
Balance :	\$0.00



ECOS

Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 137538852  
Issued Date: 12/10/2013  
Agent: ENTERPRISE ONLINE



### Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : PTDP0W



### Your Flight Selection

This is Exchange Record. Original Ticket# was 7340085041

Ticket Number (s) / Confirmation Number (s) : 7341389364-

Departure:	Sunday	01/26/2014	9:45 am	Portland( PDX )			
Arrival:	Sunday	01/26/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : G	Mileage : 2350	
Departure:	Wednesday	01/29/2014	5:10 pm	Washington( DCA )			
Arrival:	Wednesday	01/29/2014	8:15 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 773	Class : G	Mileage : 2350	

Air Fare: \$125.00

Taxes: \$0.00

Total Air Fare: \$125.00



### Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0602360525-

Total : \$28.50

### Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$125.00
Credit Card	VI-310165	\$28.50
		\$153.50

ECOS

Total Air Fare:	\$125.00
Total Rail Fare:	\$0.00
Service Fee :	\$28.50
Invoice Total :	\$153.50
Amount Paid :	\$153.50
Balance :	\$0.00

OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: <i>18-14</i>																	
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																		
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick will be travelling to Washington DC for ECOS Staff interviews. Travel will be Sunday, January 26, returning Tuesday, January 28, 2014. As President of ECOS, Dick is needed to interview the Executive Director candidates.																					
7. ITINERARY: Destination city/state: <u>Washington DC</u> Departure date/time: <u>Sun, January 26, 9:45am</u> Return date/time: <u>Tues. January 28, 8:15pm</u> <i>* Dick had to extend trip + returned on 1/30/14</i>			8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)  TOTAL: <u>\$400.00</u>																		
9. LODGING: Lodging per diem rate: <u>\$184.00</u> <i>Lodging will be paid directly by ECOS.</i> Amount per night: <u><del>184.00</del> 0</u> Room tax per night: <u><del>26.68</del> 0</u> # of nights: <u>2</u>  TOTAL: <u><del>\$421.36</del></u>			10. MEALS: Daily meal per diem rate: <u>\$71.00</u> <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th></th><th>Rate</th><th># Meals</th><th>Total</th></tr></thead><tbody><tr><td>Breakfast: (25%)</td><td>17.75</td><td>2</td><td>35.50</td></tr><tr><td>Lunch: (25%)</td><td>17.75</td><td>3</td><td>53.25</td></tr><tr><td>Dinner: (50%)</td><td>35.50</td><td>3</td><td>106.50</td></tr></tbody></table> TOTAL: <u>\$195.25</u>				Rate	# Meals	Total	Breakfast: (25%)	17.75	2	35.50	Lunch: (25%)	17.75	3	53.25	Dinner: (50%)	35.50	3	106.50
	Rate	# Meals	Total																		
Breakfast: (25%)	17.75	2	35.50																		
Lunch: (25%)	17.75	3	53.25																		
Dinner: (50%)	35.50	3	106.50																		
11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas TOTAL: <u>\$0.00</u>			12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)  a. Private vehicle mileage <u>0.00</u> b. Shuttle <u>(# of miles)</u> c. Other (specify below) <u>40.00</u> <i>Baggage fees</i> TOTAL: <u>\$40.00</u>																		
13. TRAINING RELATED? (if yes, attach agenda) <input type="checkbox"/> Yes <input type="checkbox"/> No			16. ESTIMATED COST OF TRIP: <table style="width:100%;"><tr><td>Transportation:</td><td><u>\$400.00</u></td></tr><tr><td>Lodging:</td><td><u><del>\$421.36</del> 0</u></td></tr><tr><td>Meals:</td><td><u>\$195.25</u></td></tr><tr><td>Car Rental:</td><td><u>\$0.00</u></td></tr><tr><td>Misc:</td><td><u>\$40.00</u></td></tr><tr><td>TOTAL:</td><td><u><del>\$1,056.61</del> 635.25</u></td></tr></table> <i>7672</i>			Transportation:	<u>\$400.00</u>	Lodging:	<u><del>\$421.36</del> 0</u>	Meals:	<u>\$195.25</u>	Car Rental:	<u>\$0.00</u>	Misc:	<u>\$40.00</u>	TOTAL:	<u><del>\$1,056.61</del> 635.25</u>				
Transportation:	<u>\$400.00</u>																				
Lodging:	<u><del>\$421.36</del> 0</u>																				
Meals:	<u>\$195.25</u>																				
Car Rental:	<u>\$0.00</u>																				
Misc:	<u>\$40.00</u>																				
TOTAL:	<u><del>\$1,056.61</del> 635.25</u>																				
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____																					
15. TRAVEL AWARDS: Agencies are mandated to maintain records on employee accumulation of travel awards as reported on their travel expense detail sheets. Travel awards include, but may not be limited to airline frequent flyer miles and hotel or car rental frequent customer awards or miles.																					
17. I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																					
18. EMPLOYEE SIGNATURE <i>Dick Pedersen</i>			DATE: <u>11-21-2013</u>																		
19. SUPERVISOR SIGNATURE			DATE:																		
20. DA/EMT SIGNATURE			DATE:																		
21. MSD DA SIGNATURE <i>Richard A. Lawrence</i>			DATE: <u>11/26/2013</u>																		

DA 10R0127253

STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



321/VPT 37527

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 3.2014 WR Statewide Tour	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> ## 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Sd. Jice <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	12. Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging	
					Breakfast	Lunch	Dinner			
03/11/14	6:30am		Travel to Coos Bay 83/46	34.50		11.50	23.00	83.00	117.50	
03/12/14			Travel To Medford	46.00	11.50	11.50	23.00	80.00	126.00	
03/13/14		1pm	Return to Portland	34.50	11.50	11.50	11.50		34.50	
				15. Totals	115.00	23.00	34.50	57.50	163.00	\$278.00

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount	
14010-41004		Personal Vehicle Mileage		0.555			
4101	115.00						
4106	177.64	Hotel Tax 3/11				6.64	
		Hotel Tax 3/12				8.00	
Totals				292.64	23. Section Total		\$14.64

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to visit DEQ WR Offices to met with staff and give the Statewide Tour presentation on DEQ Reorganization and also what happened during this year's Session. Dick met with the following offices: Salem, Eugene, Coos Bay and Medford.

26. Grand Total Amount		\$292.64
27. Travel Advance Amount		
28. Amount Due Employee/State		\$292.64
29. Received Training	Conducted Training	
31. Title	Date	
Director	03/14/14	
32. Approved By	Date	
MSD Administrator	3/21/14	

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

(DA) 10R0127253

STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



311/VPT 37628

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 3.2014 ER Statewide Tour	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Service <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/> Other <input type="checkbox"/>		Bargaining Unit Name AFSCME			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging
					Breakfast	Lunch	Dinner	
03/25/14	8:00am		Travel to Bend 89/41	45.75		15.25	30.50	85.00
03/26/14			Travel to Pendleton 83/46	46.00	11.50	11.50	23.00	83.00
03/27/14		2pm	Return to Portland	34.50	11.50	11.50	11.50	34.50
15. Totals				126.25	23.00	38.25	65.00	168.00
								\$294.25

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
14010-4100-4		Personal Vehicle Mileage		0.555		
4101	126.25					
4106	185.47	Hotel Tax 3/25				8.50
		Hotel Tax 3/12				8.97
Totals				311.72		
				23. Section Total		\$17.47

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to visit DEQ ER Offices to met with staff and give the Statewide Tour presentation on DEQ Reorganization and also what happened during this year's Session. Dick met with the following offices: Bend, The Dalles and Pendleton.

26. Grand Total Amount \$311.72	
27. Travel Advance Amount	
28. Amount Due Employee/State \$311.72 km	
29. Received Training	Conducted Training
30. Signature of Employee 	31. Title Director
32. Approved By 	33. Title CSD Administrator
	Date 04/07/14
	Date 4/7/14

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.



**STATE OF OREGON**  
**TRAVEL EXPENSE DETAIL SHEET**



328/VPT37715

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 3/30-4/2/14 ECOS Spring Mtg	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Service <input checked="" type="checkbox"/> Board/Commission <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	12. Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
03/30/14	6:00am		Travel to Sausalito 122/516	42.00 ✓		14.00	28.00	236.25 ✓	Δ 278.25 ✓
03/31/14				56.00 ✓	14.00	14.00	28.00	236.25 ✓	Δ 292.25 ✓
04/01/14				56.00 ✓	14.00	14.00	28.00	236.25 ✓	Δ 292.25 ✓
04/02/14		8:30pm	Return to Portland	42.00 ✓	14.00	14.00	14.00		42.00 ✓
<p>Δ Over per diem room rates was approved by Joni Hammond.</p>									
15. Totals				196.00 ✓	42.00	56.00	98.00	708.75 ✓	\$904.75 ✓

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
10001-42004-		Personal Vehicle Mileage (see attachments)		0.555		209.00 ✓
M20000		Hotel Taxes + portage fee (\$737.10 + \$6)				34.35 ✓
		\$				
4151	196.00					
4150	737.10					
4154	6.00					
4162	209.00					
Totals		1148.10	23. Section Total		\$243.35 ✓	

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was for Dick to attend the ECOS Spril meeting in Sausalito, California March 31-April 2, 2014. Dick is President of ECOS and was required to attend. Dick chose to drive instead of fly. ECOS said they will reimburse Dick up to the cost of a plane ticket in lieu of mileage reimbursement.

26. Grand Total Amount \$1,148.10 ✓	
27. Travel Advance Amount	
28. Amount Due Employee/State ① \$1,148.10 ✓	
29. Received Training	Conducted Training
30. Signature of Employee <i>Dick Pedersen</i>	31. Title Director
32. Approved By <i>For K. Nelson</i>	33. Title ACTING SD Administrator
	Date 04/15/14
	Date 4/16/14

PVM inc; 05 rec.

① \$1,148.10


② <\$1,148.10> (Reimbursed by ECOS) see next page.

\$ 0

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #
CHECK NAME		REASON FOR PAYMENT		INV #
45295	573.33	ASTSWMO		M20000
		TRAVEL REIMBURSEMENT FOR WENDY WILES		
1169200-1	463.99	DEPARTMENT OF DEFENSE		M20000
UNITED STATES TREASURY		TRAVEL REIMBURSEMENT FOR JENNIFER SUTTER		
23901-1	(2) 1,148.10	ECOS		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
23901-2	1,828.68	ECOS		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
	4,014.10	TOTAL		

ECOS TRAVEL REIMBURSEMENT FORM

<b>ADDRESS</b> Name: Dick Pedersen Organization: Oregon DEQ Address: 811 SW 6th Ave City/State/ZIP: Portland, OR 97204 Phone: 503-229-5300 Fax: 503-229-6730 Email: PEDERSEN.Dick@deg.state.or.us		<b>Instructions:</b> *****PLEASE COMPLETE ELECTRONICALLY***** Type in the requested information. Calculations will be done automatically. Please mail a signed hard copy of this completed form and corresponding original receipts for all items \$25 and more to ECOS for reimbursement. Mail to: ECOS 50 F St NW Suite 350 Washington, DC 20001 Phone: (202) 266-4920	
Meeting Name: ECOS Spring Meeting Meeting Location: Sausalito, CA			
Travel Start and End Dates and Times: 3/30/14 - 4/2/14 6:00am - 8:30pm			
Dates of Trip (m/d/y): 3/30/2014 3/31/2014 4/1/2014 4/2/2014		Day 1 Day 2 Day 3 Day 4 Day 5 Day 6 Day 7 Day 8 Day 9 Enter Date: Enter Date: Enter Date: Enter Date: Enter Date: Enter Date: Enter Date: Enter Date: Enter Date:	
<b>TRANSPORTATION</b> Air/Train/Fare: \$209.00 Personal Car Mileage: Mileage Charges: Taxi/Van/Metro: Airport Parking: Transportation Subtotal: 209.00		<b>TOTALS</b> \$ 209.00	
<b>MEALS &amp; INCIDENTALS (M&amp;IE):</b> See GSA page for per diem rates: <a href="http://www.gsa.gov/Portal/gsa/ep/content/View.do?contentType=GSA_BASIC&amp;">http://www.gsa.gov/Portal/gsa/ep/content/View.do?contentType=GSA_BASIC&amp;</a>			
Breakfast: 13.00 9.00 9.00 9.00 9.00 Lunch: 29.00 13.00 13.00 13.00 13.00 Dinner: 29.00 29.00 29.00 20.00 20.00 Incidentals: 5.00 5.00 5.00 5.00 5.00 M&IE Subtotal: 42.00 56.00 56.00 42.00 42.00		\$ 27.00 \$ 52.00 \$ 107.00 \$ 10.00 \$ 196.00	
<b>HOTEL AND OTHER (Please specify "other" charges)</b>			
Hotel: 245.70 245.70 245.70 245.70 245.70 Bag Check: Other: Portage fee: 6.00 Hotel and Other Subtotal: 245.70 245.70 245.70 251.70 251.70		\$ 737.10 \$ 6.00 \$ 743.10 \$ 1,148.10	
<b>GRAND TOTAL AMOUNT OWED</b>			
* current rate is \$ 0.510 per mile I certify that the above claim is correct and in accordance with ECOS Travel Policy (Please sign and date): Make Check Payable To: Oregon DEQ			
Mail Check to: <input checked="" type="checkbox"/> Address on File <input type="checkbox"/> Above Address (NEW USERS ONLY)		OFFICE USE ONLY APPROVED CODE CHECK #	
<b>M&amp;IE Breakdown</b> Breakfast: 7 \$46 \$51 \$56 \$61 \$66 \$71 Lunch: 11 12 13 15 16 18 Dinner: 23 26 29 31 34 36 Incidentals: 5 5 5 5 5 5			

OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: 70-14																																					
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																						
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick will be attending the Environmental Council of the States (ECOS) Spring Meeting from March 31 - April 2, 2014. The meeting will be held in Sausalito, California. Dick is President and also represents the state of Oregon. Dick will be arriving early to attend scheduled Executive Meetings.																																									
7. ITINERARY:		8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)																																							
Destination city/state: <u>Marina County</u> Sausalito, CA		TOTAL: <u>\$200.00</u>																																							
Departure date/time: <u>March 30, 6:55am</u>																																									
Return date/time: <u>April 2, 8:30pm</u>																																									
9. LODGING: Lodging per diem rate: <u>\$189.00</u> <u>122.00</u>		10. MEALS: Daily meal per diem rate: <u>56.00</u> <u>\$71.00</u>																																							
<u>Over per diem room</u> Amount per night: <u>rate</u> <u>236.25</u>		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Rate</th> <th># Meals</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Breakfast: (25%) <u>14.00</u></td> <td><u>17.75</u></td> <td><u>3</u></td> <td><u>53.25</u></td> </tr> <tr> <td colspan="3"></td> <td><u>42.00</u></td> </tr> <tr> <td>Lunch: (25%) <u>14.00</u></td> <td><u>17.75</u></td> <td><u>4</u></td> <td><u>71.00</u></td> </tr> <tr> <td colspan="3"></td> <td><u>56.00</u></td> </tr> <tr> <td>Dinner: (50%) <u>28.00</u></td> <td><u>35.50</u></td> <td><u>4</u></td> <td><u>142.00</u></td> </tr> <tr> <td colspan="3"></td> <td><u>112.00</u></td> </tr> <tr> <td colspan="3">TOTAL:</td> <td><u>\$266.25</u></td> </tr> <tr> <td colspan="3"></td> <td><u>210.00</u></td> </tr> </tbody> </table>					Rate	# Meals	Total	Breakfast: (25%) <u>14.00</u>	<u>17.75</u>	<u>3</u>	<u>53.25</u>				<u>42.00</u>	Lunch: (25%) <u>14.00</u>	<u>17.75</u>	<u>4</u>	<u>71.00</u>				<u>56.00</u>	Dinner: (50%) <u>28.00</u>	<u>35.50</u>	<u>4</u>	<u>142.00</u>				<u>112.00</u>	TOTAL:			<u>\$266.25</u>				<u>210.00</u>
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			<u>112.00</u>																																						
TOTAL:			<u>\$266.25</u>																																						
			<u>210.00</u>																																						
Room tax per night: <u>approved by Joni</u> <u>31.18</u>																																									
# of nights: <u>Hammond</u> <u>3</u>																																									
TOTAL: <u>\$802.29</u>																																									
11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas TOTAL: <u>\$0.00</u>		12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)																																							
		a. Private vehicle mileage <u>0.00</u> b. Shuttle <u>(# of miles)</u> c. Other (specify below) <u>80.00</u> <u>40.00</u> <u>Airport parking,</u> <u>Taxi fare</u> TOTAL: <u>\$40.00</u> <u>80.00</u>																																							
13. TRAINING RELATED? (if yes, attach agenda) <input type="checkbox"/> Yes <input type="checkbox"/> No																																									
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____		16. ESTIMATED COST OF TRIP: Transportation: <u>\$200.00</u> Lodging: <u>\$802.29</u> Meals: <u>\$266.25</u> <u>210.00</u> Car Rental: <u>\$0.00</u> Misc: <u>\$40.00</u> <u>80.00</u> TOTAL: <u>1,292.29</u> <u>\$4,308.54</u> <u>76m</u>																																							
15. TRAVEL AWARDS: Agencies are mandated to maintain records on employee accumulation of travel awards as reported on their travel expense detail sheets. Travel awards include, but may not be limited to airline frequent flyer miles and hotel or car rental frequent customer awards or miles.																																									
17. I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																																									
18. EMPLOYEE SIGNATURE <u>[Signature]</u>				DATE: <u>11/18/2013</u>																																					
19. SUPERVISOR SIGNATURE <u>[Signature]</u>				DATE: <u>11/22/13</u>																																					
20. DA/EMT SIGNATURE <u>[Signature]</u>				DATE: _____																																					
21. MSD DA SIGNATURE <u>[Signature]</u>				DATE: <u>11/22/13</u>																																					

MURPHY Kathy M

---

**From:** HAMMOND Joni  
**Sent:** Wednesday, November 20, 2013 3:59 PM  
**To:** MURPHY Kathy M  
**Subject:** Re: Pedersen - over per diem room rate

Kathy:

As long as ECOS reimburses Dick's expenses, I approve the over per diem room rate listed here.

Thank you

Joni

---

**From:** MURPHY Kathy M  
**Sent:** Wednesday, November 20, 2013 03:37 PM  
**To:** HAMMOND Joni  
**Subject:** Pedersen - over per diem room rate

Joni,

Dick Pedersen is scheduled to attend an ECOS Spring Meeting from March 31 – April 2, 2014, which will be held at the Cavallo Point Lodge at the Golden Gate. Since Dick is president, his travel expenses will be reimbursed by ECOS. The Lodge is located in Marin County where the lodging per diem rate is \$122. The cost of the room per night is \$236.25 plus fees which is approximately \$114.25 over the per diem rate.

Since Dick is ECOS' president and his travel expenses will be reimbursed, are you willing to approve the over per diem room rate of \$236.25?

Let me know if you have any questions.

Thanks,  
Kathy

**STATE OF OREGON**  
**TRAVEL EXPENSE DETAIL SHEET**



328/VPT37715

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 4.2014 Washington DC	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> ## 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Service <input checked="" type="checkbox"/> Board/Commission <input type="checkbox"/> Volunteer <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging	
					Breakfast	Lunch	Dinner		
04/09/14	8:00am		Travel to Washington DC	53.25		17.75	35.50	224.00	
04/10/14				71.00	17.75	17.75	35.50	224.00	
04/11/14				71.00	17.75	17.75	35.50	224.00	
04/12/14				53.25	17.75	17.75	17.75	0.00	
04/13/14		9:30pm	Return to Portland						
15. Totals				248.50	53.25	71.00	124.25	672.00	
16. Accounting Codes				17. Date		18. Miscellaneous Expenses		19. Training Related?	20. Rate Per Mile
10001-42004-						Personal Vehicle Mileage			0.555
M20000						Hotel Taxes & fees (4/9-4/11)			97.44
+						Baggage Check 4/9 and 4/13			50.00
14010-41004						Metro Farecard			10.00
						Taxi			10.27
						Airport Parking			54.73
						Internet fees			13.69
Totals						23. Section Total			\$236.13

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was for Dick to testify at the House Budget Hearing in Washington DC. While in the DC area, Dick met with many legislators and colleagues in the capacity as President of ECOS. Dick did stay and extra night however it did not affect the cost of airfare and he is not requesting any lodging or per diem reimbursement for that day.

26. Grand Total Amount	\$1,156.63
27. Travel Advance Amount	
28. Amount Due Employee/State	① \$1,156.63
29. Received Training	Conducted Training
30. Signature of Employee	31. Title Director
32. Approved By J. K. Nelson	33. Title Acting CD Administrator
	Date 04/15/14
	Date 4/16/14

OS rec.

- ① \$1,156.63
- ② \$ 683.00 (See page 3.)
- ③ \$1,828.68 (Reimbursed by ECOS. See page 4.)
- ④ \$ 10.95

DA 10R0127253  
STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



328/VPT37715

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 4.2014 Washington DC	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> # 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Serv. <input type="checkbox"/> Executive Se. <input checked="" type="checkbox"/> Board/Commiss. <input type="checkbox"/> Volunte. <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

W  
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8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
04/09/14	8:00am		Travel to Washington DC	53.25		17.75	35.50	224.00	277.25
04/10/14				71.00	17.75	17.75	35.50	224.00	295.00
04/11/14				71.00	17.75	17.75	35.50	224.00	295.00
04/12/14				53.25	17.75	17.75	17.75	0.00	53.25
04/13/14		9:30pm	Return to Portland						

TRAVEL CLAIM FUND CODE DISTRIBUTION

AY	INDEX	PCA	AOBJ	\$	PROJ
15	10001	42004	4151	248.50	M20000
			4150	769.44	
			4159	50.00	
			4160	64.03	
			4154	13.69	
	14010	41004	4160	10.95	(4)
				1,156.63	

8.50	53.25	71.00	124.25	672.00	\$920.50
19. Training Related? Rate Per Mile				0.555	
20. Private Car Miles				97.44	141.13
21. Amount					50.00
					10.00
					10.27
					54.73
					13.69

Totals	23. Section Total	\$236.13
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24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.) Travel was for Dick to testify at the House Budget Hearing in Washington DC. While in the DC area, Dick met with many legislators and colleagues in the capacity as President of ECOS. Dick did stay and extra night however it did not affect the cost of airfare and he is not requesting any lodging or per diem reimbursement for that day.		26. Grand Total Amount	\$1,156.63
		27. Travel Advance Amount	
		28. Amount Due Employee/State	\$1,156.63
		29. Received Training	Conducted Training

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.	30. Signature of Employee <i>Dick Pedersen</i>	31. Title Director	Date 04/15/14
I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.	32. Approved By <i>John K. Nelson</i>	33. Title Acting CSO Administrator	Date 4/16/14

OS me.



Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147507435  
Issued Date: 03/19/2014  
Agent: ENTERPRISE ONLINE



### Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : V6D5F2



### Your Flight Selection

Ticket Number (s) / Confirmation Number (s) : 7347385774-

Departure:	Wednesday	04/09/2014	9:35 am	Portland( PDX )			
Arrival:	Wednesday	04/09/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : L	Mileage : 2350	
Departure:	Sunday	04/13/2014	5:10 pm	Washington( DCA )			
Arrival:	Sunday	04/13/2014	7:50 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 771	Class : H	Mileage : 2350	
Air Fare: \$607.44		Taxes: \$67.56		Total Air Fare: \$675.00			



### Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0610169202-

Total : \$8.00

### Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$675.00
Credit Card	VI-310165	\$8.00
		② \$683.00

Total Air Fare:	\$675.00
Total Rail Fare:	\$0.00
Service Fee :	\$8.00
Invoice Total :	\$683.00
Amount Paid :	\$683.00
Balance :	\$0.00



DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #
CHECK NAME		REASON FOR PAYMENT		INV #
45295	573.33	ASTSWMO		M20000
		TRAVEL REIMBURSEMENT FOR WENDY WILES		
1169200-1	463.99	DEPARTMENT OF DEFENSE		M20000
UNITED STATES TREASURY		TRAVEL REIMBURSEMENT FOR JENNIFER SUTTER		
23901-1	1,148.10	ECOS		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
23901-2	(3) 1,828.68	ECOS		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
	4,014.10	TOTAL		

# ECOS TRAVEL REIMBURSEMENT FORM

**ADDRESS**

Name: Dick Pedersen  
Organization: Oregon DEQ  
Address: 811 SW 6th Ave  
City/State/ZIP: Portland, OR 97204  
Phone: 503-229-5300  
Fax: 503-229-6730  
Email: PEDERSEN.Dick@deq.state.or.us

**Instructions:**  
Type in the requested information. Calculations will be done automatically.  
Please mail a signed hard copy of this completed form and corresponding original receipts for all items \$25 and more to ECOS for reimbursement.  
Mail to: ECOS  
50 F St NW  
Suite 350  
Washington, DC 20001  
Phone: (202) 266-4920

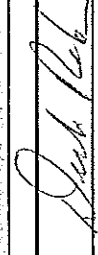
Meeting Name: Testifying on behalf of ECOS at the House  
Meeting Location: Washington DC  
Travel Start and End Dates and Times: 4/9/14 - 4/12/14 8:00am - 9:30pm

Dates of Trip (m/d/y)	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	TOTALS
4/9/2014	4/10/2014	4/11/2014	4/12/2014	4/12/2014						
TRANSPORTATION										
Air/Train/Fare	\$683.00									683.00
Personal Car Mileage										
Mileage Charges										
Taxi/Van/Metro	10.00	10.27								20.27
Airport Parking				43.78						43.78
Transportation Subtotal	693.00	10.27		43.78						\$ 747.05
MEALS & INCIDENTALS (M&IE): See GSA page for per diem rates: <a href="http://www.gsa.gov/Portal/gsa/ep/content/View.do?contentType=GSA_BASIC&amp;">http://www.gsa.gov/Portal/gsa/ep/content/View.do?contentType=GSA_BASIC&amp;</a>										
Breakfast	12.00	12.00	12.00	12.00						36.00
Lunch	18.00	18.00	18.00	18.00						72.00
Dinner	35.25	36.00	36.00	23.25						130.50
Incidentals	5.00	5.00	5.00							10.00
M&IE Subtotal	53.25	71.00	71.00	53.25						\$ 248.50
HOTEL AND OTHER (Please specify "other" charges)										
Hotel	256.48	256.48	256.48							769.44
Bag Check	25.00			25.00						50.00
Other Internet fee	13.69									13.69
Hotel and Other Subtotal	281.48	270.17	256.48	25.00						\$ 833.13
GRAND TOTAL AMOUNT OWED										\$ 1,828.68

\* current rate is \$ 0.510 per mile  
I certify that the above claim is correct and in accordance with ECOS Travel Policy (Please sign and date):  
Make Check Payable To: Oregon DEQ

Mail Check to: ☒ Address on File or ☐ Above Address (NEW USERS ONLY)

**OFFICE USE ONLY**

APPROVED: 

CODE: \_\_\_\_\_

CHECK #: \_\_\_\_\_

ECOS

OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: <u>109-14</u>																	
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																		
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick will be travelling to Washington DC to testify on behalf of ECOS at the House Budget Hearings on April 10. Dick will also be visiting with legislators on the hill and meeting with EPA. Travel will be Wednesday, April 9, returning Saturday, April 12, 2014. As President of ECOS, Dick is preferred to speak to members of legislature.																					
7. ITINERARY:		8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)																			
Destination city/state: <u>Washington DC</u>		TOTAL: <u>\$650.00</u>																			
Departure date/time: <u>Wed</u> , April 9, 9:45am																					
Return date/time: <u>Sat</u> , April 12, 8:15pm																					
9. LODGING: Lodging per diem rate: <u>\$224.00</u>		10. MEALS: Daily meal per diem rate: <u>\$71.00</u>																			
Amount per night: <u>224.00</u>		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Rate</th> <th># Meals</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Breakfast: (25%)</td> <td>17.75</td> <td>3</td> <td>53.25</td> </tr> <tr> <td>Lunch: (25%)</td> <td>17.75</td> <td>4</td> <td>71.00</td> </tr> <tr> <td>Dinner: (50%)</td> <td>35.50</td> <td>4</td> <td>142.00</td> </tr> </tbody> </table>					Rate	# Meals	Total	Breakfast: (25%)	17.75	3	53.25	Lunch: (25%)	17.75	4	71.00	Dinner: (50%)	35.50	4	142.00
	Rate	# Meals	Total																		
Breakfast: (25%)	17.75	3	53.25																		
Lunch: (25%)	17.75	4	71.00																		
Dinner: (50%)	35.50	4	142.00																		
Room tax per night: <u>32.48</u>		TOTAL: <u>\$266.25</u>																			
# of nights: <u>3</u>																					
TOTAL: <u>\$769.44</u>																					
11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas TOTAL: <u>\$0.00</u>		12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)																			
13. TRAINING RELATED? (if yes, attach agenda)  <input type="checkbox"/> Yes <input type="checkbox"/> No		a. Private vehicle mileage <u>0.00</u> b. Shuttle <u>(# of miles)</u> c. Other (specify below) <u>90.00 40.00</u> <u>taxi/shuttle/Metro</u> <u>Baggage fees</u> TOTAL: <u>90.00 540.00</u>																			
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____		16. ESTIMATED COST OF TRIP: Transportation: <u>\$650.00</u> Lodging: <u>\$769.44</u> Meals: <u>\$266.25</u> Car Rental: <u>\$0.00</u> Misc: <u>\$40.00 90.00</u> TOTAL: <u>1,775.69</u> <u>\$1,725.69</u>																			
15. TRAVEL AWARDS: Agencies are mandated to maintain records on employee accumulation of travel awards as reported on their travel expense detail sheets. Travel awards include, but may not be limited to airline frequent flyer miles and hotel or car rental frequent customer awards or miles.																					
17. I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																					
18. EMPLOYEE SIGNATURE <u>[Signature]</u>				DATE: <u>3-5-2014</u>																	
19. SUPERVISOR SIGNATURE				DATE:																	
20. DA/EMT SIGNATURE				DATE:																	
21. MSD-BA SIGNATURE <u>[Signature]</u>				DATE: <u>3/17/14</u>																	

STATE OF OREGON

304/VPT37747

DA 10R0127253

STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



3116/VPT 37978

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 5.2014 Washington DC	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm <input checked="" type="checkbox"/> # Other <input type="checkbox"/> to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Sd <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME		Other <input type="checkbox"/>	

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging
					Breakfast	Lunch	Dinner	
05/19/14	9:30am		Travel to Washington DC 224/71	53.25		17.75	35.50	224.00
05/20/14				71.00	17.75	17.75	35.50	224.00
05/21/14				35.50	17.75	17.75	prov	224.00
05/22/14				53.25	17.75	prov	35.50	224.00
05/23/14		8:00pm	Return to Portland	53.25	17.75	17.75	17.75	53.25
15. Totals				266.25	71.00	71.00	124.25	896.00
								\$1,162.25

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
10001-42004-		Personal Vehicle Mileage		0.555		
M20000		Hotel Taxes & fees (5/19 - 5/23)				116.48
		Baggage Check 5/23				25.00
		Metro Farecard				20.00
		Taxi 5/20				14.05
		Taxi 5/23				10.00
Totals				23. Section Total		\$185.53

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was for Dick to attend the E-Enterprise leadership Council meeting in Washington DC. Dick also participated in an invite-only meeting with EPA regarding their budget. While in the DC area, Dick met with many legislators and colleagues in the capacity as President of ECOS.

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.	30. Signature of Employee 	26. Grand Total Amount \$1,347.78	
	I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.	32. Approved By 	27. Travel Advance Amount
		31. Title Director	28. Amount Due Employee/State ① \$1,347.78
		33. Title MSO Administrator	29. Received Training Conducted Training

OS no.

① \$1,347.78

② \$ 793.00 see next page.

③ \$ 455.50 see page 3.

④ \$2,595.53 (Reimbursed by ECOS.) see page 6.

⑤ \$ 5.25 (Over-Reimbursement from ECOS.) see page 7.

\$1 <4.50



311/VPT 37928

[illegible]

AY	INDEX	PCA	AOBJ	\$	PROJ
15	10001	42004	4151	265.50	M20000
			4150	1,012.48	
			4159	25.00	
			4160	444.05	
	14010	41004	4151	.75	
				1,347.78	

66.25 ✓	71.00	71.00	124.25	896.00 ✓	\$1,162.25 ✓	
Expenses x, Telephone, Other Expenses			19. Training Related?	20 Rate Per Mile	21. Private Car Miles	22. Amount
				0.555		-
- 5/23)						116.48 ✓
						25.00 ✓
						20.00 ✓
						14.05 ✓
						10.00 ✓
				23. Section Total		\$185.53 ✓

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)

Travel was for Dick to attend the E-Enterprise leadership Council meeting in Washington DC. Dick also participated in an invite-only meeting with EPA regarding their budget. While in the DC area, Dick met with many legislators and colleagues in the capacity as President of ECOS.

26. Grand Total Amount	\$1,347.78
27. Travel Advance Amount	
28. Amount Due Employee/State	\$1,347.78 <i>LM</i>
29. Received Training	Conducted Training
31. Title	Date
Director	05/29/14
33. Title	Date
<i>MSO Administrator 6/3/14</i>	

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

OS rec.

GOVING



Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147509395  
Issued Date: 04/10/2014  
Agent: ENTERPRISE ONLINE



Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : NG8N2J



Your Flight Selection

Ticket Number (s) / Confirmation Number (s) : 7348492801-

Departure:	Tuesday	05/20/2014	9:35 am	Portland( PDX )			
Arrival:	Tuesday	05/20/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : L	Mileage : 2350	
Departure:	Friday	05/23/2014	5:10 pm	Washington( DCA )			
Arrival:	Friday	05/23/2014	8:00 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 771	Class : B	Mileage : 2350	
		Air Fare: \$709.76		Taxes: \$75.24		Total Air Fare: \$785.00	



Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0610171002-

Total : \$8.00

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$785.00
Credit Card	VI-310165	\$8.00
		(2) \$793.00

Original  
Ticket

Total Air Fare:	\$785.00
Total Rail Fare:	\$0.00
Service Fee :	\$8.00
Invoice Total :	\$793.00
Amount Paid :	\$793.00
Balance :	\$0.00



Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147511731  
Issued Date: 05/05/2014  
Agent: TRIP MGR



Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : NG8N2J



Your Flight Selection

*This is Exchange Record. Original Ticket# was 7348492801*

Ticket Number (s) / Confirmation Number (s) : 7405594048-

Departure:	Monday	05/19/2014	9:35 am	Portland( PDX )			
Arrival:	Monday	05/19/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : Y	Mileage : 2350	
Departure:	Friday	05/23/2014	5:10 pm	Washington( DCA )			
Arrival:	Friday	05/23/2014	8:00 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 771	Class : B	Mileage : 2350	
		Air Fare: \$405.94		Taxes: \$21.06		Total Air Fare: \$427.00	



Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0611408436-

Total : \$28.50

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$427.00
Credit Card	VI-310165	\$28.50
		③ \$455.50

*Exchange  
Ticket*

Total Air Fare: \$427.00  
Total Rail Fare: \$0.00  
Service Fee : \$28.50  
Invoice Total : \$455.50  
Amount Paid : \$455.50  
Balance : \$0.00





Azumano Company does not accept responsibility for discrepancies reported to us more than 24 hours after reservations are made.

Changes or cancellations to this itinerary may result in additional airfare, airline-imposed fees and agency service fees. Any flight changes or cancellations MUST be made prior to flight departure time or the value of the ticket(s) could be forfeited.

Travel Summary					Reservation: NG8N2J
TRAVELER: PEDERSEN/RICHARD JOHN					
Reference: 34000.KATIE.5032295990					
Date	From/To	Flight/Vendor	Depart/Arrive	Class/Type	Confirmation
05/19/2014	PDX-DCA	AS 784	09:35 AM/05:40 PM	Economy	LCSKSA
05/23/2014	DCA-PDX	AS 771	05:10 PM/08:00 PM	Economy	LCSKSA

Ticket Detail			
PEDERSEN/RICHARD JOHN:			
Issued:	05 May		
Carrier:	Alaska Airlines		
E-Ticket Number:	0277405594048		
Payment Type:	Credit Card VI0165		
	Total Ticket:	1087.00	
	Exchanged Fare:	-785.00	
	Exchange Penalty:	125.00	
	Exchanged Ticket:	0277348492801	
	Total Charged:		427.00
PEDERSEN/RICHARD JOHN:			
Issued:	10 Apr		
Carrier:	Alaska Airlines		
E-Ticket Number:	0277348492801		
Payment Type:	Credit Card VI0165		
	Total Ticket:	785.00	
	Total Charged:		785.00

Service Fee Detail			
PEDERSEN/RICHARD JOHN:			
Issued:	05 May		
Service Fee:	8900611408436		
Payment Type:	Credit Card VI0165		
	Total Fee:		28.50
PEDERSEN/RICHARD JOHN:			
Issued:	10 Apr		
Service Fee:	8900810171002		
Payment Type:	Credit Card VI0165		
	Total Fee:		8.00

Total of Tickets and Service Fees:		1248.50
------------------------------------	--	---------

AIR - Monday, May 19 2014		Confirmation: LCSKSA
Alaska Airlines Flight AS764 Economy Class		
Depart:	Portland International Airport Portland, Oregon, United States 09:35 AM Monday, May 19 2014	
Arrive:	Ronald Reagan National, Terminal B Washington, Dist. of Columbia, United States 05:40 PM Monday, May 19 2014	
Duration:	5 hour(s) and 5 minute(s) Non-stop	
Meal:	Food For Purchase	
Equipment:	Boeing 737-800 (winglets) Passenger	
Baggage Allowance:	Visit Alaska Airlines at <a href="http://www.alaskaair.com">www.alaskaair.com</a> for baggage and check-in information.	
Remarks:	ADVANCE SEAT ASSIGNMENT UNAVAILABLE -EARLY CHECKIN RECOMMENDED	

AIR - Friday, May 23 2014		Confirmation: LCSKSA
Alaska Airlines Flight AS771 Economy Class		
Depart:	Ronald Reagan National, Terminal B Washington, Dist. of Columbia, United States 05:10 PM Friday, May 23 2014	
Arrive:	Portland International Airport Portland, Oregon, United States 08:00 PM Friday, May 23 2014	
Duration:	5 hour(s) and 50 minute(s) Non-stop	
Meal:	Food For Purchase	
Equipment:	Boeing 737-800 (winglets) Passenger	
Baggage Allowance :	Visit Alaska Airlines at <a href="http://www.alaskaair.com">www.alaskaair.com</a> for baggage and check-in information.	
Remarks:	ADVANCE SEAT ASSIGNMENT UNAVAILABLE - EARLY CHECKIN RECOMMENDED	

Remarks
TRAVEL AWARDS ACCEPTED BY STATE EMPLOYEES BECOME THE PROPERTY OF THE STATE OF OREGON. YOU MUST NOTIFY YOUR AGENCY OF ANY AWARDS RECEIVED. EMERGENCY AFTERHOURS: 877-840-0183

Online Resources
<a href="#">Current TSA Security Information</a> <a href="#">Prepaid Airport Parking Reservations</a> <a href="#">TravelGuard Trip Cancellation Insurance</a> <a href="#">Viewtrip Itinerary &amp; Ticket Receipt</a> <a href="#">Register International Trips</a> <a href="#">International Aircraft Disinsection Information</a>

Contact Us
800-777-5149 Corporate Travel, Portland / 8:00am-5:30pm Pacific 866-281-6350 Corporate Travel, Vancouver / 8:00am-5:30pm Pacific 866-291-0460 Government Travel / 8:00am-5:30pm Pacific 800-770-2638 Anchorage / 8:00am-5:00pm Alaska Time Zone 800-334-2929 Corvallis / 8:30am-5:30pm Pacific

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #,
CHECK NAME		REASON FOR PAYMENT		INV #
24118-1	(4) 2,595.53	ECOS		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
24118-2	729.42	ECOS		M20000
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
	3,324.95	TOTAL		

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL OVER-REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #
CHECK NAME		REASON FOR PAYMENT		INV #
24118-3	5.25	ECOS		
		TRAVEL OVER-REIMB FOR DICK PEDERSEN		
	5.25	TOTAL		

ECOS TRAVEL REIMBURSEMENT FORM

**Instructions:**  
\*\*\*\*\*PLEASE COMPLETE ELECTRONICALLY\*\*\*\*\*  
Type in the requested information. Calculations will be done automatically.  
Please mail a signed hard copy of this completed form and corresponding original receipts for all items \$25 and more to ECOS for reimbursement.

**ADDRESS**  
Name: Dick Pedersen  
Organization: Oregon DEQ  
Address: 811 SW 6th Ave  
City/State/ZIP: Portland, OR 97204  
Phone: 503-229-5300  
Fax: 503-229-6730  
Email: PEDERSEN.Dick@deq.state.or.us

**Mail to:**  
ECOS  
50 F St NW  
Suite 350  
Washington, DC 20001  
Phone: (202) 266-4920

**Meeting Name:** E-Enterprise Leadership Council Meeting & various EPA meetings  
**Meeting Location:** Washington DC

**Travel Start and End Dates and Times:** May 21, 2014, 9:30am; May 23 through December 10, 2013, 8:00pm

Dates of Trip (m/d/y)	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	TOTALS
	Enter Date	Enter Date	Enter Date	Enter Date	Enter Date	Enter Date	Enter Date	Enter Date	Enter Date	Enter Date
	5/19/2014	5/20/2014	5/21/2014	5/22/2014	5/23/2014					
<b>TRANSPORTATION</b>										
Air/Fair Fare	\$1,248.50									1,248.50
Personal Car Mileage										
Mileage Charges										
Taxi/Van/Metro		34.05								44.05
Airport Parking										
Transportation Subtotal	1,248.50	34.05								\$ 1,292.55
<b>MEALS &amp; INCIDENTALS (M&amp;IE):</b> See GSA page for per diem rates: <a href="http://www.gsa.gov/Portal/gsa/ep/content/View.do?contentId=25555&amp;contentTypeId=25555">http://www.gsa.gov/Portal/gsa/ep/content/View.do?contentId=25555&amp;contentTypeId=25555</a>										
Breakfast	12.00	12.00	12.00	12.00	17.75					53.75
Lunch	17.75	18.00	18.00	provided	17.75					71.50
Dinner	35.50	36.00	provided	36.00	17.75					125.25
Incidentals	5.00	5.00	5.00	5.00						15.00
M&IE Subtotal	53.25	57.00	35.00	53.00	53.25					\$ 265.50
<b>HOTEL AND OTHER (Please specify "other" charges)</b>										
Hotel	253.12	253.12	253.12	253.12						1,012.48
Bag Check					25.00					25.00
Other Internet										
Hotel and Other Subtotal	253.12	253.12	253.12	253.12	25.00					\$ 1,037.48
<b>GRAND TOTAL AMOUNT OWED</b>										\$ 2,595.53

\* current rate is \$ 0.510 per mile  
I certify that the above claim is correct and in accordance with ECOS Travel Policy (Please sign and date):  
Make Check Payable To: Oregon DEQ  
*Dick Pedersen* 6/6/2014

Mail Check to: ☒ Address on File or ☐ Above Address (NEW USERS ONLY)

**OFFICE USE ONLY**  
APPROVED  
CODE  
CHECK #

**ECOS**

Travel Reimbursement Form Oct-07.xls

ENVIRONMENTAL COUNCIL OF THE STATES

24118

Payee STATE OF OREGON  
Vendor ID OR

Account #:

24118  
9/15/2014

Invoice	Description	Discount	Amount
OR1400909	Dick Pedersen-ECOS STEP-2014 Conference-Wash., DC 7/...	\$0.00	\$729.42
OR140606	Dick Pedersen-E-Enterprise Leadership Council Mtg-Wash., ...	\$0.00	\$2,600.78
<p>5/19/14 - 5/23/14</p> <p>182575.53</p> <p>15.263 Traveler</p> <p><u>2,600.78</u></p>			
Total:		\$0.00	\$3,330.20



ENVIRONMENTAL COUNCIL OF THE STATES  
50 F STREET NW, SUITE 350  
WASHINGTON, DC 20001  
(202) 266-4920

Wells Fargo Bank  
15-122/540

24118

DATE 9/15/2014

AMOUNT \$3,330.20

\$

\*\*\*Three Thousand Three Hundred Thirty and 20/100 Dollars

PAY  
TO THE  
ORDER  
OF:

STATE OF OREGON  
DEPT. OF ENVIRONMENTAL QUALITY  
811 SW SIXTH AVENUE  
PORTLAND, OR 97204

VOID AFTER 90 DAYS



*Don Willitt*

Details on Back  
Security Features Included

OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: 132-14																									
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																										
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick will be travelling to Washington DC to attend the E-Enterprise Leadership Council Meeting in Washington DC May 22-23, 2014. Travel will be Wednesday, May 21, returning Friday, May 23, 2014. As President of ECOS, Dick is required to participate..																													
7. ITINERARY: Destination city/state: Washington DC Departure date/time: <u>Mon, May 19, 9:45am</u> Return date/time: <u>Fri, May 23, 8:15pm</u>			8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12) <i>ECOS approved an exchange ticket. See email.</i> TOTAL: <u>1,248.50</u> <u>\$785.00</u>																										
9. LODGING: Lodging per diem rate: <u>\$224.00</u>  Amount per night: <u>224.00</u>  Room tax per night: <u>29.12</u>  # of nights: <u>2</u> TOTAL: <u>1,012.48</u> <u>\$506.24</u>			10. MEALS: Daily meal per diem rate: <u>\$71.00</u> <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th></th><th>Rate</th><th># Meals</th><th>Total</th></tr></thead><tbody><tr><td>Breakfast: (25%)</td><td>17.75</td><td>24</td><td>35.50</td></tr><tr><td>Lunch: (25%)</td><td>17.75</td><td>25</td><td>53.25</td></tr><tr><td>Dinner: (50%)</td><td>35.50</td><td>24</td><td>71.00</td></tr><tr><td colspan="3"></td><td>142.00</td></tr><tr><td colspan="3">TOTAL:</td><td><u>\$159.75</u></td></tr></tbody></table> <u>301.75</u>				Rate	# Meals	Total	Breakfast: (25%)	17.75	24	35.50	Lunch: (25%)	17.75	25	53.25	Dinner: (50%)	35.50	24	71.00				142.00	TOTAL:			<u>\$159.75</u>
	Rate	# Meals	Total																										
Breakfast: (25%)	17.75	24	35.50																										
Lunch: (25%)	17.75	25	53.25																										
Dinner: (50%)	35.50	24	71.00																										
			142.00																										
TOTAL:			<u>\$159.75</u>																										
11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas TOTAL: <u>\$0.00</u>			12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)  a. Private vehicle mileage <u>0.00</u> b. Shuttle <u>0.00</u> c. Other (specify below) <u>taxi</u> <u>20.00</u> TOTAL: <u>\$20.00</u>																										
13. TRAINING RELATED? (if yes, attach agenda) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																													
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____			16. ESTIMATED COST OF TRIP: Transportation: <u>\$785.00</u> Lodging: <u>\$506.24</u> Meals: <u>\$159.75</u> Car Rental: <u>\$0.00</u> Misc: <u>\$20.00</u> TOTAL: <u>2,582.73</u> <u>\$1,470.99</u>																										
15. TRAVEL AWARDS: Agencies are mandated to maintain records on employee accumulation of travel awards as reported on their travel expense detail sheets. Travel awards include, but may not be limited to airline frequent flyer miles and hotel or car rental frequent customer awards or miles.																													
17. I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																													
18. EMPLOYEE SIGNATURE _____			DATE: <u>APRIL 7, 2014</u>																										
19. SUPERVISOR SIGNATURE _____			DATE: _____																										
20. DEPT-SIGNATURE _____			DATE: <u>4-8-14</u>																										
21. MSD-BA-SIGNATURE _____			DATE: <u>4/8/14</u>																										

DA 10R0127253

STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



322/VPT38015

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 6.2014 Pendleton	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> # 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Serv <input type="checkbox"/> Executive Se <input type="checkbox"/> Board/Commiss <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging
					Breakfast	Lunch	Dinner	
06/03/14	6:30am		Travel to Pendleton 8/3/14	34.50		11.50	23.00	83.00
06/04/14				46.00	11.50	11.50	23.00	83.00
06/05/14		5:00pm	Return to Portland	34.50	11.50	11.50	11.50	34.50
15. Totals				115.00	23.00	34.50	57.50	166.00
16. Accounting Codes		17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses		19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
14010-41004			Personal Vehicle Mileage			0.555		
4101 115.00								
4106 183.94			Hotel tax					17.94
Totals		298.94			23. Section Total		\$17.94	

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to visit with the Pendleton staff and also to meet with the Confederated Tribes of the Umatilla Indian Reservation.

26. Grand Total Amount \$298.94	
27. Travel Advance Amount	
28. Amount Due Employee/State \$298.94	
29. Received Training	Conducted Training
30. Signature of Employee 	31. Title Director
32. Approved By 	33. Title OSD Administrator
Date 06/10/14	
Date 6/12/14	

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

06/10/14

06/12/14

06/10/14



STATE OF OREGON

1070007

1030

104-105

DA10R0127253

STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



355/VP T38201

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 6.2014 ECOS DC	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift <input type="checkbox"/> # 8 am - 5 pm <input checked="" type="checkbox"/> # Other to	
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Service <input type="checkbox"/> Board/Commission <input type="checkbox"/> Volunteering <input type="checkbox"/> Other <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	12. Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
06/25/14	8:00am		Travel to Washington DC	53.25		17.75	35.50	224.00	277.25
06/26/14				17.75	17.75	prov	prov	224.00	241.75
06/27/14		5:00pm	Return to Portland	53.25	17.75	17.75	17.75		53.25
15. Totals				124.25	35.50	35.50	53.25	448.00	\$572.25

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
10001 - +2004 -		Personal Vehicle Mileage		0.555		
M20000						
4151	123.50					
4150	512.96	Hotel tax				64.96
14010 - 41004		Parking Receipt - June 13, 2014				3.75
4151	.75					
4160	3.75					
Totals						\$68.71

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend EPA budget meetings and meet with other member of EPA on behalf of ECOS. The parking receipt is from June 13, 2014 when Dick attended the Lower Columbia Estuary Partnership Science to Policy Summit held in Vancouver, Washington.

26. Grand Total Amount		\$640.96
27. Travel Advance Amount		
28. Amount Due Employee/State		① \$640.96
29. Received Training	Conducted Training	
30. Signature of Employee	31. Title	Date
<i>Dick Pedersen</i>	Director	07/07/14
32. Approved By	33. Title	Date
<i>[Signature]</i>	Contract Services	7/8/14

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

05ms.

① \$640.96

② \$1,304.00

③ <\$1,940.46> (Reimbursed by ECOS.) see page 3.

④ \$4.50



Printed: 05/26/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147513780  
Issued Date: 05/29/2014  
Agent: ENTERPRISE ONLINE



Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : ZQ49M0



Your Flight Selection

Ticket Number (s) / Confirmation Number (s) : 7406992177-

Departure:	Wednesday	06/25/2014	9:35 am	Portland( PDX )			
Arrival:	Wednesday	06/25/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : Y	Mileage : 2350	
Departure:	Friday	06/27/2014	5:10 pm	Washington( DCA )			
Arrival:	Friday	06/27/2014	8:05 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 771	Class : Y	Mileage : 2350	

Air Fare: \$1,185.12

Taxes: \$110.88

Total Air Fare: \$1,296.00



Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0611410278-

Total : \$8.00

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$1,296.00
Credit Card	VI-310165	\$8.00
		② \$1,304.00

Total Air Fare: \$1,296.00  
Total Rail Fare: \$0.00  
Service Fee : \$8.00  
Invoice Total : \$1,304.00  
Amount Paid : \$1,304.00  
Balance : \$0.00

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #,
CHECK NAME		REASON FOR PAYMENT		INV #
24031	③ 1,940.46	ECOS		M20000
ENVIRONMENTAL COUNCIL OF THE STATES		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
1,940.46 TOTAL				



OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: <u>140-14</u>																					
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																						
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick will be travelling to Washington DC to attend a Budget meeting with EPA on June 26, 2014. Travel will be Wednesday, June 25, returning Friday, June 27, 2014. As President of ECOS, Dick is required to participate..																									
7. ITINERARY: Destination city/state: <u>Washington DC</u> Departure date/time: <u>Wed. June 25, 9:45am</u> Return date/time: <u>Fri. June 27, 8:15pm</u>			8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)  TOTAL: <u>\$1,300.00</u>																						
9. LODGING: Lodging per diem rate: <u>\$224.00</u>  Amount per night: <u>224.00</u>  Room tax per night: <u>29.12</u>  # of nights: <u>2</u>  TOTAL: <u>\$506.24</u>			10. MEALS: Daily meal per diem rate: <u>\$71.00</u> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Rate</th> <th># Meals</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Breakfast: (25%)</td> <td>17.75</td> <td>2</td> <td>35.50</td> </tr> <tr> <td>Lunch: (25%)</td> <td>17.75</td> <td>3</td> <td>53.25</td> </tr> <tr> <td>Dinner: (50%)</td> <td>35.50</td> <td>3</td> <td>106.50</td> </tr> <tr> <td colspan="3">TOTAL:</td> <td><u>\$195.25</u></td> </tr> </tbody> </table>				Rate	# Meals	Total	Breakfast: (25%)	17.75	2	35.50	Lunch: (25%)	17.75	3	53.25	Dinner: (50%)	35.50	3	106.50	TOTAL:			<u>\$195.25</u>
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TOTAL:			<u>\$195.25</u>																						
11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas TOTAL: <u>\$0.00</u>			12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)  a. Private vehicle mileage <u>0.00</u> b. Shuttle <u>(# of miles)</u> c. Other (specify below) <u>20.00</u>  TOTAL: <u>\$20.00</u>																						
13. TRAINING RELATED? (if yes, attach agenda)  <input type="checkbox"/> Yes <input type="checkbox"/> No			14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____																						
15. TRAVEL AWARDS: Agencies are mandated to maintain records on employee accumulation of travel awards as reported on their travel expense detail sheets. Travel awards include, but may not be limited to airline frequent flyer miles and hotel or car rental frequent customer awards or miles.			16. ESTIMATED COST OF TRIP: <table style="width:100%;"> <tr><td>Transportation:</td><td><u>\$1,300.00</u></td></tr> <tr><td>Lodging:</td><td><u>\$506.24</u></td></tr> <tr><td>Meals:</td><td><u>\$195.25</u></td></tr> <tr><td>Car Rental:</td><td><u>\$0.00</u></td></tr> <tr><td>Misc:</td><td><u>\$20.00</u></td></tr> <tr><td>TOTAL:</td><td><u>\$2,021.49</u> <i>gcm</i></td></tr> </table>			Transportation:	<u>\$1,300.00</u>	Lodging:	<u>\$506.24</u>	Meals:	<u>\$195.25</u>	Car Rental:	<u>\$0.00</u>	Misc:	<u>\$20.00</u>	TOTAL:	<u>\$2,021.49</u> <i>gcm</i>								
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17. I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																									
18. EMPLOYEE SIGNATURE <i>Dick Pedersen</i>				DATE: <u>5-28-2014</u>																					
19. SUPERVISOR SIGNATURE				DATE:																					
20. DEPT SIGNATURE <u>LT</u> <i>(see attachment)</i>				DATE:																					
21. MSD-BA SIGNATURE <u>FINANCIAL SERVICES MGR. Richard A. Lawrence for J. Roys</u>				DATE: <u>5/29/2014</u>																					

**OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION**

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #:																	
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000				5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																	
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13. TRAINING RELATED? (if yes, attach agenda) <input type="checkbox"/> Yes <input type="checkbox"/> No																					
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc; <input type="checkbox"/> AFSCME; <input type="checkbox"/> Other: Explain: _____			16. ESTIMATED COST OF TRIP: Transportation: <u>\$1,300.00</u> Lodging: <u>\$506.24</u> Meals: <u>\$195.25</u> Car Rental: <u>\$0.00</u> Misc: <u>\$20.00</u>  TOTAL: <u>\$2,021.49</u> <i>glen</i>																		
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18. EMPLOYEE SIGNATURE <i>Dick Pedersen</i>			DATE: <u>5-28-2014</u>																		
19. SUPERVISOR SIGNATURE <i>Jane Hume</i>			DATE: <u>5-28-2014</u>																		
20. DA/EMT SIGNATURE			DATE:																		
21. MSD DA SIGNATURE			DATE:																		

DA 10R0127253



STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET

319/VPT-38376

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 7.2014 Victoria BC	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Se <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	12. Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
			282/138						
07/10/14	6:00am		Travel to Victoria	US\$ 103.50	87.00	34.50	69.00	CAN\$ 140.00	115.00
07/11/14				US\$ 103.50	87.00	29.00	68.00	140.00	227.00
07/12/14		4:00pm	Return to Portland	US\$ 103.50	146.00	29.00	29.00		446.00
					34.50	34.50	34.50		
								US\$ 130.39	130.39
								US\$ 130.39	130.39
								US\$ 260.78	
				US\$ 310.50	69.00	69.00	172.50	CAN\$ 280.00	571.28
15. Totals				290.00	58.00	58.00	145.00	280.00	\$570.00

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
14010-41004		Personal Vehicle Mileage		0.560	257	US\$ 143.92
		Personal Vehicle Mileage		0.560	257	US\$ 143.92
		Hotel Taxes/fees		US\$ 42.11	CAN\$	45.22
		Ferry		US\$ 32.60	CAN\$	35.00
						US\$ 74.71
Totals	645.99					\$368.06

23. Section Total

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

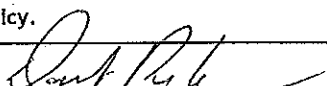

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend the Pacific Northwest Director's Meeting on July 11, 2014. Dick represents the State of Oregon at this meeting. Dick drove his personal vehicle rather than flying.

26. Grand Total Amount	US\$ 645.99
27. Travel Advance Amount	
28. Amount Due Employee/State	US\$ 645.99
29. Received Training	Conducted Training
30. Signature of Employee	31. Title Director
32. Approved By	33. Title Deputy
	Date 7/28/14
	Date 7-30-14

05 rec.



OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: Dick Pedersen		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: 8-15																																					
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): <del>40001-42004-M20000-</del> 15-14010-41004			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																						
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick Pedersen will be attending the Pacific Northwest Environmental Director's Meeting being held in Victoria, BC on July 11, 2014. Dick represents the state of Oregon at this meeting.																																									
7. ITINERARY: Destination city/state: Victoria, BC Departure date/time: Thurs, July 10, 11:00am Return date/time: Sat, July 12, 5:00pm			8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)  TOTAL: \$440.00																																						
9. LODGING: Lodging per diem rate: <del>\$202.00</del> 218.00  Amount per night: 140.00  Room tax per night: 14.38  # of nights: 2  TOTAL: \$308.76			10. MEALS: Daily meal per diem rate: 127.00 \$416.00 <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Rate</th> <th># Meals</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Breakfast: (25%) 31.75</td> <td>29.00</td> <td>2</td> <td>58.00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>63.50</td> </tr> <tr> <td>Lunch: (25%) 31.75</td> <td>29.00</td> <td>3</td> <td>87.00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>95.25</td> </tr> <tr> <td>Dinner: (50%) 63.50</td> <td>58.00</td> <td>2</td> <td>116.00</td> </tr> <tr> <td></td> <td></td> <td></td> <td>127.00</td> </tr> <tr> <td colspan="3">TOTAL:</td> <td>\$261.00</td> </tr> <tr> <td colspan="3"></td> <td>285.75</td> </tr> </tbody> </table>				Rate	# Meals	Total	Breakfast: (25%) 31.75	29.00	2	58.00				63.50	Lunch: (25%) 31.75	29.00	3	87.00				95.25	Dinner: (50%) 63.50	58.00	2	116.00				127.00	TOTAL:			\$261.00				285.75
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11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas TOTAL: \$0.00			12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)  a. Private vehicle mileage 0.00 b. Shuttle (# of miles) c. Other (specify below) 100.00 Airport parking & baggage fees TOTAL: \$0.00 100.00																																						
13. TRAINING RELATED? (if yes, attach agenda) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																									
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain:			16. ESTIMATED COST OF TRIP: <table style="width:100%;"> <tr> <td>Transportation:</td> <td>\$440.00</td> </tr> <tr> <td>Lodging:</td> <td>\$308.76</td> </tr> <tr> <td>Meals:</td> <td>\$261.00 285.75</td> </tr> <tr> <td>Car Rental:</td> <td>\$0.00</td> </tr> <tr> <td>Misc:</td> <td>\$0.00 100.00</td> </tr> <tr> <td>TOTAL:</td> <td>1,134.51</td> </tr> <tr> <td></td> <td>\$1,009.76 70m</td> </tr> </table>			Transportation:	\$440.00	Lodging:	\$308.76	Meals:	\$261.00 285.75	Car Rental:	\$0.00	Misc:	\$0.00 100.00	TOTAL:	1,134.51		\$1,009.76 70m																						
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17. I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																																									
18. EMPLOYEE SIGNATURE 			DATE: 5-30-2014																																						
19. SUPERVISOR SIGNATURE			DATE:																																						
20. DA/EMF SIGNATURE  LT.			DATE: 6/3/14																																						
21. MSD-DA SIGNATURE FINANCIAL SERVICES MGR. Richard A. Lawrence			DATE: 6/4/2014																																						

DA 10R0127253



STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET

312/VPT 38266

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 7.2014 Bend - ACWA	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Sd. lce <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME <input type="checkbox"/> Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging
					Breakfast	Lunch	Dinner	
07/22/14	12:00pm		Travel to Bend 107/61	30.50			30.50	107.00
07/23/14				61.00	15.25	15.25	30.50	107.00
07/24/14				30.50	prov	prov	30.50	107.00
07/25/14				30.50	prov	prov	30.50	125.00
07/26/14		3pm	Return to Portland	45.75	15.25	15.25	15.25	45.75
15. Totals				198.25	30.50	30.50	137.25	446.00

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
1-010 - 4100		Personal Vehicle Mileage		0.560		
4101	49.56					
4106	125.80	Hotel Taxes 7/22-7/24				35.31
4431	148.69	Hotel Taxes 7/25				21.88
4433	377.39					
Totals		701.44	23. Section Total		\$57.19	

24. I did/will ☐ did not/will not ☐ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend the ACWA Conference in Bend, Oregon July 23-25, 2014. Dick was also a presenter at the conference. On Friday, July 25 and early Saturday, July 26, Dick with Bob Perciasepe, Deputy Administrator for EPA-Washington DC. All local hotels were sold out for Friday but the Mt Bachelor Resort was able to accommodate Dick for the conference rate of \$125 per nt. Joni Hammond approved the \$18 over per diem rate.

26. Grand Total Amount \$701.44	
27. Travel Advance Amount	
28. Amount Due Employee/State \$701.44	
29. Received Training <input checked="" type="checkbox"/> Conducted Training <input checked="" type="checkbox"/>	
30. Signature of Employee <i>Dick Pedersen</i>	31. Title Director
32. Approved By <i>Joni Hammond</i>	33. Title Deputy
Date 7/28/14	
Date 7-30-15	

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

STATE OF OREGON

303/VP T. 38475

OS rec.

① \$ 751.92

② \$1,025.00 see next page.

③ \$1,025.00 (Reimbursed by Georgetown Climate Center. See page 3.)

④ (\$ 729.42) (Reimbursed by ECOS. See page 5.)

⑤ \$22.50



Printed: 05/27/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147516163  
Issued Date: 06/30/2014  
Agent: ENTERPRISE ONLINE



Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : XGXRDW



Your Flight Selection

Ticket Number (s) / Confirmation Number (s) : 7408484666-

Departure:	Tuesday	07/29/2014	9:45 am	Portland( PDX )			
Arrival:	Tuesday	07/29/2014	5:40 pm	Washington( DCA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 764	Class : M	Mileage : 2350	
Departure:	Friday	08/01/2014	5:10 pm	Washington( DCA )			
Arrival:	Friday	08/01/2014	8:05 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 771	Class : Y	Mileage : 2350	
Air Fare: \$925.58				Taxes: \$91.42	Total Air Fare: \$1,017.00		



Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0612499237-

Total : \$8.00

Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$1,017.00
Credit Card	VI-310165	\$8.00
		(2) \$1,025.00

Total Air Fare: \$1,017.00  
Total Rail Fare: \$0.00  
Service Fee : \$8.00  
Invoice Total : \$1,025.00  
Amount Paid : \$1,025.00  
Balance : \$0.00

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #
CHECK NAME		REASON FOR PAYMENT		INV #
511508	③ 1,025.00	GEORGETOWN CLIMATE CENTER		
GEORGETOWN UNIVERSITY		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
	1,025.00	TOTAL		
				M20000



# Oregon

John A. Kitzhaber, MD, Governor

Department of Environmental Quality  
Headquarters  
811 SW Sixth Avenue  
Portland, OR 97204-1390  
(503) 229-5696  
FAX (503) 229-6124  
TTY: 711

DATE: August 28, 2014

TO: Tsinu Tesfaye, Georgetown Climate Center

FROM: Dick Pedersen

RE: Reimbursement Request for Meeting of States' 111(d) Implementation Group; Washington DC;  
July 29 & July 30

I am writing to request reimbursement for the following travel expenses associated with my participation in the Meeting of States' 111(d) Implementation Group; Washington DC; July 29 & July 30.

Please find attached original receipts for the following expenses:

- ALASKA AIRLINES - \$ 1,025.00

Reimbursement check should be made payable to the Oregon Department of Environmental Quality.  
Please find the W-9 form for the Oregon Department of Environmental Quality attached.

If you have any follow-up question, please contact Kathy Murphy at 503-229-5455.

PLEASE SIGN THIS MEMO AS IT IS YOUR OFFICIAL REQUEST FOR REIMBURSEMENT.

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #,
CHECK NAME		REASON FOR PAYMENT		INV #
24118-1	2,595.53	ECOS		<u>M20000</u>
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
24118-2	④ 729.42	ECOS		<u>M20000</u>
		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
	<u>3,324.95</u>	TOTAL		

# ECOS TRAVEL REIMBURSEMENT FORM

**ADDRESS**

Name: Dick Pedersen

Organization: Oregon DEQ

Address: 811 SW 6th Ave

City/State/ZIP: Portland, OR 97204

Phone: 503-229-5300

Fax: 503-229-6730

Email: PEDERSEN.Dick@deg.state.or.us

**Instructions:**

\*\*\*\*\*PLEASE COMPLETE ELECTRONICALLY\*\*\*\*\*

Type in the requested information. Calculations will be done automatically.

Please mail a signed hard copy of this completed form and corresponding original receipts for all items \$25 and more to ECOS for reimbursement.

Mail to:  
ECOS  
50 F St NW  
Suite 350  
Washington, DC 20001 Phone: (202) 266-4920

**Meeting Name:** ECOS STEP Conference

**Meeting Location:** Washington DC

**Travel Start and End Dates and Times:** 7/29/14 - 8/1/14 9:30am - 8:00pm

Dates of Trip (m/d/y)	Day 1		Day 2		Day 3		Day 4		Day 5		Day 6		Day 7		Day 8		Day 9		TOTALS
	Enter Date:	7/29/2014	Enter Date:	7/30/2014	Enter Date:	7/31/2014	Enter Date:	8/1/2014	Enter Date:	8/1/2014	Enter Date:	8/1/2014	Enter Date:	8/1/2014	Enter Date:	8/1/2014	Enter Date:	8/1/2014	
<b>TRANSPORTATION</b>																			
Air/Train/Fare																			
Personal Car Mileage																			
Mileage Charges																			
Taxi/Van/Metro		40.27				14.49													71.76
Airport Parking																			
Transportation Subtotal		40.27				14.49													\$ 71.76
<b>MEALS &amp; INCIDENTALS (M&amp;IE):</b> See GSA page for per diem rates: <a href="http://www.gsa.gov/Portal/gsa/ep/content?view.do?contentType=GSA_BASIC&amp;">http://www.gsa.gov/Portal/gsa/ep/content?view.do?contentType=GSA_BASIC&amp;</a>																			
Breakfast		18.00	prov	prov	prov	prov	prov	12.00											12.00
Lunch			prov	prov	prov	prov	prov												18.00
Dinner		prov	prov	prov	prov	36.00		18.00											54.00
Incidentals																			
M&IE Subtotal		18.00				36.00		30.00											\$ 84.00
<b>HOTEL AND OTHER (Please specify "other" charges)</b>																			
Hotel		191.22				191.22		191.22											-573.66
Bag Check																			
Other Internet fee																			
Hotel and Other Subtotal		191.22				191.22		191.22											\$ 573.66
<b>GRAND TOTAL AMOUNT OWED</b>																			\$ 729.42

\* current rate is \$ 0.510 per mile

I certify that the above claim is correct and in accordance with ECOS Travel Policy (Please sign and date): [Signature]

Make Check Payable To: Oregon DEQ

Mail Check to: ☐ Address on File or ☐ Above Address (NEW USERS ONLY)

**OFFICE USE ONLY**

APPROVED

CODE

CHECK #

**ECOS**

**M&IE Breakdown**

	\$46	\$51	\$56	\$61	\$66	\$71
Breakfast	7	8	9	10	11	12
Lunch	11	12	13	15	16	18
Dinner	23	26	29	31	34	36
Incidentals	5	5	5	5	5	5

Travel Reimbursement Form Oct-07.xls



OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

<b>1. NAME OF EMPLOYEE:</b> Dick Pedersen		<b>2. AGENCY/OFFICIAL STATION:</b> DEQ / HQ		<b>3. REQUEST #:</b> 2-15																																	
<b>4. AGENCY ACCOUNTING INFORMATION</b> (fund code or Q-Time number): 10001-42004-M20000			<b>5. TRAVEL JUSTIFICATION ATTACHED?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																		
<b>6. PURPOSE OF TRIP:</b> (Be specific, include dates/times of meeting or conference) Dick will be attending an ECOS State Environmental Protection (STEP) conference in Washington DC. The meeting will be July 31, 2014. Dick will also have meetings with EPA and Legislative Visits. Dick represents Oregon for Environmental Council of the States (ECOS) and is also President. ECOS should be reimbursing for travel.																																					
<b>7. ITINERARY:</b> Destination city/state: Washington DC Departure date/time: <u>Tues. 29</u> July 30, 6:00am Return date/time: <u>Fri.</u> August 1, 8:00pm			<b>8. TRANSPORTATION:</b> (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)  <div style="text-align: right;">           TOTAL: <u>1,025.00</u>  <u>\$450.00</u> </div>																																		
<b>9. LODGING:</b> Lodging per diem rate: <u>\$167.00</u>  Amount per night: <u>167.00</u>  Room tax per night: <u>24.21</u>  # of nights: <u>2 3</u> <div style="text-align: right;">           TOTAL: <u>573.63</u>  <u>\$382.42</u> </div>			<b>10. MEALS:</b> Daily meal per diem rate: <u>\$71.00</u> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Rate</th> <th style="text-align: center;"># Meals</th> <th style="text-align: center;">Total</th> </tr> </thead> <tbody> <tr> <td>Breakfast: (25%)</td> <td style="text-align: center;">17.75</td> <td style="text-align: center;">34</td> <td style="text-align: center;">53.25</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: center;"><u>71.00</u></td> </tr> <tr> <td>Lunch: (25%)</td> <td style="text-align: center;">17.75</td> <td style="text-align: center;">34</td> <td style="text-align: center;">53.25</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: center;"><u>71.00</u></td> </tr> <tr> <td>Dinner: (50%)</td> <td style="text-align: center;">35.50</td> <td style="text-align: center;">34</td> <td style="text-align: center;">406.50</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: center;"><u>1,422.00</u></td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;">TOTAL: <u>\$243.00</u></td> </tr> </tbody> </table> <div style="text-align: right;"> <u>284.00</u> </div>				Rate	# Meals	Total	Breakfast: (25%)	17.75	34	53.25				<u>71.00</u>	Lunch: (25%)	17.75	34	53.25				<u>71.00</u>	Dinner: (50%)	35.50	34	406.50				<u>1,422.00</u>				TOTAL: <u>\$243.00</u>
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			TOTAL: <u>\$243.00</u>																																		
<b>11. CAR RENTAL:</b> (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). Days @ \$31 plus tax, gas      TOTAL: <u>\$0.00</u>			<b>12. MISCELLANEOUS COSTS:</b> (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)  a. Private vehicle mileage <u>0.00</u> (# of miles) b. Shuttle <u>40.00</u> c. Other (specify below)  <div style="text-align: right;">           TOTAL: <u>\$40.00</u> </div>																																		
<b>13. TRAINING RELATED?</b> (if yes, attach agenda)  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<b>16. ESTIMATED COST OF TRIP:</b> Transportation: <u>\$450.00</u> <u>1,025.00</u> Lodging: <u>\$382.42</u> <u>573.63</u> Meals: <u>\$243.00</u> <u>284.00</u> Car Rental: <u>\$0.00</u> Misc: <u>\$40.00</u> <div style="text-align: right;"> <u>1,922.63</u>  <u>\$1,085.42</u> <u>767.21</u> </div>																																		
<b>14. STATUS:</b> <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____																																					
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<b>18. EMPLOYEE SIGNATURE</b> <u>Dick Pedersen</u>				DATE: <u>3/14/2014</u>																																	
<b>19. SUPERVISOR SIGNATURE</b>				DATE: <u>3/14/2014</u>																																	
<b>20. DA/EMT SIGNATURE</b>				DATE:																																	
<b>21. MSD/DA SIGNATURE</b> <u>FINANCIALS</u>				DATE: <u>3/17/14</u>																																	

# STATE OF OREGON

## TRAVEL EXPENSE DETAIL SHEET



301/VPT 38463

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 8.2014 Coastal Summit	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Service <input type="checkbox"/> Board/Commission <input type="checkbox"/> Volunteered <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging	
					Breakfast	Lunch	Dinner		
08 07/19/14	2:00pm		Travel to Florence 241.51	25.50 ✓			25.50	77.95 ✓	103.45 ✓
08 07/20/14				25.50 ✓	prov	prov	25.50	77.95 ✓	103.45 ✓
08 07/21/14				25.50 ✓	prov	prov	25.50	77.95 ✓	103.45 ✓
08 07/22/14		6:00pm	Return to Portland	38.25 ✓	12.75	12.75	12.75		38.25 ✓
15. Totals				114.75 ✓	12.75	12.75	89.25	233.85 ✓	\$348.60 ✓

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
1-4010-41004		Personal Vehicle Mileage		0.560		
4101	114.75					
4106	257.25	Hotel Taxes/fees (\$7.80 x 3)				23.40 ✓
Totals				372.00	23. Section Total \$23.40 ✓	

24. I did/will ☐ did not/will not ☐ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend the Coastal Summit hosted by Senator Roblan. The Summit was held in Florence, OR on August 20-21, 2014. Dick was on a panel on Thursday, 8/21. On Friday, August 22, Dick met with the Coquille Tribe in Coos Bay.

26. Grand Total Amount \$372.00 ✓	
27. Travel Advance Amount	
28. Amount Due Employee/State \$372.00 ✓	
29. Received Training	Conducted Training
30. Signature of Employee <i>Dick Pedersen</i>	31. Title Director Date 8/24/2014
32. Approved By <i>[Signature]</i>	33. Title Central Services Admin Date 8/30/14

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

DA 10R0127253

**STATE OF OREGON**  
**TRAVEL EXPENSE DETAIL SHEET**



314/VPT 38549

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 8.2014 Medford EQC	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Service <input type="checkbox"/> Board/Commission <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	13. Individual Meal Reimbursement			14. Total Meals and Lodging
					Breakfast	Lunch	Dinner	
08/26/14	7:00am		Travel to Medford 8.3/46	34.50		11.50	23.00	83.00 / 117.50
08/27/14				23.00	prov	prov	23.00	83.00 / 106.00
08/28/14				23.00	prov	prov	23.00	83.00 / 106.00
08/29/14		2:30pm	Return to Portland	34.50	11.50	11.50	11.50	34.50
15. Totals				115.00	11.50	23.00	80.50	249.00 / \$364.00

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
14010 - 41004		Personal Vehicle Mileage - To Salem 9/2		0.560	47	26.32
		Personal Vehicle Mileage - To Portland 9/2		0.560	47	26.32
4101	115.00	Governor's Office Strategic Planning Committee				
4106	273.90	Hotel Taxes/fees				24.90
4109	52.104					
Totals				441.54	94	\$77.54

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend the EQC Meeting held in Medford August 27-28, 2014. While in the area, Dick travelled down the coast to meet with the Coquille Tribe on Friday 8/29. Mileage reimbursement is from Tuesday, September 2, when Dick needed to go to Salem but there were no state cars available. All books were locked up and the receptionists were not in to hand out

26. Grand Total Amount	\$441.54
27. Travel Advance Amount	
28. Amount Due Employee/State	\$441.54
29. Received Training	Conducted Training
30. Signature of Employee	31. Title Director
32. Approved By	33. Title CSD Admin
	Date 9/4/2014
	Date 9/11/14

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

PVM rec,

STATE OF OREGON

Travel Expense Claim.xls (12/09) jeber

DA 10R0127253

STATE OF OREGON

## TRAVEL EXPENSE DETAIL SHEET



301/VPT 38653 RAL

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 9.2014 ECOS Santa Fe	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Secretary <input type="checkbox"/> Board/Commission <input type="checkbox"/> Volunteer <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME		Other <input type="checkbox"/>	

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	12. Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
09/13/14	9:00am		Travel to Santa Fe 88/71	53.25		17.75	35.50	88.00	141.25
09/14/14				71.00	17.75	17.75	35.50	88.00	159.00
09/15/14				35.50	prov	prov	35.50	88.00	123.50
09/16/14				0.00	prov	prov	prov	88.00	88.00
09/17/14				35.50	prov	prov	35.50	88.00	123.50
09/18/14		9:00pm	Return to Portland	53.25	prov	17.75	35.50		53.25
15. Totals				248.50	17.75	53.25	177.50	440.00	\$688.50

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
10001-72004-		Personal Vehicle Mileage		0.560		
M20000		Hotel Taxes				66.85
+		Hotel Parking				43.28
14010-71004		Rental Car			312.00	271.00
		Rental Gas				20.06
		Taxi to Airport				51.50
		Taxi Home from Airport				61.70
		Baggage fees (\$25 each way)				50.00
Totals						605.39
23. Section Total						\$564.39

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend the Environmental Council of the States Fall meeting held in Santa Fe, New Mexico September 15-17, 2014. Dick is president of ECOS and needed to attend meeting before and after the main conference.

26. Grand Total Amount	1,293.89
27. Travel Advance Amount	
28. Amount Due Employee/State	① 1,293.89
29. Received Training	Conducted Training
30. Signature of Employee	31. Title Director
32. Approved By J. K. NELSON	33. Title CENTRAL SVCS DIVISION ADMINISTRATOR
	Date 9/22/2014
	Date 9/25/14

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

05 m.

① \$1,293.89

② \$ 394.20 see page 3.

③ \$1,664.59 (Reimbursed by ECOS. see page 4.)

④ \$23.50

DA 10R0127253  
**STATE OF OREGON**  
**TRAVEL EXPENSE DETAIL SHEET**



301/VPT 38653 RAL

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 9.2014 ECOS Santa Fe	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Serv <input type="checkbox"/> Executive Sevice <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME		Other <input type="checkbox"/>	

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
09/13/14	9:00am		Travel to Santa Fe 88/71	53.25		17.75	35.50	88.00	141.25
09/14/14				71.00	17.75	17.75	35.50	88.00	159.00
09/15/14				35.50	prov	prov	35.50	88.00	123.50
09/16/14				0.00	prov	prov	prov	88.00	88.00
09/17/14				35.50	prov	prov	35.50	88.00	123.50
09/18/14		9:00pm	Return to Portland	53.25	prov	17.75	35.50		53.25

## TRAVEL CLAIM FUND CODE DISTRIBUTION

AY	INDEX	PCA	AOBJ	\$	PROJ
15	10001	42004	4151	112.50	M20000
			4150	253.42	
			4159	25.00	
			4160	244.27	
			4432	112.50	
			4434	253.43	
			4440	25.00	
			4441	244.27	
	14010	41004	4151	11.75	
			4432	11.75	
				1293.89	

the main conference.

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

30. Signature of Employee

32. Approved By

31. Title

Director

Date

9/24/2014

33. Title

CENTRAL SVCS DIVISION ADMINISTRATOR

Date

9/25/14

Dick  
ter

26. Grand Total Amount

1,293.89  
\$1,252.89

27. Travel Advance Amount

28. Amount Due Employee/State

1,293.89  
\$1,252.89

29. Received Training

Conducted Training

31. Title

Director

Date

9/24/2014

33. Title

CENTRAL SVCS DIVISION ADMINISTRATOR

Date

9/25/14



Printed: 05/27/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147519649  
Issued Date: 08/14/2014  
Agent: ENTERPRISE ONLINE



### Passenger Information

PEDERSEN/RICHARD JOHN

PNR Locator : M7XXQW



### Your Flight Selection

Ticket Number (s) / Confirmation Number (s) : 7408488014-

Departure:	Saturday	09/13/2014	9:05 am	Portland( PDX )			
Arrival:	Saturday	09/13/2014	11:37 am	Phoenix( PHX )			
Airline:	USAIR( US )			Flight # : 630	Class : V	Mileage : 1009	
Departure:	Saturday	09/13/2014	12:30 pm	Phoenix( PHX )			
Arrival:	Saturday	09/13/2014	2:38 pm	Albuquerque( ABQ )			
Airline:	USAIR( US )			Flight # : 2713	Class : V	Mileage : 328	
Departure:	Thursday	09/18/2014	3:45 pm	Albuquerque( ABQ )			
Arrival:	Thursday	09/18/2014	5:45 pm	Seattle( SEA )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 791	Class : T	Mileage : 1180	
Departure:	Thursday	09/18/2014	8:00 pm	Seattle( SEA )			
Arrival:	Thursday	09/18/2014	8:48 pm	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 2045	Class : T	Mileage : 129	
		Air Fare: \$317.20		Taxes: \$69.00		Total Air Fare: \$386.20	



### Service Fee Information

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0613144124-

Total : \$8.00

### Payment Details

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$386.20
Credit Card	VI-310165	\$8.00
		<u>\$394.20</u>

Total Air Fare:	\$386.20
Total Rail Fare:	\$0.00
Service Fee :	\$8.00
Invoice Total :	\$394.20
Amount Paid :	\$394.20
Balance :	\$0.00

DEPARTMENT OF ENVIRONMENTAL QUALITY  
TRANSMITTAL ADVICE  
TRAVEL REIMBURSEMENT

CK #	TRAN AMNT	FOR THE ACCOUNT OF	VO #	PJT #
CHECK NAME		REASON FOR PAYMENT		INV #
24225	③ 1,664.59	ECOS		M20000
ENVIRONMENTAL COUNCIL OF THE STATES		TRAVEL REIMBURSEMENT FOR DICK PEDERSEN		
1,664.59 TOTAL				



# ECOS TRAVEL REIMBURSEMENT FORM

**ADDRESS**

Name: Dick Pedersen  
Organization: Oregon DEQ  
Address: 811 SW Sixth Ave  
City/State/Zip: Portland, Oregon  
Phone: 503-229-5300  
Fax: 503-229-6762  
Email: pedersen.dick@deq.state.or.us

**Instructions:**  
\*\*\*\*\*PLEASE COMPLETE ELECTRONICALLY\*\*\*\*\*  
Type in the requested information. Calculations will be done automatically.  
Please mail a signed hard copy of this completed form and corresponding original receipts for all items \$25 and more to ECOS for reimbursement.  
Mail to:  
ECOS  
50 F St NW  
Suite 350  
Washington, DC 20001  
Phone: (202) 266-4920

Meeting Name: Annual Meeting and various Executive Meetings

Meeting Location: Albuquerque, NM


Travel Start and End Dates and Times: 9/13/14 9:00am; 9/18/14 9:00p

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	TOTALS
Dates of Trip (m/d/y)	9/13/2014	9/14/2014	9/15/2014	9/16/2014	9/17/2014	9/18/2014				
TRANSPORTATION										
Air/Train Fare	\$394.20									394.20
Personal Car Mileage										
Mileage Charges*						81.76				445.26
Taxi/Van/Metro	363.50									
Airport Parking										
Transportation Subtotal	757.70					81.76				\$ 839.46
MEALS & INCIDENTALS (M&IE): See GSA page for per diem rates:										
Breakfast	18.00	18.00	12.00	12.00	12.00	18.00				12.00
Lunch	36.00	36.00	36.00	36.00	36.00	36.00				54.00
Dinner	3.75	5.00	5.00	2.50	2.50	1.25				144.00
Incidentals										15.00
M&IE Subtotal	57.75	71.00	38.50	38.50	38.50	19.25				\$ 225.00
HOTEL AND OTHER (Please specify "other" charges)										
Hotel	101.37	101.37	101.37	101.37	101.37	25.00				-506.85
Bag Check	25.00									50.00
Other Hotel parking										43.28
Hotel and Other Subtotal	126.37	112.19	112.19	112.19	112.19	25.00				\$ 600.13
GRAND TOTAL AMOUNT OWED										\$ 1,664.59

\* current rate is \$ 0.510 per mile  
I certify that the above claim is correct and in accordance with ECOS Travel Policy (Please sign and date):  
Make Check Payable To: Oregon DEQ

Mail Check to: ☐ Address on File or ☐ Above Address (NEW USERS ONLY)

OFFICE USE ONLY  
APPROVED  
CODE  
CHECK #

 ECOS

OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
OUT-OF-STATE TRAVEL AUTHORIZATION

1. NAME OF EMPLOYEE: 5 <u>Dick Pederson</u>		2. AGENCY/OFFICIAL STATION: DEQ / HQ		3. REQUEST #: <u>12-15</u>																					
4. AGENCY ACCOUNTING INFORMATION (fund code or Q-Time number): 10001-42004-M20000			5. TRAVEL JUSTIFICATION ATTACHED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																						
6. PURPOSE OF TRIP: (Be specific, include dates/times of meeting or conference) Dick will be attending the Environmental Council of the States (ECOS) Annual Meeting from September 15-17, 2014. The meeting will be held in Santa Fe, New Mexico. Dick is President and also represents the state of Oregon. Dick will be arriving early to attend scheduled Executive Meetings on Sunday. Dick may also be required to attend a meeting in the works that would extend to Thursday, September 18																									
7. ITINERARY:		8. TRANSPORTATION: (Airfare, train fare or state motor pool vehicle (circle one). For rental cars, see #11, for misc. ground transportation, see #12)																							
Destination city/state: <u>Santa Fe, New Mexico</u>		<u>Flying into Albuquerque</u> <div style="text-align: right;">TOTAL: <u>\$400.00</u></div>																							
Departure date/time: <u>Sat. September 13, 10 am</u>																									
Return date/time: <u>Thur., September 18, 8:30pm</u>																									
9. LODGING: Lodging per diem rate: <u>\$105.00 88.00</u>		10. MEALS: Daily meal per diem rate: <u>\$71.00</u>																							
Amount per night: <u>88.00</u>		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Rate</th> <th style="text-align: center;"># Meals</th> <th style="text-align: center;">Total</th> </tr> </thead> <tbody> <tr> <td>Breakfast: (25%)</td> <td style="text-align: center;">17.75</td> <td style="text-align: center;">5</td> <td style="text-align: center;">88.75</td> </tr> <tr> <td>Lunch: (25%)</td> <td style="text-align: center;">17.75</td> <td style="text-align: center;">6</td> <td style="text-align: center;">106.50</td> </tr> <tr> <td>Dinner: (50%)</td> <td style="text-align: center;">35.50</td> <td style="text-align: center;">5</td> <td style="text-align: center;">177.50</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td style="text-align: center;"><u>\$372.75</u></td> </tr> </tbody> </table>					Rate	# Meals	Total	Breakfast: (25%)	17.75	5	88.75	Lunch: (25%)	17.75	6	106.50	Dinner: (50%)	35.50	5	177.50	TOTAL:			<u>\$372.75</u>
	Rate	# Meals	Total																						
Breakfast: (25%)	17.75	5	88.75																						
Lunch: (25%)	17.75	6	106.50																						
Dinner: (50%)	35.50	5	177.50																						
TOTAL:			<u>\$372.75</u>																						
Room tax per night: <u>13.64</u>																									
# of nights: <u>5</u>																									
TOTAL: <u>\$508.20</u>																									
11. CAR RENTAL: (See OAM 40.10.00.PO, Section 115. The State has a price agreement with Enterprise Rent-A-Car. Optional insurance will not be reimbursed). 6 Days @ \$31 plus tax, gas TOTAL: <u>246.00</u> <u>\$186.00 + \$30 taxes + \$30 gas</u>		12. MISCELLANEOUS COSTS: (Identify specific expenses - taxis, shuttles, phone, vehicle mileage, etc.)																							
		a. Private vehicle mileage <u>0.00</u> b. Shuttle <u>(# of miles)</u> c. Other (specify below) <u>100.00-50.00</u> <u>hotel parking, baggage fees</u> <div style="text-align: right;">TOTAL: <u>\$50.00</u> <u>100.00</u></div>																							
13. TRAINING RELATED? (if yes, attach agenda) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No																									
14. STATUS: <input checked="" type="checkbox"/> Executive/Mgmt Svc: <input type="checkbox"/> AFSCME: <input type="checkbox"/> Other: Explain: _____		16. ESTIMATED COST OF TRIP: Transportation: <u>\$400.00</u> Lodging: <u>\$508.20</u> Meals: <u>\$372.75</u> Car Rental: <u>\$186.00 246.00</u> Misc: <u>\$50.00 100.00</u> TOTAL: <u>1,626.95</u> <u>\$4,546.95 2626</u>																							
15. TRAVEL AWARDS: Agencies are mandated to maintain records on employee accumulation of travel awards as reported on their travel expense detail sheets. Travel awards include, but may not be limited to airline frequent flyer miles and hotel or car rental frequent customer awards or miles.																									
I certify that this trip is necessary and essential to the normal discharge of DEQ responsibilities; that required monies are budgeted and allotted for expenditure; that the trip meets all the requirements mandated by ORS 292.230, OAM Policy 40.10.00, and DEQ policy.																									
18. EMPLOYEE SIGNATURE <u>Dick Pederson</u>				DATE: <u>6-12-2014</u>																					
19. SUPERVISOR SIGNATURE _____				DATE: _____																					
20. DEQ-DA SIGNATURE <u>LT</u>				DATE: <u>6/12/14</u>																					
21. MSD-DA SIGNATURE <u>FINANCIAL SERVICES MGR.</u>				DATE: <u>6/12/14</u>																					

DA 10 R0127253

STATE OF OREGON

## TRAVEL EXPENSE DETAIL SHEET



304/VPT38857

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 10.2015 Ontario	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Service <input type="checkbox"/> Executive Salaries <input type="checkbox"/> Board/Commission <input type="checkbox"/> Volunteered <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
10/21/14	1:00pm		Travel to Ontario 8/3/14	23.00			23.00	83.00	106.00
10/22/14				46.00	11.50	11.50	23.00	83.00	129.00
10/23/14		11:00 am	Return to Portland	23.00	11.50	11.50			23.00
15. Totals				92.00	23.00	23.00	46.00	166.00	\$258.00

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount	
15-14010-		Personal Vehicle Mileage		0.560			
41004		Max Tickets (2 x \$2.50)				5.00	
4101	93.00	Hotel Taxes/fees				16.60	
4106	182.60	Rental Car				79.60	
4108	101.32	Gas				16.72	
Totals				375.92	23. Section Total		\$117.92

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.)  
Travel was to attend a Pesticide Event in Ontario. Dick also met with Representative Bentz while in the area.

26. Grand Total Amount		\$375.92
27. Travel Advance Amount		
28. Amount Due Employee/State		① \$375.92
29. Received Training	Conducted Training	
30. Signature of Employee	31. Title	Date
	Director	10/30/14
32. Approved By	33. Title	Date
	Central Services Admin	10/31/14

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

① \$375.92

② \$242.20 see next page.

\$618.12



Printed: 05/27/2015

OR STATE DEPT. OF ENVIROMENTAL QUALITY  
811 Sw 6Th Ave  
Portland OR 97204

Invoice Number : 147523001  
Issued Date: 09/22/2014  
Agent: ENTERPRISE ONLINE



**Passenger Information**

PEDERSEN/RICHARD JOHN

PNR Locator : SHB9KM



**Your Flight Selection**

Ticket Number (s) / Confirmation Number (s) : 7413622458-

Departure:	Tuesday	10/21/2014	1:15 pm	Portland( PDX )			
Arrival:	Tuesday	10/21/2014	3:31 pm	Boise( BOI )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 2417	Class : V	Mileage : 344	
Departure:	Thursday	10/23/2014	10:20 am	Boise( BOI )			
Arrival:	Thursday	10/23/2014	10:47 am	Portland( PDX )			
Airline:	ALASKA AIRLINES( AS )			Flight # : 2422	Class : V	Mileage : 344	

Air Fare: \$191.62

Taxes: \$42.58

Total Air Fare: \$234.20



**Service Fee Information**

Serv Fee Vendor: ARC SERVICE FEES

Ticket Number (s) : 0613908103-

Total : \$8.00

**Payment Details**

Pay Method	PaymentNumber	Amount Paid
Credit Card	VI-310165	\$234.20
Credit Card	VI-310165	\$8.00
		② \$242.20

Total Air Fare:	\$234.20
Total Rail Fare:	\$0.00
Service Fee :	\$8.00
Invoice Total :	\$242.20
Amount Paid :	\$242.20
Balance :	\$0.00

DA 10R0127253

STATE OF OREGON  
TRAVEL EXPENSE DETAIL SHEET



300/VP T 39002

1. Name of Employee Dick Pedersen		2. Agency DEQ		3. Period (Month and Year) 11.2014 Medford	
4. Official Station HQ / Portland		5. Division/ Work Unit OD		6. Regular Schedule Work Shift ## 8 am - 5 pm # Other to	
7. Unrepresented <input type="checkbox"/> Management Servid <input type="checkbox"/> Executive Se <input type="checkbox"/> Board/Commissid <input type="checkbox"/> Volunte <input type="checkbox"/>		Bargaining Unit Name <input type="checkbox"/> AFSCME <input type="checkbox"/> Other <input type="checkbox"/>			

8. Date	9. Time of Departure	10. Time of Arrival	11. Destination	12. Per Diem/ Hourly Allowance	12. Individual Meal Reimbursement			13. Lodging	14. Total Meals and Lodging
					Breakfast	Lunch	Dinner		
11/12/14	6:30am		Travel to Medford 8.3/41	34.50		11.50	23.00	83.00	117.50
11/13/14				46.00	11.50	11.50	23.00	83.00	129.00
11/14/14		6:00pm	Return to Portland	34.50	11.50	11.50	11.50		34.50
15. Totals				115.00	23.00	34.50	57.50	166.00	\$281.00

16. Accounting Codes	17. Date	18. Miscellaneous Expenses Fares, Private Mileage, Room Tax, Telephone, Other Expenses	19. Training Related?	20. Rate Per Mile	21. Private Car Miles	22. Amount
		Personal Vehicle Mileage		0.560		
		Hotel Taxes				16.60
15-14010 41004	4101	115.00				
	4106	182.60				
Totals		297.60	23. Section Total		\$16.60	

24. I did/will ☐ did not/will not ☒ accept travel awards as a result of, or associated with this state business trip. Completion of this block is mandatory. Travel expense reimbursement claims will not be processed if this block is left blank. Travel awards included, but may not be limited to, airline frequent flyer miles and hotel or car rental frequent customer awards or miles. Review instructions on reverse of the form.

25. REASON FOR TRAVEL: (Be specific.) See email.  
Travel was to meet with Legislators and community members in Medford.

26. Grand Total Amount		\$297.60
27. Travel Advance Amount		
28. Amount Due Employee/State		\$297.60
29. Received Training	Conducted Training	
31. Title	Date	
Director	11/20/14	
32. Approved By	Date	
	11/24	

I certify that all reimbursements claimed reflect actual duty required expenses or allowances entitled; that no part thereof has been heretofore claimed or will be claimed from any other source.

I certify that the above claimed expenses are authorized duty required expenses. Funds for payment of this claim are available in the approved budget for the period covered and have been allotted for expenditure.

Travel Expense Claim,dt (12/09) Jeber



301/VPT 39175 RAL

Travel Expense Claim Exit (12/09) jeber