

# EVANS COUNTY BOARD OF EDUCATION - EMPLOYEE EXPENSE STATEMENT

TRAVEL EXPENSE STATEMENT EFFECTIVE JANUARY 1, 2023

| THE EXPENSE STATEMENT BELOW CAN BE COMPLETED FOR ONE TRIP ONLY. PLEASE COMPLETE A SEPARATE EXPENSE STATEMENT FOR EACH TRIP TRAVELLED.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
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| Name of Employee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Martin G. Waters                          |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ONLY THE GRAY AREAS MUST BE FILLED IN.    |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Physical Home Address, City and State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 318 Nevils-Denmark Road, Nevils, GA 31321 |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| How far do you commute to work each day (one way not round trip)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 13                                        |                     | What is your Work Location?              |                          | BOE                                                                                                                                                                                                                                                                                                                      |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| THE AGENDA FROM YOUR MTG/CONFERENCE MUST BE ATTACHED. WHAT MEETING/CONFERENCE DID YOU ATTEND?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| What city and state was your conference held?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           |                     | College Park, GA                         |                          | Did you drive?                                                                                                                                                                                                                                                                                                           |                              | YES                                                   |                           | If you did not drive, who did? |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| What date did you depart on your trip?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                     | 2/12/23                                  |                          | What day did you return from your trip?                                                                                                                                                                                                                                                                                  |                              | 2/14/23                                               |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Did you depart from your home or work location?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           |                     | WORK HEADQUARTERS                        |                          | Did you return to your home or work location?                                                                                                                                                                                                                                                                            |                              | WORK HEADQUARTERS                                     |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| PLEASE NOTE THAT YOUR COMMUTE MILEAGE IS SUBTRACTED FROM YOUR TOTAL MILEAGE. THE STATE OF GA DOES NOT REIMBURSE FOR NORMAL COMMUTING MILES.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| What was your Odometer Reading on your vehicle when you first departed on your trip?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                     | 41000                                    |                          |                                                                                                                                                                                                                                                                                                                          |                              | 41415                                                 |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| In detail, type your "depart from" and "return to" locations including points visited on trip. (for ex., Home to GDOE in Atlanta back to BOE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           |                     | work to 2079 Hospitality Wy, Atlanta, GA |                          | Did you drive an automobile or motorcycle?                                                                                                                                                                                                                                                                               |                              | AUTOMOBILE = \$.655/MILE                              |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Was this an overnight trip?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |                     | YES                                      |                          | If yes, did you room with anyone?                                                                                                                                                                                                                                                                                        |                              | NO                                                    |                           | Did you pay the lodging fee?   |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
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| Note: Most overnight trips must exceed 50 miles from your home or work headqtrs AND must require you to be away longer than 17 hrs in 1 day.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| If you did not stay overnight, then did your travel time plus meeting/conference require you to be away for more than 12 hours in one day? If you answer yes, please make sure that you complete the meal section below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Do you have a copy of your lodging receipt to attach to your printed expense statement?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                           |                     | YES - ATTACH                             |                          | Who did you room with at the conference?                                                                                                                                                                                                                                                                                 |                              | Please indicate how many nights you stayed overnight. |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Where did you lodge (please specify hotel name and city/state)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           |                     | AC by Marriott                           |                          | Did you book your lodging through a website, such as Priceline, Travelocity, Expedia, ...?                                                                                                                                                                                                                               |                              | YES-OTHER (see note below)                            |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| How much did the lodging cost you per night? (This amt should include the daily rate plus any taxes charged. Please do not include incidental charges, such as rm serv, movies or parking fees. If the hotel refused to waive the hotel/motel tax, then the BOE can reimb this tax to you.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |                     |                                          |                          | IMPORTANT NOTE ABOUT BOOKING LODGING THROUGH A WEBSITE: If you booked through a website, please make sure you obtain an actual receipt from the hotel to serve as proof that you stayed overnight. A confirmation of your reservation via email from the website is not adequate documentation to support reimbursement. |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| If you paid your own registration or miscellaneous fee (such as bus fuel), please input amount paid.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| NOTE: You must attach to the exp statmt. the miscellaneous receipt, registration receipt OR copy of your cancelled check/credit card stmt showing the pmt.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Please select travel status from dropdown list in gray box on the right.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                     |                                          |                          | Day 1                                                                                                                                                                                                                                                                                                                    |                              | Travel Day                                            |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Please select travel status from dropdown list in gray box on the right.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                     |                                          |                          | Day 2                                                                                                                                                                                                                                                                                                                    |                              | Not a Travel Day                                      |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Please select travel status from dropdown list in gray box on the right.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                     |                                          |                          | Day 3                                                                                                                                                                                                                                                                                                                    |                              | Travel Day                                            |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Please select travel status from dropdown list in gray box on the right.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                     |                                          |                          | Day 4                                                                                                                                                                                                                                                                                                                    |                              | Not a Travel Day                                      |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Please select travel status from dropdown list in gray box on the right.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                           |                     |                                          |                          | Day 5                                                                                                                                                                                                                                                                                                                    |                              | Not a Travel Day                                      |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| <p><b>PARKING FEES OR TOLLS:</b> If you paid parking, please input the amt spent below &amp; attach a detailed receipt to the exp statmt. (No receipt means no reimbursement). Fill in the space below.</p> <p><b>MEALS:</b> Please indicate in the section below which meals were provided AND were not provided by the conference/hotel. You must select PROV BY HOTEL/CONF or NOT PROV BY HOTEL/CONF on ALL meals on ALL days of travel. State travel regs require you to choose either PROV BY or NOT PROV BY on ALL meals. Meal per diem will be paid at the rate of \$13.00 for Breakfast, \$14.00 for Lunch, and \$23.00 for Dinner with the exception of travel days. Meal per diem will be paid at the rate of \$9.75 for Breakfast, \$10.50 for Lunch, and \$17.25 for Dinner on travel days. Meal receipts are NOT required. Also, non-overnight trips, if less than 12 hrs in duration, are not reimbursed for meals.</p> <table border="1"> <thead> <tr> <th>DATE</th> <th>BREAKFAST</th> <th>AMOUNT</th> <th>LUNCH</th> <th>AMOUNT</th> <th>DINNER</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>12 DAY 1</td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$9.75</td> <td>NOT PROV BY</td> <td>\$10.50</td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$17.25</td> </tr> <tr> <td>13 DAY 2</td> <td>PROV BY CONF/HOTEL</td> <td>-0-</td> <td>PROV BY CONF/HOTEL</td> <td>-0-</td> <td>PROV BY CONF/HOTEL</td> <td>-0-</td> </tr> <tr> <td>14 DAY 3</td> <td>PROV BY CONF/HOTEL</td> <td>-0-</td> <td>PROV BY CONF/HOTEL</td> <td>-0-</td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$17.25</td> </tr> <tr> <td>DAY 4</td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> </tr> <tr> <td>DAY 5</td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> </tr> <tr> <td>TOTAL</td> <td></td> <td>\$9.75</td> <td></td> <td>\$10.50</td> <td></td> <td>\$34.50</td> </tr> </tbody> </table> |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                | DATE | BREAKFAST | AMOUNT | LUNCH | AMOUNT | DINNER | AMOUNT | 12 DAY 1 | NOT PROV BY CONF/HOTEL | \$9.75 | NOT PROV BY | \$10.50 | NOT PROV BY CONF/HOTEL | \$17.25 | 13 DAY 2 | PROV BY CONF/HOTEL | -0- | PROV BY CONF/HOTEL | -0- | PROV BY CONF/HOTEL | -0- | 14 DAY 3 | PROV BY CONF/HOTEL | -0- | PROV BY CONF/HOTEL | -0- | NOT PROV BY CONF/HOTEL | \$17.25 | DAY 4 | PROV BY CONF/HOTEL |  | PROV BY CONF/HOTEL |  | PROV BY CONF/HOTEL |  | DAY 5 | PROV BY CONF/HOTEL |  | PROV BY CONF/HOTEL |  | PROV BY CONF/HOTEL |  | TOTAL |  | \$9.75 |  | \$10.50 |  | \$34.50 |
| DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | BREAKFAST                                 | AMOUNT              | LUNCH                                    | AMOUNT                   | DINNER                                                                                                                                                                                                                                                                                                                   | AMOUNT                       |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| 12 DAY 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | NOT PROV BY CONF/HOTEL                    | \$9.75              | NOT PROV BY                              | \$10.50                  | NOT PROV BY CONF/HOTEL                                                                                                                                                                                                                                                                                                   | \$17.25                      |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| 13 DAY 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | PROV BY CONF/HOTEL                        | -0-                 | PROV BY CONF/HOTEL                       | -0-                      | PROV BY CONF/HOTEL                                                                                                                                                                                                                                                                                                       | -0-                          |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| 14 DAY 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | PROV BY CONF/HOTEL                        | -0-                 | PROV BY CONF/HOTEL                       | -0-                      | NOT PROV BY CONF/HOTEL                                                                                                                                                                                                                                                                                                   | \$17.25                      |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| DAY 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PROV BY CONF/HOTEL                        |                     | PROV BY CONF/HOTEL                       |                          | PROV BY CONF/HOTEL                                                                                                                                                                                                                                                                                                       |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| DAY 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PROV BY CONF/HOTEL                        |                     | PROV BY CONF/HOTEL                       |                          | PROV BY CONF/HOTEL                                                                                                                                                                                                                                                                                                       |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| TOTAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                           | \$9.75              |                                          | \$10.50                  |                                                                                                                                                                                                                                                                                                                          | \$34.50                      |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| <p><b>Employee Signature and Date above*</b> (Must print &amp; sign on a hard copy. Please * below.)</p> <p>You must submit within 45 days of travel to be reimbursed.</p> <p>* By signing the employee does solemnly swear that this expense statement is true and the described expenses were incurred in the discharge of official duties for the Evans Co. School System.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| TOTAL MILEAGE REIMBURSEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | TOTAL LODGING FEES  |                                          | TOTAL MEAL PER DIEM      |                                                                                                                                                                                                                                                                                                                          | TOTAL REGIS OR MISC FEES     |                                                       | TOTAL                     |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| ✓ \$271.83 \$278.05                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           | HOW MUCH PER NIGHT? |                                          | ✓ \$54.75                |                                                                                                                                                                                                                                                                                                                          | \$0.00                       |                                                       | \$326.58                  |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| This section below is for Accounting Purposes and Approval Purposes Only. This section below must be manually entered.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| ACCOUNT NO. ASSIGNED BY PRINCIPAL OR PROGRAM DIRECTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                     |                                          | 100-5,9990-2300-580-8010 |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| ACCOUNT NO. ASSIGNED BY PRINCIPAL OR PROGRAM DIRECTOR:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                     |                                          |                          |                                                                                                                                                                                                                                                                                                                          |                              |                                                       |                           |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
| Principal's Approving Signature & Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                     |                                          | Program Dir Sign & Date  |                                                                                                                                                                                                                                                                                                                          | Finance Director Sign & Date |                                                       | Superintendent's Approval |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           |                     |                                          | 2/15/23                  |                                                                                                                                                                                                                                                                                                                          |                              |                                                       | 2/15/23                   |                                |      |           |        |       |        |        |        |          |                        |        |             |         |                        |         |          |                    |     |                    |     |                    |     |          |                    |     |                    |     |                        |         |       |                    |  |                    |  |                    |  |       |                    |  |                    |  |                    |  |       |  |        |  |         |  |         |

GA DOE Federal Programs Conference

work 415 miles  
x .67 per mile

\$278.05

Lodging Paid by District Credit Card

\$332.80



Federal Programs Conference  
February 13-14, 2024  
Georgia International Convention Center  
Agenda

February 13, 2024

7:30 a.m. - 8:30 a.m. Registration  
8:30 a.m. - 9:45 a.m. Opening General Session (Salons 4-5)

Day One: Concurrent Sessions

| Location                                                                | 10:00 a.m. – 11:00 a.m.                                                                                                                       | 11:15 a.m. – 12:15 p.m.                                                                                                         | 1:30 p.m. – 2:30 p.m.                                                                                                        | 2:45 p.m. – 3:45 p.m.                                                                                  |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Salon 1<br>(Principals of Newly Federally Identified Schools Only)      | Data-Driven Decision Making<br>What Does it Mean? Part 1                                                                                      | Data-Driven Decision Making<br>What Does it Mean? Part 2                                                                        | Effectively Supporting and Monitoring Instruction Using the Collaborative Planning Process                                   | Best Practices for Alternative Education                                                               |
| Salon 2<br>(Principals of Previously Federally Identified Schools Only) | Effectively Supporting and Monitoring Instruction                                                                                             | Evaluating Impact Using the Continuous Improvement Cycle                                                                        | Data Who, Data What! Using Instructional Awareness Walk Data to Drive School Improvement                                     | How School Systems are Funded                                                                          |
| Salon 3<br>(District Leaders of Federally Identified Schools Only)      | The District's Role in Supporting Effective School Improvement                                                                                | Data-Driven Decision Making from the District Lens Part 1                                                                       | Data-Driven Decision Making from the District Lens Part 2                                                                    | Test Your Knowledge: How Well Do You Know Title I, Part A Requirements?                                |
| Salon 6                                                                 | Developing and Implementing Enrichment Activities that Complement and Reinforce the Regular School Day                                        | On/Off the Disproportionality List... What Difference Does It Make?                                                             |                                                                                                                              | Navigating the Comprehensive Needs Assessment Journey in Title III, Part A                             |
| Salon 7                                                                 | ESSER Investments Part 1: Recommendations for Sustainable Decision-Making Discussions for the Nearing End of the Grant Funds                  | ESSER Investments Part 2: Key Questions to Ask the ESSA and IDEA Program Offices to Potentially Sustain Critical ESSER Programs | Finishing Strong with ESSER: Innovative Uses for the ARP Act Formula Carryover Funds                                         | English Language Arts (ELA) Standards Update                                                           |
| Salon 8                                                                 | Connecting Science to the Science of Reading                                                                                                  | Foundational Literacy Skills                                                                                                    | Georgia's Tiered System of Supports: Avoiding Three Common Mistakes                                                          | Georgia's K-12 Mathematics Standards Resource-Rich Mathematics Instruction: Focusing on Tier 1 Success |
| Italian 1-2                                                             | More than Just a Read Aloud: Best Practices for Effective Integration in the K-5 Social Studies Classroom                                     | Talent Development: What does that mean, why is it important, and how might that look in my district/school?                    | Math & CS CONNECT Virtual Specialist Programs                                                                                |                                                                                                        |
| Kenyan 1-2                                                              | Building Bridges: Fostering Strong and Collaborative Relationships between Migrant Student Service Providers, Parents, and Classroom Teachers | It Takes a Village: Assisting Migrant Consortium Districts in Enhancing Services for Migrant Students                           | Title I, Part C, Easy as 1, 2, 3!                                                                                            | Supporting Rural Districts                                                                             |
| Swiss 1-2                                                               | Elevating English Proficiency: Linking CLIP, Budget, and Student Success                                                                      | Afterschool and Summer Programs – Coordinating Resources and Focusing on Instruction                                            | Leveraging Data to Unlock Schools' Potential: Serving English Learners                                                       | Breaking Barriers: Enhancing Accessibility in Assessment                                               |
| Italian 3-4                                                             | A Path to Success: Identifying Students with the Most Significant Cognitive Disabilities                                                      | Moving Beyond the MOE Calculation: A Deep Dive into Taking Exceptions                                                           | Next Level Grant Management                                                                                                  | Special Education Disputes: How to Resolve and Possibly Prevent                                        |
| Kenyan 3-4                                                              | Effective Methods for Managing IDEA MOE                                                                                                       | CFM 411                                                                                                                         | Improving Outcomes for Special Education in Students Through Retention: Georgia Teacher Provider Retention Program (GA-TPRP) | Least Restrictive Environment: Continuum of Services and Specially Designed Instruction                |
| Swiss 3-4                                                               | McKinney-Vento Program Eligibility                                                                                                            | Strategic Synergy: Crafting Effective Schoolwide Plans in Consolidated LEAs                                                     |                                                                                                                              |                                                                                                        |
| Spanish 1-4<br>(Tier IV Only)                                           | Transforming Instruction                                                                                                                      |                                                                                                                                 |                                                                                                                              |                                                                                                        |
| Triangulating Data to Determine a Problem of Practice                   |                                                                                                                                               |                                                                                                                                 |                                                                                                                              |                                                                                                        |



Federal Programs Conference  
February 13-14, 2024  
Georgia International Convention Center  
Agenda

February 14, 2024

7:30 a.m. - 8:30 a.m. Registration  
8:30 a.m. - 9:45 a.m. Opening General Session (Salons 4-5)

Day Two: Concurrent Sessions

| Location                                                                | 10:00am – 11:00am                                                                                     | 11:15am – 12:15pm                                                                                     | 1:30pm-2:30pm                                                                                            | 2:45pm-3:45pm                                                                                     |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| Salon 1<br>(Principals of Newly Federally Identified Schools Only)      | The Who, What, Why, and How of the Continuous Improvement Team (CIT)                                  | Effective Strategies for School Improvement Planning Part 1                                           | Effective Strategies for School Improvement Planning Part 2 Work Session                                 | Creating Effective and Actionable School Improvement Plans                                        |
| Salon 2<br>(Principals of Previously Federally Identified Schools Only) | Effective Professional Learning Practices                                                             | Effective SIP and STAP Construction, Monitoring, and Implementation Part 1                            | Effective SIP and STAP Construction, Monitoring, and Implementation Part 2 Work Session                  | Intensive, Collaborative, Job-embedded, Data-driven, and Classroom-focused: Making use of the PLC |
| Salon 3<br>(District Leaders of Federally Identified Schools Only)      | Effectively Supporting Instruction from the District Lens                                             | Effective District Plan of Support Construction, Implementation, and Monitoring Part 1                | Effective District Plan of Support Construction, Implementation, and Monitoring Part 2 Work Session      | Connecting Teachers to GaConnects Digital Media & Literacies                                      |
| Salon 6                                                                 | Consolidation of Funds: Unlocking Opportunities for Flexibility and Innovation                        | Conversations with the Consolidated Team                                                              | Can School Climate Predict Student Outcomes?                                                             | Foster Care Education and House Bill 855                                                          |
| Salon 7                                                                 | Title IV, Part A CLIP/SCLIP Preparation that Leads to Flawless Budgeting                              | Financial Accounting and Reporting for Georgia's Local Educational Agencies                           | Federal Procurement Planning: Best Practices for LEAs                                                    | Applications for Enhancing Learning                                                               |
| Salon 8                                                                 | I've Hired Them, Now What Do I Do? Induction and Mentoring                                            |                                                                                                       | Recruiting, Retaining, and Recognizing Effective Educators across Georgia                                | Georgia's Moment of Literacy Lift                                                                 |
| Italian 1-2                                                             | Georgia Early Warning System for On-time Graduation Prediction<br>A Tool to Identify At-risk Students | Empowering Federal Programs Leaders to Conduct Successful Consultations with Private School Officials |                                                                                                          |                                                                                                   |
| Kenyan 1-2                                                              | Conducting a Comprehensive Needs Assessment (CNA)                                                     | Focusing on Budgets to Offer Migrant Summer Services                                                  | Unlocking Opportunities: Navigating the Education of Migratory Children Program Eligibility Requirements |                                                                                                   |
| Swiss 1-2                                                               |                                                                                                       | Leveraging Data to Unlock Schools' Potential Serving English Learners                                 | Optimizing Collaboration to Identify, Serve, and Assess English Learners with Disabilities               | Elevating English Proficiency: Linking CLIP, Budget, and Student Success                          |
| Italian 3-4                                                             | Master Scheduling for Special Education - Elementary School                                           | Master Scheduling for Special Education - Middle School                                               | Master Scheduling for Special Education - High School                                                    | Whole Child and Federal Programs Collaborative Opportunities: Stronger Connections Grant          |
| Kenyan 3-4                                                              | Hot Topics in IDEA Equitable Services                                                                 |                                                                                                       |                                                                                                          | 3D Transition Planning: What is the Length, Breadth, and Depth                                    |
| Swiss 3-4                                                               | Everyone Wins! Building Parent Capacity                                                               | Everyone Wins! Building Staff Capacity                                                                | Title IV, Part A Effective Monitoring                                                                    |                                                                                                   |
| Spanish 1-4<br>(Tier IV Only)                                           | Getting to the Root of the Problem to Transform Instruction                                           |                                                                                                       | Maxing the Right Moves to Transform Instruction                                                          |                                                                                                   |



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2079 HOSPITALITY WAY  
ATLANTA, GEORGIA 30337  
T: 404 665 0309

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District  
CC*

MARTIN WATERS  
705 WEST MAIN STREET  
CLAXTON GA 30417  
VISITING

ROOM: 535  
ROOM TYPE: GENR  
NUMBER OF GUESTS: 1  
RATE: \$189.00 CLERK: MMH

ARRIVE: 12FEB24  
DEPART: 14FEB24  
FOLIO NUMBER

TIME: 04:57PM  
TIME: 08:13AM

| DATE    | DESCRIPTION                 | CHARGES | CREDITS |
|---------|-----------------------------|---------|---------|
| 12Feb24 | Daily Parking               | 20.00   |         |
| 12Feb24 | Room Charge                 | 189.00  |         |
| 13Feb24 | Restaurant Room Charge      | 25.00   |         |
| 13Feb24 | Room Charge                 | 189.00  |         |
| 14Feb24 | Visa                        |         | 423.00  |
|         | Card #:                     |         |         |
|         | Card Type: VISA Card Entry: |         |         |
|         | CHIP Approval Code: 071257  |         |         |
|         | App Label: VISA DEBIT AID:  |         |         |
|         | A0000000031010              |         |         |
|         | Balance:                    | 0.00    |         |

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T: 404 665 0309

MARTIN WATERS  
705 WEST MAIN STREET  
CLAXTON GA 30417  
VISITING

ROOM: RVS  
ROOM TYPE: HSE  
NUMBER OF GUESTS: 0  
RATE: \$0.00 CLERK: MLH

ARRIVE: 15FEB24  
DEPART: 15FEB24  
FOLIO NUMBER

TIME: 12:58PM  
TIME: 01:02PM

| DATE    | DESCRIPTION                 | CHARGES | CREDITS |
|---------|-----------------------------|---------|---------|
| 15Feb24 | Adj. Market Fresh Food      |         | 25.00   |
| 15Feb24 | Visa                        | 25.00   |         |
|         | Card #:                     |         |         |
|         | Card Type: VISA Card Entry: |         |         |
|         | MANUAL Approval Code:       |         |         |
|         | 125616                      |         |         |
|         | Balance:                    | 0.00    |         |

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District  
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### PARKING PASS

|                    |          |           |
|--------------------|----------|-----------|
| _____              | <u>K</u> | <u>K</u>  |
| GUEST FOLIO NUMBER | ARRIVAL  | DEPARTURE |



#### NOTICE:

**PARKING CHARGE: \$30.00**

YOU ARE PARKING AND LEAVING YOUR VEHICLE AT YOUR OWN RISK. PLEASE LOCK ALL DOORS AND WINDOWS AFTER REMOVING ANY PROPERTY OR VALUABLES FROM VEHICLE. THE HOTEL WILL NOT BE, IN ANY EVENT, BE LIABLE FOR LOSS OR DAMAGE TO YOUR VEHICLE OR PROPERTY.