

Complete the yellow cells

Travel Request and Authorization (TRA)

This form is required for all overnight travel or if local registration is over \$1000 and must be approved in advance. Advances will not be issued for local expenses. (Admin Guideline F-01).

TRA estimate expenses must be within 10% of Business Expense Stmt(BES).

Name:	LeEtta Felter Employee # attending LKM annual conference			Department council Destination: Wichita, KS				
Purpose of Travel:								
Departure Date:	Oct. 10	Return Date:						
Comments:		•		-				
Sharing hotel room?	Whom with:		E1 Budge	eted Accour	nt #			
	Amount to	Amount to Vendor	Amount to Employee			1		
Registration:	275.00							
Airfare:				Lodging Rate		# days	15%	Total
Lodging:	201.25			175.00	per day @	1	26.25	201.25
Car Rental:								
KCI Airport parking:		The analysis of the control of the c	allower here spikans who were connected throw we					
		als Overnight		Per Diem for Meals		# of day:	ī l	
	Search fo	or City - GSA.	gov website	Per Diem rate	64.00	2.0	128.00	
				M&IE Breakdo	s and disold while being the	t meals p	rovided	
	Enter F	Per Diem Rate	(cell F21)	Breakfast	14.00	_	-	
				Lunch	16.00	1	16.00	
	9977 TESTS CENTER AS 88 9 9 9 9 9 7 7 7	ıkdown will auto j		Dinner	29.00		-	
Per Diem for Meals:	Curticis (Curticis - 1500000000000000000000000000000000000	ts required	112.00	254	1411 0	0.670		
Private Vehicle Mileage:		<u> </u>	237.18	354	Miles @	0.670	per mile	
Cab/Shuttle fares/ Tolls/Baggage fees:								
Fuel - City Vehicle:								
Other:				Describe:				
Am	ount Charge o	on City P Card	476.25	<u> </u>		-		
a eta gerraria da esperante de la casa de la companya de la companya de la companya de la companya de la compa La companya de la co	The state of the s	nt to Vendors		• f b	ACH direct	deposit r	ather than a ched	. k
Travel Advance =			349.18	-	article of the		mplete and subm	
	TAL ESTIMAT	825.43	•	<u>AP ACH Fo</u>				
				ì	Francisco de la Companya del Companya del Companya de la Companya	ENGLINE (* 'E) .	n en han en en en en eksekwerkat som en al medificiel 25	e sala militari (n. 1987 -
					Aŗ	proved	Disapproved I	Date
Employee Signature		•	Division Manag	er Signature			'	
			Department Dir	ector Signature				
			City Manager Si	gnature (if required)				

Cathy Marks

From:

LeEtta Felter

Sent:

Wednesday, August 14, 2024 2:14 PM

To:

Cathy Marks

Subject:

Re: Annual LKM meeting

Thanks Cathy, looks good.

LeEtta Felter, EdD, Olathe Councilmember, Ward 3 (913) 971-6995 | OlatheKS.org Legislative | City of Olathe, Kansas

Setting the Standard for Excellence in Public Service



From: Cathy Marks < CMMarks@OLATHEKS.ORG>

Sent: Thursday, August 8, 2024 4:15 PM To: LeEtta Felter < LFelter@OLATHEKS.ORG>

Subject: RE: Annual LKM meeting

HI,

Please reply to this email to OK this Travel request authorization for the LKM annual meeting.

These will be on the consent agenda on the 3rd of September.

You may get a check in hand or a wire transfer. I hear the system is migrating to obligatory wire transfers for the upfront costs associated with travel.

Remember as you check in/out of the hotel, to remind them that we are tax exempt



Thanks so much,

Cathy

Cathy Marks, Assistant to the City Manager

(913) 971-8940 | OlatheKS.org

Administration | City of Olathe, Kansas

Setting the Standard for Excellence in Public Service







From: LeEtta Felter < LFelter@OLATHEKS.ORG> Sent: Thursday, August 8, 2024 11:01 AM To: Cathy Marks < CMMarks@OLATHEKS.ORG>

Subject: Re: Annual LKM meeting

Hi Cathy,