

Complete the yellow cells

# **Business Expense Statement (BES)**

Statement to be completed according to Admin. Reg. F-01

Form must be submitted by the 15th of the following month. Attach a memo to the Approving Authority with their approval if late or grand total exceeds 10% of Travel Authorized.

BES expenses must be within 10% of Travel Request Authorization(TRA).

Name:	Dean Vakas		Employee #	0		Department:	council		
Business Expense Purpose:	May DC visit t	May DC visit to delegates			Destination:	Washington, DC			
Departure Date:	5/14/24	Return Date:	May 16th						
Comments:	0	•				E1 B	udgeted Acct #	0.00	0000
Sharing hotel room?	Whom with:	0				•			
Total Expenses fron	n TRA	BES	Paid with City PCard	Paid to Vendor	Paid by Employee				
Registration:	-	Registration:							
Airfare:	600.00	Airfare:	460.20						
Lodging:	1,380.00	Lodging:	1,115.84		7 1	Include all c	ost & fees - Itemiz	ed receipt fo	or Lodging requi
Car Rental:	-	Car Rental:						,	
KCI Airport parking:	27.00	KCI Airport parking:		····	53.12				
			Mea	s Overnight T	ravel	Per Diem:	Rate	# of days	
			Search for	City - GSA.go	v website_		79.00	3.0	237.00
						Meals Provided	d will deduct fro	m per diem	( l
						Breakfast	19.00	1	19.00
Per Diem for Meals:	218.00					Lunch	20.00		1 - 1
			M&IE Meal break	lown will auto popi	ulate	Dinne	-		1 - 1
		Per Diem for Meals:	Water Committee of the	s required	218.00		-I.		
		STOP	Control of the Contro	19 192 10 202 10 10 10 10	then RETURN he	ere to allocate exp	ense & complete	the BES	
		Allocate Page 2 Totals to	Paid with City	Paid to	Paid by	Totals from		ENCOME TOWNSHIP	and a second sec
ing the property of the second		yellow cells	PCard	Vendor	Employee	page 2			
Private Vehicle Mileage	53.60	Mileage:			53.60	53.60	Comments:		
Cab/Shuttle fares/		Cab/Shuttle fares/							
Tolls/Baggage fees		Tolls/Baggage fees:			22.74	22.74			
Fuel - City Vehicle		Fuel - City Vehicle:					14 14 26		
		Business Meeting:							the second the factors of the factors
Miscellaneous Expense	: -	Miscellaneous Expense:					EXC.		
TOTAL TRA ESTIMATED EXPENSES	2,428.60		то	TAL EXPENSES	1,923.50	_			
		Total Expensed paid by employee 347.46			ACH direct deposit rather than a check				
		Tr	avel Advance issu	ed to Employee	271.60	_	can be provide	d. Complet	e and submit
		Amount or	wed Employee/	(owed to City)	75.86	_	AP ACH form		
certify that I have incurred all of the expen	ses listed above on b	ehalf of the City and that they are direc	tly related to the activ	e conduct of the City'	s business.		Disable Hillers had been been a been	CONTROL OF THE STATE OF THE STA	Page 1 of 2
Employee Signature	Date	Division Manager Signature	Date	Departme	nt Manager	Date	City Manager Sign	ature (if requi	ired) Dat

### **Business Expense Statement continued**

Department: council

Name: Dean Vakas

Business Expense Purpose: Washington, DC \$0.670 Mileage log may be used for detail Rate Mileage Calculation: Date Miles Amount Destination 5-14/5-16 roundtrip to airport 80 53.60 Total 53.60 Cab/Shuttle fares/Tolls: Date Description Amount 5/14/24 cab to hotel 22.74 22.74 Total Fuel - City Vehicle: Date Maximum allowed: Amount Meals Local: Date Breakfast Lunch Dinner Breakfast 15.00 Lunch 16.00 \_\_Dinner 28.00 Receipts are required Total Total Business Meeting & Guests: Firm & Persons Present Date Purpose Amount Total Miscellaneous Expense: Date Description Amount Total Page 2 of 2

#### **Cathy Marks**

From:

Dean Vakas

Sent:

Monday, May 20, 2024 12:15 PM

To:

Cathy Marks

Subject:

Re: DC Charges - Vakas

All OK with me Cathy. Thank you.

Dean

#### Get Outlook for iOS

From: Cathy Marks < CMMarks@OLATHEKS.ORG>

Sent: Monday, May 20, 2024 10:35:38 AM To: Dean Vakas < DVakas@OLATHEKS.ORG>

Subject: FW: DC Charges - Vakas

Here is the missing attachment. If the tab changes, you want to OK the "BES" tab information.

Thanks, 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: Cathy Marks

Sent: Monday, May 20, 2024 10:34 AM To: Dean Vakas < dvakas@olatheks.org>

Subject: RE: DC Charges - Vakas

Hi Dean,

It looks like your reimbursement is \$75.86; cab and parking.

Please reply to this email in lieu of a signature in agreement and I can get these ready to go to the consent agenda.

Thanks, 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







#### **Cathy Marks**

Dean

From:

American Airlines <no-reply@info.email.aa.com>

Sent:

Tuesday, April 23, 2024 11:20 AM

To:

Cathy Marks

Subject:

Your trip confirmation (MCI - DCA)

Follow Up Flag:

Follow up

Flag Status:

Flagged

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. .



Issued: April 23, 2024

# Your trip confirmation and receipt

We charged \$460.20 to your card ending in 0465 for your ticket purchase.

You can check in via the American app 24 hours before your flight and get your mobile boarding pass.

Confirmation code: WMGFPS

Tuesday, May 14, 2024

<u>~</u>

**MCI** 

Kansas City 10:54 AM **AA 4571** 

Operated by Republic Airways as American Eagle

0

**DCA** 

Washington Reagan

2:24 PM

Seat: 22C

Class: Economy (V)

Meals:

**Thursday, May 16, 2024** 

DCA

Washington Reagan **2:58 PM** 

**AA 5419** 

Operated by PSA Airlines as American Eagle

٥

**MCI** 

Kansas City **4:48 PM**  Seat: 18D

Class: Economy (G)

Meals:

Manage your trip

# Earn 50,000 bonus miles\*

Plus great travel benefits. Terms Apply.

Learn more



## Your purchase

Constantine Vakas - AAdvantage® #: 30E\*\*\*\*

New ticket (0012135305441) [\$400.00 + Taxes & carrier-imposed fees \$60.20] \$460.20

**Total cost** 

\$460.20

Your payment

Visa (ending 0465)

\$460.20

**Total paid** 

\$460.20

Bag information

#### Checked Bag (Airport)

#### Checked Bag (Online\*)

MCI - DCA MCI - DCA

1<sup>st</sup> bag \$40.00 1<sup>st</sup> bag \$35.00

2<sup>nd</sup> bag \$45.00 2<sup>nd</sup> bag \$45.00

MCI - DCA

Maximum dimensions: 62 inches or 158 centimeters calculated as (length + width + height)

Maximum weight: 50 pounds or 23 kilograms

For information regarding American Airlines checked baggage policies, please visit: Bag and optional fees

Bag fees apply at each Check-in location. Additional allowances and/or discounts may apply. Bag and optional fees

If your flight is operated by a partner airline, see the other airline's website for carry-on and checked bag policies.

\*Online payment available beginning 24 hours (and up to 4 hours) before departure.

#### Carry-on bags (American Airlines)

1st carry-on Includes purse, briefcase, laptop bag, or similar item that must fit under the seat in front of you.

Maximum dimensions not to exceed: 22" long x 14" wide x 9" tall (56 x 35 x 23 cm).

2<sup>nd</sup> carry-on







Book a car »



Buy trip insurance »



AAVacations »





#### The Parking Spot 12060 NW Prairie View Road 816.270.1000

#### YELLOW CAB CO. 202 544 1212

#### **CREDIT SALE**

MERCHANT	844027733581
TERMINAL ID.	451-335 203
TRIP NUMBER.	6571979
ORIVER ID:	00002428
MEDALLION	B472

PASSANGER 1 Rute 1 DISTANCE 5.25 05/16/2024 START 12:08 END, 12:26

FARE AMOUNT:	\$ 16.70
CXTRÀ AMQUAT:	\$ 2.25
TIP AMOUNT:	生 3.79

#### TOTAL: \$ 22.74

AID	A00000000001010
APPLICATION NAME	CAPITAL ONE
ATC:	0324
VISA	(1)1 2225
APPROVAL CODE.	620.465
CONTACTIESS CHIP AUTHORIZATION MODE	હે <b>ં</b> તમાન

\*\*\*COPY\*\*\*

DFHV COMPLAINTS
LINES TTY 711

PH 85% 184-4966 dffw dc gev

Covered self-park 3d

Reservation Total Covered self-park 3d **Discount Airport Use Recovery Fee Covered self-park Total	\$63.75 (\$15.94) \$5.31 \$63.12		
Amount Due	\$53.12		
Charged to Visa 2225	\$53.12		

\*\* U.S. Government Discount applied

Have a great day, Constantine! Reserve for our best rates! Visit www.theparkingspot.com today.

Business traveler?
Connect your Spot Club account to automatically send receipts to Concur, Certify or Expensify
www.theparkingspot.com/expense

Retain this copy for statement validation Customer Copy

# washington a

#10 Thomas Circle, N.W. Washington, D.C. 20005 (202) 842-1300 • (800) 424-1140 • Fax (202) 371-9602

Vakas, Mr Constantine Po Box 768 Olathe, 66051

Arrival Date:

05/14/24

No. In Party:

Departure Date: 05/16/24 Folio Number:

1

12N1W8 Room Number: 439

Transaction Description Charges Payment Date 05/14/24 ROOM Room Charge Room Tax 15.95% 1 426.55 05/14/24 05/15/24 RMTX 1 68.03 VISA 1 XXXX3118 NF 1115.84 Subtotals 494.58 1115.84 \_\_\_\_\_\_ REFUND DUE \$ 621.26





I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person or company or association fails to pay for any part of the full amount of these charges. I also agree that all charges contained in this account and any disputes or requests for copies must be made within five days of my departure.



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:	Dean Vakas		Employee # Department council						
Purpose of Travel:	May DC visit to delegates			Destination: Washington, DC					
Departure Date:		Return Date:		<u> </u>					
Comments:									
Sharing hotel room?	Whom with:	·	E1 Budgeted Account #						
	Amount to City PCard	Amount to Vendor	Amount to Employee						
Registration:									
Airfare:	600.00			Lodging Rate		# days	15%	Total	
Lodging:	1,380.00			600	per day @	2	90 -	1280° 02	
Car Rental:									
KCI Airport parking:	27.00								
•	Mea	ils Overnight	Travel 🔠 🔠	Per Diem for Meals	<u>Rate</u>	# of days			
	Search fo	or City - GSA.	gov website	Per Diem rate	79.00	3.0	237.00		
				M&IE Breakdo	wn - <b>Deduc</b>	t meals pr	ovided		
	Enter P	er Diem Rate	(cell F21)	Breakfast	19.00	. 1	19.00		
				Lunch	20.00		<del>-</del>		
•	M&IE Meal brea	kdown will auto <sub>l</sub>	oopulate a tana	Dinner	35.00				
Per Diem for Meals:	No receipt	s required :	218.00		<del>,</del>				
Private Vehicle Mileage:			53.60	80	Miles @	0.670 p	oer mile		
Cab/Shuttle fares/		,							
Tolls/Baggage fees:	150.00								
Fuel - City Vehicle:			-	,					
Other:				Describe:					
Am	ount Charge c	n City P Card	2,157.00	_					
	Amour	nt to Vendors	<del>-</del>	_	ACH direct	deposit ra	ther than a ch	eck	
Travel Advance = Amount to Employee			271.60	can be provided. Complete and submit -				nit a	
TOTAL ESTIMATED EXPENSES			2,428.60	•	AP ACH FO	<u>orm</u>		は / 1.5 (4) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
				•	At	opro <u>ved</u>	Disapproved	Date	
					. 4				
Employee Signature			Division Manag	er Signature			, <u> </u>		
			Department Dir	ector Signature					
			City Manage: C	anatura (if required)		. []	L		
			City ivianager Si	gnature (if required)					

SA 1000 249

#### **Cathy Marks**

From:

Dean Vakas

Sent:

Tuesday, April 23, 2024 11:34 PM

To:

Cathy Marks

Subject:

Re: Trip to DC

Thanks Cathy. This looks fine.

Dean

#### Get Outlook for iOS

From: Cathy Marks < CMMarks@OLATHEKS.ORG>

Sent: Tuesday, April 23, 2024 4:37:26 PM To: Dean Vakas < DVakas@OLATHEKS.ORG>

Subject: FW: Trip to DC

HI again,

This is better. I was copying and pasting and forgot a couple of spots :0

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: Cathy Marks

Sent: Tuesday, April 23, 2024 4:20 PM To: Dean Vakas < dvakas@olatheks.org>

Subject: Trip to DC

Hi,

Can you take a look and please reply to this email in lieu of signature, please? This doc will provide per diem and mileage before the trip to Washington, DC.

Thanks, Cathy

Cathy Marks, Assistant to the City Manager

(913) 971-8940 | OlatheKS.org

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