



City of Oakland
TRAVEL EXPENSE VOUCHER
ATH/OPD2016 - 175

Period	Batch #	Type	Item

1. Employee Name BURKE, Dave		2. Position Title Officer		3. Vendor Number 78691	
4. Department Police		5. Travel Destination Orlando FL		6. No. of Work Days 4	
7. Funding Source <input type="checkbox"/> Budgeted <input type="checkbox"/> Funds Available <input type="checkbox"/> Other:		8. Departure Date 25 Oct 14		9. Return Date 28 Oct 14	
10. Purpose of Travel Intl Assn of Chiefs of Police (IACP) Conference - Exhibit Hall					
11. If City Vehicle Used: Vehicle Number: _____ Model: _____ Odometer Reading: _____ Start: _____ End: _____ Total Miles: 0.0			12. If Private Vehicle Used: License No.: _____ Model: _____ Vehicle Approved for City: <input type="checkbox"/> YES <input type="checkbox"/> NO		

TRAVEL EXPENSE CLAIM						Fiscal Use		TOTALS	
13. Day of Week/Data	10/25	10/26	10/27	10/28					
TRANSPORTATION EXPENSE									
14. Airplane									
15. Checked Baggage									
16. City Car Expense									
17. Private Car Expense									
18. Local Transportation									
19. Parking									
20. Tolls									
REGISTRATION									
21. Registration									
22. Special Fees									
MEALS (Per Diem)									
23. Breakfast		11.00	11.00	11.00					
24. Lunch	16.00	16.00	16.00	16.00					
25. Dinner	29.00	29.00	29.00						
26. Lodging									
27. Telephone/Telegram									
28. Other									
COLUMN TOTALS									
29. Remarks Burke paid all other expenses						30. Total Advances & Prepayments		184.00	
31. Balance Due to (From) Claimant						46.00		(138.00)	
32. I certify under penalty of perjury that the above is a true statement of costs incurred by me in official business for the City of Oakland.									
33. Claim Approved by Fiscal Services Division Si Vazquez Signature: _____ Date: DEC 01 2014						34. Signature: _____ Date: 12/11/14			

Dept Specific	Fund/SF	Organization	Account	Project	Program	Task	Year	Amount	ACCOUNTING USE ONLY
Transport	1010	106410	55112	0	P501				
Meals			55113						
Lodging			55114					46.00	
Registration			55212						
Parking			55119						
TOTAL:								46.00	

Entered by _____ Date _____
Accounts Payable _____ Date _____

NOV 13 2014



City of Oakland
TRAVEL AUTHORIZATION
ATH/OPD2015 - 175

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name BURKE, Dave	2. Date 17-Sep-14	3. Vendor Number 14 SEP 24 PM 6:00 78691
4. Department Police	5. Position Title Police Officer	
6. Travel Destination Orlando FL	7. Number of Work Days 4	8. Departure Date 25-Oct-14
9. Return Date 28-Oct-14		

10. Purpose of Travel
2014 Intl Assn of Chiefs of Police (IACP) Conference - Exhibit Hall

11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Funds Available <input type="checkbox"/> Other:	12. Total Cost Estimate \$184.00	13. Total advance to employee \$138.00
--	--	--

14. Transportation <input type="checkbox"/> Use of City vehicle requested <input type="checkbox"/> Use of private vehicle requested: Estimated Round-trip Miles _____ Total: 0.00 <input type="checkbox"/> Use of rental vehicle requested: Estimated Rental Cost _____ <input type="checkbox"/> Airfare/Other (baggage, ground transportation) Estimated Airfare _____ Other: _____		
---	--	--

15. Registration or Fees <input type="checkbox"/> Fee paid by employee <input type="checkbox"/> City will be billed <input type="checkbox"/> Fee to be paid in advance \$ _____	Vendor check payable to: _____ Vendor No _____	FISCAL USE ONLY - Vendor Payment Check No _____ Date _____ Amount _____
--	---	--

16. Subsistence Breakfast <u>33.00</u> Lunch <u>64.00</u> Dinner <u>87.00</u> Total: 184.00	17. Estimated Lodging Per Day _____ No. Days _____ Total 0.00	FISCAL USE ONLY - Advance Payment Check No <u>842141</u> Date <u>10/2/14</u> Amount <u>0/138.00</u>
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18. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved	19. Department Remarks Officer Burke is paying for his airfare and hotel; he will only ask for meal reimbursement; he goes to the new technology exhibits only at this conference every year.
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Signature *[Signature]* Date **22 SEP 14**

20. City Manager Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved	21. City Manager Remarks
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Signature *[Signature]* Date **9/29/14**

Sub Item	Amount	Fund(S)	Organization	Account	Proj/Grant	Program	Year	Task	Dist Specific
1		1010	103430	55112		PS09			Transportation
2				55212					Registration
3	\$ 439.00			55113					Meals
4				55114					Lodging
5									
Total	\$ 138.00								

Entered By _____
Account Payable _____

Date _____
Date _____

ef **SEP 19 2014**

TRAVEL REQUEST MEMORANDUM 2015-175

OAKLAND POLICE DEPARTMENT

TO: Chief of Police S. Whent
(Chief / City Administrator)

Date: 28-Aug-14

FROM: Burke, Dave
Name (Last, First, M.I.)

Police Officer
(Position Title)

78691
12745
(Employee #)

Assignment Location: PRMU

Traveler's Contact # (510) 238 - 7423

Event Name 2014 IACP Conference

City, State Orlando, FL

Do not abbreviate

Start Date 25-Oct-14

End Date 28-Oct-14

Start Time 0800

End Time 1600

Total Training Hours 32

	Estimated Cost		Estimated Cost
55112 Transportation:		55113 Meals** (applicable if overnight lodging)	\$184.00
City Vehicle <input type="checkbox"/>			
Personal Vehicle* (Est. Miles:)	\$0.00	55212 Registration/Tuition Do not send payment to vendor	\$0.00
Airfare (RT)	\$0.00	55114 Lodging (only if over 75 miles)	0
Other: _____	\$0.00	Total Estimated Cost	\$184.00

* Mileage reimbursement consists of .56 cents per mile. Attach MapQuest

** Meal reimbursement consists of \$11.00 breakfast, \$16.00 lunch, \$29.00 dinner

All requests for advance funds must be submitted **45 days before** travel or training.

For further information review City AI-120 at <http://oaknetnews.oaklandnet.com>.

If you have any questions email OPDAP@oaklandnet.com

	25-Oct	26-Oct	27-Oct	28-Oct	
	10/25	10/26	10/27	10/28	
B	0	11	11	11	33
L	16	16	16	16	64
D	29	29	29	0	87
					184

I agree to submit to the Fiscal Services Division within five days of my return: 1) a completed Expense Voucher with all dated original receipts; 2) a completed After Action Report; and 3) such other information that may be required (i.e. Certificate of Completion, course itinerary, etc.).



Traveler's Signature X 

Date 28 Aug 14

Proposed Funding Source:

- ☐ Training Section **or** ☐ Other
- POST ☐ POST Plan I (Lodging, Meals, Travel, Tuition, Back-fill)
- ☐ POST Plan II (Lodging, Meals, Travel, Back-fill)
- ☐ POST Plan III (Lodging, Meals, Travel, Tuition)
- ☐ POST Plan IV (Lodging, Meals, Travel)
- ☐ POST Plan V (Lodging, Meals, Travel, Training Pres.)
- ☐ Letter of Agreement (LOA)

Fund No. 1010 **Org. No.** 106410 **Project No.** 0000 **Program** PS01

Approved by Traveler's Unit Commander 	Date 9/3/14	<input type="checkbox"/> Not approved; Return to Traveler
If approved, forward this form, seminar brochure and any other pertinent information to your Deputy Chief		
Approved by Deputy Chief of Traveler 	Date 7 Sep 14	<input type="checkbox"/> Not approved; Return to Traveler
If approved, forward this form, seminar brochure and any other pertinent information to Training		

Approved by Training Section Commander  8393	Date 5 Sep 14	<input type="checkbox"/> Not approved; Return to Traveler
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TF 3269 10/06
Oakland Police Department

Non-Department Training After Action Report

Name: Dave Burke		Serial number: 8506	Today's date: 13 Nov 14
Primary duties: Management of OPD Technology Programs			Unit: PRM
Course attended: IACP Conference		Total hours of instruction: 32	Dates of attendance: 25 - 28 Oct
Describe the primary course content: New Technology Review			
Was there scenario based training?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If yes, approximately how many hours? 40	If yes, was it successful or helpful? yes
Did the course cover supervisory or management issues?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, approximately how many hours? 40	If yes, was it successful or helpful? y
Did the course cover professionalism and ethics?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If yes, approximately how many hours? 40	If yes, was it successful or helpful? y
What was the most useful or helpful information/section/aspect of this course? All aspect of the course			
What was the least useful or helpful information/section/aspect of this course? none			
What was your reason for attending this course? Gain further insight into current technology used by OPD			
Is a course curriculum included with this report?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Is a course lesson plan and material included with this report?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
On a scale of 1 to 5, 1 being poor and 5 being excellent, how would you rate this course? <input checked="" type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1		Do you recommend this course for others? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Provide any additional comments you would like to make about the course below:			

Quaintance, Linda

From: Burke, Dave
Sent: Wednesday, September 17, 2014 12:45 PM
To: Quaintance, Linda
Subject: FW: IACP 2014 Annual Conference Confirmation

From: IACP 2014 [mailto:iacp@compusystems.com]
Sent: Wednesday, September 17, 2014 12:40 PM
To: Burke, Dave
Subject: IACP 2014 Annual Conference Confirmation



IACP 2014 CONFERENCE REGISTRATION CONFIRMATION



September 17, 2014
Registration Confirmation: 225244

DAVE BURKE
ACT SGT OF POLICE
OAKLAND POLICE DEPARTMENT
455 7TH STREET
OAKLAND, CA 94607

Dear DAVE BURKE:

This letter serves as a confirmation and receipt of your registration for IACP 2014 (The IACP Annual Conference & Expo). The Conference will be held October 25-28, 2014 in Orlando, Florida, USA. The exhibit hall is open October 26-28, 2014.

ALL BADGES WILL BE PICKED UP ONSITE.

For your convenience, bring this confirmation email with you to the E-Badge pick-up desk on-site at the Orange County Convention Center West Building A Lobby. Your bar code will be scanned and a badge will print instantly. Government issued ID is **REQUIRED** to obtain your badge. Save Paper – your registration confirmation can be scanned directly from your smartphone device.

Banquet Tickets will be available for pick-up on-site in the Registration area.

REGISTRATION DATES AND HOURS

All official conference events and delegate registration will take place at Orange County Convention Center West Building, 9880 Universal Boulevard, Orlando, Florida, USA. Pre-Registered delegates can check in beginning Friday, October 24, 2014 at 8:00am.

REGISTRATION INFORMATION

Badge Type: Expo Hall Advance/Onsite/On-Line
Registration ID Number: 225244
First Name: DAVE
Last Name: BURKE
Job Title: ACT SGT OF POLICE
Organization: OAKLAND POLICE DEPARTMENT
Address: 455 7TH STREET
City: OAKLAND
State: CA
Postal Code: 94607
E-Mail: dburke@oaklandnet.com
Telephone: (510) 2387423
Fax: (510) 2386289

REGISTRATION SUMMARY INFORMATION

QTY	DESCRIPTION	PRICE	TOTAL
1	EXHIBIT HALL (LAW ENFORCEMENT) [DAVE BURKE]	\$0.00	\$0.00
	Total Amount:		\$0.00
	Total Paid:		\$0.00
	Balance Due:		\$0.00

REGISTRATION POLICIES

Registration Cancellation Policy:

All cancellations must be in writing and mailed, faxed (Fax 703.836.4543) or emailed. No telephone cancellations will be accepted. A cancellation fee is in effect through October 21, 2014. No refunds issued on or after October 22, 2014. Visit the website for full details.

No Banquet or Foundation Gala Ticket Refunds after October 1, 2014.

EVENT POLICIES

For up to date conference information, including workshop details, exhibitor information, special events, and social media visit the IACP 2014 web page below

www.theIACPconference.org

HOUSING INFORMATION

To make hotel reservations [click here](#) or call 877-IACP-123 (from the US, Canada & Caribbean) or +1-212-532-1660 Monday – Friday from 9 a.m. To 7 p.m. (ET)..

IACP 2014 APP & SOCIAL MEDIA

CLICK HERE to access your personal dashboard where you can download the IACP App, view "my exhibitors", link to the conference Facebook event and update your profile.



Download the IACP 2014 App starting the week of September 15.

After you have downloaded the app, follow these instructions: To access your personal Schedule you created online: click on the 'My Briefcase' icon at the bottom of the Dashboard and enter your e-mail and Registration Confirmation Number (Badge Number) or eCode.

Questions? Concerns? Call 800-THE IACP and ask for Christian Faulkner or Mara Johnston.

Quaintance, Linda

From: Woo, Winnie
Sent: Friday, September 26, 2014 1:23 PM
To: Quaintance, Linda
Subject: FW: Send data from e557EID32501 09/26/2014 13:12
Attachments: DOC092614.pdf

See attached.



City of Oakland
TRAVEL AUTHORIZATION
ATH/SBB2015 - 175

FOR ACCOUNTING USE ONLY			
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14. Transportation <input type="checkbox"/> Use of City <input type="checkbox"/> Use of private <input type="checkbox"/> Use of rental <input type="checkbox"/> Airfare/Other (b)	on: 0.00																																																									
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<table><thead><tr><th>Item</th><th>Quantity</th><th>Unit Price</th><th>Amount</th><th>Account Number</th><th>Program</th><th>Category</th><th>Subcategory</th></tr></thead><tbody><tr><td>1</td><td></td><td></td><td></td><td>1010</td><td>103430</td><td>55112</td><td>P509</td></tr><tr><td>2</td><td></td><td></td><td></td><td></td><td></td><td>55212</td><td></td></tr><tr><td>3</td><td></td><td></td><td></td><td></td><td></td><td>55113</td><td></td></tr><tr><td>4</td><td></td><td></td><td></td><td></td><td></td><td>55114</td><td></td></tr><tr><td>5</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Total</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>			Item	Quantity	Unit Price	Amount	Account Number	Program	Category	Subcategory	1				1010	103430	55112	P509	2						55212		3						55113		4						55114		5								Total							
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Total																																																										

Entered By _____
Account Payable _____

Date _____
Date _____

SEP 19 2014

Woo, Winnie

From: Quaintance, Linda
Sent: Monday, September 29, 2014 10:43 AM
To: Woo, Winnie
Subject: FW: (Burke 2015-175) IACP Conference - 25 Oct 14

Dave Burke's explanation for attending referenced conference per Alex's request.

From: Burke, Dave
Sent: Monday, September 29, 2014 10:39 AM
To: Quaintance, Linda
Subject: Re: (Burke 2015-175) IACP Conference - 25 Oct 14

OK - include this email in TA Docs.

Someone from Public Safety ITD, that person does not represent the Oakland Police Department technology needs at the lowest levels. We compliment each other as a team to further the exploration of technology that can then be implemented in the police department and City of Oakland.

I have attended IACP for the pass couple of year without any issues along with members from ITD, and this does not count against backfill since no one else is required to fill in for me. I do not work a field assignment in patrol, I am assigned as the Project Resource Management Supervisor and responsible for seeking out and testing of new Technology for the Oakland Police Department.

IACP offers the ability to see all vendors showing the latest and greatest technology for law enforcement and affords us the ability to see and interact first hand. IACP has 2 tracks and I will be focused on Technology only and reporting to the Chief of Police.

Dave Burke

On Sep 29, 2014, at 12:17 PM, Quaintance, Linda <LQuaintance@oaklandnet.com> wrote:

Hello Gentlemen,

The City Administrator's office has requested further explanation for the reason(s) you are attending the referenced conference. Please reply to this email with that information and I will forward to the CAO to include in your travel request package. I have attached the note sent back to me by Alexandra Orologas.

Thank you for your help.

Linda

Linda Quaintance
Account Clerk II
Oakland Police Department
Fiscal Services
Accounts Payable Unit
Desk: (510) 238-6973
Fiscal Main Line: (510) 238-3416
Fax: (510) 238-7490
lquaintance@oaklandnet.com

Quaintance, Linda

From: Quaintance, Linda
Sent: Thursday, November 13, 2014 3:53 PM
To: Burke, Dave
Subject: RE: Post-Travel Documents due to Fiscal Services - 2ND NOTICE (Includes Travel with No Cost to City)
Attachments: TF-3269 Non-Dept Training After-Action Report-Oct06.doc; Travel Expense Voucher 6.19.14.xlsx

I'm sorry! This reminder was for the IACP Conference on 25 October. I obtained approval of your travel request to include meals so please sign the attached Travel Expense Voucher and return it to me with the conference itinerary and completed After Action Report then I can get you reimbursed for the remainder (\$184 - \$138 advance = \$46).

Thank you!

Linda

From: Burke, Dave
Sent: Thursday, November 13, 2014 3:28 PM
To: Quaintance, Linda
Subject: RE: Post-Travel Documents due to Fiscal Services - 2ND NOTICE (Includes Travel with No Cost to City)

From: Quaintance, Linda
Sent: Thursday, November 13, 2014 3:13 PM
To: Abdul' Ali, Myra; Bassett, James J.; Burke, Dave; Price, Ghilonna; Taylor, Irabe; Keely, Douglass M; Pope, Randy D; Fowler, Dometrius; Chan, Nolan J; Wong, Gina; Ventura, Estella; Uttapa, Warit; Salcido, Daniel
Subject: FW: Post-Travel Documents due to Fiscal Services - 2ND NOTICE (Includes Travel with No Cost to City)

SECOND REQUEST - Please see first request below.

IMPORTANT: Please note that even if you are not claiming reimbursement for expenses or mileage you must complete the After Action Report and provide the itinerary and certificate of completion.

Please let me know if you did not attend the training for which you were scheduled.

Thank you for your prompt attention to this matter.

Linda

From: Quaintance, Linda
Sent: Friday, October 10, 2014 11:07 AM
To: Wong, Gina; Ventura, Estella; Ventura, Estella; Uttapa, Warit; Salcido, Daniel; Pullen, David; Miller, Bradley; Martin, Timothy; Lankford, Kimberly; Keely, Douglass M; Fowler, Dometrius; Cardoza, Michael J.
Subject: Post-Travel Documents due to Fiscal Services

Hello,

According to our records you completed travel in September. Travel policy states that you must submit an original Expense Voucher (if you incurred expenses), as well as an After Action Report, course itinerary and certificate of completion (if provided by venue) with all original receipts within five (5) days of returning from your event. I have attached the Travel FAQ document and required forms for your convenience.

Please do not hesitate to contact me if you have any questions.

Thank you,

Linda

Linda Quaintance

Account Clerk II

Oakland Police Department

Fiscal Services

Accounts Payable Unit

Desk: (510) 238-6973

Fiscal Main Line: (510) 238-3416


Fax: (510) 238-7490

lquaintance@oaklandnet.com

CITY OF OAKLAND
One Frank H. Ogawa Plaza
Oakland, CA 94612

VENDOR NO. 78691

CHECK NUMBER 842141

INVOICE NUMBER	DESCRIPTION	INVEST AMOUNT
2019-175	RF10P043-15 OPD(LQ) POL OFFCR TRAV ADV PMTS 10/16-28	138.00
		138.00

CITY SOLUTIONS (818) 597-1222

THE FACE OF THIS CHECK, SERIAL, THE BACK CONTAINS A SIMULATED WATERMARK

CITY OF OAKLAND
ONE FRANK H. OGAWA PLAZA
OAKLAND, CA 94612

Pay to the order of DAVE G. BURKE
455 - 7TH STREET
OAKLAND, CA 94607

One Hundred Thirty Eight Dollars And Zero Cents

CHECK # 842141
AMOUNT \$ 138.00

DATE 03-OCT-17

Two signatures required
VOID AFTER 180 DAYS



SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

City of Oakland
One Frank H. Ogawa Plaza
Oakland, CA 94612

DAVE G. BURKE
455 - 7TH STREET
OAKLAND, CA 94607

Quaintance, Linda

From: Shavies, Shamika
Sent: Friday, December 05, 2014 4:01 PM
To: Quaintance, Linda
Subject: RE: Insufficient Funds - Sealy/Burke

Hi Linda,

Funds are now available for Burke.

Thank you,

Shamika Shavies
Oakland Police Department
Fiscal Services Division
Phone: 510-238-4767
Fax: 510-238-7490



"The Mission of the Oakland Police Department is to provide the Community of Oakland an environment where they can live, work, play, and thrive free from crime and fear of crime."

From: Shavies, Shamika
Sent: Friday, December 05, 2014 1:45 PM
To: Quaintance, Linda
Subject: RE: Insufficient Funds - Sealy/Burke

Hi Linda,

The BCR posted for Jennifer, let me check on Burke.

Thanks,

Shamika Shavies
Oakland Police Department
Fiscal Services Division
Phone: 510-238-4767
Fax: 510-238-7490



"The Mission of the Oakland Police Department is to provide the Community of Oakland an environment where they can live, work, play, and thrive free from crime and fear of crime."

From: Quaintance, Linda
Sent: Friday, December 05, 2014 1:42 PM

To: Shavies, Shamika
Subject: Insufficient Funds - Sealy/Burke

Hi, Shamika,

The following checks are being held due to insufficient funds:

10P077-15 JENNIFER SEALY	2015-001EXP	18-NOV-14	490.11	490.11	H10P077-15CT # OPD(LQ)
C	2112.102610.55112.G411920.PS05				
10P087-15 DAVE G. BURKE	2015-175EXP	04-DEC-14	46.00	46.00	H10P087-15 OPD(LQ) POL
O	1010.106410.55113.0000000.PS01				

Thank you for your help!

Linda

Linda Quaintance

Account Clerk II

Oakland Police Department

Fiscal Services

Accounts Payable Unit

Desk: (510) 238-6973

Fiscal Main Line: (510) 238-3416

Fax: (510) 238-7490

lquaintance@oaklandnet.com

Quaintance, Linda

From: Quaintance, Linda
Sent: Friday, December 05, 2014 4:49 PM
To: Dillahunty, Geary
Subject: Dave Burke TA 2015-175 - Insufficient Funds

Hi Geary,

Shamika moved the funds so the referenced payment should be okay to go.

Thank you,

Linda

Linda Quaintance

Account Clerk II

Oakland Police Department

Fiscal Services

Accounts Payable Unit

Desk: (510) 238-6973

Fiscal Main Line: (510) 238-3416

Fax: (510) 238-7490

lquaintance@oaklandnet.com

Quaintance, Linda

From: Quaintance, Linda
Sent: Thursday, December 18, 2014 3:54 PM
To: Dillahunty, Geary
Subject: 2015-175 - Insufficient Funds

Hi, Geary,

Per our accountant, please use the highlighted coding block for the following payment on hold due to insufficient funds:

10P087-15	DAVE G. BURKE	2015-175EXP	4-Dec-14	46	46	H10P087-15 OPD(LQ) POL O
1.1010.106410.55112.0000000.PS01		1.1010.106410.55113.0000000.PS01				

Thank you,

Linda

Linda Quaintance
Account Clerk II
Oakland Police Department
Fiscal Services
Accounts Payable Unit
Desk: (510) 238-6973
Fiscal Main Line: (510) 238-3416
Fax: (510) 238-7490
lquaintance@oaklandnet.com

CITY OF OAKLAND
One Frank H. Ogawa Plaza
Oakland, CA 94612

VENDOR NO. 78691

CHECK NUMBER 849245

INVOICE NUMBER	DESCRIPTION	NET AMOUNT
2015-175EXP	H10P087-15 OPD(LQ) POL OFCR TRAV EXP REIMB PMTS	46.00
		46.00

THE FRONT OF THIS CHECK IS BLUE, THE BACK CONTAINS A CUMULATED WATERMARK

CITY OF OAKLAND
ONE FRANK H. OGAWA PLAZA
OAKLAND, CA 94612

First City Bank, N.A.
Sacramento, California

CHECK # 849245
DATE 12-DEC-14
AMOUNT \$ *****46.00

Forty-Six Dollars And Zero Cents

PAY TO THE ORDER OF DAVE G. BURKE
455 - 7TH STREET
OAKLAND, CA 94607

TWO SIGNATURES REQUIRED
VOID AFTER 180 DAYS

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

City of Oakland
One Frank H. Ogawa Plaza
Oakland, CA 94612

DAVE G. BURKE
455 - 7TH STREET
OAKLAND, CA 94607

Grand Total

Distribution Total

日期	姓名	性别	年龄	籍贯	职业	住址	备注
1949.10.1	王德胜	男	45	山东	工人	天津	
1949.10.2	李德胜	男	45	山东	工人	天津	
1949.10.3	张德胜	男	45	山东	工人	天津	
1949.10.4	赵德胜	男	45	山东	工人	天津	
1949.10.5	刘德胜	男	45	山东	工人	天津	
1949.10.6	孙德胜	男	45	山东	工人	天津	
1949.10.7	周德胜	男	45	山东	工人	天津	
1949.10.8	吴德胜	男	45	山东	工人	天津	
1949.10.9	郑德胜	男	45	山东	工人	天津	
1949.10.10	冯德胜	男	45	山东	工人	天津	
1949.10.11	陈德胜	男	45	山东	工人	天津	
1949.10.12	林德胜	男	45	山东	工人	天津	
1949.10.13	黄德胜	男	45	山东	工人	天津	
1949.10.14	周德胜	男	45	山东	工人	天津	
1949.10.15	吴德胜	男	45	山东	工人	天津	
1949.10.16	郑德胜	男	45	山东	工人	天津	
1949.10.17	冯德胜	男	45	山东	工人	天津	
1949.10.18	陈德胜	男	45	山东	工人	天津	
1949.10.19	林德胜	男	45	山东	工人	天津	
1949.10.20	黄德胜	男	45	山东	工人	天津	
1949.10.21	周德胜	男	45	山东	工人	天津	
1949.10.22	吴德胜	男	45	山东	工人	天津	
1949.10.23	郑德胜	男	45	山东	工人	天津	
1949.10.24	冯德胜	男	45	山东	工人	天津	
1949.10.25	陈德胜	男	45	山东	工人	天津	
1949.10.26	林德胜	男	45	山东	工人	天津	
1949.10.27	黄德胜	男	45	山东	工人	天津	
1949.10.28	周德胜	男	45	山东	工人	天津	
1949.10.29	吴德胜	男	45	山东	工人	天津	
1949.10.30	郑德胜	男	45	山东	工人	天津	
1949.10.31	冯德胜	男	45	山东	工人	天津	

State:

Accounting

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Account Description

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