



City of Oakland  
TRAVEL EXPENSE VOUCHER

*Teresa Reed*

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed	2. Position Title Fire Chief	3. Vendor Number 108550
4. Department Oakland Fire Department	5. Travel Destination Sacramento, CA	6. No. of Work Days Two
7. Funding Source: <input type="checkbox"/> Budgeted <input checked="" type="checkbox"/> Funds Available	8. Departure Date January 9, 2013	9. Return Date January 10, 2013
10. Purpose of Travel Attend meeting of the California Metro Fire Chiefs		
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____		12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>

TRAVEL EXPENSE CLAIM

13. Day of Week/Date	Thurs 1/9	Fri 1/10							TOTALS
----------------------	-----------	----------	--	--	--	--	--	--	--------

TRANSPORTATION EXPENSE

14. Airplane									
15. City Car Expense									
16. Private Car Expense									
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION

20. Registration	\$131.00								131
21. Special Fees									

SUBSISTENCE EXPENSE (Per Diem)

22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)

24. Breakfast									
25. Lunch									
26. Dinner									
27. Lodging	\$131.94								\$131.94
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS									\$262.94

31. Remarks	32. Total Advances & Prepayments \$260.00
	33. Balance Due to (From) Claimant < \$2.94 >

35. Claim Approved by Department Head  <i>[Signature]</i> Date 1/18/13	34. 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  <i>Teresa Reed</i> 1-15-13 Signature Date
--	--

Fund/S	Organization	Account	Proj/Grant	Yr	Loc	Task	Dept-Specific	Amount	ACCOUNTING USE ONLY
1010	20110	55114	0	13	PS15			< \$2.94 >	Check No Date

Sheraton Grand Sacramento Hotel  
1230 J Street  
Sacramento, CA 95814  
916-447-1700  
<http://www.starwood.com/>



Deloach Reed, Teresa	Page Number	1	Invoice Nbr	1000067415
Oakland Fire Dep 150	Guest Number	1389988	Arrive Date	01-09-2013
Suite 3354	Folio ID	A	Depart Date	01-10-2013
Oakland, CA 94612	No. Of Guest	1		
	Room Number	1420		
	Time	01-10-2013 13:29		

Invoice

Date	Reference	Description	Charges	Credits
01-09-2013	RT1420	Group SMERF	\$99.00	
01-09-2013	RT1420	Room Charge, Tax/Assessments	\$14.94	
01-09-2013	RT1420	Self Parking	\$18.00	
01-10-2013	VM	Visa/Mastercard		\$-131.94
		** Total	\$131.94	\$-131.94 /
		** Balance	\$0.00	

\*\*\*For Authorization Purpose Only\*\*\*

Teresa Deloach Reed

Date

Credit Card

Code

Authorized

01-09-2013

00910C

148.50

EXPENSE SUMMARY REPORT

Currency: USD

Date	Room Charge	Taxes	Telephone	Other	Total	Payment
01-09-2013	\$99.00	\$14.94	\$0.00	\$18.00	\$131.94	\$0.00
01-10-2013	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-131.94
Total	\$99.00	\$14.94	\$0.00	\$18.00	\$131.94	\$-131.94

As a Starwood Preferred Guest, you could have earned 198 Starpoints for this visit. Please provide your member number or enroll today.

Thank you for choosing Starwood Hotels We look forward to welcoming you back soon!

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City of Oakland  
TRAVEL AUTHORIZATION  
(See Reverse Side for Instructions)  
CITY OF OAKLAND  
OFFICE OF CITY MANAGER

Period	Batch#	Type	Item

1. Employee Name Teresa Deloach Reed		2. Date 12/7/12		3. Vendor Number 1085150	
3. Department FIRE		5. Position Title Fire Chief			
6. Travel Destination Sacramento, CA		7. Number of Work Days Two		8. Departure Date January 9, 2013	
				9. Return Date January 10, 2012	
10. Purpose of Travel: Attend meeting of the California Metro Fire Chiefs Association					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$ 260.00		13. Name of Employee in Charge If Requestor is Department Head Rebecca Kozak, ext. 4080	
14. Transportation <input type="checkbox"/> Use of City vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Estimated out-of-pocket costs \$ _____ <input type="checkbox"/> Use of private vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested - estimated cost: _____ Upon invoice from travel agent or common carrier, prepare check in amount of _____ Payable to: _____					
15. Registration or Special Fees Fees for above event \$ 131.00 <input type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed <input checked="" type="checkbox"/> Fee to be paid in advance \$ 131.00 Make check payable to Cal Metro Chiefs Vendor # 25400 And Mail check to: AUTHORIZED TO HOLD Fees include: _____ Dates: _____ Breakfast 1/10/13 Lunch 1/10/13 Dinner 1/9/13 Lodging _____					
16. Subsistence <input checked="" type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ Hotel \$129.00 Meals _____ <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days @ _____ /day = \$ _____ Travel per diem rate _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved <i>Teresa Reed</i> 12/10/12 Signature _____ Date _____		18. Department Remarks		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (if overnight accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved <i>Alexandra Prologos</i> Signature _____ Date 12/11/12		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loop	Task	Dept Specific
	131.00	1010	20110	55212	0000000	13	PS15		
	129.00	1010	20110	55114	0000000	13	PS15		

Entered By \_\_\_\_\_ Date \_\_\_\_\_

Accounts Payable \_\_\_\_\_ Date \_\_\_\_\_

# California Metropolitan Fire Chiefs Association Meeting

Wednesday, January 9, 2013 ~ 6:30 PM  
and

Thursday, January 10, 2013 ~ 8 AM – 2 PM

Wednesday, January 9<sup>th</sup>     Spataro, 1415 L Street, Sac., 95814  
6:30 PM  
Business Casual

Thursday, January 10<sup>th</sup>     CA Metro Fire Chiefs Meeting  
Sheraton Grand Hotel  
1230 J Street, Sac., 95814  
Kamilos room – third level  
8 AM – 2 PM  
Continental Breakfast & Lunch will be served

**Lodging**     Sheraton Grand Hotel, Sacramento  
1230 J Street, Sac., 95814

Government Rate: \$99 plus taxes. Rate includes:

- Complimentary wireless internet access in all rooms and meeting spaces.
- When making your reservation, you must identify yourself as being with CA Metro Fire Chiefs to receive the rate quoted. Reservations can be made online at <http://www.starwoodhotels.com/sheraton/property/overview/index.html?propertyID=1247> or by calling the hotel directly at (916) 447-1700. To receive the government rate, reservations will need to be made by December 7, 2012.
- Metro Fire will provide transportation to/from airport.

**Cost** \$131 Includes cost of dinner on Wednesday, January 9<sup>th</sup> and breakfast, lunch and beverages on Thursday, January 10<sup>th</sup>.

Dinner choices are:

- Grilled New York Strip\*
- Butternut Squash Ravioli
- Grilled Market Fish

Checks should be made payable to Metro Fire and mailed to Jill Guzman at 10545 Armstrong Ave., Suite 200, Mather, CA 95655.

**RSVP** Please RSVP to Jill Guzman by email at [guzman.jill@metrofire.ca.gov](mailto:guzman.jill@metrofire.ca.gov) by December 7, 2012.

In your RSVP, please include the following:

- Your name, agency and contact number while traveling.
- Will you be attending Dinner on January 9, 2013? If yes, please select your dinner entrée.
- Means of transportation (driving or flying). If flying and need transportation to/from the Sacramento International Airport, include flight itinerary.

**Agenda** Please email items that you would like added to the agenda to Jill Guzman at [guzman.jill@metrofire.ca.gov](mailto:guzman.jill@metrofire.ca.gov) by December 14, 2012.



City of Oakland  
TRAVEL EXPENSE VOUCHER

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed	2. Position Title Fire Chief	3. Vendor Number 3108550 MAY 22 AM 9:28
4. Department Oakland Fire Department	5. Travel Destination Palm Springs, CA	6. No. of Work Days Two
7. Funding Source: <input type="checkbox"/> Budgeted X Funds Available <input type="checkbox"/> Other	8. Departure Date May 19, 2013	9. Return Date May 20, 2013
10. Purpose of Travel Attend "Fire Chiefs Summit" meeting at the CFED West Conference & Expo		
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____		12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>

TRAVEL EXPENSE CLAIM									
13. Day of Week/Date	Sun 5/19	Mon 5/20							TOTALS

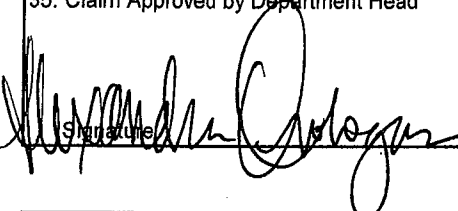
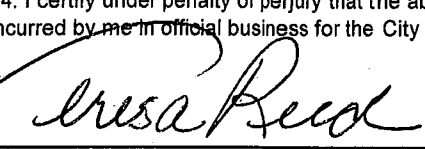
TRANSPORTATION EXPENSE									
14. Airplane	181.7								181.7
15. City Car Expense									
16. Private Car Expense	237.68*								\$237.68
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION									
20. Registration	\$150.00								150
21. Special Fees									

SUBSISTENCE EXPENSE (Per Diem)									
22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)									
24. Breakfast									
25. Lunch									
26. Dinner	29	29							58
27. Lodging	\$156.50								156.50
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS	\$754.88	\$29.00							\$783.88

31. Remarks - #16- \$15 was deducted for upgrade	32. Total Advances & Prepayments	\$0.00
	33. Balance Due to Claimant	\$783.88

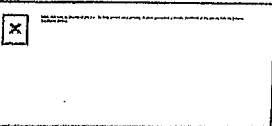
35. Claim Approved by Department Head  Signature _____ Date 6/4/13	34. I certify under penalty of perjury that the above is a true statement of costs incurred by me in official business for the City of Oakland  Signature _____ Date 5/21/13 Rec'd 7/8/13
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Fund/SF	Organization	Account	Pro/Grant	Mr.	Loc	Task	Dept Specific	Amount	ACCOUNTING USE ONLY
1010	20110	55114	0	13	PS15			\$214.50	Check No _____ Date _____
1010	20110	55112	0	13	PS15			\$181.70	
1010	20110	55111	0	13	PS15			\$237.68	
1010	20110	55212	0	13	PS15			\$150.00	

Kozak, Rebecca

From: Southwest Airlines <SouthwestAirlines@luv.southwest.com>  
Sent: Monday, April 29, 2013 4:49 PM  
To: Deloach Reed, Teresa  
Subject: Southwest Airlines Confirmation-REED/TERESA DELOACH-Confirmation: AT76JL

You're all set for your trip!



[My Account](#) | [View My Itinerary Online](#)

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Check Flight Status

Change Flight

Special Offers

Hotel Deals

Car Deals

Ready for takeoff!

Thanks for choosing Southwest for your trip! You'll find everything you need to know about your reservation below. Happy travels!

AIR Itinerary

AIR Confirmation: AT76JL Confirmation Date: 04/29/2013

Passenger(s)	Rapid Rewards #	Ticket #	Expiration	Est. Points Earned
REED/TERESA DEL OACH	[REDACTED]	5262125764322	Feb 6, 2014	4081

Rapid Rewards points earned are only estimates. Visit your (MySouthwest, Southwest.com or Rapid Rewards) account for the most accurate totals - including A-List & A-List Preferred bonus points.

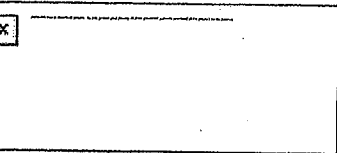
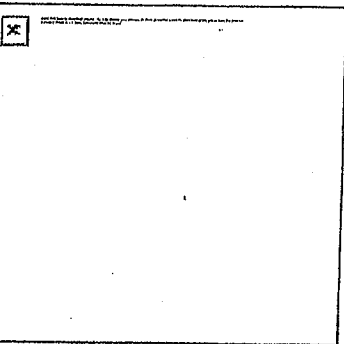
Date	Flight	Departure/Arrival
Sun May 19	2005	Depart OAKLAND CA (OAK) on Southwest Airlines at 2:15 PM Arrive in ONTARIO CA (ONT) at 3:25 PM Travel Time 1 hrs 10 mins <a href="#">Anytime</a>
Mon May 20	319	Depart ONTARIO CA (ONT) on Southwest Airlines at 9:10 PM Arrive in OAKLAND CA (OAK) at 10:25 PM Travel Time 1 hrs 15 mins <a href="#">Anytime</a>

What you need to know to travel:

- Don't forget to check in for your flight(s) 24 hours before your trip on southwest.com or your mobile device. This will secure your boarding position on your flights.
- Southwest Airlines does not have assigned seats, so you can choose your seat when you board the plane. You will be assigned a boarding position based on your checkin time. The earlier you check in, within 24 hours of your flight, the earlier you get to board.

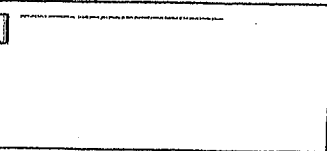
Air Cost: 427.30

Carry-on Items: 1 Bag + small personal item are free see full details. Checked Items: First and second bags are free, size and weight limits apply.



Find a Hotel  
See ratings, photos and rates for over 40,000 hotels.

Book a Hotel



Rent Some Wheels  
Explore your destination on the perfect set of wheels.

Rent a Car

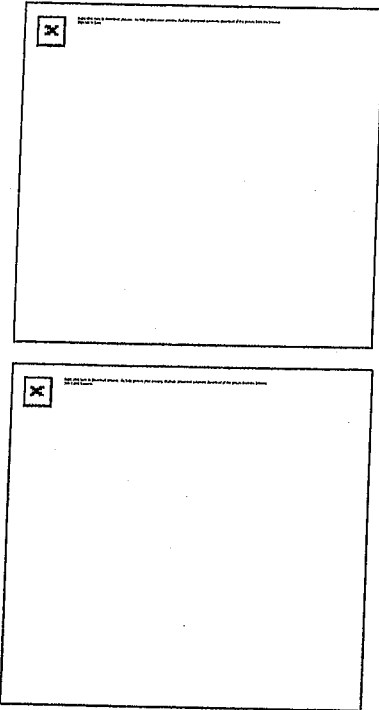
1 *see payment of 181.70 on next page*

Fare Rule(s): 5262125764322: NONTRANSFERABLE.  
Valid only on Southwest Airlines. All travel involving funds from this Confirmation Number must be completed by the expiration date. Unused travel funds may only be applied toward the purchase of future travel for the individual named on the ticket. Any changes to this itinerary may result in a fare increase.

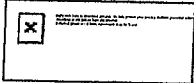
OAK WN ONT189.77YL WN OAK189.77YL 379.54 END ZPOAKONT XFOAK4.5ONT2  
AY5.00\$OAK2.50 ONT2.50

Important Check-In Reminder

Be sure to arrive at the departure gate with your boarding pass at least 10 minutes before your scheduled departure time. Otherwise, your reserved space may be cancelled and you won't be eligible for denied booking compensation.



Go to Boarding School



Get EarlyBird  
Check-In™ Details

Cost and Payment Summary

AIR - AT76JL

Base Fare	\$ 379.54
Excise Taxes	\$ 28.46
Segment Fee	\$ 7.80
Passenger Facility Charge	\$ 6.50
September 11th Security Fee	\$ 5.00
<b>Total Air Cost</b>	<b>\$ 427.30</b>

Payment Information

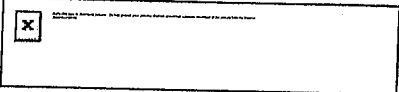
Payment Type: Visa  
Date: Apr 29, 2013  
Payment Amount: \$245.60  
  
Payment Type: Ticket Exchange  
Date: Apr 29, 2013  
Payment Amount: \$181.70



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<sup>1</sup> All travel involving funds from this Confirmation Number must be completed by the expiration date.  
<sup>2</sup> Security Fee is the government-imposed September 11th Security Fee.

See [Southwest Airlines Co. Notice of Incorporation](#)  
See [Southwest Airlines Limit of Liability](#)

Southwest Airlines  
P.O. Box 36647-1CR  
Dallas, TX 75235

[Contact Us](#)

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**RECEIPT**

Rental Agreement Number: 644694971  
Vehicle Number: 58527431

**YOUR INFORMATION**

REED, TERESA

PAYMENT METHOD: [REDACTED]

**YOUR RENTAL**

Picked up: ONT  
Date/Time: MAY 19, 2013@03:53PM  
Returned: ONT  
Date/Time: MAY 20, 2013@08:26PM  
Veh Group: Full-Size  
Veh Charged: Full-Size  
Vehicle: TOYOTA CAMRY 4 DOOR  
Odometer Out: 18882  
Odometer In: 19023  
Fuel Reading: Full

**YOUR VEHICLE CHARGES**

2 DY@ 84.99 169.98  
INCL. UPGRADE AT \$ 15.00/DAY  
YOUR TIME AND MILEAGE: 169.98

**YOUR TAXABLE FEES**

\*\*10.80% FEE 21.60  
RSN 11.98

**YOUR SUBTOTAL**

TAXABLE SUBTOT 203.56  
TAX 8.000% 16.28

**YOUR NON TAXABLE ITEMS**

2.85% TAF 4.84  
LOSS DAMAGE WAIVER: 18.00  
CUST FAC CHARGE 10.00/RN 10.00

**TOTAL CHARGES** 252.68  
**NET CHARGES** 252.68  
**YOUR TOTAL DUE:** 0.00

PAID ON VISA XX0071 - \$15

\*\*CONCESSION RECOVERY FEE

2.85% TOURISM ASSMNT FEE

RSN 1@ 5.99/DY FA= 11.98\*T

RENTAL AGREEMENT NUMBER 644694771

Customer Name : REED, TERESA

Driver's Lic Number : [REDACTED]

Methods of Payment : [REDACTED]

RESERVATION NUMBER 33652625-US-3 SPACE NO. 009

Avis Car Number : S B 5 2 7 4 3 1

Plate Number : CA 6VBZ770

Veh Description : WHI TOYOTA CAMRY 4 DOOR

Odometer Out : 19882 miles

Fuel Gauge Reading: Full

Pickup Date/Time : MAY 19, 2013 00:53 PM

Pickup Location : 3450 EAST AIRPORT DRIVE #500

ONTARIO, CA, 91761, US

Return Date/Time : MAY 20, 2013 09:00 PM

Return Location : 3450 EAST AIRPORT DRIVE #500

ONTARIO, CA, 91761, US

Additional Fees May Apply If Changes Are Made To Your Return Date, Time And/Or Location.

YOUR ESTIMATED VEHICLE CHARGES

Min: 1 DAY Max: 98 HRS

RATE CHART

HRLY : 63.74

DLY : 84.99

WKLY : 424.95

MTHLY :

MILES: UNLIMITED

Agreed Upon Upgrade at 15.00/Day X AGREED

Your Estimated Time & Mileage 169.98

10.00% Concession Recovery Fee + 21.60

Estimated Optional Services Tot Taxable + 11.98

Estimated Subtotal Charges : 203.56

Sales Tax 8.000% : 16.28

2.85% TAF + 4.84

CUSTOMER FACILITY CHG 10.00/R + 10.00

Estimated Non Taxable Products/Services + 18.00

YOUR ESTIMATED TOTAL CHARGES: X AGREED : 252.68

2.85% TOURISM ASSESSMT FEE

YOUR OPTIONAL PRODUCTS/SERVICES

Loss Damage Waiver 9.00/Day Accepted

Personal Accident Insurance 4.00/Day Declined

Personal Effects Protection 2.95/Day Declined

Additional Liability Insurance 14.80/Day Declined

1 RSN 5.99/DY 41.93/WK

Estimated Optional Services Total Taxable 11.98

Estimated Optional Services Total Non Tax 18.00

By my approval I accept or decline optional services/products

as shown above. X AGREED

Please return the vehicle with the same fuel level as you

received it. If you do not, additional fuel fees may apply: 000-074

miles equals a 13.99 flat rate fee. 075 miles and above equals

.3716 per mile or 9.290 per Gal. X AGREED

Prior written approval and the purchase of Mexican insurance are

required otherwise you are prohibited from traveling into Mexico.

*Scrub  
RH/F, LH/F  
RH/R Banner  
1605  
GENE*

NOTICES-AVIS-NOTICES-AVIS-NOTICES-AVIS-NOTICES-AVIS-NOTICES-AVIS

Loss Damage Waiver is optional. An added daily cost of 9.00 covers your responsibility for damage to our car. Check with your insurer as this may be duplicative of your own car insurance. I agree the charges listed above are estimates and that I have received all notices and terms here and in the rental jacket. No additional drivers allowed without prior written consent. Tickets, fines and admin fees to be charged to this rental. XX

If you have questions regarding this rental, call us at 909-390-1441. This vehicle was rented to you by MICHELLE.

*Press O*

**CFEDWest 2013**

Monday, May 20, 2013 - Thursday, May 23, 2013

**Palm Springs Convention Center, Palm Springs, Ca**

277 North Avenida Caballeros

Palm Springs, California 92262

United States

Event Details

Phone: (909) 382-5531 (Leslie)

Email: [leslie@cfedwest.com](mailto:leslie@cfedwest.com) [Email Us](#)[Personal Info Attendee](#) [Agenda](#) [Checkout](#) **Confirmation****Personal Info Attendee****Registration ID:** 55422294**Registrant:** Teresa Deloach Reed  
Fire Chief  
City of Oakland - Fire Department  
150 Frank Ogawa Plaza  
Suite 3354  
Oakland, CA 94612**Registration Date:** 4/29/2013 2:22 PM**Type:** Attendee**Status:** Confirmed**Phone 1:** 510-238-4080**Cell Phone (preferred):** 510-755-5823**County:** Alameda**Email:** [tdeloachreed@oaklandnet.com](mailto:tdeloachreed@oaklandnet.com)**Please indicate your primary affiliation::** Fire Chief**Agenda****CA Fire Chief's Association- Fire Chief's Summit**

\$150.00

**Fees**



Thank you for your purchase!

Ontario/LA, CA

Car

Confirmation #33652825US3

Avis  
Pickup: Ontario/LA, CA - ONT  
Dropoff: Ontario/LA, CA - ONT  
Sunday, May 19, 2013 - Monday, May 20, 2013

Car Total: \$181.50

Amount Paid  
\$0.00

Amount Remaining  
\$181.50

Trip Total  
\$181.50

**MAY 19**  
**SUN 05/19/13 - Ontario/LA**

CAR

Avis - Mid-size - Ontario/LA  
05/19/2013 - 05/20/2013  
Driver: Teresa Reed  
Rapid Rewards Number: [REDACTED]

Confirmation # 33652825US3

**MAY 19 Pickup**  
Ontario/LA, CA - ONT  
Sunday, May 19, 2013  
3:30 PM

**Avis**  
Rental Counter is at the terminal.  
Shuttle is provided to pick up your car.

**Car Description**  
Mid-size car: Group C - Chevrolet  
Cruze or similar

**MAY 20 Dropoff**  
Ontario/LA, CA - ONT  
Monday, May 20, 2013  
9:00 PM

Rate Breakdown	Base Rate	Mileage	Taxes & Fees
Daily Rate: 2 day(s) @ \$69.99	\$139.98	Unlimited	\$41.52

Car Total  
\$181.50

Includes approximate taxes and fees

The minimum rental age is 25 years old on most rentals.

All drivers must have a major credit card and a valid driver's license in the driver's name.

Additional taxes, surcharges or fees may apply.

**View vendor terms and conditions**

- Age Requirements: Rather than requiring customers to be 25 to rent, Avis at this location now rents to customers between the ages of 21-24 with a valid credit card and driver's license. An underage surcharge may apply and will automatically be applied to the reservation. Additionally, the following restrictions also will apply for renters between the ages of 21-24: Renters of luxury cars, mini-vans, 12-passenger vans, specialty cars, full-size SUVs and premium SUVs will not be permitted. Government Minimum Age Policy - Military (FEMA, US Postal Dept., Navy and Army) and Civilian Personnel Minimum age - 18 years (no underage surcharge will apply) with government travel or purchase order Minimum age - 21 years (no underage surcharge will apply) with no government travel or purchase order



City of Oakland  
TRAVEL AUTHORIZATION

(See Reverse Side for Instructions)

Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed		2. Date 4/29/13		3. Vendor Number	
3. Department FIRE		5. Position Title Fire Chief			
6. Travel Destination Palm Springs, CA		7. Number of Work Days Two		8. Departure Date May 19, 2013	
				9. Return Date May 20, 2013	
10. Purpose of Travel: Attend Annual Fire Chiefs Summit of California Fire Chiefs Association					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$900.00		13. Name of Employee in Charge if Requestor is Department Head Rebecca Kozak, ext. 4080	
14. Transportation <input type="checkbox"/> Use of City vehicle requested: _____ Estimated round-trip miles _____ <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated out-of-pocket costs \$ _____ <input type="checkbox"/> Use of private vehicle requested: _____ Estimated round-trip miles _____ <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested – estimated cost: 115.00					
Upon invoice from travel agent or common carrier, prepare check in amount of Airfare paid by employee for later reimbursement \$430.					
Payable to:					
15. Registration or Special Fees Fees for above event \$ 150.00 <input checked="" type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed _____ <input type="checkbox"/> Fee to be paid in advance \$ _____ Make check payable to _____ And Mail check to: _____					
Fees include: _____ Dates: _____ Breakfast _____ Lunch May 20 _____ Dinner _____ Lodging _____					
16. Subsistence <input type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ Hotel 136.00 Meals 69.00 <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days @ _____ /day = \$ _____ Travel per diem rate _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Teresa Reed 4/29/13 Signature Date		18. Department Remarks		FOR ACCOUNTING USE ONLY Check No. _____ Date: _____ Amount: _____	
19. City Manager Review (if overnight accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature Date		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loc	Task	Dept Specific
	545.00	55112	1010	20110	0000000	14	PS15		
	150.00	55212	1010	20110	0000000	14	PS15		
	205.00	55114	1010	20110	0000000	14	PS15		

Entered By

Date

Accounts Payable

Date



# CALIFORNIA FIRE CHIEFS ASSOCIATION ANNUAL FIRE CHIEFS SUMMIT

Monday, May 20, 2013 • 0700 – 1700

Palm Springs Convention Center • Catalina Room, Renaissance Hotel

277 N. Avenida Caballeros, Palm Springs, CA 92262

Register today at [www.cfedwest.com](http://www.cfedwest.com)

## AGENDA

0700 – 0800	Registration	CFEDWest Registration Booth (Convention Center)
0800 – 0830	Continental Breakfast	
0830 – 0915	Labor Law Update	Ed Zappia, <i>Principal, Zappia Law Firm</i>
0915 – 0930	Break	
0930 – 1015	Cal EMA/OES Update	Mark Ghilarducci, <i>Secretary of the California Emergency Management Agency</i>
1015 – 1045	Legislative Update/ Chapter 13	Raymond Ramirez, <i>Deputy Chief, Ontario FD, CA Chiefs Legislative Representative</i>
1045 – 1100	Break	
1100 – 1145	How Are You Surviving?	Ronny Coleman, <i>Fire Chief (Ret.)</i>
1145 – 1300	Lunch and Networking	Hotel Foyer
1300 – 1330	Cal Chiefs Update	Demetrious Shaffer, <i>Fire Chief, Alameda County FD, CA Chiefs President</i>
1330 – 1415	1797.201/.224	Scott Clough, <i>Assistant Chief, Director of EMS, Sacramento Metro FD</i>
1415 – 1430	Break	
1430 – 1515	Ground Emergency Transport	Scott Clough, <i>Assistant Chief, Director of EMS, Sacramento Metro FD</i>
1515 – 1600	Affordable Care Act	Mike Metro, <i>Chief Deputy, Los Angeles County FD</i>
1600 – 1700	What Does Community Paramedicine Really Look Like?	Howard Backer, <i>MD, EMSA Medical Director;</i> Mark Hartwig, <i>Fire Chief, San Bernardino County FD, CA Chiefs EMS Section President</i>
1700 – 1830	Reception/Social Networking	Hotel Lobby

Sessions offered as a pre-conference for...

**CFEDWEST**  
CONFERENCE & EXPO 2013



City of Oakland  
TRAVEL EXPENSE VOUCHER  
OFFICE OF CITY MANAGER

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed	2. Position Title Fire Chief 13 JUL 17 AM 10:42	3. Vendor Number 108550
4. Department Oakland Fire Department	5. Travel Destination Sacramento, CA	6. No. of Work Days Two
7. Funding Source: <input type="checkbox"/> Budgeted <input checked="" type="checkbox"/> Funds Available	8. Departure Date July 10, 2013	9. Return Date July 11, 2013
10. Purpose of Travel Attend meeting of the California Metro Fire Chiefs		
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____		12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>

TRAVEL EXPENSE CLAIM								
13. Day of Week/Date	Wed. 7/10	Thurs 7/11						TOTALS

TRANSPORTATION EXPENSE									
14. Airplane									
15. City Car Expense									
16. Private Car Expense									
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION									
20. Registration	\$131.00								131
21. Special Fees									

SUBSISTENCE EXPENSE (Per Diem)									
22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)									
24. Breakfast									
25. Lunch									
26. Dinner									
27. Lodging	\$131.94								\$131.94
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS									\$262.94

31. Remarks	32. Total Advances & Prepayments \$0.00
	33. Balance Due to Claimant \$262.94
35. Claim Approved by Department Head  Signature: <i>Alexandra Prologos</i> Date: 7/23/13	34. 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  Signature: <i>Teresa Deloach Reed</i> Date: 7/12/13

Fund/SF	Organization	Account	Proj/Grant	Yr	Loc	Task	Dept/Specific	Amount	ACCOUNTING USE ONLY
1010	20110	55114	111	0	14	PS15		\$131.94	Check No
1010	20110	55212	111	0	14	PS15		\$131.00	Date





# California Metropolitan Fire Chiefs Association

## July 2013 Meeting ~ Sacramento, CA

Fire Chief's Name Teresa Deloach Reed Department Oakland Fire Department

**Wednesday, July 10, 2013:** Esquire Grill, 1213 K Street, Sacramento 95814  
5:30 PM Appetizers, 6:00 PM Dinner ~ Business Casual

**Please select one:**

☒ Attending ☐ Not attending

**Thursday, July 11, 2013:** CA Metro Fire Chiefs Meeting  
Sheraton Grand Hotel, Sacramento – 1230 J Street, Sacramento 95814  
Compagno Room  
8 AM – 2 PM  
Continental Breakfast & Lunch will be served

**LODGING** Sheraton Grand Sacramento – 1230 J Street, Sacramento, CA 95814

Government Rate: \$99 plus taxes. Rate includes: Complimentary wireless internet access in all rooms and meeting spaces.

When making your reservation, please identify yourself as being with CA Metro Fire Chiefs to receive the rate quoted. Reservations can be made online at [Sheraton Sacramento Government Business Travel Rate](#) or by calling the hotel directly at (916) 447-1700.

**TRANSPORTATION** Metro Fire will provide transportation to/from airport, if needed

**Please select one:**

☒ No transportation needed

☐ Transportation needed **ARRIVAL** Airline: \_\_\_\_\_ Flight #: \_\_\_\_\_ Time: \_\_\_\_\_  
**DEPARTURE** Airline: \_\_\_\_\_ Flight #: \_\_\_\_\_ Time: \_\_\_\_\_

**COST** \$131 ~ Includes cost of dinner on Wednesday, July 10<sup>th</sup> and breakfast, lunch and beverages on Thursday, July 11<sup>th</sup>

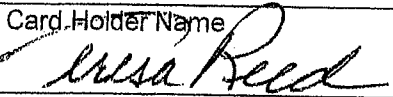
### PAYMENT METHOD

☐ Check (payable to Metro Fire) Check No.: \_\_\_\_\_

Credit Card:    ☒ VISA ☐ MasterCard ☐ American Express

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Teresa Deloach Reed 510-384-4465

Card Holder Name \_\_\_\_\_ Card Holder Phone Number \_\_\_\_\_

Card Holder Signature 

**All forms and checks should be mailed to:**  
Jill Guzman c/o Sacramento Metropolitan Fire District  
10545 Armstrong Avenue, Suite 200, Mather, CA 95655

Sheraton Grand Sacramento Hotel  
1230 J Street  
Sacramento, CA 95814  
916-447-1700  
<http://www.starwood.com/>



Ms. Deloach Reed,  
Teresa

Page Number 1 Invoice Nbr 1000095392

Guest Number 1450344 Arrive Date 07-10-2013

Folio ID A Depart Date 07-11-2013

No. Of Guest 1

Room Number 1814

Time 07-11-2013 15:40

Invoice

Date	Reference	Description	Charges	Credits
07-10-2013	RT1814	T-Government	\$99.00	
07-10-2013	RT1814	Room Charge, Tax/Assessments	\$14.94	
07-10-2013	RT1814	Self Parking	\$18.00	
07-11-2013	VM	Visa/Mastercard		\$-131.94
		** Total	\$131.94	\$-131.94
		** Balance	\$0.00	

\*\*\*For Authorization Purpose Only\*\*\*

TERESA REED

Date	Credit Card	Code	Authorized
07-10-2013		03352C	148.50

EXPENSE SUMMARY REPORT

Currency: USD

Date	Rm Charge	Taxes	Telephone	Other	Total	Payment
07-10-2013	\$99.00	\$14.94	\$0.00	\$18.00	\$131.94	\$0.00
07-11-2013	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-131.94
Total	\$99.00	\$14.94	\$0.00	\$18.00	\$131.94	\$-131.94

Your SPG Account A41496029710 earned at least 198 Starpoints. Get 10,000 more with the SPG Credit Card. [spg.com/axpcard](http://spg.com/axpcard)

Thank you for choosing Starwood Hotels We look forward to welcoming you back soon!

Tell us about your stay. [www.sheraton.com/reviews](http://www.sheraton.com/reviews)



City of Oakland  
TRAVEL AUTHORIZATION

(See Reverse Side for Instructions)

Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed		2. Date 6/3/13		3. Vendor Number	
3. Department FIRE		5. Position Title FIRE CHIEF			
6. Travel Destination Sacramento, CA		7. Number of Work Days Two		8. Departure Date July 10, 2013	
				9. Return Date July 11, 2013	
10. Purpose of Travel Attend California Metropolitan Chiefs Association Meeting					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$ 261.00		13. Name of Employee in Charge if Requestor is Department Head Rebecca Kozak x. 4080	
14. Transportation <input checked="" type="checkbox"/> Use of City vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles 160 miles Estimated out-of-pocket costs -0- <input type="checkbox"/> Use of private vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested <input type="checkbox"/> Upon invoice from travel agent or common carrier, reimburse for \$ n/a For:					
15. Registration or Special Fees Fees for above event \$ 131.00 <input checked="" type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed _____ <input type="checkbox"/> Fee to be paid in advance _____ Fees include: Dates: Breakfast 7/11 Lunch 7/11 Dinner 7/10 Lodging Make check payable to _____ and _____ Mail check to: _____					
16. Subsistence <input checked="" type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ 130.00 - Hotel <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost \$ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days _____ Travel per diem rates _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Signature _____ Date _____		18. Department Remarks		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (if overnight accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Signature _____ Date 6/11/13		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loc	Task	Dept Specific
15.	131.00	1010	20110	55212	0000000	14	PS 15		
16.	130.00	1010	20110	55114	0000000	14	PS 15		

Entered By \_\_\_\_\_ Date \_\_\_\_\_

Accounts Payable \_\_\_\_\_ Date \_\_\_\_\_



CITY OF OAKLAND  
OFFICE OF CITY MANAGER  
JUN 3 4 10:31 PM '13

## INTER OFFICE MEMORANDUM

**TO:** Deanna Santana  
City Administrator

**FROM:** Teresa Deloach Reed  
Fire Chief

**SUBJECT:** Approval of Business Travel -  
California Metro Fire Chiefs Association  
Meeting - July 10-11, 2013

**DATE:** June 3, 2013

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Approval

Date


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Attached for your review are my travel authorization and the registration form for the California Metropolitan Fire Chiefs Association meeting. The estimated cost is \$261.00.

This conference is an opportunity to discuss issues of mutual importance with my California metropolitan fire chief colleagues, including by laws, dues and chiefs' reports.

A deputy chief will serve as acting chief while I am out of the city.

It is requested that the City Administrator approve my travel authorization and the requisite funding to attend this conference.

  
Teresa Deloach Reed  
Fire Chief

For questions, contact Rebecca Kozak at ext. 4080.

Attachments:  
Travel authorization  
Flyer



City of Oakland  
TRAVEL EXPENSE VOUCHER

CITY OF OAKLAND  
OFFICE OF CITY MANAGER

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed	2. Position Title Fire Chief 13 AUG 20 AM 9:33	3. Vendor Number 108550
4. Department Oakland Fire Department	5. Travel Destination Chicago, IL	6. No. of Work Days Seven
7. Funding Source: <input type="checkbox"/> Budgeted <input checked="" type="checkbox"/> Funds Available	8. Departure Date August 12, 2013	9. Return Date August 18, 2013
10. Purpose of Travel Attend annual conference of the International Association of Fire Chiefs		
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____		12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>

TRAVEL EXPENSE CLAIM

13. Day of Week/Date	Mon 8/12	Tue 8/13	Wed 8/14	Thur 8/15	Fri 8/16	Sat 8/17	Sun 8/18		TOTALS
----------------------	----------	----------	----------	-----------	----------	----------	----------	--	--------

TRANSPORTATION EXPENSE

14. Airplane	\$495.80								\$495.80
15. City Car Expense									
16. Private Car Expense									
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION

20. Registration	\$645.00								645
21. Special Fees									

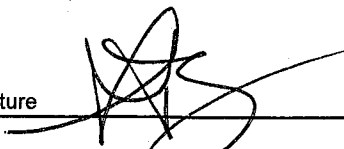
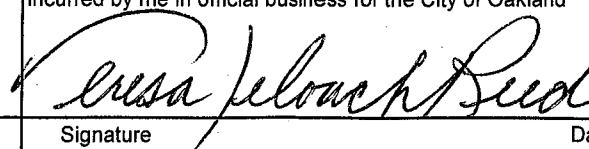
SUBSISTENCE EXPENSE (Per Diem)

22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)

24. Breakfast		11	11		11	11	11		55
25. Lunch	16	16	16		16	16	16		96
26. Dinner	29	29	29						87
27. Lodging	\$249.10	\$249.10	249.1	249.1	249.1	249.1			\$1,494.60
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS	\$1,434.90	\$305.10	\$305.10	\$249.10	\$276.10	\$276.10	\$27.00		\$2,873.40

31. Remarks	32. Total Advances & Prepayments	\$0.00
	33. Balance Due to Claimant	\$2,873.40

35. Claim Approved by Department Head  Signature  Date 8-21-13	34. 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   Date 8/19/13 Rec'd. 9/3
---	---


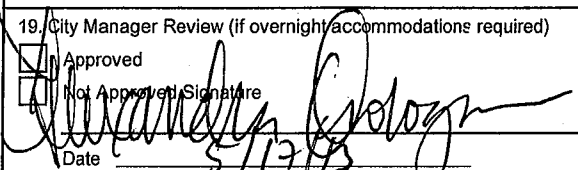
Fund/SF	Organization	Account	Pro/Grant	Yr	Loc	Task	Dept Specific	Amount	ACCOUNTING USE ONLY
1010	20110	55114	0	14	PS15			\$1,732.60	Check No
1010	20110	55212	0	14	PS15			\$645.00	Date
1010	20110	55112	0	14	PS15			495.8	



City of Oakland  
TRAVEL AUTHORIZATION  
(See Reverse Side for Instructions)

Period	Batch #	Type	Item

2

1. Employee Name Teresa Deloach Reed		2. Date 5/8/13		3. Vendor Number	
3. Department FIRE		5. Position Title FIRE CHIEF			
6. Travel Destination Chicago, IL		7. Number of Work Days Seven		8. Departure Date August 12, 2013	
				9. Return Date August 18, 2013	
10. Purpose of Travel Attend Fire Rescue International (annual conference of International Association of Fire Chiefs)					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$ 2803.00		13. Name of Employee in Charge if Requestor is Department Head Rebecca Kozak x. 4080	
14. Transportation <input type="checkbox"/> Use of City vehicle requested: _____ Estimated round-trip miles _____ <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated out-of-pocket costs \$ _____ <input type="checkbox"/> Use of private vehicle requested: _____ Estimated round-trip miles _____ <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested <input checked="" type="checkbox"/> Upon invoice from travel agent or common carrier, reimburse for \$550.00, and reimburse for shuttles, approx. \$30.00 Southwest Airlines For: air travel - roundtrip					
15. Registration or Special Fees Fees for above event \$ 645.00 <input checked="" type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed _____ <input type="checkbox"/> Fee to be paid in advance _____ Make check payable to _____ And _____ Mail check to: _____ Fees include: _____ Dates: _____ Breakfast 8/15 Lunch 8/15 Dinner 8/15, 8/16, 8/17 Lodging n/a					
16. Subsistence <input checked="" type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ 1300 - Hotel and Meals- 278.00 <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost \$ _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days _____ Travel per diem rates _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Signature _____ Date 5/8/13		18. Department Remarks		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (if overnight/accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Signature _____ Date 5/17/13		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loc	Task	Dept Specific
14.	580.00	1010	20110	55112	0000000	14	PS 15		
15.	645.00	1010	20110	55212	0000000	14	PS 15		
16.	1578.00	1010	20110	55114	0000000	14	PS 15		

Entered By

Date

Accounts Payable

Date

Kozak, Rebecca

From: Event Customer Service <email\_confirm@confmail.experient-inc.com>  
Sent: Thursday, May 09, 2013 11:42 AM  
To: Deloach Reed, Teresa  
Subject: Fire-Rescue International 2013 Confirmation {FRI131:2886}



Confirmation ID: 2886  
Teresa L. Deloach Reed  
Oakland Fire Department  
150 Frank H Ogawa Plz Ste 3354  
Oakland, CA 94612-2021

Dear Teresa Deloach Reed:

Thank you for registering for Fire-Rescue International (FRI) to be held Tuesday, August 13 – Saturday, August 17, 2013, in Chicago, Illinois.

Your badge, as well as other pertinent information, will be available at the FRI registration desk in McCormick Place - West Transportation Lobby, beginning Tuesday, August 13, 2013.

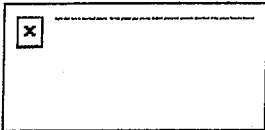
**Hotel Accommodations:**  
Book through onPeak to ensure you pay the lowest price and get the best service with reservation protection, flexibility and assistance—before, during and after your stay.

Please note: onPeak is the only official housing company associated with FRI 2013. While other hotel resellers may contact you offering housing for your trip, they are not endorsed by or affiliated with the conference and entering into financial agreements with such companies can have costly consequences.

**Stay Connected:**  
We encourage you to download the FRI App and follow us on Twitter @FireRescueIntl, for all the latest pre-conference information.

Registrant

**Badge Information:**  
Teresa Deloach Reed  
Oakland Fire Department  
Oakland , CA



Registration Detail

Purchases for Teresa Deloach Reed

Registration Type: FRIALL - All Access Package, Advanced

Item Code	Description	Date/Time	Qty.	Item Price	Item Total
PRESIDENTIAL	Presidential Celebration		1	\$0.00	\$0.00
UNPLUGGED	FRI Unplugged		1	\$0.00	\$0.00
WELCOME	Welcome Reception		1	\$0.00	\$0.00
REG	Registration		1	\$615.00	\$615.00
DIVERSITY	Diversity Breakfast		1	\$30.00	\$30.00

Total Registration Fees:	\$645.00
Total Registration Paid:	(\$645.00)
<b>Current Balance:</b>	<b>\$0.00</b>

Total of All Fees:	\$645.00
Total Amount Applied to All Fees:	(\$645.00)
<b>Total Balance Due:</b>	<b>\$0.00</b>

## Payment History

Payment #1					
05/09/2013	Payment	Visa	Teresa Deloach Reed		\$645.00
	05/09/2013	Applied to	Teresa Deloach Reed's Registration	\$645.00	
			<b>Total Amount Applied:</b>	<b>\$645.00</b>	
			<b>Total Amount Not Used:</b>	<b>\$0.00</b>	
			<b>Total Payments:</b>	<b>\$645.00</b>	
			<b>Total Refunds:</b>	<b>\$0.00</b>	
			<b>Total Net Paid:</b>	<b>\$645.00</b>	

## Cancellation Policy

All cancellations will be subject to a \$75 administrative fee. Cancellations must be sent in writing to the FRI Registration Center via fax or email. Telephone cancellations will not be accepted.

All cancellations must be received in writing by July 12, 2013. No refunds will be issued after this date.

After July 12, 2013, substitutions will be allowed in the event the registrant is unable to attend, but no refunds will be issued. Telephone substitutions will be permitted.

Should you need to make any changes to your registration, including changing your mailing information or adding/deleting tickets, click on the link below:

### FRI Registration

You may also make changes via e-mail to [customer service](#) or by calling (866) 229-2386 or (301) 694-5243.

For more conference information, please visit [www.iafc.org/fri](http://www.iafc.org/fri)



You received this transactional email based on a recent booking with onPeak, the official housing partner of FRI  
2013 - Fire Rescue International 2013. We respect your privacy and do not share your information with others.  
[View our privacy policy »](#)

**onPeak** | 350 N Clark St. Ste 200 | Chicago, IL 60654 | UNITED STATES



Sheraton Chicago Hotel & Towers  
301 E. North Water Street  
Chicago, IL 60611  
312-464-1000  
<http://www.starwood.com/>



Reed, Teresa

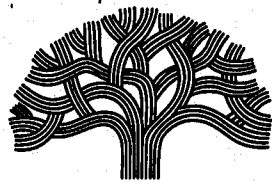
Page Number	1	Invoice Nbr	1000108167
Guest Number	4735372	Arrive Date	08-12-2013
Folio ID	A	Depart Date	08-18-2013
No. Of Guest	1		
Room Number	1252		
AR Account	123406 -		
	Internet &		
	Phone -		
	Comp		
Time	08-18-2013 13:10		

Invoice				
Date	Reference	Description	Charges	Credits
08-12-2013	RT1252	Room Chrg Grp Association	\$214.00	
08-12-2013	RT1252	Occupancy/Tourism Tax	\$25.47	
08-12-2013	RT1252	Tax Other	\$9.63	
08-13-2013	RT1252	Room Chrg Grp Association	\$214.00	
08-13-2013	RT1252	Occupancy/Tourism Tax	\$25.47	
08-13-2013	RT1252	Tax Other	\$9.63	
08-14-2013	RT1252	Room Chrg Grp Association	\$214.00	
08-14-2013	RT1252	Occupancy/Tourism Tax	\$25.47	
08-14-2013	RT1252	Tax Other	\$9.63	
08-15-2013	RT1252	Room Chrg Grp Association	\$214.00	
08-15-2013	RT1252	Occupancy/Tourism Tax	\$25.47	
08-15-2013	RT1252	Tax Other	\$9.63	
08-16-2013	RT1252	Room Chrg Grp Association	\$214.00	
08-16-2013	RT1252	Occupancy/Tourism Tax	\$25.47	
08-16-2013	RT1252	Tax Other	\$9.63	
08-17-2013	RT1252	Room Chrg Grp Association	\$214.00	
08-17-2013	RT1252	Occupancy/Tourism Tax	\$25.47	
08-17-2013	RT1252	Tax Other	\$9.63	
08-18-2013	VM	Visa/Mastercard		
		** Total	\$1,494.60	\$-1,494.60
		** Balance	\$0.00	\$-1,494.60

\*\*\*For Authorization Purpose Only\*\*\*

Date	Credit Card	Code	Authorized
08-12-2013		03333C	1,926.00

Continued on the next page



CITY OF OAKLAND

CITY OF OAKLAND  
OFFICE OF CITY MANAGER

13 MAY -9 PM 3:00

## INTER OFFICE MEMORANDUM

**TO:** Deanna Santana  
City Administrator

**FROM:** Teresa Deloach Reed  
Fire Chief

**SUBJECT:** Approval of Business Travel -  
Fire-Rescue International  
Annual IAFC Conference  
August 12-18, 2013

**DATE:** May 8, 2013

Approval

Date

*Alexander Orozco*

5/17/13

Attached for your review are my travel authorization and the brochure for the annual International Association of Fire Chiefs (IAFC) conference, "Fire-Rescue International." It will be held August 13-17 in Chicago, IL and the estimated cost is \$2,803.

This Conference and Expo is the premier event where fire chief officers from all over the world gather for state of the art professional development and networking. This event offers educational and other opportunities to learn about cutting edge practices in emergency management and leadership, and to meet with vendors and subject matter experts.

A deputy chief will serve as acting chief while I am out of the city.

Please approve my travel authorization and the funding to attend this conference.

*Teresa Reed*

Teresa Deloach Reed  
Fire Chief

For questions, contact Rebecca Kozak at ext. 4080.

Attachments:  
Travel authorization  
Brochure

# AGENDA



## Fire-Rescue International



**"FRI IS NOT A  
FIREFIGHTER TRAINING  
CONFERENCE** - it is  
an exclusively unique  
opportunity for company  
officers and chief officers-  
and there is a measurable  
difference. You will not  
learn how to stretch a line  
or vent a roof at FRI-but  
what you **WILL** learn in  
various diverse dimensions,  
is how to successfully **LEAD**  
and **COMMAND** those  
who do."

Billy Goldfeder, EFO  
Deputy Fire Chief  
Loveland-Symmes (OH)  
Fire Department

### TUESDAY, AUGUST 13

Chief's Edge 8:30 am – 4:30 pm

### WEDNESDAY, AUGUST 14

Officer Development Program 8:15 am – 4:30 pm  
Chief's Edge 8:30 am – 4:30 pm  
Educational Sessions 1:00 pm – 4:30 pm

### THURSDAY, AUGUST 15

**Diversity Breakfast 7:00 am – 8:30 am**  
Officer Development Program 8:15 am – 4:30 pm  
Educational Sessions 8:30 am – 4:30 pm  
**Division Lunches 11:30 am – 1:30 pm**  
**Welcome Reception 5:30 pm – 7:00 pm**

### FRIDAY, AUGUST 16

General Session 8:30 am – 10:30 am  
Metro Chiefs 8:30 am – 5:00 pm  
Officer Development Program 8:15 am – 4:30 pm  
Educational Sessions 10:30 am – 4:30 pm  
**Exhibits Open 10:30 am – 6:30 pm**  
**FRI Unplugged 4:30 pm – 6:30 pm**

### SATURDAY, AUGUST 17

General Session 8:00 am – 9:30 am  
Metro Chiefs 8:00 am – 9:30 am  
**Exhibits Open 9:30 am – 1:00 pm**  
Educational Sessions 1:00 pm – 2:30 pm  
**Presidential Celebration 6:30 pm**

\* Subject to change

Kozak, Rebecca

From: fri@onpeak.co  
Sent: Wednesday, May 08, 2013 2:17 PM  
To: Deloach Reed, Teresa  
Subject: FRI 2013 - Fire Rescue International 2013 Hotel Confirmation



Your reservation for FRI 2013 - Fire Rescue International 2013 | [Access your reservation online »](#)



**FRI 2013 - Fire Rescue International 2013**  
Aug 13 - Aug 17, 2013  
McCormick Place Convention Center • Chicago IL



May 08, 2013

Teresa Reed,

Thank you for booking in the hotel block with onPeak. As the official housing partner of FRI 2013 - Fire Rescue International 2013, we're here to make sure you have the best possible stay.

**Your Account**



**Login Email**  
[tdeloachreed@oaklandnet.com](mailto:tdeloachreed@oaklandnet.com)

**onPeak ID**  
11827245

[View/Edit your reservation >](#)

**Reservation Details**



**Sheraton Chicago Hotel & Towers - HQ**



301 E North Water St,  
Chicago, IL 60611  
3.00 miles to Event  
Location

**Single Occupancy - Standard Room**

**Check-in**  
Mon Aug 12, 2013

**Check-out**  
Sun Aug 18, 2013  
[Add to your calendar »](#)

**Occupant Name**  
Teresa Reed

[tdeloachreed@oaklandnet.com](mailto:tdeloachreed@oaklandnet.com)

**Hotel Confirmation Number:** Available approximately 2 weeks prior to the event for participating hotels.  
**Shuttle Service:** Shuttle service between the hotel and the event is provided.

**Rate & Payment Guarantee Details**

**NOTE:** Your credit card is being used as a guarantee only at this time. Your card will be charged by Sheraton Chicago Hotel & Towers - HQ directly. Please review all hotel policies related to this reservation.

Payment: Teresa Reed's VISA [REDACTED]

Sheraton Chicago Hotel & Towers - HQ

Single Occupancy - Standard Room	
\$214.00   Avg nightly event rate	
1 Reservation (6 Room Nights)	\$1,284.00
Taxes & Fees <sup>1</sup>	\$210.60
Estimated Total	\$1,494.60
Amount charged to credit today	\$0.00
Guarantee <sup>2</sup>	\$249.10

Hotel Policies

**Guarantee Policy**  
Please provide a valid credit card to hold your reservation. Credit card MUST expire after the date of the event. Approximately 30 days prior to start of event, the HOTEL, NOT ONPEAK will charge your credit card a deposit equal to one night's room charge plus tax. First night's room and tax is also payable by check. Please make checks payable to onPeak. Reservation(s) not guaranteed are subject to cancellation.

**Cancellation Policy**  
Guests must cancel reservations 72 hours prior to arrival to avoid loss of deposit.

**Changes Policy**  
If you need to make any changes or cancellations to your reservation on or before 08/01/2013, make your changes online or call (800) 688-3472. Changes or cancellations to your reservation after this date must be made directly with Sheraton Chicago Hotel & Towers - HQ at 312-464-1000. All changes are based on availability.

**Special Policy**  
An early departure fee may apply if hotel is not notified of an early departure prior to or at check in. Failure to check-in on your scheduled arrival date will result in a no-show charge of one night's room and tax.

**Questions about your reservation?**  
(800) 688-3472 Toll-free | (312) 527-7300 Local | [fri@onpeak.co](mailto:fri@onpeak.co)

<sup>1</sup> This amount includes the city's hotel tax rate and any additional fees associated with your hotel (service fees, resort fees, etc).  
<sup>2</sup> By providing a credit card, you guarantee you'll meet the hotel policies of your reservation. If for some reason you don't meet the policies, you may be charged a financial penalty in the amount of the payment guarantee. For more info, please refer to your hotel's specific policies.



City of Oakland  
TRAVEL EXPENSE VOUCHER

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed	2. Position Title Fire Chief	3. Vendor Number 108550
4. Department Oakland Fire Department	5. Travel Destination Phoenix, AZ - TRIP CANCELLED	6. No. of Work Days
7. Funding Source: <input type="checkbox"/> Budgeted <input checked="" type="checkbox"/> Funds Available	8. Departure Date	9. Return Date
10. Purpose of Travel Attend annual meeting of the Metro Fire Chiefs Section of the IAFC		
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____		12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>

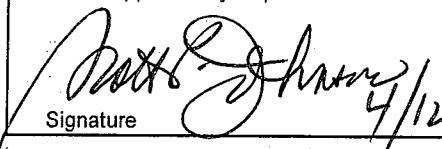
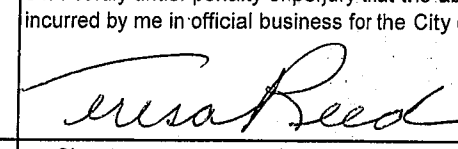
TRAVEL EXPENSE CLAIM									
13. Day of Week/Date	Sat. 4/6								TOTALS

TRANSPORTATION EXPENSE									
14. Airplane									
15. City Car Expense									
16. Private Car Expense									
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION									
20. Registration									
21. Special Fees									

SUBSISTENCE EXPENSE (Per Diem)									
22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)									
24. Breakfast									
25. Lunch									
26. Dinner									
27. Lodging	\$214.08								\$214.08
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS									

31. Remarks One night penalty for no-show.	32. Total Advances & Prepayments	
33. Claim Approved by Department Head  Signature _____ Date 4/12/13	34. 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  Signature _____ Date 4/11/13	33. Balance Due to Claimant \$214.08


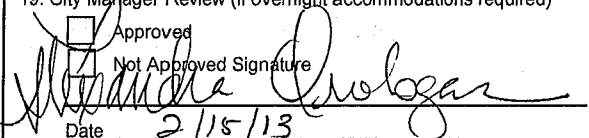
Fund/SF	Organization	Account	Proj/Grant	Yr	Loc	Task	Dept/Specific	Amount	ACCOUNTING USE ONLY	
1010	20110	55114	0	13	PS15			\$214.08	Check No.	
									Date	



City of Oakland  
TRAVEL AUTHORIZATION

(See Reverse Side for Instructions)

Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed		2. Date 2/13/13		3. Vendor Number	
3. Department FIRE		5. Position Title Fire Chief			
6. Travel Destination Phoenix, AZ		7. Number of Work Days Five		8. Departure Date April 6, 2013	
				9. Return Date April 10, 2013	
10. Purpose of Travel: Attend and present at Annual Metropolitan Fire Chiefs Conference of the I.A.F.C.					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$ 1,480.70		13. Name of Employee in Charge if Requestor is Department Head Rebecca Kozak, ext. 4080	
14. Transportation <input type="checkbox"/> Use of City vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Estimated out-of-pocket costs \$ _____ <input type="checkbox"/> Use of private vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested – estimated cost: _____ Upon invoice from travel agent or common carrier, prepare check in amount of Airfare paid by employee for later reimbursement \$181.70 Payable to: _____					
15. Registration or Special Fees Fees for above event \$ 350.00 <input checked="" type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed _____ <input type="checkbox"/> Fee to be paid in advance \$ _____ Make check payable to _____ And Mail check to: _____ Fees include: _____ Dates: _____ Breakfast 4/7 _____ Lunch _____ Dinner 4/6 & 4/9 _____ Lodging _____					
16. Subsistence <input type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ Hotel 825.00 Meals \$124.00 <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days @ _____ /day = \$ _____ Travel per diem rate _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Signature _____ Date _____		18. Department Remarks No Advance Check Is Needed.		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (if overnight accommodations required) <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Not Approved  Signature _____ Date 2/15/13		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loc	Task	Dept Specific
	181.70	55112	1010	20110	0000000	13	PS15		
	350.00	55212	1010	20110	0000000	13	PS15		
	949.00	55114	1010	20110	0000000	13	PS15		

Entered By \_\_\_\_\_ Date \_\_\_\_\_

Accounts Payable \_\_\_\_\_ Date \_\_\_\_\_





Contact Us | Log In ▾

- Home
- Conference Info ▾
- Registration ▾
- Travel Information ▾
- Education
- Sponsors

HOTEL

Sheraton Phoenix Downtown Hotel

340 N. 3rd St.  
Phoenix, AZ 85004  
(602) 262-2500 (phone)  
(602) 262-2501 (fax)  
Website: [www.sheraton.com/phoenixdowntown](http://www.sheraton.com/phoenixdowntown)



Please be sure to mention you are with the Metro Fire Chiefs Conference 2013 to receive your special rate!

This newly designed, contemporary hotel includes a sleek deck pool and hot tub, several restaurants and state-of-the-art fitness center. Complimentary Wi-Fi access is available in the Link Cafe and the hotel lobby. Guest Rooms are appointed with a 32" flat-screen TV, rich mahogany wood furnishings, and the ultra-comfortable, new Sheraton Sweet Sleeper™.

Besides the the convention center, other sites within walking distance include:

- US Airways Arena - Home of the Phoenix Suns
- Chase Field
- Herberger Theater
- Phoenix Symphony Hall
- The Heart of Phoenix (Formerly known as Copper Square/Heritage Square)
- Arizona State University Downtown Campus
- Metro Lightrail Station (Central & Van Buren)

Arr 4/6  
✓ Out  
4/10

✓ In 3/12  
✓ Out 12 noon

Cancel  
2 days  
in advance

or  
1 day

Conf # 645510989

\$ 189 + tax

1 King

Murray Technologies

Copyright © 2013 Metro Fire Chiefs Conference



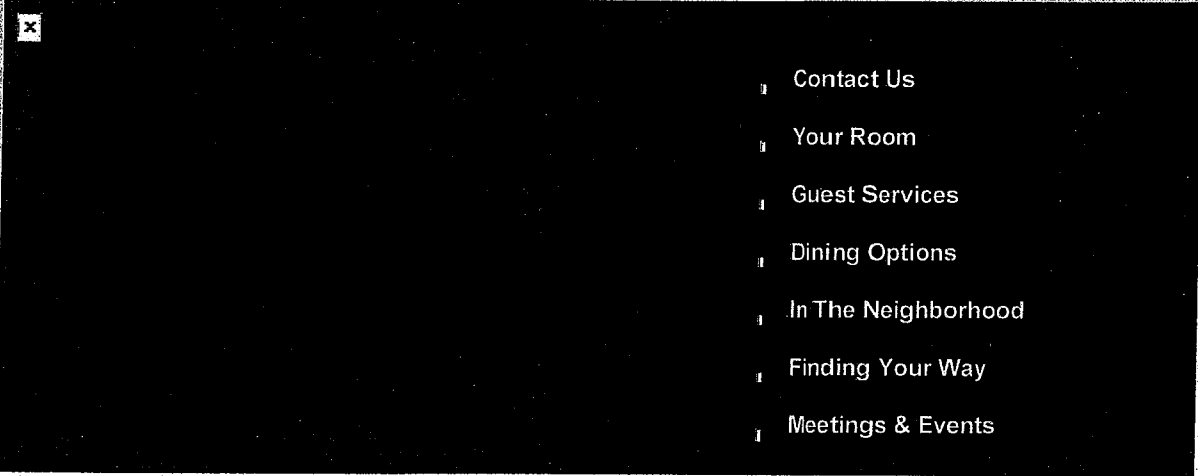
Kozak, Rebecca

From: Sheraton Phoenix Downtown Hotel  
<GCCUSTSERVICE@CONFIRM.STARWOODHOTELS.COM>  
Sent: Friday, February 08, 2013 2:34 PM  
To: Deloach Reed, Teresa  
Subject: Sheraton Reservation #645510989. We look forward to seeing you.

Trouble seeing this email? View it in a browser for up-to-date reservation information, or to view in English, Français, Español, Deutsch, 中文(简体), 日本語, Italiano, Português, Русский

Sheraton Phoenix Downtown Hotel  
340 North 3rd Street, Phoenix  
Arizona 85004, United States  
Phone: (602) 262-2500 Fax: (602) 262-2501

penalty of \$18900



- Contact Us
- Your Room
- Guest Services
- Dining Options
- In The Neighborhood
- Finding Your Way
- Meetings & Events

Hello Teresa,

We're pleased to confirm your upcoming stay at the Sheraton Phoenix Downtown Hotel and look forward to your arrival.

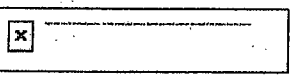
You're invited to **Upgrade your room** for \$20 per night. You can also make a Green Choice. Decline housekeeping for the day and earn SPG Starpoints® or a dining credit from us. Request Upgrade and Rewards.

If there's anything special we can do in preparation for your stay please don't hesitate to contact us. In the meantime, safe travels.

Mike Ehmann  
GENERAL MANAGER

**You Are Invited....**

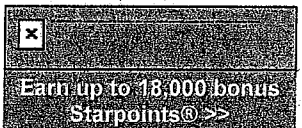
...to participate in a short survey to evaluate your experience with the associate who handled your call. Thank you for sharing your opinions with Sheraton Hotels & Resorts.



**For Your Stay**



**From Starwood Preferred Guest**



**Your Starwood Preferred Guest Details**

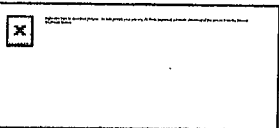
Member Name:  
**Teresa Deloach Reed**  
  
SPG Number:  
[REDACTED]  
  
Starpoint Balance:

PK  
H/10  
H/10  
Jesvie  
call  
mtg  
110  
front desk  
mgr  
email  
sent  
V on  
status

Kozak, Rebecca

From: Southwest Airlines <SouthwestAirlines@luv.southwest.com>  
Sent: Friday, April 05, 2013 4:59 PM  
To: Deloach Reed, Teresa  
Subject: Southwest Airlines Cancellation Confirmation-REED/TERESA DELOACH-Confirmation: GENDDX

You're all set for your trip!



[My Account](#) | [View My Itinerary Online](#)

Check In Online

Check Flight Status

Change Flight

Special Offers

Hotel Deals

Car Deals

Your reservation has been cancelled.

 AIR Itinerary

AIR Confirmation: GENDDX

Confirmation Date: 04/5/2013

Passenger(s)	Rapid Rewards #	Ticket #	Expiration	Est. Points Earned
REED/TERESA DEL OACH		5262496764635		935

Date	Flight	Departure/Arrival
Sat Apr 6	1333	Depart OAKLAND CA (OAK) at 1:35 PM <small>Stops: ONTARIO CA (ONT)</small> Arrive in PHOENIX AZ (PHX) at 4:35 PM Travel Time 3 hrs 0 mins
Wed Apr 10	2497	Depart PHOENIX AZ (PHX) at 9:55 PM Arrive in OAKLAND CA (OAK) at 11:50 PM Travel Time 1 hrs 55 mins

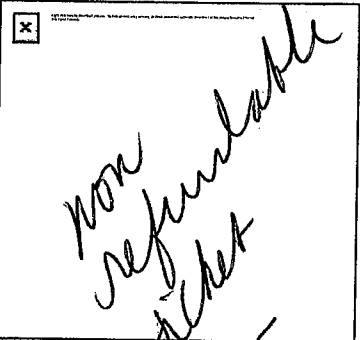
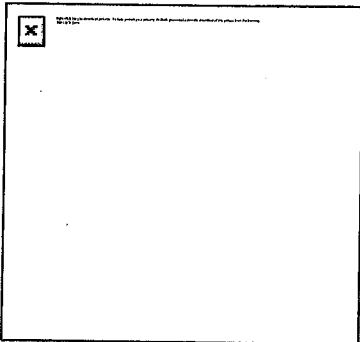
Air Cost: 181.70

Carry-on Items: 1 Bag + small personal item are free see full details. Checked Items: First and second bags are free, size and weight limits apply.

Fare Rule(s): 5262496764635: NONREF/NONTRANSFERABLE/STANDBY REQ UPGRADE TO Y.

Valid only on Southwest Airlines. All travel involving funds from this Confirmation Number must be completed by the expiration date. Unused travel funds may only be applied toward the purchase of future travel for the individual named on the ticket. Any changes to this itinerary may result in a fare increase.

OAK WN PHX72.56TXAVNNRO WN OAK72.56TXNVNNR 145.12 END ZPOAKONTPHX  
XT5.00AY9.00XFOAK4.5PHX4.5



non refundable  
ticket  
= credit  
for  
future  
travel



City of Oakland  
TRAVEL EXPENSE VOUCHER

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

13 SEP 25 108550 PM 1:44  
OFFICE OF CITY MANAGER

1. Employee Name Teresa Deloach Reed		2. Position Title Fire Chief		3. Vendor Number 108550 PM 1:44	
4. Department Oakland Fire Department		5. Travel Destination Sacramento, CA		6. No. of Work Days Two	
7. Funding Source: <input type="checkbox"/> Budgeted <input checked="" type="checkbox"/> Funds Available		8. Departure Date September 22, 2013		9. Return Date September 23, 2013	
10. Purpose of Travel Attend meeting of the California Metro Fire Chiefs Asscoiation					
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____			12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>		

TRAVEL EXPENSE CLAIM									
13. Day of Week/Date	Sun 9/22	Mon 9/23							TOTALS


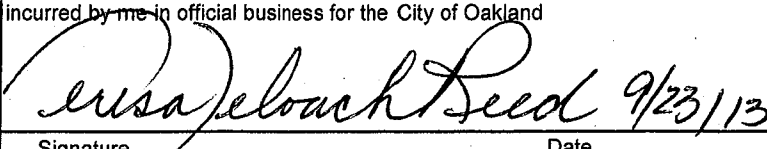
TRANSPORTATION EXPENSE									
14. Airplane									
15. City Car Expense									
16. Private Car Expense									
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION									
20. Registration	\$225.00								\$225.00
21. Special Fees									

SUBSISTENCE EXPENSE (Per Diem)									
22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)									
24. Breakfast									
25. Lunch									
26. Dinner									
27. Lodging									
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS									\$225.00

31. Remarks - Hotel reservation was cancelled.		32. Total Advances & Prepayments		\$0.00
		33. Balance Due to Claimant		\$225.00

35. Claim Approved by Department Head  9/27/13		34. 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  9/23/13	
Signature		Date	

Fund/SF	Organization	Account	Prj/Grant	Yr	Loc	Task	Dept/Specifc	Amount	ACCOUNTING USE ONLY
1010	20110	55212	0	14	PS15			\$225.00	Check No Date



KURT P. HENKE  
Fire Chief

## Sacramento Metropolitan Fire District

10545 Armstrong Ave., Suite 200 • Mather, CA 95655 • Phone (916) 859-4300 • Fax (916) 859-3702

### RECEIPT FOR PAYMENT

Payment Submitted By: Teresa Deloach Reed, Fire Chief  
Oakland Fire Department

Payment For: CA Metro Fire Chiefs Association ~ Meeting  
Sept 22 - 23, 2013 ~ Sacramento

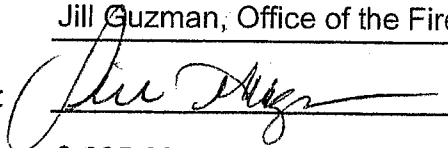
Made Payable To: Sacramento Metropolitan Fire District  
10545 Armstrong Avenue, Suite 200  
Mather, CA 95655

Telephone Number: (916) 859-4508

Federal Tax ID #: 68-0358779

Received Payment: September 13, 2013

Payment Received By: Jill Guzman, Office of the Fire Chief

Signature: 

Amount of Payment: \$ 225.00

Form of Payment: Check #: \_\_\_\_\_

Card Type: ☒ Visa ☐ MasterCard

Auth #: 09703C

SACRAMENTO METROPOLITAN  
10545 ARMSTRONG AVE STE  
MATHER, CA 95655

TERMINAL ID: 004539771  
MERCHANT #: 329334031990

SA [REDACTED]

ALE  
TCH: 000009  
TE: SEP 13, 13  
P  
INVOICE: 009012  
TIME: 08:37  
AUTH NO: 09703C

TOTAL \$225.00

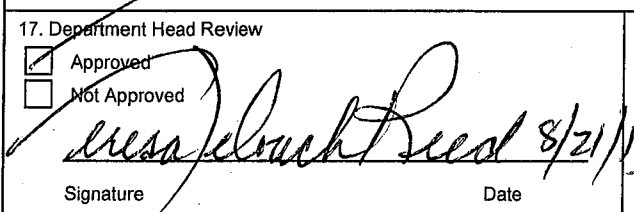

Serving Sacramento and Placer Counties

CUSTOMER COPY



City of Oakland  
TRAVEL AUTHORIZATION  
(See Reverse Side for Instructions)

Period	Batch #	Type	Item

1. Employee Name <b>Teresa Deloach Reed</b>		2. Date <b>8/21/13</b>		3. Vendor Number	
3. Department <b>FIRE</b>		5. Position Title <b>FIRE CHIEF</b>			
6. Travel Destination <b>Sacramento, CA</b>		7. Number of Work Days <b>Two</b>		8. Departure Date <b>September 22, 2013</b>	
				9. Return Date <b>September 23, 2013</b>	
10. Purpose of Travel <b>Attend California Metropolitan Chiefs Association Meeting</b>					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate <b>\$ 375.00</b>		13. Name of Employee in Charge if Requestor is Department Head <b>Rebecca Kozak x. 4080</b>	
14. Transportation <input checked="" type="checkbox"/> Use of City vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles <b>160 miles</b> Estimated out-of-pocket costs <b>-0-</b> <input type="checkbox"/> Use of private vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested <input type="checkbox"/> Upon invoice from travel agent or common carrier, reimburse for \$ <b>n/a</b> For: _____					
15. Registration or Special Fees Fees include: Dates: Fees for above event \$ <b>225.00</b> <input checked="" type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed _____ <input type="checkbox"/> Fee to be paid in advance _____ Breakfast 9/23 Lunch 9/23 Dinner 9/22 Lodging Make check payable to _____ and _____ Mail check to: _____					
16. Subsistence <input checked="" type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ <b>150.00 - Hotel</b> <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost \$ _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days _____ Travel per diem rates _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved   Signature _____ Date <b>8/21/13</b>		18. Department Remarks		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (if overnight accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved  Date <b>8-23-13</b>		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loc	Task	Dep
15.	225.00	1010	20110	55212	0000000	14	PS 15		
16.	150.00	1010	20110	55114	0000000	14	PS 15		

Entered By \_\_\_\_\_ Date \_\_\_\_\_

Accounts Payable \_\_\_\_\_ Date \_\_\_\_\_



**INTER OFFICE MEMORANDUM**

CITY OF OAKLAND  
OFFICE OF CITY MANAGER  
AUG 22 PM 1:35

**TO:** Deanna Santana  
City Administrator

**FROM:** Teresa Deloach Reed  
Fire Chief

**SUBJECT:** Approval of Business Travel -  
California Metropolitan Chiefs Association  
September 22-23, 2013

**DATE:** August 22, 2013

---

Approval

Date

---

Attached for your review are my travel authorization and the registration form for the California Metro Chiefs upcoming meeting in September. The estimated cost is \$375.00.

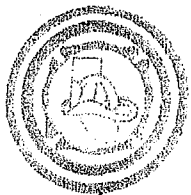
This meeting is an opportunity to continue discussions of mutual concern to metro fire chiefs in California. A deputy chief will serve as acting chief while I am out of the city.

Please approve my travel authorization and the funding to attend this conference.

Teresa Deloach Reed  
Fire Chief

For questions, contact Rebecca Kozak at ext. 4080.

Attachments:  
Travel authorization  
Agenda



# California Metropolitan Fire Chiefs Association

September 2013 Meeting ~ Sacramento, CA

*Teresa Deloach Reed* *Oakland*

Fire Chief's Name

Department

**Sunday, Sept. 22, 2013:** Lucca Restaurant, 1615 J Street, Sacramento  
6:00 PM Dinner ~ Business Casual

Please select one:

☒ Attending

☐ Not attending

**Monday, Sept. 23, 2013:** CA Metro Fire Chiefs Meeting  
Sheraton Grand Hotel, Sacramento – 1230 J Street, Sacramento - Falor Room  
8 AM – 2 PM  
Continental Breakfast & Lunch will be served

**LODGING** Sheraton Grand Sacramento – 1230 J Street, Sacramento, CA 95814

California Fire Chiefs Association Rate: **\$132 plus taxes** – To ensure that you receive the CFCA rate, please use the below link to make your reservations:

<https://www.starwoodmeeting.com/StarGroupsWeb/booking/reservation?id=1305025621&key=2561E>

**TRANSPORTATION** Metro Fire will provide transportation to/from airport, if needed

Please select one:

☒ No transportation needed

☐ Transportation needed **ARRIVAL** Airline: \_\_\_\_\_ Flight #: \_\_\_\_\_ Time: \_\_\_\_\_

**DEPARTURE** Airline: \_\_\_\_\_ Flight #: \_\_\_\_\_ Time: \_\_\_\_\_

**COST** \$225 ~ Includes the cost of dinner on Sunday, September 22<sup>nd</sup> and charges associated with the meeting on Monday, September 23<sup>rd</sup>.

## PAYMENT METHOD

☐ Check (payable to Metro Fire) Check No.: \_\_\_\_\_

Credit Card: ☒ VISA ☐ MasterCard ☐ American Express

Card Number

Expiration Date

Card Holder Name

Card Holder Phone Number

Card Holder Signature

All forms and checks should be mailed to:  
Jill Guzman c/o Sacramento Metropolitan Fire District  
10545 Armstrong Avenue, Suite 200, Mather, CA 95655



[Need Help?](#)[event page](#) | [book a room](#) | [check reservations](#)

Steps:

- 1 Find Rooms and Rates
- 2 Available Rooms
- 3 Guest Information
- 4 Reservation Review
- 5 **Reservation Confirmed**

**California Fire Chiefs Association**

September 20 - 27, 2013  
Event Venue : Sheraton Grand Sacramento

Group rate available until August 30, 2013. Subject to Availability.

[Event Contact](#)[Planner Log In](#)**Step 5 - Reservation Confirmed**

Thank you for your reservation! We look forward to seeing you.  
Your confirmation number is 816659580.

**Hotel & Room Information**

Sheraton Grand Sacramento Hotel  
1230 J Street  
Sacramento, CA, 95814  
United States  
(916) 447-1700

Check-in  
Sep 22, 2013

Check-out  
Sep 23, 2013

01 room(s), 01 adult(s)  
Wheelchair access required: No

Room Features: TRADITIONAL NON-SMOKING, SWEET SLEEPER  
BED, 24HR ACCESS TO HEALTH CLUB, 32 INCH FLAT SCREEN  
LCD TV, HIGH-SPEED INTERNET FOR A FEE

**Rate Information**

Rate Description: Ca Fire Chiefs Assn

Average est. room total per night\*\*  
Room rate USD 132.00  
Taxes\*\* USD 19.92  
Estimated total\*\* USD 151.92

Estimated total for your stay\*\*  
01 room(s) for 1 night(s) USD 151.92

\*\*The displayed totals are estimates only and do not include any additional charges that may be incurred at the hotel. The actual total will be calculated by the hotel in its local currency, based on the local taxes and currency exchange rate (if applicable) in effect at the time charging occurs.

[Get complete details about this rate, taxes and other charges](#)

**Personal & Credit Card Information**

Name Ms Teresa L Deloach Reed

Address

Phone 510 238-4080

Email tdeloachreed@oaklandnet.com

Card Number

[Privacy Policy](#)

**Starwood Preferred Guest Information****Optional Information****Flight Information**

Airline:

Flight Number:

**Hotel Arrival Information**

Arrival Time: 0300 PM

**Special Requests:**

Make a Green Choice: Unavailable for one night stays  
([Terms & Conditions](#))

**Terms & Conditions**

**Cancellation policy:** If you cancel between 23-Aug-2013 and 6:00 PM hotel time on 21-Sep-2013, there will be no forfeiture amount. If you cancel after 6:00 PM hotel time on 21-Sep-2013, the forfeiture amount will be a 1 night stay.

**Rate plan Description:** Ca Fire Chiefs Assn

**GTD/Deposit policy:** Please note that any change in your reservation may change the rate and/or require payment of cancellation fees. For reservations guaranteed with a form of payment at time of booking, rooms are held until hotel check-out time the day following arrival. For reservations not guaranteed with a form of payment at time of booking, rooms are held until set cancellation time per the rules of the reservation. In the event more guests arrive than can be accommodated due to hotel overbooking or an unforeseen circumstance, and hotel is unable to hold rooms consistent with this room held online



City of Oakland  
TRAVEL AUTHORIZATION

(See Reverse Side for Instructions)

Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed		2. Date 5/22/13		3. Vendor Number	
3. Department FIRE		5. Position Title FIRE CHIEF			
6. Travel Destination Sacramento, CA		7. Number of Work Days Four		8. Departure Date September 17, 2013	
				9. Return Date September 20, 2013	
10. Purpose of Travel Attend Annual Conference & Expo of the League of California Cities & participate in Fire Chiefs Section activities					
11. Funding Source <input checked="" type="checkbox"/> Budgeted <input type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$ 1,191.00		13. Name of Employee in Charge if Requestor is Department Head Rebecca Kozak x. 4080	
14. Transportation <input checked="" type="checkbox"/> Use of City vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles 160 miles Estimated out-of-pocket costs \$ 60.00 <input type="checkbox"/> Use of private vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Equivalent common carrier rate \$ _____ Authorization Number _____ <input type="checkbox"/> Use of rental vehicle requested <input type="checkbox"/> Upon invoice from travel agent or common carrier, reimburse for \$ n/a For:					
15. Registration or Special Fees Fees for above event \$ 475.00 <input type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed _____ <input checked="" type="checkbox"/> Fee to be paid in advance _____ Fees include: Dates: Breakfast Lunch 9/19 & 9/20 Dinner Lodging n/a Make check payable to League of California Cities, Vendor # 33317 And Mail check to: "ATH"					
16. Subsistence <input checked="" type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ 520.00 - Hotel and Meals- 136.00 <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost \$ _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for days _____ Travel per diem rates days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature <i>Teresa Reed</i> Date 5/28/13		18. Department Remarks Need check for League of California Cities; no advance check is needed for other expenses.		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (if overnight accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature <i>William Deloach</i> Date 6/4/13		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Loc	Task	Dept Specific
14.	60.00	1010	20110	55112	0000000	14	PS 15		
15.	475.00	1010	20110	55212	0000000	13	PS 15		
16.	656.00	1010	20110	55114	0000000	14	PS 15		

Entered By \_\_\_\_\_ Date \_\_\_\_\_

Accounts Payable \_\_\_\_\_ Date \_\_\_\_\_

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

VENDOR NO. 33317

CHECK NUMBER 799118

INVOICE NUMBER	DESCRIPTION	NET AMOUNT
TASEP2013	H20P000-14CT # OFD(SK)FRE CHF TRAV REG SVCS PMTS	475.00
		475.00

THE FACE OF THIS CHECK IS BLUE, THE BACK CONTAINS A SIMULATED WATERMARK

CITY OF OAKLAND

ONE FRANK H. OGAWA PLAZA  
OAKLAND, CA 94612

Wells Fargo Bank, N.A.  
San Francisco, California 94104

11:24  
1210

CHECK # 799118

AMOUNT \$ \*\*\*\*\*475.00

PAY Four Hundred Seventy-Five Dollars And Zero Cents\*\*\*\*\*

TO THE ORDER OF LEAGUE OF CALIFORNIA CITIES  
1400 "K" STREET  
SACRAMENTO, CA 95814

*[Signature]*

*[Signature]*

TWO SIGNATURES REQUIRED  
VOID AFTER 180 DAYS

⑈799118⑈ ⑆121000248⑆ 4121955231⑈

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

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

LEAGUE OF CALIFORNIA CITIES  
1400 "K" STREET  
SACRAMENTO, CA 95814

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

VENDOR NO. 33317

CHECK NUMBER 801633

INVOICE NUMBER	DESCRIPTION	NET AMOUNT
TASEP2013-1	H20P000-14CT # OFD(SK)FRE CHF TRAV REG SVCES PMTS	50.00
		50.00

THE FACE OF THIS CHECK IS BLUE, THE BACK CONTAINS A SIMULATED WATERMARK

CITY OF OAKLAND

ONE FRANK H. OGAWA PLAZA  
OAKLAND, CA 94612

Wells Fargo Bank, N.A.  
San Francisco, California 94104

11-24  
1210

CHECK # 801633

DATE 31-JUL-13

AMOUNT \$ \*\*\*\*\*50.00

PAY Fifty Dollars And Zero Cents\*\*\*\*\*

TO THE  
ORDER  
OF

LEAGUE OF CALIFORNIA CITIES  
1400 "K" STREET  
SACRAMENTO, CA 95814

*[Signature]*

*[Signature]*

TWO SIGNATURES REQUIRED  
VOID AFTER 180 DAYS

⑈801633⑈ ⑆121000248⑆ 4121955231⑈

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

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

LEAGUE OF CALIFORNIA CITIES  
1400 "K" STREET  
SACRAMENTO, CA 95814



## *INTER OFFICE MEMORANDUM*

**TO:** Accounts Payable

**FROM:** Teresa Deloach Reed  
Fire Chief

**SUBJECT:** Registration Fee  
League of California Cities conference

**DATE:** July 9, 2013

---


Approval     N/A

---

We submitted a travel authorization on June 20 and requested a check for \$475. You have usually been able to get us a check quickly.

Unfortunately you cut the check on July 3 and we missed the early bird deadline. We need another check for \$50, to the League of California Cities, Vendor #33317.

Thank you,

  
TERESA DELOACH REED  
Fire Chief

Please call me at ext. 4050 if you have questions.

# 2013 Annual Conference & Expo

Wednesday, September 18 – Friday, September 20  
Sacramento Convention Center



## Advance Registration Form

To register by check, please fill out this form – must be received before Tuesday, August 27

Checks should be payable to: League of California Cities  
1400 K Street, Suite 400  
Sacramento, CA 95814

- **Email confirmation**, along with the link for hotel reservations, will be sent to those registrations received with complete payment **before August 27, 2013**. After this date please register onsite.
- **All cancellations must be submitted in writing by mail or emailed to [mdunn@cacities.org](mailto:mdunn@cacities.org) and are subject to a \$75 processing fee.** No refunds will be given for cancellations received after Tuesday, August 27. Sending an alternate/substitute onsite will avoid financial penalty.
- **Questions? Call the Conference Registrar at 916-658-8291.** Sorry, phone registrations are not accepted.

Please enter your name and title, as they should appear on your name badge and registration.

Please complete one form per registrant.

City/Company Oakland Fire Department

<u>Full Conference</u>	<u>Early Bird</u> (Before June 29)	<u>After June 29</u> (And Onsite)
<input checked="" type="checkbox"/> City Official/Staff	\$475	\$525
<input type="checkbox"/> Public Official	\$550	\$600
<input type="checkbox"/> Partner/Exhibitor/All Others	\$650	\$700
<input type="checkbox"/> Non-Member City	\$1475	\$1525

Name Teresa Deloach Reed

City Attorney State Bar Number

Fire Chief

Title

150 Frank Ogawa Plaza

Address # 3354

City Oakland Zip Code 94612

City Zip Code

510/238-4050

Phone

tdeloachreed@oaklandnet.com

E-Mail (confirmation will be sent here)

W/A

Spouse Name (fee applies)

☐ First Time Attendees only, check here

### One-Day Only – Select One (WED / THUR / FRI)

<input type="checkbox"/> City Official/Staff	\$250
<input type="checkbox"/> Public Official	\$300
<input type="checkbox"/> Partner/Exhibitor/All Others	\$350
<input type="checkbox"/> Non-Member City	\$1250

### Optional Registration Add-ons (non-refundable)

<input type="checkbox"/> City Clerks Workshop – Member City	\$100
<input type="checkbox"/> City Clerks Workshop – Non-member	\$100
<input type="checkbox"/> Spouse*	\$100

\*Spouse rate is restricted to those who are not city/public officials, are not related to any Partner/Expo company and would have no professional reason to attend for learning or business. Rate includes admission to the Expo and receptions only. Session seats are reserved for conference registrants. There is no refund for the cancellation of a spouse registration. It is not advisable to use city funds to register a spouse.

Grand Total \$ 525.00



For special assistance related to facility access, hearing or visual contact our Conference Registrar at 916-658-8291.

Registration must be received by  
Tuesday, August 27, 2013.

*mailed  
8/5*



**TENTATIVE SCHEDULE OF EVENTS**

As of April 15, 2013 *(subject to change)*

**WEDNESDAY, SEPTEMBER 18**

- 9:00 - 10:30 a.m..... Policy Committees (at hotel)
- 10:30 a.m. - Noon..... Policy Committees (at hotel)
- 9:00 a.m. - 6:30 p.m..... Registration Open, Sacramento Convention Center
- Noon - 1:30 p.m..... Regional Division Lunches (optional)
- 1:00 - 1:30 p.m..... First Time Attendee Orientation
- 1:30 - 2:30 p.m..... **Department Business Meetings, Programs & Welcome**
- 3:00 - 5:00 p.m..... **Opening General Session** – Annual Report and Keynote Address
- 5:00 - 7:00 p.m..... **Grand Opening Expo Hall & Host City Reception**  
*(No competing events/receptions are permitted at this time)*
- 7:00 - Evening..... Networking Events and Exhibitor Dinners

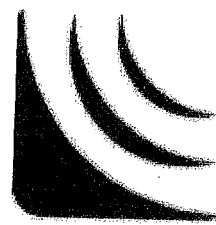
**THURSDAY, SEPTEMBER 19**

- 7:00 a.m. - 4:00 p.m..... Registration Open
- 8:00 - 9:30 a.m..... **General Session** – Keynote Address
- 9:45 - 11:00 a.m..... Education – Breakouts, CityTalks, etc.
- 10:00 a.m. - 3:00 p.m..... **Expo with Lunch Exhibitor Exclusive**  
*(No competing events 11:30 a.m. – 1:00 p.m.)*
- 1:00 - 2:15 p.m..... General Resolutions committee
- 1:00 - 2:15 p.m..... Education
- 2:45 - 4:00 p.m..... Education
- 4:15 - 5:30 p.m..... Education
- 4:15 - 5:30 p.m..... Board of Directors Meeting
- 5:30 - Evening ..... Networking Receptions – Caucus, League Partners, Divisions

**FRIDAY, SEPTEMBER 20**

- 7:30 - 10:00 a.m..... Registration Open
- 7:30 - 8:45 a.m..... Regional Division Breakfasts (optional)
- 9:00 - 10:15 a.m..... Education
- 10:30 - 11:45 a.m..... Education
- Noon - 2:00 p.m..... **Closing Luncheon with Voting Delegates & General Assembly**  
Install New Board of Directors
- 2:00 p.m..... Adjourn

**NOTE:** Conference registration is required to attend Policy Committees, Department, Division, Annual Conference business meeting and/or to be a Voting Delegate.



LEAGUE<sup>®</sup>  
OF CALIFORNIA  
CITIES



League of California  
Cities 2013 Annual  
Conference & Expo  
Sacramento, California  
September 18 - 20, 2013

[View, Modify or Cancel Existing Reservation](#)

Thank you. Cancellation complete. Please print this page for your records.

[Make another Reservation](#)

Forward this acknowledgement (separate each email address with a comma/semicolon):

[Forward Acknowledgement](#)

#### Reservation Summary

Room Type	Acknowledgment #	Guests	Email
Studio Suite	327845M30 -62571	Teresa Deloach Reed	tdeloachreed@oaklandnet.com

#### Event:

League of California Cities 2013 Annual  
Conference & Expo  
Sep 18, 2013 - Sep 20, 2013  
1400 J Street  
Sacramento, CA US 95814  
Fax: 916-808-8414

#### Hotel:

Residence Inn Sacramento at Capitol Park  
1121 15th Street,  
Sacramento, CA 95814  
UNITED STATES

#### Room 1 - Studio Suite

Guests	Address	Options
Teresa Deloach Reed Fire Chief	150 Frank Ogawa Plaza Suite 3354 Oakland, CA 94612 UNITED STATES Telephone: 510-238-4080 Fax: 510-238-2284 Email: tdeloachreed@oaklandnet.com	Accessible Room: None Hotel rewards program: None Special requests for this room: None

Payment Details & Rates	
Teresa Deloach Reed Payment Type: Credit Card Teresa L. Deloach Reed Exp. **/**	Rates Wed Sep 18, 2013 - USD 129.00 Thu Sep 19, 2013 - USD 129.00

- Tax is not included.
- Fees for extra guests: 2nd guest=0.00

#### Tax Policy

Current tax rate is 12% Occupancy, 0.09% CA Business Improvement & 3% City Marketing for a total of 15.09% per room night.

#### Cancellation Policy



Please contact the hotel directly for the most up-to-date hotel cancel policy.

Room Total: USD 258.00

Grand total for all guests: USD 258.00

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Powered by **Passkey**



City of Oakland  
TRAVEL EXPENSE VOUCHER

FOR ACCOUNTING USE ONLY			
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed		2. Position Title Fire Chief	3. Vendor Number 108550
4. Department Oakland Fire Department		5. Travel Destination Bethesda, MD	6. No. of Work Days Three
7. Funding Source: <input type="checkbox"/> Budgeted X Funds Available <input type="checkbox"/> Other		8. Departure Date December 2, 2013	9. Return Date December 4, 2013
10. Purpose of Travel Represent California Task Force 4 at Sponsoring Agency Chiefs meeting of FEMA's Urban Search & Rescue Program			
11. If City Vehicle Used: Vehicle Number _____ Model _____ Odometer Reading _____ Start _____ End _____ Miles _____		12. If Private Vehicle Used: License No. _____ Model _____ Vehicle Approved for City Yes <input type="checkbox"/> No <input type="checkbox"/>	

TRAVEL EXPENSE CLAIM									
13. Day of Week/Date	Mon 12/2	Tue 12/3	Wed 12/4						TOTALS

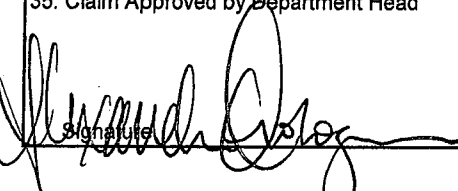
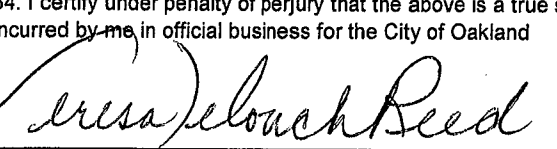
TRANSPORTATION EXPENSE									
14. Airplane	754.2								754.2
15. City Car Expense									
16. Private Car Expense									
17. Local Transportation									
18. Parking									
19. Tolls									

REGISTRATION									
20. Registration									
21. Special Fees									

SUBSISTENCE EXPENSE (Per Diem)									
22. Full Per Diem									
23. Adj. to Per Diem									

MEALS (Per Diem)									
24. Breakfast									
25. Lunch									
26. Dinner									
27. Lodging	\$207.92	\$207.92							\$415.84
28. Telephone/Telegram									
29. Baggage Handling									
30. Other									
TOTALS	\$962.12	\$207.92							\$1,170.04

31. Remarks		32. Total Advances & Prepayments		0
		33. Balance Due to (From) Claimant		\$1,170.04

35. Claim Approved by Department Head		34. 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	
Signature  Date 12/13/13		Signature  Date 12.6.13	

Fund/SF	Organization	Account	Proj/Grant	Yr	Program	Task	Dept Specific	Amount	ACCOUNTING USE ONLY
2124	20815	55114	G364930		PS18			\$415.84	Check No.
2124	20815	55112	G364930		PS18			754.2	Date

Kozak, Rebecca

From: United Airlines, Inc. <unitedairlines@united.com>  
Sent: Friday, October 25, 2013 10:18 AM  
To: Deloach Reed, Teresa  
Subject: united.com reservation for Washington, DC (DCA - National)

Add [unitedairlines@united.com](mailto:unitedairlines@united.com) to your address book. [See instructions.](#)

Fri., Oct. 25, 2013

| [united.com](#) | [Deals & Offers](#) | [Reservations](#) | [Earn MileagePlus® Miles](#) | [My Account](#) |

Thank you for choosing United Airlines.

We are processing your reservation and will send you a confirmation email once this is completed. This process usually takes less than an hour; however, in rare cases it could take longer. Your reservation will remain confirmed during the processing period, and it's not necessary to contact us unless you are traveling within 24 hours.

As a reminder, you can [manage your reservation](#) at united.com, including:

- Purchasing additional products and services to improve your travel experience
- Viewing or changing seat assignments
- Changing your flight
- Checking-in (within 24 hours)
- Booking a car or hotel
- Printing additional receipts, and more

If you do not receive your receipt within three hours, [please contact us](#).

<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>	Flight Summary		Confirmation Number:	AF2LWM
<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>				
<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>	Mon., Dec. 2, 2013	San Francisco, CA (SFO) to Washington, DC (DCA - National) Connecting in Houston, TX (IAH - Intercontinental)		
<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>	Wed., Dec. 4, 2013	Washington, DC (DCA - National) to San Francisco, CA (SFO)		
<div>Manage my reservation &gt;</div> <div>View full trip details, seat assignments and printable receipts.</div>				
<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>				
<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>	Traveler Details			
<div><div><div><div><div></div></div><div><div></div></div></div><div><div></div></div></div></div>				

Ms. Teresa Deloach Reed

Seats: SFO - IAH: 15D  
IAH - DCA: ---  
DCA - SFO: ---

Washington Hotels

STARTING AT

\$53

PER DAY

Book now

Ticket Price Details

1 Adults (age 18 to 64)\$723.00

Additional Taxes/Fees\$31.20

Economy Plus\$59.00

SFO - IAH  
(Ms. Teresa Deloach Reed)\$59.00

Total Fare\$754.20

Manage my reservation

Book with our preferred car partners

- Save up to 35% off
- Earn 75 reward miles/day
- Earn 150 bonus reward miles when booking on united.com
- Choose [Avis®](#) or [Hertz®](#)

Total Fare: \$754.20/EA7GN/EA7GN/LAK21GN

Additional Trip Planning Tools

- [Baggage Policies](#): View current baggage acceptance allowances.
- [Washington, D.C. Destination Guide](#): Download a complete travel guide.

Important Baggage Information

Carry-on baggage allowed

United accepts the following items, per customer to be carried on the aircraft at no charge:

- One carry-on bag no more than 45 linear inches or 114 linear centimeters (L + W + H) or 14 inches x 9 inches x 22 inches (23 x 35 x 56 cm)
- One personal item (such as a shoulder or laptop bag).

[Learn more about carry-on baggage policy](#)

Checking bags for this itinerary

Checked baggage service charges are collected at any point in the itinerary where bags are checked. The bag service charges below reflect a maximum outside linear dimension of 62 linear inches (157 cm)

First and second baggage service charges per traveler as listed below:	1st bag	2nd bag	Weight per bag
--	---------	---------	----------------

<b>Mon., Dec. 2, 2013</b> San Francisco, CA (SFO) to Washington, DC (DCA - National)	\$25	\$35	50.0 lbs (23 kgs)
<b>Wed., Dec. 4, 2013</b> Washington, DC (DCA - National) to San Francisco, CA (SFO)	\$25	\$35	50.0 lbs (23 kgs)

**Check Your First Bag for Free**

Save up to \$100 per roundtrip. Primary Cardmembers and a companion on the same reservation can check their first bag free on United-operated flights when purchasing tickets with their Explorer Card.

[Learn more](#)

First and second bag service charges do not apply to active-duty members of the U.S. military and their accompanying dependents. For additional information regarding baggage charges, allowances, weight/size restrictions, exceptions or embargoes, or charges for overweight, oversized, excess, odd-sized baggage, special items or sporting equipment, visit [united.com/baggage](http://united.com/baggage)

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P.O. Box 6120 Rapid City, SD  
57709-6120 USA



Hyatt Regency Bethesda  
One Bethesda Metro Center  
(7400 Wisconsin Avenue)  
Bethesda, MD, USA 20814  
Tel: 301-657-1234  
Fax: 301-657-6453  
bethesda.hyatt.com

INFORMATION INVOICE

Payee Teresa Deloachreed  
Oakland Fire Dept 150 Frank Ogawa Plaza Ste 3354  
Oakland CA 94612

Room No. 0514  
Arrival. 12/02/13 Mon  
Departure 12/04/13 Wed  
Page No. 1 of 1  
Folio Window  
Folio 1  
Invoice

Membership  
Bonus Code  
Confirmation No. 31231647-1  
Group Name FUSR

Date	Description	Charges	Credits
12/02	Group Room	184.00	
12/02	MD Sales Tax	11.04	
12/02	Occupancy Tax	12.88	
12/03	Group Room	184.00	
12/03	MD Sales Tax	11.04	
12/03	Occupancy Tax	12.88	
12/04	Visa		-415.84

Total	415.84	-415.84
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Balance	0.00
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Guest Signature

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. If I do not check out in the Lounge with a host, I authorize the hotel to process all charges incurred during the stay to the credit card I presented at the time of check-in.

Please direct any billing inquiries/concerns to:  
Email: [na.customerservice@hyatt.com](mailto:na.customerservice@hyatt.com)  
Phone: 1-888-472-2870



City of Oakland  
TRAVEL AUTHORIZATION

(See Reverse Side for Instructions)

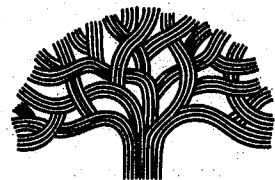
Period	Batch #	Type	Item

1. Employee Name Teresa Deloach Reed		2. Date 10/21/13		3. Vendor Number 108550	
3. Department FIRE		5. Position Title Fire Chief			
6. Travel Destination Bethesda, Maryland		7. Number of Work Days Three		8. Departure Date December 2, 2013	
				9. Return Date December 4, 2013	
10. Purpose of Travel: To attend Sponsoring Agency Chiefs' Meeting of the Urban Search & Rescue (USAR -FEMA) program and discuss mutual concerns of USAR task forces.					
11. Funding Source <input type="checkbox"/> Budgeted <input checked="" type="checkbox"/> Other <input type="checkbox"/> Funds Available		12. Total Cost Estimate \$ 1,338.00		13. Name of Employee in Charge if Requestor is Department Head Rebecca Kozak, ext. 4080	
14. Transportation <input type="checkbox"/> Use of City vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Estimated out-of-pocket costs \$ _____ <input type="checkbox"/> Use of private vehicle requested: <input type="checkbox"/> Advance Payment <input type="checkbox"/> Reimbursement Estimated round-trip miles _____ Equivalent common carrier rate \$ _____ Authorization Number _____ <input checked="" type="checkbox"/> Upon invoice from travel agent or common carrier, prepare check in amount of \$ 760.00 (estimate) For reimbursement For: roundtrip airfare, Oakland to Washington, DC					
15. Registration or Special Fees Fees for above event \$ N/A <input type="checkbox"/> Fee will be paid by employee for later reimbursement <input type="checkbox"/> City will be billed <input type="checkbox"/> Fee to be paid in advance \$ _____ Make check payable to _____ And Mail check to: _____ Fees include: _____ Dates: _____ Breakfast _____ Lunch _____ Dinner _____ Lodging _____					
16. Subsistence <input checked="" type="checkbox"/> Subsistence will be paid by employee for later reimbursement. Est. cost \$ Hotel \$450.00 Meals \$128.00 <input type="checkbox"/> Advance requested for itemized expenditures. Estimated cost _____ <input type="checkbox"/> Advance per diem requested-provided check to employee in amount of \$ _____ Full per diem rate for _____ days @ _____ /day = \$ _____ Travel per diem rate _____ days @ _____ /day = \$ _____ Less: Expenses included in registration fee = \$ _____					
17. Department Head Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature <u>Teresa Deloach Reed</u> Date <u>10.28.13</u>		18. Department Remarks Expenses are covered by USAR Readiness Cooperative Agreement funding.		FOR ACCOUNTING USE ONLY Check No. _____ Date _____ Amount \$ _____	
19. City Manager Review (If overnight accommodations required) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature <u>Alexander C. Morgan</u> Date <u>11/14/13</u>		20. City Manager Review			

Sub Item	Amount	Fund/SF	Organization	Account	Project/Grant/ Cost Center/ Work Order	Yr	Fisc	Task	Dept Specific
	760.00	2124	20815	55112	G364930	13	PS18		
	578.00	2124	20815	55113	G364930	13	PS18		

Entered By \_\_\_\_\_ Date \_\_\_\_\_

Accounts Payable \_\_\_\_\_ Date \_\_\_\_\_



CITY OF OAKLAND

## INTER OFFICE MEMORANDUM

**TO:** Deanna Santana  
City Administrator

**FROM:** Teresa Deloach Reed  
Fire Chief

**SUBJECT:** Approval of Business Travel -  
FEMA – Urban Search & Rescue  
Sponsoring Agency Chiefs Meeting  
December 2-4, 2013

**DATE:** October 21, 2013

Approval

Date

11/14/13

Attached for your review are my travel authorization and information for the upcoming FEMA Urban Search & Rescue meetings. I will attend only the sponsoring agency chiefs' meeting on December 3, 2013 in Bethesda, Maryland. The costs will be covered by the Readiness Cooperative Agreement.

The purpose is to discuss issues of concern to the federally funded Urban Search & Rescue task force sponsoring chiefs. Oakland is the sponsoring agency for California Task Force 4.

A deputy chief will serve as acting chief while I am out of the city.

Your approval of my travel authorization is requested.

Teresa Deloach Reed  
Fire Chief

For questions, contact Rebecca Kozak at ext. 4080.

Attachments:  
Travel authorization  
Announcement





FEMA

US&R GENERAL MEMORANDUM - 2013-095

October 23, 2013

**FOR:** National Urban Search and Rescue Response System  
Sponsoring Agency Chiefs  
Task Force Representatives

**FROM:** Fred Endrikat, Chief  
Urban Search and Rescue Branch

**SUBJECT:** US&R GM 2013-095 – Announcement of the Sponsoring Agency Chiefs' Meeting – December 3, 2013

*Fred Endrikat*  
Fred Endrikat  
c=Fred Endrikat, o=DHS/  
FEMA, ou=ORR-RS-OP-UB,  
email=fred.endrikat@fema.dh  
s.gov, c=US  
2013.10.23 15:54:24 -0400

Maryland Task Force One (MD-TF1) will host the National US&R Response System Annual Sponsoring Agency Chiefs' Meeting at the Hyatt Regency Bethesda, located at One Bethesda Metro Center (7400 Wisconsin Ave), Bethesda, Maryland, 20814 on Tuesday, December 3, 2013.

The 28 Task Force Sponsoring Agency Chiefs/Heads and their Task Force Representatives, the National and Divisional Task Force Representatives, and the Operations Group Chair are invited to attend this meeting.

Rooms have been reserved at the Federal Government Rate of \$184.00 per night (plus applicable taxes) for single occupancy. To make your reservation, contact Hyatt Group Reservations at 1-888-421-1442. The rooms are reserved under "**Montgomery County Firefighters**"; the group code is "**FUSR**". **Room reservations must be made by November 1, 2013.** If personnel are told that the room reservation block is full, please ask for the state or federal rate when booking. Washington DC is approximately 30 minutes away by subway. The Hyatt is conveniently located at the Bethesda Metro Station ([www.wmata.com](http://www.wmata.com)).

There are three major airports serving the Washington DC area, all approximately 45 minutes from Rockville. The three airports are Ronald Reagan National Airport (DCA), Washington Dulles Airport (IAD) or Baltimore Washington International Airport (BWI). DCA has the added advantage of having a Metro station at the airport (the Hyatt is also at a METRO station). Each attendee is responsible for arranging ground transportation.

The use of FY2013 Readiness Cooperative Agreement funding to support travel and related expenses to send members is allowable, provided that the Task Force has budgeted for this expense within their budget plan.

**US&R General Memorandum 2013-095 – Announcement of the Sponsoring Agency Chiefs’  
Meeting – December 3, 2013**

**Page 2**

Questions regarding this meeting may be directed to Chief Scott Graham, MD-TF1 (240-876-1260/[scott.graham@montgomerycountymd.gov](mailto:scott.graham@montgomerycountymd.gov)), Buddy Ey, MD-TF1 (301-252-4197/[buddy.ey@montgomerycountymd.gov](mailto:buddy.ey@montgomerycountymd.gov)), or Catherine Deel in the US&R Branch office (202-212-3796/[catherine.deel@fema.dhs.gov](mailto:catherine.deel@fema.dhs.gov)).

cc:

US&R Strategic Group Members  
US&R Branch Staff

Kozak, Rebecca

**From:** Hyatt Regency Bethesda <groupcampaigns@pkghlrss.com>  
**Sent:** Friday, October 25, 2013 10:31 AM  
**To:** Deloach Reed, Teresa  
**Subject:** Hyatt Regency Bethesda Reservation Confirmation



FEMA URBAN SEARCH& RESCUE ~ 30-Nov-2013 - 10-Dec-2013 ~ Hyatt  
Regency Bethesda

Dear TERESA DELOACHREED,

We are pleased to confirm your reservations at the Hyatt Regency Bethesda. The staff of the Hyatt Regency Bethesda is looking forward to your arrival as part of the FEMA URBAN SEARCH& RESCUE. Should your travel plans change and you need to make changes to your reservations, please [click here](#) or call 888-421-1442.

We look forward to welcoming you to the Hyatt Regency Bethesda.

- The Staff of Hyatt Regency Bethesda

**Reservation Details**

Online Confirmation:	327F3NBH
Date Booked:	25-Oct-2013
Reservation Name:	TERESA DELOACHREED
Arrival Date:	02-Dec-2013
Departure Date:	04-Dec-2013

Room Type:	1 King Bed		
Number of Rooms:	1		
Number of Guests:	1		
Night by Night Rate:	<b>Date</b>	<b>Guest(s)</b>	<b>Status</b>
	02-Dec-2013	1	Confirmed
	03-Dec-2013	1	Confirmed
	<b>Additional Guest</b>	<b>Rate</b>	
	Second Guest	0.00	
	Third Guest	0.00	
	Fourth Guest	0.00	
	Fifth Guest	0.00	
Total Charge:	368.00		
Tax Disclosure:	Room rates shown do not include 13% room tax (subject to change).		
Cancel Policy:	All cancellations received after 3pm hotel time, 1 day prior to the date of arrival will be billed for 1 nights room and tax.		

x

x

x