Valid for overnight and/or out-of-state travel Revised 1-08-2019

REQUEST DATE: 7/3	3/2023	
NAME:	_ TITLE:	Housing & Community Developr
DEPARTMENT: CDC	ACCOUNT CODE:	5000-1440
DEL ARTIMENT. OBO	ACCOUNT CODE	3000-1440
PURPOSE OF TRIP: (explain fully the	necessity of making the trip)	
	anner to attend the National Association for Counational Conference and Training. 100% Communi	
DESTINATION: Salt Lake C	ity, UT	
DATE OF DEPARTURE: 9/18/20:	23 DATE OF RETURN ARRIVAL:	9/21/2023
(Please include a detailed explanation i		9/21/2023
Please indicate the estimated amour REGISTRATION: TRANSPORTATION: LODGING MISCELLANEOUS EXPENSES (parkir	ng, mileage, etc.)	\$605.00 \$700.00 \$630.00 \$175.00
RENTAL CAR: (explain fully the necess	sity)	\$0.00
REFERENCE MATERIALS:		\$0.00
MEALS: (Per Diems)		\$224.00
TOTAL		\$2,334.00
RE' Signatur	VIEWED BY AND DATE APPROVED:	
Department Head:	(Signature)	Date: 7/6/23
Committee Name:		Date:
oommittoo Humo.	ALL OVERNIGHT TRAVEL	<u> </u>
0		
County Board:	ONLY OUT-OF-STATE TRAVEL	Date:

Valid for overnight and/or out-of-state travel Revised 1-08-2019

REQUEST DATE:	7/3/2023		
NAME:		TITLE: S	r. Housing/Com. Dev. Planner
	•		
DEPARTMENT: Comm	unity Services - CDC	ACCOUNT CODE:	5000-1440
PURPOSE OF TRIP: (explain full	y the people ity of making th	o trin\	
Senior Housing and Community [for County Community &
Economic Development (NACCE Block Grant funded.			
DESTINATION: Salt La	ake City, UT		
DATE OF DEPARTURE: 9/	18/2023 DATE	OF RETURN ARRIVAL:	9/21/2023
(Please include a detailed explana	ation if different from official	business dates)	
Please indicate the estimated a	mount for each applicable	e expense.	\$605.00
TRANSPORTATION:			\$650.00
LODGING			\$630.00
MISCELLANEOUS EXPENSES (parking, mileage, etc.)		
RENTAL CAR: (explain fully the n	ecessity)		\$0.00
REFERENCE MATERIALS:			\$0.00
MEALS: (Per Diems)			\$224.00
TOTAL			\$2,359.00
Sign	REVIEWED RY AND ature on File	DATE APPROVED:	11
Department Head:	(Signature)		Date: 7/6/23
Committee Name:			Date:
	ALL OVERNIGHT TRAV	EL	
County Board:			Date:
<u>.</u> .	ONLY OUT-OF-STATE	TRAVEL	

Valid for overnight and/or out-of-state travel Revised 1-08-2019

REQUEST DATE:	7/3/2023		
NAME:		TITLE:	CD Manager
DEPARTMENT: C	CDC	ACCOUNT CODE:	5000-1440
DUDDOOF OF TOIR (
PURPOSE OF TRIP: (expla			nit. 9 Farmania Davidaniani
		National Association for County Commu Training. 100% Community Developmen	
DESTINATION: S	Salt Lake City, UT		
DATE OF DEPARTURE:	9/18/2023	DATE OF RETURN ARRIVAL:	9/21/2023
		from official business dates)	0121120
Please indicate the estima	ited amount for eac	h applicable expense.	
REGISTRATION:			\$605.00
TRANSPORTATION:			\$650.00
LODGING			\$630.00
MISCELLANEOUS EXPENS	SES (parking, mileag	e, etc.)	
RENTAL CAR: (explain fully	the necessity)		\$0.00
REFERENCE MATERIALS:			\$0.00
MEALS: (Per Diems)			\$224.00
TOTAL			\$2,284.00
	REVIEWED	BY AND DATE APPROVED:	//
Department Head: _	(Signatur	e)	Date: 7/6/23
Committee Name:			Date:
3 	ALL OVE	RNIGHT TRAVEL	
County Board: _			Date:
	ONLY O	UT-OF-STATE TRAVEL	

Valid for overnight and/or out-of-state travel Revised 1-08-2019

REQUEST DATE: 7	7/3/2023	
NAME:	TITLE.	Housing & Com Day Dlanca
INAIVIE:	- IIILE:	Housing & Com Dev Planner
DEPARTMENT: CDC	ACCOUNT CODE:	5000-1440
	A CONTRACTOR OF THE PROPERTY O	
PURPOSE OF TRIP: (explain fully the		
	nt Planner to attend the National Association for Co acational Conference and Training. 100% Commun	
DESTINATION: Salt Lake	City, UT	
DATE OF DEPARTURE: 9/18/2	023 DATE OF RETURN ARRIVAL:	9/21/2023
(Please include a detailed explanation	n if different from official business dates)	
Please indicate the estimated amount REGISTRATION: TRANSPORTATION: LODGING MISCELLANEOUS EXPENSES (park	king, mileage, etc.)	\$605.00 \$650.00 \$630.00 \$175.00
RENTAL CAR: (explain fully the nece	essity)	\$0.00
REFERENCE MATERIALS:		\$0.00
MEALS: (Per Diems)		\$224.00
TOTAL		\$2,284.00
	EVIEWED BY AND DATE APPROVED:	-1,
Department Head:	(Signáture)	Date: 7/6/23
Committee Name:	ALL OVERNIGHT TRAVEL	Date:
County Board:	ONLY OUT-OF-STATE TRAVEL	Date: