

## LASSEN COUNTY SHERIFF'S OFFICE

1415 Sheriff Cady Lane Susanville, CA 96130

**Administration** Phone: (530) 251-8013 Fax: (530) 251-2884 **Dispatch**Phone: (530) 257-6121
Fax: (530) 257-9363

**Civil**Phone: (530) 251-8014
Fax: (530) 251-2884

Adult Detention Facility Phone: (530) 251-5245 Fax: (530) 251-5243

Dean F. Growdon Sheriff - Coroner

To:

Lassen County Board of Supervisors

From:

Amy Foster, Sergeant

Date:

Wednesday July 3, 2019

Agenda Date:

July 16th, 2019

Discussion:

Two Correctional Sergeants are scheduled to attend the AJA Command Academy. This course will be held at Las Colinas Detention and Reentry Facility 451 Riverview Parkway Santee, CA 92071 August 5<sup>th</sup> through August 9<sup>th</sup>. The second week will be held at Board of State and Community Corrections 2590 Venture Oaks Drive Sacramento, CA 95833. The Sergeants will stay in San Diego for week one and will stay in Sacramento for week two. The up-front training costs will exceed \$2000 and require advance Board Authorization pursuant to the Lassen County Travel Policy. A portion of this course is reimbursed by the California Standards and Training for Corrections. The training costs are as follows:

AJA Command Academy	Per person	Per Person
Tuition/Registration Fees	\$1,200	\$1,200
Lodging	\$2,015.45	\$2015.45
Per Diem	\$762	\$762
Travel	\$374.97	\$374.97
Rental car	\$369.30	
Total (Est)	\$4,721.72	\$4,352.42

#### **Funding:**

These training costs would be expended from the conferences and training line in the Sheriff's Jail Budget 130-0525-(3002901)

Recommendation:

That the Board of Supervisors authorizes the listed training expenditures for required training, and approves per diem and tuition provided prior to the training session.

The County Travel Policy and bargaining unit MOUs can be found on the county intranet at I:\Policies and Procedures

Incomplete Travel Authorizations and claim forms will be returned to the department,

Once a Travel Authorization Form has been signed by the appropriate authority is should not be changed - enter actual expense in the Actual column, Questions regarding how to complete County forms or allowable expenses should be referred to the Lassen County Auditor's Office.

EMPLOYEE	NAME:	Christopher Moberg						BARGAINING UNIT:	POA	
DEPARTM	IENT:			Lassen C	County She	riff				
	FUND	130	B/U	0525	ACCOUNT					
TRAVEL DETAIL	<u>.s</u>									
DATES:	10/20/2019	through:	10/25/2019				TIME DEPARTED:	4pm	□ <b>A.</b> M	<b>☑</b> •M
FROM:	Susanville (City)	TO:	Sacramento (City)			,	TIME RETURNED:	10pm	□ <b>A</b> ,M	<b>☑</b> P.M.
MODE OF TI	RAVEL (Sele	ct from list):	COUNTY CA	AR		NATURE	OF BUSINESS:	AJA Command Aca	demv	
	,						Estimated	Actual	Date Paid or	Notes or special
						Registration		(if different)	check number	instructions
		Reimburs	able miles		X	\$0.535				
		rtoimbaro	abio mileo			ransportation				
Lodging: Numbe	er of Days	5	@	\$		per day	1,113.45			
Date:	10/20/19	10/21/19	10/22/19	10/23/19	1024/19	10/25/19				
Breakfast @ \$ 11.00	16.00	16,00	16,00	16,00	16.00	16,00				
Lunch @ \$12.00	17.00	17.00	17.00	17.00	17.00	17.00				
Dinner @ \$23.00	28.00	28.00	28.00	28.00	28.00	28.00	N			
Per my bargaining uni		61.00	61.00	61.00	61.00	61,00	366.00			
reimbursed at reasona	able actual cost	s. Itemized re	ceipts							
understand that perdid	em for meals ar		/ not							
	,-									
Incidental Expenses										
1000 COMPANIES V						-				
· ·			т/	OTAL ESTIMA	ATED COST	OF TRAVEL	\$ 1,479.45			
			T (	JIAL LOTINA	AILD COST		CTUAL EXPENSE			
					TRAV		E TO EMPLOYEE			
					AM	IERICAN EXF	RESS CHARGES			
						NET DU	E TO EMPLOYEE			
Department Hea	d Authoriza	ation for Tr	avel				The undersigned,	under penalty of perjury,	states that the items lister	d on this claim are true
(payment will not be m							nreviously paid at	ne amounts are properly on that the claim is being pertify from my own knowle	procented within one year	r of when the evaceee
							ciaim were ordere	d for use by the departme een delivered or performe	ni for the purpose indicat	ed and that the articles
Department Head				Date approve	ed		provisions of Artic interest)	te 4, Chapter 1, Division 4	of Title 1 of the governm	ent code (conflict of
Fiscal Officer (if ne	CASSAN/)	-		Date approve	ed					
i isour omeer (ii ne	ocosury,			Date approv						
Director				Date approve	ed					
CAO (if necessary)				Date approv	ed by Board	(if		Signature of Claima	nt	Date
				necessary)						

Per Lassen County Travel Policy #01-P01 all travel outside of the county must be authorized in advance.

Department Heads shall authorize travel up to \$1500. The CAO shall authorize any travel between \$1500 - \$2000. The Board of Supervisors shall authorize any travel over \$2000. All travel requests by members of boards and commissions must be authorized in advance by the Board of Supervisors and/or the CAO.

The County Travel Policy and bargaining unit MOUs can be found on the county intranet at I:\Policies and Procedures.

Incomplete Travel Authorizations and claim forms will be returned to the department,

Once a Travel Authorization Form has been signed by the appropriate authority is should not be changed - enter actual expense in the Actual column, Questions regarding how to complete County forms or allowable expenses should be referred to the Lassen County Auditor's Office.

EMPLOYEE	NAME:	Amy Foster					BARGAINING UNIT:	POA		
DEPARTM	ENT:			Lassen (	County She	riff				
	FUND	130	B/U	0525	ACCOUNT					
TRAVEL DETAIL	<u>s</u>									
DATES:	10/20/2019	through:	10/25/2019				TIME DEPARTED:	4pm	□A.M	<b>☑</b> Þ.M
FROM:	Susanville (City)	TO:	Sacramento (City)		5.		ΓΙ <mark>ΜΕ RETURNED</mark> :	10pm	<b>□</b> A.M	<b>₽</b> .M.
MODE OF TR	RAVEL (Sele	ct from list):	COUNTY CA	R		NATURE	OF BUSINESS:	AJA Command Aca	demv	
		•					Estimated	Actual (if different)	Date Paid or check number	Notes or special instructions
						Registration		(ii dillerent)	Check humber	mstructions
		Reimburs	able miles		X	\$0.535	,			
					Secondary T	ransportation				
Lodging: Numbe	r of Days	5	@	\$	222.69	per day	1,113.45			
Date:	10/20/19	10/21/19	10/22/19	10/23/19	1024/19	10/25/19				
Breakfast @ \$ 11.00	16,00	16.00	16,00	16.00	16,00	16,00	8			
Lunch @ \$12.00 Dinner @ \$23.00	17.00 28.00	17.00 28.00	17.00 28.00	17.00	17.00	17.00				
Dinner @ \$23.00	61.00	61.00	61.00	28.00 <b>61.00</b>	28.00	28.00 <b>61.00</b>	366.00			*
Per my bargaining unit	's MOU I may	request meals	to be		51,50	0.1100	000.00			
will be attached to all ounderstand that perdie	laims for reimb	oursement. I	· ·							
be mixed on any one of		id receipts may	riiot							
Incidental Expenses										
3										
			т	OTAL ESTIMA	ATED COST	OF TRAVEL	\$ 1,479.45			
						TOTAL A	CTUAL EXPENSE	_		
					TRAV	EL ADVANC	E TO EMPLOYEE			
					AM	ERICAN EXF	RESS CHARGES			
						NET DU	E TO EMPLOYEE			
Department Head Authorization for Travel (payment will not be made without proper authorization)							and correct, that the previously paid, and were incurred. I conclaim were ordered	under penalty of perjury, ne amounts are properly o nd that the claim is being ertify from my own knowle d for use by the departme	lue this claimant, that no loresented within one year edge, the the articles or so nt for the purpose indicat	items have been of when the expenses ervices listed on this ed and that the articles
Department Head Date approved							provisions of Articl	een delivered or performe le 4, Chapter 1, Division 4	ed and that this claim doe of Title 1 of the governm	s not violate any ent code (conflict of
Fiscal Officer (if ne	cessary)	-		Date approv	ed					
Director		-	,	Date approv	ed		2.0			
CAO (if necessary)	AO (if necessary)  Date approved by Board (if necessary)					(if	fa.	Signature of Claima	nt	Date

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EMPLOYEE	NAME:	Christopher Moberg						BARGAINING UNIT:	POA .	
DEPARTI	IENT:			Lassen (	County She	riff				
	FUND	130	B/U	0525	ACCOUNT					
TRAVEL DETAIL	<u>.s</u>									
DATES:	8/4/2019	through:	8/9/2019				TIME DEPARTED:	7am	ŒAM	<b>₽</b> M
FROM:	Susanville (City)	TO:	San Diego (Cily)		<b>.</b>	-	Γ <mark>ΙΜΕ RETURNE</mark> D:	2am	. Δy w	☑P.M.
MODE OF T		-+ f li+4\.				NATURE	OF BUOINEGO.	A 14 Command Acc	ala	
MODE OF TI	RAVEL (Sele	ct from fist).	AIR			NATURE	OF BUSINESS: Estimated	AJA Command Aca Actual	Date Paid or	Notes or special
								(if different)	check number	instructions
						Registration	1,200.00			
		Reimburs	able miles		X	\$0.535	*	-		
l - d-in Ni						ransportation	374.97			
Lodging: Number	er of Days	5	@	\$	180.40	per day	902.00			
Date:	8/4/19	8/5/19	8/6/19	8/7/19	8/8/19	8/9/19				
Breakfast @ \$ 11.00	17.00	17.00			17.00		1			
Lunch @ \$12.00	18,00	18,00	18.00	18.00	18.00					
Dinner @ \$23.00	31.00	31.00	31.00	31.00	31.00	31.00				
TOTALS				66.00	66.00	66.00	396.00			**
Per my bargaining uni reimbursed at reasons	t's MOU I may able actual cos	request meals ts. Itemized re	to be ceipts							
will be attached to all understand that perdic			y not							
be mixed on any one	day.									
Incidental Expenses						-				
						-				
			Т	OTAL ESTIM	ATED COST	OF TRAVEL	\$ 2,872.97			
							CTUAL EXPENSE			
							E TO EMPLOYEE			
					AN		PRESS CHARGES			
						NET DU	E TO EMPLOYEE			I .
Department Hea							and correct, that t	under penalty of perjury, he amounts are properly nd that the claim is being	due this claimant, that no	items have been
							were incurred. I d	certify from my own knowled for use by the department	edge, the the articles or s	services listed on this
Department Head			-	Date approv	red		or services have to provisions of Artic	peen delivered or perform tle 4, Chapter 1, Division	ed and that this claim do	es not violate any
						interest)				
Fiscal Officer (if ne	cessary)			Date approv	red					
Director		-		Date approv	red		8	<u>,                                    </u>		
							0			
CAO (if necessary)			•	Date approv	ed by Board	l (if		Signature of Claima	ant	Date

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EMPLOYEE	NAME:			Am	y Foster		BARGAINING UNIT:	POA		
DEPARTM	IENT:	Lassen County Sheriff								
	FUND	130	B/U	0525	ACCOUNT					
TRAVEL DETAIL	<u>.s</u>									
DATES:	8/4/2019	through:	8/9/2019				TIME DEPARTED:	7am	<b>□</b> A.M	<b>□</b> •M
FROM:	Susanville	TO:	San Diego				TIME RETURNED:	2am	IZA.M	☑Þ.M.
1	(City)		(City)		<u>.</u>					
MODE OF T	RAVEL (Sele	ct from list):	AIR			NATURE	OF BUSINESS:	AJA Command Aca	demy	
							Estimated	Actual (if different)	Date Paid or check number	Notes or special instructions
						Registration	1,200.00			
		Reimburs	able miles		x	\$0.535				
						ransportation	374.97			
Lodging: Number	er of Days	5	@	\$	180.40	per day	902.00			
Date:	8/4/19	8/5/19	8/6/19	8/7/19	8/8/19	8/9/19				
Breakfast @ \$ 11.00	17.00	17.00	17.00	17.00	17.00	17.00				
Lunch @ \$12.00	18.00	18.00	18.00	18.00	18.00	18.00	-			
Dinner @ \$23.00	31_00	31.00	31.00	31.00	31.00	31.00				
TOTALS	66.00	66.00	66.00	66.00	66.00	66.00	396.00			
Per my bargaining un reimbursed at reasons	able actual cos	ts. Itemized re								
will be attached to all understand that perdic			y not				369.30			rental car
be mixed on any one	day									
Incidental Expenses						-				
						-				
			Т	OTAL ESTIM	ATED COST	OF TRAVEL	\$ 3,242.27			
						TOTAL A	CTUAL EXPENSE	-		
					TRAN	EL ADVANC	E TO EMPLOYEE			
22					AN	TERICAN EXI	PRESS CHARGES			
						NET DU	E TO EMPLOYEE	-		
Department Hea							The undersigned,	under penalty of perjury,	states that the items liste	d on this claim are true
(payment will not be m	ade without pr	oper authorizat	ion)				previously paid, a	the amounts are properly on that the claim is being certify from my own knowle	presented within one yea	r of when the expenses
Entered Street Street Street			<b>4</b> 5 8				claim were ordere or services have I	ed for use by the department open delivered or perform	ent for the purpose indica ed and that this claim do	ted and that the articles
Department Head	ead Date approved provisions of interest).						provisions of Artic	le 4, Chapter 1, Division 4	of Title 1 of the governm	nent code (conflict of
Fig. and Office of the con-										
Fiscal Officer (if ne	cessary)			Date approv	eu					
Director			5 :	Date approv	red			-		
Director				Sate approv	- Cu					
CAO (if necessary)			ea 3	Date approv	ed by Board	l (if		Signature of Claima	ınt	Date
(ii necessary)				necessary)	1000 DELTATION	10 <b>9</b> 15		e.g.iacaro oi oiaille		

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# California Jail Command Academy



Save the Date! STC # 4750-085906

Be a part of Class #4 of the California Jail Command Academy. The Academy will be comprised of two one-week sessions. Below is a tentative overview of the instruction:

#### **Curriculum Topics**

Week One—San Diego August 5 – 9, 2019

- Leadership
- Leading and Managing Change
- Managing Data and Data-Driven Decisions
- Criticism and Accountability
- Constitutional Law
- Critical Incident Management & Preparedness
- Legal Challenges in California Jails
- Generations at Work
- Trends in California Corrections

Week Two—Sacramento
October 21 — October 25, 2019

- Self-Discovery
- Managing Your Jail's Workforce
- Collaboration for Jail Leaders
- Agency Culture
- Employee Recruitment
- Power & Influence
- California-Based Challenges
- Strategic Planning/Budget
- Ethics for Jail Leaders
- Developing Your Agency's Next Leader

Target Audience: Mid-level Managers Tuition (STC # 4750-085906) \$1,200.00

Registration opens on May 31 at aja.org

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## FY 2019 Per Diem Rates for ZIP 92108

Meals & Incidentals (M&IE) Breakdown

Primary Destination	County	M&IE Total	Continental Breakfast/Breakfast	Lunch	Dinner	Incidental Expenses	First & LastDay of Travel
San Diego	San Diego	\$71	\$17	\$18	\$31	\$5	\$53.25

#### **Amy Foster**

From:

Marriott Hotels & Resorts Reservations < reservations@res-marriott.com>

Sent:

Tuesday, July 02, 2019 3:39 PM

To:

Amy Foster

Subject:

Reservation Confirmation #99468341 for San Diego Marriott Mission Valley

ENHANCE YOUR STAY | SUMMARY OF CHARGES | CONTACT US



## San Diego Marriott Mission Valley

₱ 8757 Rio San Diego Drive San Diego California +1-619-692-3800 92108 USA

Thank you for booking directly with us, Amy Foster.

## We look forward to hosting you.

Sun, Aug 04, 2019 - Fri, Aug 09, 2019

Confirmation Number: 99468341





Check-In:

Sunday, August 4, 2019

04:00 PM

Check-Out: Friday, August 9, 2019

11:00 AM

Number of rooms	2 Roon					
Guests per room	2 Adults					
Guarantee Method	Credit Card Guarantee, Visa					
Total for Stay (all rooms)	1,804.00 USD					
8						
Room 1						
Room Type >	Guest room, 1 King or 2 Double, City view, Balcony					
Guaranteed Requests:						
None						
ALL REQUESTS >						
Room 2						
Room Type >	Guest room, 1 King or 2 Double, City view, Balcony					
Guaranteed Requests:	are are					
None						
ALL REQUESTS >	*					

Modify or Cancel Reservation

ways of thinking. With over 550 properties, from urban to resort, there is a Marriott Hotel almost anywhere you want to go.

## BONVOY

## Member Benefits

## **Amy Foster**

You could earn 16,000 points during your stay.







Members get free nights, room upgrades, free Wi-Fi, exclusive offers, Member Rates and more.

Join

## **Summary Of Charges**

Sunday, August 4, 2019 - Friday, August 9, 2019

5 Nights at 160.00 USD per night per room

Govt/military rate, federal government ID required

Taxes & Fees (per night per room)

Estimated Government Taxes & Fees

20.40 USD

Totals

Total for Stay (per room)

902.00 USD

Total for Stay (all rooms)

1,804.00 USD

#### Other Charges

On-site parking, fee: 29 USD daily

Valet parking, fee: 39 USD daily

Garage height clearance 6 feet 8 inches

## Rate Details & Cancellation Policy

- You may cancel your reservation for no charge until Friday, August 2, 2019 (2 day[s] before arrival).
- Please note that we will assess a fee of 360.80 USD if you must cancel after this deadline.
- Please be prepared to show proof of eligibility for your rate (such as a membership card, corporate or government identification card, or proof of your age).

• Please note that a change in the length or dates of your reservation may result in a rate change.

#### Rate Guarantee Limitation(s)

• Changes in taxes or fees implemented after booking will affect the total room price.

#### **Additional Information**

Upon check-in an authorization request will be placed on your credit/debit card in an
amount equal to the cost of the room, tax and incidental charges for the length of
your stay (up to seven nights). If your stay exceeds seven nights, an additional
authorization may be requested for the entire amount of your stay (room, tax and
incidentals). Upon check-out, your payment card will be charged for the actual
amount incurred during your stay.

## Enjoy instant benefits because you booked directly with us







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Call 1-800-228-9290 in the US and Canada

For everywhere else, call our Worldwide Telephone Numbers

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## FY 2019 Per Diem Rates for ZIP 95833

Meals & Incidentals (M&IE) Breakdown

Primary Destination	County	M&IE Total	Continental Breakfast/Breakfast	Lunch	Dinner	Incidental Expenses	First & LastDay of Travel
Sacramento	Sacramento	\$66	\$16	\$17	\$28	\$5	\$49.50

#### **Amy Foster**

From:

Hilton Garden Inn Confirmed <noreply@h4.hilton.com>

Sent:

Tuesday, July 02, 2019 5:09 PM

To:

Amy Foster

Subject:

Your Oct-20-2019 Confirmation #3118314732



### Christopher Moverg, join Hilton Honors

sign up



## **Your Upcoming Stay**

Hilton Garden Inn Sacramento/South Natomas 2540 Venture Oaks Way Sacramento CA 95833-3200, US T: 19165685400

**Confirmation #3118314732** 

Sun

20



25

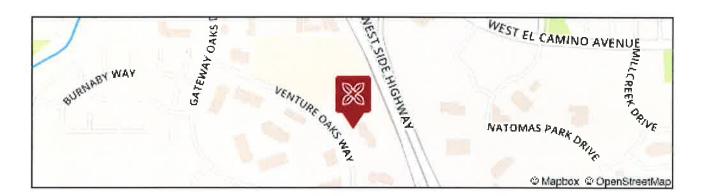
Fri

October

Check In: 3:00PM

October

Check Out: 12:00PM



### **Your Room Information**

1 KING BED W/ SOFABED

Rooms: 1
Guests: 1 Adult

CHRISTOPHER MOVERG, ENJOY A SPECIAL ROOM

ENJOY A SPECIAL ROOM \$20 UPGRADE FOR ONLY

SHOW MY CUSTOM UPGRADE



## **Your Rate Information**

**GOV CONTRACTOR RATE** 

**Rate Per Night:** 

Oct-20-2019 - Oct-25-2019

195.00 USD

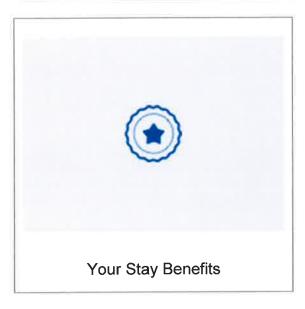
#### **Total for Stay per Room Rate:**

975.00 USD

Taxes 138.45 USD

## **Total for Stay**

1113.45 USD









Disclaimer: Room interior varies by hotel and the room booked may differ from room shown in this email.

† Visit Hilton.com/guarantee to learn more about our Best Price Guarantee.

Using a debit/credit card to check in? A hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through date of check-out. Holds may not be released for 72 hours from date of check-out or longer at the discretion of your card issuer. Click here if you need to modify or cancel your reservation.

Any change to your arrival or departure date or room type is subject to hotel availability and may result in a possible rate change or additional fee. Changes also may not be possible at a later date. Please click here to see all rules and restrictions.

This message and any attachments may contain confidential information. If it has been sent to you in error or if you have questions regarding your reservation, please contact Hilton Reservations and Customer Care at 1-800-4HONORS (446-6677), or click here.

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Hilton Reservations and Customer Care | 2050 Chenault Drive | Carrollton, Texas 75006, USA

2019\_R03\_B02\_NMK\_OTR\_V33\_MULTIBR\_H03\_ML

<sup>\*</sup>Standard Wi-Fi is free for Hilton Honors members. Premium, if available, has a fee (except for Diamond members). Wi-Fi access is not free in meeting

spaces or at properties with a resort charge.

\*\* Service of alcoholic beverages is subject to state and local laws, Must be of legal drinking age. Hilton Requests Upon Arrival(TM) items are subject to availability.

#### **Amy Foster**

From:

Hilton Garden Inn Confirmed <noreply@h4.hilton.com>

Sent:

Tuesday, July 02, 2019 5:09 PM

To:

Amy Foster

Subject:

Your Oct-20-2019 Confirmation #3119623797



### Amy Foster, join Hilton Honors

sign up



## **Your Upcoming Stay**

Hilton Garden Inn Sacramento/South Natomas 2540 Venture Oaks Way Sacramento CA 95833-3200, US T: 19165685400

**Confirmation #3119623797** 

Sun

20

5 nights

25

Fri

October

Check In: 3:00PM

October

Check Out: 12:00PM



### **Your Room Information**

1 KING BED W/ SOFABED

Rooms: 1
Guests: 1 Adult

AMY FOSTER,
ENJOY A SPECIAL ROOM \$20
UPGRADE FOR ONLY
SHOW MY CUSTOM UPGRADE

## **Your Rate Information**

**GOV CONTRACTOR RATE** 

Rate Per Night:

Oct-20-2019 - Oct-25-2019

195.00 USD

Total for Stay per Room Rate:

975.00 USD

Taxes

138.45 USD

**Total for Stay** 

1113.45 USD









Disclaimer: Room interior varies by hotel and the room booked may differ from room shown in this email.

\*Standard Wi-Fi is free for Hilton Honors members. Premium, if available, has a fee (except for Diamond members). Wi-Fi access is not free in meeting spaces or at properties with a resort charge.

\*\* Service of alcoholic beverages is subject to state and local laws, Must be of legal drinking age. Hilton Requests Upon Arrival(TM) items are subject to availability.

† Visit Hilton com/guarantee to learn more about our Best Price Guarantee.

Using a debit/credit card to check in? A hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through date of check-out. Holds may not be released for 72 hours from date of check-out or longer at the discretion of your card issuer. Click here if you need to modify or cancel your reservation.

Any change to your arrival or departure date or room type is subject to hotel availability and may result in a possible rate change or additional fee. Changes also may not be possible at a later date. Please click here to see all rules and restrictions.

This message and any attachments may contain confidential information. If it has been sent to you in error or if you have questions regarding your reservation, please contact Hilton Reservations and Customer Care at 1-800-4HONORS (446-6677), or click here.

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Hilton Reservations and Customer Care | 2050 Chenault Drive | Carrollton, Texas 75006, USA

2019\_R03\_B02\_NMK\_OTR\_V33\_MULTIBR\_H03\_ML





FLIGHT | HOTEL | CAR | VACATIONS SPECIAL OFFERS RAPID REWARDS®



## Your car is booked!

We're sending a confirmation email to afoster@co.lassen.ca.us right now.

#### **Trip summary**



Car

CONFIRMATION # 11259685US3

PICK-UP

SAN

**ESTIMATED CAR TOTAL** \$369.30

## 8/4 - San Diego

AUG 4 - 9

## Budget, Full-size - San Diego, CA (SAN)

Confirmation # 11259685US3

DRIVER

**Amy Price** 

#### Car details

PICK-UP

8/4/19

2:00PM

SAN

San Diego, CA

RETURN

8/9/19

8:00PM

SAN

San Diego, CA



#### Pick-up instructions

- · Rental counter is located outside of the airport terminal
- · Shuttle is provided



Full-Size: Chevrolet Impala or similar

RATE BREAKDOWN

MILEAGE

BASE RATE

1 week at \$254.00

Special rate

Unlimited

\$254.00

Taxes & fees

\$115.30

**Estimated car total** 

\$369.30

Includes approximate taxes and fees. Excludes rental car extras.

#### Car policies

- 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.

**ESTIMATED TOTAL REMAINING** 

(Due at car return)

\$369.30

#### **Amy Foster**

From:

Southwest Airlines <southwestairlines@ifly.southwest.com>

Sent:

Tuesday, July 02, 2019 3:03 PM

To:

Amy Foster

Subject:

Amy Louise Price's 08/04 San Diego trip (TDC533): Your reservation is confirmed.

Here's your itinerary and other important travel information.

View our mobile site | View in browser



#### Manage Flight | Flight Status | My Account

Confirmation date: 07/02/2019



#### Hello friends,

We're looking forward to flying together! It can't come soon enough, Below you'll find your itinerary, important travel information, and trip receipt. See you onboard soon!

#### **AUGUST 4 - AUGUST 9**

## RNO > SAN

Reno/Tahoe to San Diego

### Confirmation # TDC533

PASSENGER Amy Louise Price

RAPID REWARDS #

Join or Log in

TICKET#

5262494181984

**EXPIRATION**<sup>1</sup>

July 1, 2020

EST. POINTS EARNED

1,934

PASSENGER

**Christopher John Moberg** 

RAPID REWARDS #

Join or Log in

TICKET#

5262494181983

EXPIRATION<sup>1</sup>

July 1, 2020

**EST. POINTS EARNED** 

1,934

Rapid Rewards® points are only estimations.

## Your itinerary

Flight 1: Sunday, 08/04/2019

Est Travel Time 1h 30m

Wanna Get Away®

FLIGHT # 3418

**DEPARTS** 

RNO 11:10 AM

Reno/Tahoe



San Diego

**Flight 2:** Friday, 08/09/2019

Est. Travel Time: 1h 25m

Wanna Get Away®

FLIGHT # **1527**  **DEPARTS** 

**SAN 09:50**PM

San Diego

► RN

ARRIVES

RNO 11:15PM

Reno/Tahoe

## **Payment information**

Total cost		Payment			
Air - TDC533		Visa ending in 7325			
Base Fare	\$ 644.40	Date: July 2, 2019			
U.S. Transportation Tax	\$ 48.34	Payment Amount: \$374.97			
U.S. 9/11 Security Fee	\$ 22.40				
U.S. Flight Segment Tax	\$ 16.80	Visa ending in 7325			
U.S. Passenger Facility Chg	\$ 18.00	Date: July 2, 2019			
Total	\$ 749.94	Payment Amount: \$374.97			

Fare Rules: If you decide to make a change to your current itinerary it may result in a fare increase. In the case you're left with travel funds from this confirmation number, you're in luck! We're happy to let you use them towards a future flight for the individual named on the ticket, as long as the new travel is completed by the expiration date.

Your ticket numbers: 5262494181984, 5262494181983

## Prepare for takeoff



**24 hours** before your departure:

Check-in on Southwest.com® or using the Southwest Mobile App. Use your mobile device and receive a mobile boarding pass.



30 minutes before your departure:

Arrive at the gate prepared to board.



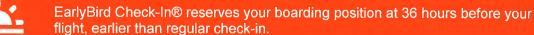
10 minutes before your departure:

This is the last opportunity to board your flight if you are present in the gate area and have met all check-in requirements.

If you do not plan to travel on your flight: Things happen, we understand! Please let us know at least 10 minutes prior to your flight's scheduled departure if you won't be traveling. If you don't notify us, you may be subject to our No Show Policy.

See more travel tips

#### Don't miss out on automatic check-in



Get it now >



### Save up to 30%

**Budget** 

and earn up to 2,400 Rapid Rewards points with Budget\* on your trip.

Book car >



#### Earn up to 10,000 Rapid Rewards® points per night

Choose a hotel in San Diego.



#### Have questions about your upcoming trip?

Get all the answers before you leave for the airport.

Book hotel >

Prepare now >

5262494181984: NONREF/NONTRANSFERABLE STANDBY REQ UPGRADE TO Y -BG WN RNO WN SAN231.33WN RNO90.87USD322.20END ZP RNO4.20SAN4.20 XF RNO4.5SAN4.5 5262494181983: NONREF/NONTRANSFERABLE STANDBY REQ UPGRADE TO Y -BG WN RNO WN SAN231,33WN RNO90.87USD322.20END ZP RNO4.20SAN4,20 XF RNO4.5SAN4.5

WLN7PNR WLN7PNR ELNVKNR ELNVKNR

No Show Policy: you must notify Southwest® at least ten (10) minutes prior to your flight's scheduled departure if you do not plan to travel on your flight. Customers who fail to cancel reservations for a Wanna Get Away® fare segment at least 10 minutes prior to travel and who do not board the flight will be considered a no show, and all remaining unused Wanna Get Away funds will be forfeited. All remaining unused Business Select® and Anytime funds will be converted to reusable travel funds. If you no show your reward travel reservation, the points will be redeposited to the purchaser's Rapid Rewards account. Any taxes and fees associated with your reward travel reservation will be held for future use in the form of reusable travel funds under the name of the traveler(s).

Prohibition on Multiple/Conflicting Reservations: to promote seat availability for our Customers, Southwest prohibits multiple reservations for the same Passenger departing from the same city on the same date, or any multiple reservations containing conflicting or overlapping itineraries (such as departures for the same Customer from multiple cities at the same time). Furthermore, without advance notice to the Passenger or purchaser, Southwest may cancel such reservations, or any other reservations that it believes, in its sole discretion, were made without intent to travel. With the exception of Southwest gift cards, funds from proactively canceled reservations by Southwest will be returned to the original form of payment. Reservations paid for with a Southwest gift card will have the amount applied from the gift card held as travel funds for use by the Customer on a future Southwest Airlines flight.

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Southwest Airlines 2702 Love Field Drive Dallas, TX 75235 1-800-I-FLY-SWA (1-800-435-9792)

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## CALIFORNIA JAIL COMMAND ACADEMY REGISTRATION FORM CLASS 4 ST

STC# 4750-085906

Reserve your spot today! You may cancel up to 30 days prior to the start of the California Jail Command Academy. No refunds will be given for cancellations received within 30 days of the class. All cancellations are subject to a \$50 service fee. **Your cancellation must be received in writing via fax or e-mail.** Substitutions will be acceptable. Please direct questions to katrinas@aja.org or conniel@aja.org.

IT IS STRONGLY RECOMMENDED THAT PARTICIPANTS DO NOT PURCHASE AIRLINE TICKETS WITHOUT FIRST CONTACTING AIA FOR PROGRAM CONFIRMATION.

CONTACTING ADATOR TROOPERS CONTINUATION.							
APPLICA	NT INFORMATION						
Name: Amy Foster							
Title: Correctional Sergeant	Rank: Sergeant						
AJA Member #:	E-mail: afoster_1313@co.lassen.ca.us						
Work Phone: 530 251-5258	Cell Phone: 530 310-5022						
AGENC	YINFORMATION						
Facility Name: Lassen County Jail							
Facility Address: 1405 Sheriff Cady Ln							
City: Susanville	State: CA ZIP Code: 96130						
PERSON	AL INFORMATION						
Home Address: 1255 Orlo Dr							
City: Susanville	State: Ca ZIP Code: 96130						
Home Phone: 530 310 -5022	Personal E-mail: amyfoster_1313@yahoo.com						
ADDITIO	NAL INFORMATION						
Would you like your materials to be mailed to your he	ome or work <u>x</u> (select one)						
Shirt Size (circle one): S/ M L XL 2X 3X 4X							
What do you believe is your biggest challenge at you	r facility? Mental Health						
PAYMEN	IT INFORMATION						
Tuition: Please remit your Tuition of \$1,200 per pe	erson no later than July 15, 2019.						
If you will be paying by credit card or a fully execute form and faxing it to 301–790–2941 or by emailing the	d purchase order, you may register by completing this his completed form to katrinas@aja.org.						
If you will be paying by check, please complete this f American Jail Association • 1135 Professional Court • (Make checks payable in U.S. funds, drawn on	Hagerstown, MD 21740-5853						
	□ MasterCard □ American Express □ Discover						
Account #:	· ·						
	Signature of Cardholder:						
Billing Address/ZIP Code:							
Payment Other: PO#:	Please Invoice: X						