

**Texas Commission On Environmental Quality
AGENDA ITEM REQUEST**

AGENDA REQUESTED: July 25, 2012
DATE OF REQUEST: May 9, 2012
**NAME & NUMBER OF PERSON TO CONTACT REGARDING CHANGES TO
THIS REQUEST, IF NEEDED: Barbara Mayer at 239-4739**

CAPTION: Docket No. 2012-0972-MIS. Consideration of gifts and donations of \$500.00 or more in value given to the TCEQ, submitted for approval in accordance with Chapter 575 of the Government Code, concerning acceptance of gifts by certain state agencies. [Elizabeth West]

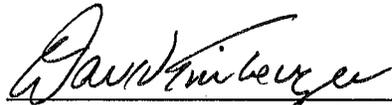
Chief Clerk must send Notice of Application/Hearing:

Type of Matter:

County:

Uncontested:

Contested:



**David Timberger, Director
General Law Division**

CHAPTER 575. ACCEPTANCE OF GIFT BY STATE AGENCY

§ 575.001. Definitions

In this chapter:

(1) "Gift" means a donation of money or property.

(2) "State agency" means a board, commission, council, committee, department, office, agency, or other governmental entity in the executive or judicial branch of state government. The term does not include an institution of higher education as defined by Section 61.003, Education Code.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

§ 575.002. Gifts of \$500 or More

This chapter applies only to a gift that has a value of \$500 or more.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

§ 575.003. Acceptance of Gift by State Agency Governing Board

A state agency that has a governing board may accept a gift only if the agency has the authority to accept the gift and a majority of the board, in an open meeting, acknowledges the acceptance of the gift not later than the 90th day after the date the gift is accepted.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997. Amended by Acts 1999, 76th Leg., ch. 143, § 1, eff. Sept. 1, 1999.

§ 575.004. Record of Gift

A state agency that accepts a gift must record the name of the donor, a description of the gift, and a statement of the purpose of the gift in:

(1) the minutes of the governing board of the agency; or

(2) appropriate agency records, if the agency does not have a governing board.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

§ 575.005. Acceptance of Gift From Party to Contested Case Prohibited

A state agency may not accept a gift from a person who is a party to a contested case before the agency until the 30th day after the date the decision in the case becomes final under Section 2001.144. In this section, "contested case" has the meaning assigned by Section 2001.003.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

TCEQ Interoffice Memorandum

To: Commissioners
Zak Covar
Executive Director

From: Elizabeth West, Senior Attorney 
Contracts, Employment Law and Ethics
General Law Division

David Timberger, Director 
General Law Division

Caroline M. Sweeney, Deputy Director 
Office of Legal Services

DATE:

Caption: **Docket No. 2012-0972-MIS.** Consideration of gifts and donations of \$500.00 or more in value given to the TCEQ, submitted for approval in accordance with Chapter 575 of the Government Code, concerning acceptance of gifts and donations by certain agencies.

Chapter 575 of the Government Code gives some specific direction to state agencies regarding the acceptance of gifts and donations. Chapter 575 of the Government Code provides that the Commission must acknowledge the acceptance of all gifts of money or property with a value of \$500 or more in an open meeting no later than the 90th day after the date the gift is accepted. Chapter 575 of the Government Code further states the name of the donor, a description of the gift or donation, and a statement of the purpose of the gift or donation must be recorded in the minutes. Chapter 575 of the Government Code is attached as Exhibit "A."

A list of gifts and donations is attached as Exhibit "B." A Declaration of Third Party Reimbursement form is submitted for each gift or donation listed in Exhibit "B." The Declaration of Third Party Reimbursement forms are attached as Exhibit "C." The Executive Director's approval memorandum is attached as Exhibit "D."

Attachments

Exhibit "A"

Chapter 575 of the Government Code

CHAPTER 575. ACCEPTANCE OF GIFT BY STATE AGENCY

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Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

Exhibit "B"

List of Gifts and Donations

**TEXAS NATURAL RESOURCE CONSERVATION COMMISSION
DECLARATION OF THIRD PARTY REIMBURSEMENT**

March 2012 through June 2012

Over \$500.00

| REIMBURSING ORGANIZATION | TRAVELERS NAME | DATES OF TRAVEL | DESTINATION | PURPOSE OF TRIP | REIMBURSED | REIMBURSED TOTAL |
|---|--------------------|------------------|-----------------|---|--|------------------|
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Whitney, Christine | 04/25-04/26/2012 | Montgomery, AL | Attend ASTSWMO Mid-Year Meeting | Public Transport: \$28.00 Airfare: \$493.20 Meals: \$153.00 Lodging: \$201.20 Parking: \$30.00 Personal Mileage: \$15.30 Baggage Fees: \$50.00 | \$970.70 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Patton, Bob | 01/09-01/12/2012 | Washington D.C. | To participate in meetings of the Association of State and Territorial Solid Waste Management Officials (ASTSWMO). The benefit was by informing staff on technical issues related to redevelopment of removal action sites at remediation site. | Airfare: \$296.30 Public Transport: \$28.00 Meals: \$200.17 Lodging: \$628.62 Parking: \$34.00 Personal Mileage: \$22.44 Baggage Fees: \$50.00 | \$1,259.53 |

| | | | | | | |
|---|---------------------|------------------|-----------------|---|---|------------|
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Schaefer, Conrad J. | 04/24-04/26/2012 | Montgomery, AL | ASTSWMO Mid Year Meeting | Public Transport: \$28.00 Airfare: \$1,075.20 Lodging: \$94.46 Parking: \$183.00 Other: \$21.00 | \$1,401.66 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Valdez, Omar | 04/24-04/26/2012 | Montgomery, AL | Attend Mid-Year Meeting | Public Transport: \$30.00 Airfare: \$493.20 Meals: \$153.00 Lodging: \$183.00 | \$859.20 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Valdez, Omar | 01/09-01/13/2012 | Washington D.C. | Attend focus group meetings | Public Transport: \$90.00 Airfare: \$506.80 Meals: \$348.00 Lodging: \$846.91 Baggage Fees: \$50.00 | \$1,841.71 |
| Environmental Council of the States (ECOS) | Kidd, Kenneth B. | 04/10-04/13/2012 | Washington D.C. | Attend the Toxic Release Inventory (TRI) National Training Conference | Public Transport: \$93.00 Airfare: \$435.20 Meals: \$120.40 Lodging: \$769.44 | \$1,418.04 |

| | | | | | | |
|--|------------------|------------------|--------------------|---|---|------------|
| Florida Department of Environmental Protection | Martin, Joe | 04/09-04/11/2012 | St. Petersburg, FL | GOMA Microbial Source Tracking Workshop | Public Transport: \$87.60 Airfare: \$380.00 Meals: \$61.00 Lodging: \$250.88 Parking: \$21.00 Misc.: \$80.00 | \$880.48 |
| Health Physics Society (HPS) | Jablonski, Susan | 02/05-02/09/2012 | Dallas, TX | Attend the Health Physics Society Midyear Meeting | Lodging: \$510.76 | \$510.76 |
| ITRC Interstate Technology Regulatory Council | Wilkinson, Brad | 04/15-04/18/2012 | Des Moines, IA | ITRC Spring Municipal Response Team | Airfare: \$884.20 Meals: \$122.00 Lodging: \$282.24 Parking: \$21.00 Personal Mileage: \$25.50 | \$1,334.94 |
| NOAA (National Oceanic and Atmospheric Administration) | Copeland, Weslee | 01/10-01/12/2012 | Baltimore, MD | To attend 2nd GOES-R Satellite Air Quality Proving Ground Advisory Group Workshop | Airfare: \$452.40 Meals: \$152.50 Lodging: \$214.70 Parking: \$21.00 Personal Mileage: \$31.62 | \$872.22 |

| | | | | | | |
|--|--------------------|------------------|-----------------|---|--|------------|
| Nuclear Regulatory Commission | Broussard, Brad | 05/07-05/11/2012 | Albuquerque, NM | Attend Increased Controls Training | <p>Airfare: \$492.69</p> <p>Meals: \$322.00</p> <p>Lodging: \$457.65</p> <p>Parking: \$42.00</p> <p>Registration Fees: \$44.00</p> <p>Baggage Fees: \$50.00</p> | \$1,408.34 |
| Nuclear Regulatory Commission (NRC) | Weger, Hans | 05/07-05/10/2012 | Bethesda, MD | Training class on MILDSE-AREA computer program for calculating public dose from uranium source material recovery activities | <p>Public Transport: \$82.00</p> <p>Airfare: \$529.09</p> <p>Meals: \$248.50</p> <p>Lodging: \$759.36</p> <p>Parking: \$28.00</p> <p>Personal Mileage: \$16.93</p> | \$1,663.88 |
| Southern Environmental Enforcement Network | McReynolds, Danny | 04/03-04/06/2012 | San Antonio, TX | 2012 Membership Conference | <p>Meals: \$126.00</p> <p>Lodging: \$450.00</p> <p>Parking: \$87.57</p> | \$663.57 |
| UAH/NASA ACAST | Dornblaser, Bright | 04/24-04/26/2012 | Atlanta, GA | Attend ACAST Physical Atmosphere Science Team meeting | <p>Rental Car: \$75.20</p> <p>Airfare: \$447.60</p> <p>Meals: \$60.00</p> <p>Lodging: \$138.04</p> <p>Parking: \$18.00</p> <p>Taxi: \$31.00</p> | \$769.84 |

| | | | | | | |
|---------------------------------------|-------------------|------------------|-----------------|---|---|-------------|
| U.S. NRC/FSME | Simmons, Sonia I. | 02/26-03/03/2012 | Chattanooga, TN | Participate in Transportation Course sponsored by the U.S. NRC | Public Transport: \$37.00 Airfare: \$704.69 Meals: \$364.00 Lodging: \$539.00 Personal Mileage: \$110.59 Misc.: \$140.07 | \$1,895.35 |
| U.S. Nuclear Regulatory Commission | Line, Lee | 04/22-04/27/2012 | Sugar Land, TX | Nuclear Regulatory Commission (NRC) Training Course (H-314) | Meals: \$390.50 Lodging: \$549.30 | \$939.80 |
| | | | | Totals: | | \$18,690.02 |

Exhibit "C"

**Declaration of Third Party Reimbursement Forms for
Supporting Documentation**

DECLARATION OF THIRD-PARTY REIMBURSEMENT

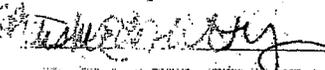
After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

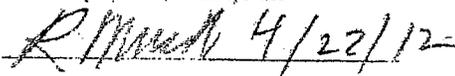
1. Employee's Name: Christine Whitney
2. Dates of Travel: 4/26/2012 (4/25-26/2012)
3. Destination: Montgomery, Alabama
4. Purpose: ASTSWMO Mid-Year Meeting
5. Reimbursing Organization: ASTSWMO

6. Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|------------------------|---------------------|
| Fares: | | |
| Public Transportation | <u>\$28.00</u> | |
| Rental Car | <u> </u> | |
| Air | <u>\$493.20</u> | <u>Astswmo paid</u> |
| Meals | <u>\$153.00</u> | |
| Lodging | <u>\$201.20</u> | |
| Parking | <u>\$30.00</u> | |
| Other: | | |
| Business Telephone Calls | <u> </u> | |
| Personal Vehicle Mileage | <u>\$15.30</u> | |
| Seminar Registration/Fees | <u> </u> | |
| Misc. (Describe under comments) | <u>\$50.00</u> | <u>Baggage Fees</u> |
| Grand Total | <u>\$970.70</u> | |

Approval Signatures:

7.  4/27/2012
Employee Signature/Date

8.  4/27/12
Supervisor Signature/Date

The employee/ supervisor signatures certify that the information provided is true and correct and the amount shown on this form is the total amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Bob Patton
2. Dates of Travel: 1/9-12/2012
3. Destination: Washington, D.C.
4. Purpose: To participate in meetings of the Association of State and Territorial Solid Waste Management Officials (ASTSWMO). The benefit was by informing staff on technical issues related to redevelopment of removal action sites at remediation site.
5. Reimbursing Organization: ASTSWMO

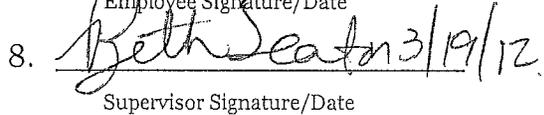
6. Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------|
| Fares: | | |
| Public Transportation | <u>\$28.00</u> | _____ |
| Rental Car | _____ | _____ |
| Air | <u>2,963.30</u> | _____ |
| Meals | <u>\$200.17</u> | _____ |
| Lodging | <u>\$628.62</u> | _____ |
| Parking | <u>\$34.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | <u>\$22.44</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | <u>\$50.00</u> | <u>Baggage Fees</u> |
| Grand Total | <u>\$963.23</u> | |

\$1259.53
total declaration including airfare per e-mail attached

Approval Signatures:

7.  3/19/12
Employee Signature/Date

8.  3/19/12
Supervisor Signature/Date

*12 MAR 19 PM 02:01 TCEQ-FAD

Pam Byas

From: Bob Patton
Sent: Friday, June 15, 2012 8:39 AM
To: Pam Byas
Cc: Kelly Peavler
Subject: flight costs

Good morning Pam,

Sorry about all the confusion on my travel costs paid by ASTSWMO. The cost of my round trip ticket paid by ASTSWMO for the January 9-12 dates was \$296.30. I was not reimbursed for this amount. ASTSWMO paid for it directly to the travel agency.

Thank you,
Bob

DECLARATION OF THIRD-PARTY REIMBURSEMENT

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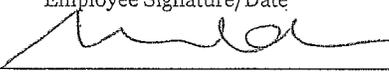
1. Employee's Name: Conrad J. Schaefer
2. Dates of Travel: 4/26/2012 (4/24 - 26/2012)
3. Destination: Montgomery, AL
4. Purpose: ASTSWMO Mid Year Meeting
5. Reimbursing Organization: ASTSWMO
6. **Itemized Expenses:**

| Description | Total | <u>\$1,401.66</u> |
|---------------------------------|-----------------|----------------------------|
| Fares: | | |
| Public Transportation | <u>\$28.00</u> | Additional Comments |
| Rental Car | _____ | _____ |
| Air | <u>\$1,075.</u> | _____ |
| Meals | <u>20</u> | _____ |
| Lodging | <u>\$94.46</u> | _____ |
| Parking | <u>\$183.00</u> | _____ |
| Other: | <u>\$21.00</u> | _____ |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | | |

Grand Total = \$1,401.66

Approval Signatures:

7.  5/15/12
Employee Signature/Date

8.  5/15/2012
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

| REFERENCE NO. | DESCRIPTION | INVOICE DATE | INVOICE AMOUNT | DISCOUNT TAKEN | AMOUNT PAID |
|---------------|-------------------|--------------------|----------------|----------------|-------------|
| Mid Year | Mid Year Mtg 2012 | 5/11/12 | 1,401.66 | | 1,401.66 |
| 5/11/12 | 42085 | Conrad J. Schaefer | | | \$1,401.66 |

Handwritten: Made/Marked
TAMER

ASSOCIATION OF STATE & TERRITORIAL
SOLID WASTE MANAGEMENT OFFICIALS
444 N. Capitol St., N.W., Ste. 315 Washington, DC 20001
(202) 624-5828

WACHOVIA
Wachovia Bank, a division of Wells Fargo Bank, N.A.
15-122-540

AMOUNT \$ 1401.66
DATE May 11, 2012

One Thousand Four Hundred One and 66/100 Dollars

Memo:

PAY TO THE ORDER OF:
Conrad J. Schaefer
Texas Commission EQ
12100 Park 35 Circle Bldg F
Austin, TX 78753

Handwritten Signature: Gary Schaefer
AUTHORIZER SIGNATURE

⑆00042085⑆ ⑆054001220⑆ 2000032881519⑆

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Omar Valdez
2. Dates of Travel: 4/24/2012 - 4/26/2012
3. Destination: Montgomery, AL
4. Purpose: Attend Mid-Year Meeting
5. Reimbursing Organization: ASTSWMO
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|----------------------|---------------------|
| Fares: | | |
| Public Transportation | <u>\$30.00</u> | _____ |
| Rental Car | <u>\$0.00</u> | _____ |
| Air | <u>\$493.20</u> | _____ |
| Meals | <u>\$153.00</u> | _____ |
| Lodging | <u>\$183.00</u> | _____ |
| Parking | <u>\$0.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | <u>\$0.00</u> | _____ |
| Personal Vehicle Mileage | <u>\$0.00</u> | _____ |
| Seminar Registration/Fees | <u>\$0.00</u> | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | <u>859.20</u> | |

Approval Signatures:

7.  6/21/12
Employee Signature/Date
8. 
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Omar Valdez
2. Dates of Travel: 1/9-13/2012 *2 days*
3. Destination: Washington D.C.
4. Purpose: Attend focus group meetings
5. Reimbursing Organization: ASTSWMO
6. Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|--------------------|--|
| Fares: | | |
| Public Transportation | \$90.00 | |
| Rental Car | \$0.00 | |
| Airfare | \$0.00 <i>*506</i> | <i>*Airfare was paid directly by ASTSWMO to the airline.</i> |
| Tolls | \$348.00 | |
| Lodging | 0 | |
| Parking | \$846.91 | |
| Other: | \$50.00 | <i>Baggage Fees</i> |
| Business Telephone Calls | | |
| Personal Vehicle Mileage | \$0.00 | |
| Seminar Registration/Fees | \$0.00 | |
| Misc. (Describe under comments) | \$0.00 | |
| Grand Total | \$1,334.91 | |

Approval Signatures:

7. *[Signature]* 3/6/12
Employee Signature/Date

8. *[Signature]*
Supervisor Signature/Date

The employee and supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the total amount received from the reimbursing source.

12 APR 14 09:35 AM '12

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Kenneth B. Kidd
2. Dates of Travel: 4/10/2012
3. Destination: Washington, DC
4. Purpose: Attend the Toxic Release Inventory (TRI) National Training Conference.
5. Reimbursing Organization: Environmental Council of the States (ECOS)

6. Itemized Expenses:

| Description | Total | \$1,418.04 | Additional Comments |
|---------------------------------|----------------------|---------------------|---|
| | | \$648.60 | |
| Fares: | | | |
| Public Transportation | \$93.00 | | |
| Rental Car | _____ | | |
| Air | \$435.20 | | |
| Meals | \$120.40 | | |
| * Lodging | \$ 769.44 | | Lodging expenses were paid directly to the Hyatt Regency by ECOS. |
| Parking | _____ | | |
| Other: | | | |
| Business Telephone Calls | _____ | | |
| Personal Vehicle Mileage | _____ | | |
| Seminar Registration/Fees | _____ | | |
| Misc. (Describe under comments) | _____ | | |
| Grand Total | \$ 648.60 | \$ 1,418.04 | |

Val Stewart for Kenneth Kidd

Approval Signatures:

7. *KB Kidd* 5/10/12
Employee Signature/Date

8. *[Signature]* 5/10
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

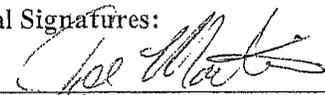
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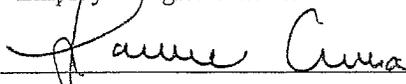
- (1) Employee's Name: Joe Martin
- (2) Dates of Travel: 4/9/12-4/11/12
- (3) Destination: St. Petersburg, Florida
- (4) Purpose: GOMA Microbial Source Tracking Workshop
- (5) Reimbursing Organization: Florida Department of Environmental Protection

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|------------------|--|
| Fares: | \$ 87.60 | Transportation to and from airport |
| Public Transportation | \$ | |
| Rental Car | \$ | |
| Air | \$ 380.00 | |
| Meals | \$ 61.00 | |
| Lodging | \$ 250.88 | |
| Parking | \$ 21.00 | |
| Other: | | |
| Business Telephone Calls | \$ | |
| Personal Vehicle Mileage | \$ | |
| Seminar Registration/Fees | \$ | |
| Misc. (Describe under comments) | \$ 80 | Per Diem Standard \$ given by reimb. org. to cover 2 days' extra food, other misc. items |
| Grand Total | \$ 880.48 | |

Approval Signatures:

(7)  5-1-12
Employee Signature/Date

(8)  5-2-2012
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

031031 1521M 031017 12MAY03 PM1254 T06050

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

(1) Employee's Name: Susan Jablonski

(2) Dates of Travel: February 5 - 9, 2012

(3) Destination: Dallas, Texas

(4) Purpose: Attend the Health Physics Society Midyear Meeting, February 5 - 9, 2012

(5) Reimbursing Organization: Health Physics Society (HPS)

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|------------------|-----------------------------------|
| Fares: | \$ | |
| Public Transportation | \$ | |
| Rental Car | \$ | |
| Air | \$ | |
| Meals | \$ | |
| Lodging | \$ 510.76 | \$113/night + tax |
| Parking | \$ | |
| Other: | | |
| Business Telephone Calls | \$ | |
| Personal Vehicle Mileage | \$ | |
| Seminar Registration/Fees | \$ | |
| Misc. (Describe under comments) | \$ | |
| Grand Total | \$ 510.76 | Hotel paid directly by HPS |

Approval Signatures:

(7) *Susan Jablonski* 2/17/12
Employee Signature/Date

(8) *[Signature]* 2/17/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

From: Pam Byas
To: Craib, Noemi
CC: Mccalister, Doug
Date: 2/16/2012 11:22 AM
Subject: Re: BIG Question
Attachments: ThirdPartyApprovalform.doc; DECLARATION10.doc

Hi Noemi

Even though she was unaware of it beforehand it is still considered a third party reimbursement so she needs to complete the Third Party Approval form attached below and send it to Legal Division for approval and attach it with the Declaration of Third Party Reimbursement form to the voucher for any expenses not covered by the third party. Thanks for checking.
Pam

>>> Noemi Craib 2/16/2012 9:38 AM >>>
Good morning, Pam. I am copying Doug, just in case.

I would like you to let me know if in the following case, I can do a voucher with meals and other expense and attach e-mails and other related documentation:

My Director attended an event in Dallas and as when she was ready to pay her lodging, she was told that the host organization of the event covered it. She was never told they will pay for it. I also perused the registration papers I received and it was not mentioned anything about a third-party covering any expenses. She thinks that because she was part of the plenary group as a presenter, the sponsors went ahead and paid for her accommodation.

I will wait for your reply before I work on the voucher. Thanks.

Noemi
n

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Brad Wilkinson
2. Dates of Travel: 4/18/2012 (04/15-18/2012)
3. Destination: Des Moines, Iowa
4. Purpose: ITRC Classroom and munitions response team meeting
5. Reimbursing Organization: Interstate Technology Regulatory Council (ITRC)
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | <u>884.20</u> | _____ |
| Meals | <u>122.00</u> | _____ |
| Lodging | <u>282.24</u> | _____ |
| Parking | <u>21.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | <u>25.50</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | <u>1,334.94</u> | |

Approval Signatures:

7. Brad Wilkinson 6/19/12
Employee Signature/Date
8. [Signature] 6/19/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

BUSINESS ADDRESS

Name: Brad Wilkinson
 Organization: Texas Commission on Environmental Quality
 Address: P. O. Box 13087
 City/State/ZIP: Austin, Texas 78711
 Phone: 512.239.2350
 Fax:
 Email: Brad.Wilkinson@tceq.texas.gov

Instructions:

Please type in the requested information. Calculations will be done automatically. Please mail a signed/hard copy of this completed form and corresponding original receipts to ECOS/ITRC for reimbursement.
 Mail to:
 ITRC Travel Reimbursement
 50 F. Street, N.W., Suite 350
 Washington, DC 20001
 Contact: Carolyn Sistare / (202) 266-4932 / Email: csistare@ecos.org / Fax: (202) 266-4937

Work Group: Munitions Response --44A
 Meeting Location: Des Moines

| | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 | Day 8 | Day 9 | TOTALS |
|---|----------------------|------------|------------|----------------------|------------|------------|------------|------------|------------|---------|
| | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | |
| ENTER TRIP DATES <i>Enter Travel Times</i> | 4/15/2012 4:00 PM | | | 4/18/2012 4:30 PM | | | | | | |
| TRANSPORTATION | | | | | | | | | | |
| Air/Train Fare | 884.2 | | | | | | | | | 884.2 |
| Personal Car Mileage | 50 | | | | | | | | | 50 |
| Mileage (above x .5fl) | 25.5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 25.5 |
| Taxi/Van/Subway | | | | | | | | | | 0 |
| Airport Parking | 21 | | | | | | | | | 21 |
| Transportation Subtotal | | | | | | | | | | 930.70 |
| MEALS AND INCIDENTALS (M&IE): Please see the GSA travel page for lodging and M&IE rates: http://www.gsa.gov/portal/category/21287 | | | | | | | | | | |
| Daily M&IE Rate | 26 | 38 | 38 | 20 | | | | | | 122 |
| Less: Provided Meals | | | | | | | | | | 0 |
| M&IE Subtotal | | | | | | | | | | 122.00 |
| HOTEL AND OTHER (Please specify "other" charges. If a "Saturday stay" applies, do not include extra lodging nights here--please fill in box below) | | | | | | | | | | |
| Hotel | 282.24 | | | | | | | | | 282.24 |
| Other | | | | | | | | | | 0 |
| Other | | | | | | | | | | 0 |
| Hotel and Other Subtotal | | | | | | | | | | 282.24 |
| GRAND TOTAL AMOUNT OWED (Receipts required for all expenses over \$25) | | | | | | | | | | 1334.94 |

*On the "enter travel times" line, enter the time you left your home/office on the day travel began and the time you returned to home/office on the day travel ended.

I certify that the above claim is correct and in accordance with ITRC Travel Policy (Please sign and date):
 Make Check Payable To: Brad Wilkinson

Mail Check to: Organization Above or Home Address (New User Only)

If applicable, please enter home address information below:
 Name: Brad Wilkinson
 Address 1: 12813 Palfrey
 Address 2:
 City/State/ZIP: Austin, Texas 789727

SATURDAY NIGHT STAY (please fill out both sides, use whole dollar amounts)

Nightly GSA Lodging Rate for Meeting Location:
 Airfare without Saturday stay: 0
 Airfare with Saturday stay: -1
 Savings: 0
 Savings - \$1: -1
 Total Lodging Amount: 0

OFFICE USE ONLY
 APPROVED
 CODE
 CHECK #

Traveler will be reimbursed for whichever double-lined number is smaller.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Weslee Copeland
2. Dates of Travel: Jan. 10-12
3. Destination: Baltimore, MD
4. Purpose: To attend 2nd GOES-R Satellite Air Quality Proving Ground Advisory Group Workshop
5. Reimbursing Organization: NOAA (National Oceanic and Atmospheric Administration)
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|--|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | <u>\$452.40</u> | _____ |
| Meals | <u>\$152.50</u> | _____ |
| Lodging | <u>\$214.70</u> | _____ |
| Parking | <u>\$21.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | <u>\$31.62</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | \$205.12 ^{WC} <u>\$872.22</u> 2/29/2012 | |

Approval Signatures:

7. Weslee Copeland 2/28/2012
Employee Signature/Date

8. Melanie Hutchins 2/29/2012
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

*12 MAR 01 PM 04:03 TCEQ/FAD

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: BRAD BROUSSARD
2. Dates of Travel: 5/7/2012 - 5/11/2012
~~5/11/2012~~
3. Destination: Albuquerque, NM
4. Purpose: Attend Increased Controls Training
5. Reimbursing Organization: NUCLEAR REGULATORY COMMISSION
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|----------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | \$492.69 | _____ |
| Meals | \$322.00 | _____ |
| Lodging | 0 | _____ |
| Parking | \$457.65 | _____ |
| Other: | \$42.00 | _____ |
| Business Telephone Calls | | |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | \$44.00 | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| | \$50.00 | <u>Baggage fees</u> |
| Grand Total | 1408.34 | |

10-01-24 MILEAGE TDR:PHD

Approval Signatures:

7. B. Broussard 5/22/12
Employee Signature/Date
8. [Signature] 5/22/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

- (1) Employee's Name: Hans Weger
- (2) Dates of Travel: May 7 – 10, 2012
- (3) Destination: Bethesda, Maryland
- (4) Purpose: Training class on MILDOSE-AREA computer program for calculating public dose from uranium source material recovery activities
- (5) Reimbursing Organization: Nuclear Regulatory Commission (NRC)

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|--------------------|--|
| Fares: | \$ | |
| Public Transportation | \$ 82 | Supershuttle from airport to hotel and back to airport in Maryland |
| Rental Car | \$ | |
| Air | \$ 529.09 | Includes cost of checking luggage |
| Meals | \$ 248.5 | Total per diem received |
| Lodging | \$ 759.36 | Includes state/county tax |
| Parking | \$ 28 | |
| Other: | | |
| Business Telephone Calls | \$ | |
| Personal Vehicle Mileage | \$ 16.93 | |
| Seminar Registration/Fees | \$ | |
| Misc. (Describe under comments) | \$ | |
| Grand Total | \$ 1,663.88 | |

Approval Signatures:

(7) Hans Weger 6/7/12
Employee Signature/Date

(8) Dary J. Smith 6/7/12
Supervisor Signature/Date

12 JUN 12 04:03 TSO/PAE

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

- (1) Employee's Name: Danny McReynolds
- (2) Dates of Travel: April 3-6, 2012
- (3) Destination: San Antonio Texas
- (4) Purpose: 2012 Membership Conference
- (5) Reimbursing Organization: Southern Environmental Enforcement Network

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------------------------|
| Fares: | \$ _____ | _____ |
| Public Transportation | \$ _____ | _____ |
| Rental Car | \$ _____ | _____ |
| Air | \$ _____ | _____ |
| Meals | \$ <u>72.00</u> | <u>54.00 (paid directly by SEEN)</u> |
| Lodging | \$ _____ | <u>450.00 (paid directly by SEEN)</u> |
| Parking | \$ <u>87.57</u> | _____ |
| Other: | | |
| Business Telephone Calls | \$ _____ | _____ |
| Personal Vehicle Mileage | \$ _____ | _____ |
| Seminar Registration/Fees | \$ _____ | _____ |
| Misc. (Describe under comments) | \$ _____ | _____ |

Grand Total \$ 159.57 504.00 paid by SEEN = \$ 663.57

Approval Signatures:

(7) Danny McReynolds April 30 2012
Employee Signature/Date

(8) _____
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Bright Dornblaser
2. Dates of Travel: 4/24/2012 (4/24-26/2012)
3. Destination: Atlanta
4. Purpose: Attend the AQAST Physical Atmosphere Science Team meeting
5. Reimbursing Organization: UAH/NASA AQAST
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|---|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | <u>\$75.20</u> | _____ |
| Air | <u>\$447.60</u> | _____ |
| Meals | <u>\$60.00</u> | _____ |
| Lodging | <u>\$138.04</u> | _____ |
| Parking | <u>\$18.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | <u>\$31.00</u> | <u>Taxi</u> |
| Grand Total | \$691.80 <u>\$ 769.84</u> | |

GENERAL SERVICE UNIT

Approval Signatures:

7. Bright Dornblaser 5/15/12
Employee Signature/Date
8. James Wood 5/16/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Sonia I. Simmons
2. Dates of Travel: 2/26-3/3/12
3. Destination: Chattanooga, TN
4. Purpose: Participate in Transportation Course sponsored by the U.S. NRC
5. Reimbursing Organization: U.S. NRC/FSME
6. **Itemized Expenses:**

| Description | Total | <u>\$1,190.66</u> |
|---------------------------------|---------------------|------------------------------------|
| Fares: | | Additional Comments |
| Public Transportation | <u>\$37.00</u> | |
| Rental Car | _____ | |
| Air | (<u>\$704.69</u>) | <u>Paid by NRC directly</u> |
| Meals | <u>\$364.0</u> | _____ |
| Lodging | <u>\$539.0</u> | _____ |
| Parking | _____ | _____ |
| Other: | | |
| Business Telephone Calls | _____ | |
| Personal Vehicle Mileage | <u>\$110.59</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | <u>\$140.07</u> | _____ |
| Grand Total | <u>\$ 1190.66</u> | <u>Paid directly to me by NRC.</u> |

Approval Signatures:

7. Sonia I. Simmons / 3/9/12

Employee Signature/Date

8. D. Kahl 3/12/12

Supervisor Signature/Date

\$ 1895.35 TOTAL DECLARATION

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Lee Line
2. Dates of Travel: 4/22/12 - 4/27/12
3. Destination: Sugar Land, TX
4. Purpose: Nuclear Regulatory Commission (NRC) Training Course (H-314)
5. Reimbursing Organization: U.S. Nuclear Regulatory Commission
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|-------------------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | _____ | _____ |
| Meals | \$ <u>390.50</u> | _____ |
| Lodging | \$ <u>549.30</u> | _____ |
| Parking | _____ | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | \$ <u>939.80</u> | |

Approval Signatures:

7. Lee E. Line 6/7/12
Employee Signature/Date

8. Gary J. Arnold 6/7/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

Exhibit "D"

Executive Director's Approval Memorandum

TCEQ Interoffice Memorandum

To: Zak Covar
Executive Director

From: Elizabeth West, Senior Attorney
Contracts, Employment Law and Ethics
General Law Division 

David Timberger, Director 
General Law Division

Caroline M. Sweeney, Deputy Director 
Office of Legal Services

Date:

Caption: **Docket No. 2012-0972-MIS.** Consideration of gifts and donations of \$500.00 or more in value given to the TCEQ, submitted for approval in accordance with Chapter 575 of the Government Code, concerning acceptance of gifts and donations by certain agencies.

Chapter 575 of the Government Code gives some specific direction to state agencies regarding the acceptance of gifts and donations. Chapter 575 provides that the Commission must acknowledge the acceptance of all gifts of money or property with a value of \$500 or more in an open meeting no later than the 90th day after the date the gift is accepted. Chapter 575 further states the name of the donor, a description of the gift or donation, and a statement of the purpose of the gift or donation must be recorded in the minutes. Chapter 575 of the Government Code is attached as Exhibit "A."

Before the Commission can acknowledge the acceptance of gifts and donations with a value of \$500 or more listed in Exhibit "B", the gifts must be accepted by the agency.

A list of gifts and donations is attached as Exhibit "B." A Declaration of Third Party Reimbursement form is submitted for each gift or donation listed in Exhibit "B." The Declaration of Third Party Reimbursement forms are attached as Exhibit "C." Your signature below is needed to "accept" the aforementioned and referenced exhibits. We recommend you sign this form and accept the gifts.

I acknowledge and accept the gifts listed in Exhibit "B", on behalf of the Texas Commission on Environmental Quality.



Zak Covar
Executive Director

Date: 7/3/12

TCEQ Interoffice Memorandum

To: Zak Covar
Executive Director

From: Elizabeth West, Senior Attorney
Contracts, Employment Law and Ethics
General Law Division

David Timberger, Director
General Law Division

Caroline M. Sweeney, Deputy Director
Office of Legal Services

Date:

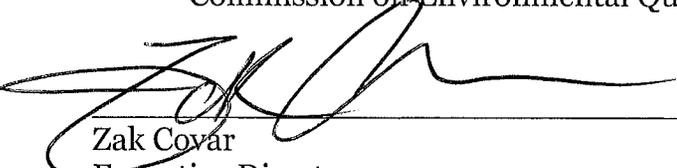
Caption: Docket No. 2012-0972-MIS. Consideration of gifts and donations of \$500.00 or more in value given to the TCEQ, submitted for approval in accordance with Chapter 575 of the Government Code, concerning acceptance of gifts and donations by certain agencies.

Chapter 575 of the Government Code gives some specific direction to state agencies regarding the acceptance of gifts and donations. Chapter 575 provides that the Commission must acknowledge the acceptance of all gifts of money or property with a value of \$500 or more in an open meeting no later than the 90th day after the date the gift is accepted. Chapter 575 further states the name of the donor, a description of the gift or donation, and a statement of the purpose of the gift or donation must be recorded in the minutes. Chapter 575 of the Government Code is attached as Exhibit "A."

Before the Commission can acknowledge the acceptance of gifts and donations with a value of \$500 or more listed in Exhibit "B", the gifts must be accepted by the agency.

A list of gifts and donations is attached as Exhibit "B." A Declaration of Third Party Reimbursement form is submitted for each gift or donation listed in Exhibit "B." The Declaration of Third Party Reimbursement forms are attached as Exhibit "C." Your signature below is needed to "accept" the aforementioned and referenced exhibits. We recommend you sign this form and accept the gifts.

I acknowledge and accept the gifts listed in Exhibit "B", on behalf of the Texas Commission on Environmental Quality.



Zak Covar
Executive Director

Date: 7/3/12

Exhibit "A"

Chapter 575 of the Government Code

CHAPTER 575. ACCEPTANCE OF GIFT BY STATE AGENCY

§ 575.001. Definitions

In this chapter:

(1) "Gift" means a donation of money or property.

(2) "State agency" means a board, commission, council, committee, department, office, agency, or other governmental entity in the executive or judicial branch of state government. The term does not include an institution of higher education as defined by Section 61.003, Education Code.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

§ 575.002. Gifts of \$500 or More

This chapter applies only to a gift that has a value of \$500 or more.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

§ 575.003. Acceptance of Gift by State Agency Governing Board

A state agency that has a governing board may accept a gift only if the agency has the authority to accept the gift and a majority of the board, in an open meeting, acknowledges the acceptance of the gift not later than the 90th day after the date the gift is accepted.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997. Amended by Acts 1999, 76th Leg., ch. 143, § 1, eff. Sept. 1, 1999.

§ 575.004. Record of Gift

A state agency that accepts a gift must record the name of the donor, a description of the gift, and a statement of the purpose of the gift in:

- (1) the minutes of the governing board of the agency; or
- (2) appropriate agency records, if the agency does not have a governing board.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

§ 575.005. Acceptance of Gift From Party to Contested Case Prohibited

A state agency may not accept a gift from a person who is a party to a contested case before the agency until the 30th day after the date the decision in the case becomes final under Section 2001.144. In this section, "contested case" has the meaning assigned by Section 2001.003.

Added by Acts 1997, 75th Leg., ch. 336, § 1, eff. Sept. 1, 1997.

Exhibit "B"

List of Gifts and Donations

**TEXAS NATURAL RESOURCE CONSERVATION COMMISSION
DECLARATION OF THIRD PARTY REIMBURSEMENT**

March 2012 through June 2012

Over \$500.00

| REIMBURSING ORGANIZATION | TRAVELERS NAME | DATES OF TRAVEL | DESTINATION | PURPOSE OF TRIP | REIMBURSED | REIMBURSED TOTAL |
|---|--------------------|------------------|-----------------|---|--|------------------|
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Whitney, Christine | 04/25-04/26/2012 | Montgomery, AL | Attend ASTSWMO Mid-Year Meeting | Public Transport: \$28.00 Airfare: \$493.20 Meals: \$153.00 Lodging: \$201.20 Parking: \$30.00 Personal Mileage: \$15.30 Baggage Fees: \$50.00 | \$970.70 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Patton, Bob | 01/09-01/12/2012 | Washington D.C. | To participate in meetings of the Association of State and Territorial Solid Waste Management Officials (ASTSWMO). The benefit was by informing staff on technical issues related to redevelopment of removal action sites at remediation site. | Airfare: \$296.30 Public Transport: \$28.00 Meals: \$200.17 Lodging: \$628.62 Parking: \$34.00 Personal Mileage: \$22.44 Baggage Fees: \$50.00 | \$1,259.53 |

| | | | | | | |
|---|---------------------|------------------|-----------------|---|---|------------|
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Schaefer, Conrad J. | 04/24-04/26/2012 | Montgomery, AL | ASTSWMO Mid Year Meeting | Public Transport: \$28.00 Airfare: \$1,075.20 Lodging: \$94.46 Parking: \$183.00 Other: \$21.00 | \$1,401.66 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Valdez, Omar | 04/24-04/26/2012 | Montgomery, AL | Attend Mid-Year Meeting | Public Transport: \$30.00 Airfare: \$493.20 Meals: \$153.00 Lodging: \$183.00 | \$859.20 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Valdez, Omar | 01/09-01/13/2012 | Washington D.C. | Attend focus group meetings | Public Transport: \$90.00 Airfare: \$506.80 Meals: \$348.00 Lodging: \$846.91 Baggage Fees: \$50.00 | \$1,841.71 |
| Environmental Council of the States (ECOS) | Kidd, Kenneth B. | 04/10-04/13/2012 | Washington D.C. | Attend the Toxic Release Inventory (TRI) National Training Conference | Public Transport: \$93.00 Airfare: \$435.20 Meals: \$120.40 Lodging: \$769.44 | \$1,418.04 |

| | | | | | | |
|--|------------------|------------------|--------------------|---|---|------------|
| Florida Department of Environmental Protection | Martin, Joe | 04/09-04/11/2012 | St. Petersburg, FL | GOMA Microbial Source Tracking Workshop | Public Transport: \$87.60 Airfare: \$380.00 Meals: \$61.00 Lodging: \$250.88 Parking: \$21.00 Misc.: \$80.00 | \$880.48 |
| Health Physics Society (HPS) | Jablonski, Susan | 02/05-02/09/2012 | Dallas, TX | Attend the Health Physics Society Midyear Meeting | Lodging: \$510.76 | \$510.76 |
| ITRC Interstate Technology Regulatory Council | Wilkinson, Brad | 04/15-04/18/2012 | Des Moines, IA | ITRC Spring Municipal Response Team | Airfare: \$884.20 Meals: \$122.00 Lodging: \$282.24 Parking: \$21.00 Personal Mileage: \$25.50 | \$1,334.94 |
| NOAA (National Oceanic and Atmospheric Administration) | Copeland, Weslee | 01/10-01/12/2012 | Baltimore, MD | To attend 2nd GOES-R Satellite Air Quality Proving Ground Advisory Group Workshop | Airfare: \$452.40 Meals: \$152.50 Lodging: \$214.70 Parking: \$21.00 Personal Mileage: \$31.62 | \$872.22 |

| | | | | | | |
|--|--------------------|------------------|-----------------|---|---|------------|
| Nuclear Regulatory Commission | Broussard, Brad | 05/07-05/11/2012 | Albuquerque, NM | Attend Increased Controls Training | Airfare: \$492.69 Meals: \$322.00 Lodging: \$457.65 Parking: \$42.00 Registration Fees: \$44.00 Baggage Fees: \$50.00 | \$1,408.34 |
| Nuclear Regulatory Commission (NRC) | Weger, Hans | 05/07-05/10/2012 | Bethesda, MD | Training class on MILDSE-AREA computer program for calculating public dose from uranium source material recovery activities | Public Transport: \$82.00 Airfare: \$529.09 Meals: \$248.50 Lodging: \$759.36 Parking: \$28.00 Personal Mileage: \$16.93 | \$1,663.88 |
| Southern Environmental Enforcement Network | McReynolds, Danny | 04/03-04/06/2012 | San Antonio, TX | 2012 Membership Conference | Meals: \$126.00 Lodging: \$450.00 Parking: \$87.57 | \$663.57 |
| UAH/NASA AQAST | Domblander, Bright | 04/24-04/26/2012 | Atlanta, GA | Attend AQAST Physical Atmosphere Science Team meeting | Rental Car: \$75.20 Airfare: \$447.60 Meals: \$60.00 Lodging: \$138.04 Parking: \$18.00 Taxi: \$31.00 | \$769.84 |

| | | | | | | |
|---------------------------------------|-------------------|------------------|-----------------|---|---|--------------------|
| U.S. NRC/FSME | Simmons, Sonia I. | 02/26-03/03/2012 | Chattanooga, TN | Participate in Transportation Course sponsored by the U.S. NRC | Public Transport: \$37.00 Airfare: \$704.69 Meals: \$364.00 Lodging: \$539.00 Personal Mileage: \$110.59 Misc.: \$140.07 | \$1,895.35 |
| U.S. Nuclear Regulatory Commission | Line, Lee | 04/22-04/27/2012 | Sugar Land, TX | Nuclear Regulatory Commission (NRC) Training Course (H-314) | Meals: \$390.50 Lodging: \$549.30 | \$939.80 |
| | | | | Totals: | | \$18,690.02 |

Exhibit "C"

**Declaration of Third Party Reimbursement Forms for
Supporting Documentation**

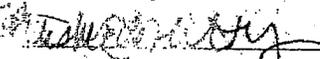
DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

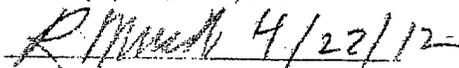
1. Employee's Name: Christine Whitney
2. Dates of Travel: 4/26/2012 (4/25-26/2012)
3. Destination: Montgomery, Alabama
4. Purpose: ASTSWMO Mid-Year Meeting
5. Reimbursing Organization: ASTSWMO
6. Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------|
| Fares: | | |
| Public Transportation | <u>\$28.00</u> | |
| Rental Car | | |
| Air | <u>\$493.20</u> | <u>Astswmo paid</u> |
| Meals | <u>\$153.00</u> | |
| Lodging | <u>\$201.20</u> | |
| Parking | <u>\$30.00</u> | |
| Other: | | |
| Business Telephone Calls | | |
| Personal Vehicle Mileage | <u>\$15.30</u> | |
| Seminar Registration/Fees | | |
| Misc. (Describe under comments) | <u>\$50.00</u> | <u>Baggage Fees</u> |
| Grand Total | <u>\$970.70</u> | |

Approval Signatures:

7.  4/27/2012

Employee's Signature/Date

8.  4/27/12

Supervisor's Signature/Date

The employee and supervisor signatures certify that the information provided is true and correct and the amount shown on this form is the total amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

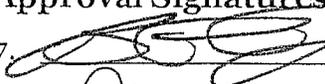
1. Employee's Name: Bob Patton
2. Dates of Travel: 1/9-12/2012
3. Destination: Washington, D.C.
4. Purpose: To participate in meetings of the Association of State and Territorial Solid Waste Management Officials (ASTSWMO). The benefit was by informing staff on technical issues related to redevelopment of removal action sites at remediation site.
5. Reimbursing Organization: ASTSWMO

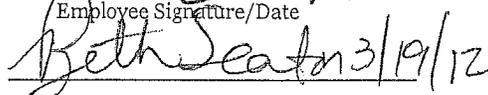
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------|
| Fares: | | |
| Public Transportation | <u>\$28.00</u> | _____ |
| Rental Car | _____ | _____ |
| Air | <u>296.30</u> | _____ |
| Meals | <u>\$200.17</u> | _____ |
| Lodging | <u>\$628.62</u> | _____ |
| Parking | <u>\$34.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | <u>\$22.44</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | <u>\$50.00</u> | <u>Baggage Fees</u> |
| Grand Total | <u>\$963.23</u> | |

\$1259.53 *total declaration including airfare per e-mail attached*

Approval Signatures:

7.  3/19/12
Employee Signature/Date

8.  3/19/12
Supervisor Signature/Date

*12 MAR 19 PM02:01 TCEQ:FRD

Pam Byas

From: Bob Patton
Sent: Friday, June 15, 2012 8:39 AM
To: Pam Byas
Cc: Kelly Peavler
Subject: flight costs

Good morning Pam,

Sorry about all the confusion on my travel costs paid by ASTSWMO. The cost of my round trip ticket paid by ASTSWMO for the January 9-12 dates was \$296.30. I was not reimbursed for this amount. ASTSWMO paid for it directly to the travel agency.

Thank you,
Bob

DECLARATION OF THIRD-PARTY REIMBURSEMENT

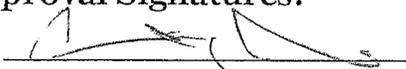
After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Conrad J. Schaefer
2. Dates of Travel: 4/26/2012 (4/24 - 26/2012)
3. Destination: Montgomery, AL
4. Purpose: ASTSWMO Mid Year Meeting
5. Reimbursing Organization: ASTSWMO
6. **Itemized Expenses:**

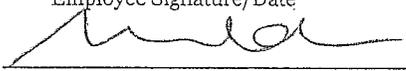
| Description | Total | \$1,401.66 |
|---------------------------------|-----------------|----------------------------|
| Fares: | | |
| Public Transportation | <u>\$28.00</u> | Additional Comments |
| Rental Car | _____ | _____ |
| Air | <u>\$1,075.</u> | _____ |
| Meals | <u>20</u> | _____ |
| Lodging | <u>\$94.46</u> | _____ |
| Parking | <u>\$183.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | | |

Grand Total = \$1,401.66

Approval Signatures:

7.  5/15/12

Employee Signature/Date

8.  5/15/2012

Supervisor Signature/Date

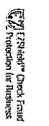
The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

| REFERENCE NO. | DESCRIPTION | INVOICE DATE | INVOICE AMOUNT | DISCOUNT TAKEN | AMOUNT PAID |
|---------------|---------------------|--------------------|-----------------|----------------|-------------|
| Mid Year | Mid Year Mtg 2012 | 5/11/12 | 1,401.66 | | 1,401.66 |
| | <i>Made Payment</i> | | | | |
| CHECK DATE | CHECK NO. | PAYEE | DISCOUNTS TAKEN | CHECK AMOUNT | |
| 5/11/12 | 42085 | Conrad J. Schaefer | | \$1,401.66 | |

ASSOCIATION OF STATE & TERRITORIAL
SOLID WASTE MANAGEMENT OFFICIALS
444 N. Capitol St., N.W. Ste. 315 Washington, DC 20001
(202) 624-5828



WACHOVIA
Wachovia Bank, a division of Wells Fargo Bank, N.A.
15-122-540



DATE
May 11, 2012
AMOUNT
\$ 1401.66

One Thousand Four Hundred one and 66/100 Dollars

Memo:

PAY TO THE ORDER OF:
Conrad J. Schaefer
Texas Commission EQ
12100 Park 35 Circle Bldg F
Austin, TX 78753

Henry J. Schaefer
AUTHORIZED SIGNATURE

⑆00042085⑆ ⑆054001220⑆ 2000032881619⑆

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Omar Valdez
2. Dates of Travel: 4/24/2012 - 4/26/2012
3. Destination: Montgomery, AL
4. Purpose: Attend Mid-Year Meeting
5. Reimbursing Organization: ASTSWMO

6. Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|----------------------|---------------------|
| Fares: | | |
| Public Transportation | <u>\$30.00</u> | _____ |
| Rental Car | <u>\$0.00</u> | _____ |
| Air | <u>\$493.20</u> | _____ |
| Meals | <u>\$153.00</u> | _____ |
| Lodging | <u>\$183.00</u> | _____ |
| Parking | <u>\$0.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | <u>\$0.00</u> | _____ |
| Personal Vehicle Mileage | <u>\$0.00</u> | _____ |
| Seminar Registration/Fees | <u>\$0.00</u> | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | <u>859.20</u> | |

Approval Signatures:

7.  6/21/12
Employee Signature/Date
8. 
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Omar Valdez
2. Dates of Travel: 1/9-13/2012 *2*
3. Destination: Washington D.C.
4. Purpose: Attend focus group meetings
5. Reimbursing Organization: ASTSWMO
6. Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|--------------------------------|--|
| Fares: | | |
| Public Transportation | \$90.00 | |
| Rental Car | \$0.00 | |
| Airfare | \$0.00 *506 | *Airfare was paid directly by ASTSWMO to the airline. OV! |
| Meals | \$348.00 | |
| Lodging | 0 | |
| Parking | \$846.91 | |
| Other: | \$50.00 | → Baggage Fees |
| Business Telephone Calls | | |
| Personal Vehicle Mileage | \$0.00 | |
| Seminar Registration/Fees | \$0.00 | |
| Misc. (Describe under comments) | \$0.00 | |
| Grand Total | \$1334.91 \$1841 | |

Approval Signatures:

7. *[Signature]* 3/6/12
Employee Signature/Date

8. *[Signature]*
Supervisor Signature/Date

The employee's supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the actual amount received from the reimbursing source.

12 MAR 14 9:09:35 AM '12

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Kenneth B. Kidd
2. Dates of Travel: 4/10/2012
3. Destination: Washington, DC
4. Purpose: Attend the Toxic Release Inventory (TRI) National Training Conference.
5. Reimbursing Organization: Environmental Council of the States (ECOS)

| | | | |
|---------------------------------|----------------------|---------------------|---|
| 6. Itemized Expenses: | | \$1,418.04 | |
| Description | Total | \$648.60 | Additional Comments |
| Fares: | | | |
| Public Transportation | \$93.00 | | |
| Rental Car | _____ | | |
| Air | \$435.20 | | |
| Meals | \$120.40 | | |
| * Lodging | \$ 769.44 | | Lodging expenses were paid directly to the Hyatt Regency by ECOS. |
| Parking | _____ | | |
| Other: | | | |
| Business Telephone Calls | _____ | | |
| Personal Vehicle Mileage | _____ | | |
| Seminar Registration/Fees | _____ | | |
| Misc. (Describe under comments) | _____ | | |
| Grand Total | \$ 648.60 | | |

\$ 1,418.04 Val Stewart for Kenneth Kidd

Approval Signatures:

7. [Signature] 5/10/12
Employee Signature/Date

8. [Signature] 5/10
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

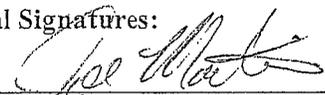
After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

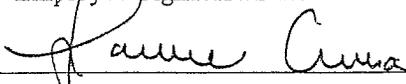
- (1) Employee's Name: Joe Martin
- (2) Dates of Travel: 4/9/12-4/11/12
- (3) Destination: St. Petersburg, Florida
- (4) Purpose: GOMA Microbial Source Tracking Workshop
- (5) Reimbursing Organization: Florida Department of Environmental Protection

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|------------------|--|
| Fares: | \$ 87.60 | Transportation to and from airport |
| Public Transportation | \$ | |
| Rental Car | \$ | |
| Air | \$ 380.00 | |
| Meals | \$ 61.00 | |
| Lodging | \$ 250.88 | |
| Parking | \$ 21.00 | |
| Other: | | |
| Business Telephone Calls | \$ | |
| Personal Vehicle Mileage | \$ | |
| Seminar Registration/Fees | \$ | |
| Misc. (Describe under comments) | \$ 80 | Per Diem Standard \$ given by reimb. org. to cover 2 days' extra food, other misc. items |
| Grand Total | \$ 880.48 | |

Approval Signatures:

(7)  5-1-12
Employee Signature/Date

(8)  5-2-2012
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

09:00:15 PM 03/14/12

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

(1) Employee's Name: Susan Jablonski

(2) Dates of Travel: February 5 - 9, 2012

(3) Destination: Dallas, Texas

(4) Purpose: Attend the Health Physics Society Midyear Meeting, February 5 - 9, 2012

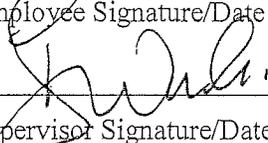
(5) Reimbursing Organization: Health Physics Society (HPS)

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|------------------|-----------------------------------|
| Fares: | \$ | |
| Public Transportation | \$ | |
| Rental Car | \$ | |
| Air | \$ | |
| Meals | \$ | |
| Lodging | \$ 510.76 | \$113/night + tax |
| Parking | \$ | |
| Other: | | |
| Business Telephone Calls | \$ | |
| Personal Vehicle Mileage | \$ | |
| Seminar Registration/Fees | \$ | |
| Misc. (Describe under comments) | \$ | |
| Grand Total | \$ 510.76 | Hotel paid directly by HPS |

Approval Signatures:

(7)  2/17/12
Employee Signature/Date

(8)  2/17/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

From: Pam Byas
To: Craib, Noemi
CC: Mccalister, Doug
Date: 2/16/2012 11:22 AM
Subject: Re: BIG Question
Attachments: ThirdPartyApprovalform.doc; DECLARATION10.doc

Hi Noemi

Even though she was unaware of it beforehand it is still considered a third party reimbursement so she needs to complete the Third Party Approval form attached below and send it to Legal Division for approval and attach it with the Declaration of Third Party Reimbursement form to the voucher for any expenses not covered by the third party. Thanks for checking.
Pam

>>> Noemi Craib 2/16/2012 9:38 AM >>>
Good morning, Pam. I am copying Doug, just in case.

I would like you to let me know if in the following case, I can do a voucher with meals and other expense and attach e-mails and other related documentation:

My Director attended an event in Dallas and as when she was ready to pay her lodging, she was told that the host organization of the event covered it. She was never told they will pay for it. I also perused the registration papers I received and it was not mentioned anything about a third-party covering any expenses. She thinks that because she was part of the plenary group as a presenter, the sponsors went ahead and paid for her accommodation.

I will wait for your reply before I work on the voucher. Thanks.

Noemi
n

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Brad Wilkinson
2. Dates of Travel: 4/18/2012 (04/15-18/2012)
3. Destination: Des Moines, Iowa
4. Purpose: ITRC Classroom and munitions response team meeting
5. Reimbursing Organization: Interstate Technology Regulatory Council (ITRC)
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | <u>884.20</u> | _____ |
| Meals | <u>122.00</u> | _____ |
| Lodging | <u>282.24</u> | _____ |
| Parking | <u>21.00</u> | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | <u>25.50</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | <u>1,334.94</u> | |

Approval Signatures:

7. Brad Wilkinson 6/19/12
Employee Signature/Date
8. [Signature] 6/19/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

BUSINESS ADDRESS

Name: Brad Wilkinson
 Organization: Texas Commission on Environmental Quality
 Address: P. O. Box 13087
 City/State/ZIP: Austin, Texas 78711
 Phone: 512.239.2350
 Fax:
 Email: Brad.Wilkinson@tceq.texas.gov

Instructions:

Please type in the requested information. Calculations will be done automatically. Please mail a signed/hard copy of this completed form and corresponding original receipts to ECOS/ITRC for reimbursement.
 Mail to:
 ITRC Travel Reimbursement
 50 F Street, N.W., Suite 350
 Washington, DC 20001
 Contact: Carolyn Sistare / (202) 266-4932 / Email: csistare@ecos.org / Fax: (202) 266-4937

Work Group: Munitions Response --44A

(select from menu)

Meeting Location: Des Moines

(select from menu)

| | Day 1 | | Day 2 | | Day 3 | | Day 4 | | Day 5 | | Day 6 | | Day 7 | | Day 8 | | Day 9 | | TOTALS |
|---|--|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|---------|
| | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | Enter Date | |
| ENTER TRIP DATES | 4/15/2012 | 4/18/2012 | | | | | | | | | | | | | | | | | |
| <i>Enter Travel Times</i> | 4:00 PM | 4:30 PM | | | | | | | | | | | | | | | | | |
| TRANSPORTATION | | | | | | | | | | | | | | | | | | | |
| Air/Train Fare | 884.2 | | | | | | | | | | | | | | | | | | 884.2 |
| Personal Car Mileage | 50 | | | | | | | | | | | | | | | | | | 50 |
| Mileage (above x .51) | 25.5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 25.5 |
| Taxi/Van/Subway | | | | | | | | | | | | | | | | | | | 0 |
| Airport Parking | 21 | | | | | | | | | | | | | | | | | | 21 |
| Transportation Subtotal | | | | | | | | | | | | | | | | | | | 930.70 |
| MEALS AND INCIDENTALS (M&IE): | Please see the GSA travel page for lodging and M&IE rates: http://www.gsa.gov/portal/category/21287 . | | | | | | | | | | | | | | | | | | |
| Daily M&IE Rate | 26 | 38 | 38 | 38 | 20 | | | | | | | | | | | | | | 122 |
| Less Provided Meals | | | | | | | | | | | | | | | | | | | 0 |
| M&IE Subtotal | | | | | | | | | | | | | | | | | | | 122.00 |
| HOTEL AND OTHER (Please specify "other" charges. If a "Saturday stay" applies, do not include extra lodging nights here--please fill in box below) | | | | | | | | | | | | | | | | | | | |
| Hotel | 282.24 | | | | | | | | | | | | | | | | | | 282.24 |
| Other | | | | | | | | | | | | | | | | | | | 0 |
| Other | | | | | | | | | | | | | | | | | | | 0 |
| Hotel and Other Subtotal | | | | | | | | | | | | | | | | | | | 282.24 |
| GRAND TOTAL AMOUNT OWED (Receipts required for all expenses over \$25) | | | | | | | | | | | | | | | | | | | 1334.94 |

*On the "enter travel times" line, enter the time you left your home/office on the day travel began and the time you returned to home/office on the day travel ended.

I certify that the above claim is correct and in accordance with ITRC Travel Policy (Please sign and date):

Make Check Payable To: Brad Wilkinson

Mail Check to: Organization Above or Home Address (New User Only)

If applicable, please enter home address information below:

Name: Brad Wilkinson
 Address 1: 12813 Palfrey
 Address 2:
 City/State/ZIP: Austin, Texas 789727

SATURDAY NIGHT STAY (please fill out both sides, use whole dollar amounts)

| | | | |
|-------------------------------|----|------------------------------|---|
| Airfare without Saturday stay | | Nightly GSA Lodging Rate for | |
| Airfare with Saturday stay | | Meeting Location | |
| Savings | 0 | Extra Nights Stayed (max 3) | |
| Savings - \$1 | -1 | Total Lodging Amount | 0 |

OFFICE USE ONLY

APPROVED
 CODE
 CHECK #

Traveler will be reimbursed for whichever double-lined number is smaller.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Weslee Copeland
2. Dates of Travel: Jan. 10-12
3. Destination: Baltimore, MD
4. Purpose: To attend 2nd GOES-R Satellite Air Quality Proving Ground Advisory Group Workshop
5. Reimbursing Organization: NOAA (National Oceanic and Atmospheric Administration)
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|-------------|-------|---------------------|
|-------------|-------|---------------------|

Fares:

| | | |
|-----------------------|------------------|-------|
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | \$ <u>452.40</u> | _____ |
| Meals | \$ <u>152.50</u> | _____ |
| Lodging | \$ <u>214.70</u> | _____ |
| Parking | \$ <u>21.00</u> | _____ |

Other:

| | | |
|---------------------------------|-----------------|-------|
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | \$ <u>31.62</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |

| | |
|--------------------|--|
| Grand Total | \$205.12 WC \$872.22 4/29/2012 |
|--------------------|--|

Approval Signatures:

7. Weslee Copeland 2/28/2012
Employee Signature/Date

8. Melanie K. Schutte 2/29/2012
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

*12 MAR 01 PM 04:03 TCEQFAD

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: BRAD BROUSSARD
2. Dates of Travel: 5/7/2012 - 5/11/2012
~~5/11/2012~~
3. Destination: Albuquerque, NM
4. Purpose: Attend Increased Controls Training
5. Reimbursing Organization: NUCLEAR REGULATORY COMMISSION
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|----------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | |
| Rental Car | _____ | |
| Air | \$492.69 | |
| Meals | \$322.00 | |
| Lodging | 0 | |
| Parking | \$457.65 | |
| Other: | \$42.00 | |
| Business Telephone Calls | | |
| Personal Vehicle Mileage | _____ | |
| Seminar Registration/Fees | \$44.00 | |
| Misc. (Describe under comments) | _____ | |
| | \$50.00 | <u>Baggage fees</u> |
| Grand Total | 1408.34 | |

RECEIVED 5/21/12 12:41 PM

Approval Signatures:

7. B. Broussard 5/22/12
Employee Signature/Date
8. [Signature] 5/22/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

- (1) Employee's Name: Hans Weger
- (2) Dates of Travel: May 7 – 10, 2012
- (3) Destination: Bethesda, Maryland
- (4) Purpose: Training class on MILDOSE-AREA computer program for calculating public dose from uranium source material recovery activities
- (5) Reimbursing Organization: Nuclear Regulatory Commission (NRC)

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|--------------------|--|
| Fares: | \$ | |
| Public Transportation | \$ 82 | Supershuttle from airport to hotel and back to airport in Maryland |
| Rental Car | \$ | |
| Air | \$ 529.09 | Includes cost of checking luggage |
| Meals | \$ 248.5 | Total per diem received |
| Lodging | \$ 759.36 | Includes state/county tax |
| Parking | \$ 28 | |
| Other: | | |
| Business Telephone Calls | \$ | |
| Personal Vehicle Mileage | \$ 16.93 | |
| Seminar Registration/Fees | \$ | |
| Misc. (Describe under comments) | \$ | |
| Grand Total | \$ 1,663.88 | |

Approval Signatures:

(7) Hans Weger 6/7/12
Employee Signature/Date

(8) Dary J. Smith 6/7/12
Supervisor Signature/Date

TCEQ-10051 (Rev. 03/2008)

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third-Party, this form is to be completed and forwarded to the Travel Unit, MC 181 or fax to 239-6768.

- (1) Employee's Name: Danny McReynolds
- (2) Dates of Travel: April 3-6, 2012
- (3) Destination: San Antonio Texas
- (4) Purpose: 2012 Membership Conference
- (5) Reimbursing Organization: Southern Environmental Enforcement Network

(6) Itemized Expenses:

| Description | Total | Additional Comments |
|---------------------------------|-----------------|---------------------------------------|
| Fares: | \$ _____ | _____ |
| Public Transportation | \$ _____ | _____ |
| Rental Car | \$ _____ | _____ |
| Air | \$ _____ | _____ |
| Meals | \$ <u>72.00</u> | <u>54.00 (paid directly by SEEN)</u> |
| Lodging | \$ _____ | <u>450.00 (paid directly by SEEN)</u> |
| Parking | \$ <u>87.57</u> | _____ |
| Other: | | |
| Business Telephone Calls | \$ _____ | _____ |
| Personal Vehicle Mileage | \$ _____ | _____ |
| Seminar Registration/Fees | \$ _____ | _____ |
| Misc. (Describe under comments) | \$ _____ | _____ |

Grand Total \$ 159.57 504.00 paid by SEEN = \$ 663.57

Approval Signatures:

(7) Danny McReynolds April 30 2012
Employee Signature/Date

(8) _____
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Bright Dornblaser
2. Dates of Travel: 4/24/2012 (4/24-26/2012)
3. Destination: Atlanta
4. Purpose: Attend the AQAST Physical Atmosphere Science Team meeting
5. Reimbursing Organization: UAH/NASA AQAST

6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|---------------------------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | \$75.20 | _____ |
| Air | \$447.60 | _____ |
| Meals | \$60.00 | _____ |
| Lodging | \$138.04 | _____ |
| Parking | \$18.00 | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | \$31.00 | Taxi |
| Grand Total | \$691.80 \$769.84 | |

RECEIVED TRAVEL UNIT 05/16/12

Approval Signatures:

7. Bright Dornblaser 5/15/12
Employee Signature/Date
8. [Signature] 5/16/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Sonia I. Simmons
2. Dates of Travel: 2/26-3/3/12
3. Destination: Chattanooga, TN
4. Purpose: Participate in Transportation Course sponsored by the U.S. NRC
5. Reimbursing Organization: U.S. NRC/FSME
6. **Itemized Expenses:**

| Description | Total | <u>\$1,190.66</u> |
|---------------------------------|---------------------|------------------------------------|
| Fares: | | |
| Additional Comments | | |
| Public Transportation | <u>\$37.00</u> | |
| Rental Car | _____ | |
| Air | (<u>\$704.69</u>) | <u>Paid by NRC directly</u> |
| Meals | <u>\$364.0</u> | _____ |
| Lodging | <u>\$539.0</u> | _____ |
| Parking | _____ | _____ |
| Other: | | |
| Business Telephone Calls | _____ | |
| Personal Vehicle Mileage | <u>\$110.59</u> | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | <u>\$140.07</u> | _____ |
| Grand Total | \$ 1190.66 | Paid directly to me by NRC. |

Approval Signatures:

7. Sonia I. Simmons / 3/9/12
Employee Signature/Date

8. D. Kahl / 3/12/12
Supervisor Signature/Date

\$ 1895.35
TOTAL DECLARATION

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

DECLARATION OF THIRD-PARTY REIMBURSEMENT

After the trip is taken, it is the employee's responsibility to file for reimbursement from the reimbursing organization. Upon receipt of payment from the Third Party, this form is to be completed and forwarded to the Travel Unit, MC-181 or fax to 239-6768.

1. Employee's Name: Lee Line
2. Dates of Travel: 4/22/12 - 4/27/12
3. Destination: Sugar Land, TX
4. Purpose: Nuclear Regulatory Commission (NRC) Training Course (H-314)
5. Reimbursing Organization: U.S. Nuclear Regulatory Commission
6. **Itemized Expenses:**

| Description | Total | Additional Comments |
|---------------------------------|-------------------------|---------------------|
| Fares: | | |
| Public Transportation | _____ | _____ |
| Rental Car | _____ | _____ |
| Air | _____ | _____ |
| Meals | \$ <u>390.50</u> | _____ |
| Lodging | \$ <u>549.30</u> | _____ |
| Parking | _____ | _____ |
| Other: | | |
| Business Telephone Calls | _____ | _____ |
| Personal Vehicle Mileage | _____ | _____ |
| Seminar Registration/Fees | _____ | _____ |
| Misc. (Describe under comments) | _____ | _____ |
| Grand Total | \$ <u>939.80</u> | |

Approval Signatures:

7. Lee E. Line 6/7/12
Employee Signature/Date

8. Gary J. Arnold 6/7/12
Supervisor Signature/Date

The employee/supervisor signatures certify that the information provided is true and correct and the amount shown on the form is the (total) amount received from the reimbursing source.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



A RESOLUTION Regarding acceptance of gifts and donations in accordance with Chapter 575 of the Government Code concerning acceptance of gifts and donations by certain state agencies;
2012-0972-MIS.

WHEREAS, Chapter 575 of the Government Code provides that a majority of the Commission must acknowledge the acceptance of all gifts of money or property with a value of \$500.00 or more in an open meeting no later than the 90th day after the date the gift is accepted.

WHEREAS, a list of gifts and donations submitted for acknowledgment is attached as Exhibit "A." The gifts have been accepted by the Executive Director. The list includes a description and amount of each gift or donation with a value of \$500.00 or more, the donor's name, and a statement regarding the purpose of each gift or donation in accordance with Section 575.004 of Chapter 575.

NOW, THEREFORE BE IT RESOLVED BY THE TEXAS COMMISSION ON ENVIRONMENTAL QUALITY that the Commission acknowledges acceptance of the gifts and donations listed in Exhibit "A" in accordance with Chapter 575 of the Government Code.

Issued this the _____ day of _____, 2012

TEXAS COMMISSION ON
ENVIRONMENTAL QUALITY

Bryan W. Shaw, Ph.D., Chairman

Exhibit A

**TEXAS NATURAL RESOURCE CONSERVATION COMMISSION
DECLARATION OF THIRD PARTY REIMBURSEMENT**

March 2012 through June 2012

Over \$500.00

| REIMBURSING ORGANIZATION NAME | TRAVELERS | DATES OF TRAVEL | DESTINATION | PURPOSE OF TRIP | REIMBURSED | REIMBURSED TOTAL |
|---|--------------------|------------------|-----------------|---|--|------------------|
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Whitney, Christine | 04/25-04/26/2012 | Montgomery, AL | Attend ASTSWMO Mid-Year Meeting | Public Transport: \$28.00 Airfare: \$493.20 Meals: \$153.00 Lodging: \$201.20 Parking: \$30.00 Personal Mileage: \$15.30 Baggage Fees: \$50.00 | \$970.70 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Patton, Bob | 01/09-01/12/2012 | Washington D.C. | To participate in meetings of the Association of State and Territorial Solid Waste Management Officials (ASTSWMO). The benefit was by informing staff on technical issues related to redevelopment of removal action sites at remediation site. | Airfare: \$296.30 Public Transport: \$28.00 Meals: \$200.17 Lodging: \$628.62 Parking: \$34.00 Personal Mileage: \$22.44 Baggage Fees: \$50.00 | \$1,259.53 |

| | | | | | | |
|---|---------------------|------------------|-----------------|---|---|------------|
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Schaefer, Conrad J. | 04/24-04/26/2012 | Montgomery, AL | ASTSWMO Mid Year Meeting | Public Transport: \$28.00 Airfare: \$1,075.20 Lodging: \$94.46 Parking: \$183.00 Other: \$21.00 | \$1,401.66 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Valdez, Omar | 04/24-04/26/2012 | Montgomery, AL | Attend Mid-Year Meeting | Public Transport: \$30.00 Airfare: \$493.20 Meals: \$153.00 Lodging: \$183.00 | \$859.20 |
| ASTSWMO-Association of State & Territorial Solid Waste Management Officials | Valdez, Omar | 01/09-01/13/2012 | Washington D.C. | Attend focus group meetings | Public Transport: \$90.00 Airfare: \$506.80 Meals: \$348.00 Lodging: \$846.91 Baggage Fees: \$50.00 | \$1,841.71 |
| Environmental Council of the States (ECOS) | Kidd, Kenneth B. | 04/10-04/13/2012 | Washington D.C. | Attend the Toxic Release Inventory (TRI) National Training Conference | Public Transport: \$93.00 Airfare: \$435.20 Meals: \$120.40 Lodging: \$769.44 | \$1,418.04 |

\$880.48

Florida Department of Environmental Protection

Martin, Joe

04/09-04/11/2012

St. Petersburg, FL

GOMA Microbial Source Tracking Workshop

Public Transport: \$87.60
Airfare: \$380.00
Meals: \$61.00
Lodging: \$250.88
Parking: \$21.00
Misc.: \$80.00

\$510.76

Health Physics Society (HPS)

Jablonski, Susan

02/05-02/09/2012

Dallas, TX

Attend the Health Physics Society Midyear Meeting

Lodging: \$510.76

\$1,334.94

ITRC Interstate Technology Regulatory Council

Wilkinson, Brad

04/15-04/18/2012

Des Moines, IA

ITRC Spring Municipal Response Team

Airfare: \$884.20
Meals: \$122.00
Lodging: \$282.24
Parking: \$21.00
Personal Mileage: \$25.50

\$872.22

NOAA (National Oceanic and Atmospheric Administration)

Copeland, Weslee

01/10-01/12/2012

Baltimore, MD

To attend 2nd GOES-R Satellite Air Quality Proving Ground Advisory Group Workshop

Airfare: \$452.40
Meals: \$152.50
Lodging: \$214.70
Parking: \$21.00
Personal Mileage: \$31.62

| | | | | | | |
|--|-------------------|------------------|-----------------|---|---|------------|
| Nuclear Regulatory Commission | Broussard, Brad | 05/07-05/11/2012 | Albuquerque, NM | Attend Increased Controls Training | Airfare: \$492.69 Meals: \$322.00 Lodging: \$457.65 Parking: \$42.00 Registration Fees: \$44.00 Baggage Fees: \$50.00 | \$1,408.34 |
| Nuclear Regulatory Commission (NRC) | Weger, Hans | 05/07-05/10/2012 | Bethesda, MD | Training class on MILDPOSE-AREA computer program for calculating public dose from uranium source material recovery activities | Public Transport: \$82.00 Airfare: \$529.09 Meals: \$248.50 Lodging: \$759.36 Parking: \$28.00 Personal Mileage: \$16.93 | \$1,663.88 |
| Southern Environmental Enforcement Network | McReynolds, Danny | 04/03-04/06/2012 | San Antonio, TX | 2012 Membership Conference | Meals: \$126.00 Lodging: \$450.00 Parking: \$87.57 | \$663.57 |
| UAH/NASA AQAST | Domblaser, Bright | 04/24-04/26/2012 | Allanta, GA | Attend AQAST Physical Atmosphere Science Team meeting | Rental Car: \$75.20 Airfare: \$447.60 Meals: \$60.00 Lodging: \$138.04 Parking: \$18.00 Taxi: \$31.00 | \$769.84 |

| | | | | | | | |
|---------------------------------------|-------------------|------------------|----------------|---|--|---|-------------|
| U.S. NRC/FSME | Simmons, Sonia I. | 02/26-03/03/2012 | Chatanooga, TN | Participate in Transportation Course sponsored by the U.S. NRC | Public Transport: Airfare: Meals: Lodging: Personal Mileage: Misc.: | \$37.00 \$704.69 \$364.00 \$539.00 \$110.59 \$140.07 | \$1,895.35 |
| U.S. Nuclear Regulatory Commission | Line, Lee | 04/22-04/27/2012 | Sugar Land, TX | Nuclear Regulatory Commission (NRC) Training Course (H-314) | Meals: Lodging: | \$390.50 \$549.30 | \$939.80 |
| | | | | Totals: | | \$18,690.02 | \$18,690.02 |