b. <u>In Texas</u>

	Dept.	No.	Purpose	Date(s)	Location	Cost	Fund
1.	OCE	1	Transportation Project Delivery Conference	7/29-30	Waco	\$970	General
2.	FCD	8	Heavy equipment training for trainers*	7/29-31	Houston	\$14,125	FCD
3.	FCD	4	Texas Floodplain Management Association Technical Summit	8/26-29	San Antonio	\$7,760	FCD
4.	US	2	Change Management Foundation cert. prep online training	7/28-30	Houston	\$4,170	General
5.	PHS	3	Prasad counseling and training course*	TBD	Houston	\$4,000	General
6.	PHS	3	Var. fisc. yr. blanket request-DSHS trainings & confs.*	FY 2026	Various	\$4,020	General
						\$4,020	Grant
7.	PHS	4	Various fiscal year blanket request-epidemiologist meetings*	FY 2026	Various	\$11,190	General
8.	PHS	1	National Network for Oral Health Access Conference 11/8-12 San Antonio			\$3,347	Other
9.	HCD	-	Grow America remote learning training	10/20-24	Houston	-	General
			(\$3,700 appvd. 5/22 for 2 attndsdate change)				
10.	JUVPROB	6	Texas Probation Association Legislative Conference*	8/3-6	Allen	\$6,245	Grant
11.	JUVPROB		Mid management leadership for corrections profs. training*	8/10-15	Huntsville	\$98	Grant
						\$951	Other
12.	JUVPROB	7	Dialectical behavior therapy virtual training	9/15	Houston	\$33,250	Other
13.	HCRCA		Youth in Action Day at the Capitol visit	4/8	Austin	\$2,503	General
14.	HCRCA		Foster Youth Conference*	7/21-24	Allen	-	Grant
			(\$1,564 appvd. 6/12 for 2 attndsdate change)				
15.	HCRCA	11	Culture rise leadership workshop	8/12	Houston	\$17,000	General
16.	CAC	6	Crimes Against Children Conference	8/3-5	Dallas	\$13,459	Other
17.	C5	4	The Medical Foundation of Visual Systems Testing training*	7/27-30	Georgetown	\$2,500	Other
18.	C5		Patrol rifle instructor course*	8/18-22	Houston	\$600	Other
19.	C5	2	TAPEIT Conference	10/27-31	Galveston	\$3,260	Other
20.	SHERIFF	-	Texas Gang Investigators Conference*	6/22-27	San Antonio	-	General
			(\$14,770 appvd. 5/8 for 9 attndsdate change)				
21.	SHERIFF	3	Crime Prevention study session & exam*	7/20-21	College Station	\$966	General
22.	SHERIFF	4	Legal realities and options online course	9/17	Houston	\$976	General
23.	SHERIFF	1	Texas Commission on Law Enforcement Training Conference	9/22-25	McAllen	\$2,592	General
24.	SHERIFF	2	Cops Teaching Cops of Professional Development seminar*	10/20-24	Baytown	\$1,590	General
25.	SHERIFF	2	1st Responder Mental Health & Wellness Conference*	12/11-12	Galveston	\$1,190	General
26.	PTS	1	Maxwell leadership certification online training	TBD	Houston	\$4,995	General
27.	JP 8.1	-	Justice of the Peace and Constables Association Education Conf.	6/21-27	El Paso	\$1,903	General
			(\$3,197 appvd. 5/8 for 1 attnddate change & add exp.)				
28.	TAC		Various fiscal year blanket request*	FY 2025	Various	\$8,000	General
	PA		Statewide procurement education system training	5/19-22	Austin	\$2,165	General
	PA		Certified Texas contract manager training	5/12-15	Austin	\$2,898	General
	PA	2	Texas Comptroller Public Procurement training	5/12-15	Austin	\$5,600	General
32.	PCT2	2	American Planning Association Texas Chapter Planning Conf.*	10/22-24	Various	\$2,564	General
	Subtotal	610	In Texas average cost per attendee:	\$277		\$168,907	•
	Total	655				\$305,488	
	*Travel by	coun	ty vehicle	General \$	Grant \$	Other \$	Total \$
EV 2025 10/1/24 0/20/25						105 565	

FY 2025 = 10/1/24-9/30/25

Ī	General \$	Grant \$	Other \$	Total \$
	94,458	15,263	195,767	305,488

	Out of Texas \$	In Texas \$	Total \$
FY 2025	5,054,732	6,270,087	11,324,819

Travel & Training Request

[20] Other Source:

Total:

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved	Information	What additional changes are being requested? (Only select the changes that apply)			
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□city	☐ Estimated Expenses		
# of Attendees:		•	•		
Fund Source:		☐ Use of County Vehicle	☐ Funding Source		
		[b] Requested Inf	ormation		
[1] Department Name :			[2] Number of Attend	ees:	
[3] Subject/Purpose:					
[4] Benefit to County:					
[5] Event Dates (travel dates included): [6] City:					
		[c] Estimated Ex	xpenses		
[7] Registration Fee:		[12] Taxi/Other Ground Trans	sportation:		
[8] Per Diem:		[13] Personal Vehicle Mileago	•	[16] Use of County Vehicle?	
[9] Hotel:		[14] Vehicle Rental:		□Yes	
[10] Airline/bus/train:		[15] Other (Explain):		□No	
[11] Parking/Tolls:				☐Both (using county & personal)	
	Total Cost:				
		[d] Funding S	ource		
[17] General Fund:					
[18] Grant Fund:	1	[19] Name of Grant & Fund #	:		
(County grants only)					

Authorized By: Dr. Emma Santa Maria

(Name may be typed; signature is not required.)

[21] Name of Other Source (& fund # if applicable):

Travel & Training Request

(County grants only)

\$14,125.00

[20] Other Source:

Total:

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	changes	are being requested.		
Previously Approve	ed Information	What additional changes are being requested? (Only select the changes that apply)		
Court Date:		☐ Number of Attendees	☐ Event Dates	
Amount:		□City	☐ Estimated Expenses	
# of Attendees:		_ ′		
Fund Source:		☐ Use of County Vehicle	☐ Funding Source	
		[b] Requested In	formation	
[1] Department Name	<u>:</u> :		[2] Number of Attendee	<u>'S</u> :
Flood Control District			8	
[3] Subject/Purpose:	Heavy Equipment 1	Training for Trainers		
	,qp			
[4] Renefit to County:	This training will be			
[4] <u>Bellette to county</u> .	injuries, and liabilit	nhance operational safety, pro ties associated with heavy equ	imole a culture of safety and lipment use and improve inte	rnal training capacity.
[5] Event Dates (trave	l datas included).		re: City.	
07/29-31/2025	<u>raates mciaaea)</u> :	[6] <u>City:</u> Houston		
01720 0 172020			Trodotori	
		[c] Estimated E	xpenses	
[7] Registration Fee:	14,125.00	[12] Taxi/Other Ground Tran	sportation:	
[8] Per Diem:		[13] Personal Vehicle Mileag	e:	[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:		□□Yes
[10] Airline/bus/train	:	[15] Other (Explain):		□No
[11] Parking/Tolls:				■ Both (using county & personal)
			Total Cost: \$14,125.0	00
		[d] Funding S	Source	
[17] General Fund:				
[18] Grant Fund:		[19] Name of Grant & Fund #:		

14,125.00 [21] Name of Other Source (& fund # if applicable): Flood Control District - 090

Authorized By: Tina Petersen, Ph.D., P.E., Executive Director

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

errarrges	s are being requestea.			
Information	What additional changes are being requested? (Only select the changes that apply)		ested?	
	☐ Number of Attendees	☐ Event Dates		
	□ City	□ Estimated Ex	vnenses	
			•	
	☐ Use of County Vehicle	☐ Funding Sou	rce	
	[b] Requested In	formation		
		[2] Number o	of Attendees:	
		4		
25 Texas Flood	olain Management Association	(TFMA) Technica	al Summit	
his summit offers ne latest advance	s opportunities to enhance atte es in the practice of floodplain r	ndees' ability to p	provide guidanc	e and services as it relates to
[6] Event Dates (travel dates included): 08/26-29/2025 [6] City: San Antonio				
	[c] Estimated E	xpenses		
1 680 00	[12] Tavi/Other Ground Tran	sportation:		
	· · · · · · · · · · · · · · · · · · ·	•	1 200 00	[16] Use of County Vehicle?
	· · · · · · · · · · · · · · · · · · ·	e.	1,200.00	☐Yes
3,300.00	• •			✓No
340.00	[15] Other (Explain).			Both (using county & personal)
340.00			Φ7.700.00	Laborii (using county & personal)
		l otal Cost:	\$7,760.00	
	[d] Funding S	ource		
	225 Texas Flood his summit offers	What additional change (Only select the change (Only select the change Number of Attendees City Use of County Vehicle Description Description	What additional changes are being requered (Only select the changes that apply) Number of Attendees City Use of County Vehicle Funding Sou [2] Number of Attendees A 1,680.00 [12] Taxi/Other Ground Transportation: 1,240.00 [14] Vehicle Rental: [15] Other (Explain):	Information What additional changes are being requested? (Only select the changes that apply) Number of Attendees Event Dates Estimated Expenses Use of County Vehicle Funding Source

[17] General Fund:		
_		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
-		
		Flord Control Bistrict 000
[20] Other Source:	7,760.00	[21] Name of Other Source (& fund # if applicable): Flood Control District - 090
Total:	\$7,760.00	
		Authorized By: Tina Petersen, Ph.D., P.E., Executive Director

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

This section is to be ex		s are being requested.	m coart ana adar	tionar	
Previously Approve	d Information		What additional changes are being requested? (Only select the changes that apply)		
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated Ex	vnoncos	
# of Attendees:		,			
Fund Source:		☐ Use of County Vehicle	\square Funding Sou	rce	
		[b] Requested In	formation		
[1] Department Name: [2] Number of Attendees: 2					
[3] Subject/Purpose: (Change Managem	ent Foundation Certification Pr	ep (APMG) - Onl	line Training	
[4] Benefit to County:	Standing up a nev	w discipline in the department to terprise project implementation	o ensure practice , ensuring smoot	e is crucial for su th transitions an	uccessful organizational d minimizing disruptions.
[5] Event Dates (<i>travel dates included</i>): 7/28/2025 - 7/30/2025			[6] <u>City</u> : Houston		
		[c] Estimated E	xpenses		
[7] Registration Fee:	4,170.08	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	4,170.00	[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:	<u>. </u>		□Yes
[10] Airline/bus/train		[15] Other (Explain):			☑No
[11] Parking/Tolls:	•	[15] Gener (Explain).			Both (using county & personal)
0, 1			Total Cost:	\$4,170.08	
				Ψ4,170.06	
		[d] Funding S	ource		
[17] General Fund:	4,170.08				
[18] Grant Fund:		[19] Name of Grant & Fund #	:		

[18] Grant Fund:		[19] Name of Grant & Fun	d #:
(County grants only)			
[20] Other Source:		[21] Name of Other Source	e (& fund # if applicable):
Total:	\$4,170.08		
	<u> </u>	Authorized By:	Sindhu Menon, Executive Director & CIO

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be		en a request has been approved s are being requested.	in court and add	ditional	
Previously Approv	ed Information	What additional change (Only select the chang		uested?	
Court Date:		☐ Number of Attendees	☐ Event Date	S	
Amount:		□City	☐ Estimated	Evnenses	
# of Attendees:		,		•	
Fund Source:		☐ Use of County Vehicle	\square Funding So	urce	
		[b] Requested In	formation		
Danautusant Nam			res Namele es	of Attandage	
[1] Department Name		and Vector Control (MVC)	3	of Attendees:	
r ublic Health Services	s (F113) / Mosquito	and vector control (MVC)	3		
[3] Subject/Purpose:	To attend the 3-Da	ay Prasad Counseling and Trai	ning Course		
[4] Benefit to County	To improve the ef Harris County res	ficiency and effectiveness of midents from vector-borne diseas	osquito and vec ses associated	ctor control efforts with bird raptor re	s to protect eservoirs
[5] Event Dates (trave	<u>el dates included)</u> :	[6] City :			
TBD		Houston, TX			
		[c] Estimated E	xpenses		
[7] Registration Fee	: 4,000.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	,	[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:	<u> </u>		✓Yes
[10] Airline/bus/train	n:	[15] Other (Explain):			□No
[11] Parking/Tolls:		(==, = ================================			☐Both (using county & personal)
			Total Cost:	\$4,000.00	
		[d] Funding S	ource		
	1 222 22				
[17] General Fund:	4,000.00				
[18] Grant Fund:		[19] Name of Grant & Fund #	:		
(County grants only)					
[20] Other Source:		[21] Name of Other Source (8	(& fund # if applicable):		
		·		-	

Authorized By: Leah Barton — Interim Executive Director

(Name may be typed; signature is not required.)

\$4,000.00

Total:

Travel & Training Request

[10] Airline/bus/train:

[11] Parking/Tolls:

Previously Approved Information

Request Form Guidelines

This space for County Clerk's Office use only.

☑Both (using county & personal)

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

		(Only select the changes that apply)				
Court Date:		☐ Number of Attendees	☐ Event Date	28		
Amount:		□City	☐ Estimated	Expenses		
# of Attendees:		_ ′		•		
Fund Source:		☐ Use of County Vehicle	☐ Funding Sc	ource		
		[b] Requested Info	ormation			
(4) Donortmont Names			rot Number	r of Attandage		
[1] Department Name:	DUC) / Office of	Enidomiology Surveillance and		r of Attendees:		
Emerging Diseases (OES		Epidemiology, Surveillance, and	3			
,	,	artment of State Health Services	(Delle) Bubl	ic Health and Off	ion of Enidomiology trainings	
cor	attend the Depa	neetings throughout the State of	(DSHS) Fubi Texas	ic nealth and On	ice of Epidemiology trainings,	
[4] Benefit to County: Pa	articipation in the	ese meetings will provide perspe	ective on nume	erous public heal	th issues of importance to the	
	nstituents of Ha			-		
Is Event Dates (travel d	latos includad):		rcı City			
[5] Event Dates (travel d			[6] <u>City</u> : Various Locations throughout the State of Texas			
October 1, 2025- Septem	iber 30, 2026		various Loc	cations throughor	at the State of Texas	
Fallow shoul Farmaness						
[c] Estimated Expenses						
[7] Registration Fee:	1,800.00	[12] Taxi/Other Ground Trans	portation:	240.00		
[8] Per Diem:	2,400.00	· · · · · · · · · · · · · · · · · · ·		600.00	[16] Use of County Vehicle?	
[9] Hotel:	3,000.00	· ·			□Yes	
[10] Airline/bus/train:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	[15] Other (Fxplain):			□No	

What additional changes are being requested?

[d] Funding Source

Total Cost:

\$8,040.00

(Name may be typed; signature is not required.)

[15] Other (Explain):

[17] General Fund:	4,020.00	
[18] Grant Fund:	4,020.00	[19] Name of Grant & Fund #: Embrace HOPE Grant, Fund #2601
(County grants only)		
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$8,040.00	
		Authorized By: Leah Barton — Interim Executive Director

Please email completed request forms to travelagenda@hctx.net, and do not hand-deliver. Be sure to check the Agenda Deadline section of the agenda intranet website at www.hcintranet.net/agendaintranet, as deadlines are subject to change.

Request Form Guidelines

This space for County Clerk's Office use only.

Travel & Training Request

• If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.

- List only the number of attendees, omitting names from the form as this information is subject to change.
- Refrain from using acronyms unless description of acronym is provided.
- If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

changes are being requested.				
Previously Approved Information		What additional changes are being requested? (Only select the changes that apply)		
Court Date:		\square Number of Attendees	☐ Event Dates	
Amount:		□City	☐ Estimated Expenses	
# of Attendees:		_ ,	_	
Fund Source:		☐ Use of County Vehicle	☐ Funding Source	

[b] Requested Information

[1] Department Name:	[2] Number of Attendees:			
Public Health Services (PHS) / Office of Epidemiology, Surveillance, and Emerging Diseases (OESED)	4			
3] Subject/Purpose: To attend Local and State Epidemiologist and Data Meetings				
[4] Benefit to County: Participation in these meetings will provide perspective on numerous public health issues of importance to the constituents of Harris County				
[5] Event Dates (travel dates included): October 1, 2025- September 30, 2026	[6] <u>City</u> : Various Locations throughout the State of Texas			

[c] Estimated Expenses

		~		
[7] Registration Fee:	1,200.00	[12] Taxi/Other Ground Transportation:	240.00	
[8] Per Diem:	2,400.00	[13] Personal Vehicle Mileage:	600.00	[16] Use of County Vehicle?
[9] Hotel:	3,000.00	[14] Vehicle Rental:	600.00	□Yes
[10] Airline/bus/train:	2,500.00	[15] Other (Explain):	400.00	□No
[11] Parking/Tolls:	250.00	Luggage Fees, Gas, Miscellaneous		☑Both (using county & personal)
		Total Cost:	\$11 190 00	

□Yes
□No
☑Both (using county & personal)

[d] Funding Source

[17] General Fund:	11,190.00	
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$11,190.00	

Authorized By: Leah Barton — Interim Executive Director

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approv	ed Information	What additional change (Only select the chang		iested?	
Court Date:		☐ Number of Attendees	☐ Event Dates	5	
Amount:		□City	□ Fatimatad F		
# of Attendees:			☐ Estimated E		
Fund Source:		☐ Use of County Vehicle	☐ Funding So	urce	
		[b] Requested Inf	formation		
1] Department Nam	a·		D Number	of Attendees:	
		ity Health and Wellness (CHW)		or Attendees.	
		, ,			
3] Subject/Purpose:	2025 National Net	twork for Oral Health Access (N	INOHA) Annual	Conference	
4] Benefit to County	Participation in th	is meeting will provide an oppor	rtunity to promo	te and support th	ne oral health
-	needs of Harris C	ounty residents through collabo	prative efforts wi	th other public h	ealth
El Event Dates (trave	al dates included):		[6] City:		
[6] <u>Event Dates (travel dates included)</u> : 11/8/2025 - 11/12/2025 San Antonio, TX					
11/0/2020 11/12/202		Gail Attentio, 174			
		[c] Estimated E	xpenses		
[7] Registration Fee		[]			
[8] Per Diem:	400.00	(-,	e:	350.00	[16] Use of County Vehicle?
[9] Hotel:	1,508.00	• •			□Yes
[10] Airline/bus/train		[15] Other (Explain):			☑No
[11] Parking/Tolls:	240.00				☐Both (using county & personal)
			Total Cost:	\$3,347.00	
		[d] Funding S	ource		<u></u>
	1	1			

[17] General Fund:		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:	3,347.00	[21] Name of Other Source (& fund # if applicable): CHARITY CARE, FUND # 2117
		ACCOUNT: 728018
		DEPT: 27550040
Total:	\$3,347.00	
		Authorized By: Leah Barton — Interim Executive Director

Fund Source:

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- TEXAS If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information		What additional changes are being requested? (Only select the changes that apply)		
urt Date:	May 22, 2025	☐ Number of Attendees	Event Dates	
ount:	\$3,700.00	□Citv	☐ Estimated Expenses	
		— City	— Estimated Expenses	

☐ Use of County Vehicle ☐ Funding Source

urt Date:	May 22, 2025	□Ni
nount:	\$3,700.00	□ci
of Attendees:	2	

General

fbl Red	uested	Intol	rmatior

[1] <u>Department Name</u> : Housing and Community Development	[2] Number of Attendees: (ensure full coverage)			
Subject/Purpose: Grow America 2025 Remote Learning				
[4] Benefit to County: The information will be used to expand and shape i	nitiatives developed and executed by the ARPA Program			
[5] Event Dates (travel dates included): 10/20/2025 to 10/24/2025	[6] <u>City</u> : Houston			

[c] Estimated Expenses

[7] Registration Fee:	[12] Taxi/Other Ground Transportation:		
[8] Per Diem:	[13] Personal Vehicle Mileage:		[16] Use of County Vehicle?
[9] Hotel:	[14] Vehicle Rental:		□Yes
[10] Airline/bus/train:	[15] Other (Explain):		☑No
[11] Parking/Tolls:			☐Both (using county & personal)
-	Tables	Φ0.00	

Total Cost:

[d] Funding Source

[17] General Fund:				
[18] Grant Fund:		[19] Name of Grant &	Fund #:	
(County grants only)				
[20] Other Source:		[21] Name of Other So	ource (& fund # if applicable):	
Total:	\$0.00			
		Authorized By:	Thao Costis, Executive Director	

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information		What additional changes are being requested? (Only select the changes that apply)		ested?	
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated Ex	nenses	
# of Attendees:				•	
Fund Source:		☐ Use of County Vehicle	☐ Funding Sour	rce	
		[b] Requested In	formation		
1] Department Name:			[2] Number o	of Attendees:	
Harris County Juvenile P	robation Depart	ment	six (6)		
[3] Subject/Purpose: Tex	xas Probation A	ssociation - 2025 Legislative C	onference		
		G			
[4] Benefit to County: O	btain informatior	n and resources to better equip	staff on handling	the changes o	f the Juvenile Justice system.
[5] Event Dates (travel d	lates included):		[6] City :		
August 3-6, 2025			Allen		
		[c] Estimated E	xpenses		
[7] Registration Fee:	1,530.00	[12] Taxi/Other Ground Tran	•		
[8] Per Diem:	1,740.00	[13] Personal Vehicle Mileag	e:	735.00	[16] Use of County Vehicle?
[9] Hotel:	2,000.00	[14] Vehicle Rental:			□Yes
[10] Airline/bus/train:		[15] Other (Explain):			□No
[11] Parking/Tolls:	240.00				☑Both (using county & personal)
			Total Cost:	\$6,245.00	
		[d] Funding S	ource		
turi Comerci Fundi					

[17] General Fund:		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)	6,245.00	Texas Juvenile Justice Department - State Aid Grant Fund 2602
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$6,245.00	

Authorized By: Henry Gonzalez, Executive Director

Request Form Guidelines

This space for County Clerk's Office use only.

Travel & Training Request

• If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.

- List only the number of attendees, omitting names from the form as this information is subject to change.
- Refrain from using acronyms unless description of acronym is provided.
- If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

chunges t	are being requested.	
Previously Approved Information	What additional change (Only select the chang	
Court Date:	☐ Number of Attendees	☐ Event Dates
Amount:	□Citv	☐ Estimated Expenses
# of Attendees:	_ ′	_
Fund Source:	☐ Use of County Vehicle	☐ Funding Source
	III Poguested In	formation

[b] Requested	Informa	tior
---------------	---------	------

[1] <u>Department Name</u> :	[2] Number of Attendees:
Harris County Juvenile Probation Department	One (1)
[3] Subject/Purpose: Correctional Management Institute of Texas - Mid M	anagement Leadership for Corrections Professionals
[4] Benefit to County: Development and succession planning by preparing position for greater responsibility.	g personnel serving in mid-management to senior level
[5] Event Dates (travel dates included): August 10-15, 2025	[6] <u>City</u> : Huntsville

[c] Estimated Expenses

[7] Registration Fee:		[12] Taxi/Other Ground Transportation:		
[8] Per Diem:	420.00	[13] Personal Vehicle Mileage:	99.00	[16] Use of County Vehicle?
[9] Hotel:	530.00	[14] Vehicle Rental:		□Yes
[10] Airline/bus/train:		[15] Other (Explain):		□No
[11] Parking/Tolls:				☑Both (using county & personal)
		Total Cost:	\$1.049.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)	98.00	Texas Juvenile Justice Department State Aid Grant Fund - 2602
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
	951.00	Paid for by Correctional Management Institute
Total:	\$1,049.00	
		Authorized By: Henry Gonzalez, Executive Director

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approv	ved Information	What additional changes are being requested? (Only select the changes that apply)			
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated E	ynenses	
# of Attendees:		'		•	
Fund Source:		☐ Use of County Vehicle	☐ Funding Sou	ırce	
		[b] Requested Inf	formation		
[1] Department Nam	e:		[2] Number	of Attendees:	
Harris County Juveni	e Probation Depart	ment	7	_	
[3] Subject/Purpose	Palo Alto Universit	y - 2025 Cohort Comprehensiv	e Dialectical Bel	navior Therapy ((DBT)
[4] Benefit to County	Dialectical Behav leading to improve	ior Therapy (DBT) training can ed mental health outcomes for	enhance therapi our youth.	sts ability to pro	vide impactful treatment,
[5] Event Dates (travel dates included): 09/15/2025 - Self-paced virtual [6] City: N/A - Virtual					
1777 Tillian					
		[c] Estimated E	xpenses		
[7] Registration Fee	33,250.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	,	[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:			□Yes
[10] Airline/bus/trai	n:	[15] Other (Explain):			☑No
[11] Parking/Tolls:					☐Both (using county & personal)
			Total Cost:	\$33,250.00	
		[d] Funding S	ource		
[17] General Fund:					

[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	33,250.00	[21] Name of Other Source (& fund # if applicable): GIFT Grant - GIFT_GY25 Fund# 2601
Total:	\$33,250.00	
		Authorized By: Henry Gonzales, Executive Director

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	cnange	s are being requestea.			
Previously Approved Information			What additional changes are being requested? (Only select the changes that apply)		
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated E	vnenses	
# of Attendees:				•	
Fund Source:		☐ Use of County Vehicle	☐ Funding Sou	irce	
		[b] Requested In	formation		
1] Department Name	 ! :		[2] Number	of Attendees:	
Harris County Resourc		d Adults	26		
3] Subject/Purpose : ⁊	Texas Network of	Youth Services (TNOYS) Youth	n in Action Day a	t the Capitol	
4] Benefit to County:	Youth served by t	he department's leadership pro	ogram learned ab	oout advocating	for youth rights
5] Event Dates (trave) April 8, 2025	<u>l dates included)</u> :		[6] City: Austin, Texa	S	
		[c] Estimated E	xpenses		
[7] Registration Fee:		[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:		[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:		2,502.78	□Yes
[10] Airline/bus/train	:	[15] Other (Explain):		,	☑No
[11] Parking/Tolls:					☐Both (using county & personal)
			Total Cost:	\$2,502.78	
		[d] Funding S	ource		
[17] General Fund:	2,502.78				

[17] General Fund:	2,502.78	
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
	_	
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$2,502.78	A that at B. I had begin a Evaportive Director. June 40, 2025

Authorized By: Joel Levine, Executive Director June 18, 2025

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information	1

Court Date: 6/12/2025 \$1,564.00 Amount: # of Attendees: Fund Source: Grant

What additional	changes are	being re	quested?

(Only select the changes that apply)

☑ Event Dates ☐ Number of Attendees

☐ City ☐ Estimated Expenses

☐ Use of County Vehicle ☐ Funding Source

[b] Requested Information

ence					
trainings and learn about employment opportunities and r foster youth in Texas.					
[6] <u>City</u> : Allen, Texas					
[c] Estimated Expenses					

[7] Registration Fee:	[12] Taxi/Other Ground Transportation:	
[8] Per Diem:	[13] Personal Vehicle Mileage:	[16] Use of County Vehicle?
[9] Hotel:	[14] Vehicle Rental:	☑Yes
[10] Airline/bus/train:	[15] Other (Explain):	□No
[11] Parking/Tolls:		☐Both (using county & personal)

Total Cost:

[d] Funding Source

[17] General Fund:				
[18] Grant Fund:		[19] Name of Grant &	Fund #:	
(County grants only)				
[20] Other Source:		[21] Name of Other So	ource (& fund # if applicable):	
Total:	\$0.00			
		Authorized By:	Joel Levine, Executive Director June 23, 2025	

Travel & Training Request

[20] Other Source:

Total:

\$17,000.00

Request Form Guidelines

This space for County Clerk's Office use only.

- TEXAS If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	changes	s are being requestea.			
Previously Approve	ed Information	What additional change (Only select the chang		ested?	
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated Ex	(noncos	
# of Attendees:					
Fund Source:		☐ Use of County Vehicle	☐ Funding Sou	rce	
		[b] Requested In	formation		
[1] Department Name):		[2] Number o	of Attendees:	
Harris County Resource		d Adults	11		
[3] Subject/Purpose: (Culture Rise Leade	ership Workshop			
[4] Benefit to County:	Provide tools to he	elp take a "people-first" approa	ch managing tea	ms while also a	chieving critical outcomes.
[5] Event Dates (trave August 12, 2025	l dates included):		[6] <u>City</u> : Houston ,Tex	(as	
		[c] Estimated E	xpenses		
[7] Registration Fee:	17,000.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	11,000.00	[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:			□Yes
[10] Airline/bus/train	n:	[15] Other (Explain):			☑No
[11] Parking/Tolls:					Both (using county & personal)
			Total Cost:	\$17,000.00	
		[d] Funding S	ource		
[17] General Fund:	17,000.00				
[18] Grant Fund:		[19] Name of Grant & Fund #	:		
(County grants only)					

Authorized By: Joel Levine, Executive Director June 23, 2025

(Name may be typed; signature is not required.)

[21] Name of Other Source (& fund # if applicable):

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Appro	ved Information	What additional change (Only select the chang		uested?	
Court Date:		☐ Number of Attendees	☐ Event Date	<u> </u>	
Amount:		□City	☐ Estimated	Expenses	
# of Attendees:			_	•	
Fund Source:		☐ Use of County Vehicle	☐ Funding So	ource	
		[b] Requested Inf	formation		
[4] Donartment Nan	•		ral Numbo	r of Attendees:	
[1] Department Nan Children's Assessme	nt Center		6 - MDT De	ept., Therapy Dep	ot., Training Dept., CCS Dept.
[3] Subject/Purpose		nst Children Conference / provi dren and helping children heal.	ding practical a	and interactive ins	struction to those fighting
[4] Benefit to Count	y: Provide training to psychology, trainii	o Harris County employees in t ng and multidisciplinary team e	he fields of fore nhancement wh	ensic services, fai ho work directly c	mily advovacy, therapy, or on behalf of child victims.
[5] Event Dates (trav	vel dates included):		[6] <u>City:</u> Dallas		
August 3 - 5, 2025			Dallas		
		[c] Estimated E	xpenses		
(-) Decistuation Fo	e: 5,370.00	voi Tori /Othor Crownd Tron			
[7] Registration Fe	360.00	t 1 - 7	•	1,969.80	[16] Use of County Vehicle?
[8] Per Diem:	5,039.22	[]	e.	1,303.00	Yes
[9] Hotel:		[14] Vehicle Rental:			✓No
[10] Airline/bus/tra		[15] Other (Explain):			
[11] Parking/Tolls:	720.00				☐Both (using county & personal)
·			Total Cost:	\$13,459.02	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:	\$13,459.02	[21] Name of Other Source (& fund # if applicable):
		Children's Assessment Center Foundation
	-	
Total:	\$13,459.02	
	•	Authorized Dur Kerny McCracken

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	changes	s are being requested.			
Previously Approve	d Information	What additional change (Only select the chang		ested?	
Court Date:		☐ Number of Attendees	☐ Event Dates	5	
Amount:	-	□ City	☐ Estimated E	Evnenses	
# of Attendees:					
Fund Source:		Use of County Vehicle	☐ Funding Sou	urce	
		[b] Requested In	formation		
1] Department Name	:		[2] Number	of Attendees:	
Constable Precinct 5			4		
		al Foundation of Visual Systems		g the Daubert St	trandar for courtroom.
[5] Event Dates (travel	<u> dates included)</u> :	:	[6] <u>City</u> :		
July 27th - 30th, 2025			Georgetown	ı, TX	
		[c] Estimated E	vnancac		
		[c] LStilliated L	хрепзез		
[7] Registration Fee:		[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	900.00	(-,	e:		[16] Use of County Vehicle?
[9] Hotel:	1,600.00	[14] Vehicle Rental:			☑Yes
[10] Airline/bus/train	:	[15] Other (Explain):			□No
[11] Parking/Tolls:					☐Both (using county & personal)
			Total Cost:	\$2,500.00	
		[d] Funding S	ource		

[17] General Fund:			
[18] Grant Fund:		[19] Name of Grant & Fund #:	
(County grants only)			
[20] Other Source:	2,500.00	[21] Name of Other Source (& fund # if applicable):	
		Fund 2337 ACCOUNT 728018	
Total:	\$2,500.00		
		Authorized By: Patricia Thacker, Chief Clerk	

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	change.	s are being requested.			
Previously Approv	ved Information		What additional changes are being requested? (Only select the changes that apply)		
Court Date:		Number of Attendees	Event Dates		
Amount:		-	_		
# of Attendees:		☐ City	☐ Estimated Expens	ses	
Fund Source:		☐ Use of County Vehicle	☐ Funding Source		
•					
		[b] Requested In	formation		
11 Denartment Nam			[2] Number of At	tandoos.	
[1] Department Nam Constable Precinct 5	<u></u> .		1		
[3] Subject/Purpose:	Texas Tactical Pol	ice Officers Associations 40 Ho	ur Patrol Rifle Instruc	ctor Course	at the Houston Police
	Department.				
Al Benefit to County	This comprehensi	ve training program will equip o	our officer to effective	ly teach and	d implement techniques using
4) benefit to county	the Patrol Rifle.	vo training program will oquip c	rai omoor to omootivo	iy todori din	a imploment tooliniquoo doing
[5] Event Dates (trav	el dates included)	<u>:</u>	[6] <u>City</u> : Houston		
August 18-22, 2025			nousion		
		[c] Estimated E	xpenses		
[7] Registration Fee	e: 600.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:		[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:			☑Yes
[10] Airline/bus/trai	n:	[15] Other (Explain):			□No
[11] Parking/Tolls:					☐Both (using county & personal)
			Total Cost:	\$600.00	
				+ 5 5 5 . 5 6	
		[d] Funding S	ource		
[17] General Fund:					

[17] General Fund:			
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:	
[20] Other Source:		[21] Name of Other Source (& fund # if applicable) : Fund 2337 Account 728018	
Total:	\$600.00		

Authorized By: Patricia Thacker, Chief Clerk

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approv	ed Information	What additional change (Only select the chang		ested?	
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated Ex	nenses	
# of Attendees:					
Fund Source:		Use of County Vehicle	☐ Funding Sou	rce	
		[b] Requested In	formation		
			raz Nivembou e	of Attandage	
[1] Department Nan Constable Precinct			2 Number C	of Attendees:	
Constable Precinct	ე 				
[3] Subject/Purpose:	Texas Association	of Property and Evidence Inve	ntory Techinicain	s (TAPEIT) is	conducting an annual training
1	conference for the	basic tech certifications and ac	dvanced evidence	e tech certificati	ons.
[4] Benefit to County	:These certifcation	s enhance Constabel Precinct	5's property room	n operations by	ensuring compliance with
· ·	state laws, improv	ving courtroom testimony and s	trengthening inve	entory control a	nd audit accuracy.
[5] Event Dates (trave	al datas includad)		rcı Citve		
Oct. 27th - October 31	st	•	[6] City: Galveston		
		[c] Estimated E	xpenses		
	700.00	- 424 - 12			
[7] Registration Fee		. , . ,	_		
[8] Per Diem:		_	[13] Personal Vehicle Mileage:		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:		□Yes	
[10] Airline/bus/train	n:	[15] Other (Explain):			☑No
[11] Parking/Tolls:					☐Both (using county & personal)
			Total Cost:	\$3,260.00	
		[d] Funding S	ource		<u>-</u>

[17] General Fund:		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:	3,260.00	[21] Name of Other Source (& fund # if applicable):
		FUND 2337 728018
		Employees will be leaving at 10 am on Oct. 27th and departing the conference at noon
		on the 31st.
Total:	\$3,260.00	
		Authorized By: Patricia Thacker

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

changes are being requested.				
Previously Ap	proved Information	What additional change	es are being requested	
		(Only select the chang	es that apply)	
Court Date:	05/08/25	☐ Number of Attendees	Event Dates	
Amount:	\$14,770.00	□City	☐ Estimated Expense	
# of Attendees:	9	_	_	
Fund Source:	General	\square Use of County Vehicle	☐ Funding Source	

[1] <u>Department Name</u> :	[2] Number of Attendees:
540-Harris County Sheriff's Office, CIB	
[3] Subject/Purpose: 2025 Texas Gang Investigators Conference	
[4] Benefit to County: Investigators will be trained on the most recent trend gangs.	ds, patterns, and information regarding criminal street
[5] Event Dates (travel dates included): June 22-27, 2025	[6] <u>City</u> : San Antonio

[c] Estimated Expenses

[7] Registration Fee:	[12] Taxi/Other Ground Transportation:		
[8] Per Diem:	[13] Personal Vehicle Mileage:		[16] Use of County Vehicle?
[9] Hotel:	[14] Vehicle Rental:		☑Yes
[10] Airline/bus/train:	[15] Other (Explain):		□No
[11] Parking/Tolls:			☐Both (using county & personal)
		Φ0.00	

Total Cost:

[d] Funding Source

[17] General Fund:		
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$0.00	
		Authorized By: Sheriff Ed Gonzalez

Request Form Guidelines

This space for County Clerk's Office use only.

Travel & Training Request

• If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.

• List only the number of attendees, omitting names from the form as this information is subject to change.

- Refrain from using acronyms unless description of acronym is provided.
- If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	changes	are being requested.	
Previously Appro	oved Information	What additional change (Only select the change	-
Court Date:		\square Number of Attendees	☐ Event Dates
Amount:		□City	☐ Estimated Expenses
# of Attendees:		_ ′	_
Fund Source:		☐ Use of County Vehicle	☐ Funding Source

	CTAC		mation
1201013	*****	11117	rmation

[1] <u>Department Name</u> :	[2] Number of Attendees:
540- Harris County Sheriff's Office, SSB	3
[3] Subject/Purpose: Attend the Crime Prevention 2104 Study Session &	Exam
[4] Benefit to County: The Crime Prevention 2104 Exam is the next step fand to better serve the community.	or each deputy to become a Crime Prevention Specialist
[5] Event Dates (travel dates included): July 20-21, 2025	[6] <u>City</u> : College Station

[c] Estimated Expenses

[7] Registration Fee:	0.00	[12] Taxi/Other Ground Transportation:	0.00
[8] Per Diem:	240.00	[13] Personal Vehicle Mileage:	0.00
[9] Hotel:	725.76	[14] Vehicle Rental:	0.00
[10] Airline/bus/train:	0.00	[15] Other (Explain):	0.00
[11] Parking/Tolls:	0.00		

Total Cost:	\$965.76

[16] Use of County Vehicle?
✓Yes
□No
☐Both (using county & personal)

[d] Funding Source

[17] General Fund:	965.76		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:	
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):	
Total:	\$965.76		

Authorized By: Ed Gonzalez, Sheriff

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	changes	s are being requestea.		
Previously Approve	d Information	What additional changes are being requested? (Only select the changes that apply)		
Court Date:		☐ Number of Attendees	☐ Event Dates	
Amount:		□City	☐ Estimated Expenses	
# of Attendees:		,	·	
Fund Source:		☐ Use of County Vehicle	☐ Funding Source	
		[b] Requested In	formation	
[1] Department Name	<u> </u>		[2] Number of Attendee	s:
540- Harris County She	eriff's Office		4	
0.11/0				
[3] Subject/Purpose: L	aw Enforcement I	Response to Suicidal Subjects	: Legal Realities and Options.	(Online Course)
[4] Benefit to County:	Legal realities and	d options when law enforcemer	nt responds to suicidal subject	ts.
	_	·		
[5] Event Dates (travel	dates included):		[6] City :	
September 17, 2025	·· 			
[c] Estimated Expenses				
[7] Registration Fee:	976.00	[12] Taxi/Other Ground Tran	sportation:	
[8] Per Diem:	070.00	[13] Personal Vehicle Mileag	•	[16] Use of County Vehicle?
[9] Hotel :		[14] Vehicle Rental:	,	□Yes
[10] Airline/bus/train:		[15] Other (Explain):		_ ☑No
[11] Parking/Tolls:		[25] • • • • • • • • • • • • • • • • • • •		Both (using county & personal)
			Total Cost: \$976.0	=
			<u> </u>	
		[d] Funding S	Source	
[17] General Fund:	976.00			
(1.7) Ceneral Fana.	370.00			
[18] Grant Fund:		[19] Name of Grant & Fund #	#:	

[20] Other Source: [21] Name of Other Source (& fund # if applicable):

\$976.00 Total:

(County grants only)

Authorized By: Ed Gonzalez, Sheriff

Request Form Guidelines

This space for County Clerk's Office use only.

Travel & Training Request

• If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.

- List only the number of attendees, omitting names from the form as this information is subject to change.
- Refrain from using acronyms unless description of acronym is provided.
- If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information		What additional change: (Only select the change		uested?	
Court Date: Amount: # of Attendees: Fund Source:		□ Number of Attendees □ City □ Use of County Vehicle	☐ Event Date ☐ Estimated ☐ Funding So	Expenses	
		[b] Requested Inf	ormation		
Department Name: 540-Harris County Sheriff's Office, Behavioral Health Division [2] Number of Attendees: 1					
3] Subject/Purpose: Texas Commission on Law Enforcement (TCOLE) Training Conference 2025					
4] Benefit to County: The TCOLE conference is known for providing high-quality training sessions that address the most recent trends and challenges in law enforcement.					
[5] Event Dates (travel d September 22-25, 2025	ates included):		[6] <u>City</u> : McAllen		
		[c] Estimated Ex	xpenses		
[7] Registration Fee: [8] Per Diem: [9] Hotel: [10] Airline/bus/train: [11] Parking/Tolls:	275.00 320.00 1,048.80 667.74	[12] Taxi/Other Ground Trans [13] Personal Vehicle Mileago [14] Vehicle Rental: [15] Other (Explain): Airline luggage fee (\$40 each way)	•	80.00	[16] <u>Use of County Vehicle?</u> ☐Yes ☐No ☐Both (using county & personal)
			Total Cost:	\$2,591.54	

[d] Funding Source

[17] General Fund:	2,591.54	
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$2,591.54	

Authorized By: Sheriff Ed Gonzalez

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	change.	s are being requested.			
Previously Approv	ed Information		What additional changes are being requested? (Only select the changes that apply)		
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:	-	□City	☐ Estimated Ex	vnenses	
# of Attendees:		_ '		•	
Fund Source:		☐ Use of County Vehicle	☐ Funding Sou	rce	
		[b] Requested In	formation		
1] Department Nam	e:		[2] Number (of Attendees:	
540- Harris County SI		/BHD	2		
*					
[3] Subject/Purpose:	A four-and-a-half-ochallenges faced i	day innovative seminar designe n the public safety profession, f	ed by law enforce final course in tril	ment leaders a ogy hosted by l	nd focuses on the emerging FBI-LEEDA.
[4] Benefit to County	Cops Teaching C upon professiona	ops of professional developme I experiences to facilitate individ	nt. The seminar u	ıses a wide rar t and learning	nge of source material and calls
[5] Event Dates (trav	el dates included)	:	[6] City :		
October 20-24, 2025			Baytown		
		[c] Estimated E	xpenses		
[7] Registration Fee	1,590.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	,	[13] Personal Vehicle Mileag	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:			✓Yes
[10] Airline/bus/trai	n:	[15] Other (Explain):			□No
[11] Parking/Tolls:					Both (using county & personal)
			Total Cost:	\$1,590.00	
		[d] Funding S	ource		
		[u] r amanig 3	odi cc		
[17] General Fund:	1,590.00				

[17] General Fund:	1,590.00			
[18] Grant Fund:		[19] Name of Grant & Fund #:		
(County grants only)				
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):		
Total:	\$1,590.00			
	Authorized By: Ed Gonzalez, Sheriff			

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information	What additional changes a (Only select the changes t		<u>I?</u>	
Court Date: Amount: # of Attendees: Fund Source:	☐ Number of Attendees ☐ City ☐ Use of County Vehicle ☐	☐ Event Dates ☐ Estimated Expens ☐ Funding Source	ses	
	[b] Requested Info	rmation		
Department Name: 540- Harris County Sheriff's Office, Executive Bureau, Behavioral Health Subject/Purpose: 1st Responder Mental Health & Wellness Conference				
Benefit to County: The conference is dedicated to promoting awareness surrounding the difficulties of the profession and inspiring conversations that minimize the stigma associated with the layered stressors that first responders experience.				
[5] Event Dates (travel dates included): December 11-12, 2025		[6] <u>City</u> : Galveston		
	[c] Estimated Exp	enses		
[8] Per Diem: 260.00 [9] Hotel: 319.70 [10] Airline/bus/train:	[12] Taxi/Other Ground Transp [13] Personal Vehicle Mileage: [14] Vehicle Rental: [15] Other (Explain): Required Gift Basket	ortation:	200.00	[16] <u>Use of County Vehicle?</u> ☑Yes ☐No ☐Both (using county & personal)
		Total Cost:	51,189.87	

[d] Funding Source

1,189.87	
	[19] Name of Grant & Fund #:
	[21] Name of Other Source (& fund # if applicable):
\$1,189.87	A Library and B. Chaviff Ed Cannolon

Authorized By: Sheriff Ed Gonzalez

Travel & Training Request

[11] Parking/Tolls:

0.00

Request Form Guidelines

This space for County Clerk's Office use only.

 \square Both (using county & personal)

\$4,995.00

(Name may be typed; signature is not required.)

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

Previously Approv	ved Information	What additional changes are being requested? (Only select the changes that apply)		ed?	
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount:		□City	☐ Estimated Expe	enses	
# of Attendees:		_ ′			
Fund Source:		Use of County Vehicle	☐ Funding Source	2	
		[b] Requested In	formation		
1] Department Name: Pretrial Services [2] Number of Attendees: 1					
3] Subject/Purpose: Online platform training, Maxwell Leadership Certification					
[4] Benefit to County	The Maxwell Lea develop future lea	dership Certification Program o aders, including a lifetime curric	ffers online tools for ulum license and ac	r leaders to g ccess to a cu	ain essential knowledge and stomizable platform.
[5] Event Dates (trav TBD	el dates included)		[6] <u>City</u> : Houston		
		[c] Estimated E	xpenses		
[7] Registration Fee	4,995.00	[12] Taxi/Other Ground Tran	sportation:	0.00	
[8] Per Diem:	0.00	[13] Personal Vehicle Mileag	•	0.00	[16] Use of County Vehicle?
[9] Hotel:	0.00	[14] Vehicle Rental:		0.00	□Yes
[10] Airline/bus/trai	n: 0.00	[15] Other (Explain):		0.00	☑No

Total Cost:

[d] Funding Source

[17] General Fund:	4,995.00		
(,	,		
[18] Grant Fund:		[19] Name of Grant & Fund #:	
(County grants only)			
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):	
Total:	\$4,995.00		
	I.	Authorized By: Candice Olinhant	

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information

May 8, 2025 Court Date: \$3,197.40 Amount: # of Attendees: Fund Source: General

What additional changes are being requested?

(Only select the changes that apply)

☐ Number of Attendees ☑ Event Dates

□ City ☑ Estimated Expenses

☐ Use of County Vehicle ☐ Funding Source

[b] Requested Information

[1] Department Name: 381- Justice of the Peace 8-1	[2] Number of Attendees:				
[3] Subject/Purpose: Justice of the Peace and Constables Association Education Conference					
4] Benefit to County: The conference is designed to keep the Justice of the Peace and Constables informed on issues that are important to them and their constituents.					
[5] <u>Event Dates (travel dates included)</u> : June 21-27, 2025	[6] City: El Paso, Texas				

[c] Estimated Expenses

[7] Registration Fee:	250.00	[12] Taxi/Other Ground Transportation:		
[8] Per Diem:	450.00	[13] Personal Vehicle Mileage:		[16] Use of County Vehicle?
[9] Hotel:	245.76	[14] Vehicle Rental:	957.49	□Yes
[10] Airline/bus/train:		[15] Other (Explain):		☑No
[11] Parking/Tolls:				☐Both (using county & persona
		Total Cost:	\$1,903.25	

[d] Funding Source

1,903.25	
	[19] Name of Grant & Fund #:
	[21] Name of Other Source (& fund # if applicable):
	Conference Hotel Fees paid by Justice of the Peace and Constables Association
\$1,903.25	

Authorized By: Sherry Taylor

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional

	errarriges.	are semig requested.			
Previously Approv	<u>red Information</u>	What additional changes (Only select the changes		iested?	
Court Date:		☐ Number of Attendees	☐ Event Dates	5	
Amount:		□City	☐ Estimated E	ynansas	
# of Attendees:		_ ′	_	•	
Fund Source:		☐ Use of County Vehicle	☐ Funding Sou	urce	
		[b] Requested Info	ormation		
Department Nam	<u>e</u> :		[2] Number	of Attendees:	
	Tax Office			;	500
3] Subject/Purpose:	Fiscal Year 2025 B	Blanket Meetings			
[4] Benefit to County	: These specialized	I meetings and trainings help us	to better serv	e all of our stake	eholders.
[5] Event Dates (trave	 el dates included):		[6] City:		
•	F	Fiscal Year 2025	Var	ious cities throu	ghout Harris County
		[c] Estimated Ex	penses		
[7] Registration Fee		[12] Taxi/Other Ground Trans	nortation:		
[8] Per Diem:		[13] Personal Vehicle Mileage:	•		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:	•		Yes
[10] Airline/bus/train		[15] Other (Explain):		8,000.00	
[11] Parking/Tolls:	11.	Meals		0,000.00	Both (using county & personal)
[11] . d. Kill8/ 10113.			Tatal Cast	00 000 00	Lasing country & personal)
			Total Cost:	\$8,000.00	
		[d] Funding So	urce		

	0.000.00			
[17] General Fund:	8,000.00			
[18] Grant Fund:		[19] Name of Grant & Ful	nd #:	
(County grants only)				
[20] Other Source:		[21] Name of Other Source	ce (& fund # if applicable):	
		<u> </u>		
Total:	\$8,000.00			
		Authorized By:	Annette Ramirez	

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

<u>Previously Approved Information</u> <u>What additional changes are being requested?</u> (Only select the changes that apply)					
Court Date:		☐ Number of Attendees	☐ Event Dates	s	
Amount:		□City	☐ Estimated E	-vn on soc	
# of Attendees:		_ ′		•	
Fund Source:		☐ Use of County Vehicle	☐ Funding So	urce	
		[b] Requested In	formation		
1] Department Nan	ne:		[2] Number	of Attendees:	
Office of the Purchas			1		
[3] Subject/Purpose	Request travel and (Certified Texas C	d training for Deputy Director to ontract Developer)	attend Statewic	de Procurement l	Education System Training
[4] Benefit to Count	Y: This request will s compliance, supp	strengthen procurement operation orting responsible financial stee	ons, improves c wardship. Suppo	cost efficiency, ar orts strategic goa	nd ensures industry standard al 5-T7.
[5] Event Dates (trav	vel dates included):		[6] City :		
5/19/25 - 5/22/25			Austin		
		[c] Estimated E	xpenses		
[7] Registration Fe	e: 435.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	240.00	[13] Personal Vehicle Mileag	e:	450.00	[16] <u>Use of County Vehicle?</u>
[9] Hotel:	915.00	[14] Vehicle Rental:			□Yes
[10] Airline/bus/tra	in:	[15] Other (Explain):			☑No
[11] Parking/Tolls:	125.00				☐Both (using county & personal)
	-		Total Cost:	\$2,165.00	
		[d] Funding S	ource		_

2,165.00	
	[19] Name of Grant & Fund #:
	[21] Name of Other Source (& fund # if applicable):
\$2,165.00	
	\$2,165.00

Authorized By: Paige McInnis

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved	l Information	What additional change (Only select the chang		uested?	
Court Date:		☐ Number of Attendees	\square Event Date	s	
Amount:		□City	☐ Estimated I	Expenses	
# of Attendees:				·	
Fund Source:		☐ Use of County Vehicle	\square Funding So	urce	
		11 Paguested Int	formation		
		[b] Requested In	iormation		
Department Name:			[2] Number	of Attendees:	
Purchasing [Department		Two (2) - A	Attendance requi	red for both Attendees
[3] Subject/Purpose: C	ertified Texas Control	ontract Manager ty-wide initiatives with Contract	Management, S	Strategic Sourcin	g, and regulatory compliance.
[4] Benefit to County: S	trengthen procu tandards,suppor	rement operations, improves co ting responsible financial stewa	ost efficiency, a ardship.	nd ensures comp	oliance with industry
[5] Event Dates (travel	dates included):	:	[6] City:		
05/12/2025 to 05/	15/2025		Austin, TX		
		[c] Estimated E	xpenses		
[7] Registration Fee:	870.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	440.00	[13] Personal Vehicle Mileag	•	224.34	[16] Use of County Vehicle?
[9] Hotel:	1,363.74	[14] Vehicle Rental:			□Yes
[10] Airline/bus/train:		[15] Other (Explain):			☑No
[11] Parking/Tolls:					☐Both (using county & personal)
			Total Cost:	\$2,898.08	

[d] Funding Source

[17] General Fund:	2,898.08	
[18] Grant Fund:		[19] Name of Grant & Fund #:
(Count y grants only)		
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$2,898.08	
		Authorized Pur Paige Molnnis

Travel & Training Request

Request Form Guidelines

This space for County Clerk's Office use only.

- If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved	<u>Information</u>	What additional change (Only select the chang		ested?	
Court Date:		☐ Number of Attendees	☐ Event Dates		
Amount: # of Attendees:		□City	Estimated Ex	kpenses	
Fund Source:		☐ Use of County Vehicle	☐ Funding Sou	rce	
Tana Source.		<u>'</u>	o o		
		[b] Requested In	formation		
1] Department Name:			[2] Number (of Attendees:	
Office of the Purchasing	Agent				ller Public Procurement
3] Subject/Purpose: Re	quest travel and	training for 2 director level sta	ff to attend Texa	s Comptroller P	rublic Procurement training.
4] Benefit to County: TI CO	nis request will s ompliance, suppo	trengthen procurement operation	ons, improves co wardship. Suppo	ost efficiency, a rts strategic goa	nd ensures industry standard al 5-T7.
5] Event Dates (travel o 5/12/25 - 5/15/25	<u>lates included)</u> :		[6] City: Austin		
		[c] Estimated E	xpenses		
[7] Registration Fee:	2,610.00	[12] Taxi/Other Ground Tran	sportation:		
[8] Per Diem:	440.00	[13] Personal Vehicle Mileag		900.00	[16] Use of County Vehicle?
[9] Hotel:	1,400.00	[14] Vehicle Rental:	<u>. </u>	000.00	□Yes
[10] Airline/bus/train:	1,100.00	[15] Other (Explain):			☑No
[11] Parking/Tolls:	250.00	[25] • • • • • (27)			Both (using county & personal)
	<u> </u>		Total Cost:	\$5,600.00	
		[d] Funding S	ource		

[17] General Fund:	5,600.00	
[18] Grant Fund:		[19] Name of Grant & Fund #:
(County grants only)		
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$5,600.00	A. I I.B. Daina Malauria

Authorized By: Paige McInnis

Travel & Training Request

[5] **Event Dates** (travel dates included):

Wednesday, October 22 - Friday, October 24, 2025

Request Form Guidelines

This space for County Clerk's Office use only.

- TEXAS If a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below.
 - List only the number of attendees, omitting names from the form as this information is subject to change.
 - Refrain from using acronyms unless description of acronym is provided.
 - If a non-county fund is covering expenses, list under "Other" for funding source.

[a] Previously Approved

*This section is to be completed only when a request has been approved in court and additional changes are being requested.

Previously Approved Information	What additional change (Only select the chang				
Court Date:	☐ Number of Attendees	☐ Event Dates			
Amount:	□city	☐ Estimated Expenses			
# of Attendees:	_ ′	_			
Fund Source:	\square Use of County Vehicle	☐ Funding Source			
	[b] Requested In	formation			
[1] Department Name: Prescinct 2 Engineering & Capital Projects	l <u>ees</u> :				
[3] Subject/Purpose: American Planning Association Texas Chapter (APATX) 25 State Planning Conference					
[4] Benefit to County: See attached justifi	Benefit to County: See attached justification letter				

[c] Estimated Expenses

[6] City:

[7] Registration Fee:	1,000.00	[12] Taxi/Other Ground Transportation:	0.00
[8] Per Diem:	450.00	[13] Personal Vehicle Mileage:	0.00
[9] Hotel:	1,014.00	[14] Vehicle Rental:	0.00
[10] Airline/bus/train:	0.00	[15] Other (Explain):	0.00
[11] Parking/Tolls:	100.00		
-		Total Costs	\$2.564.00

\$2,564.00|| Total Cost:

Bryan-College Station, Texas

[16] Use of County Vehicle?
□Yes
□No
☑Both (using county & personal)

[d] Funding Source

[17] General Fund:	2,564.00		
[18] Grant Fund:		[19] Name of Grant & Fund #:	
(County grants only)			
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):	
Total:	\$2,564.00		

Authorized By: Faustino Benavidez