a. Out of Texas

	Dept.	No.	Purpose	Date(s)	Location	Cost	Fund	
1.	OCE	2	National Assn. of Home Builders Intnl. Builders' show	2/7-11/2022	Orlando, FL	\$4,500	General	
2.	TRA	1	Transportation Research Board meeting	ransportation Research Board meeting 1/9-13/2022 Washington, DC S		\$2,355	TRA	
			(\$10,635 appvd. 11/9 for 6 attndsadd attnd. & exp.)					
3.	PHS	1	Council & Committee Board of Directors meeting	12/7-11	Milwaukee, WI	\$2,530	Other	
4.	DRO	1	National Child Support Enforcement Assn. Policy Forum	2/2-5/2022	Washington, DC	\$1,998	Grant	
5.	SHERIFF	1	Police Executive Research Forum	Multiple	Boston, MA	\$10,860	Other	
			(\$22,020 appvd. 11/9 for 2 attndsadd attnd. & exp.)					
6.	DA	2	Assn. of Prosecuting Attorneys Adv. Committee training	10/24-26	Washington, DC	\$330	General	
						\$3,000	Other	
7.	DA	3	Prosecutorial strategies of major jurisdictions training	10/28-11/1	New York, NY	\$7,775	Other	
8.	MAC	1	Gideon's Promise Program guest speaker & training	1/20-23/2022	Atlanta, GA	\$628	Other	
	Subtotal							

(Rev. 8.1.17)				TI :	for County Clouble Office was and				
OUT OF	- If a request be	Request Form Guidelin			for County Clerk's Office use only.				
	additional above a place complete the "Draviaush Approved" action below								
TEXAS		umber of attendees, omitting names from	n the form as this						
Travel & Trainin	information is	subject to change. Ising acronyms unless description of acro	nym is provided.						
Request		y fund is covering expenses, list under "O		source.					
Request	(a) Drovi	ously Approved							
*This section is to be cor		a request has been approved in	court and add	itional					
		are being requested.	court and add						
Previously Approved	Information	What additional changes	are being requ	ested?					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Only select the changes							
Court Date:		Number of Attendees	Event Dates						
Amount:		□ City	Estimated E	xpenses					
# of Attendees:			Funding Sou	Irce					
Fund Source:		- Ose of county vehicle							
		[b] Requested Info	rmation						
[1] Department Name:	enderstanden en en de hen medde werd verfangen. Som	[2] Numbe	er of Attende	es: 2					
Harris County Engineer	ing Department			please explain):					
	3 1 .	Two atter	dees with dif	ferent roles, all r	need to attend				
[3] Subject/Purpose: 20	22 National Asso	ociation of Home Builders (NA	HB) Internati	onal Builders' SI	now (IBS)				
[4] Benefit to County:	- notwork with o	ther building professionals acro	occ all induct	ies in light cons	truction including the latest				
tre	ends and innova	tions in the housing industry a	nd advancem	ents in technolo	gy and energy-efficiency				
 [5] Event Dates (travel of February 7-11, 2022 	<u>iates incluaea)</u> :		[6] City, Stat Orlando, Flor						
February 7-11, 2022									
		[c] Estimated Ex	penses						
[7] Registration Fee:	and the second s	[12] Taxi/Other Ground Transp	Construction of the second sec	200.00	test line of County Mahiela?				
[8] Per Diem (\$55 daily):		[13] Personal Vehicle Mileage:			[16] Use of County Vehicle?				
[9] Hotel:	the second s	[14] Vehicle Rental:			⊠No				
[10] Airline/bus/train: [11] Parking/Tolls:	600.00	[15] Other (Explain):			Both (using county & personal)				
[11] Parking/Tolis:				A (500 00)					
			Total Cost:	\$4,500.00					
		[d] Funding So	urce						
[17] General Fund:	4,500.00								
[18] Grant Fund:		[19] Name of Grant & Fund #:	a na an an tao an fa' an tao an an tao an						
(County grants only)									
			an angalang kan sa manana ba						
[20] Other Source:		[21] Name of Other Source (& j	und # if applica	ble):					
Tetal	A (FA) A								
Total:	\$4,500.00	Authorized By:Alis	a Max						
				ped: sianature is no					
Please email completed re-	quest forms to trave	lagenda@hctx.net, and do not hand	-deliver. Be sure	to check the Agend	a Deadline section of the agenda				

(Rev. 8.1.17)				TI	for County Clark's Office and an
OUT OF	lfarequert h	Request Form Guideli as been approved in court and a new fo			e for County Clerk's Office use only.
		as been approved in court and a new fo anges, please complete the "Previously			
TEXAS		number of attendees, omitting names fr	rom the form as this		
Travel & Trainin		s subject to change. using acronyms unless description of ac	cronym is provided.		
Request	0	ity fund is covering expenses, list under		source.	
Rodoosi	Drev	iously Approved		SCI2452	
*This section is to be con		n a request has been approved i	in court and add	itional	
This section is to be con		are being requested.			
Previously Approved	Information	What additional change	s are being requ	ested?	
		(Only select the change	es that apply)		
Court Date: 11/9/	/2021	Number of Attendees	Event Dates	5	
Amount: \$10,6	635.00	□ City	🗹 Estimated E	xpenses	
# of Attendees: 6		Use of County Vehicle			
Fund Source: TRA	<u> </u>		in running sol		
				l	
		[b] Requested Inf	ormation		
[1] Department Name:		[2] Num	ber of Attende	es: 1	
Toll Road Authority			han one to attend,		
Ton read rationty		Differen	t roles within th	ne agency	
3 Subject/Purpose: Att	end Transporta	tion Research Board (TRB) A	nnual meeting	in January 202	2.
,			5	,	
(a) Repetit to County					
[4] <u>Denenic to County</u> : TF	RA's membersh	ip to TRB includes free regist lect lectures/workshops on re	rations for annu	ual meeting. Be	nefit to County through staff
•****	-	lect lectures/workshops on re	search and au		
[5] Event Dates (travel d	ates included):		[6] City, Stat	A second s	
January 9-13, 2022			Washington,	DC	
		[c] Estimated E	vnoncoc		
			xpenses		
[7] Registration Fee:	0.00	[12] Taxi/Other Ground Tran	sportation:	250.00	
[8] Per Diem (\$55 daily):	275.00	[13] Personal Vehicle Mileage	e:		[16] Use of County Vehicle?
[9] Hotel:	1,130.00	[14] Vehicle Rental:	T		
		[14] Verheie Henteri			□Yes
[10] Airline/bus/train:		[15] Other (Explain):			⊠No
[10] Airline/bus/train: [11] Parking/Tolls:					⊠No
	500.00		Total Cost:	\$2,355.00	⊠No
	500.00	[15] Other (Explain):		\$2,355.00	⊠No
	500.00			\$2,355.00	⊠No
	500.00	[15] Other (Explain):		\$2,355.00	
[11] Parking/Tolls: [17] General Fund:	500.00	[15] Other (Explain): [d] Funding S	ource	\$2,355.00	⊠No
[11] Parking/Tolls: [11] General Fund: [17] General Fund:	500.00	[15] Other (Explain):	ource	\$2,355.00	⊠No
[11] Parking/Tolls: [17] General Fund:	500.00	[15] Other (Explain): [d] Funding S	ource	\$2,355.00	⊠No
[11] Parking/Tolls: [11] General Fund: [17] General Fund:	500.00	[15] Other (Explain): [d] Funding S	ource	\$2,355.00	⊠No
[11] Parking/Tolls: [11] Parking/Tolls: [17] General Fund: [18] Grant Fund: (County grants only)	500.00 200.00	 [15] Other (Explain): [d] Funding S [19] Name of Grant & Fund # 	ource		☑No ☐Both (using county & personal)
[11] Parking/Tolls: [11] General Fund: [17] General Fund:	500.00 200.00	 [15] Other (Explain): [d] Funding S [19] Name of Grant & Fund # [21] Name of Other Source (8) 	ource		☑No □Both (using county & personal)
[11] Parking/Tolls: [11] Parking/Tolls: [17] General Fund: [18] Grant Fund: (County grants only)	500.00 200.00	 [15] Other (Explain): [d] Funding S [19] Name of Grant & Fund # 	ource		☑No □Both (using county & personal)
[11] Parking/Tolls: [11] Parking/Tolls: [17] General Fund: [18] Grant Fund: (County grants only)	500.00 200.00	 [15] Other (Explain): [d] Funding S [19] Name of Grant & Fund # [21] Name of Other Source (8) 	ource		☑No ☐Both (using county & personal)
[11] Parking/Tolls: [11] Parking/Tolls: [17] General Fund: [18] Grant Fund: (County grants only) [20] Other Source:	500.00 200.00	 [15] Other (Explain): [d] Funding S [19] Name of Grant & Fund # [21] Name of Other Source (8) 	ource		☑No □Both (using county & personal)
[11] Parking/Tolls: [11] Parking/Tolls: [17] General Fund: [18] Grant Fund: (County grants only)	500.00 200.00	 [15] Other (Explain): [d] Funding S [19] Name of Grant & Fund # [21] Name of Other Source (8) 	OURCE	<i>ble)</i> : Fund: 5302	☑No □Both (using county & personal)

(Rev. 8.1.17) OUTOOF TEXAS Travel & Training Request * This space for County Clerk's Office • 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	d Information		al changes are being req ct the changes that apply)	uested?	
Court Date:		Number of Atte	_	s	
Amount:		□ City	□ Estimated	Expenses	
# of Attendees: Fund Source:		Use of County			
		[b] Reques	sted Information		
[1] Department Name: Public Health Services ((EPH)		ntal Public Health	[2] Number of Attende (If more than one to attend		
[3] Subject/Purpose: C	ouncil for Accre oard of Director		ional Hearing Conser	vation Annual C	Council and Committee
			best practices and co The traveler will follo		etwork of occupational elines.
[5] Event Dates (travel December 7-11, 202	~		[6] <u>City, Sta</u> Milwauke		
		[c] Estim	ated Expenses		
[7] Registration Fee:		[12] Taxi/Other Grou	und Transportation:	300.00	
[8] Per Diem (\$55 daily):	275.00	[13] Personal Vehicle		80.00	[16] Use of County Vehicle?
[9] Hotel:	1,200.00	[14] Vehicle Rental:			□Yes
[10] Airline/bus/train: [11] Parking/Tolls:	600.00	[15] Other (Explain): Luggage Fees		75.00	☑No □Both (using county & personal)
			Total Cost:	\$ 2,530.00	
		[d] Fur	nding Source		
[17] General Fund:					
[18] Grant Fund:		[19] Name of Grant &	& Fund #:		
(County grants only)					
[20] Other Source:	2,530.00	[21] Name of Other	Source (& fund # if applice	able): Council for	Accreditation in
	_,		ing Conservation will		
		for all costs associa	ated with this trip.		
Total:	\$ 2,530.00				
	ψ 2,000.00	Authorized By		n, MPP, JD, CH	<u>C – Executive Director</u>
			invuine nuv de t	iscu, signature is II	ot it unit u.i

Please email completed request forms to <u>travelagenda@hctx.net</u>, 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.

For all questions concerning Travel & Training requests, please email the travel agenda email address provided or call 713-271-1111.

(Rev. 8.1.17)					for County Clark's Office use only		
OUT O	OUT OF . If a request has been approved in court and a new form is submitted to request This space for County Clerk's Office use only.						
additional charges complete the "Previously Approved" exting below							
TEXAS	• List only the number of attendees, omitting names from the form as this information is subject to change.						
Travel & Traini	ng • Refrain from	s subject to change. using acronyms unless description of acronym is	s provided.				
Request	If a non-count	ty fund is covering expenses, list under "Other"	for funding s	ource.			
	fal Previ	ously Approved	Palarse				
*This section is to be cc	mpleted only when	n a request has been approved in cour are being requested.	t and addi	tional			
Previously Approved	Information	What additional changes are being requested? (Only select the changes that apply)					
Court Date:		\Box Number of Attendees \Box Ev	ent Dates				
Amount:		□ City □ Es	timated Ex	kpenses			
# of Attendees: Fund Source:		Use of County Vehicle	Inding Sou	rce			
		[b] Requested Inform	ation				
 Department Name: Domestic Relations Of 		[2] Number of (If more than one					
		1	,				
[3] Subject/Purpose:N	ational Child Sup	port Enforcement Association Polic	y Forum				
[4] <u>Benefit to County</u> :E s	ducating and up tate, and local le	dating on policies and issues influe vels.	ncing the	Child Support	Program at the national,		
[5] Event Dates (travel	dates included)	[6]	City, State				
February 2-5, 2022	autes includeuj.	Wa	shington, I	5.C.			
		[c] Estimated Expen	ses				
[7] Registration Fee:	545.00	[12] Taxi/Other Ground Transporta	tion:	125.00			
[8] Per Diem (\$55 daily):		[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:	80.00				Both (using county & personal)		
			al Cost:	\$1,998.00			
		[d] Funding Sourc	е				
[17] General Fund:							
[18] Grant Fund: 1,998.00		[19] Name of Grant & Fund #: Integ	rated Chi	ld Support Sys	tem (ICSS) OML 28604		
(County grants only)				er de Veler, e la fine var en la veletar			
[20] Other Source:		[21] Name of Other Source (& fund #	t if applicab	ole):			
Total:	\$1,998.00	Authorized By: David W. Si	npson				
				oed: sianature is no	ot required.)		

Please email completed request forms to <u>travelagenda@hctx.net</u>, 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.

For all questions concerning Travel & Training requests, please email the travel agenda email address provided or call 713-271-1111.

Rev. 8.1.17) Request Form Guidelines This space for County Clerk's Office use only. OUT OF 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. • Itis 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 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. *This section is to be completed only when a request has been approved in court and additional changes are being requested. What additional changes are being requested? (Only select the changes that apply) Court Date: 11/09/21 Amount: \$22,020.00 # of Attendees: 2 Fund Source: Other						
		Downstead Information				
 Department Name: 540-Harris County She Subject/Purpose: P 			dees: 1			
 [4] <u>Benefit to County</u>: 7 Si [5] Event Dates (travel of the second second	afety, procedura	blice executive program in the nation. Will al justice, accountability, transparency and	how to manage la	and best practices in public aw enforcement agencies		
June 5-24 & July 9-29, 20		Boston, M	0			
		[c] Estimated Expenses				
[7] Registration Fee:	9 950 00	[12] Taxi/Other Ground Transportation:	100.00			
[8] Per Diem (\$55 daily):	110.00		100.00	[16] Use of County Vehicle?		
[9] Hotel:		[14] Vehicle Rental:		Yes		
[10] Airline/bus/train:	600.00	[15] Other (Explain):	100.00			
[11] Parking/Tolls:		Baggage fees		Both (using county & personal)		
		Total Cost	\$10,860.00			
		[d] Funding Source				
[17] General Fund:						
[18] Grant Fund: (County grants only)						
[20] Other Source:	10,860.00	[21] Name of Other Source (& fund # if appl Per diem is needed for traveling days *Meals and Lodging is included in registra		e within 45 days		
-		אישטאיש איש בטעצווא אישטעכע ווי ופעושני		o want to days		
Total:	\$10,860.00	Authorized By: Ed Gonzalez, She				
Please email completed re	quest forms to trav	(Name may be relagenda@hctx.net, and do not hand-deliver. Be s	typed: sianature is near the transformed of transformed of the transformed of the transformed of the transformed of the transformed of transformed of transformed of the transformed of tra			

(Rev. 8.1.17) OUT OF TEXAS Travel & Trainin Request Previously Approved Court Date: Amount: # of Attendees: Fund Source:	additional ch List only the information G • Refrain from • If a non-cour	inty fund is covering expenses iously Approved a first quart has been a solution of quarted What addition	and a new form i "Previously App ting names from cription of acrony is, list under "Oth al changes ar ct the changes th cendees	s submitted to re roved" section b the form as this ym is provided. her" for funding s e being reque	equest elow. ource. 'sonat ested? cpenses	e for County Clerk's Office use only.
		[b] Reques	sted Infor	mation		
	ssociation of P alth	Prosecuting Attorneys	(If more than Represent	ation for DA	please explain): Kim Ogg	sparities in Reproductive
[5] <u>Event Dates (travel d</u> October 24-26, 2021			nated Exp	(6) <u>City, Stat</u> Washington, enses		
[7] Registration Fee:		[12] Taxi/Other Grou				
[8] Per Diem (\$55 doily): [9] Hotel: [10] Airline/bus/train:	330.00	[13] Personal Vehicle [14] Vehicle Rental: [15] Other (Explain):	And the second and the second s		3,000.00	[16] <u>Use of County Vehicle?</u> ☐Yes ☑No
[11] Parking/Tolls:		Expenses	T	otal Cost:	\$3,330.00	Both (using county & personal)
		_{ret} Fur	nding Sou			
[17] General Fund:	330.00					
(18) Grant Fund: (County grants only)		(19) Name of Grant 8	& Fund #:	, , , , , , , , , , , , , , , , , , ,		
[20] Other Source:	3,000.00	[21] Name of Other Source (& fund # if applicable): Association of Prosecuting Attorneys Arrangements paid and prepared by organization with the exception of meals per diem.				
Total:	\$3,330.00	Authorized By	(No		ed: sianature is no	ot required.) Ida Deadline section of the agenda

Rev. 8.1.17) Request Form Guidelines This space for County Clerk's Office use only. OUT OF 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. It is only the number of attendees, omitting names from the form as this information is subject to change. This space for County Clerk's Office use only. It are quest It a request has been approved in court and a new form is submitted to request additional changes, please complete the "Previously Approved" section below. It is only the number of attendees, omitting names from the form as this information is subject to change. This space for County Clerk's Office use only. It are quest It is only the number of attendees, omitting names from the form as this information is subject to change. It is non-county fund is covering expenses, list under "Other" for funding source. It is non-county fund is covering expenses, list under "Other" for funding source. It is section is to be completed only when a request has been approved in court and additional changes are being requested. It what additional changes are being requested? (Only select the changes that apphy) In Number of Attendees It was a county with a proved Court Date: Amount: It of Attendees: It was of County Vehicle It was of County Vehicle It was of County Vehicle How Source: It was of County Vehicle It was of County Vehicle It was of County Vehicle							
		[b] Reques	sted Inform	mation			
	1] Department Name: [2] Number of Attendees: Three (3) 545 - District Attorney's Office (if more than one to attend, please explain): Public Safety						
 [4] <u>Benefit to County:</u> [5] <u>Event Dates (travel a</u> October 28 - November 1 		owiedge.	ľ	6] <u>City, Stat</u> New York,			
		fc] Estim	nated Expe	enses			
	000.00	[12] Taxi/Other Gro			500.00		
[7] Registration Fee: [8] Per Diem (\$55 daily):		[12] Personal Vehicl			300.00	[16] Use of County Vehicle?	
[9] Hotel:		[14] Vehicle Rental:				Yes	
[10] Airline/bus/train:	1,500.00	[15] Other (Explain):				☑ No	
[11] Parking/Tolls:	150.00					Both (using county & personal)	
			T	otal Cost:	\$7,775.00		
		(d) Fu l	nding Sou	rce			
[17] General Fund:							
[18] Grant Fund: (County grants only)							
[20] Other Source:	[20] Other Source: 7,775.00 [21] Name of Other Source (& fund # if applicable): 20				bie): 2054 - DA	Special Investigation	
Total:	\$7,775.00	Authorized B	(No	me may be t	Kenf ped: signature is n	ot reauired.)	
Please email completed re	quest forms to trav	elagenda@hctx.net, an	d do not hand-d	eliver. Be sur	e to check the Ager	ada Deadline section of the agenda	

(Rev. 8.1.17)				
OUT OF	A If a request h	Request Form Guidelines has been approved in court and a new form is submitted t		ce for County Clerk's Office use only.
	- indirequesti	anges, please complete the "Previously Approved" section	·	
TEXAS		number of attendees, omitting names from the form as the is ubject to change.	lis	
Travel & Trainir	1g • Refrain from	using acronyms unless description of acronym is provided		
Request	 If a non-court 	nty fund is covering expenses, list under "Other" for fundi	ng source.	
	[a] Prev	iously Approved		
*This section is to be cor		en a request has been approved in court and ac s are being requested.	lditional	
Previously Approved	Information	What additional changes are being read (Only select the changes that apply)	uested?	
Court Date:				
Amount:		City Estimated	Expenses	
# of Attendees:				
Fund Source:		Use of County Vehicle UFunding S	ource	
		[b] Requested Information		
1] Department Name:		[2] Number of Attend	lees: 1	
Office of Managed Assi	aned Counsel (at an at an at a star		
	-		a and a state of the	
[3] Subject/Purpose: Pri	mary: Speaker	Secondary: Continuing education, training	, meetings with c	ffice leads, administrators /
oth	ner criminal just	ice stakeholders, recruiting, exchanging be	st practices	
[4] Benefit to County:G	ideon's Promis	e is a national program that trains pds and	crt app'd attys. M	ly attendance will maintain a
he	ealthy relations	nip with an org. that plays a major role in d	eveloping the HC	attys that we serve
[5] Event Dates (travel o	lates included):	[6] <u>City, St</u>	ate:	
January 20th, 2022Janu	ary 23rd, 2022	Atlanta, Ge	eorgia	
		[c] Estimated Expenses		
		(c) Estimated Expenses		
[7] Registration Fee:		[12] Taxi/Other Ground Transportation:		
[8] Per Diem (\$55 daily):		[13] Personal Vehicle Mileage:		[16] Use of County Vehicle?
[9] Hotel:		[14] Vehicle Rental:		☐Yes F7No
[10] Airline/bus/train: [11] Parking/Tolls:	176.80	[15] Other (Explain):		Both (using county & personal)
[11] Parking/ Tons.		Total Cost:	\$627.55	
		(d) Funding Source		
(17) Concerned Evende				
[17] General Fund:	ana kana kana kana kana kana kana kana			
[18] Grant Fund:		[19] Name of Grant & Fund #:	ala da en la compositação da da composita da composita da a composita da a composita da a composita da a compo	
(County grants only)				
[20] Other Source:	007 55	[21] Name of Other Source (& fund # if appli Gideon's Promise	cable):	
-	627.55	GIGEOILS FIOHISE		
-				
Total:	\$627.55			
	<i>4021100</i>	Authorized By: Kenneth Hardin	tvped: sianature is r	not required 1
		(Name may be relagenda@hctx.net, and do not hand-deliver. Be su		