

a. **Out of Texas**

	Dept.	No.	Purpose	Date(s)	Location	Cost	Fund
1.	HCRCA	2	Transformational Collaborative Outcomes Mgt. Conference	10/5-8	Lexington, KY	\$4,490	Grant
2.	HCRCA	5	National Adult Protective Services Association Conference	11/7-11	San Diego, CA	\$12,274	Other
3.	CAC	1	Regional Internet Crimes Against Children Conference	10/5-8	Seattle, WA	\$1,620	Other
4.	C3	1	Police Officer Funeral Service*	8/27-28	New Orleans, LA	\$328	Other
5.	C4	1	Mobile device examiner training	9/26-10/22	Hoover, AL	\$6,731	Other
6.	SHERIFF	-	Commercial Vehicle Post-Crash Inspection course (<i>\$11,040 appvd. 5/25 for 4 attns.-location change</i>)	9/15-25	Grand Island, NE	-	Other
7.	SHERIFF	-	Safeboat Sea Trials training (<i>\$4,480 appvd. 5/25 for 2 attns.-date change</i>)	9/20-23	Bremerton, WA	-	Other
8.	SHERIFF	3	American Elderly Abuse Conference* (<i>\$3,616 appvd. 8/10 for 4 attns.-add attns. & exp.</i>)	9/26-29	Slidell, LA	\$2,697	Other
9.	SHERIFF	1	Commercial Vehicle Crash Investigation course	10/10-15	Jacksonville, FL	\$2,475	Other
10.	SHERIFF	12	National Police Weekend	10/10-17	Washington, DC	\$26,060	Other
11.	SHERIFF	1	Homemade explosives training course	11/28-12/4	Huntsville, AL	\$5,160	Other
12.	FM	2	Hazardous Materials Response Vehicle meeting	9/13-15	Tampa, FL	\$3,030	Other
13.	FM	2	Tank Car Safety & Rail Emergency Response training	9/19-24	Pueblo, CO	\$7,000	Other
14.	PD	1	National Assn. of Criminal Defense Lawyers seminar	11/18-19	Las Vegas, NV	\$934	Other
Subtotal		32	Out of Texas average cost per attendee: \$2,275			\$72,799	

OUT OF TEXAS

Travel & Training Request

Request Form Guidelines

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[a] Previously Approved

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Previously Approved Information

Court Date:	
Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: Harris County Resources for Children and Adults	[2] Number of Attendees: 2 <i>(If more than one to attend, please explain):</i> To achieve greater coverage of various workshops
[3] Subject/Purpose: Annual Transformational Collaborative Outcomes Management Conference	
[4] Benefit to County: Attendees will be able to assist Youth Services Division staff through ongoing training, monitoring, and use of the Child and Adolescent Needs and Strengths (CANS) assessment tool.	
[5] Event Dates (travel dates included): October 5-8, 2021	[6] City, State: Lexington, Kentucky

[c] Estimated Expenses

[7] Registration Fee:	1,000.00	[12] Taxi/Other Ground Transportation:	150.00	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both <i>(using county & personal)</i>
[8] Per Diem (\$55 daily):	440.00	[13] Personal Vehicle Mileage:		
[9] Hotel:	1,300.00	[14] Vehicle Rental:		
[10] Airline/bus/train:	1,500.00	[15] Other (Explain):	100.00	
[11] Parking/Tolls:		Baggage		
Total Cost:			\$4,490.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: <i>(County grants only)</i>	4,490.00	[19] Name of Grant & Fund #: Title IV-E, Fund # 2601
[20] Other Source:		[21] Name of Other Source (& fund # if applicable):
Total:	\$4,490.00	

Authorized By: Joel Levine, Executive Director 8-27-21

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

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# of Attendees:	
Fund Source:	

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- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: Harris County Resources for Children and Adults	[2] Number of Attendees: 5 <i>(If more than one to attend, please explain):</i> To achieve greater coverage of various sessions.
[3] Subject/Purpose: National Adult Protective Services Association (NAPSA) Annual Conference	
[4] Benefit to County: Enhance employee knowledge and skills in the areas of elder abuse, treatment, prevention and multi-disciplinary team collaborations to better serve Harris County elderly victims of crime.	
[5] Event Dates (travel dates included): 11/07/21-11/11/21	[6] City, State: San Diego, California

[c] Estimated Expenses

[7] Registration Fee:	2,875.00	[12] Taxi/Other Ground Transportation:	0.00	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both <i>(using county & personal)</i>
[8] Per Diem (\$55 daily):	1,100.00	[13] Personal Vehicle Mileage:	174.00	
[9] Hotel:	4,350.00	[14] Vehicle Rental:	900.00	
[10] Airline/bus/train:	2,025.00	[15] Other (Explain):	675.00	
[11] Parking/Tolls:	175.00	Gas for rental car and luggage fee		
Total Cost:			\$12,274.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: <i>(County grants only)</i>		[19] Name of Grant & Fund #:
[20] Other Source:	12,274.00	[21] Name of Other Source (& fund # if applicable): Special Revenue
		Supplemental Guardianship Fund #2356
Total:	\$12,274.00	

Authorized By: Joel Levine 9/1/2021

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

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# of Attendees:	
Fund Source:	

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- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: The Children's Assessment Center (CAC)	[2] Number of Attendees: <i>(If more than one to attend, please explain):</i> 1
[3] Subject/Purpose: 2021 NW Regional ICAC Conference/ Participate in a panel on Harris County Internet crime case completed successfully with HMICAC and CAC and attend mental health workshops on treatment	
[4] Benefit to County: Other states learn from a successful investigation, mental health treatment and multi-disciplinary approach of handling Internet crimes against children cases and learn about other states practices.	
[5] Event Dates (travel dates included): October 5-8, 2021	[6] City, State: Seattle, WA

[c] Estimated Expenses

[7] Registration Fee:	0.00	[12] Taxi/Other Ground Transportation:	200.00	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both <i>(using county & personal)</i>
[8] Per Diem (\$55 daily):	220.00	[13] Personal Vehicle Mileage:	0.00	
[9] Hotel:	600.00	[14] Vehicle Rental:	0.00	
[10] Airline/bus/train:	600.00	[15] Other (Explain):		
[11] Parking/Tolls:	0.00			
Total Cost:			\$1,620.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: <i>(County grants only)</i>		[19] Name of Grant & Fund #:
[20] Other Source:	1,620.00	[21] Name of Other Source (& fund # if applicable): CAC Foundation
Total:	\$1,620.00	

Authorized By: Kerry McCracken

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

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Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: HARRIS COUNTY CONSTABLE PRECINCT 3	[2] Number of Attendees: 1 (If more than one to attend, please explain):
[3] Subject/Purpose: ATTEND FUNERAL OF SLAIN POLICE OFFICER	
[4] Benefit to County: ATTEND FUNERAL OF SLAIN POLICE OFFICER	
[5] Event Dates (travel dates included): 08/27-28/21	[6] City, State: NEW ORLEANS, LA

[c] Estimated Expenses

[7] Registration Fee:		[12] Taxi/Other Ground Transportation:		[16] Use of County Vehicle? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):	110.00	[13] Personal Vehicle Mileage:		
[9] Hotel:	118.19	[14] Vehicle Rental:		
[10] Airline/bus/train:		[15] Other (Explain):		
[11] Parking/Tolls:	100.00			
Total Cost:			\$328.19	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	328.19	[21] Name of Other Source (& fund # if applicable): CH. 18, FUND 2057
Total:	\$328.19	

Authorized By: KATIE EVANS

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

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Court Date:	
Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: Constable Precinct 4	[2] Number of Attendees: 1 <i>(If more than one to attend, please explain):</i>
[3] Subject/Purpose: Mobile Device Examiner	
[4] Benefit to County: Better trained personnel at NO cost to the County	
[5] Event Dates (travel dates included): September 26, 2021 - October 22, 2021	[6] City, State: Hoover, Alabama

[c] Estimated Expenses

[7] Registration Fee:		[12] Taxi/Other Ground Transportation:	
[8] Per Diem (\$55 daily):	1,485.00	[13] Personal Vehicle Mileage:	
[9] Hotel:	5,245.58	[14] Vehicle Rental:	
[10] Airline/bus/train:		[15] Other (Explain):	
[11] Parking/Tolls:			
Total Cost:		\$6,730.58	

[16] Use of County Vehicle?

- ☐ Yes
☒ No
☐ Both (using county & personal)

[d] Funding Source

[17] General Fund:	
[18] Grant Fund: <i>(County grants only)</i>	[19] Name of Grant & Fund #:
[20] Other Source:	[21] Name of Other Source (& fund # if applicable):
6,730.58	National Computer Forensics Institute
	Tuition, Travel Cost, Hotel, and Per Diem covered 100% by National Computer Forensic
	Institute
Total:	\$6,730.58

Authorized By: Constable Mark Herman

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

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Previously Approved Information

Court Date:	05/25/2021
Amount:	\$11,040.00
# of Attendees:	4
Fund Source:	Other

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: 540-Harris County Sheriff's Office, Patrol Support Services Bureau	[2] Number of Attendees: (If more than one to attend, please explain):
[3] Subject/Purpose: Commercial Vehicle Post-Crash Inspection Course	
[4] Benefit to County: Advanced training that will certify personnel in unit to conduct post-crash inspections	
[5] Event Dates (travel dates included): September 19-25, 2021	[6] City, State: Grand Island, NE

[c] Estimated Expenses

[7] Registration Fee:	[12] Taxi/Other Ground Transportation:	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):	[13] Personal Vehicle Mileage:	
[9] Hotel:	[14] Vehicle Rental:	
[10] Airline/bus/train:	[15] Other (Explain):	
[11] Parking/Tolls:		
Total Cost:		\$0.00

[d] Funding Source

[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):
Total:	\$0.00

Authorized By: Ed Gonzalez, Sheriff

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

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Previously Approved Information

Court Date:	05/25/2021
Amount:	\$4,480.00
# of Attendees:	2
Fund Source:	Other

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: 540-Harris County Sheriff's Office, Homeland Security Bureau	[2] Number of Attendees: (If more than one to attend, please explain):
[3] Subject/Purpose: Safeboat 35' MMI Sea Trials	
[4] Benefit to County: Deputies to inspect and perform sea trials on the new boat before it is delivered and will be trained in basic skills necessary to operate	
[5] Event Dates (travel dates included): September 20-23, 2021	[6] City, State: Bremerton, WA

[c] Estimated Expenses

[7] Registration Fee:	[12] Taxi/Other Ground Transportation:	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):	[13] Personal Vehicle Mileage:	
[9] Hotel:	[14] Vehicle Rental:	
[10] Airline/bus/train:	[15] Other (Explain):	
[11] Parking/Tolls:		
Total Cost:		\$0.00

[d] Funding Source

[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):
Total:	\$0.00

Authorized By: Ed Gonzalez, Sheriff

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

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Court Date:	08/10/2021
Amount:	\$3,616.00
# of Attendees:	4
Fund Source:	Other

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: 540-Harris County Sheriff's Office, Criminal Investigations Bureau		[2] Number of Attendees: 3 <i>(If more than one to attend, please explain):</i> Multiple breakout sessions	
[3] Subject/Purpose: 2021 American Elderly Abuse Conference			
[4] Benefit to County: Provide knowledge and training on the latest topics, tools, and initiative in response to the well being of highly vulnerable elderly individuals within our communities			
[5] Event Dates (travel dates included): September 26-29, 2021		[6] City, State: Slidell, LA	

[c] Estimated Expenses

[7] Registration Fee:	837.00	[12] Taxi/Other Ground Transportation:	300.00
[8] Per Diem (\$55 daily):	660.00	[13] Personal Vehicle Mileage:	
[9] Hotel:	900.00	[14] Vehicle Rental:	
[10] Airline/bus/train:		[15] Other (Explain):	
[11] Parking/Tolls:			
Total Cost:			\$2,697.00

[16] Use of County Vehicle?

- ☒ Yes
☐ No
☐ Both *(using county & personal)*

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: <i>(County grants only)</i>		[19] Name of Grant & Fund #:
[20] Other Source:	2,697.00	[21] Name of Other Source (& fund # if applicable): LEOSE
Total:	\$2,697.00	

Authorized By: Ed Gonzalez, Sheriff

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- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: 540-Harris County Sheriff's Office, Patrol Support Services Bureau	[2] Number of Attendees: 1 (If more than one to attend, please explain):
[3] Subject/Purpose: Commercial Vehicle Crash Investigation- Level II	
[4] Benefit to County: Course benefits the crash investigation efforts since commercial vehicles travel through county daily with some severe and fatal crashes	
[5] Event Dates (travel dates included): October 10-15, 2021	[6] City, State: Jacksonville, FL

[c] Estimated Expenses

[7] Registration Fee:	895.00	[12] Taxi/Other Ground Transportation:	100.00	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):	330.00	[13] Personal Vehicle Mileage:		
[9] Hotel:	700.00	[14] Vehicle Rental:		
[10] Airline/bus/train:	350.00	[15] Other (Explain):	100.00	
[11] Parking/Tolls:		baggage fees		
Total Cost:			\$2,475.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	2,475.00	[21] Name of Other Source (& fund # if applicable): LEOSE
Total:	\$2,475.00	

Authorized By: Ed Gonzalez, Sheriff

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Fund Source:	

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- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: 540-Harris County Sheriff's Office, Administrative Services Bureau		[2] Number of Attendees: 12 (If more than one to attend, please explain): to support and escort the survivors of fallen	
[3] Subject/Purpose: National Police Weekend			
[4] Benefit to County: To represent Harris County of honoring fallen heroes			
[5] Event Dates (travel dates included): October 10-17, 2021		[6] City, State: Washington, D.C	

[c] Estimated Expenses

[7] Registration Fee:		[12] Taxi/Other Ground Transportation:	1,200.00	[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):	3,300.00	[13] Personal Vehicle Mileage:		
[9] Hotel:	14,000.00	[14] Vehicle Rental:		
[10] Airline/bus/train:	5,160.00	[15] Other (Explain):	1,200.00	
[11] Parking/Tolls:	1,200.00	baggage fees		
Total Cost:			\$26,060.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	26,060.00	[21] Name of Other Source (& fund # if applicable): SEIZED
Total:	\$26,060.00	

Authorized By: Ed Gonzalez, Sheriff

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

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OUT OF TEXAS

Travel & Training Request

Request Form Guidelines

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- 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.

This space for County Clerk's Office use only.

[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

Court Date:	
Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: 540-Harris County Sheriff's Office, Homeland Security Bureau	[2] Number of Attendees: 1 (If more than one to attend, please explain):
[3] Subject/Purpose: Homemade Explosives Training Course	
[4] Benefit to County: Enhances the Bomb Units abilities to Identify - Process - Dispose capabilities	
[5] Event Dates (travel dates included): November 28 - December 4, 2021	[6] City, State: Huntsville, AL

[c] Estimated Expenses

[7] Registration Fee:	3,000.00	[12] Taxi/Other Ground Transportation:		[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):	385.00	[13] Personal Vehicle Mileage:		
[9] Hotel:	1,300.00	[14] Vehicle Rental:		
[10] Airline/bus/train:	475.00	[15] Other (Explain):		
[11] Parking/Tolls:				
Total Cost:			\$5,160.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	5,160.00	[21] Name of Other Source (& fund # if applicable): Bureau of Alcohol, Tobacco, & Firearms
Total:	\$5,160.00	

Authorized By: Ed Gonzalez, Sheriff

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

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OUT OF TEXAS

Travel & Training Request

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[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

Court Date:	
Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: Fire Marshal's Office - 213	[2] Number of Attendees: 2 <i>(If more than one to attend, please explain):</i> Meeting regarding Hazardous Materials Response Vehicle
[3] Subject/Purpose: Meeting regarding Hazardous Materials Response Vehicle - Final Inspection	
[4] Benefit to County: To review and receive an update on the Hazardous Materials Response Vehicle.	
[5] Event Dates (travel dates included): September 13 - 15, 2021	[6] City, State: Tampa, FL

[c] Estimated Expenses

[7] Registration Fee:		[12] Taxi/Other Ground Transportation:		[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both <i>(using county & personal)</i>
[8] Per Diem (\$55 daily):	330.00	[13] Personal Vehicle Mileage:		
[9] Hotel:	2,000.00	[14] Vehicle Rental:		
[10] Airline/bus/train:	700.00	[15] Other (Explain):		
[11] Parking/Tolls:				
Total Cost:			\$3,030.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: <i>(County grants only)</i>		[19] Name of Grant & Fund #:
[20] Other Source:	3,030.00	[21] Name of Other Source (& fund # if applicable): Siddons-Martin (other transportation included)
Total:	\$3,030.00	

Authorized By: Laurie L. Christensen

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

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OUT OF TEXAS

Travel & Training Request

Request Form Guidelines

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- 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 space for County Clerk's Office use only.

[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

Court Date:	
Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: Fire Marshal's Office - 213	[2] Number of Attendees: 2 (If more than one to attend, please explain): Advanced-Level Training
[3] Subject/Purpose: Tank Car Safety and Rail Emergency Response Advanced-Level Training	
[4] Benefit to County: Enhances the response capabilities of personnel assigned to the Harris County Hazardous Materials Response Team.	
[5] Event Dates (travel dates included): September 19 - 24, 2021	[6] City, State: Pueblo, Colorado

[c] Estimated Expenses

[7] Registration Fee:	7,000.00	[12] Taxi/Other Ground Transportation:		[16] Use of County Vehicle? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Both (using county & personal)
[8] Per Diem (\$55 daily):		[13] Personal Vehicle Mileage:		
[9] Hotel:		[14] Vehicle Rental:		
[10] Airline/bus/train:		[15] Other (Explain):		
[11] Parking/Tolls:				
Total Cost:			\$7,000.00	

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	7,000.00	[21] Name of Other Source (& fund # if applicable): Union Pacific Railroad Training Program (all inclusive)
Total:	\$7,000.00	

Authorized By: Laurie L. Christensen

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

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OUT OF TEXAS

Travel & Training Request

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

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[a] Previously Approved

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Previously Approved Information

Court Date:	
Amount:	
# of Attendees:	
Fund Source:	

What additional changes are being requested?

(Only select the changes that apply)

- | | |
|--|---|
| <input type="checkbox"/> Number of Attendees | <input type="checkbox"/> Event Dates |
| <input type="checkbox"/> City | <input type="checkbox"/> Estimated Expenses |
| <input type="checkbox"/> Use of County Vehicle | <input type="checkbox"/> Funding Source |

[b] Requested Information

[1] Department Name: Public Defender's Office	[2] Number of Attendees: 1 (If more than one to attend, please explain):
[3] Subject/Purpose: National Association of Criminal Defense Lawyers 12th Annual Defending Sex Crimes Seminar	
[4] Benefit to County: Continuing Legal Education	
[5] Event Dates (travel dates included): November 18-19, 2021	[6] City, State: Las Vegas, Nevada

[c] Estimated Expenses

[7] Registration Fee:	309.00	[12] Taxi/Other Ground Transportation:	
[8] Per Diem (\$55 daily):	105.00	[13] Personal Vehicle Mileage:	
[9] Hotel:	213.00	[14] Vehicle Rental:	
[10] Airline/bus/train:	307.00	[15] Other (Explain):	
[11] Parking/Tolls:			
Total Cost:		\$934.00	

[16] Use of County Vehicle?

- ☐ Yes
☒ No
☐ Both (using county & personal)

[d] Funding Source

[17] General Fund:		
[18] Grant Fund: (County grants only)		[19] Name of Grant & Fund #:
[20] Other Source:	934.00	[21] Name of Other Source (& fund # if applicable): Personal
Total:	\$934.00	

Authorized By: Alexander Bunin

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

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