



MARCH - DECEMBER 2013 MEALS

Date	Attendees	Restaurant	Total
6-Mar	8	South Hills Market	88.5
6-Mar	14	Paternos	175.68
7-Mar	17	5 Corners Café	236.34
26-Mar	17	Paternos	199
27-Mar	16	South Hills Market	195.45
28-Mar	18	Paternos	238.8
10-Apr	15	Paternos	246
16-Apr	15	SOHOS	212.62
17-Apr	15	Bears Den	137
18-Apr	16	Paternos	238.8
24-Apr	14	Wheelhouse	138
14-May	17	Paternos	245.4
15-May	13	Wheelhouse	133.2
22-May	17	Bridge Road Bistro	267.36
4-Jun	15	Paternos	202.8
12-Jun	16	SOHOS	261.3
18-Jun	12	SOHOS	212.1
27-Aug	17	Paternos	202.8
28-Aug	19	SOHOS	264.3
4-Sep	18	SOHOS	277.8
10-Sep	16	Paternos	237.6
11-Sep	16	SOHOS	244.38
12-Sep	Not included	South Hills Market	117.48
23-Sep	17	SOHOS	245.7
24-Sep	17	Paternos	271.2
25-Sep	15	Wheelhouse	166.18
1-Oct	17	Bluegrass	206.93
2-Oct	17	Paternos	258.86
3-Oct	17	SOHOS	231.83
15-Oct	17	Paternos	274.8
16-Oct	17	SOHOS	262.92
24-Oct	17	SOHOS	273.18
5-Nov	16	Paternos	248.4
20-Nov	17	SOHOS	215.22
26-Nov	16	South Hills Market	185.45
6-Dec	13	Bluegrass	79.25
19-Dec	16	SOHOS	124.32
TOTAL COST			7816.95
Total cost on days with no event verified	817.55		
Total Official Court Days	72		
Total Lunches	37		

YELLOW HIGHLIGHT MEANS NO OFFICIAL EVENT VERIFIED

Lunches on Official Court Days	33		
% of Days Lunch Provided	45.83%		

JANUARY - DECEMBER 2014 MEALS

Date	Attendees	Restaurant	Total
8-Jan	16	SOHOS	226.02
15-Jan	13	Wheelhouse	158.72
22-Jan	16	SOHOS	279.72
28-Jan	16	Paternos	253
4-Feb	16	Paternos	259.2
5-Mar	16	SOHOS	270.6
25-Mar	16	Paternos	222
26-Mar	16	SOHOS	276.36
27-Mar	16	Paternos	200.4
8-Apr	16	SOHOS	280.62
9-Apr	16	Paternos	235.2
22-Apr	16	Paternos	204
23-Apr	16	Bridge Road Bistro	255.11
29-Apr	16	Paternos	139.2
5-May	12	Bridge Road Bistro	253.74
6-May	16	SOHOS	285.96
7-May	10	Paternos	258
27-May	10	Bridge Road Bistro	219
26-Aug	13	Adelphia	198.79
3-Sep	15	SOHOS	249.78
10-Sep	14	SOHOS	253.02
17-Sep	16	Not Listed	231.2
29-Sep	14	SOHOS	218.04
30-Sep	13	Paternos	178.8
1-Oct	14	Adelphia	238.73
14-Oct	13	Pies and Pints	201.6
15-Oct	14	Bluegrass	178.2
21-Oct	12	First Watch	143.94
22-Oct	10	Blacksheep	134.58
30-Oct	13	Recovery	201.56
12-Nov	12	Bridge Road Bistro	232.54
TOTAL COST			6937.63
Total cost on days with no event verified	1,012.29		
Total Official Court Days	73		
Total Lunches	31		
Lunches on Official Court Days	26		
% of Days Lunch Provided	35.67%		

YELLOW HIGHLIGHT MEANS NO OFFICIAL EVENT VERIFIED

JANUARY - DECEMBER 2015 MEALS

Date	Attendees	Restaurant	Total
8-Jan	14	South Hills Market	242.6
13-Jan	14	Soho's	228.42
14-Jan	14	Paternos	230.4
16-Jan	3	South Hills Market	63.37
27-Jan	12	5 Corners Café	139.48
28-Jan	12	Adelphia Sports Bar &	192.76
30-Jan	10	South Hills Market	160.83
4-Feb	14	Bluegrass Kitchen	196.74
10-Feb	12	Paternos	193.2
11-Feb	12	Soho's	207.78
12-Feb	11	Café 4343	192.37
24-Feb	11	South Hills Market	191.72
25-Feb	13	Bridge Road Bistro	237.24
26-Feb	10	Soho's	189.54
10-Mar	13	Adelphia Sports Bar &	190.8
11-Mar	14	South Hills Market	225.25
7-Apr	13	Adelphia Sports Bar &	206.53
8-Apr	12	South Hills Market	168.07
9-Apr	12	Bridge Road Bistro	223.7
22-Apr	13	South Hills Market	203.97
12-May	13	Adelphia Sports Bar &	198.36
9-Jun	11	Soho's	154.68
10-Jun	7	South Hills Market	125.51
15-Jun	16	The BLOCK Restaurant	309.6
16-Jun	13	The BLOCK Restaurant	260.4
2-Sep	13	South Hills Market	231.49
10-Sep	14	The BLOCK Restaurant	233.64
15-Sep	12	Paternos	195.6
16-Sep	15	Adelphia Sports Bar &	243.96
21-Sep	12	Soho's	199.74
22-Sep	15	South Hills Market	248.32
23-Sep	15	Bridge Road Bistro	304.55
6-Oct	15	South Hills Market	234.38
7-Oct	12	Paternos	203.2
14-Oct	15	Soho's	246.1
3-Nov	15	South Hills Market	245.56
4-Nov	12	Paternos	177.6
16-Nov	10	Soho's	191.76
17-Nov	11	The BLOCK Restaurant	243.48
9-Dec	10	Soho's	177.84
TOTAL COST			8310.54
Total cost on days with no event verified	976.14		
Total Official Court Days	60		
Total Lunches	40		

YELLOW HIGHLIGHT MEANS NO OFFICIAL EVENT VERIFIED

Lunches on Official Court Days	35		
% of Days Lunch Provided	58.33%		

JANUARY - DECEMBER 2016 MEALS

Date	Attendees	Restaurant	Total
5-Jan	13	South Hills Market	217.18
12-Jan	15	Adelphia	259.65
13-Jan	14	Soho's	243.84
19-Jan	12	Lola's Pizza	170.75
20-Jan	14	Blossom Dairy	154.92
26-Jan	13	South Hills Market	214.53
8-Feb	12	The BLOCK Restaurant	216
9-Feb	14	Soho's	247.32
10-Feb	14	South Hills Market	218
22-Feb	10	Adelphia	148.88
23-Feb	11	Paternos	180.9
24-Feb	13	South Hills Market	223.48
2-Mar	12	Soho's	209.04
7-Mar	11	Adelphia	205.8
8-Mar	10	South Hills Market	171.75
9-Mar	12	Soho's	222.28
16-Mar	11	South Hills Market	194.93
23-Mar	14	Soho's	219.18
4-Apr	10	Blossom Dairy	116.33
5-Apr	13	South Hills Market	206.95
6-Apr	12	Soho's	240.8
11-Apr	3	Soho's	54.24
13-Apr	13	Soho's	256.92
18-Apr	2	Ellen's Homemade Ice	27.61
18-Apr	9	Adelphia	158.1
19-Apr	13	South Hills Market	218.95
20-Apr	12	Bluegrass Kitchen	154.95
27-Apr	14	Bridge Road Bistro	255
28-Apr	0	Bridge Road Bistro	-39.31
16-May	10	Soho's	163.38
17-May	14	South Hills Market	242.45
18-May	10	Paternos	170.4
2-Jun	10	South Hills Market	187.95
13-Jun	11	Soho's	195.96
14-Jun	12	South Hills Market	181
30-Aug	13	South Hills Market	203.33
6-Sep	10	Adelphia	139
7-Sep	12	Soho's	204.54
14-Sep	8	Paternos	120
15-Sep	8	South Hills Market	130
21-Sep	11	The BLOCK Restaurant	220
3-Oct	9	Bluegrass Kitchen	115
4-Oct	10	Adelphia	156
5-Oct	12	Soho's	237.18
5-Oct	7	South Hills Market	120.7
5-Oct	7	South Hills Market	26.11
11-Oct	10	Paternos	147.6
12-Oct	10	South Hills Market	158.05
25-Oct	12	The BLOCK Restaurant	223.98
1-Nov	8	South Hills Market	141.33
9-Nov	1	Tricky Fish	28.25
14-Nov	10	Bluegrass Kitchen	127
15-Nov	8	Soho's	151.2
TOTAL COST			9159.38

YELLOW HIGHLIGHT MEANS NO OFFICIAL EVENT VERIFIED

Total cost on days with no event verified	852,68		
Total Official Court Days	64		
Total Lunches	53		
Lunches on Official Court Days	48		
% of Days Lunch Provided	75.00%		

88--000007

JANUARY - DECEMBER 2017 MEALS

Date	Attendees	Restaurant	Total
4-Jan	12	South Hills Market	167.81
9-Jan	11	Soho's	210.48
10-Jan	12	Paternos	154.8
11-Jan	12	Adelphia	175
17-Jan	10	South Hills Market	154
18-Jan	10	Soho's	210.78
23-Jan	11	Adelphia	212.64
24-Jan	17	Paternos	176
25-Jan	13	South Hills Market	221
7-Feb	12	Soho's	200.04
8-Feb	11	Lola's	187
13-Feb	12	Adelphia	214
14-Feb	13	Paternos	189.6
15-Feb	13	South Hills Market	254
17-Feb	6	Soho's	155.04
27-Feb	12	Soho's	213.36
6-Mar	10	Genesis Café	83.65
7-Mar	12	Lola's	218.79
8-Mar	13	Adelphia	205
20-Mar	11	Soho's	190.08
23-Mar	5	South Hills Market	106.23
5-Apr	13	South Hills Market	206.55
18-Apr	9	The BLOCK Restaurant	137
19-Apr	12	Paternos	183.6
24-Apr	12	Soho's	214.74
25-Apr	14	South Hills Market	216
2-May	11	Adelphia	188
3-May	11	The BLOCK Restaurant	160
16-May	12	Paternos	176.4
17-May	12	Soho's	207.66
23-May	11	South Hills Market	184
31-May	13	Adelphia	251
6-Jun	20	South Hills Market	271.3
14-Jun	11	Paternos	186
31-Jul	20	Pies and Pints	232
30-Aug	10	Soho's	190.14
31-Aug	12	South Hills Market	214
12-Sep	12	Adelphia	220
13-Sep	11	The BLOCK Restaurant	171
19-Sep	11	Soho's	191.64
19-Sep	12	Paternos	206.4
20-Sep	12	South Hills Market	217
28-Sep	13	South Hills Market	246
2-Oct	12	Adelphia	200.2
3-Oct	11	The BLOCK Restaurant	167
11-Oct	12	Soho's	201.78
17-Oct	11	Paternos	175.2
18-Oct	13	South Hills Market	216
23-Oct	11	Adelphia	174
31-Oct	11	Soho's	192.48
13-Nov	10	Soho's	179.82
14-Nov	10	Paternos	120
TOTAL COST			9996.21
on days wth no event verified	683.41		

YELLOW HIGHLIGHT MEANS NO OFFICIAL EVENT VERIFIED

Total Official Court Days	72		
Total Lunches	52		
Lunches on Official Court Days	48		
% of Days Lunch Provided	66.67%		

88--000009

Below are the dates in which Court Administrative Conferences were held during 2013-2017 as indicated in the Court Administrative Conference meeting minutes provided by the Court to the Legislative Auditor

Admin. Conferences - 2013		
7-Jan		
6-Feb		
6-Mar		
18-Apr		
22-May		
17-Jun		
23-Sep		
25-Nov		

Admin. Conferences - 2014		
22-Jan		
9-Apr		
7-May		
4-Jun		
29-Sep		
13-Nov		
24-Nov		

Admin. Conferences - 2015		
4-Feb		
26-Feb		
9-Apr		
11-May		
16-Jun		
10-Sep		
20-Oct		
16-Nov		
9-Dec		

Admin. Conferences - 2016		
5-Jan		
19-Jan		
8-Feb		
22-Feb		
7-Mar		
4-Apr		
18-Apr		
16-May		
13-Jun		
29-Aug		
6-Sep		
15-Sep		
3-Oct		
24-Oct		
14-Nov		
29-Nov		

Admin. Conferences - 2017		
9-Jan		
23-Jan		
13-Feb		
27-Feb		
6-Mar		
20-Mar		
5-Apr		
24-Apr		
3-May		
17-May		
31-May		
14-Jun		
27-Jul		
14-Aug		
31-Aug		
15-Sep		
18-Sep		
29-Sep		
2-Oct		
23-Oct		
13-Nov		
27-Nov		



SUPREME COURT OF APPEALS OF WV

2013 JUDICIAL CALENDAR

Holidays Sine Die
Court Conference Judicial Conference Administrative Conference

JANUARY							January 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
		1	2	3	4	5	
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
20	21	22	23	24	25	26	
27	28	29	30	31			

FEBRUARY							January 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
					1	2	
3	4	5	6	7	8	9	
10	11	12	13	14	15	16	
17	18	19	20	21	22	23	
24	25	26	27	28			

MARCH							January 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
					1	2	
3	4	5	6	7	8	9	
10	11	12	13	14	15	16	
17	18	19	20	21	22	23	
24	25	26	27	28	29	30	
31							

March 5 - WVU College of Law

APRIL							January 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
	1	2	3	4	5	6	
7	8	9	10	11	12	13	
14	15	16	17	18	19	20	
21	22	23	24	25	26	27	
28	29	30					

April 9 - LAWS Program, Elkins

MAY							January 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
			1	2	3	4	
5	6	7	8	9	10	11	
12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30	31		

May 7-10 - Judicial Conference (Bridgeport)

JUNE							January 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
						1	
2	3	4	5	6	7	8	
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28	29	
30							

SEPTEMBER							September 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30						

OCTOBER							September 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
		1	2	3	4	5	
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
20	21	22	23	24	25	26	
27	28	29	30	31			

October 8-11 - Judicial Conference (Charleston, Embassy Suites)

NOVEMBER							September 2013 Term
SUN	MON	TUE	WED	THU	FRI	SAT	
					1	2	
3	4	5	6	7	8	9	
10	11	12	13	14	15	16	
17	18	19	20	21	22	23	
24	25	26	27	28	29	30	



SUPREME COURT OF APPEALS OF WV

2014 JUDICIAL CALENDAR

Holidays Sine Die
 Court Conference Judicial Conference Administrative Conference

JANUARY						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	12
12	13	14	15	16	19	20
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

MARCH						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

March 4 - WVU College of Law

APRIL						
SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

April 9 - LAWS Program, Boone County

MAY						
SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

May 20-23 - Judicial Conference

JUNE						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

SEPTEMBER						
SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

September 15 - Marshall University

OCTOBER						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

October 7-10 - Judicial Conference

NOVEMBER						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						



SUPREME COURT OF APPEALS OF WV

2015 JUDICIAL CALENDAR

Holidays Sine Die
 Court Conference Judicial Conference

JANUARY						
January 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

FEBRUARY						
January 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

MARCH						
January 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

March 4 - WVU College of Law

APRIL						
January 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

April 21 - LAWS Program, Mason County

MAY						
January 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

May 5-7 - Judicial Conference

JUNE						
January 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

SEPTEMBER						
September 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

OCTOBER						
September 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

October 20-22 - Judicial Conference

NOVEMBER						
September 2015 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					



SUPREME COURT OF APPEALS OF WV

2016 JUDICIAL CALENDAR

Court
Conference
Judicial Conference
Holidays
Sine Die

JANUARY						
January 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

FEBRUARY						
January 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29					

MARCH						
January 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

March 1 - WVU College of Law

APRIL						
January 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

MAY						
January 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

May 24-26 - Judicial Conference

JUNE						
January 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

SEPTEMBER						
September 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

OCTOBER						
September 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

October 18-20 - Judicial Conference

NOVEMBER						
September 2016 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

88--000014



SUPREME COURT OF APPEALS OF WV

2017 JUDICIAL CALENDAR

■ Court
 ■ Conference
 ■ Judicial Conference
 ☐ Holidays
 ○ Sine Die

JANUARY						
January 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

FEBRUARY						
January 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

MARCH						
January 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

February 28 - WVU College of Law

APRIL						
January 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
						1
2		4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

April 4 - LAWS (Parsons)

MAY						
January 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

May 9-11 - Judicial Conference

JUNE						
January 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

SEPTEMBER						
September 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

September 6 - Independence Hall, Wheeling

OCTOBER						
September 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

October 24-27 - Judicial Conference

NOVEMBER						
September 2017 Term						
SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAR – DEC 2013

**MEALS PURCHASED
FOR JUSTICES & STAFF**

88--000016

Adelphia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

 Take Out

 Supreme Court : 304-558-426

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Server: BrieAnna W 10/02/17
 Check #1 11:03 AM
 Tax Exempt

CONTACT PERSON Chris Garnes

Subtotal \$166.20
 Total \$166.20

TELEPHONE NUMBER (304) 558-2060

Credit Card Swiped
 Visa xxxxxxxx8448
 Time 11:34 AM

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

Authorization Approved
 Approval Code 064418
 Check ID
 Payment ID XpjNTarscopr

DATE(S) OF FUNCTION 10/02/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 200.20
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 200.20

Amount: \$166.20
 + Tip: 34.00
 = Total: 200.20

X 
 CHRISTOPHER A GARNES

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Customer Copy

Thanks for visiting Adelphia
 Sports Bar & Grille
 Please come again

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (681) 266-9074

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/03/2017

TABLE: Vicki W. #74 - 11 Guests
 Server: Vicki W.
 10/3/2017 11:36:40 AM
 Sequence #: 0000001
 ID #: 0130299

ITEM	QTY	PRICE
Subtotal		\$138.85
Grand Total		\$138.85
Credit Purchase		
Name	:GARNES/CHRISTOPHER A	
CO Type	:VISA	
CO Num	:xxxx xxxx xxxx 8448	
Approval	:006517	
Server	:Vicki W.	
Ticket Name	:Vicki W, #74	

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>167.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>167.00</u>

Payment Amount: \$138.85

Tip: 28.15
 Total: 167.00

x _____
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

Thank you for visiting!

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
 V. Shafer, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000018

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/11/2017

10/11/2017 07:32:59
 MID: XXXXXXXXXXXXXXX689 TID: XXXXXX156
 CREDIT CARD
 VISA REFUND
 Card # XXXXXXXXXXXXXXX8448
 SEQ #: 2
 Trans #: 2
 SERVER 1638
 Approval Code: 011158
 Entry Method: Chip Read
 Mode: Online

REFUND AMOUNT \$201.78

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>201.78</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>201.78</u>

X _____
 CHRISTOPHER A GARNES
 THANK YOU
 MERCHANT COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNO'S AT THE PARK

601 MORRIS ST
CHARLESTON, WV 25309
3042055482

Cashier: Nancy B

Transaction 100000

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Total \$175.20

CONTACT PERSON Chris Garnes

CREDIT CARD AUTH \$175.20
VISA 8448

TELEPHONE NUMBER (304) 558-2060

Tip 175.20

FUNCTION SPONSOR Chris Garnes

Total 175.20

LOCATION OF FUNCTION Justices' Chambers

Retain this copy for statement validation

DATE(S) OF FUNCTION 10/17/2017

17-Oct-2017 11:23:34A
\$175.20 | Method: EMV
VISA CREDIT XXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 729000608881
Auth #: 090058
MID: *****5998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 175.20
MEETING ROOM	\$
EQUIPMENT RENTAL	\$
LODGING	\$
OTHER/	\$
OTHER/	\$
TOTAL	\$ 175.20



PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
V. Shafer, J. Stevenson, C. Games, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000020

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

Date: 10/10/2017 Time: 11:32:18 AM

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

Status: Approved

LOCATION OF FUNCTION Justices' Chambers

Card Type: Visa
Card Number: XXXXXXXXXXXX0448

DATE(S) OF FUNCTION 10/18/2017

Expiration Date: X/XX/XXXX
Server Name: Tasha
Check Number: 235181
Tab Number: 100
Number Of Covers: 28
Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13
Card Owner: GARNES/CHRISTOPHER A

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>216.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>216.00</u>

AMOUNT 178.88
TIP 37.32
TOTAL 216.00

Approval: 050457

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE



STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TAKE OUT ORDERING ON-LINE@
adelphiasportsbar.com

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/23/2017

Take Out

Supreme Court 304-558-4

Server: BrieAnna W 10/23/
Check #1 11:09 |
Tax Exempt

Subtotal \$143.
Total \$143.

Credit Card Swipi
Visa XXXXXXXXX84
Time 11:41
Authorization Approval Code Approve
Check ID 02594
Payment ID TkJYcWFyjNf

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 174.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 174.00

Amount: \$143.5
+ Tip: 30.46
= Total: 174.00

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

X
CHRISTOPHER A. GARNES

Customer Copy

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, G. Johnson, R. Melvin, W. Humphrey, J. Stover,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/31/2017

SONOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

10/31/2017 07:44:31

CREDIT CARD
 VISA SALE

Card # 10000000000000000000
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 00A6
 TC: 3172A375785FECDE
 SEQ #: 1
 Batch #: 4
 Trans #: 1
 SERVER 5515
 Approval Code: 003762
 TRANS ID: 467304558500507
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>192.48</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>192.48</u>

SALE AMOUNT \$192.48

TIP AMOUNT none \$0.00

TOTAL AMOUNT \$192.48

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

THANK YOU

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of more must accompany the form):

CUSTOMER COPY

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, J. Stover,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 11/13/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 179.82
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 179.82

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, G. Johnson, R. Melvin, W. Humphrey,
 V. Shafer, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: _____
 AGENCY HEAD SIGNATURE

SCHOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

11/13/2017 12:31:57
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXXXXX8418
 Chip Card: CITI VISA
 AID: A000000031010
 ATC: 00AF
 TC: 8677CC983AB2A0F5
 SEQ #: 1
 Batch #: 3
 Trans #: 1
 SERVER 5515
 Approval Code: 062100
 TRANS ID: 307317593418398
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SALE AMOUNT \$160.68
 TIP AMOUNT Inc.
 TOTAL AMOUNT 160.68

THANK YOU
 CUSTOMER COPY

SCHOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

11/13/2017 13:20:05
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXXXXX8418
 Chip Card: CITI VISA
 AID: A000000031010
 ATC: 00AF
 TC: C69C37785EE42204
 SEQ #: 5
 Batch #: 3
 Trans #: 5
 SERVER 5515
 Approval Code: 015384
 TRANS ID: 387317622221506
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SALE AMOUNT \$19.14
 TIP AMOUNT Inc.

88--000024 19.14

SOUTH HILLS

Check No: 149161 Table No: 23
 Person No: 1,2,3,4,5,6,7
 Time: 11:12:58 AM Date: 3/8/2013

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. SUMMERS
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 3/06/13

Wedge	7.00
Soup Cup	2.50
Spinach Salad	7.00
Greek Wrap Hlf	6.00
PbeletwrpHlf	6.00
Onion Rings	5.00
Club Hlf	8.00
ChickSal Hlf	8.00
Club Whl	9.00
<hr/>	
Food Sub-Total	54.50
Crab Cakes	14.00
<hr/>	
Other Sub-Total	14.00
SUB TOTAL	68.50
<hr/>	
Sales Tax	0.00

TOTAL

GRATUITY (20%)
 88.50

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 88.50
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 88.50

PURPOSE/JUSTIFICATION OF FUNCTION:

Justices' Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): B. Benjamin, S. Cohen, J. Stover, R. Davis, A. Layley, V. Staffer, M. Ketchum, R. Melvin

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

03/06/13
 DATE

By: [Signature]
 AGENCY HEAD SIGNATURE

04/09/2013
 DATE

88--000025

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. Summers
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 3/06/13

PATERSON AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25301
 304-720-7640

TERMINAL ID: _____ AUTH: 276
 VISA _____ AUTH: 1815
 MOTO/AMERICAN EXPRESS/KEY CARD
 MAIL ORDER SALE
 MAR 06, 13 14156
 AUTH: 074390

SALE AMT \$146.40
 TIP \$29.28
 TOTAL \$175.68

CUSTOMER COPY

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 175.68
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 175.68

PURPOSE/JUSTIFICATION OF FUNCTION:
Justices' Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): V. Summers, R. Perry, E. Geizer, S. Cohen, B. Benjamin, M. Workman, M. Kitchum, R. Melvin, A. Laughry, V. Shaffer, A. Angus, J. Gundy, H. Daulty, B. Kanhua

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
 AGENCY HEAD SIGNATURE

03/06/13
 DATE

04/09/2013
 DATE

U.S. BANK OF AMERICA
423 VIRGINIA STREET WEST
CHARLESTON, WV 25302
304-295-7817
27020136610003

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 27020136610003
Receipt Num.: 0001

Sale

XXXXXXXXXXXX0270

VISA

Entry Method: Swiped

Amount: \$ 216.34

Tax: \$ 0.00

Tip: 20.00

Total: 236.34

03/07/13

11:35:29

Inv# 000001

Appr Code: 056331

Approved: Online

Batch#: 000360

TEN Ref #:

003060397201526

Validation Code:

0518

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 3/07/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 236.34
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 236.34

THANK YOU!
PLEASE COME AGAIN!
CARDHOLDER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Justices' Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): V. Summers, E. Guiser, R. Perry, M. Workman, S. Stuvu, R. Davis, B. Benjamin, S. Cohen, A. Layton, V. Shaffer, M. Ketchum, R. Melvin, A. Angus, S. Gandy, H. Daily, B. Kohn, S. Canterbury

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

3/07/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

4/9/2013
DATE

88--000027

PATEROS AT THE PARK
681 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: A0632776
VISA SRV: 5864
XXXXXXXXXXXX278 EXP: 12/11 SWIPE
SALE
BATCH: 000139 INV: 000001
Mar 26, 13 12:41
REF: 01390001 AUTH: 022567

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 3/26/13

TAX REF: 16200556617103
CALCULATION CODE: 1373
APPROVED
SALE AMT \$179.00
TIP 20.00
TOTAL 199.00
VANDIA A SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 199.00
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 199.00

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference
FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): B. Benjamin, Slater, S. Stover, R. Davis, Workman, J. Strawn, R. Melvin, M. Ketchum, V. Shaffer, A. Layman, A. Angus, S. Gandy, H. Daily, V. Summers, E. Gaiser, R. Perry, B. Kayhan

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

3/26/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

4/09/2013
DATE

**south hills marl
and café**

SOUTH HILLS

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Date: 3/27/2013 Time: 11:38:04

Status: Approved

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. Summers
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. Summers
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 3/27/13

Card Type: Visa
 Card Number: XXXXXXXXXXXX8270
 Expiration Date: X/XX/XXXX
 Server Name: Patrick
 Check Number: 150963
 Tab Number: 1000
 Number Of Covers: 19
 Persons: 1, 2, 3, 4, 5, 6, 8, 9, 10, 11, 12, 13, 14, 15, 16
 Card Owner: SUMMERS/VAUGHN A

AMOUNT 175.45
 TIP 20.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>195.45</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>195.45</u>

TOTAL 195.45
 Approval: 077598

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): R. McInis, M. Ketchum, J. Stover, R. Davis, S. Cohen, B. Benjamin, V. Shaffer, A. Langley, M. Workman, A. Arroyo, S. Gandy, H. Daily, B. Kuybin, E. Geiser, R. Perry, V. Summers

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

3/27/13
 DATE

By: [Signature]
 AGENCY HEAD SIGNATURE

4/09/2013
 DATE

A PATERNS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: M03271
USA
#####270 EXP:11/11
SALE
BATCH: 000141 INU: 000001
Mar 28, 13 12:10
RCH: 01410001 AUTH: 069913

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. Summers
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 3/28/13

ISS REF: 16306547510504
VALUATION CODE: SMO
APPROVED
SALE AMT \$208.80
TIP 30.00
TOTAL 238.80
VAUGHN A SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>238.80</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ <u>238.80</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): R. Melvin, M. Ketchum, S. Stevenson, M. Workman, S. Cohen, B. Benjamin, S. Stares, R. Davis, V. Shaffu, A. Layhrey, S. Conterbury, R. Perry, E. Gaiser, V. Summers, B. Kaplan, A. Angus, S. Gandy, Ho Daily

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

3/28/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

4/9/2013
DATE

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: #02327
VISA
SALE
BATCH: 000000 INU: 00000
APR 10, 13 11:51
RRN: 0000001 AUTH: 00409

TAN REF: 20110057119032
VAL/TMT/CR CODE: 7069

APPROVED
SALE AMT \$246.00
TIP \$
TOTAL \$
WUGHN A SUMMERS

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 4/10/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>246.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ <u>246.00</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): B. Benjamin, S. Cohen, V. Summers, R. Davis, S. Stull, M. Ketchum, R. Melvin, A. Loughy, V. Shaffer, J. Skurason, B. Knight, A. Angas, S. Gundy, E. Gaiser, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

4/10/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

5/14/2013
DATE

88--000031

SONOS
800 SMITH ST
CHARLESTON, WV 26301
304-720-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160116609
Term ID: 0926
Server ID: 6616

Sale

VISA
XXXXXXXXXXXX0270
Entry Method: Swiped
Apprvd: Online Batch#: 001
04/16/13 10:40
Invl: 00000001 Appr Code: 031
Amount: \$ 212.62
Tip: _____
Total: _____

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 4/16/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>212.62</u>
MEETING ROOM	\$ <u>212.13</u>
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>212.62</u>

Customer Copy
THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): B. Benjamin, S. Cohen, V. Summers, R. Perry, E. Gaiser, B. Kayhan, A. Ludwig, V. Shaffer, J. Stevenson, M. Workman, J. Starn, Robin Davis, A. Angus, H. Daily, S. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

4/16/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

5/14/2013
DATE

88--000032

REPRINT
BEAMS DEN
405 CAPITOL ST
CHARLESTON, WV 25301

04/17/2013 10:20:
Merchant ID: 000000001179
Terminal ID: 044889
218208691996

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

CREDIT CARD
VISA ADJUST SALE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 4/17/13

CARD # XXXXXXXXXXXX822
INVOICE DOC
Batch #: 00010
Approval Code: 01083
Entry Method: Manu
Mode: Onlr
Acs Code: NNN
MDSE/SERVICES \$117.0
TIP \$20.0
TOTAL AMOUNT \$137.0

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 137.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 137.00

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
CONFERENCE

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): B. Benjamin, S. Cohen, A. Angus, S. Gandy, R. Perry, E. Guizer, S. Canterbury, B. Kuylen, M. Kitchum, R. Melvin, J. Stevenson, M. Workman, S. Slues, R. Davis, V. Shaffer

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

4/17/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

3/14/2013
DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

PATERNO AT THE PARK
 601 NORTH 15 ST
 CHARLES, WV 25301
 304-728-7640

TERMINAL ID: A822776
 SALE INVOICE: 000014 INU: 000001
 DATE: APR 18, 13 10:43
 AUTH: 091425

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 414. 0779
 FUNCTION SPONSOR V. SUMMERS
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 4/18/13

APPROVED
 SALE AMT \$238.80
 TIP
 TOTAL
 WORKING A SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>238.80</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>238.80</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *B. Benjamin, S. Cohen, J. Stuber, R. Davis, M. Ketchum, R. Melvin, J. Stevenson, Workman, V. Shaffer, A. Layton, R. Perry, E. Guiser, H. Daily, A. Angus, J. Gandy, B. Kayhan*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

4/18/13
 DATE

By: _____
 AGENCY HEAD SIGNATURE

5/14/2013
 DATE

WHEELHOUSE
1007 BRIDGE RD
CHARLESTON, WV 25314

04/24/2013 13:5
Merchant ID: 00000000173
Terminal ID: 421240017887 02591

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

CREDIT CARD
VISA SALE

CARD # XXXXXXXXXXXXXXX
INVOICE 00
Batch #: 0007
SERVER 00
Approval Code: 0848
Entry Method: Man
Approved: Crd
PRE-TIP AMT \$138.0

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 4/24/13

TIP _____
TOTAL AMOUNT _____

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 138.00
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 138.00

CUSTOMER COPY
PHONE ORDER / mba

PURPOSE/JUSTIFICATION OF FUNCTION:

CONFERENCE

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): V. Summers, S. Cohen, B. Benjamin, R. Melvin, M. Ketchum, S. Starks, R. Davis, S. Skverson, M. Workman, V. Shellen, A. Layton, B. Kayhan, A. Angus, J. Gandy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

4/24/13
DATE

By: _____
AGENCY HEAD SIGNATURE

5/14/2013
DATE

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TECHNICAL ID: A0232776
UTSA
#####10270 EXP:02/11
SALE
BATCH: 00001 INU: 000001
May 14, 13 11:25
CEN: 0010001 AUTH: 028183

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices Chambers
DATE(S) OF FUNCTION 5/14/13

TMO RET# 002135545561
FUNCTION CODE: 1232
APPROVED
SALE AMT \$245.40
TIP \$
TOTAL 245.40
VAUGHN A SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>245.40</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ <u>245.40</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Melvin, M. Ketchum, J. Sturr, R. Davis, S. Stevenson, M. Workman, V. Shaffer, A. Loughry, E. Gaiser, R. Perry, V. Summers, B. Kaylor, S. Gandy, A. Angus, H. Daily

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

5/14/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

6/13/2013
DATE

WHEELHOUSE
1007 BRIDGE RD
CHARLESTON, WV 25314

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

05/15/2013 11:32:2
Merchant ID: 00000000173257
Terminal ID: 0259913
421240017887

CREDIT CARD
VISA SALE

CARD # XXXXXXXXXXXXXXX827
INVOICE 000
Batch #: 00074
SERVER 000
Approval Code: 06888
Entry Method: Swipe
Approved: Onln

PRE-TIP AMT \$113.21
TIP 20.00

TOTAL AMOUNT 133.20

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 5/15/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>133.20</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>133.20</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Staver, R. Davis, S. Cohen, M. Ketchum, R. Melvin, V. Shaffer, A. Layhry, M. Workman, E. Guiso, R. Perry, V. Summers, S. Gandy, H. Daily

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

5/15/13

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

6/13/2013

DATE

STATE OF WEST VIRGINIA DEPARTMENT OF ADMINISTRATION TRAVEL MANAGEMENT OFFICE REQUEST FOR HOSPITALITY SERVICE	BRIDGE ROAD BISTRO Date: 5/22/2013 Time: 11:59:16 AM
------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS

CONTACT PERSON V. SUMMERS

TELEPHONE NUMBER 304. 419. 0779

FUNCTION SPONSOR V. SUMMERS

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 5/22/13

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8270
 Expiration Date: X/XX/XXXX
 Server Name: Lorra
 Check Number: 167495
 Tab Number: 200
 Number Of Covers: 10
 Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17
 Card Owner: SUMMERS/VAUGHN A

AMOUNT	222.80
Gratuity	44.56
Total	267.36

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>2</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>267.36</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *V. Summers, E. Gaizer, R. Perry, J. Cohen, B. Benjamin, J. Stuber, R. Davis, R. Melvin, M. Ketchum, S. Stevenson, M. Workman, V. Shaffer, A. Laughry, J. Gundy, A. Anays, H. Daily, B. Kington*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: *[Signature]*
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: *[Signature]*
 AGENCY HEAD SIGNATURE

5/22/13
 DATE

6/13/2013
 DATE

PATERNOB AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 00232776
UIC: 00000000000000000000000000000000
SALE
MATCH: 000045 IMU: 000001
Jun 04, 12 1147
R001: 00450001 AUTH: 063225
TRN REF: 203103567423094
VALIDATION CODE: 203X
APPROVED
SALE AMT \$202.80
TIP
TOTAL \$202.80
VANDER A SUMMERS

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION JUSTICES' CHAMBERS
DATE(S) OF FUNCTION 6/04/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>202.80</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>202.80</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

CONFERENCE

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

S. Cohen, B. Benjamin, V. Summers, S. Skerian, M. Verteman, V. Shaltz, A. Langley, J. Stover, R. Davis, R. Melvin, M. Ketchum, A. Angus, J. Kinchy, R. Perry, E. Geiser

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

6/12/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

7/10/2013
DATE

60805
800 SMITH ST
CHARLESTON, WV 26301
304-720-7646

Merchant ID: 160116689
Term ID: 0026
Service ID: 1604

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Sale

VISA
XXXXXXXXXXXX9270
Entry Method: Swiped
Approved Online Batch#: 000001
06/12/13 10:40:00
Inv#: 00000001 Appr Code: 031641
Amount: \$ 217.71
Tip: 435
Total: 261.30

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 6/12/13

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>261.30</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ <u>261.30</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, S. Stevenson, M. Workman, R. Melvin, M. Ketchum, V. Shultz, A. Langley, S. Stew, R. Davis, V. Summers, E. Guiso, R. Perry, A. Angus, S. Gandy, B. Kaylor

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
AGENCY HEAD SIGNATURE

6/12/13
DATE

7/10/2013
DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Sale

VISA

XXXXXXXXXXXX8270

Entry Method: Swiped

Apprvd: Online Batch#: 000

06/18/13 10:34

Inv#: 00000001 Appr Code: 003

Amount: \$ 212

Tip: _____

Total: 212.10

Customer Copy

THANK YOU

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS

CONTACT PERSON V. SUMMERS

TELEPHONE NUMBER 304. 419. 0779

FUNCTION SPONSOR V. SUMMERS

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 6/10/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 212.10
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 212.10

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

S. Cohen, B. Benjamin, S. Stover, R. Davis, V. Summers, S. Stevenson, R. Melvin, M. Ketchum, V. Shaffer, A. Layton, E. Gaiser, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

6/10/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

7/10/2013
DATE

88--000041

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SCIOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

Merchant ID: 150115689
 Term ID: 8926
 Server ID: 8915

Sale

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. SUMMERS
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 8/28/13

VISA
 XXXXXXXXXXXXX0278
 Entry Method: Swiped
 Apprvd: Online Batch#: 000001
 08/28/13 18:29:54
 Inv#: 00000001 Appr Code: 035323
 Amount: \$ 264.30
 Tip: _____
 Total: 264.30

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>264.30</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>264.30</u>

Customer Copy
 THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): V. Summers, R. Perry, E. Nash, M. Ketelum, R. Melvin, B. Benjamin, S. Cohen, M. Workman, S. Sturmsun, B. Keyler, V. Shaffer, A. Langley, R. Davis, S. Starr, A. Angus, S. Candy, H. Daily, J. Wilkum, M. Wilkum

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

8/28/13
 DATE

By: [Signature]
 AGENCY HEAD SIGNATURE

9/10/2013
 DATE

88--000043

90105
 800 SMITH ST
 CHARLESTON, WV 25301
 304 72646

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 00000001
 Term ID: 0026
 Printer ID: 1608

Sale

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. SUMMERS
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 9/04/13

TX:XXXXX8270
 Int. Method: Swiped
 Approval: Online Balance: 000000
 03-09-13 10:32:06
 Inv#: 00000001 Appr Code: 0
 Amount: \$ 277.80
 Tip: 46.30
 Total: 277.80

Customer Copy
 THANK YOU

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>277.80</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>277.80</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, V. Summers, S. Stevenson, M. Workman, J. Stover, R. Davis, R. Melvin, M. Ketchum, V. Shaker, A. Layton, B. Kaylor, H. Daily, S. Gandy, A. Angus, S. Canterbury, E. Nest, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
 AGENCY HEAD SIGNATURE

09/04/13
 DATE

10/08/2013
 DATE

88--000044

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: A022776
VISA
SALE
BATCH: 000114 INU: 000001
Sep 10, 13 11:45
RRN: 01140001 AUTH: 039451

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 9/10/13

TRN REF: 00223564991170
CALCULATION CODE: RGR
APPROVED
SALE AMT \$237.60
TIP Included
TOTAL \$ 237.60
VAUGHN A SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>237.60</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>237.60</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): R. Melvin, M. Ketchum, J. Stover, R. Davis, M. Markman, S. Cohen, V. Summers, B. Benjamin, B. Kayhan, V. Shaker, A. Langhrey, S. Gandy, A. Angus, H. Daily, R. Perry, E. Nesh

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

9/10/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

10/08/2013
DATE

88--000045

TO GO
00009
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160115609
Term ID: 0020
Server ID: 1638

Sale

VISA
XXXXXXXXXXXX9270
Entry Method: Swiped
Apprvd: Online Batch#: 000009
09/11/13 10:30:22
Inv#: 00000001 Appr Code: 042431
Amount: \$ 203.65
Tip: 40.73
Total: 244.38

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 9/11/13

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 244.38
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 244.38

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): V. Summers, S. Cohen, B. Benjamin, R. McVitt, M. Ketchum, V. Shaffer, A. Langley, B. Kuylen, S. Stinson, M. Workman, S. Shure, R. Davis, S. Gandy, R. Perry, A. Angus, E. Nash

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE
By: [Signature]
AGENCY HEAD SIGNATURE

9/11/13
DATE
10/08/2013
DATE

south hills market
and café

SOUTH HILLS

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Date: 9/12/2013 Time: 11:31:44 AM

Status: Approved

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS

Card Type: Visa
Card Number: XXXXXXXXXXXX8270
Expiration Date: X/XX/XXXX
Server Name: Tasha
Check Number: 164279
Tab Number: 13
Number Of Covers: 1
Persons: 1
Card Owner: SUMMERS/VAUGHN A

CONTACT PERSON V. SUMMERS

TELEPHONE NUMBER 304. 419. 0779

FUNCTION SPONSOR V. SUMMERS

LOCATION OF FUNCTION Justices' Chambers

AMOUNT 97.48

DATE(S) OF FUNCTION Conference, 9/12/13

TIP 20.00

TOTAL 117.48

ESTIMATED EXPENSES

- FOOD AND BEVERAGE
- MEETING ROOM
- EQUIPMENT RENTAL
- LODGING
- OTHER/
- OTHER/

\$ 117.48

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ 117.48

TOTAL

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

Attached

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

9/12/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

10/08/2013
DATE

88--000047

SONOS
808 SMITH ST
CHARLESTON, WV 26301
304-720-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160115509
Term ID: 0926
Server ID: 3220

Sale

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 9/23/13

VISA
XXXXXXXXXXXX8270
Entry Method: Swiped
Apprvd: Online Batch#: 000006
09/23/13 10:43:00
Inv#: 00000002 Appr Code: 025515
Amount: \$ 245.70
Tip: Included
Total: 245.70

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 245.70
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER \$ _____
OTHER \$ _____
TOTAL \$ 245.70

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): R. Percy, E. Nash, R. Melvin, M. Ketchum, J. Sture, R. Davis, S. Cohen, B. Benjamin, J. Harrison, M. Workman, V. Shale, A. Leung, V. Summers, B. Keyler, H. Dault, S. Condy, A. Angus

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

9/23/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

10/08/2013
DATE

88--000048

PATERMOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: NO232776
VISA SRV: 5064 SWIPED
SALE
BATCH: 000124 INU: 000001
SEP 24, 13 11:37
RMT 01240001 AUTH: 090249

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 9/24/13

TRN REF: 201267559796194
VALIDATION CODE: 046H
APPROVED
SALE AMT \$271.20
TIP
TOTAL 271.20
VAUGHN A SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>271.20</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>271.20</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, V. Shaker, A. Langley, W. Workman, S. Stevenson, S. Stuer, R. Davis, R. Melvin, M. Ketchum, R. Perry, E. Nash, V. Summers, H. Daily, A. Angus, S. Cuddy, B. Keyler

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

9/24/13

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

10/08/2013

DATE

88--000049

WHEELHOUSE
1007 BRIDGE RD
CHARLESTON, WV 25314

09.25.2013 11:27:34
Merchant ID: 00000001732521
Terminal ID: 02599130
421240017887

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

CREDIT CARD
VISA SALE

CARD # XXXXXXXXXXXXXXX18270
INVOICE 0008
Batch #: 000857
SERVER 0001
Approval Code: 020672
Entry Method: Swiped
Approved: Online

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 9/25/13

PRE-TIP AMT \$146.18
TIP 20.00
TOTAL AMOUNT 166.18

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 166.18
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 166.18

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

S. Cohen, B. Brum, J. Stover, M. Verkerke, S. Stevenson, R. Davis, S. Gandy, A. Arays, V. Summers, R. Perry, E. North, R. Melvin, M. Kitchum, V. Shaker, A. Loughry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

9/25/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

10/08/2013
DATE

88--000050

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SERVER: Jean n
TABLE: 514
TICKET: 213185 10/01/2013 10:24
GUEST #: 1

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/06/13

SUB TOTAL: 186.93
TOTAL: 186.93
CARD PAID: 186.93
GRATUITY: 20.00
TOTAL: 206.93


Signature

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 206.93
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 206.93

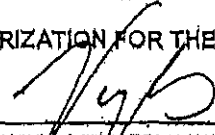
CARD #: XXXXXXXXXXXX270
VAUGHN A SUMMERS
051999

PURPOSE/JUSTIFICATION OF FUNCTION:


CONFERENCE

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, S. Stever, R. Melvin, M. Ketchum, S. Stevenson, M. Workman, V. Shaker, A. Langley, B. Keyler, S. Cundy, H. Dealey, A. Angus, E. Nash, R. Parry, V. Summers

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: 
FUNCTION REPRESENTATIVE'S SIGNATURE

10/06/13
DATE

By: 
AGENCY HEAD SIGNATURE

11/07/2013
DATE

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

TMO 3 Form - Rev. 01/2008

TERMINAL ID: 00232776

UISA SRV: 3213
SALE
WATCH: 000130 INU: 000002
Oct 02, 13 11:24
REV: 01300002 AUTH: 005657

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TRN REF: 00327553210537
VALIDATION CODE: 1007

APPROVED

SALE AMT \$248.40

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS

CONTACT PERSON V. SUMMERS

TIP

TELEPHONE NUMBER 304. 419. 0779

TOTAL

248 40

FUNCTION SPONSOR V. SUMMERS

WAGNER & SUMMERS

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

LOCATION OF FUNCTION Justices Chambers

DATE(S) OF FUNCTION 10/02/13

CUSTOMER COPY TERMINAL ID: 00232776

UISA SRV: 425
SALE
WATCH: 000130 INU: 000004
Oct 02, 13 12:21
REV: 01300004 AUTH: 054241

ESTIMATED EXPENSES

- FOOD AND BEVERAGE
- MEETING ROOM
- EQUIPMENT RENTAL
- LODGING
- OTHER
- OTHER

\$ 10.46 / 248.40

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

TOTAL

\$ 258.86

TRN REF: 003275507265629
VALIDATION CODE: 1008

APPROVED

SALE AMT \$7.40

TIP 3.00

TOTAL 10.40

WAGNER & SUMMERS

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): B. Benjamin, S. Cohen, M. Ketchum, R. Melvin, R. Davis, J. Stover, S. Stevenson, M. Workman, V. Stefer, A. Langley, B. Kaylor, S. Condy, H. Daily, A. Angus, V. Summers, E. Nash, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

10/02/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

11/07/2013
DATE

88--000052

00000
600 SMITH ST
CHARLESTON, WV 25301
804-720-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160115689
Term ID: 0026
Server ID: 3363

Sale

VISA
XXXXXXXXXXXX8270
Entry Method: Swiped
Apprvd: Online Batch#: 000001
10/03/13 10:40:36
Inv#: 00000002 Appr Code: 038223
Amount: \$ 231.83
Tip: _____
Total: 231.83

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/03/13

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>231.83</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>231.83</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany this form): V. Summers, R. Perry, E. Nash, S. Coker, B. Benjamin, R. Davis, S. Spaw, S. Stevenson, M. Workman, V. Shear, A. Leary, M. Ketchum, R. Melvin, B. Kayler, S. Gandy, H. Daily, A. Ayers

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

10/03/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

11/07/2013
DATE

88--000053

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7848

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 8023277
UISA
*****1111270 EXP:11/13
SALE
SALE: 000129 THU: 000001
OCT 15, 13 11:41
PRN: 0129001 AUTH: 089963

TOT REF: 083204561929615
VALIDATION CODE: 27DC

APPROVED
SALE AMT \$274.80
TIP
TOTAL 274.80

MURKIN A SUMMERS

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/15/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 274.80
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 274.80

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Laughry, R. Perry, E. Nash, V. Summers, B. Kanyhu, S. Gundy, H. Daily, A. Angus

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

10/15/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

11/07/2013
DATE

88--000054

59H08
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646

Merchant ID: 168115489
Term ID: 8925
Server ID: 1538

Sale

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

VISA
XXXXXXXXXXXX8270
Entry Method: Swiped
Apprvd: Online Batch#: 000001
10/16/13 10:28:31
Inv#: 00000001 Appr Code: 005064
Amount: 20⁰⁰\$ 219.10
Tip: 43.80
Total: 262.90

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 414. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/16/13

Customer Copy
THANK YOU

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>262.90</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>262.90</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *S. Cohen, B. Benjamin, R. Davis, S. Storer, M. Ketchum, R. Melvin, V. Shaker, A. Laughry, S. Stevenson, M. Workman, B. Kanjha, V. Summers, R. Perry, E. Nash, S. Gandy, H. Dault, A. Angus*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: *[Signature]*
FUNCTION REPRESENTATIVE'S SIGNATURE

10/16/13
DATE

By: *[Signature]*
AGENCY HEAD'S SIGNATURE

11/07/2013
DATE

Woods
908 SMITH ST
CHARLESTON, WV 26031
804-720-7646

Merchant ID: 16011688
Term ID: 0326
Server ID: 3583

Sale

VISA
XXXXXXXXXXXX8270
Entry Method: Swiped
Approved: Online Batch#: 00000
10/24/13 10:24:4
Inv#: 00000001 Appr Code: 0019
Amount: \$ 273.
Tip:
Total: 273.18

Customer Copy
THANK YOU

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/24/13

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>273.18</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>273.18</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

S. Cohen, B. Benjamin, R. Davis, S. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Laughry, B. Kashua, V. Summers, R. Perry, E. Nash, Su Gundy, H. Daily, A. Angus

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

10/24/13

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

11/07/2013

DATE

88--000056

PAERHOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 00232776
VISA
ISSUE DATE: 11/02/13 EXP: 11/11
SALE
BATCH: 000154 INU: 000001
Nov 05, 13 11:24
BANI 01540001 AUTH: 073056

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. Summers
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. Summers
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 11/05/13

APPROVED
SALE AMT \$248.40
TIP Included
TOTAL 248.40
VAUGHN R SUMMERS

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>248.40</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>248.40</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stever, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafiq, A. Langley, R. Perry, E. Nash, V. Summers, A. Angus, S. Gurdy, H. Daily

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

11/05/13
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

12/09/2013
DATE

88--000057

SONOS
800 SMITH ST
CHARLESTON, WV 25301
304-720-7616

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160115689
Term ID: 6926
Server ID: 1630

Sale

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 11/20/13

VISA
XXXXXXXXXXXX8270
Entry Method: Swiped
Approved: Online Batch#: 000001
11/20/13 11:45:11
Inv#: 00000001 Appr Code: 01527
Amount: \$ 179.31
Tip: 20% 358
Total: 215.22

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 215.22
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ 215.22

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shaffer, A. Ludwig, R. Perry, F. Nash, V. Summers, S. Gandy, A. Angers, H. Daily, B. Rayburn*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: *[Signature]*
FUNCTION REPRESENTATIVE'S SIGNATURE

11/20/13

DATE

By: *[Signature]*
AGENCY HEAD SIGNATURE

12/09/2013

DATE

88--000058

south hills mark
and café

SOUTH HILLS

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Date: 11/26/2013 Time: 11:33:01

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. Summers
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. Summers
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 11/25 11/26/13

Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8270
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 170373
 Tab Number: 23
 Number Of Covers: 1
 Persons: 1
 Card Owner: SUMMERS/VAUGHN A

AMOUNT 165.45
 TIP 20.00
TOTAL 185.45

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>185.45</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>185.45</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, J. Shafiq, A. Lashry, V. Summers, E. Nash, R. Perry, H. Daily, A. Angus, S. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
 AGENCY HEAD SIGNATURE

11/26/13
 DATE

12/09/2013
 DATE

Bluegrass Kitchen
Age 1600 Washington St. East
Charleston, WV 25311
304.346.2671

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SERVER: Kate L
TABLE: 594
TICKET: 218760 12/06/2013 09:
GUEST #: 1

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304.419.0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 12/06/13

SUB TOTAL: 69.25
TOTAL: 69.25
CARD PAID: 69.25
GRATUITY: 10.00
TOTAL: 79.25

ESTIMATED EXPENSES

- FOOD AND BEVERAGE
- MEETING ROOM
- EQUIPMENT RENTAL
- LODGING
- OTHER/
- OTHER/

\$ 79.25
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ 79.25

TOTAL

Signature
CARD #: XXXXXXXXXX8270
VAUGHN A SUMMERS
082126

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, S. Stever, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, J. Shafiq, A. Ludwig, R. Perry, E. Nash, V. Summers,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

1/20
DATE

SUNDS
800 SMITH ST
CHARLESTON, WY 26301
304-729-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 169116689
Term ID: 0926
Server ID: 8868

Sale

VISA
XXXXXXXXXXXX0270
Entry Method: Swiped
Apprvd: Online Batch#: 000006
12/19/13 10:46:57
Inv#: 00000001 Appr Code: 099217
Amount: \$ 124.32
Tip:
Total: *****

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 12/19/13

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>124.32</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>124.32</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Steier, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Laybry, V. Summers, R. Perry, E. Nash, J. Gandy, A. Angus, B. Keyhan

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

12/19/13

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

1/14/2013

DATE

88--000061

JAN – DEC 2014

**MEALS PURCHASED
FOR JUSTICES & STAFF**

88--000062

SDHOS
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646

Merchant ID: 100116699
Term ID: 0928
Server ID: 1638

Sale

VISA
XXXXXXXXXXXX0270
Entry Method: Swiped
Apprvd: Online Batch#: 000004
01/08/14 11:18:38
Inv#: 00000001 Appr Code: 076098
Amount: \$ 188.35
Tip: 31.67
Total: 226.02

Customer Copy
THANK YOU

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 1/08/14

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>226.02</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>226.02</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stever, R. Melvin, M. Kitchum, J. Stevenson, M. Workman, V. Stefan, A. Laughry, S. Gundy, H. Dailey, R. Perry, E. Nash, B. Kayva, V. Summers

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

1/08/14

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

2/24/2014

DATE

88--000063

Age

WHEELHOUSE
1007 BRIDGE RD
CHARLESTON, WV 25314

11:32
000000001732
025991

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

01/15/2014
Merchant ID:
Terminal ID:
421246017887

CREDIT CARD
VISA SALE

CARD #
INVOICE
Batch #:
SERVER
Approval Code:
Entry Method:
Approved:
XXXXXXXXXXXX0821
000
00094
000
06685
Swipe
Online

PRE-TIP AMT \$138.72
TIP \$20.00
TOTAL AMOUNT \$158.72

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 479. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 1/15/14

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 158.72
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER \$ _____
OTHER \$ _____
TOTAL \$ 158.72

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Staver, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Loughry, R. Perry, E. Nash, V. Summers

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

2/24/14
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

2/24/2014
DATE

SUNDS
200 TRUTH ST.
CHARLESTON, WV 25301
504-28-7646

Merchant ID: 1-411668
Term ID: 0926
Server ID: 111

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Site

VISA
XXXXXXXXXXXX8216
Entry Method: Full card
Approved Online - Batch# 00006
01/22/14 11:27:2
Inv# 00000001 Appr Code# 05575
Amount: 20% \$ 233.1
Tip: \$ 46.6
Total: \$ 279.72

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 1/22/14

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 279.72
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 279.72

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafiq, A. Laybry, ~~S. Gandy~~ J. Gandy, H. Daily, R. Perry, E. Nash, V. Summers, B. Kaylor

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

1/22/14
DATE

By: [Signature]
AGENCY HEAD'S SIGNATURE

2/24/2014
DATE

PATERNOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-728-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: A0232776
UIFA 5864
SERIAL: 000012
SALE SNIPED
CASH: 000206
JAN 28, 14 11:45
RRN: 02060012 AUTH: 024695

SPENDING UNIT NAME/ORG# SUPREME COURT OF APPEALS
CONTACT PERSON V. Summers
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. Summers
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 1/28/14

TAX REF: 304-7067577
VALIDATION CODE: 0315
APPROVED
SALE AMT \$253.00
TIP
TOTAL \$253.00
UNIQUE # 030895

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 253.00
MEETING ROOM	\$
EQUIPMENT RENTAL	\$
LODGING	\$
OTHER/	\$
OTHER/	\$
TOTAL	\$ 253.00

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *S. Cohen, B. Benjamin, R. Davis, J. Stever, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Loughry, J. Gundy, H. Daily, R. Perry, E. Nash, V. Summers, B. Kuyven*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

DATE 1/20

PATERHOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
804-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 4022776
VISA 3444444444444444 EXP: 11/11
SALE BATCH: 000112 INV: 000001
Feb 04, 14 11:36
R01: 02120001 AUTH: 070595

TRM REF: 001625592417914
CALCULATION CODE: CFSH

APPROVED

SALE AMT \$259.20

TIP

TOTAL \$259.20

VAUGHN A SUMMERS

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 2/4/14

ESTIMATED EXPENSES

CUSTOMER COPY

FOOD AND BEVERAGE	\$	<u>259.20</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>259.20</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Kitchum, J. Stevenson, M. Workman, V. Shaffer, A. Laughry, J. Cundy, H. Dailey, V. Summers, R. Pury, E. Gaiser, B. Kynka

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

2/4/14

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

3/12/2014

DATE

88--000067

50805
808 SMITH ST
CHARLESTON, WV 25301
844-728-7646

Merchant ID: 169115688
Term ID: 9926
Server ID: 1639

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Sale

VISA
XXXXXXXXXXXX8278
Entry Method: Swiped
Apprvd: Online Batch#: 000001
03/05/14 11:40:52
Inv#: 00000003 Appr Code: 063872
Amount: 225.50
TIP: 20% 45.10
Total: 270.60

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices Chambers
DATE(S) OF FUNCTION 3/05/14

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>270.60</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>270.60</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, S. Staver, R. Melvin, M. Ketchum, S. Stevenson, M. Workman, V. Shafer, A. Laughry, J. Gundy, H. Daily, B. Kuyhva, E. Gaizer, R. Perry, V. Summers

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

3/05/14

DATE

By: [Signature]
AGENCY HEAD SIGNATURE

4/10/2014

DATE

PATERNOB AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 80232276
VISA 80232276 EXP: 04/14 SER: 3213 SWIPED
SALE
BATCH: 000245 INU: 000001
Mar 25, 14 11:42
RHH: 00450001 AUTH: 099934

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 3/25/14

TRN REF: 45004540129971
VENDOR ID: 0001
APPROVED
SALE AMT \$222.00
TIP \$
TOTAL \$ 222.00
VENDOR A BILLING

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>222.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ <u>222.00</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Skater, A. Loughry, R. Perry, E. Garber, V. Summers, B. Kaylor, J. Gandy, H. Daily

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

3/25/14
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

4/10/2014
DATE

SOHOS
806 SMITH ST
CHARLESTON, WV 25301
304-728-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

DUPLICATE

Merchant ID: 158115669
Term ID: 8326
Server ID: 7191

Adjust Sale

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION Justices Chambers
DATE(S) OF FUNCTION 3/26/14

VISA
XXXXXXXXXXXX0270
Entry Method: Swiped
Apprvd: Online Batch#: 000007
03/26/14 10:16:10
Inv#: 00000001 Appr Code: 081438
Amount: \$ 238.30
Tip: \$ 46.06
Total: \$ 276.36

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 276.36
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 276.36

I agree to pay above total amount according to card issuer agreement (Merchant agreement if credit voucher)

SUMMERS VAUGHN A
Merchant Copy
THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Laughry, J. Gandy, N. Daily, V. Summers, B. Keyhan, E. Guiso, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

3/26/14
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

4/10/2014
DATE

88--000070

PATERSONS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-720-7640

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 00232726
VISA
*****0270 EXP: 11/11
SALE
BATCH: 000247 INH: 000001
PRM: 27 14 11:34
RMT: 02470001 AUTH: 006363

TRN REF: S940655572209
VALIDATION CODE: JWZ

APPROVED

SALE AMT \$200.40

TIP

200.40

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. SUMMERS
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. SUMMERS
LOCATION OF FUNCTION JUSTICES' CHAMBERS
DATE(S) OF FUNCTION 3/27/14

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 200.40
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ 200.40

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shafer, A. Laughry, H. Daily, J. Gundy, B. Kayhvi, V. Summers, R. Perry, E. Gaiser*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: *[Signature]*
FUNCTION REPRESENTATIVE'S SIGNATURE

3/27/14

DATE

By: *[Signature]*
AGENCY HEAD SIGNATURE

4/10/2014

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. SUMMERS
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 4/9/14 - Soho's

800 SMITH ST
CHARLESTON, WV 25301
304-728-7646

Merchant ID: 18915689
Term ID: 8926
Server ID: 5515

Sale

VISA
XXXXXXXXXXXX8270
Entry Method: Swiped
Apprvd: Online Batch#: 009603
04/09/14 1:22:34

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>#280.62</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>#280.62</u>

Inv#: 00000001 Appr Code: 051817
 Amount: \$ 280.62
 Tip: _____
 Total: 280.62

Customer Cnfr
THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, J. Stover, B. Benjamin, S. Cohen, M. Lubkman, J. Stevenson, M. Ketchum, R. Melvin, A. Loughry, V. Shaffer, K. Perry, E. Gaiser, H. Dailey, J. Gundy, B. Kaghvan, C. Garris

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

5/12/14
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

5/12/2014
DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. Summers
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. Summers
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 4/9/14 - Peterino's

PATERNO'S AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25301
 304-720-7640

TERMINAL ID: 0023776
 UI BA SRV: 6789
 #####0270 EXP: 11/14 KEY ENTERED
 SALE
 BATCH: 000256 INU: 000001
 API: 09, 14 11:26
 RAN: 0256001 AUTH: 025318

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>\$235.20</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>235.20</u>

APPROVED
 SALE AMT \$235.20
 TIP _____
 TOTAL 235.20

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, J. Stover, B. Benjamin, S. Cohen, M. Workman, J. Stevenson, M. Ketchum, R. Melvin, A. Laughery, V. Shaffer, R. Perry, E. Gaiser, H. Daley, J. Gundy, B. Kanjha, C. Barnes

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
 AGENCY HEAD SIGNATURE

5/12/14
 DATE

5/12/2014
 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. Summers
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. Summers
 LOCATION OF FUNCTION Justices Chambers
 DATE(S) OF FUNCTION 4/22/14

PATEROS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25301
 304-728-7648

TECHNICAL ID: AB232776
 VISA BRU1 6789
 SALE KEY ENTERED
 AUTH: 022505
 AUTH: 022505

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>204.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>204.00</u>

SALE AMT \$204.00
 TIP Included
 TOTAL 204.00

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, J. Spover, B. Benjamin, S. Cohen, M. Workman, J. Stevenson, M. Ketchum, R. Melvin, A. Laughry, V. Shaffer, R. Perry, E. Gaiser, H. Dailey, J. Gundy, B. Kayhwa, C. Barnes

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
 AGENCY HEAD SIGNATURE

5/12/14
 DATE

5/12/2014
 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

BRIDGE ROAD BISTRO

Date: 4/23/2014 Time: 11:41:58 AM

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS

Status: Approved

CONTACT PERSON V. SUMMERS

Card Type: Visa
Card Number: XXXXXXXXXXXXX8270

TELEPHONE NUMBER 304. 419. 0779

Expiration Date: X/XX/XXXX

FUNCTION SPONSOR V. SUMMERS

Server Name: Lorra

LOCATION OF FUNCTION Justices' Chambers

Check Number: 193338

DATE(S) OF FUNCTION 4/23/14 - BRB

Tab Number: 900

Number Of Covers: 1

Persons: 1, 2, 3, 4, 5, 6, 7, 8,

9, 10, 11, 12, 13, 14, 15

Card Owner: Manual Ent

ESTIMATED EXPENSES

- FOOD AND BEVERAGE
- MEETING ROOM
- EQUIPMENT RENTAL
- LODGING
- OTHER/
- OTHER/

\$ 255.11
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ 255.11

AMOUNT 212.59

Gratuity 42.52

Total 255.11

Approval: 045917

CUSTOMER COPY

TOTAL

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, J. Stover, B. Benjamin, S. Cohen, M. Workman, J. Stevenson, M. Ketchum, R. Melvin, A. Loughry, V. Shaffer, R. Perry, E. Gaiser, H. Dailey, J. Gandy, B. Kayhva, C. Games

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
FUNCTION REPRESENTATIVE'S SIGNATURE

5/12/14
DATE

By: [Signature]
AGENCY HEAD SIGNATURE

5/12/2014
DATE

STATE OF WEST VIRGINIA DEPARTMENT OF ADMINISTRATION TRAVEL MANAGEMENT OFFICE REQUEST FOR HOSPITALITY SERVICE	BRIDGE ROAD BISTRO Date: 5/5/2014 Time: 11:53:37 AM Status: Approved Card Type: Visa Card Number: XXXXXXXXXXXXX8270 Expiration Date: X/XX/XXXX Server Name: Lorra Check Number: 194267 Tab Number: 900 Number Of Covers: 1 Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14 Card Owner: Manual Ent
SPENDING UNIT NAME/ORG # <u>SUPREME COURT OF APPEALS</u>	
CONTACT PERSON <u>V. SUMMERS</u>	
TELEPHONE NUMBER <u>304. 419. 0779</u>	
FUNCTION SPONSOR <u>V. SUMMERS</u>	
LOCATION OF FUNCTION <u>Justices' Chambers</u>	
DATE(S) OF FUNCTION <u>5/5/14</u>	

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>233.74</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>253.74</u>

AMOUNT	211.45
Gratuity	42.29
Total	253.74

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *S. Cohen, B. Benjamin, R. Davis, J. Staver, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Staker, A. Laughry, S. Kraybill, C. Guinness*

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____ FUNCTION REPRESENTATIVE'S SIGNATURE	_____ <u>5/5/14</u> _____ DATE
By: _____ AGENCY HEAD SIGNATURE	_____ <u>6/13/2014</u> _____ DATE

SONOS
807, SHUTUP ST
CHARLESTON, WV 25301
304-720-7646

Merchant ID: 160116699
Term ID: 0326
Server ID: 5516

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Sale

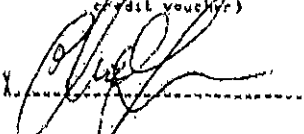
SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
CONTACT PERSON V. Summers
TELEPHONE NUMBER 304. 419. 0779
FUNCTION SPONSOR V. Summers
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 5/6/14

VISA
XXXXXXXXXXXX0279
Entry Method: Manual
Apprvd: Online Batch#: 00000
05/06/14 10:24:4
AVS Code: "
Inv#: 00000001 Appr Code: 00049
Amount: \$ 285.9
TIP: Included
Total: 285.96

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>285.96</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>285.96</u>

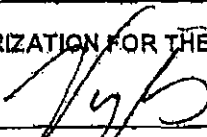
I agree to pay above total amount according to card issuer agreement (Merchant agreement & credit voucher)



Merchant Copy
THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, G. Benjamin, R. Davis, J. Stover, L. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Shuter, A. Loughry, J. Gundy, H. Daily, B. Kayhoun, F. Gaiser, R. Perry, C. Guines

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: 
FUNCTION REPRESENTATIVE'S SIGNATURE

By: 
AGENCY HEAD SIGNATURE

5/6/14
DATE

6/13/2014
DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BRIDGE ROAD BISTRO

Date: 5/27/2014 Time: 11:23:33 AM

Status: Approved

SPENDING UNIT NAME/ORG # SUPREME COURT OF APPEALS
 CONTACT PERSON V. SUMMERS
 TELEPHONE NUMBER 304. 419. 0779
 FUNCTION SPONSOR V. SUMMERS
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 5/27/14

Card Type: Visa
 Card Number: XXXXXXXXXXXX8270
 Expiration Date: X/XX/XXXX
 Server Name: Lorra
 Check Number: 195840
 Tab Number: 200
 Number Of Covers: 1
 Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10
 Card Owner: Manual Ent

AMOUNT	182.50
Gratuity	36.50
Total	219.00

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>219.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>219.00</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): S. Cohen, B. Benjamin, R. Davis, J. Stover, R. Melvin, M. Ketchum, J. Stevenson, M. Workman, V. Skater, A. Langley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: [Signature]
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: [Signature]
 AGENCY HEAD SIGNATURE

5/27/14
 DATE

6/13/2014
 DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
Bar & Grille
218 Capitol Street
Charleston, WV 25301
PH: 304-343-5551
FAX: 304-343-5552

Date: Aug28'14 12:00PM
Card Type: Visa
Acct #: XXXXXXXXXXXX8448*
Card Entry: KEYED
Trans Type: PURCHASE
Auth Code: 013097
Check: 4692
Check ID: SUPREME COURT
Server: 1001 AM Left

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Games
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Games
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 08/26/2014

Subtotal: 198.79

Tip: Inc.

Total: 198.79

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 198.79
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 198.79

Signature
I agree to pay the above total according to my card issuer agreement.
GUEST COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin, V. Shafer,
J. Charnock, B. Kayuha, E. Nash, C. Games, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SONOS
800 SHIP ST
CHARLESTON, WV 26301
304-720-7616

Merchant ID: 168116609
Term ID: 0926
Server ID: 1636

Sale

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/03/2014

VISA
XXXXXXXXXXXX0448
Entry Method: Swiped
Apprvd: Online Batch#: 000009
09/03/14 10:33:41
Inv#: 00000001 Appr Code: 001541
Amount: \$ 208.15
Tip: 41.63
Total: 249.78

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>249.78</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>249.78</u>

Customer Copy
THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, R. Perry, E. Nash, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

A

SOHOG
400 SMITH ST
CHARLESTON, WV 25301
304-729-7646

Merchant ID: 160116689
Term ID: 0025
Server ID: 1636

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Sale

VISA
XXXXXXXXXXXX0448
Entry Method: Swiped
Apprvd: Online Batch#: 000009
09/10/14 10:19:10
Inv#: 00000001 Appr Code: 074564
Amount: \$ 210.85
Tip: 42.17
Total: 253.02

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 09/10/2014

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>253.02</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>253.02</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, V. Summers, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/17/2014

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>231.20</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>231.20</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, J. Charnock, C. Garnes, J. Gundy, H. Dalley, B. Kayuha, E. Gaiser, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

60808
890 SMITH ST
CHARLESTON, WV 25301
304-729-7645

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160115688
Term ID: 0325
Server ID: 6615

Sale

VISA

XXXXXXXXXXXX8448

Entry Method: Swiped

Apprvd: Online Batch#: 000007

09/29/14 10:30:57

Inv#: 00000002 Appr Code: 036065

Amount: \$ 218.04

Tip:

Totals: Inc
218.04

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/29/2014

Customer Copy

THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 218.04
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 218.04

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference.

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin, V. Shafer, R. Perry, C. Garnes, J. Gundy, S. Canterbury, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-766-6583

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 0032776
UISA CNY: 6789
SALE SHIPPED
BATCH: 000003 INU: 000001
Ser 30, 14 11:37
RRN: 00031001 AUTH: 095573
V-CODE: N

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Games
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Games
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 09/30/2014

TRN REF: 444273562123538
VALUATION CODE: RPSF
APPROVED
SALE AMT \$178.80
TIP Inc.
TOTAL 178.80
CHRISTOPHER & GAMES

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 178.80
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 178.80

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
J. Charnock, V. Shafer, C. Games, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

Adelphia Sports
Bar & Grille
218 Capitol Street
Charleston, WV 25301
PH: 304-343-5551
FAX: 304-343-5552

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Date: Oct01'14 12:00PM
Card Type: Visa
Acct #: XXXXXXXXXXXX8448
Card Entry: SWIPED
Trans Type: PURCHASE
Auth Code: 032865
Check: 2266
Table: 804/1
Server: 136 Laytasha

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Ganes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Ganes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/01/2014

Subtotal: 238.73

Tip: Inc.

Total: 238.73

[Signature]
Signature

I agree to pay the above total according to my card issuer agreement,

****GUEST COPY****

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>238.73</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>238.73</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, C. Ganes, J. Gundy, H. Dailey, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

Pies and Pints #2
222 Capitol Street
Charleston, WV 25301
Phone:
www.piesandpints.net

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Ord#7
TO GO
Empl: Erick

10/14/2014 11:43 AM

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/14/2014

Subtotal 168.00
Tax 0.00
Total 168.00
Visa 8448 Payment 168.00
Tip 33.60
Total 201.60

*** Guest Copy ***

SPECIAL NOTE

SUPREME COURT
PICK UP AT 1145

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 201.60
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 201.60

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, C. Garnes, J. Gundy, H. Dalley,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SERVER: Zachary M
TABLE: 662
TICKET #: 246184 10/15/2014 10:08
GUESTS: 1

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 10/15/2014

SUB TOTAL: 148.50
GRATUITY ADDED: 29.70
TOTAL: 178.20
CARD PAID: 178.20
GRATUITY: TAC
TOTAL: 178.20

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 178.20
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 178.20

CARD #: XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
082058

Thanks for supporting our small business!
www.bluegrasskitchen.com

Comments? Suggestions?
email contact@bluegrasswv.com

** Customer Copy **

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davls, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE



164 Summers Street
 Charleston WV

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/21/2014

Server: cashier
 Date: 10/21/2014 Time: 11:43:14
 Table: 111 / 1,2,3,4,5,6,7,8,9,10,11,12
 1,2,3,4,5,6,7,8,9,10,11,12/198187
 Visa: XXXXXXXXXXXX8448
 Swipe: GARNES/CHRISTOPHER A
 Approved: 030879

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>143.94</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>143.94</u>

AMOUNT	113.94
TIP	<u>30.00</u>
TOTAL	<u>143.94</u>

X _____
 Customer Signature

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Guest Copy

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, J. Charnock, V. Summers, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Blacksheep Burrito & Brew
162 Summers St.
(304) 343-2739

Server: Amanda
11:33 AM
Court/1

DOB: 10/22/2014
10/22/2014
1/10002

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SALE

CONTACT PERSON Chris Games

VISA 1048577

TELEPHONE NUMBER (304) 558-2060

Card #XXXXXXXXXXXX8448
Magnetic card present: BARNES CHRISTOPHER
Card Entry Method: S

FUNCTION SPONSOR Chris Games

Approval: 054657

LOCATION OF FUNCTION Justices' Chambers

Amount: \$ 112.15

DATE(S) OF FUNCTION 10/22/2014

+ Tip: 22.43

= Total: 134.58

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>134.58</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____

TOTAL \$ 134.58

I agree to pay the above total amount according to the card issuer agreement.

X

Visit blacksheepwv.com

PURPOSE/JUSTIFICATION OF FUNCTION:

Guest Copy

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, C. Games, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Date: 10/30/2014 Time: 11:39:11 AM

Status: Approved
 Card Type: Visa
 Card Owner: GARNES/CHRISTOPHER A
 Card Number: XXXXXXXXXXXX8448
 Server: 66 Britney S.
 Check/Person #: 132838/1
 Tab Number: 4076

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Games
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/30/2014

AMOUNT 201.56
 TIP Inc
 TOTAL 201.56

Approval: 084569

I AGREE TO COMPLY WITH THE CARDHOLDER AGREEMENT

CUSTOMER COPY

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>201.56</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>201.56</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin, V. Shafer, J. Charnock, C. Garnes, J. Gundy, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

BRIDGE ROAD BISTRO

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Date: 11/12/2014 Time: 11:54:09 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Scott
 Check Number: 207107
 Tab Number: 100
 Number Of Covers: 12
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12
 Card Owner: garnes/christopher a

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Games

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Games

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/12/2014

AMOUNT	131.56
Gratuity	40.98
Total	232.54

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>232.54</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>232.54</u>

Approval: 020354

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R, Davis, M. Workman, B. Benjamin, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, C. Games, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: 
 FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
 AGENCY HEAD SIGNATURE

DATE

JAN – DEC 2015

**MEALS PURCHASED
FOR JUSTICES & STAFF**

88--000094

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/08/2015

Date: 1/8/2015 Time: 11:38:55 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Natalia
 Check Number: 194411
 Tab Number: 100
 Number Of Covers: 28
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12, 13, 14
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>242.64</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LOGGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>242.64</u>

AMOUNT	202.64
TIP	<u>40.50</u>
TOTAL	<u>242.64</u>
	Approval: 070085

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, B. Benjamin, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, J. Charnock, C. Garnes, J. Gundy, A. Angus, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

6005
600 SMITH ST
CHARLESTON, WV 25301
304-724-7646

Merchant ID: 160116699
Term ID: 0928
Server ID: 5615

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Sale

VISA
XXXXXXXXXXXX8448
Entry Method: Swiped
Approved: Online Batch#: 000027
01/13/15 10:51:31
Tran#: 00000001 Appr Code: 054351
Amount: \$ 228.42
Tip: Inc
Total: 228.42

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 01/13/2015

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>228.42</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>228.42</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, B. Benjamin, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000096

PATERNO'S AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-766-6583

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL (S) 90332776

UTSA CASH 5864
SUBPCO

SALE
BATCH 000154 IIV: 000001
Jan 14, 15 12:36
CON: 01541601 AUTH: 055612
V-CODE:

(M) RE: # 197750
UNLTD/INTL / E: FIRM

APPROVED

SALE AMT \$ 230.40

TIP Inc.

TOTAL 230.40

CHRISTOPHER A GARNES

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/14/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 230.40
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 230.40

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, B. Benjamin, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnook, C. Garnes, J. Gundy, A. Angus, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/16/2015

DATE: 1/16/2015 Time: 11:38:07 AM
Status: Approved
Card Type: Visa
Card Number: XXXXXXXXXXXX8448
Expiration Date: X/XX/XXXX
Server Name: Tasha
Check Number: 194809
Tab Number: 400
Number Of Covers: 7
Persons: 1, 2, 3, 4, 5
Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>63.37</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>63.37</u>

AMOUNT	<u>52.87</u>
TIP	<u>10.50</u>
TOTAL	<u>63.37</u>
Approval:	094240

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, A. Loughry, S. Canterbury

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

5 Corners Cafe
423 Virginia St. W
Charleston, WV 25302
(304) 205-7817

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 07700002795101
MERCHANT #: 067600

UTSA
SALE
SALE DATE: 01/27/15
SALE TIME: 12:41
SALE AUTH: 014185

REFERENCE NUMBER: 06911875
P-CODE: 1

SALE AMT \$115.48

TIP \$24.00

TOTAL \$139.48

TIP GUIDE
15%=\$17.32 20%=\$27.89 25%=\$34.87

CHRISTOPHER A GARNES

Thank You
Please Come Again

CUSTOMER COPY

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/27/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 139.48
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 139.48

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davls, M. Workman, M. Ketchum, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, J. Charnock, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000099

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
 Bar & Grille
 218 Capitol Street
 Charleston, WV 25301
 PH: 304-343-5551
 FAX: 304-343-5552

Date: Jan28'15 11:34AM
 Card Type: Visa
 Acct #: XXXXXXXXXXXX6448
 Card Entry: SHIPED
 Trans type: PURCHASE
 Auth Code: 023075
 Check: 3846
 Check ID: JUDGES
 Server: 146 Kristyn

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/28/2015

Subtotal: 192.76

Tip: Tac.
 Total: 192.76

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 192.76
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 192.76

Signature
 I agree to pay the above total according to my card issuer agreement.
****GUEST COPY****

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, B. Benjamin, M. Workman, M. Ketchum, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/30/2015

Date: 1/30/2015 Time: 11:30:18 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Natalie
 Check Number: 195524
 Tab Number: 400
 Number Of Covers: 20
 Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 160.8
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 160.8

AMOUNT	133.83
TIP	27.00
TOTAL	160.83
Approval:	006858

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 Y. Shafer, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SERVER: Zachary M
TABLE: 678
TICKET #: 255728 02/04/2015 10:09
GUESTS: 1

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SUB TOTAL: 163.95

CONTACT PERSON Chris Garnes

TOTAL: 163.95

TELEPHONE NUMBER (304) 558-2060

CARD PAID: 163.95

FUNCTION SPONSOR Chris Garnes

GRATUITY: 32.79

LOCATION OF FUNCTION Justices' Chambers

TOTAL: 196.74

DATE(S) OF FUNCTION 02/04/2015

CARD #: XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
08/923

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>196.74</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>196.74</u>

Thanks for supporting our small business!
www.bluegrasskitchen.com

Comments? Suggestions?
email contact@bluegrasswv.com

**** Customer Copy ****

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey, B. Kayuha, S. Canterbury

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-766-6583

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TERMINAL ID: 00332776
UTSA CSH: 0213
SALE SWIPEO
BATCH: 000173 INU: 000001
Feb 10, 15 12:41
RAN: 01/23/001 AUTH: 003988
V-CODE: H

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 02/10/2015

TRN REF: 30501600141046
QUALIFICATION CODE: WPTZ
APPROVED
SALE AMT \$193.20
TIP Inc.
TOTAL 193.20
CHRISTOPHER A GARNES

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>193.20</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>193.20</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

50805
800 SMITH ST
CHARLESTON, WV 25301
304-728-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160116689
Term ID: 0928
Server ID: 6516

Sale

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 02/11/2015

VISA
XXXXXXXXXXXX8448
Entry Method: Swiped
Apprvd: Online Batch#: 000003
02/11/15 10:59:51
Invl: 00000001 Appr Code: 033259
Amount: \$ 207.78
Tip: HAC
Total: 207.78

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 207.78
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 207.78

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

***** Merchant Copy *****

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Charleston Town Center
 Cafe 4343
 Charleston, WV 25389
 3044004638

2/12/2015 10:28:12 AM
 Order 524984 Cashier: Arielle

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION State Capitol - East Wing
 DATE(S) OF FUNCTION 02/12/2015

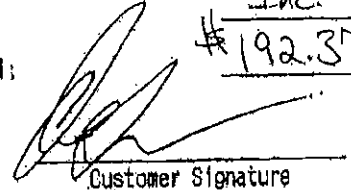
SubTotal 160.31
 Tax 0.00
 Tax exempt ID 55600076
 Gratuity 32.06
 Total 192.37

Visa 192.37
 Acct:XXXXXXXX844
 AuthCode:034925
 Trans#:0

TIP:

Total:

JAC
\$ 192.37



Customer Signature
 I Agree to pay above total amount according to the card issuer agreement.

Your Order Number is: 584

***** Merchant Copy *****

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 192.37
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 192.37

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

Judges: Evans, Hutchinson, Swape, Wilkes, Johnson, Aslop, O'Briant, Clawges, Tabit
 Tina and Loetta

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 02/24/2015

Date: 2/24/2015 Time: 11:29:00 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 196695
 Tab Number: 100
 Number Of Covers: 23
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>191.72</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>191.72</u>

AMOUNT	159.77
TIP	<u>31.95</u>
TOTAL	<u>191.72</u>
	Approval: 090906

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BRIDGE ROAD BISTRO

Date: 2/25/2015 Time: 11:20:58 AM

Status: Approved

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Card Type: Visa
 Card Number: XXXXXXXXXXXXX8448

CONTACT PERSON Chris Garnes

Expiration Date: X/XX/XXXX

TELEPHONE NUMBER (304) 558-2060

Server Name: Victoria

FUNCTION SPONSOR Chris Garnes

Check Number: 214621

LOCATION OF FUNCTION Justices' Chambers

Tab Number: 100

Number Of Covers: 16

Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10

Card Owner: garnes/christopher a

DATE(S) OF FUNCTION 02/25/2015

AMOUNT 197.70

Gratuity 39.54

Total 237.24

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>237.24</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>237.24</u>

Approval: 012790

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, B. Kayuha, R. Perry, C. Garnes, H. Dalley, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

50805
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7545

Merchant ID: 160116689
 Term ID: 0929
 Server ID: 3363

Sale

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 02/26/2015

VISA
 XXXXXXXXXXXXX0440
 Entry Method: Swiped
 Approved Online Batch#: 00000
 02/26/15 10:53:1
 Inv#: 00000001 Appr Code: 05332
 Amount: \$ 189.54
 Tip: TMC
 Total: 189.54

Customer Copy
 THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 189.54
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 189.54

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

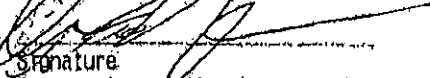
STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
 Bar & Grille
 218 Capitol Street
 Charleston, WV 25301
 PH: 304-343-5551
 FAX: 304-343-5552

Date: Mar 10 '15 11:49AM
 Card Type: Visa
 Acct #: XXXXXXXXXXXX8448*
 Card Entry: KEYED
 Trans Type: PURCHASE
 Auth Code: 090286
 Check: 1866
 Check ID: SUPREME COURT
 Server: 1001 AM Left

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 03/10/2015

Subtotal: 170.80
 Tip: 20.00
 Total: 190.80


 Signature

I agree to pay the above total according to my card issuer agreement.
 GUEST COPY

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 190.80
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 190.80

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, T. McHugh, J. Stover, R. Melvin,
 V. Shafer, V. Summers, J. Gundy, A. Angus, B. Kayuha, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 03/11/2015

Date: 3/11/2015 Time: 11:30:35 AM

Status: Approved

Card Type: Visa
Card Number: XXXXXXXXXXXX8448
Expiration Date: X/XX/XXXX
Server Name: Tasha
Check Number: 197379
Tab Number: 200
Number Of Covers: 31
Persons: 1, 2, 3, 4, 5, 6, 7, 8,
9, 10, 11, 12, 13, 14
Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>225.25</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>225.25</u>

AMOUNT	# 187.71
TIP	# <u>37.54</u>
TOTAL	# <u>225.25</u>
Approval: 011729	

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form): *

R. Davis, M. Workman, M. Ketchum, A. Loughry, T. McHugh, J. Stover, R. Melvin,
V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey, B. Kayuha, R. Perry

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000110

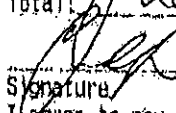
STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
 Bar & Grille
 218 Capitol Street
 Charleston, WV 25301
 PH: 304-343-5551
 FAX: 304-343-5552

Date: Apr07'15 11:43AM
 Card Type: Visa
 Acct #: XXXXXXXXXXXX8448
 Card Entry: SWIPE
 Trans Type: PURCHASE
 Auth Code: 095902
 Check: 2396
 Check ID: WV STATE
 Server: 1001 AM Left

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/07/2015

Subtotal: 172.11
 Tip: 34.42
 Total: 206.53

Signature: 
 I agree to pay the above total according to my card issuer agreement.
 GUEST COPY

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>206.53</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>206.53</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, A. Ferguson, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Ganes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Ganes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/08/2015

Date: 4/8/2015 Time: 11:22:34 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 188784
 Tab Number: 100
 Number Of Covers: 21
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11
 Card Owner: ganes/christopher a

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>168.07</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>168.07</u>

AMOUNT	140.08
TIP	<u>28.01</u>
TOTAL	<u>168.07</u>
	Approval: 090257

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson,
 V. Shafer, B. Kayuha, C. Ganes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BRIDGE ROAD BISTRO

Check #: 217329 Date: 4/9/2015

Server: 302 - Travis

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/09/2015

Food Sub-Total	186.41
CHECK SUB-TOTAL	186.41
Sales Tax	0.00
Tip	37.29
TOTAL	223.70
Visa	223.70
Total Amount Paid	223.70
	=====

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>223.70</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>223.70</u>

Amount due 0.00

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, A. Angus, S. Canerbury

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGIN
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG.# Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/22/2015

Date: 4/22/2015 Time: 11:41:54 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 198396
 Tab Number: 100
 Number Of Covers: 26
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12, 13, 14
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>203.97</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>203.97</u>

AMOUNT	169.97
TIP	<u>34.00</u>
TOTAL	<u>203.97</u>
	Approval: 061783

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, T. McHugh, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGIN
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
 Bar & Grille
 218 Capitol Street
 Charleston, WV 25301
 PH: 304-343-5551
 FAX: 304-343-5562

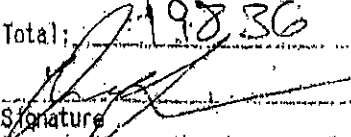
Date: May/2/15 11:55AM
 Card Type: Visa
 Acct #: XXXXXXXXXXXX8448
 Card Entry: SHIPED
 Trans Type: PURCHASE
 Auth Code: 037661
 Check: 3482
 Check ID: SUPREME
 Server: 1001 AM Left

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 05/12/2015

Subtotal: 165.30
 Tip: 33.06
 Total: 198.36

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 198.3
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 198.36

Signature: 
 I agree to pay the above total according to my card issuer agreement.
****GUEST COPY****

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, C. Games, J. Gundy, A. Angus, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

SOMUS
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Merchant ID: 160115689
Term ID: 0928
Server ID: 6515

Sale

VISA
XXXXXXXXXXXX8448
Entry Method: Swiped
Apprvd: Online Batch#: 000001
06/09/15 10:05:05
Inv#: 00000001 Appr Code: 002771
Amount: \$ 154.68
Tip:
Total: 154.68

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 06/09/2015

Customer Copy
THANK YOU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>154.68</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>154.68</u>

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
R. Davis, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin,
V. Shafer, B. Kayuha, C. Garnes, J. Gundy, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

south hills market
and café

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 06/10/2015

Date: 6/10/2015 Time: 11:54:23 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 201740
 Tab Number: 400
 Number Of Covers: 16
 Persons: 1, 2, 3, 4, 5, 6, 7, 8
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>125.51</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>125.51</u>

AMOUNT	104.51
TIP	<u>2.00</u>
TOTAL	<u>125.51</u>
	Approval: 027411

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, C. Garnes,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

The Block Restaurant & Wine Cellar
201 Capital Street
Charleston, WV 25301
ph (681) 265-9074

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 06/15/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>309.60</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>309.60</u>

TABLE: Jamie #15 - 6 Guests
 Server: Jamie
 6/15/2015 11:59:34 AM
 Sequence #: 0000010
 ID #: 0057818

ITEM	QTY	PRICE
Open Food	1	\$258.00
Subtotal		\$258.00
Grand Total		\$258.00

Credit Purchase
 Name : GARNES/CHRISTOPHER A
 CC Type : VISA
 CC Num : XXXX XXXX XXXX 8448
 Approval : 073531
 Server : Jamie
 Ticket Name : Jamie #15

Payment Amount: \$258.00

Tip: 51.60
 Total: 309.60

x _____
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thank you for visiting!

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, T. Evans, D. Swope, J. Stover,
S. Canterbury, J. Stevenson, R. Melvin, V. Shafer, J. Charnock, C. Garnes, J. Gundy, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (681) 265-9074

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

TABLE: Take Out #23 - 6 Guests
 Server: Jacqui
 6/16/2016 11:21:42 AM
 Sequence #: 0000002
 ID #: 0067898

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 06/16/2015

ITEM	QTY	PRIC
Open Food Court	1	\$217.0
Subtotal		\$217.0
Total Taxes		\$0.0
Grand Total		\$217.0

Credit Purchase
 Name : GARNES/CHRISTOPHER A
 CC Type : VISA
 CC Num : xxxx xxxx xxxx 8448
 Approval : 034930
 Server : Jacqui
 Ticket Name : Take Out #23

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 260.40
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 260.40

Payment Amount: \$217.0

Tip: 43.40
 Total: 260.40

X _____
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thank you for visiting!

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, J. Stevenson, R. Melvin,
 V. Shafer, S. Canterbury, C. Garnes, J. Gundy, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/02/2015

Date: 9/2/2015 Time: 11:44:50 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 205255
 Tab Number: 100
 Number Of Covers: 29
 Persons: 1, 2, 3, 4, 5, 6, 7, 8
 9, 10, 11, 12, 13
 Card Owner: garnies/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>231.49</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>231.49</u>

AMOUNT	195.49
TIP	<u>36.00</u>
TOTAL	<u>231.49</u>
	Approval: 036136

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnock,
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (681) 265-9074

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/10/2015

TABLE: Supreme To Go - 14 Guests
 Server: Heather P
 9/10/2015 11:43:01 AM
 Sequence #: 0000001
 IO #: 0068707

ITEM	QTY	PRICE
Subtotal		\$188.00
Automatic Service Fee Gratuity		\$35.64
Grand Total		\$233.64
Amount Due:		\$233.64

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>233.64</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>233.64</u>

Credit Purchase
 Name : GARNES/CHRISTOPHER A
 CC Type : VISA
 CC Num : xxxx xxxx xxxx 8448
 Approval : 076204
 Server : Heather P
 Ticket Name : Supreme To Go
 Payment Amount: \$233.64
 (Includes \$35.64 from 18% Automatic Service Fee Gratuity)

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Additional Tip: _____
 Total: 233.64

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnock
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, S. Canterbury

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

by: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

by: _____
 AGENCY HEAD SIGNATURE

DATE

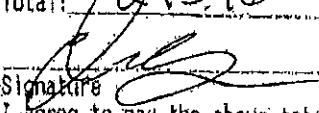
STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
 Bar & Grille
 218 Capitol Street
 Charleston, WV 25301
 PH: 304-343-5551
 FAX: 304-343-5552

Date: Sep18'15 12:14PM
 Card Type: Visa
 Acct #: XXXXXXXXXXXX8448
 Card Entry: SWIPED
 Trans Type: PURCHASE
 Auth Code: 833989
 Check: 4360
 Check ID: COURT
 Server: 1002 AM Right

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/16/2015

Subtotal: 203.30
 Tip: 40.60
 Total: 243.96

Signature: 
 I agree to pay the above total according to my card issuer agreement.
 GUEST COPY

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 243.9
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 243.96

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 09/21/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>199.74</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>199.74</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, S. Canterbury

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

FUNCTION REPRESENTATIVE'S SIGNATURE

AGENCY HEAD SIGNATURE

DATE

DATE

SONDS
800 SMITH ST
CHARLESTON, WV 25301
304 720-7646

Merchant ID: 160116699
Term ID: 0928
Server ID: 5516

Sale

VISA
XXXXXXXXXXXX8448
Entry Method: Swiped
Apprvd: Online Batch#: 000003
09/21/15 10:01:03
Inv#: 00000002 Appr Code: 091636
Amount: \$ 185.34
Tip: Inc.
Total: 185.34

Customer Copy
THANK YOU

SONDS
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646

Merchant ID: 160116699
Term ID: 0928
Server ID: 5516

Sale

VISA
XXXXXXXXXXXX8448
Entry Method: Swiped
Apprvd: Online Batch#: 000003
09/21/15 10:28:43
Inv#: 00000005 Appr Code: 013989
Amount: \$ 14.40
Tip: Inc.
Total: 14.40

Customer Copy
THANK YOU

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

Date: 9/22/2015 Time: 11:50:27 AM

FUNCTION SPONSOR Chris Garnes

Status: Approved

LOCATION OF FUNCTION Justices' Chambers

Card Type: Visa

Card Number: XXXXXXXXXXXX8448

Expiration Date: X/XX/XXXX

Server Name: Tasha

Check Number: 206113

Tab Number: 400

Number Of Covers: 30

Persons: 1, 2, 3, 4, 5, 6, 7

9, 10, 11, 12, 13, 14, 15

Card Owner: garnes/christopher

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 248.32

MEETING ROOM \$ _____

EQUIPMENT RENTAL \$ _____

LODGING \$ _____

OTHER/ \$ _____

OTHER/ \$ _____

TOTAL \$ 248.32

AMOUNT 206.93

TIP 41.39

TOTAL 248.32

Approval: 010036

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok

V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey, D. Frye

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BRIDGE ROAD BTRCRO

Date: 9/23/2015 Time: 11:52:33 AM

Status: Approved

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Card Type: Visa

CONTACT PERSON Chris Garnes

Card Number: XXXXXXXX434044

TELEPHONE NUMBER (304) 558-2060

Expiration Date: X/XX/XXXX

FUNCTION SPONSOR Chris Garnes

Server Name: Lerra

LOCATION OF FUNCTION Justices' Chambers

Check Number: 226926

Tab Number: 200

Number of Covers: 14

Persons: 1, 2, 3, 4, 5, 6, 7, 8,

9, 10, 11, 12, 13, 14, 15

Card Drawn: Manual Exp

DATE(S) OF FUNCTION 09/23/2015

AMOUNT 296.99

Gratuity 47.96

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>304.55</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____

Total 304.55

Approval: 069467

CUSTOMER COPY

TOTAL \$ 304.55

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dalley, D. Frye

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

Date: 10/6/2015 Time: 11:51:46 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
Card Number: XXXXXXXXXXXX0440
Expiration Date: X/XX/XXXX
Server Name: Alison
Check Number: 206682
Tab Number: 100
Number Of Covers: 33
Persons: 1, 2, 3, 4, 5, 6, 7,
9, 10, 11, 12, 13, 14, 15
Card Owner: garnes/christopher a

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 10/06/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>234.38</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>234.38</u>

AMOUNT	206.38
TIP	<u>28.00</u>
TOTAL	<u>234.38</u>
Approval: 062229	

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
C. Wilkes, V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/07/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>203.20</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>203.20</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of all more must accompany the form):

R. Davis, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dalley,

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25301
 304-766-6583

TERMINAL ID. 1 06332776
 VISA CSH: 9012
 *****440 EXP: 11/15 SUTPED
 SALE
 BATCH: 000339 INV: 000002
 Oct 07, 15 11:48
 RR#: 03391002 AUTH: 036384
 U-CODE: N

TRN REF#: 30528056697267
 UNLICATION CODE: 1629

APPROVED
 SALE AMT \$193.20
 TIP Inc
 TOTAL 193.20

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25301
 304-766-6583

TERMINAL ID. 1 06332776
 VISA CSH: 9012
 *****440 EXP: 11/15 SUTPED
 SALE
 BATCH: 000339 INV: 000003
 Oct 07, 15 12:16
 RR#: 03391001 AUTH: 073471
 U-CODE: N

TRN REF#: 585280583644149
 UNLICATION CODE: 0006

APPROVED
 SALE AMT \$7.00
 TIP 3.00
 TOTAL 10.00

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

50HOS
 900 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

Merchant ID: 160115689
 Term ID: 0928
 Server ID: 1639

Sale

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/14/2015

VISA
 XXXXXXXXXXXXXXX0448
 Entry Method: Swipe
 Approved: Online Batch#: 0000
 10/14/15 09:51:
 Inv#: 00000001 Appr Code: 0256
 Amount: \$ 246.
 Tip: 4.00
 Total: 246.10

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>246.10</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>246.10</u>

Customer Copy
 THANK YOU

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey, B. Kayuqa

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

south hills market
and café

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Date: 11/3/2015 Time: 11:33:54 AM

CONTACT PERSON Chris Garnes

Status: Approved/Post

TELEPHONE NUMBER (304) 558-2060

Card Type: Visa
Card Number: XXXXXXXXXXXX8440

FUNCTION SPONSOR Chris Garnes

Expiration Date: X/XX/XXXX

LOCATION OF FUNCTION Justices' Chambers

Server Name: Tasha

DATE(S) OF FUNCTION 11/03/2015

Check Number: 207830

Tab Number: 100

Number Of Covers: 31

Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 245.56
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 245.56

AMOUNT	204.56
TIP	41.00
TOTAL	245.56
	Approval: 100000

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/04/2015

PATERNO AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25301
304-766-6583

TERMINAL ID: A0032776
VISA CSH: 5864
SALE SUITE0
DATE: 11/04/15 INU: 000001
TIME: 12:42
AUTH: 071105
U-CODE: 11

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>177.60</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>177.60</u>

IGN REF#: 305109599410027
VALIDATION CODE: 6834
APPROVED
SALE AMT \$177.60
TIP 5.00
TOTAL \$177.60
CHRISTOPHER A GARNES

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
V. Shafer, C. Garnes, J. Gundy, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SCHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301

11/16/2015 12:12:1

CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX94
 Chip Card: CIFI VISA
 AID: A00000000310
 ATC: 00
 TC: EF26D41AF37FD6
 SEQ #: _____
 Batch #: _____
 INVOICE SERVER 55
 Approval Code: 0644
 Entry Method: Chip R:
 Mode: Issuer - PIN Bypass

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 11/16/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>191.76</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>191.76</u>

PRE-TIP AMT \$191.
 TIP Inc.
 TOTAL AMOUNT 191.76

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, S. Canterbury

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (681) 265-9074

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/17/2015

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>243.48</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>243.48</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. St
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, B. Kayuha

TABLE: Supreme Court - 12 Guests
 Server: Daniel M.
 11/17/2015 11:24:00 AM
 Sequence #: 0000003
 ID #: 0075056

ITEM	QTY	PRC
Trio Meatballs	1	\$12.
Goat Cheese Brulee	1	\$10.
- Add: Marcona Encrusted C		\$6.
- Justice Workman		
Portobello Napoleon	1	\$14.
- Justice Davis		
The New Salad In Town	1	\$10.
- Justice Ketchum		
The Block Burger	(20)	\$14.00
House Salad	1	\$8.0
- Add: Marcona Encrusted C		\$6.0
- Justice Benjamin		
Eggplant Panini	1	\$8.0
- Justice Loughry		
Marcona Chicken Salad	1	\$12.0
- Jennifer		
House Salad	1	\$8.0
- Add: Corn		
- Jeanne		
Side: Brussel Sprout	1	\$3.0
House Salad	1	\$8.0
The Block Burger	1	\$14.0
- Ruth		
Hummus Trio	1	\$10.0
- Vial		

Total: 243.48

x _____
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

Thank you for visiting!

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 12/09/2015

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301
 12/09/2015 11:28:04
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXXXXX18
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0006
 TC: 42268AE0EA60ACSE
 SEQ #: 1
 Batch #: 77
 INVOICE 1
 SERVER 1638
 Approval Code: 040820
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>177.84</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>177.84</u>

PRE-TIP AMT \$148.20
 TIP 20% 29.64
 TOTAL AMOUNT 177.84

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Benjamin, R. Melvin,
 C. Garnes, J. Gundy, A. Angus, S. Canterbury, S. Green

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

JAN - DEC 2016

**MEALS PURCHASED
FOR JUSTICES & STAFF**

88--000135

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

**south hills market
and café**

CONTACT PERSON Chris Garnes

SOUTH HILLS

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

Date: 1/5/2016 Time: 11:30:20 AM

LOCATION OF FUNCTION Justices' Chambers

Status: Approved

DATE(S) OF FUNCTION 01/05/2016

Card Type: Visa
Card Number: XXXXXXXXXXXX8448
Expiration Date: X/XX/XXXX
Server Name: Tasha
Check Number: 210201
Tab Number: 100
Number Of Covers: 27
Persons: 1, 2, 3, 4, 5, 6, 7,
9, 10, 11, 12, 13
Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>217.18</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>217.18</u>

AMOUNT	180.18
TIP	<u>37.00</u>
TOTAL	<u>217.18</u>
Approval: 006330	

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, B. Kayuha

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports
 Bar & Grille
 218 Capitol Street
 Charleston, WV 25301
 PH: 304-343-5551
 FAX: 304-343-5552

Date: Jan12'16 12:39PM
 Card Type: Visa
 Acct #: XXXXXXXXXXXX0440
 Card Entry: SWIPED
 Trans Type: PURCHASE
 Auth Code: 064451
 Check: 3118
 Check ID: SUPREME COURT JU
 Server: 1001 AM Left

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/12/2016

Subtotal: 227.65
 Tip: 32.00
 Total: 259.65

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 259.65
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LOGGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 259.65

Signature
 I agree to pay the above total
 according to my card issuer
 agreement.
****GUEST COPY****

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Hutchison, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301

01/13/2016

11:31:57

CREDIT CARD
 VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/13/2016

Card # XXXXXXXXXXXXXXX8418
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0008
 TC: 09AF15F4979380DE
 SEQ #: 1
 Batch #: 127
 INVOICE 1
 SERVER 1638
 Approval Code: 046927
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 243.84
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 243.84

PRE-TIP AMT \$203.20
 TIP 40.64
 TOTAL AMOUNT 243.84

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

LOLAS PIZZA
 1038 BRIDGE RD
 CHARLESTON, WV 25314
 304-343-3652

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/19/2016

TERMINAL NO.: 0055600002154345X
 MERCHANT #: 00215434
 VISA
 4418 EXP: **/**
 SALE
 RECORD 1 INU: 000001
 DATE: Jan 19, 16 TIME: 11:12
 BATCH: 000034
 TRN: 119162146
 AUTH: 04341
 VISA TRN ID: 466019589054079
 APPROVAL: 043411
 BASE \$141.75
 TIP \$29.00
 TOTAL \$170.75

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 170.75
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 170.75

CHRISTOPHER A GARNES

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGIN
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BLOSSOM DAIRY
 904 QUARRIER ST
 CHARLESTON, WV 25301
 ph (304) 345-9999

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/20/2016

We hope you have a BLOSSOM day!!!!
 Tickets on sale for MYSTERY
DINNER last Thur, of
 the
 month

TABLE: Valerie #4 - 1 Guest
 Server: Valerie
 1/20/2016 11:28:24 AM
 Sequence #: 0000001
 ID #: 0061182

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>154.92</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>154.92</u>

ITEM	QTY	PR
Name	:	GARNES/CHRISTOPHER A
CC Type	:	VISA
CC Num	:	xxxx xxxx xxxx 8448
Approval	:	1025983
Server	:	Valerie
Ticket Name	:	Valerie #4

Payment Amount: \$128.00

Tip: 26.00
 Total: 154.92

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

x
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/26/2016

Date: 1/26/2016 Time: 11:28:08 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 210921
 Tab Number: 100
 Number Of Covers: 28
 Persons: 1, 2, 3, 4, 5, 6, 7,
 8, 10, 11, 12, 13
 Card Owner: garnes/christopher e

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>214.53</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>214.53</u>

AMOUNT	177.53
TIP	<u>37.00</u>
TOTAL	<u>214.53</u>

Approval: 047913

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dalley,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000141

STATE OF WEST VIRGIN

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

The Block Restaurant & Wine Cellar
201 Capital Street
Charleston, WV 26301
ph (681) 265-9074

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/08/2016

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>216.0</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>216.0</u>

TABLE: Take Out #7 - 12 Guests
Server: Heather P
2/8/2016 11:41:19 AM
Sequence #: 0000001
ID #: 0081204

ITEM	QTY	PRICE
Grand Total		\$180.00
Amount Due:		\$180.00

Credit Purchase
Name : GARNES/CHRISTOPHER A
CC Type : VISA
CC Num : xxxx xxxx xxxx 8448
Approval : 032315
Server : Heather P
Ticket Name : Take Out #7

Payment Amount: \$180.00
Tip: 36.00
Total: 216.00

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

x _____
TSYS
I agree to pay the amount shown above,

Thank you for visiting!

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 02/09/2016

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301
 02/09/2016 11:21:30
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXXXXX8118
 Chip Card: CITI VISA
 AID: A000000031010
 ATC: 0009
 TC: ZEF7294A37CE767A
 SEQ #: 1
 Batch #: 166
 INVOICE 1
 SERVER 5515
 Approval Code: 038934
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>247.32</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>247.32</u>

PRE-TIP AMT \$247.32
 TIP Inc.
 TOTAL AMOUNT 247.32

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy, A. Angus, H. Dailey, B. Kayuha

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 02/10/2016

**south hills market
 and café**
 SOUTH HILLS

Date: 2/10/2016 Time: 11:56:35 AM

Status: Approved

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 218.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 218.00

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Stevie
 Check Number: 211851
 Tab Number: 600
 Number Of Covers: 19
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12, 13, 14
 Card Owner: GARNES/CHRISTOPHER A

AMOUNT	181.00
TIP	37.00
TOTAL	218.00

Approval: 093024

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, A. Angus, H. Dalley,

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/22/2016

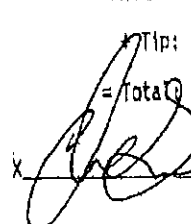
Take Out

Total	\$123.88
Credit Card	Keyed
Visa	XXXXXXXX8448
Time	11:58 AM
Authorization	Approved
Approval Code	081761
Check ID	224700500008694
Payment ID	Qr105Xc7L

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 148.88
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 148.88

Amount: \$123.88
 Tip: 25.00
 = Total 148.88



Customer Copy

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thanks for visiting Adelphia Sports Bar & Grille
Please come again

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Benjamin, R. Melvin, J. Charnok
 C. Bowman, V. Shafer, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000145

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 02/23/2016

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 180.90
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 180.90

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Ci
 V. Shafer, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: _____
 AGENCY HEAD SIGNATURE

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25309
 3042055482
 Cashier: Marla F
 Transaction 102090
 Total \$142.80
 CREDIT CARD AUTH \$142.80
 VISA 8448
 Tip Inc.
 Total (42) 20
 Retain this copy for statement validation

23-Feb-2016 11:45:16A
 \$142.80 | Method: EMV
 VISA CREDIT XXXXXXXXXXXXXB448
 Ref #: 605400005133
 Auth #: 054577
 MID: 215226135998
 AID: A0000000031010
 AthNtwkNm: VISA
 SIGNATURE VERIFIED



57B622GYJ0FF0

SOHO'S
 800 SMETH ST
 CHARLESTOWN, WV 25301
 02/23/2016 11:26:02
 CREDIT CARD
 VISA SALE

Card #	XXXXXXXXXXXX8418
Chip Card:	CITI VISA
AID:	A0000000031010
ATC:	000A
TC:	6D16HA1195EC94C
SEQ #:	2
Batch #:	188
INVOICE	2
SERVER	5515
Approval Code:	080299
Entry Method:	Chip Read
Mode:	Issuer - PIN Bypassed

PRE-TIP AMT \$38.10
 TIP Inc.
 TOTAL AMOUNT 38.10

Agency Ref. # _____

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills marke
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/24/2016

SOUTH HILLS

Date: 2/24/2016 Time: 11:56:11 AM

Status: Approved

Card Type: Visa
Card Number: XXXXX XXXXXX 440
Expiration Date: X/XX/XXXX
Server Name: Tasha
Check Number: 212261
Tab Number: 600
Number Of Covers: 20
Persons: 1, 2, 3, 4, 5, 6, 7,
9, 10, 11, 12, 13, 14
Card Owner: garnes/christopher c

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>223.48</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>223.48</u>

AMOUNT 185.48
TIP 38.00
TOTAL 223.48

Approval: 063686

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000147

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 03/08/2016

Take Out
 Court
 Server: Elisha
 Check #1
 Tax Exempt
 Subtotal
 Total \$170.
 Credit Card
 Visa
 Time
 Authorization
 Approval Code
 Check ID
 Payment ID

03/07/16 78:30
 SWIP
 XXXXXXXX84
 11:37
 APPROV
 02061
 224700500001991
 GRP32ed

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 205.80
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 205.80

Amount: \$170.00
 + Tip: 35.00
 = Total: 205.80

[Signature]
 CHRISTOPHER A GARNES

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

Thanks for visiting Adelphia Sports Bar & Grille
 Please come again

Customer Copy

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/13/2016
05/08/16

Date: 3/8/2016 Time: 11:31:40 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 212785
 Tab Number: 100
 Number Of Covers: 21
 Persons: 1, 2, 3, 4, 5, 6, 7, 9, 10
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>171.75</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>171.75</u>

AMOUNT 141.75
 TIP 30.00

TOTAL 171.75
 Approval: 042563

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301

03/09/2016 11:55:32
 CREDIT CARD
 VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 03/09/2016

Card # XXXXXXXXXXXXX0948
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0010
 TC: 3898E5763F586009
 SEQ #: 1
 Batch #: 211
 INVOICE 1
 SERVER 1638
 Approval Code: 059477
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 222.28
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 222.28

PRE-TIP AMT \$185.24
 TIP _____
 TOTAL AMOUNT 222.28

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

Date: 3/15/2016 Time: 11:30:29 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
Card Number: XXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 03/16/2016

Server Name: Tasha

Check Number: 213079

Tab Number: 100

Number Of Covers: 23

Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>194.93</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>194.93</u>

AMOUNT	161.93
TIP	<u>33.00</u>
TOTAL	<u>194.93</u>

Approval: 012887

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301

03/23/2016 11:35:27

CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX8448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0615
 TC: A0CEJ20C18C8CF2F
 SEQ #: 1
 Batch #: 234
 INVOICE 1
 SERVER 1638
 Approval Code: 085052
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 03/23/2016

PRE-TIP AMT \$182.65
 TIP 36.5
 TOTAL AMOUNT 219.18

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>219.18</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>219.18</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Ketchum, A. Loughry, T. Keadle, J. Hatcher, J. Mazzone, T. Evans, J. Stover, R. Melvin,
 J. Holliday, V. Shafer, C. Garnes, J. Gundy, H. Dalley,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BLOSSOM DAIRY
 904 QUARRIER ST
 CHARLESTON, WV 26301
 ph (304) 345-9999

We hope you have a BLOSSOM day!!!!
 Tickets on sale for **MYSTERY**
DINNER
 THEATER **last Thur. of**
 the **month**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/04/2016

TABLE: Jb - 10 Guests
 Server: Tiffany R
 4/4/2016 11:41:05 AM
 Sequence #: 0000001
 ID #: 0065258

ITEM	QTY	PRIC
Grand Total		\$96.33
This Payment		\$96.33
Tip:		\$20.00
Total Charged:		\$116.33
Paid by		post

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>116.33</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>116.33</u>

Credit Purchase
 CC Type :VISA
 CC Num 1xxxx xxxx xxxx 8448
 Approval :023859
 TSYS

Thank you for visiting! Come back soon!!!
 Ask server for details on **MYSTERY**
DINNER
THEATER!!!

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000154

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

Date: 4/5/2016 Time: 11:35:16 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
Card Number: XXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 04/05/2016

Server Name: Stavie

Check Number: 213923

Tab Number: 11

Number Of Covers: 25

Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>206.95</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>206.95</u>

AMOUNT	<u>171.95</u>
TIP	<u>35.00</u>

TOTAL 206.95
Approval: 003923

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
V. Shafer, C. Garnes, J. Gundy, B. Kayuha, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 600 SMITH ST
 CHARLESTOWN, WV 25301

04/06/2016 11:41:13

CREDIT CARD
 VISA SALE

Card # XXXXXXXXXX08448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0018
 TC: A98BF94B85881585
 SEQ #: 1
 Batch #: 256
 INVOICE: 1
 SERVER: 1638
 Approval Code: 054064
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/06/2016

PRE-TIP AMT \$200.80
 TIP 40.00
 TOTAL AMOUNT 240.80

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 240.80
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 240.80

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, B. Kayuha, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301

04/11/2016 11:43:22

CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX0148
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0019
 TC: 5205865AB807DC29
 SEQ #: 1
 Batch #: 263
 INVOICE 1
 SERVER 5515
 Approval Code: 034094
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/11/2016

PRE-TIP AMT \$54.24
 TIP Inc
 TOTAL AMOUNT 54.24

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 54.24
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 54.24

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Ketchum, R. Perry, D. O'Hanlon

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 04/18/2016

5061170
 ELLENS HOMEPLACE ICE CR
 225 CAPITOL ST
 CHARLESTON, WV 25301-2205
 304-343-6488

Inv # 101 002 Ref #: 004

Sale

XXXXXXXXXXXX448

VISA Entry Method: Swiped

04/18/16 11:33:53

Inv #: 000005 Appr Code: 012632

Approval: Online Batch#: 000523

Total: \$ 27.61

Customer Copy
 THANK YOU!

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 27.61
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____

TOTAL \$ 27.61

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, J. Stover

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000159

Adelphia Sports Bar & Grille
 210 Capitol Street
 Charleston, WV 25301

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Take Out

Justice

 Total \$131.10

 Total \$131.10

Credit Card Swiped
 Visa XXXXXXXXX8448
 Time 11:36 AM

Authorization Approved
 Approval Code 055162
 Check ID 2247005000053507
 Payment ID n99shpct1

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 04/18/2016

Amount: \$131.10

+ Tip: 27.00

Total: 158.10

[Signature]
 CHRISTOPHER A GARNES

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>158.1</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>158.1</u>

Customer Copy

Thanks for visiting Adelphia Sports Bar & Grille
 Please come again

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, B. Benjamin, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Games, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills marke
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/19/2016

SOUTH HILLS

Date: 4/19/2016 Time: 11:43:44 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Stevie
 Check Number: 214505
 Tab Number: 600
 Number Of Covers: 17
 Persons: 1, 2, 3, 4, 5, 6, 7,
 9, 10, 11, 12, 13
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>218.95</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>218.95</u>

AMOUNT	181.95
TIP	<u>37.00</u>
TOTAL	<u>218.95</u>
Approval:	082228

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Chamok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000161

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SERVER: amanda ■
TABLE: 673
TICKET #: 294081 04/20/2016 10:23
GUESTS: 1

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 04/20/2016

SUB TOTAL: 90.75
TOTAL: 90.75
CARD PAID: 90.75
GRATUITY: 20.00
TOTAL: 110.75

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 154.95
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 154.95

CARD #: XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
042676

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

SERVER: amanda ■
TABLE: 31
TICKET #: 294088 04/20/2016 11:58
GUESTS: 1

PURPOSE/JUSTIFICATION OF FUNCTION:
Conference

FUNCTION ATTENDEES (Must list Individual names unless for a group of 20 or more.
more must accompany the form):
M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melh
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey,

SUB TOTAL: 37.20
TOTAL: 37.20
CARD PAID: 37.20
GRATUITY: 7.00
TOTAL: 44.20

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

CARD #: XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
074530

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

BRIDGE ROAD BISTRO

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/27/2016

Date: 4/27/2016 Time: 11:36:07 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX9440
 Expiration Date: X/XX/XXXX
 Server Name: Lorra
 Check Number: 240040
 Tab Number: 200
 Number Of Covers: 1
 Persons: 1, 2, 3, 4, 5, 6, 7,
 9, 10, 11, 12, 13, 14
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>255.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>255.00</u>

AMOUNT	211.98
Gratuity	43.02
Total	255.00

Approval: 017814

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy, B. Kayuha, H. Dailey, J. Alsop

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000163

BRIDGE ROAD BISTRO

Date: 4/28/2016 Time: 12:08:04 PM

Status: Approved/Refund

Card Type: Visa
Card Number: XXXXXXXXXXXX8448
Expiration Date: X/XX/XXXX
Server Name: CATERING
Check Number: 240104
Tab Number:
Number Of Covers: 1
Persons: 1
Card Owner: Manual Ent

AMOUNT -39.31
TIP _____
TOTAL _____
Approval:

CUSTOMER COPY

BRIDGE ROAD BISTRO

Check #: 240104 Date: 4/28/2016

Server: 100 - CATERING

CHECK SUB-TOTAL	-39.31
Sales Tax	0.00
TOTAL	-39.31
Visa	-39.31
Total Amount Paid	== -39.31 ==
Amount due	0.00

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SONO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301

05/16/2016 11:39:17

CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 001F
 TC: E7AF8A0F0DD9689F
 SEQ #: 1
 Batch #: 318
 INVOICE 1
 SERVER 5515
 Approval Code: 067076
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 05/16/2016

PRE-TIP AMT \$163.38

TIP Inca

TOTAL AMOUNT 163.38

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 163.38
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 163.38

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000165

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 05/17/2016

Date: 5/17/2016 Time: 11:37:56 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Madeline
 Check Number: 215691
 Tab Number: 100
 Number Of Covers: 24
 Persons: 1, 2, 3, 4, 5, 6, 7, 8
 9, 10, 11, 12, 13, 14
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>242.45</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>242.45</u>

AMOUNT	201.45
TIP	<u>41.00</u>
TOTAL	<u>242.45</u>
	Approval: 011248

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25309
3042055482

Cashier: Mindy F

Transaction 104364

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 05/18/2016

Total \$170.40

CREDIT CARD AUTH VISA 8448 \$170.40

Tip Inc.

Total 170.40

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 170.40
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 170.40

18-May-2016 11:44:25A
\$170.40 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 613900010612
Auth #: 045790
MID: 215226185998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED



S0190NVXWVW1M

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
V. Shafer, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000167

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Games

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Games

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 06/02/2016

**south hills mark
and café**

SOUTH HILLS

Date: 6/2/2016 Time: 11:37:09 AM

Status: Approved

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>187.95</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>187.95</u>

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Madeline
 Check Number: 216340
 Tab Number: 100
 Number Of Covers: 22
 Persons: 21
 Card Owner: games/christopher

AMOUNT 155.98

TIP 32.00

TOTAL 187.95

Approval: 021923

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more, more must accompany the form):

R. Davis, M. Ketohum, A. Loughry, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Games, J. Gundy, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 06/13/2016

SOHO'S
 800 SMITH ST
 CHARLESTOWN, WV 25301
 06/13/2016 11:27:57
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXX0948
 Chip Card: CITI VISA
 AID: A000000031010
 ATC: 0024
 TC: FCBE09E37BAB38F3
 SEQ #: 1
 Batch #: 361
 INVOICE
 SERVER 3363
 Approval Code: 049459
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>195.96</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>195.96</u>

PRE-TIP AMT \$195.96
 TIP Inc.
TOTAL AMOUNT 195.96

PURPOSE/JUSTIFICATION OF FUNCTION: CUSTOMER COPY
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills marke
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 06/14/2016

Date: 6/14/2016 Time: 11:24:46 AM

Status: Approved

Card Type: Visa

Card Number: XXXXXXXXXXXX8448

Expiration Date: X/XX/XXXX

Server Name: Tasha

Check Number: 216755

Tab Number: 600

Number Of Covers: 20

Persons: 1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 12

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>181.00</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>181.00</u>

AMOUNT	150.15
TIP	<u>30.85</u>
TOTAL	<u>181.00</u>

Approval: 074980

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

Date: 8/30/2016 Time: 11:40:18 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 08/30/2016

Server Name: Tasha

Check Number: 219521

Tab Number: 100

Number Of Covers: 26

Persons: 1, 3, 4, 5, 6, 7, 8, 9

10, 11, 12, 13

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>203.33</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>203.33</u>

AMOUNT	169.33
TIP	<u>34.00</u>
TOTAL	<u>203.33</u>
	Approval: 070060

PURPOSE/JUSTIFICATION OF FUNCTION:

CUSTOMER COPY

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGIN

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
218 Capitol Street
Charleston, WV 25301

Take Out

Justice 384-578-7645

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Server: Kim 09/06/16
Check #1 10:48 AM
Tax Exempt

CONTACT PERSON Chris Garnes

Subtotal \$115.53
Total \$115.53

TELEPHONE NUMBER (304) 558-2060

Credit Card Swiped
Visa xxxxxxxx8448
Time 11:39 AM

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

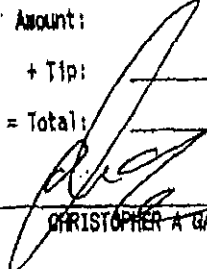
Authorization Approved
Approval Code 046901
Check ID 2247005000169560
Payment ID 863xw1jt7

DATE(S) OF FUNCTION 09/06/2016

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 139.0
MEETING ROOM	\$
EQUIPMENT RENTAL	\$
LODGING	\$
OTHER/	\$
OTHER/	\$
TOTAL	\$ 139.0

Amount: \$115.53
+ Tip: 23.47
= Total: 139.00

X 
CHRISTOPHER A. GARNES

Customer Copy

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thanks for visiting Adelphia Sports Bar & Grille
Please come again

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin, J. Charnok
V. Shafer, J. Stevenson, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

_____ DATE

By: _____
AGENCY HEAD SIGNATURE

_____ DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTON, WV 25301

09/07/2016

11:25:02

CREDIT CARD
 VISA SALE

Card #: XXXXXXXXXXXXXXX8
 Chip Card: CITI VISA
 AID: A000000031010
 ATC: 002E
 TC: 6E1364080D970B63
 SEQ #: 1
 Batch #: 495
 INVOICE: 1
 SERVER: 5515
 Approval Code: 040942
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/07/2016

PRE-TIP AMT \$204.54

TIP Inc.

TOTAL AMOUNT 204.54

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>204.54</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>204.54</u>

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/13/2016

Date: 10/5/2016 Time: 11:20:19 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Anne
 Check Number: 220883
 Tab Number: 400
 Number Of Covers: 1
 Persons: 1
 Card Owner: garnes/christopher

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 120.70*
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ 120.70*

AMOUNT	120.70
TIP	Inc.
TOTAL	<u>120.70</u>

Approval: 042652

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, R. Melvin, V. Shafer, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK

601 MORRIS ST
CHARLESTON, WV 25309
3042055482

Cashier: Mindy F
Transaction 107349

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 09/14/2016

Total \$120.00
CREDIT CARD AUTH \$120.00
VISA 8448
Tip Inc.
Total 120.00

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 120.00
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 120.00

14-Sep-2016 11:37:47A
\$120.00 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 625800017897
Auth #: 065740
MID: 215226135998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED



PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, J. Stover, R. Melvin, V. Shafer, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000175

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

Date: 9/15/2016 Time: 11:35:53 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
Card Number: XXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 09/15/2016

Server Name: Tasha
Check Number: 220010
Tab Number: 100
Number Of Covers: 18
Persons: 1, 2, 3, 4; 5, 6, 7,
Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>130.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>130.00</u>

AMOUNT	107.42
TIP	<u>22.58</u>
TOTAL	<u>130.00</u>
Approval: 048489	

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
V. Shafer, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000176

The Block Restaurant & Wine Cellar
201 Capital Street
Charleston, WV 25301
ph (681) 265-8074

STATE OF WEST VIRGIN
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TABLE: wv courts - 1 Guest
Server: Jimmy Matters
9/21/2016 11:23:46 AM
Sequence #: 000001
ID #: 0101842
Grand Total \$183.00

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/21/2016

Credit Purchase
Name : GARNES/CHRISTOPHER A
CC Type : VISA
CC Num : XXXX XXXX XXXX 8448
Approval : 077358
Server : Jimmy Matters
Ticket Name : wv courts

Payment Amount: \$183.00

Tip: 37.00

Total: 220.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 220.0
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 220.0

x _____
TSYS
CUSTOMER COPY
I agree to pay the amount shown above.

Thank you for visiting!

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, T. McHugh, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 10/03/2016

SERVER: amanda M
TABLE: 762
TICKET #: 307944 10/03/2016 10:35
GUESTS: 1

SUB TOTAL: 94.95

TOTAL: 94.95

CARD PAID: 94.95

GRATUITY: 20.05

TOTAL: 115.00

ESTIMATED EXPENSES

- FOOD AND BEVERAGE
- MEETING ROOM
- EQUIPMENT RENTAL
- LODGING
- OTHER/
- OTHER/

\$ 115.00

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

TOTAL

\$ 115.00

CARD #: XXXXXXXXXX844
CHRISTOPHER A GARNES
014547

Thanks for supporting our small business!
www.bluegrasskitchen.com

Comments? Suggestions?
email contact@bluegrasswv.com

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

** Customer Copy **

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more, more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

Adelphia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Take Out

 Supreme Court

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/04/2016

Server: Tracy
 Check #1
 Tax Exempt
 10/04/16 11:10 AM
 Supreme Court
 Subtotal \$129.5
 Total \$129.5
 Credit Card
 Visa
 Time 11:32 A
 Keye
 xxxxxxxx044
 Authorization
 Approval Code 01581
 Check ID 224700600019218
 Payment ID V03X766Z

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>156.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>156.00</u>

Amount: \$129.5
 + Tip: 26.5
 = Total: 156.00

X _____

Merchant Copy

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SCHO'S
 800 SMITH ST
 CHARLESTON, WV 25301

10/05/2016

11:42:34

CREDIT CARD

VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/05/2016

Card # XXXXXXXXXXXXXXXH48
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0032
 TC: 1EBEFF19BEF28E48
 SEQ #: 1
 Batch #: 639
 INVOICE 2
 SERVER 5515
 Approval Code: 012899
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 237.18
 MEETING ROOM \$ _____
 EQUIPMENT RENTAL \$ _____
 LODGING \$ _____
 OTHER/ \$ _____
 OTHER/ \$ _____
 TOTAL \$ 237.18

PRE-TIP AMT \$237.18
 TIP \$0.00
 TOTAL AMOUNT \$237.18

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Benjamin, J. Stover, R. Melvin, J. Charnok
 V. Shafer, C. Garnes, J. Gundy, B. Kayuha, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/13/2018

10/03/2018 per receipt

Date: 10/5/2018 Time: 11:20:19 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Aime
 Check Number: 220683
 Tab Number: 400
 Number Of Covers: 1
 Persons: 1
 Card Owner: garnes/christopher

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>120.70*</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>120.70*</u>

AMOUNT 120.70
 TIP Inc.

TOTAL 120.70
 Approval: 042652

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, R. Melvin, V. Shafer, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

Date: 10/5/2016 Time: 11:19:33 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved/Refund

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
Card Number: XXXXXXXXXXXX844B
Expiration Date: X/XX/XXXX
Server Name: Anne
Check Number: 220682
Tab Number: 400
Number Of Covers: 1
Persons: 1
Card Owner: garnes/christopher a

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/19/2016

10/05/2016 per receipt

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>26.11*</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>26.11*</u>

AMOUNT	<u>-26.11</u>
TIP	<u>_____</u>
TOTAL	<u>_____</u>

Approval: # _____

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, R. Melvin, V. Shafer, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000182

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Paterno's at the Park
Order #: 85-17871
81
1 Guest
Server: Nancy
Cashier: Nancy
Register: Expo (receipt4)
2016-10-11 11:15:57

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 10/11/2016

Subtotal: 12
Tax Exempt (I):
Gratuity (20%): 2
Total: 14

Amount Due: 14

Paterno's at the Park
601 Morris Street
Charleston, WV 25301
USA
304-235-5482
paternos@suddenlink.net
paternos-restaurant-wv.com Facebook & Twitter
Manager: Niki K.

Thank you!
Send receipt by email?

***** LEVU

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 147.60
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 147.60

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

PATERNO'S AT THE PARK
60 MORRIS ST
CHARLESTON, WV 25301
CHRISTOPHER A. GARNES

I agree to pay the amount
on the card.
Merchant ac: _____

Tip	Amount	Total
20%	\$29.52	\$177.12
30%	\$44.28	\$191.88

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

By: _____
AGENCY HEAD SIGNATURE

11-Oct-2016 11:46:52A
\$147.60 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 628503504611
Auth # 023474
MID: *****5998
AID: A0000010031010



STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/12/2016

**south hills marke
and café**

SOUTH HILLS

Date: 10/12/2016 Time: 11:31:01 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 220945
 Tab Number: 100
 Number Of Covers: 20
 Persons: 1 2, 3, 4, 5, 6, 7,
 8, 10
 Card Owner: garnes/christopher

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 158.05
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 158.05

AMOUNT 131.05
 TIP 27.00

TOTAL 158.05
 Approval: 041322

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more, more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, J. Stevenson, C. Garnas, J. Gundy, H. Dailey

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (681) 266-8074

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 10/25/2016

TABLE: Supreme Court - 11 Guests
 Server: Heather P
 10/25/2016 11:49:35 AM
 Sequence #: 0000001
 ID #: 0104708

ITEM	QTY	PR
Subtotal		\$185
Grand Total		\$185
Credit Purchase		
Name	:GARNES/CHRISTOPHER A	
CC Type	:VISA	
CC Num	:xxxx xxxx xxxx 8448	
Approval	:092E21	
Server	:Heather P	
Ticket Name	:Supreme Court	

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 223.98
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 223.98

Payment Amount: \$185
 Tip: 38.00
 Total: 223.9

[Signature]
 X TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melvin,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/01/2016

Date: 11/1/2016 Time: 11:30:29 AM

Status: Approved

Card Type: Visa
 Card Number: XXX XXXXXX8448
 Expiration Date: X/X/XXXX
 Server Name: Tasha
 Check Number: 221694
 Tab Number: 100
 Number Of Covers: 17
 Persons: 1, 2, 3, 4, 5, 6, 7, 1
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>141.33</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>141.33</u>

AMOUNT	<u>116.33</u>
TIP	<u>25.00</u>
TOTAL	<u>141.33</u>
	Approval: 089976

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, J. Stover, R. Melvin, V. Shafer,
 C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Tricky Fish
 1611 Washington St East
 Charleston, WV
 (304) - 344 - FISH

SERVER: dylan c
 TABLE: 825
 TICKET #: 243782 11/09/2016 11:47
 GUESTS: 1

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 11/09/2016

Shrimp Taco (2) 9.25
 Fried Soft
 Fish Stew 7.00
 MISC FOOD ITEM 7.00
 SUB TOTAL: 23.25
 TOTAL: 23.25
 GRATUITY: 5.00
 CARD PAID: 28.25

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 28.25
 MEETING ROOM \$ _____
 EQUIPMENT RENTAL \$ _____
 LODGING \$ _____
 OTHER/ \$ _____
 OTHER/ \$ _____
 TOTAL \$ 28.25

CARD #: XXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 005233

Suggested Gratuity
 20% = 4.65
 18% = 4.19
 15% = 3.49

www.trickyfish.net
 Thanks for supporting small business!
 Questions? Comments? contact@trickyfish.net

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

M. Workman

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
 AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

SERVER: amanda #
TABLE: 701
TICKET #: 311388 11/14/2016 11:38
GUESTS: 1

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/14/2016

SUB TOTAL: 95.45
TOTAL: 95.45
CARD PAID: 95.45
GRATUITY: 20.55
TOTAL: 116.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 127.00
MEETING ROOM \$
EQUIPMENT RENTAL \$
LODGING \$
OTHER/ \$
OTHER/ \$
TOTAL \$ 127.00

CARD #: XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
078709

Bluegrass Kitchen
1600 Washington St. East
Charleston, WV 25311
304.346.2871

SERVER: amanda #
TABLE: 708
TICKET #: 311400 11/14/2016 12:43
GUESTS: 1

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, J. Stover, R. Melton,
V. Shafer, C. Garnes, J. Gundy,

SUB TOTAL: 8.75
TOTAL: 8.75
CARD PAID: 8.75
GRATUITY: 2.25
TOTAL: 11.00

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

By: _____
AGENCY HEAD SIGNATURE

CARD #: XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
013810

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/15/2016

11/15/2016

SCHO'S
800 SMITH ST
CHARLESTON, WV 25301

11:47:32

CREDIT CARD

VISA SALE

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>151.20</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>151.20</u>

Card # XXXXXXXXXXXXXXX08448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0039
 TC: 92184F12538H54E0
 SEQ #: 2
 Batch #: 607
 INVOICE SERVER 2
 Approval Code: 5515
 Entry Method: 020290
 Mode: Chip Read
 Issuer - PIN Bypassed

PRE-TIP AMT \$151.20

TIP INC

TOTAL AMOUNT 151.20

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. All more must accompany the form):

- R. Davis, M. Workman, A. Loughry, J. Stover, R. Melvin,
- V. Shafer, C. Garnes, J. Gundy

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

JAN - DEC 2017

**MEALS PURCHASED
FOR JUSTICES & STAFF**

88--000190

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

Date: 1/4/2017 Time: 11:35:27 AM

FUNCTION SPONSOR Chris Garnes

Status: Approved

LOCATION OF FUNCTION Justices' Chambers

Card Type: Visa
 Card Number: XXXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 224381
 Tab Number: 100
 Number Of Covers: 24
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12
 Card Owner: garnes/christopher a

DATE(S) OF FUNCTION 01/04/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>167.81</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>167.81</u>

AMOUNT 139.81
 TIP 28.00
TOTAL 167.81

Approval: 038071

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY.

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SOHO'S
800 SMETH ST
CHARLESTON, WY 25301

01/09/2017 11:31:13

CREDIT CARD
VISA SALE

Card # XXXXXXXXXXXXXXX8448
Chip Card: CITI VISA
AID: A000000031010
ATC: 0041
TC: F9D4CD67D87E2197
SEQ #: 1
Batch #: 696
INVOICE: 1
SERVER: 5515
Approval Code: 090234
Entry Method: Chip Read
Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 01/09/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 210.48
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 210.48

PRE-TIP AMT \$210.48
TIP Inc.
TOTAL AMOUNT 210.48

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
G. Johnson, V. Shafer, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK

601 MORRIS ST
CHARLESTON, WV 25309
3042055482

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Cashier: Mindy F

CONTACT PERSON Chris Garnes

Transaction 109716

TELEPHONE NUMBER (304) 558-2060

Total \$154.80

FUNCTION SPONSOR Chris Garnes

CREDIT CARD AUTH \$154.80
VISA 8448

LOCATION OF FUNCTION Justices' Chambers

Tip Incl.

DATE(S) OF FUNCTION 01/10/2017

Total 154.80

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 154.80
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 154.80

10-Jan-2017 11:39:39A
\$154.80 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 701000526781
Auth #: 058106
MID: *****5998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED



PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of more must accompany the form):

R. Davis, M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/11/2017

Adephia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

Take Out

Court 888-095-3686

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>175.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>175.00</u>

Server: Kim S	01/11/17
Check #9	11:36 AM
Open \$ Check	\$10.19
Subtotal	\$135.31
Tax	\$9.47
Total	\$144.78

Credit Card	Swiped
Visa	xxxxxxx8448
Time	12:14 PM

Authorization	Approved
Approval Code	028763
Check ID	
Payment ID	40xyjeDJP

Amount:	\$144.78
+ Tip:	<u>30.22</u>
= Total:	<u>175.00</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. M
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

X _____
 CHRISTOPHER A GARNES

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

Customer Copy

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

Thanks for visiting Adephia Sports Bar & Grille
 Please come again.

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/17/2017

**south hills market
and café**

SOUTH HILLS

Date: 1/17/2017 Time: 11:32:34 AM

Status: Approved

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>154.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>154.00</u>

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 224851
 Tab Number: 100
 Number Of Covers: 18
 Persons: 1, 2, 3, 4, 5, 6, 7,
 9, 10
 Card Owner: garnes/christopher a

AMOUNT 128.86
 TIP 26.14
154.00
TOTAL
 Approval: 030455

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
V. Shafer, C. Garnes, J. Gundy, H. Dailey

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTON, WV 25301

01/18/2017 11:45:16

CREDIT CARD
 VISA SALE

Card # X000000000000048
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0046
 TC: 0928127AA2094816
 SEQ #: 2
 Batch #: 712
 INVOICE 2
 SERVER 3363
 Approval Code: 055824
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/18/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>210.78</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>210.78</u>

PRE-TIP AMT \$210.78
 TIP Inc.
 TOTAL AMOUNT 210.78

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
 V. Shafer, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
218 Capitol Street
Charleston, WV 25301

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/04/2017

01/23/2017 per receipt

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>212.64</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>212.64</u>

Take Out

Justice

Server: Elisha K
Check #1
Tax Exempt

01/23/17 11:08 AM
Justice

Subtotal \$176.64
Total \$176.64

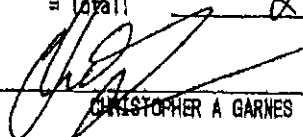
Credit Card Swiped
Visa xxxxxxxx8448
Time 11:33 AM

Authorization Approved
Approval Code 007769
Check ID
Payment ID hq1gy44wD

Amount: \$176.64
+ Tip: 36.00
= Total: 212.64

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

X 
CHRISTOPHER A. GARNES

Customer Copy

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, G. Johnson, J. S
V. Shafer, J. Stevenson, W. Humphrey, C. Garnes, J. Gundy

Thanks for visiting Adelphia Sports Bar & Grille
Please come again

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25309
3042055482

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/24/2017

Cashier: Nancy B
Transaction 202176

Total \$276.00
CREDIT CARD AUTH \$276.00
VISA 8448

Tip Inc.
Total 276.00

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>276.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>276.00</u>

24-Jan-2017 11:43:12A
\$276.00 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 702400530041
Auth #: 061624
MID: *****5998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED



PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey, Judges: Tabit, Waters, Carl, Matish, McHugh

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

Date: 1/25/2017 Time: 11:33:31 AM

FUNCTION SPONSOR Chris Garnes

Status: Approved

LOCATION OF FUNCTION Justices' Chambers

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448

DATE(S) OF FUNCTION 01/25/2017

Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 225202
 Tab Number: 100
 Number Of Covers: 25
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12, 13
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>221.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>221.00</u>

AMOUNT	183.04
TIP	<u>37.96</u>
TOTAL	<u>221.00</u>

Approval: 023518

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, B. Kayuha, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SOHO'S
800 SMITH ST
CHARLESTON, WV 25301

02/07/2017 11:30:52

CREDIT CARD
VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/07/2017

Card # X00000000000000000000000000000000
Chip Card: CITI VISA
AID: A0000000031010
ATC: 004E
TC: 11A1C61E022C1041
SEQ #: 1
Batch #: 747
INVOICE 2
SERVER 5515
Approval Code: 066816
Entry Method: Chip Read
Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>200.04</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>200.04</u>

PRE-TIP AMT \$200.04
TIP \$0.00
TOTAL AMOUNT \$200.04

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/08/2017

Lola's
1038 Bridge Road
Charleston, WV 25314
304-343-5652

Server: Katy DOB: 02/08/21
11:26 AM 02/08/21
1130/1 2/20

VISA 2097
Card #XXXXXXXXXXXX8448
Magnetic card present: GARNES CHRISTOPH
Card Entry Method: S

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 187.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 187.00

Approval: 045696

Amount: \$ 155
+ Tip: 31.49
= Total: 187.00

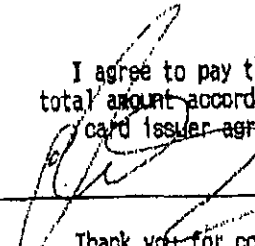
PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley,

I agree to pay the above total amount according to the card issuer agreement.

X 
Thank you for coming! :)

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

Adelphia Sports Bar & Grille
218 Capitol Street
Charleston, WV 25301

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Take Out

Justice

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Server: Elisha K
Check #4
Tax Exempt
02/13/17 10:49 AM
Justice

CONTACT PERSON Chris Garnes

Subtotal \$177.64
Total \$177.64

TELEPHONE NUMBER (304) 558-2060

Credit Card Swiped
Visa xxxxxxxx8448
Time 11:36 AM

FUNCTION SPONSOR Chris Garnes

Authorization Approved
Approval Code 047456

LOCATION OF FUNCTION Justices' Chambers

Check ID
Payment ID vtpuHtxX3

DATE(S) OF FUNCTION 02/13/2017

Amount: \$177.64

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 214.00
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____

+ Tip: 36.36
= Total: 214.00

TOTAL \$ 214.00

X Christopher A. Garnes

Customer Copy

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thanks for visiting Adelphia Sports Bar & Grille
Please come again

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25309
 3042055482

Cashier: Nancy B

Transaction 100001

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

Total \$189.60

TELEPHONE NUMBER (304) 558-2060

CREDIT CARD AUTH \$189.60
VISA 8448

FUNCTION SPONSOR Chris Garnes

Tip Inc.

LOCATION OF FUNCTION Justices' Chambers

Total 189.60

DATE(S) OF FUNCTION 02/14/2017

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>189.60</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>189.60</u>

14-Feb-2017 11:48:59A
 \$189.60 | Method: EMV
 VISA CREDIT XXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 704500536991
 Auth #: 065099
 MID: *****5998
 AID: A0000000031010
 AthNtwkNm: VISA
 SIGNATURE VERIFIED



7ZTGKEFX6J1K2

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

Date: 2/15/2017 Time: 11:31:17 AM

LOCATION OF FUNCTION Justices' Chambers

Status: Approved

DATE(S) OF FUNCTION 02/15/2017

Card Type: Visa

Card Number: XXXXXXXXXXXXB448

Expiration Date: X/XX/XXXX

Server Name: Tasha

Check Number: 226104

Tab Number: 100

Number Of Covers: 28

Persons: 1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 12, 13, 14

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>254.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>254.00</u>

AMOUNT 210.43

TIP 43.57

TOTAL 254.00
Approval: 060601

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
 V. Shafer, C. Garnes, J. Gundy, H. Dailey, G. Johnson, P. Embley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SONO'S
800 SMITH ST
CHARLESTON, WV 25301

02/17/2017

11:30:05

CREDIT CARD
VISA SALE

Card # XXXXXXXXXXXXXXX9446
Chip Card: CITI VISA
AID: A0000000031010
ATC: 0054
TC: 872E44681192A8A
SEQ #: 1
Batch #: 76
INVOICE
SERVER 551
Approval Code: 02281
Entry Method: Chip Rec
Mode: Issuer - PIN Bypass

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 02/17/2017

PRE-TIP AMT \$155.0
TIP
TOTAL AMOUNT 155.0

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 155.04
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 155.04

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, A. Loughry, J. Stevenson, V. Shafer, P. Embley, C. Garnes

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOHO'S
 800 SMITH ST
 CHARLESTON, WV 25301
 02/27/2017 11:22:57
 CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX8448
 Chip Card: CITI VISA
 AID: A000000031010
 ATC: 0057
 TC: 3C691CA78691F25B
 SEQ #: 1
 Batch #: 783
 INVOICE 1
 SERVER 5515
 Approval Code: 014451
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 02/27/2017

PRE-TIP AMT \$213.36
 TIP \$0.00
 TOTAL AMOUNT \$213.36

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 213.36
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 213.36

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Genesis Cafe

1496 Limestone Rd
 Charleston, WV 25312-6444
 (681) 205-8575
 www.genescafewv.com

Mar 6, 2017
 11:36 AM
 Josephine

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 03/06/2017

Ticket: Court Visa 8448
 Authorization 002208
 Receipt GprZ

CITI VISA
 AID A0 00 00 00 03 10 10
 PICKUP

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>83.65</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>83.65</u>

Dell Sandwich x 2 (\$7.25 each)	\$14.50
Rockin BBQ x 2 (\$7.50 each)	\$15.00
Bowl Of Fruit x 2 (\$3.50 each)	\$7.00
Cuban Jazz	\$8.25
Pancit Canton	\$8.50
Lumpla	\$7.95
Hot Tuna	\$7.25
Greek Salad	\$7.25
Grilled Chicken Salad	\$7.95
Total	\$83.65
Visa 8448 (Chip)	\$83.65
Christopher A Games	

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
 V. Shafer, J. Stevenson, C. Games, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000207

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Lola's
1038 Bridge Road
Charleston, WV 25314
304-343-5652

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Server: Jessie
11:50 AM
Wv State/1

DOB: 03/07/201
03/07/201
2/2000

CONTACT PERSON Chris Garnes

SALE

TELEPHONE NUMBER (304) 558-2060

VISA 209711

FUNCTION SPONSOR Chris Garnes

Card #XXXXXXXXXXXX8448
Magnetic card present: GARNES CHRISTOPHEI
Card Entry Method: S

LOCATION OF FUNCTION Justices' Chambers

Approval: 039719

DATE(S) OF FUNCTION 03/07/2017

Amount: \$ 180.

+ Tip: 38.0

= Total: 218.79

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>218.79</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____

TOTAL \$ 218.79

I agree to pay the above
total amount according to the
card issuer agreement.

Thank you for coming! :)

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000208

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 03/08/2017

Take Out

Court Pickup At 11:30

Server: Tiffany C 03/08/17 10:40
 Check #1 Court Pickup At 11
 Tax Exempt

Subtotal	\$170
Total	\$170

Credit Card	SWI
Visa	XXXXXXXXXX
Time	11:29

Authorization	Appro
Approval Code	026
Check ID	
Payment ID	vibay5

Amount:	\$170
+ Tip:	35.00
= Total:	205.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 205.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 205.00

X  _____
 CHRISTOPHER A GARNES

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Customer Copy

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more; more must accompany the form):

Thanks for visiting Adelphia Sports Bar & Gr
Please come again

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvi
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 03/20/2017

SOHO'S
800 SMITH ST
CHARLESTON, WV 25301
03/20/2017 11:24:52
CREDIT CARD
VISA SALE
Card # XXXXXXXXXXXXXXX8148
Chip Card: CITI VISA
AID: A0000000031010
ATC: 005A
TC: 5BAME549F002FE79
SEQ #: 1
Batch #: 818
INVOICE 1
SERVER 5515
Approval Code: 015427
Entry Method: Chip Read
Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 190.08
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 190.08

PRE-TIP AMT \$190.08
TIP Inc.
TOTAL AMOUNT 190.08

PURPOSE/JUSTIFICATION OF FUNCTION:

CUSTOMER COPY

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
V. Shafer, C. Garnes, J. Gundy, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 03/28/2017

Date: 3/28/2017 Time: 12:32:49 PM

Status: Approved

Card Type: Visa

Card Number: XXXXXXXXXXXX8448

Expiration Date: X/XX/XXXX

Server Name: Tasha

Check Number: 227727

Tab Number: 600

Number Of Covers: 13

Persons: 1, 2, 3, 4, 5, 6, 7, 8

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>106.23</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>106.23</u>

AMOUNT	88.23
TIP	<u>18.00</u>
TOTAL	<u>106.23</u>
Approval: 060616	

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Davis

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000211

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Games

Date: 4/5/2017 Time: 11:38:01 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Games

Card Type: Visa
Card Number: XXXXXXXXXXXX8448
Expiration Date: X/XX/XXXX
Server Name: Anthony
Check Number: 228031
Tab Number: 600
Number Of Covers: 16
Persons: 1, 2, 3, 4, 5, 6, 7, 1
9, 10, 11, 12, 13
Card Owner: GARNES/CHRISTOPHER A

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 04/05/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>206.55</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>206.55</u>

AMOUNT	171.55
TIP	<u>35.00</u>
TOTAL	<u>206.55</u>
	Approval: 051254

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Games, J. Gundy, G. Johnson, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000212

The Block Restaurant & Wine Cellar
201 Capital Street
Charleston, WV 25301
ph (681) 265-9074

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 04/18/2017

TABLE: Courthouse TOGO - 8 Guests
Server: Cara
4/18/2017 11:24:39 AM
Sequence #: 0000001
ID #: 0115384

ITEM	QTY	PRICE
Subtotal		\$113.75
Grand Total		\$113.75
Amount Due:		\$113.75

Credit Purchase
Name : GARNES/CHRISTOPHER A
CC Type : VISA
CC Num : xxxxx xxxxx xxxxx 8448
Approval : 007817
Server : Cara
Ticket Name : Courthouse TOGO

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 137.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 137.00

Payment Amount: \$113.75
Tip: 23.25
Total: 137.00

X _____
TSYS
I agree to pay the amount shown above.

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thank you for visiting!

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
V. Shafer, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

by: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

by: _____
AGENCY HEAD SIGNATURE

DATE

88--000213

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK

601 MORRIS ST
CHARLESTON, WV 26309
3042055482

Cashier: Sydney S

Transaction 100000

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Total \$183.60

CONTACT PERSON Chris Garnes

CREDIT CARD AUTH \$183.60
VISA 8448

TELEPHONE NUMBER (304) 558-2060

Tip Inc.

FUNCTION SPONSOR Chris Garnes

Total 183.60

LOCATION OF FUNCTION Justices' Chambers

Retain this copy for statement validation

DATE(S) OF FUNCTION 04/19/2017

19-Apr-2017 11:38:16A
\$183.60 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 710900556051
Auth #: 037089
MID: *****5998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 183.60
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____

TOTAL \$ 183.60



PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Malvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SOHOS
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646
04/24/2017 11:59:10
CREDIT CARD
VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Games
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 04/24/2017

Card #
Chip Card: XXXXXXXXXXXXXXX000418
AID: CITT VISA
ATC: A000000031010
TC: 0068
SEQ #: 19848885738C5559
Batch #: 3
Trans #: 2
SERVER: 3
Approval Code: 5515
TRANS ID: 055612
Entry Method: 167114576133121
Mode: Chip Read
Issuer - PIN Bypassed

SALE AMOUNT \$17.50
TIP AMOUNT 3.50
TOTAL AMOUNT 21.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 214.74
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 214.74

THANK YOU
CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W
V. Shafer, C. Garnes, J. Gundy, G. Johnson

Approval Code: 5515
TRANS ID: 000367
Entry Method: 167114560539233
Mode: Chip Read
Issuer - PIN Bypassed

SALE AMOUNT \$193.74
TIP AMOUNT \$0.00
TOTAL AMOUNT \$193.74

THANK YOU
CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Date: 4/25/2017 Time: 11:29:47 AM

CONTACT PERSON Chris Garnes

Status: Approved

TELEPHONE NUMBER (304) 558-2060

Card Type: Visa
Card Number: XXXXXXXXXXXX8448

FUNCTION SPONSOR Chris Garnes

Expiration Date: X/XX/XXXX

LOCATION OF FUNCTION Justices' Chambers

Server Name: Cheyan

Check Number: 228789

DATE(S) OF FUNCTION 04/25/2017

Tab Number: 100

Number Of Covers: 32

Persons: 1, 2, 3, 4, 5, 6, 7, 8,
9, 10, 11, 12, 13, 14

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>216.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>216.00</u>

AMOUNT	179.02
TIP	<u>36.98</u>
TOTAL	<u>216.00</u>
Approval: 020398	

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Reeder, J. Stover, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000216

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
 218 Capitol Street
 Charleston, WV 25301

Take Out

Large Order DOKNT MAKE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 05/02/2017

Server: Tiffany C
 Check #6
 Tax Exempt
 05/02/17 11:25 /
 Large Order DOKNT MA
 Subtotal \$156.
 Total \$156.
 Credit Card Swip
 Visa xxxxxxxx84
 Time 11:28
 Authorization Approval Code Approv
 Check ID 0884
 Payment ID 9kp6SrT

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 188.00
MEETING ROOM	\$
EQUIPMENT RENTAL	\$
LODGING	\$
OTHER/	\$
OTHER/	\$
TOTAL	\$ 188.00

Subtotal: \$156.
 Amount: \$156.

+ Tip: 32.00
 = Total: 188.00

X 
 CHRISTOPHER A GARNES

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Customer Copy

Thanks for visiting Adelphia Sports Bar & Grill
 Please come again

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin, W. Humphrey
 V. Shafer, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000217

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (681) 265-8074

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 05/03/2017

TABLE: Supreme Court TOGO - 11 Guests
 Server: Cara
 5/3/2017 11:40:15 AM
 Sequence #: 0000001
 ID #: 0116818

ITEM	QTY	PRICE
Subtotal		\$129.7
Grand Total		\$129.7

Credit Purchase
 Name : GARNES/CHRISTOPHER A
 CC Type : VISA
 CC Num : xxxx xxxx xxxx 8448
 Approval : 023960
 Server : Cara
 Ticket Name : Supreme Court TOGO

Payment Amount: \$129.7

Tip: 30.25
 Total: 160.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>160.0</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>160.0</u>

x _____
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thank you for visiting!

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, J. Stover, R. Melvin,
 V. Shafer, D. Canfield, C. Games, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25309
3042055482

Cashier: Employee
Transaction 100002

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Ganes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Ganes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 05/16/2017

Total \$176.40
CREDIT CARD AUTH \$176.40
VISA 8448

Tip Inc
Total 176.40

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 176.40
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____
TOTAL \$ 176.40

16-May-2017 11:38:58A
\$176.40 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 713600565611
Auth #: 055158
MID: *****5998
AID: A0000000031010
AuthNtwkNm: VISA
SIGNATURE VERIFIED



PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Ganes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000219

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

SOH05
800 SMITH ST
CHARLESTON, WV 25301
304-720-7646

05/17/2017 11:23:58

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CREDIT CARD

VISA SALE

CONTACT PERSON Chris Garnes

Card # XXXXXXXXXXXXXXX8448

Chip Card: CITI VISA

TELEPHONE NUMBER (304) 558-2060

AID: A0000000031010

ATC: 006F

FUNCTION SPONSOR Chris Garnes

TC: 687E456EA3990D6A

SEQ #: 1

Batch #: 4

LOCATION OF FUNCTION Justices' Chambers

Trans #: 1

DATE(S) OF FUNCTION 05/17/2017

SERVER 5515

Approval Code: 034411

TRANS ID: 007137554720233

Entry Method: Chip Read

Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 207.66

MEETING ROOM \$ _____

EQUIPMENT RENTAL \$ _____

LODGING \$ _____

OTHER/ \$ _____

OTHER/ \$ _____

TOTAL \$ 207.66

SALE AMOUNT \$207.66

TIP AMOUNT Inc

TOTAL AMOUNT 207.66

THANK YOU

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey

V. Shafer, J. Stover, C. Garnes, J. Gundy, H. Dailey, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

Date: 5/23/2017 Time: 11:20:30 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
Card Number: XXXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 05/23/2017

Server Name: Tasha

Check Number: 229585

Tab Number: 100

Number Of Covers: 25

Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>184.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>184.00</u>

AMOUNT 182.25
TIP 31.75
TOTAL 184.00
Approval: 019248

PURPOSE/JUSTIFICATION OF FUNCTION:

CUSTOMER COPY

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000221

Adelphia Sports Bar & Grille
218 Capitol Street
Charleston, WV 25301

STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Take Out

Ready At 11:30 Courthouse

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Garnes
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Garnes
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 05/31/2017

Server: Tiffany D 05/31/17 10:50 /
Check #2 Ready At 11:30 Courthouse
Tax Exempt

Subtotal \$208
Total \$208
Credit Card SW1
Visa xxxxxxxx8
Time 11:29
Authorization Appro
Approval Code 038
Check ID
Payment ID 9gYTScl


ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 251.00
MEETING ROOM \$ _____
EQUIPMENT RENTAL \$ _____
LODGING \$ _____
OTHER/ \$ _____
OTHER/ \$ _____

TOTAL \$ 251.00

Subtotal: \$208
Amount: \$208

+ Tip: 42.50
= Total: 251.00

X 
CHRISTOPHER A GARNES

Customer Copy

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thanks for visiting Adelphia Sports Bar & Gri'
Please come again

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey
V. Shafer, J. Stevenson, J. Stover, C. Garnes, J. Gundy, G. Johnson, C. Morris

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 06/06/2017

Date: 6/6/2017 Time: 11:38:16 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 230073
 Tab Number: 400
 Number Of Covers: 29
 Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12, 13, 14, 15
 Card Owner: games/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>271.30</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>271.30</u>

AMOUNT	223.30
TIP	<u>48.00</u>
TOTAL	<u>271.30</u>
	Approval: 015878

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 Justices, staff, and guests.

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 06/14/2017

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25309
 3042055482
 Cashier: Employee
 Transaction 100000
 Total \$186.00
 CREDIT CARD AUTH \$186.00
 VISA 8448
 Tip Inc.
 Total 186.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>186.00</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>186.00</u>

Retain this copy for statement validation

14-Jun-2017 11:42:03A
 \$186.00 | Method: EMV
 VISA CREDIT XXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 716500576171
 Auth #: 013896
 MID: *****5998
 AID: A0000000031010
 AthNtwkNm: VISA
 SIGNATURE VERIFIED

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference



FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, G. Johnson

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Clerk's Office
 DATE(S) OF FUNCTION 07/31/2017

DEFERRED ORDER
 *** Order Due: 12:15PM ***
 Pies and Prints #2
 222 Capitol Street
 Charleston, WV 25301
 Phone:
 www.piesandprints.net

Order #1
 TO GO
 Emp: Ryan 07/31/2017 12:20 PM

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>232.0</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>232.0</u>

1 Large Pizza Pie	16.00
1 Large Pizza Pie	16.00
1 Large Pizza Pie	16.00
1 Large Pizza Pie	16.00
Pepperoni	2.50
1 Large Pizza Pie	15.00
Pepperoni	2.50
1 Large Pizza Pie	16.00
Pepperoni	2.50
1 Large Classic Pie	24.00
1 Large Classic Pie	24.00
1 Char-Grilled hot wings	10.00
1 Char-Grilled hot wings	10.00
1 Char-Grilled hot wings	10.00
1 Char-Grilled hot wings	10.00

PURPOSE/JUSTIFICATION OF FUNCTION:
 Award Ceremony

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more must accompany the form):
 M. Workman, A. Loughry, Clerk's Office, & guests

Subtotal	191.50
Tax	0.00
Total	191.50
Visa B448 Payment	191.50
TIP	<u>40.50</u>
Total	<u>232.00</u>

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

By: _____
 AGENCY HEAD SIGNATURE

*** Guest Copy ***

 DATE _____
 DATE _____

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SONOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

08/30/2017 07:33:15
 CREDIT CARD
 VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 08/30/2017

Card # XXXXXXXXXXXX08448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0085
 TC: 2A7766A4F47FF9E5
 SEQ #: 1
 Batch #: 7
 Trans #: 1
 SERVER 5515
 Approval Code: 089594
 TRANS ID: 467242557761334
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 190.14
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 190.14

SALE AMOUNT \$190.14
 TIP AMOUNT Inc.
 TOTAL AMOUNT 190.14

THANK YOU
 CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy,

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills market
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 08/31/2017

Date: 8/31/2017 Time: 11:26:35 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 233153
 Tab Number: 100
 Number Of Covers: 26
 Persons: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12
 Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>214.00</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>214.00</u>

AMOUNT	177.13
TIP	<u>36.87</u>
TOTAL	<u>214.00</u>

Approval: 076598

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey
 V. Shafer, J. Stevenson, J. Stover, C. Garnes, J. Gundy, G. Johnson

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

Adelphia Sports Bar & Grille
218 Capitol Street
Charleston, WV 25301

Server: BrieAnna W
Check #1
Tax Exempt

09/12/17 11:11 AM
Court

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 09/12/2017

Credit Card
Visa
Time

Swiped
XXXXXXXX8448
11:42 AM

Authorization
Approval Code
Check ID
Payment ID

Approved
052464
dy0GgIBJQ

Amount: \$181.00

+ Tip: 39.00
= Total: 220.00

X 
CHRISTOPHER A. GARNES

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>220.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>220.00</u>

Customer Copy

Thanks for visiting Adelphia Sports Bar & Grille
Please come again

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (881) 265-9074

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/13/2017

TABLE: Wvsc - 11 Guests
 Server: Zach
 9/13/2017 11:31:45 AM
 Sequence #: 0000002
 ID #: 0128701

ITEM	QTY	PRICE
Subtotal		\$140.60
Grand Total		\$140.60

Credit Purchase
 Name : GARNES/CHRISTOPHER A
 CC Type : VISA
 CC Num : XXXX XXXX XXXX 8448
 Approval : 013632
 Server : Zach
 Ticket Name : Wvsc

Payment Amount: \$140.60

Tip: 30.40
 Total: 171.00

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>171.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>171.00</u>

X _____
 TSYS
 CUSTOMER COPY
 I agree to pay the amount shown above.

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

Thank you for visiting!

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, J. Stover,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

Y: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

Y: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SOMOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646

09/18/2017 11:42:57
 CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX08448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0080
 TC: 163200213E60014C
 SEQ #: :
 Batch #: :
 Trans #: :
 SERVER 551
 Approval Code: 06637
 TRANS ID: 30726156527858
 Entry Method: Chip Rec
 Mode: Issuer - PIN Bypass

SPENDING UNIT NAME/ORG #: Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/19/2017

SALE AMOUNT \$191.64
 TIP AMOUNT \$0.00
 TOTAL AMOUNT \$191.64

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 191.64
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 191.64

THANK YOU
 CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:
 Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):
 M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
 V. Shafer, G. Johnson, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/19/2017

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25309
 3042055482

Cashier: Mindy F
 Transaction 100000
 Total \$206.40
 CREDIT CARD AUTH \$206.40
 VISA 8448
 Tip Inc
 Total 206.40

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>206.40</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>206.40</u>

Retain this copy for statement validation

19-Sep-2017 11:26:47A
 \$206.40 | Method: EMV
 VISA CREDIT XXXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 726200602811
 Auth #: 012046
 MID: *****5998
 AID: A000000031010
 AthNtwkNm: VISA
 SIGNATURE VERIFIED

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference



FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of more must accompany the form):

M. Workman, M. Ketohum, A. Loughry, B. Walker, R. Melvin, W. Humphrey, J. Stover,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

88--000231

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

south hills market
 and café

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 09/20/2017

Date: 9/20/2017 Time: 11:23:26 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 233998
 Tab Number: 100
 Number Of Covers: 25
 Persons: 1, 2, 3, 4, 6, 6, 7
 8, 10, 11, 12
 Card Owner: garnes/christopher

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>217.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>217.00</u>

AMOUNT	179.43
TIP	<u>37.57</u>
TOTAL	<u>217.00</u>
	Approval: 065918

CUSTOMER COPY

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, B. Walker, R. Melvin, W. Humphrey,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy, H. Dalley, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA
 DEPARTMENT OF ADMINISTRATION
 TRAVEL MANAGEMENT OFFICE
 REQUEST FOR HOSPITALITY SERVICE

**south hills marke
 and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

Date: 9/28/2017 Time: 11:35:10 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 09/28/2017

Server Name: Tasha

Check Number: 234328

Tab Number: 100

Number Of Covers: 28

Persons: 1, 2, 3, 4, 5, 6, 7,

9, 10, 11, 12, 13, 14

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>246.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>246.00</u>

AMOUNT 202.93

TIP 43.67

TOTAL 246.00

Approval: 044304

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

CUSTOMER COPY

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of 20 or more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, R. Melvin, G. Johnson, C. Morris, L. Paletta-Davis

B. Holmes, J. Lewis, V. Shafer, J. Stevenson, C. Garnes, J. Gundy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

PATERNOS AT THE PARK

601 MORRIS ST
CHARLESTON, WV 26309
3042055482

Cashier: Mindy F

Transaction 100000

Total \$120.00

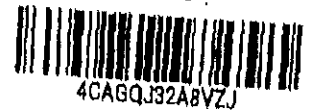
CREDIT CARD AUTH \$120.00
VISA 8448

Tip Inc.

Total 120.00

Retain this copy for statement validation

14-Nov-2017 11:36:29A
\$120.00 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 731800616241
Auth #: 059544
MID: *****5998
AID: A0000000031010
AthNtwkNm: VISA
SIGNATURE VERIFIED



SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 11/14/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>120.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>120.00</u>

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

FUNCTION ATTENDEES (Must list individual names unless for a group of 20 or more. A list of attendees for groups of more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, R. Melvin, W. Humphrey,
V. Shafer, J. Stevenson, C. Garnes, J. Gundy, B. Kayuha

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

88--000234