

JAN - DEC 2017

**MEALS PURCHASED
FOR JUSTICES & STAFF**

TRAVEL REIMBURSEMENT Travel Expense Form

PER DIEM CALCULATOR

MILEAGE CALCULATOR

ALL COUNTIES OTHER THAN KANAWHA, MONONGALIA, OR OHIO

Calculate First and Last Day of Travel
\$38.25 - Maximum Per Diem (no meals provided)

- Breakfast Provided (\$7.65)
- Lunch Provided (\$7.65)
- Dinner Provided (\$22.95)

Total Provided Meals:

Total Per Diem To Claim:

Calculate Middle Day(s) of Travel
\$51.00 - Maximum Per Diem (no meals provided)

- Breakfast Provided (\$10.20)
- Lunch Provided (\$10.20)
- Dinner Provided (\$30.60)

Total Provided Meals:

Total Per Diem To Claim:

- Bridgeport Conference Center
- Cabala's Conference Center
- Chief Logan Lodge Conference Center
- Comfort Inn (Triadelphia)
- Embassy Suites (Charleston)
- Glade Springs Resort
- Hampton Inn (Morgantown)
- Hilton Garden Inn (Clarksburg)
- Lakeview Golf Resort & Spa
- Marriott (Charleston Town Center)
- Oglebay Resort & Conference Center

KANAWHA, MONONGALIA, AND OHIO COUNTIES

Calculate First and Last Day of Travel
\$40.50 - Maximum Per Diem (no meals provided)

- Breakfast Provided (\$8.10)
- Lunch Provided (\$8.10)
- Dinner Provided (\$24.30)

Total Provided Meals:

Total Per Diem To Claim:

Calculate Middle Day(s) of Travel
\$54.00 - Maximum Per Diem (no meals provided)

- Breakfast Provided (\$10.20)
- Lunch Provided (\$10.20)
- Dinner Provided (\$32.40)

Total Provided Meals:

Total Per Diem To Claim:

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

CONTACT PERSON Chris Games

TELEPHONE NUMBER (304) 558-2080

FUNCTION SPONSOR Chris Games

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 01/04/2017

SOUTH HILLS

Date: 1/4/2017 Time: 11:35:27 AM

Status: Approved

Card Type: Visa

Card Number: XXXXXXXXXXXX8448

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: games/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>167.81</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>167.81</u>

AMOUNT 169.81

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. 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

SONO'S
800 SMITH ST
CHARLESTON, WV 25301

01/09/2017

11:31:13

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 01/09/2017

Card # XXXXXXXXXXXXXXX8448
Chip Card: CITI VISA
AID: A000000031010
ATC: 0041
TC: F9D4CD67DB7E2197
SEQ #: 1
Batch #: 696
INVOICE: 1
SERVER: 5515
Approval Code: 090234
Entry Method: Chip Read
Mode: Issuer - PIN Bypassed

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. Davls, 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 Inc.

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: EMY
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. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

4

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

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

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>175.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>175.00</u>

Take Out

Court 888-095-3686

Server: Kim S 01/11/17
 Check #9 11:36 AM
 Open & Check \$10.19
 Subtotal \$135.81
 Tax \$9.47
 Total \$144.78

Credit Card Swiped
 Visa xxxxxxxx8448
 Time 12:14 PM

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

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

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

Authorization Approved
 Approval Code 028783
 Check ID
 Payment ID 40xyjeDJP

Amount: \$144.78
 + Tip: 30.22
 = Total: 175.00

X _____
CHRISTOPHER A GARNES

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

Customer Copy

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

Thanks for visiting Adelphia 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	129.86
TIP	<u>26.14</u>
TOTAL	<u>154.00</u>
	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. 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 01/04/2017

01/23/2017 per receipt

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 h41pymhd

Amount: \$176.64
 + Tip: 36.00
 = Total: 212.64

ESTIMATED EXPENSES

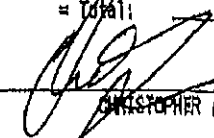
FOOD AND BEVERAGE	\$ <u>212.64</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>212.64</u>

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, G. Johnson, J. S
 V. Shafer, J. Stevenson, W. Humphrey, C. Garnes, J. Gundy

X 
 CHRISTOPHER A. GARNES

Customer Copy

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

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

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 25309
 8042055482

Cashier: Nancy B
 Transaction 202176
 Total \$276.00
 CREDIT CARD AUTH \$276.00
 VISA 8448
 Tip Inc.
 Total 276.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 276.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 276.00

Retain this copy for statement validation

24-Jan-2017 11:43:12A
 \$276.00 | Method: EMV
 VISA CREDIT XXXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 702400530041
 Auth #: 061624
 MID: *****5998
 AID: A0000000031010
 AuthNtwNm: 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 than 20 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, Judges: Tablt, 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
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 01/25/2017

Date: 1/25/2017 Time: 11:33:31 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 225202
 Tab Number: 100
 Number Of Covers: 25

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>221.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>221.00</u>

Persons: 1, 2, 3, 4, 5, 6, 7, 8,
 9, 10, 11, 12, 13
 Card Owner: garnes/christopher a

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. 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

02/07/2017 11:38:52

CREDIT CARD
 VISA SALE

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Barnes

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Barnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/07/2017

Card # XXXXXXXXXXXXXXX09448
 Chip Card: CITI VISA
 AID: A000000031010
 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. Barnes, 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 2/201

SALE

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

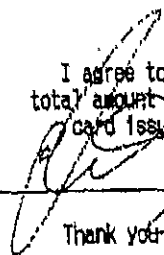
Approval: 045696

Amount: \$ 155
+ Tip: 31.49
= Total: 187.00

PURPOSE/JUSTIFICATION OF FUNCTION:

Conference

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

X 
Thank you for coming :)

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. Games, J. Gundy, H. Dalley,

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 02/13/17 10:49 AM
Check #4 Justice
Tax Exempt

CONTACT PERSON Chris Garnes

Subtotal \$177.64
Total \$177.64

TELEPHONE NUMBER (304) 558-2060

Credit Card Swiped
Via xxxxxxxx8448
Time 11:36 AM

FUNCTION SPONSOR Chris Garnes

Authorization Approved
Approval Code 047456
Check ID
Payment ID vtpuHxxK3

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 02/13/2017

Amount: \$177.64

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 214.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 214.00

+ Tip: 36.36
= 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

PATERNO'S 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 02/14/2017

Cashier: Nancy B
 Transaction 100001
 Total \$189.60
 CREDIT CARD AUTH \$189.60
 VISA 8448
 Tip Inc.
 Total 189.00

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
 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, 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

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 02/15/2017

**south hills market
 and café**
 SOUTH HILLS

Date: 2/15/2017 Time: 11:31:17 AM

Status: Approved

Card Type: Visa
 Card Number: XXXXXXXXXXXX3448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 228104
 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	<u>43.57</u>

TOTAL 254.00
 Approval: 080601

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. Dalley, 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

02/27/2017

11:22:57

CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX0448
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 0057
 TC: 3C491CA78691F25B
 SEQ #: 1
 Batch #: 783
 INVOICE SERVER 5515
 Approval Code: 014451
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

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 02/27/2017

PRE-TIP AMT \$213.36
 TIP \$0.00

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 213.36
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 213.36

TOTAL AMOUNT \$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. Games, 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.genesiscafewv.com

Mar 6, 2017
 11:36 AM
 Josephine

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 03/06/2017

Ticket: Court
 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	\$ _____
LOGGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>83.65</u>

Deli Sandwich x 2 (\$7.25 each)	\$14.50
Rockin BBQ x 2 (\$7.50 each)	\$15.00
Bowl Of Fruit x 2 (\$3.60 each)	\$7.00
Cuban Jazz	\$6.25
Pancit Canton	\$8.50
Lumpia	\$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

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
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 658-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 03/07/2017

Server: Jessie DOB: 03/07/201
11:50 AM 03/07/201
Wv State/1 2/2001

SALE

VISA 209711
 Card #XXXXXXXXXXXX8448
 Magnetic card present: GARNES CHRISTOPHE
 Card Entry Method: S

Approval: 039719

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	\$ <u>218.79</u>

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

X _____
 Thank you for coming! :)

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. 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 03/20/2017

SOHO'S
 800 SMITH ST
 CHARLESTON, WV 25301
 03/20/2017 11:24:52
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXX18148
 Chip Card: CITI VISA
 AID: X0009000031010
 ATC: 003A
 TC: 584E549F802FE79
 SEQ #: 1
 Batch #: 818
 INVOICE: 1
 SERVER: 5535
 Approval Code: 015427
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>190.08</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>190.08</u>

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 Games
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Games
 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: games/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 18.00
TOTAL 106.23
 Approval: 060816

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. Davis

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
 CONTACT PERSON Chris Garnes
 TELEPHONE NUMBER (304) 558-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 04/05/2017

Date: 4/5/2017 Time: 11:38:01 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Anthony
 Check Number: 228031
 Tab Number: 600
 Number Of Covers: 18
 Persons: 1, 2, 3, 4, 5, 6, 7, 8, 10, 11, 12, 13
 Card Owner: GARNES/CHRISTOPHER A

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: 051264

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, 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

The Block Restaurant & Wine Dellar
201 Capital Street
Charleston, WV 25301
ph (881) 265-8074

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 - 2 Guests
Server: Cara
4/18/2017 11:24:39 AM
Sequence #: 0000001
ID #: 011E984

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 : xxxx xxxx xxxx 8448
Approval : 1007817
Server : Cara
Ticket Name : Courthouse TOGO

Payment Amount: \$113.75

Tip: 23.25

Total: 137.00

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

Thank you for visiting!

ESTIMATED EXPENSES

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

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):

M. Ketchum, A. Loughry, B. Walker, 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

PATERNOS AT THE PARK
601 MORRIS ST
CHARLESTON, WV 25309
3042065482

Cashier: Sydney S
Transaction 100000

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 04/19/2017

Total \$183.50
CREDIT CARD AUTH \$183.50
VISA 8448
Tip Inc.
Total 183.00

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 183.60
MEETING ROOM	\$
EQUIPMENT RENTAL	\$
LODGING	\$
OTHER/	\$
OTHER/	\$
TOTAL	\$ 183.60

19-Apr-2017 11:38:15A
\$183.50 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 710900556061
Auth #: 097089
MID: *****5998
AID: A0000000031010
AuthNwNm: 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, 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

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 04/25/2017

Date: 4/25/2017 Time: 11:28:47 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Cheyan
 Check Number: 228789
 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. Ketohum, A. Loughry, B. Walker, J. Reeder, J. Stover, R. Melvin, W. Humphrey
 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

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

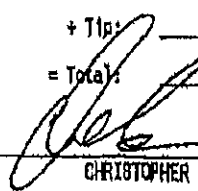
Take Out

Larghe Order DOKNT MAKE

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 05/02/2017

Server: Tiffany C 05/02/17 11:25 /
 Check #6 Larghe Order DOKNT MAKE
 Tax Exempt
 Subtotal \$156.
 Total \$156.
 Credit Card Slip
 Visa xxxxxxxx84
 Time 11:28
 Authorization Approv
 Approval Code 0084
 Check ID
 Payment ID 9kp68rT

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

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. Games, J. Gundy, H. Dalley

Customer Copy

Thanks for visiting Adelphia Sports Bar & Grill
 Please come again

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) 286-9074

STATE OF WEST VIRGIN
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 #: 0115818

ITEM	QTY	PRICE
Subtotal		\$129.7
Grand Total		\$129.7
Credit Purchase		
Name	:GARNES/CHRISTOPHER A	
CO Type	:VISA	
CO Num	:XXXX XXXX XXXX 8448	
Approval	:023980	
Server	:Cara	
Ticket Name	:Supreme Court TOGO	

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 160.0
MEETING ROOM	\$
EQUIPMENT RENTAL	\$
LODGING	\$
OTHER/	\$
OTHER/	\$
TOTAL	\$ 160.0

Payment Amount: \$129.7

Tip: 30.25
Total: 160.00

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. Dalley

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

22

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

PATERNOS AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 26309
 3042065482
 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 Jac
 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 XXXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 713600665511
 Auth #: 065159
 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. Ganes, 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

SONOS
 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 # XXXXXXXXXXXXXXX0848
 Chip Card: CITI VISA
 AID: A0000010031010
 ATC: NOF
 TC: 6876456EA389006A
 SEQ #: 1
 Batch #: 4
 Trans #: 1
 SERVER: 5515
 Approval Code: 034411
 TRANS ID: 007137554720233
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

TELEPHONE NUMBER (304) 558-2060

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 05/17/2017

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>207.66</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>207.66</u>

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. Ketohum, 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**

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 05/23/2017

Date: 5/23/2017 Time: 11:20:30 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXXB448
 Expiration Date: X/XX/XXXX
 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: ganes/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 36.75
TOTAL 184.00
 Approval: 019248

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

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

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

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

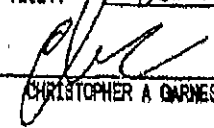
Take Out
Ready At 11:30 Courthouse

SPENDING UNIT NAME/ORG # Supreme Court of Appeals
CONTACT PERSON Chris Games
TELEPHONE NUMBER (304) 558-2060
FUNCTION SPONSOR Chris Games
LOCATION OF FUNCTION Justices' Chambers
DATE(S) OF FUNCTION 05/31/2017

Server: Tiffany D
Check #2
Tax Exempt

05/31/17 10:50 /
Ready At 11:30 Courthouse
Subtotal \$208
Total \$208
Credit Card SW1
VISA XXXXXXXX08
Time 11:29
Authorization Apprb
Approval Code 03B
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. GAMES

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, J. Stover, C. Games, J. Gundy, G. Johnson, C. Morris

Thanks for visiting Adelphia Sports Bar & Grill
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

**south hills market
and café**

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

SOUTH HILLS

CONTACT PERSON Chris Garnes

Date: 6/6/2017 Time: 11:39:16 AM

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Garnes

Card Type: Visa

LOCATION OF FUNCTION Justices' Chambers

Card Number: XXXXXXXXXXXX8448

DATE(S) OF FUNCTION 06/06/2017

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, 18

Card Owner: garnes/christopher a

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ <u>271.30</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>271.30</u>

AMOUNT	<u>223.30</u>
TIP	<u>48.00</u>
TOTAL	<u>271.30</u>
Approval:	<u>015878</u>

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):

Justices, staff, and guests.

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
 3042056482
 Cashier: Employee
 Transaction 100000
 Total \$186.00
 CREDIT CARD AUTH \$186.00
 VISA 8448
 Tip Tip
 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 11:42:09A
 \$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

**south hills market
and café**

SOUTH HILLS

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

CONTACT PERSON Chris Garnes

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

TELEPHONE NUMBER (304) 558-2060

Status: Approved

FUNCTION SPONSOR Chris Games

Card Type: Visa
Card Number: XXXXXXXXXXXX8448

LOCATION OF FUNCTION Justices' Chambers

Expiration Date: X/XX/XXXX

DATE(S) OF FUNCTION 10/18/2017

Server Name: Tasha

Check Number: 235161

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	<u>178.68</u>
TIP	<u>37.32</u>
TOTAL	<u>216.00</u>

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. 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

PATERNO'S AT THE PARK
 601 MORRIS ST
 CHARLESTON, WV 26309
 3042055482

Cashier: Nancy B
 Transaction 100000

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 10/17/2017

Total \$175.20
 CREDIT CARD AUTH VISA 8448 \$175.20
 Tip WLC
 Total 175.20

Retain this copy for statement validation

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$	<u>175.20</u>
MEETING ROOM	\$	_____
EQUIPMENT RENTAL	\$	_____
LODGING	\$	_____
OTHER/	\$	_____
OTHER/	\$	_____
TOTAL	\$	<u>175.20</u>

17-Oct-2017 11:23:34A
 \$175.20 | Method: EMV
 VISA CREDIT XXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 729000608881
 Auth #: 090058
 MID: *****5998
 AID: A0000000031010
 AthNwNm: 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, 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

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

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

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

10/11/2017 07:32:59
MID: XXXXXXXXXXXXXXX689 TRD: XXXXXX156

CONTACT PERSON Chris Garnes

CREDIT CARD
VISA REFUND

TELEPHONE NUMBER (304) 558-2060

Card # XXXXXXXXXXXXXXX9448
SEQ #: 2
Trans #: 2
SERVER 1438
Approval Code: 011158
Entry Method: Chip Read
Mode: Online

FUNCTION SPONSOR Chris Garnes

LOCATION OF FUNCTION Justices' Chambers

DATE(S) OF FUNCTION 10/11/2017

REFUND AMOUNT \$201.78

ESTIMATED EXPENSES

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

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

The Block Restaurant & Wine Cellar
 201 Capital Street
 Charleston, WV 25301
 ph (881) 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 10/03/2017

TABLE: Vicki W. #74 - 11 Guests
 Server: Vicki W.
 10/8/2017 11:35:40 AM
 Sequence #: 000001
 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	\$ 167.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 167.00

Payment Amount: \$138.85
 Tip: 28.15
 Total: 167.00

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, 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

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 304-550-426

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 10/02/2017

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

Subtotal \$166.20
Total \$166.20

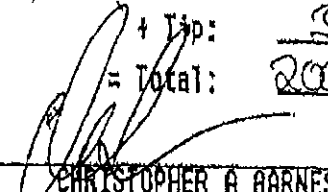
Credit Card Swiped
Visa XXXXXXXX8448
Time 11:34 AM

Authorization Approved
Approval Code 064418
Check ID
Payment ID XpJNTqrsccpr

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. BARNES

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, R. Melvin, W. Humphrey, J. Stover, V. Shafer, J. Stevenson, C. Garnes, J. Gundy, G. Johnson

Customer Copy

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

**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: 11:23:28 AM
 Status: Approved
 Card Type: Visa
 Card Number: XXXXXXXXXXXX8448
 Expiration Date: X/XX/XXXX
 Server Name: Tasha
 Check Number: 233996
 Tab Number: 100
 Number Of Covers: 25
 Persons: 1, 2, 3, 4, 5, 6, 7, 9, 10, 11, 12
 Card Owner: games/christopher

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 217.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 217.00

AMOUNT	179.43
TIP	32.57
TOTAL	212.00
	Approval: 085918

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

SOHOS
 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 # XXXXXXXX000008448
 Chip Card: CITI VISA
 AID: A8000000031010
 ATC: 0085
 YC: 2A7766A4F7FF9E5
 SEQ #: 1
 Batch #: 7
 Trans #: 1
 SERVER 5515
 Approval Code: 089394
 TRANS ID: 467242557761334
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypass

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>190.14</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER	\$ _____
OTHER	\$ _____
TOTAL	\$ <u>190.14</u>

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

41

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: 11:28:35 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: 25
 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: 076898

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

42

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: Brianna W
Check #1
Tax Exempt

09/12/17 11:11 AM
Court

SPENDING UNIT NAME/ORG # Supreme Court of Appeals

Credit Card
Visa
Time

Swiped
xxxxxxx0448
11:42 AM

CONTACT PERSON Chris Garnes

Authorization
Approval Code

Approved
052464

TELEPHONE NUMBER (304) 658-2060

Check ID
Payment ID

dy00pID)Q

FUNCTION SPONSOR Chris Garnes

Amount: \$181.00

LOCATION OF FUNCTION Justices' Chambers

+ 1 tip
= Total: 39.00
220.00

DATE(S) OF FUNCTION 09/12/2017

X 
CHRISTOPHER A. GARNES

ESTIMATED EXPENSES

FOOD AND BEVERAGE	\$ 220.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 220.00

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. Dailey

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

43

The Block Restaurant & Wine Cellar
201 Capital Street
Charleston, WV 25301
ph (681) 266-6074

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION
TRAVEL MANAGEMENT OFFICE
REQUEST FOR HOSPITALITY SERVICE

TABLE: Wvso - 11 Guests
Server: Zach
9/13/2017 11:31:45 AM
Sequence #: 0000002
ID #: 0128701

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 09/13/2017

ITEM	QTY	PRICE
Subtotal		\$140.80
Grand Total		\$140.80

Credit Purchase
Name : GARNES/CHRISTOPHER A
CO Type : VISA
CO Num : xxxxx xxxxx xxxxx 8448
Approval : 013832
Server : Zach
Ticket Name : Wvso

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ 171.00
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ 171.00

Payment Amount: \$140.80

Tip: 30.40
Total: 171.00

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. Dalley

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

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

09/18/2017

11:42:57

CREDIT CARD
 VISA SALE

Card #: XXXXXXXXXXXXXXX18418
 Chip Card: CITI VISA
 AIC: A0000000031810
 ATC: 0080
 TC: 163200233660140
 SEQ #: _____
 Batch #: _____
 Trans #: _____
 SERVER: 551
 Approval Code: 06637
 TRANS ID: 30726156527858
 Entry Method: Chip Req
 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. Ketohum, 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

43

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

PATEROS 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 XXXXXXXXXXXXXXX8448
 CHRISTOPHER A GARNES
 Ref #: 726200602811
 Auth #: 012046
 MID: *****5998
 AID: A0000000031010
 AuthNtwNm: 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. Games, 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 10/31/2017

SOHOS
 800 SMITH ST
 CHARLESTON, WV 25301
 304-720-7646
 10/31/2017 07:44:31
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXXXXX01948
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 00A6
 TC: 3172A1757B5FECDE
 SEQ #: 1
 Batch #: 4
 Trans #: 1
 SERVER 5515
 Approval Code: 003762
 TRANS ID: 4673045558500307
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

ESTIMATED EXPENSES

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

SALE AMOUNT \$192.48
 TIP AMOUNT Inc \$0.00
 TOTAL AMOUNT \$192.48

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. Walker, R. Melvin, J. Stover, V. Shafer, J. Stevenson, C. Games, J. Gundy, H. Dalley

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

SOHO'S
 800 SMITH ST
 CHARLESTON, WV 25301
 02/17/2017 11:30:05
 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 02/17/2017

Card # XXXXXXXXXXXXXXX844E
 Chip Card: CITI VISA
 AID: A000000003101C
 ATC: 0084
 TC: 672E446B1192A9A3
 SEQ #: 1
 Batch #: 761
 INVOICE SERVER 551
 Approval Code: 02281
 Entry Method: Chip Rea
 Mode: Issuer - PIN Bypass

PRE-TIP AMT \$155.0
 TIP —
 TOTAL AMOUNT 155.00

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>155.04</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>155.04</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, 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

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 Lexington Street
 Charleston, WV 25301
 Phone:
 www.piesandprints.net

Orch#1
 TO GO
 Emp1: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 Piu	16.00
1 Large Pizza Piu	16.00
1 Large Pizza Piu	16.00
1 Large Pizza Piu	16.00
Pepperoni	2.50
1 Large Pizza Piu	16.00
Pepperoni	2.50
1 Large Pizza Piu	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 B/LAB Payment	191.50
Tip	<u>40.50</u>
Total	<u>232.00</u>

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

*** Guest Copy ***

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, 8, 7, 8, 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	<u>202.33</u>
TIP	<u>43.67</u>
TOTAL	<u>246.00</u>
Approval:	<u>044904</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):
 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

CUSTOMER COPY

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
FUNCTION REPRESENTATIVE'S SIGNATURE

DATE

By: _____
AGENCY HEAD SIGNATURE

DATE

50

TMO 3 Form - Rev. 01/2008



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

TAKE OUT ORDERING ON-LINE @
 adelphisportsbar.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 304-558-2

Server: BrieAnna W 10/23/
 Check #1 11:09
 Tax Exempt
 Subtotal \$149.
 Total \$149.
 Credit Card
 Visa. Swi
 Time xxxxxxxx84
 11:41

ESTIMATED EXPENSES	
FOOD AND BEVERAGE	\$ <u>174.00</u>
MEETING ROOM	\$ _____
EQUIPMENT RENTAL	\$ _____
LODGING	\$ _____
OTHER/	\$ _____
OTHER/	\$ _____
TOTAL	\$ <u>174.00</u>

Authorization Approval Code Approv
 Check ID 02594
 Payment ID TkJYcWFyJNf

Amount: \$149.5
 + Tip: 30.4
 = Total: 174.0

X
 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. Ketohum, A. Loughry, G. Johnson, R. Melvin, W. Humphrey, J. Stover,
 V. Shafer, J. Stevenson, C. Garnes, J. Gundy

Customer Copy

AGENCY AUTHORIZATION FOR THE ABOVE FUNCTION

By: _____
 FUNCTION REPRESENTATIVE'S SIGNATURE

 DATE

By: _____
 AGENCY HEAD SIGNATURE

 DATE

TMO 3 Form - Rev. 01/2008

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) 658-2060
 FUNCTION SPONSOR Chris Garnes
 LOCATION OF FUNCTION Justices' Chambers
 DATE(S) OF FUNCTION 11/13/2017

ESTIMATED EXPENSES

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

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

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

11/13/2017 12:31:57
 CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX148
 Chip Card: CITI VISA
 AID: A0000000031010
 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 \$160.66
 TIP AMOUNT Inc.
 TOTAL AMOUNT 160.66

THANK YOU
 CUSTOMER COPY

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

11/13/2017 13:20:05
 CREDIT CARD
 VISA SALE

Card # XXXXXXXXXXXXXXX148
 Chip Card: CITI VISA
 AID: A0000000031010
 ATC: 00AF
 TC: C69C377B5EE42204
 SEQ #: 5
 Batch #: 3
 Trans #: 5
 SERVER: 5515
 Approval Code: 015304
 TRANS ID: 387317622221506
 Entry Method: Chip Read
 Mode: Issuer - PIN Bypassed

SALE AMOUNT \$19.14
 TIP AMOUNT Inc.
 TOTAL AMOUNT 179.82

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 11/14/2017

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

ESTIMATED EXPENSES

FOOD AND BEVERAGE \$ 120.00

MEETING ROOM \$ _____

EQUIPMENT RENTAL \$ _____

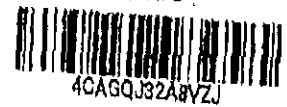
LOGGING \$ _____

OTHER \$ _____

OTHER \$ _____

TOTAL \$ 120.00

14-Nov-2017 11:36:29A
\$120.00 | Method: EMV
VISA CREDIT XXXXXXXXXXXX8448
CHRISTOPHER A GARNES
Ref #: 731800616241
Auth #: 059544
MID: *****5998
AID: A0000000031010
AuthN: wknm: 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 more must accompany the form):

M. Workman, M. Ketchum, A. Loughry, R. Melvin, W. Humphrey,
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