# THE COMMUNITY COUNCIL

*for Nash, Edgecombe & Rocky Mount*

RECEIVED
SEP 11 2014
BY: 39

September 10, 2014

Edgecombe County
Lorenzo Carmon, County Manager
PO Box 10
Tarboro, NC 27886

Dear Mr. Carmon,

Pursuant to the state open records law, N.C. Gen. Stat. Secs. 132-1 to 132-10, we request access to and a copy of all expenses paid directly or indirectly on behalf of the Edgecombe County Manager and all Commissioners for the past five (5) years. Information should be itemized per individual to include but not limited to travel, schools, conferences, lodging and meals. If your agency does not maintain these public records, please let us know who does and include the proper custodian's name and address.

Pursuant to 132-6.2(b), the costs associated with this request are limited to direct, chargeable costs related to the reproduction of a public record. 132-6.2(a) provides that we may obtain these records in electronic format. We request for this information to be provided in electronic format, on a disk or thumb drive, which should limit those costs to a minimal amount. If you believe that the charges will exceed $30.00, please contact me at (252) 977-1131 so that we can discuss alternatives for delivery of this information.

We request your response within ten (10) business days.

If you choose to deny this request, please provide a written explanation for the denial including a reference to the specific statutory exemption(s) upon which you rely. Also, please provide all segregable portions of otherwise exempt material.

Please be advised that we are prepared to pursue whatever legal remedy necessary to obtain access to the requested records. Also note that violation of the open records law can result in the award of reasonable attorney fees, for which you may be held personally liable. See N.C. Gen. Stat. Sec. 132-9(c).

Thank you for your assistance.

Sincerely,

Lige Daughtridge
Board President

252.977.1131

PO Box 4115
Rocky Mount, NC 27803
info@TheCommunityCouncil.org

www.TheCommunityCouncil.org

| ITEM # | STANDARD-2: BUDGET, FISCAL AND PAYROLL RECORDS | | |
|---|---|---|---|
| | *RECORD SERIES TITLE* | *DISPOSITION INSTRUCTIONS* | *CITATION* |
| 35. | **GRANTS: FINANCIAL**<br>Records concerning approved federal, state, and private grants. May include all relevant accounting, purchasing, payroll, and financial records.<br><br>See Also **GRANTS** Item 28, page 5. | Destroy in office after 5 years after submission of final report.* | |
| 36. | **INSURANCE FILE**<br>Certificates of insurance and related records provided by insurance provides as proof of coverage.<br><br>See also **BILLING AND CLAIMS** Item 11, page 14.<br>See also **GRANTS: FINANCIAL** Item 35, page 17. | Destroy in office 3 years from date of termination, expiration, or settlement of all claims.* | |
| 37. | **INVESTMENT RECORDS**<br>Includes fund information, portfolio listings and reports, balance sheets, requests to invest and withdrawal, notices, and other related account activity documentation. | Destroy in office after 3 years.* | G.S. § 159-30 |
| 38. | **INVOICES** | Destroy in office after 3 years.* | |
| 39. | **LOCAL GOVERNMENT COMMISSION FINANCIAL STATEMENTS** | Destroy in office after 3 years.* | G.S. §159-33 and §159-33.1. |
| 40. | **LOCAL GOVERNMENT EMPLOYEES RETIREMENT SYSTEM MONTHLY REPORTS** | Destroy in office after 3 year.* | |
| 41. | **MONTHLY BUDGET REPORTS** | Destroy in office after 2 years.* | |
| 42. | **PAID CHECKS, BILLS AND VOUCHERS** | Destroy in office after 3 years.* | |

**See AUDITS, LITIGATION AND OTHER OFFICIAL ACTIONS, page v.*

XXXX XXXX XXXX 3446

# Business Card

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 09/05/12 |
| New balance | $1,329.60 |
| Minimum payment | $20.00 |
| Due date | 09/30/12 |

Questions?
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $1,504.73 |
| Payment received on 08/16/12 - thank you | $1,504.73 |
| Purchases | $1,329.60 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$1,329.60** |
| **Minimum payment** | **$20.00** |
| **Due date** | **09/30/12** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $8,670.00 |
| Cash advance available credit | $2,500.00 |

V27273 R2

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 08/16 | 08/16 | 7443603KN9YHJW5KS | BRANCH PAYMENT*THANK YOU WILMINGTON DE | $1,504.73- |
| **Total** | | | | **$1,504.73-** |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 08/17 | 08/17 | 2421073KP61GAXLPH | ICMA INTERNET 202-962-3547 DC<br>MCC: 7392 MERCHANT ZIP: 20002 | $770.00 |
| 08/19 | 08/19 | 2461043KR03RZ13L2 | MARRIOTT 33768 RALEIGH RALEIGH NC<br>MCC: 3509 MERCHANT ZIP: 27612<br>LODGING CHECK-IN DATE: 08/16/12 | $335.43 |

10 4110 5311 00

(continued on next page)



PAID

## ur transactions (continued)

| ANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 08/20 | 08/20 | 2461043KT03RZ1867 | MARRIOTT 33768 RALEIGH RALEIGH NC<br>MCC: 3509 MERCHANT ZIP: 27612 | $134.17 |
| 08/31 | 08/31 | 2401339L500061W7B | ROCKY MOUNT AREA CHAMBER ROCKYMOUNTCHA NC<br>MCC: 8641 MERCHANT ZIP: 27802 | $90.00 |
| **Total** | | | | **$1,329.60** |

## Your finance charges

| TYPE OF BALANCE | CORRESPONDING ANNUAL PERCENTAGE RATE (APR) | DAILY PERIODIC RATE (MAY VARY) | DAYS IN BILLING | AVERAGE DAILY BALANCE | FINANCE CHARGE |
|---|---|---|---|---|---|
| Purchases | 13.240% | 0.03628% | 30 | $0.00 | $0.00 |
| Cash advances | 19.990% | 0.05477% | 30 | $0.00 | $0.00 |
| | | | | | $0.00 |

PAID

**Fran Mungo**

**From:** customerservices@icma.org
**Sent:** Friday, August 17, 2012 3:57 PM
**To:** lcarmon@co.edgecombe.nc.us
**Subject:** 2012 ICMA Annual Conference Receipt

ICMA

*Leaders at the Core of Better Communities*

**Your registration completed successfully!**

**Print this page as a record of your payment.**

Thank you for your payment.
We look forward to seeing you at the Annual Conference.

**Receipt**
International City/County Management Association
777 North Capitol Street, NE
Suite 500
Washington, DC 20002-4201
202-289-4262
Federal ID #36-2167755
Date 08.17.2012

Lorenzo Carmon
County Manager
County of Edgecombe
PO Box 10
Tarboro
NC 27886-0010

| Item | No. | Fee | Amount | Card 1 | Card 2 |
|---|---|---|---|---|---|
| **Registration** | | | | | |
| Base Registration | 1 | $680 | | X | |
| Partner Registration | 1 | $90 | | X | |
| Registration subtotal | | | **$770** | | |
| **ICMA University Workshops** | | | | | |
| No ICMA University Workshops were chosen. | | | | | |
| **ICMA University Forums** | | | | | |
| No ICMA University Forums were chosen. | | | | | |
| **Conference Events** | | | | | |
| Welcoming Reception: Arizona Sports (Two tickets are included in your registration fee.) | 2 | no charge | | | |
| Conference Events subtotal: | | | **$0** | | |
| | | | | | |

Warrant #: 092112 Check Number: 00327884 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/21/2012 | 090512 | PAYMENT #3446 | $1,329.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00327884 | 09/21/2012 | 1,329.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 09/21/2012 | 00327884 |

**$1,329.60**

*Pay* One Thousand Three Hundred Twenty Nine Dollars and 60 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00327884⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00327884

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

Marriott.
HOTELS & RESORTS

RALEIGH CRABTREE MARRIOTT

GUEST FOLIO

538 CARMON/LORENZO 119.00 08/19/12 12:00 8236
ROOM NAME RATE DEPART TIME ACCT#
NCKG EDGECOMBE COUNTY 08/16/12 22:42
TYPE ARRIVE TIME
72 P O BOX 10 PASSPORT:
ROOM TARBORO NC VSXXXXXXXXXXXX3453
CLERK 27886 PAYMENT RWD#:
ADDRESS

| DATE | REFERENCE | | CHARGES | CREDITS | BALANCE DUE |
|---|---|---|---|---|---|
| 08/16 | ROOM | 538, 1 | 119.00 | | |
| 08/16 | ROOMTAX | 538, 1 | 8.03 | | |
| 08/16 | OCCTAX | 538, 1 | 7.14 | | |
| 08/17 | ROOM | 538, 1 | 119.00 | | |
| 08/17 | ROOMTAX | 538, 1 | 8.03 | | |
| 08/17 | OCCTAX | 538, 1 | 7.14 | | |
| 08/18 | ROOM | 08/18 | 59.50 | | |
| 08/18 | ROOMTAX | 08/18 | 4.02 | | |
| 08/18 | OCCTAX | 08/18 | 3.57 | | |
| 08/18 | CCARD-VS | | | 335.43 | |
| SETTLED TO: | | VISA | | XXXXXXXXXXXX3453 | |
| | | | | | .00 |

---------- EXP. REPORT SUMMARY ----------

| | | |
|---|---|---|
| 08/16 | ROOM&TAX | 134.17 |
| 08/17 | ROOM&TAX | 134.17 |
| 08/18 | ROOM&TAX | 67.09 |

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
LCARMON@CO.EDGECOMBE.NC.US
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

Marriott.
HOTELS & RESORTS

RALEIGH CRABTREE MARRIOTT
4500 MARRIOTT DRIVE
RALEIGH:, NC 27612

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after check-out, you will owe us interest from the check-out date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X _____

The Chamber & Braswell Foods

Rocky Mount Area Chamber of Commerce

ORDER NOW!!! THIS EVENT WILL SELL OUT EARLY!!!

Invite you to the

# 22nd Annual Fall Outing

**September 13, 2012**

**Rose Hill Conference Center**

**6:00 p.m. - 10:00 p.m.**

**Food served 6:00 - 8:00 p.m.**

**Band 7:00 - 10:00 p.m.**

Rain or Shine

Must be 21 years of age or older

## LIQUID PLEASURE

ENTERTAINMENT SPONSOR:

BAILEY'S FINE JEWELRY

In an industry where the average life of a band is about five years, Liquid Pleasure has set a new standard...after more than two decades of bringing audiences to their feet, the band LIQUID PLEASURE, has become a multi-cultural icon. From the beginning to the present, LIQUID PLEASURE has followed a dedicated path to fame - not as recording artists but as entertainers on the dance and show circuit.

In the early years the band was paired with greats like, Chuck Berry, Eddie Floyd and Ben E. King and later, Whitney Houston, The Four Tops, TheTempations and Aretha Franklin. LIQUID PLEASURE today continues to set new standards–with no album high on the charts to boost them, they are a marketing phenomenon. By word of mouth only, they are the most accomplished band in their circuit. They have performed for Inaugural Balls, Governors, Professional Football events, and more. LIQUID PLEASURE...Bringing Fun and Excitement to People Who Want to Have a Great Time!

Make plans now to join over 600 fellow Chamber members for a great evening of great food and dancing on the grounds of scenic Rose Hill Conference Center.

## EARLY BIRD SPECIAL!

**BUY 10 TICKETS FOR $400... GET 1 FREE AND ENJOY A $50 DISCOUNT!**

**OFFER ENDS 8/31. EARLY BIRD RESERVATIONS MUST BE POSTMARKED BY 8/31**

Warrant #: 102612 Check Number: 00329063 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 10/24/2012 | 1006-1011 | TRAVEL | $889.20 |
| 10/24/2012 | 1006-101112 | PAYMENT FOR PLANE TICKET | -$486.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13760 | LORENZO CARMON | 00329063 | 10/26/2012 | 403.20 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13760 | 10/26/2012 | 00329063 |

**$403.20**

*Pay* Four Hundred Three Dollars and 20 cents ******

*To The Order Of* LORENZO CARMON

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00329063⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00329063

LORENZO CARMON
1801 BARLOW ROAD
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Lorenzo Carmon

Trip to: Phenoix

Purpose of trip: EMA conference

Date(s) of travel: 10-6 / 10-11-12

V #13760

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | 8 | 9 | 10 | 11 | | 6 | 7 | |
| Hotel | | | | | | | | |
| Breakfast | 19.23 | 7.00 | 15.00 | 19.00 | | | 11.00 | 71.23 |
| Lunch | 20.65 | 14.13 | 11.00 | | | 17.00 | 13.00 | 75.78 |
| Dinner | — | 38.00 | 8.01 | | | 21.53 | 45.00 | 112.54 |
| Taxi/Bus | 74.00 | 90.00 | 70.00 | | | | 90.00 | 324.00 |
| Auto Allowance | | 130 x .555 | | | | | 72.15 | ~~94.~~ 72.15 |
| Parking | | | | | | | | 41.50 |
| Telephone | | | | | | | | |
| Baggage | | | | 97.00 | | 95.00 | | 192.00 |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | 889.20 |
| TOTAL | | | | | | | | ~~961.35~~ PH |

Account Number 104110531100

Due to Employee $ ~~475.35~~ 403.20

plane ticket - 486.00

~~475.35~~

403.20

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature [signature]

Date 10-22-12

Approved [signature]

Date

PAID

**MAYFLOWER CAB CO., LLC**

From .................................... To ....................................

Amount ...... 50.00

Date ...... 10-8-12

Driver ID ....................................

24 Hour Service

10% OFF Return to Airport

RECEIPT

10/09/2012 03:30 PM

**METRO**

Jefferson/1st Ave

FVM 115101

DEBIT CARD SALE

XXXXXXXX6415

AUTH # 519346

BANK REF# 3573

PAID AMT $7.00

Trans no 154288

Trace# 1412

All Day Local

Local Full

Phoenix, AZ

TRANSTYLE

TRANSPORTATION IN STYLE

• Shopping • Evenings Out • Hourly Rates & Tours • Personal Chauffeurs

CHAUFFEUR

Res. (480) 948-6131 & (800) 410-5479 • Fax (480) 948-6562

www.transtyle.com

Community Cab

Courteous, Clean, On-Time, Affordable!!

480-644-1000

24 / 7 Service

Make your online reservations at www.ccarizona.com

Driver Name ____________________

Driver Phone # ____________________

On your next trip - present this receipt to your Community Cab driver - and receive a 10% discount

**ExecuCar**

602-232-4600

800-410-4444 Group Booking 602-232-4659

Book on line @ www.execucar.com

Locations: Atlanta, Austin, Baltimore, Boston, Burbank, Chicago, Dallas, Denver, Houston, Kansas City, Las Vegas, Los Angeles, Minneapolis, Nashville, New York, Oakland, Ontario-CA, Orange County-CA, Orlando, Philadelphia, Phoenix, Pittsburgh, Raleigh, Sacramento, San Diego, San Francisco, Seattle, Tampa and Washington DC

| PERSONS | DATE | CHECK NO. | AMOUNT |
|---|---|---|---|
| | 10-7-12 | 8206-17 | 42.00 tip 3.65 |

**$3.00 OFF*** Any Fare Over $10.50

$15 AS LOW AS TO THE AIRPORT (Call for details)

Yellow Cab

480-888-8888

www.yellowcabaz.com

| PERSONS | DATE | CHECK NO. | AMOUNT |
|---|---|---|---|
| | 10-9-12 | 8211-28 | 36.00 2.38 |

Gues

| TABLE NO. | PERSONS |
|---|---|

BEV • APPET • SOUP/SA

10—

13.

1.0

14.1

TAX

TOTAL

Thank You -

adams 525

Gues

| SERVER | TABLE |
|---|---|

10—

Thank Yo

adams 210

Check

NO | CHECK NO. 8204 - 2

ENTREE • VEG • DESSERT

12

0

0

0

ll Again

---

Guest Check

| SERVER | TABLE | GUESTS | CHECK NUMBER |
|---|---|---|---|
| | | | 442500 |

10-7-12

11.00

2.00

13.00

TAX

Thank You TOTAL

adams 210

---

Guest Check

| TABLE NO. | PERSONS | SERVER NO. | CHECK NO. |
|---|---|---|---|
| | | | 8204 - 1 |

BEV • APPET • SOUP/SALAD • ENTREE • VEG • DESSERT

10-8-12

19.65

2.00

20.65

TAX

TOTAL

Thank You — Call Again

adams 525

---

Atlantic Forms & Systems (516) 827-5680

Imprint Date

Top White Copy Passenger Receipt – Second Yellow Copy Driver Voucher

TaxiPass Satisfaction Guaranteed

$100 Maximum Voucher Value

customerservice@taxipass.com

Date:

Cab #:

To:

From:

Voucher sold by TaxiPass, an independent 3rd party service provider. Driver does not charge, collect or receive any portion of TaxiPass fee.

Subtotal: Write amount on the check (Do NOT include fee)

Dollars

Card Charged Subtotal + $3.00 TaxiPass Voucher Fee

Signature

Sub Total

Tip

Fare

TAXI PASS

1-800-[illegible]

1-800-222-7433

Easy Secure Payments, Guaranteed

Carryn Terai

Driver Coin

---

Guest Check

| SERVER | TABLE | GUESTS | CHECK NUMBER |
|---|---|---|---|
| | | | 442824 |

10-6-12

18.53

3.00

21.53

TAX

Thank You TOTAL

adams 210

Void.

2.39

TOTAL 16.26
4.00
20.26

Pre-Flight Raleigh-Durham

A Booth 10/11/12 09:47
Cashier 8
Receipt 088629

Short-term parking tkt
UNCOV - No. 068968
10/06/12 07:55 -
10/11/12 09:47 -
Period 5d1h53'

| | |
|---|---|
| (Parkng) | $46.50 |
| BPR 73 | $( 15.00) |
| Sub Total | $31.50 |
| Parkng | $0.00 |
| Total | $31.50 |

Payment Received
VISA $31.50
XXXXXXXXXXXX7924

Basst 10.00
41.50

All Amounts in USD.
Deliv. Date=Receipt Date

Signature

Steve's
Greenhouse Grill
139 East Adams
Phoenix, AZ 85004
602-252-2742

Server: 10/08/2012
Table 9:49 AM
Guests: 2 10054
Reprint #: 1

| | |
|---|---|
| Water | 0.00 |
| Water | 0.00 |
| Beverage | 2.75 |
| Beverage | 2.75 |
| Cakes and Eggs | 8.00 |
| Sausage | 2.00 |
| Add | |
| Cheddar | 0.50 |
| 2Eggsw/Ham | 8.00 |
| Potatoes | |
| Subtotal | 24.00 |
| Tax | 2.23 |
| Total | 26.23 |
| **Balance Due** | **26.23** |

Try our Local Microbrews
Happy Hour M 3-6 PM
Happy Weekend Specials Too!
Best Tasting Food/Prices!
Late Nite Hrs-Fri/Sat Till 12 AM

HMSHOST
42ND STREET OYSTER BAR
RALEIGH DURHAM INT'L AIRPORT

243987 Mary 2

146/1 GST 2
580
OCT11'12 8:14AM

DINE IN

**** SEAT 1 ****

| | |
|---|---|
| 1 OMLT CAROLINA | 10.50 |
| GRITS | |
| SAUCE ON SIDE | |
| 1 HOT CAKES | 9.00 |
| SAUSAGE | |
| GRITS | |
| 1 COFFEE BAR | 2.69 |
| FIRST RND HOTBEV | |
| 1 COFFEE BAR | 2.69 |
| FIRST RND HOTBEV | |
| 1 JUC BAR | 3.29 |
| JUC PINEAPPLE | |
| VOUCHER | 10.00 |
| VOUCHER | 10.00 |
| VOUCHER | 10.00 |
| AMOUNT PAID | 30.00 |
| TAX 2.18 AMOUNT DU | 0.35 |

******* *******

| | | |
|---|---|---|
| SUBTOTAL | TIP 4.00 | 28.17 |
| TAX | | 2.18 |
| AMOUNT PAID | | 30.00 |
| AMOUNT DUE | | $0.35 |

NK YOU FOR YOUR BUSINESS!

EXPERIENCE

HMS
LABREA
LOS ANGELES

8419 ANGELICA

CHK 168 OCT10

1 TURKEY AVO
1 HAM GRILL

SUBTOTAL
TAX
AMOUNT
Cash
CHANGE

GOT 5 S
Contact LA
or Call

Your order n

10/10/2012
Order: 171280
1 PANDA BOWL
FRIED RI
BROCCOLI
1 AQUAFINA

Warrant #: 112012

Check Number: 00329830



EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 11/19/2012 | 110512 | 3446 | $992.26 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00329830 | 11/20/2012 | 992.26 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 11/20/2012 | 00329830 |

**$992.26**

*Pay* Nine Hundred Ninety Two Dollars and 26 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00329830⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00329830

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

Your account is past due. Visit pnc.com/options where we may have payment options for you, or call 1-888-514-9121 ext 34658.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 11/05/12 |
| New balance | $2,691.51 |
| ❹ Total amount due | $164.26 |
| ❷ Due date | 11/30/12 |

Questions?
pnc.com/accountview
1-800-474-2101

## Your account summary

| | |
|---|---|
| Previous balance | $1,699.25 |
| Payment received | $0.00 |
| Purchases | $1,365.35 |
| Credits | $436.35 |
| Cash advances | $0.00 |
| Late and overlimit fees | $35.00 |
| Finance charges | $28.26 |
| **New balance** | **$2,691.51** |
| **Past due amount - due now** | **$26.00** |
| Minimum payment | $138.26 |
| ❹ **Total minimum payment** | **$164.26** |
| ❺ **Total amount due** | **$164.26** |
| ❷ **Due date** | **11/30/12** |

pd 11/09/12

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $7,308.00 |
| Cash advance available credit | $2,500.00 |

V 27273 (R20)

$992.26

10-4110-5311-00

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 11/05 | 11/05 | | LATE FEE | $35.00 |
| 11/05 | 11/05 | *FINANCE CHARGE* | PURCHASES $28.26 CASH ADVANCE $0.00 | 28.26 |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 10/11 | 10/11 | 2461043MD03TLZLNH | RENAISSANCE HOTEL PHOENIX PHOENIX AZ | $972.22 |
| | | | MCC: 3530 MERCHANT ZIP: 85004 | |
| | | | LODGING CHECK-IN DATE: 10/06/12 | |

PAID

(continued on next page)

## Your transactions (continued)

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 10/26 | 10/26 | 2422443MX2Y34SHLM | 42ND ST OYSTER BAR RALEIGH NC<br>MCC: 5812 MERCHANT ZIP: | $393.13 |
| 10/26 | 10/26 | 7461043MZ231V5VMY | SHERATON RALEIGH HOTEL RALEIGH N CREDIT<br>MCC: 3503 MERCHANT ZIP: 27601 | $145.45- |
| 10/26 | 10/26 | 7461043MZ231V5VN6 | SHERATON RALEIGH HOTEL RALEIGH N CREDIT<br>MCC: 3503 MERCHANT ZIP: 27601 | $145.45- |
| 10/26 | 10/26 | 7461043MZ231V5VYZ | SHERATON RALEIGH HOTEL RALEIGH N CREDIT<br>MCC: 3503 MERCHANT ZIP: 27601 | $145.45- |
| **Total** | | | | **$929.00** |

## Your finance charges

| TYPE OF BALANCE | CORRESPONDING ANNUAL PERCENTAGE RATE (APR) | DAILY PERIODIC RATE (MAY VARY) | DAYS IN BILLING | AVERAGE DAILY BALANCE | FINANCE CHARGE |
|---|---|---|---|---|---|
| Purchases | 13.240% | 0.03628% | 31 | $2,512.28 | $28.26 |
| Cash advances | 19.990% | 0.05477% | 31 | $0.00 | $0.00 |
| | | | | | $28.26 |

## Important information - please read

REMINDER TO A VALUED CUSTOMER, PLEASE PAY THE PAST DUE AMOUNT IF NOT ALREADY DONE. MAKE A PAYMENT ONLINE AT PNC.COM/ACCOUNTVIEW.

**Fran Mungo**

**From:** Expedia Travel Services [usmail@expediamail.com]
**Sent:** Wednesday, September 26, 2012 12:11 PM
**To:** lcarmon@co.edgecombe.nc.us
**Subject:** Expedia travel confirmation - Oct 06, 2012 - (Itin# 150964444662)

## Travel Confirmation

Thank you for booking your trip with Expedia. This email is your receipt for the travel item(s) you just booked.

Remember that you can always view your itinerary online for the most up-to-date information.

### Flight: Raleigh to Phoenix

| | |
|---|---|
| Total ticket cost: | $822.34 |
| Taxes & Fees: | $149.66 |
| **Airfare total:** | **$972.00** |

**Traveler names:** Lorenzo Carmon, Addie Carmon

| | | |
|---|---|---|
| Raleigh (RDU) to Houston (IAH) | 10/06/12 11:25 AM - 1:20 PM | UNITED 4485 Operated By: /EXPRESSJET AIRLINES DBA UNITED EXPRESS |
| Houston (IAH) to Phoenix (Sky Harbor Intl.) | 10/06/12 2:28 PM - 3:23 PM | UNITED 1607 |
| Phoenix (Sky Harbor Intl.) to Los Angeles (LAX) | 10/10/12 10:35 AM - 12:00 PM | UNITED 6275 Operated By: /SKYWEST DBA UNITED EXPRESS |
| Los Angeles (LAX) to Houston (IAH) | 10/10/12 12:38 PM - 5:51 PM | UNITED 1738 |
| Houston (IAH) to Raleigh (RDU) | 10/10/12 7:26 PM - 11:09 PM | UNITED 1658 |

The airline may charge additional fees for checked baggage or other optional services

## Special requests

Free and special meals are not available on many flights.

View your itinerary for complete and up-to-date trip details, or to make changes online.

## Customer Support

**Itinerary number: 150964444662**

If you have questions about your reservation, fill out our itinerary assistance form. We'll respond within 24 hours. For immediate assistance call Expedia.com at 1-877-261-3523 and have the itinerary number ready.

## What else can we help you with?

### Save on hotels in Phoenix

Search for more hotels

42nd Street Oyster Bar
Corner of Jones & West St
Raleigh, North Carolina
919-831-2811

| | |
|---|---|
| Server: Jaclyn | 10/25/2012 |
| Table 135/1 | 6:55 PM |
| Guests: 14 | 50001 |
| Live Maine Lobster | 31.95 |
| Din Combo 2 | 22.95 |
| Iced Tea (5 @1.95) | 9.75 |
| Clam Chowder, Cup (3 @3.55) | 10.65 |
| 42nd St Sea Platter (2 @28.95) | 57.90 |
| 42nd St Crab Cake | 24.95 |
| D Sea Fett | 19.95 |
| Diet Pepsi (2 @1.95) | 3.90 |
| Din Shrimp (2 @19.95) | 39.90 |
| Pepsi (2 @1.95) | 3.90 |
| Din Salmon | 22.95 |
| NY Strip | 27.95 |
| Din Pop Shrimp | 15.55 |
| Din Fish | 16.95 |
| 30 Items | |
| Subtotal | 309.20 |
| Tax | 23.96 |
| Total | 333.16 |
| Gratuity 18.00% | 59.97 |
| Total | 393.13 |

**Balance Due 393.13**

www.42ndstoysterbar.com
THANK YOU FOR YOUR PATRONAGE!

42nd Street Oyster Bar
Corner of Jones & West St
Raleigh, North Carolina
919-831-2811

| | |
|---|---|
| Server: Jaclyn | DOB: 10/25/2012 |
| 07:03 PM | 10/25/2012 |
| Table 135/1 | 5/50001 |

SALE

| | |
|---|---|
| Visa | 5242887 |

Card #XXXXXXXXXXXX3453
Magnetic card present: CARMON LORENZO
Card Entry Method: S

Approval: 078600

| | |
|---|---|
| Amount: | $ 333.16 |
| + Included Gratuity: | $ 59.97 |
| + Additional Tip | _____ |
| = Total: | 393.13 |

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

X_____

CUSTOMER COPY

Warrant #: 021513

Check Number: 00332612



EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/08/2013 | 29982 | EDUCATION SUMMIT ADMISSION | $25.00 |
| 02/08/2013 | 30188 | ANNUAL MEETING ADMISSION | $80.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 3101 | THE CHAMBER | 00332612 | 02/15/2013 | 105.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 3101 | 02/15/2013 | 00332612 |

**$105.00**

*Pay* One Hundred Five Dollars and 00 cents ******

*To The Order Of* THE CHAMBER

RBC Bank
RBC Bank (USA)

**FILE COPY**
**NON-NEGOTIABLE**

⑈00332612⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00332612

THE CHAMBER
P O BOX 392
ROCKY MOUNT NC 27802

The Chamber
Rocky Mount Area Chamber of Commerce

# INVOICE

**Rocky Mount Area Chamber of Commerce**
**P.O. Box 392**
**Rocky Mount, NC 27802-0392**

Mr. Lorenzo Carmon
Edgecombe County
201 St. Andrews Street
P. O. Box 10
Tarboro, NC 27886

| **Customer ID** 1877 | **Invoice No.** 30188 | | **Invoice Date** 1/29/13 |
|---|---|---|---|
| | **Qty.** | **Rate** | **Amount** |
| Annual Meeting Admission | 2.00 | 40.00 | 80.00 |
| Lorenzo & Eric | | **Total** | 80.00 |
| | | **Amt Paid** | 0.00 |
| | | **Balance Due** | 80.00 |

10-4120-571-00

PAID
V310

approved

Lorenzo Carmon 1/4

Warrant #: 092713 Check Number: **00339855** Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/24/2013 | 6261 | EDGEC01 | $150.00 |
| 09/24/2013 | 6260 | EDGEC01 | $165.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 744 | NCACC | 00339855 | 09/27/2013 | 315.00 |

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 744 | 09/27/2013 | 00339855 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

**$315.00**

*Pay* Three Hundred Fifteen Dollars and 00 cents ******

*To The Order Of* NCACC

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00339855⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00339855

NCACC
215 NORTH DAWSON STREET
ATTN: FINANCE DEPT
RALEIGH NC 27603

NCACC
215 N. Dawson Street
Raleigh NC 27603

| | |
|---|---|
| INVOICE | IVC00000000006261 |
| Type | |
| Date | 9/4/2013 |
| Page | 1 |

**Bill to:**

Edgecombe County
PO Box 10
Carolyn Hedgepath
Tarboro NC 27886

**Ship to:**

Edgecombe County
PO Box 10
Carolyn Hedgepath
Tarboro NC 27886

| Purchase Order ID | Customer ID | Salesperson ID | Shipping Method | Payment Terms ID |
|---|---|---|---|---|
| 2013 ANNUAL CONF | EDGEC01 | | MAIL | |

| Quantity | Item Number | Description | U Of M | Discount | Unit Price | Ext. Price |
|---|---|---|---|---|---|---|
| 1 | 2013 ANNUAL CONFERENCE | Lorenzo Carmon-Opening Reception (1), Hor | Each | $0.00 | $150.00 | $150.00 |

V 744

10 4120 5~~449~~ 311 00

9-18-13

| | |
|---|---|
| Subtotal | $150.00 |
| Misc | $0.00 |
| Tax | $0.00 |
| Freight | $0.00 |
| Trade Discount | $0.00 |
| Total | $150.00 |

NCACC
215 N. Dawson Street
Raleigh NC ' 27603

| | |
|---|---|
| INVOICE | IVC00000000006260 |
| Type | |
| Date | 9/4/2013 |
| Page | 1 |

**Bill to:**

Edgecombe County
PO Box 10
Carolyn Hedgepath
Tarboro NC 27886

**Ship to:**

Edgecombe County
PO Box 10
Carolyn Hedgepath
Tarboro NC 27886

| Purchase Order ID | Customer ID | Salesperson ID | Shipping Method | Payment Terms ID |
|---|---|---|---|---|
| 2013 ANNUAL CONF | EDGEC01 | | MAIL | |

| Quantity | Item Number | Description | U Of M | Discount | Unit Price | Ext. Price |
|---|---|---|---|---|---|---|
| 1 | 2013 ANNUAL CONFERENCE | Elton Hines-Horn O' Plenty (2), President | Each | $0.00 | $165.00 | $165.00 |

V 744

10 4110 54 ~~49~~ 311 00

9-18-13

| | |
|---|---|
| Subtotal | $165.00 |
| Misc | $0.00 |
| Tax | $0.00 |
| Freight | $0.00 |
| Trade Discount | $0.00 |
| Total | $165.00 |

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 110212 Check Number: 00329171 

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 10/31/2012 | 1012 | TRAVEL | $138.00 |
| 10/31/2012 | 1024-1026 | TRAVEL | $200.62 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13760 | LORENZO CARMON | 00329171 | 11/02/2012 | 338.62 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13760 | 11/02/2012 | 00329171 |

**$338.62**

*Pay* Three Hundred Thirty Eight Dollars and 62 cents ******

FILE COPY

V 13760

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF October 2012

NAME Lorenzo Carter DEPT CODE 10420531100

| DATE | BETWEEN WHAT PT FROM | TO | ODOMETER START | END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| 9-12-12 | | Lynch | Mr. Williams | | | 55.5 | | 13.88 | 13.88 |
| 10-18 | | Lunch | Mr. Williams | | | 55.5 | | 14.45 | 14.45 |
| 10-18 | | Gateway | | | 35 | 55.5 | | | 19.43 |
| 10-18 | | Brasell | | | 35 | 55.5 | | | 19.43 |
| 10-4 | | Gateway Center | | WOB | 48 | 55.5 | | | 26.64 |
| 10-17 | | Brasell | | | 35 | 55.5 | | | |
| 10-18 | | Gateway | | | 35 | 55.5 | | | |
| 10-24 | Lynch w/ Bob Ellis / Gaston Co | | | | | 55.5 | | | 44.18 |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 138.01 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY: JoAnne J Harrell

~~DEPT HEAD/COUNTY MANAGER~~ Traveler

SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Lorenzo Lemon
Trip to: Raleigh
Purpose of trip: NC SSA conference

Date(s) of travel: 10-24/26-12

ITEMIZED EXPENSES

| DATE | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| Hotel | | | 24 | 25 | 26 | | | |
| Breakfast | | | | | | | | |
| Lunch | | | | 23.46 | 35.87 | | | 59.53 |
| Dinner | | | | | | | | |
| Taxi/Bus | | | 57.84 | | | | | 57.84 |
| Auto Allowance | 150 | x .55 | 5 | | | | | 83.25 |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | | | | | 200.62 |

Account Number 104120 5311 00

Due to Employee $ X 200.62

V 13760

PAID

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature [signature]

Date 10-30-12

Approved [signature]

Date

Square
11:38AM
XXXXXXXXXXXX1789
ED
HASE
32

Frances

39 16

5.00

44.18

Gardner's
Barbecue 'N' Chicken
Rocky Mount, NC 27804
252-442-5522

01 Frank B

Chk 554 Sep27'12 12:54PM Gst 0

TAKE OUT

| | |
|---|---|
| 1 BBQ 1 | 5.75 |
| Fries | |
| Cabbage | |
| Pork | |
| HP | |
| 1 Lst MM Dinner | 7.25 |
| FRIED | |
| Slaw | |
| Collards | |
| Pastry | |
| HP | |
| Cash | [illegible] |
| Subtotal | 13.00 |
| Tax | 0.88 |
| Payment | 13.88 |
| Change Due | 6.12 |

FRT [illegible] PRINTER *********

***** EAT-IN *****
[illegible]
ROJANGLES #48
1438 East Raleigh blvd
Rocky Mount NC 27[illegible]
Phone:(252)2[illegible] 5150
[illegible]: (888)300[illegible]/(888)300-[illegible]

Store: 48
Check: O[illegible] 1/18/12 12:37
Server [illegible]

| QTY | ITEM | SUBTOTL |
|---|---|---|
| 1 | 3PC W[illegible] (1)DIRTY [illegible] | 5.35 |
| 1 | 2 [illegible] (1)DIRTY RICE 1)SWEET TEA. | 6.09 |
| 1 | 2 SWEET [illegible] | |

Subtotal
Tax 0.91
GRAND TOTAL 14.45
Have a nice day

Square
11:38AM
XXXXXXXXXXXX1789
ED
HASE
32

Frances

39 16

5.00

44.18

Give total
Card [illegible]

[illegible]

Viola/Lorna

**********
* Customer Copy *
**********

La Volta
411 Fayetteville St #112
Raleigh, NC 27601
(919) 838-8700

Date: 10/24/12
Time: 7:35 PM
Server: 91. SLICK RICK
Order: 92[illegible]
Description: Table [illegible]

Card Type: Visa/MC
Card No: XXXXXXXXXXXX6415
Expires: XX/XX
Appr Code: E 4269

Purchases: $ 50.84

Tip: 7.00

Woodley Harris . . .

Plaza Cafe
411 Fayetteville St. Suite 109
Raleigh, NC [illegible]601
(919) 756-8759

INV# 157726
Closed to Cash

[illegible] 10/25/12 [illegible]
SERVER: Philip Harris
STATION: 01

Item Count: 9

| | |
|---|---|
| 1 BREAKFAST PLATTER $4.49* | $4.49 |
| 1 ADD BACON $0.99* | $0.99 |
| 3 COFFEE $1.49* | $4.47 |
| 1 OMELET $4.99* | $4.99 |
| 1 BISCUIT $1.39* | $1.39 |
| 1 ADD SAUSAGE $0.99* | $0.99 |
| Subtotal | $21.91 |
| Tax | $1.75 |
| GRAND TOTAL | $23.66 |

Mr. Woodley F[illegible]

Sheraton Raleigh Hotel
thegalleryrestaurant.com
Restaurant

17 Lucas L

Tbl 105/2 Chk 764
Oct25'12 08:02AM

2 $12.95 Buffet @ 12.95
1 Coffee

Subtotal
Tax
08:34AM Total

Gratuity: _____
Total: _____ 56
Room # _____
Print Name _____

Sheraton Raleigh
421 South Salisbury Street
Raleigh, NC 27601
United States
Tel: 919-834-9900 Fax: 919-833-1217

Sheraton
HOTELS & RESORTS

Lorenzo Carmen
3003 N Main St
Tarboro, NC 27886

Email : KIM.SLAYMAKER@CO
.EDGECOBE.NC.US
NAJ24A - NC Association
Of County Direc

| | | |
|---|---|---|
| Page Number | : | 2 |
| Guest Number | : | 564025 |
| Folio ID | : | EX-A |
| | | 24-OCT-12 17:35 |
| | | 26-OCT-12 |
| | | 2 |
| | | 1208 |
| | | 129.00 |

Stay Connected with the Link@Sheraton experienced with Microsoft. Join us at the Link, our lobby connectivity hub where guests meet, connect and relax. Whether you're surfing the Web, watching a game with friends, borrowing a newspaper or printing a boarding pass, out of town doesn't mean out of touch. Learn more at www.sheraton.com/link

As a Starwood Preferred Guest, you could have earned 516 Starpoints for this visit. Please provide your member number or enroll today.

PAID

Sheraton Raleigh
421 South Salisbury Street
Raleigh, NC 27601
United States
Tel: 919-834-9900 Fax: 919-833-1217

Sheraton
HOTELS & RESORTS

Lorenzo Carmen
3003 N Main St
Tarboro, NC 27886

Email : KIM.SLAYMAKER@CO
.EDGECOBE.NC.US
NAJ24A - NC Association
Of County Direc

Page Number : 1
Guest Number : 564025
Folio ID : EX-A
24-OCT-12 17:35
26-OCT-12
2
1208
129.00

Sheraton Raleigh 26-OCT-12 02:40 MVEKSLER

| Date | Reference | Description | Amount |
|---|---|---|---|
| 24-OCT-12 | DEPOSIT | Deposit Applied | -436.35 |
| 24-OCT-12 | RT1208 | Room Charge | 129.00 |
| 24-OCT-12 | RT1208 | State Tax | 8.71 |
| 24-OCT-12 | RT1208 | Occupancy Tax | 7.74 |
| 24-OCT-12 | RT1208 | Parking | 12.00 |
| 25-OCT-12 | RT1208 | Room Charge | 129.00 |
| 25-OCT-12 | RT1208 | State Tax | 8.71 |
| 25-OCT-12 | RT1208 | Occupancy Tax | 7.74 |
| 25-OCT-12 | RT1208 | Parking | 12.00 |
| 26-OCT-12 | VI | Visa | 121.45 |
| | | ** Total Charges | 314.90 |
| | | ** Total Credits | -314.90 |
| | | *** Balance | 0.00 |

For your convenience, we have prepared this zero-balance folio indicating a $0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a $0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

PAID

Continued on the next page

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 051812 Check Number: 00323688 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/16/2012 | 0426-0428 | TRAVAL REIMBURSEMENT | $539.34 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5708 | E. WAYNE HINES | 00323688 | 05/18/2012 | 539.34 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5708 | 05/18/2012 | 00323688 |

**$539.34**

*Pay* Five Hundred Thirty Nine Dollars and 34 cents ******

*To The Order Of* E. WAYNE HINES

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00323688⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00323688

E. WAYNE HINES
P O BOX 1995
ROCKY MOUNT NC 27802

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: E. Wayne Hines
Trip to: Raleigh, NC
Purpose of trip: Black Summit

Date(s) of travel: 4/26 – 4/28, 2012

V 5708

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | | | 4-26 | 4-27 | 4-28 | | |
| Hotel | | | | 130.79 | 130.79 | | | 261.58 |
| Breakfast | | | | | | | | |
| Lunch | | | | | | | | |
| Dinner | | | | 18.16 | | | | 18.16 |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | 33.60 | ~~33.60~~ | 33.30 | | 66.60 |
| Parking | | | | 12.00 | 6.00 | | | 18.00 |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | 194.25 | 136.79 | 33.30 | | 364.34 |

Account Number 10-4110 5311 00

Due to Employee $ 364.34

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

PAID

Signature See attached Date

Approved [signature] Date 5-9-12

Registration 364.34
175.00
$539.34

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2012

NAME Wayne Hines DEPT CODE

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | | | | |
| 4-26 | Rcmt | Raleigh | | | 60 | 55.5 | 33.30 | | 33.30 |
| 4-28 | Raleigh | Rcmt | | | 60 | 55.5 | 33.30 | | 33.30 |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTALS | | | | | | 55.5 | | | |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

E Wayne Hines

SIGNATURE OF TRAVELER

8/1/2011

# The Alliance of NC Black Elected Officials
## 2012 NC Black Summit
### Conference Registration

Name: E. Wayne (First) ____ (MI) Hines (Last)

Address: 1546 Bedford Rd City Rocky Mount State NC Zip 27801

Phone: 813-5044 Fax: _____ Email: _____

**REGISTRATION FEES**
*(Registration includes: Meal Functions, Work Sessions, Conference Tote, Program Booklet and Proceedings, and Social Events)*

- ☐ Early Bird - $149 (January 1—March 27)
- ☒ Regular - $175 (March 27, - April 25)
- ☐ Onsite - $199 (April 26)
- ☐ Student/Spouse $99 *(Covers meal and workshop functions only-no promotional gift)

TOTAL $ 175 Check No 539

**METHOD OF PAYMENT**

☒ Check # ☐ Money Order ☐ Visa ☐ MasterCard

Name as sown on the credit card: _____ (First) _____ (MI) _____ (Last)

Credit Card #: _____ Expiration (MMDDYYY)_____

CVC: _____ (on back of credit card)

Do you belong to a member organization? (Please check all that apply)
- __The NC Black Legislative Caucus
- ✓The NC Association of Black County Officials
- __The NC Conference of Black Mayors
- __The NC Conference of Black Municipal Officials
- __The NC Association of Black School Board Members

PAID

PAID

Are you a member of a support organization? (Please check all that apply)
- __NAACP
- __The NC Black Leadership Caucus
- __The NC CDC Initiative
- __ Faith Based Organization
- __Old North State Medical
- __Fraternal Organization
- __ Black Lawyers
- __ Other (Please specify) _____

**Make Checks payable to:** The NC Alliance of Black Elected Officials
P.O. Box 26615
Raleigh, NC 27611

Sheraton Raleigh
421 South Salisbury Street
Raleigh, NC 27601
United States
Tel: 919-834-9900 Fax: 919-833-1217

Viola Harris
609 Saint David St
Tarboro, NC 27886-4409

Email: VIOLAHARRIS39@YAHOO.COM

Page Number : 1
Guest Number: 539500
Folio ID : A
2
512
116.00
SPG - A42352614720

26-APR-12 16:15
28-APR-12 10:49

Sheraton Raleigh 28-APR-12 10:49 SSMILEY

| Date | Reference | Description | Charges | Credits |
|---|---|---|---|---|
| 26-APR-12 | RT512 | Room Charge | 116.00 | |
| 26-APR-12 | RT512 | State Tax | 7.83 | |
| 26-APR-12 | RT512 | Occupancy Tax | 6.96 | |
| 26-APR-12 | RT512 | Parking | 12.00 | |
| 27-APR-12 | RT512 | Room Charge | 116.00 | |
| 27-APR-12 | RT512 | State Tax | 7.83 | |
| 27-APR-12 | RT512 | Occupancy Tax | 6.96 | |
| 27-APR-12 | RT512 | Parking | 6.00 | |
| 28-APR-12 | MC | Master Card | | -279.58 |
| 28-APR-12 | MC | Master Card | 0.00 | |
| | | ** Total | 279.58 | -279.58 |
| | | *** Balance | 0.00 | |

For your convenience, we have prepared this zero-balance folio indicating a $0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a $0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

Continued on the next page

Sheraton Raleigh HOTEL

GUEST PARKING PASS

Check In: PAID

Check Out:

$12 per day
Present to garage attendant with parking ticket.

Sheraton Raleigh HOTEL

GUEST PARKING PASS

Check In: PAID

Check Out:

$12 per day
Present to garage attendant with parking ticket.

Sheraton Raleigh HOTEL

GUEST PARKING PASS

Check In: PAID

Check Out:

$12 per day
Present to garage attendant with parking ticket.

Sheraton Raleigh Hotel
thegalleryrestaurant.net
Restaurant

17 Lucas L

Tbl 104/3 Chk 60 Gst 1
Apr26'12 04:56PM

| | |
|---|---|
| 1 Beef Sliders | 10.00 |
| As Entree | |
| 1 House Salad | 5.00 |
| Ranch | |
| CEASER SALAD | |
| 1 Message | 0.00 |
| Subtotal | 15.00 |
| Tax | 1.16 |
| 05:48PM Total | 16.16 |

Gratuity: 2.00

Total: 18.16

Room # 512

E. Wayne Hines
Print Name

Signature

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 71312 Check Number: 00325534 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/30/2012 | SALES021438 | EDGEC01 | $110.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 744 | NCACC | 00325534 | 07/13/2012 | 110.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 744 | 07/13/2012 | 00325534 |

**$110.00**

*Pay* One Hundred Ten Dollars and 00 cents ******

*To The Order Of* NCACC

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00325534⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00325534

NCACC
215 NORTH DAWSON STREET
RALEIGH NC 27603

# Sales / Invoices

Page 1/1
Sales / Invoices SALES021438
Date 6/5/2012

**NCACC**
215 N. Dawson Street
Raleigh NC 27603

V744

**Customer:** Edgecombe County
PO Box 10
Tarboro NC 27886

| Purchase Order | Customer ID | Salesperson ID | Shipping Method | Payment Terms ID |
|---|---|---|---|---|
| | EDGEC01 | | MAIL. | |

| Description: | Amount |
|---|---|
| Assembly Day Onsite-WHines | $110.00 |

| | |
|---|---|
| Subtotal | $110.00 |
| Misc | $0.00 |
| Tax | $0.00 |
| Freight | $0.00 |
| Trade Discount | $0.00 |
| Payment | $0.00 |
| Total Due | $110.00 |

10-4110-5311-00

Lamp Camp/2

PAID

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 070612 Check Number: 00325445 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 07/03/2012 | 0713-071812 | #325ZJQDC/ WAYNE HINES | $940.50 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27708 | MARRIOTT PITTSBURGH CITY CENTER | 00325445 | 07/06/2012 | 940.50 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27708 | 07/06/2012 | 00325445 |

**$940.50**

*Pay* Nine Hundred Forty Dollars and 50 cents ******

*To The Order Of* MARRIOTT PITTSBURGH CITY CENTER

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00325445⑈

AP

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00325445
MARRIOTT PITTSBURGH CITY CENTER
112 WASHINGTON PLACE
PITTSBURGH NC 15219

ran Mungo

**From:** NACo 2012 Annual Conference and Exposition Housing Bureau [groupcampaigns@pkghlrss.com]
**Sent:** Tuesday, June 12, 2012 2:30 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Your Hotel Reservation -NACo 2012 Annual Conference and Exposition

NACo National Association of Counties
The Voice of America's Counties

## 2012 NACo Annual Conference and Exposition

### HOTEL RESERVATION ACKNOWLEDGEMENT

**#325ZJQDC**

This is an automated acknowledgement, from the 2012 NACo Annual Conference and Exposition Housing Bureau. Please acknowledgement.

Thank you for making your hotel reservation on 12-Jun-2012 for the 2012 NACo Annual Conference an in Pittsburgh, PA over the dates of 13-Jul-2012 - 17-Jul-2012.

All reservation changes can be made at the event reservations website.

General Questions? Please email nacomeetings@naco.org.

***NOTICE**: If you have been confirmed for a hotel that is different from what you requested, this availability at your requested hotel(s). We have taken your hotel request(s) into consideration at a hotel most comparable to what you originally requested and closest to that hotel's locatio would like additional options of availability at alternative hotels within the NACo Housing syst Representative directly at 888-751-5182. You can also make modifications to your existing ho this number or going back to the Event Reservations Website and select "Already have a Reserv*

PAID

### GUEST INFORMATION

Wayne Hines
Edgecombe County
PO Box 10

Tarboro, NC 27886
US
252-641-7834
franmungo@co.edgecombe.nc.us

### HOTEL INFORMATION

Marriott Pittsburgh City Center
112 Washington Place
Pittsburgh, PA 15219

### ROOM INFORMATION

| | |
|---|---|
| Room Name: | Run of House Room |
| Check-In: | 13-Jul-2012 |

Warrant #: 080712 Check Number: 00326495 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/01/2012 | 0816-0819 | 80456569 HINES & 85491899 POWE | $1,041.81 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 23884 | RALEIGH MARRIOTT CITY CENTER | 00326495 | 08/07/2012 | 1,041.81 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 23884 | 08/07/2012 | 00326495 |

**$1,041.81**

*Pay* One Thousand Forty One Dollars and 81 cents ******

*To The Order Of* RALEIGH MARRIOTT CITY CENTER

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00326495⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00326495

RALEIGH MARRIOTT CITY CENTER
500 FAYETTEVILLE STREET
RALEIGH NC 27601

326346

Marriott

Marriott Hotels & Resorts > Hotel > Step 4 - Thank You

## Raleigh Marriott City Center

500 Fayetteville Street · Raleigh, NC 27601 USA

MAPS & TRANSPORTATION
FACT SHEET
BUSINESS ATTRACTIONS
PRINT THIS RESERVATION
DRIVING DIRECTIONS
E-MAIL TO A FRIEND
SEND TO MICROSOFT OUTLOOK
PHOTO GALLERY

Marriott RALEIGH CITY CENTER

## Confirmation Number: 80456569

Thank you for your reservation. Your reservation is guaranteed to your Visa card. An email with this information has been sent to franmungo@co.edgecombe.nc.us. We look forward to greeting you.

Join now and earn points for stays at participating hotels.

Reserve Another Room at this Hotel

Earn up to 7 Free Nights

The Marriott Rewards Premier Credit Card
Learn More »

MORE CHOICES TO ENHANCE YOUR TRIP

Book rental cars, ground transportation, airport parking, tours and more to enhance your trip.
Visit Trip.Marriott.com »

FEATURED OFFERS

Save up to 35% and earn 500 points with Hertz ›
From 27.95 USD

DOWNLOAD THE NEW, FREE MARRIOTT MOBILE APP

The Perfect Travel Companion for any smartphone. Available for iPhone®, Android™, and BlackBerry®.* Now in English, Chinese, French, German, & Spanish. Or visit Marriott.com on any smartphone.
(*English only)

POINT. SCAN DOWNLOAD.

### Confirmation Details

**Dates**

**Check-in:**
Thursday, August 16, 2012
**Check-out:**
Sunday, August 19, 2012
**Number of rooms:** 1
**Guests per room:** 2

**Guest Information**

Wayne Hines
Edgecombe County
Email: franmungo @co.edgecombe.nc.us
Phone: 252-641-7834

**Room(s)**

Guest room, 1 King or 2 Double
Room details

**Billing Information**

Your reservation is guaranteed to your:
Visa **********3453

SAVE UP TO 35% & EARN UP TO 5,000 MARRIOTT REWARDS POINTS
Hertz.
Get this offer »

**Preferences Summary**

This hotel has a smoke-free policy

No room preferences were selected.

**Summary of Charges**

No booking fees when you reserve on Marriott.com!

**Summary of Room Charges**

| | Cost per night per room (USD) |
|---|---|
| Thursday, August 16, 2012 - Sunday, August 19, 2012 (3 nights) | 139.00 |
| NC COUNTY COMMISSION | |
| Estimated government taxes and fees | 17.72 |
| Total for stay (per room) | 470.17 |

12.75%

ADDITIONAL CHARGES
- On-site parking, fee: 3 USD hourly, 12 USD daily
- Valet parking, fee: 18 USD daily
- Off-site parking, fee: 3 USD hourly, 12 USD daily
- Changes in taxes or fees implemented after booking will affect the total room price.

Save up to 40%
LIMOS.COM
Search, Compare, and Book Today!
LIMOS.COM
Find Limo and Car Service. Go »

**Rate Rules**

NC COUNTY COMMISSION

**Additional Information**

NC ASSOCIATION OF COUNTY COMMISSIONERS

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 090712A

Check Number: 00327515



| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/06/2012 | 0714-0718 | TRAVEL | $441.60 |
| 09/06/2012 | 0816-0818 | TRAVEL | $130.22 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5708 | E. WAYNE HINES | 00327515 | 09/07/2012 | 571.82 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5708 | 09/07/2012 | 00327515 |

**$571.82**

*Pay* Five Hundred Seventy One Dollars and 82 cents ******

*To The Order Of* E. WAYNE HINES

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00327515⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00327515

E. WAYNE HINES
P O BOX 1995
ROCKY MOUNT NC 27802

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: E. Wayne Hines

Date(s) of travel: 8-16-12 to 8-18-20

Trip to: Raleigh NC

Purpose of trip: NC County Commissioners Conference

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | | | 8-16-12 | 8-17-12 | 8-18-12 | | |
| Hotel | | | | | | | | |
| Breakfast | | | | | 5.52 | | | 5.52 |
| Lunch | | | | 19.11 | | | | 19.11 |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | 46.07 | | 35.52 | | 81.59 |
| Parking | | | | | 12.00 | 12.00 | | 24.00 |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | 65.18 | 17.52 | 47.52 | | 130.22 |

Account Number 10411053 2100

Due to Employee $ 130.22

$ 57.82

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

PAID

Signature E. Wayne Hines

Date 8-31-12

Approved [illegible]

Date 9-1-12

OF RALEIGH
ENTION CENTER UNDERGROUND DECK
URIN PARKING
IGH, NC

# 36216
3/12 14:27 L# 1 A# 47 Txn#152846
6/12 16:25 In 08/18/12 14:27 Out
643359
..... 1 $ 24.00
1 Fee $ 24.00
PAID $ 24.00-
Tender $ 24.00
ge Due $ 0.00
K YOU!
A NICE DAY!
TIONS? CALL 919-833-7522

---

Backyard BISTRO

1235 Hurricane Alley Way
Raleigh, NC 27607
PH:919-851-6203
Fax:919-851-6204

Check:249564
Table:82
Server:Julie
08/16/12 12:22pm

[Seat 1]

| | |
|---|---|
| Sweet Tea | $1.95 |
| Fried Catfish | $13.00 |
| Subtotal: | $14.95 |
| 7.75% NC & Wake Ct: | $1.16 |
| Sub w/Tax: | $16.11 |
| Total: | $16.11 |

$3.00

18% Gratuity Is Automatically Added To Tables Of 8 Or More Guests.

PAID

Thank You!
Julie

A 15% tip would be $2.24

A 18% tip would be $2.69

A 20% tip would be $2.99

---

THANK YOU.

08/17/2012 9:32AM 01
000000#9210 CLERK03

DEPT. 01 $3.49
DEPT. 01 $1.59
MISC ST $5.00
TAX1 $0.44

20
$55.52
CASH $10.00
CHANGE $4.48

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: E Wayne Hines
Trip to: Pittsburg PA
Purpose of trip: NACo Conference

Date(s) of travel: 7-14-12 to 7-18-12

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | 7-16 | 7-17 | 7-18 | | | 7-14 | 7-15 | |
| Hotel | | | | | | | | |
| Breakfast | | 25.00 | 6.00 | | | 9.00 | 20.00 | 60.00 |
| Lunch | 13.00 | | | | | | 15.00 | 28.00 |
| Dinner | 25.00 | 25.00 | 12.00 | | | 35.00 | 30.00 | 127.00 |
| Taxi/Bus | 15.00 | 10.00 | 40.00 | | | 40.00 | 15.00 | 120.00 |
| Auto Allowance | | 120 | x .555 | | | | | 66.60 |
| Parking | 6.00 | 6.00 | 6.00 | | | 6.00 | 6.00 | 30.00 |
| Telephone | | | | | | | | |
| Baggage | | | 5.00 | | | 5.00 | | 10.00 |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | | | | | 441.60 |

Account Number

Due to Employee $ 441.60 - 508.20 (spouse Air fare) pd by Rev. Hines

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature E Wayne Hines Date 8-31-12

Approved [illegible] Date 8-31-12

PAID

Rev. Hine lost his Receipts - I worked with him to Recreate expenses [illegible]

EDGECOMBE COUNTY
P.O. BOX 10 • 201 ST. ANDREW STREET
TARBORO, N.C. 27886

87718

Date 8/31/12

Received From Elton W. Hill

Five hundred eight dollars & 20/100 Dollars $ 508.20

For Travel Reimbursement

| | | | | | |
|---|---|---|---|---|---|
| Amount of Account | | | Paid Cash | | ch-th 17 |
| Amount Paid | | | Check | ✓ | Thank You! |
| Balance Due | | | Money Order | | |

By [illegible]

PAID

Warrant #: 051713 Check Number: 00335759 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/15/2013 | 0413 | TRAVEL | $437.43 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5708 | E. WAYNE HINES | 00335759 | 05/17/2013 | 437.43 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5708 | 05/17/2013 | 00335759 |

**$437.43**

*Pay* Four Hundred Thirty Seven Dollars and 43 cents ******

*To The Order Of* E. WAYNE HINES

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00335759⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00335759

E. WAYNE HINES
P O BOX 1995
ROCKY MOUNT NC 27802

V 5708

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2013

NAME E. Wayne Hines DEPT CODE 1044105311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 4-25 | Rky mt | Raleigh | 45320 | 45384 | 64 | 55.5 | 35.52 | 7.85 | 43.37 |
| | | | | | | 55.5 | | | |
| 4-27 | ~~Raleigh~~ | Rky mt | 45384 | 45448 | 64 | 55.5 | 35.52 | | 35.52 |
| | Raleigh | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| Hotel — | 2 Nights | | | | | 55.5 | 358.54 | | 358.54 |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | 429.58 | 7.85 | 437.43 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

V#

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

E Wayne Hines

SIGNATURE OF TRAVELER

9/13/2005

GOLDEN CORRAL 942

**********

[illegible]ces to win $1000 Daily
Plus weekly prizes valued at $1500
[illegible] rules, eligibility, sweepstakes
& previous winners at
[illegible]
[illegible]/Base/survey required to enter.
Sweepstakes sponsored by Empathica Inc.
Across multiple international clients.
Void where prohibited.
SURVEY ENTRY CODE: 2931-50001-24043
Disponsible En Español

**********

[illegible] 0310 #Party 1
Server:244 [illegible] 04/25/13
TERM 1 POSDRVR

| | |
|---|---|
| 1 [illegible] BIRD BUFFET | 7.29 |
| Sub Total: | 7.29 |
| Tax | 0.56 |
| 04/25 3:30p TOTAL: | 7.85 |

**********

Help Send a Child to Camp Corral.
Register or Donate at
www.campcorral.org

**********

| | AMT-TEND | CHANGE | TALLY |
|---|---|---|---|
| CASH | 8.00 | 0.00 | |
| CASH/PAIDOUT | | 0.15 | 7.85 |
| | | | 7.85 |

TOTAL SALES: 7.85
04/25/13 3:30p

JORDAN S

Hilton
NORTH RALEIGH / MIDTOWN

HILTON NORTH RALEIGH/MIDTOWN
3415 Wake Forest Road | Raleigh, NC | 27609
T: 919 872 2323 | F: 919 876 0890
W: hilton.com

NAME AND ADDRESS:
HINES, ELTON
1546 BEDFORD RD

ROCKY MOUNT, NC 27801
US

Room: 216/Q1
Arrival Date: 4/25/2013 2:24:00PM
Departure Date: 4/27/2013

Adult/Child: 1/0
Room Rate: 159.00

RATE PLAN LV5
HH#
AL:
CAR:

CONFIRMATION NUMBER : 3517024407

4/27/2013 PAGE 1

| DATE | REFERENCE | DESCRIPTION | AMOUNT |
|---|---|---|---|
| 4/25/2013 | 3403602 | GUEST ROOM | $159.00 |
| 4/25/2013 | 3403602 | STATE TAX | $10.73 |
| 4/25/2013 | 3403602 | OCCUPANCY TAX (COUNTY) | $9.54 |
| 4/26/2013 | 3404739 | GUEST ROOM | $159.00 |
| 4/26/2013 | 3404739 | STATE TAX | $10.73 |
| 4/26/2013 | 3404739 | OCCUPANCY TAX (COUNTY) | $9.54 |
| 4/27/2013 | 3405214 | DS *4370 | ($358.54) |
| | | * * BALANCE * * | $0.00 |

EXPENSE REPORT SUMMARY

| | 13 00:00:00 | 12:00:00AM | STAY TOTAL |
|---|---|---|---|
| ROOM & TAX | $179.27 | $179.27 | $358.54 |
| DAILY TOTAL | $179.27 | $179.27 | $358.54 |

PAID

ACCOUNT NO.
DS *4370

DATE OF CHARGE
4/25/13

FOLIO NO./CHECK NO.
654432 A

CARD MEMBER NAME
HINES, ELTON

AUTHORIZATION
02638R

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

A HOLD MAY BE PLACED ON YOUR CREDIT/DEBIT CARD FOR THE FULL ANTICIPATED AMOUNT TO BE OWED TOT HE HOTEL, INCLUTING ESTIMATED INCIDENTALS, THROUGH YOUR DATE OF CHECK OUT AND SUCH HOLD MAY NOT BE RELEASED FOR 72 HOURS OR LONGER DEPENDING ON YOUR CARD HOLDER

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT -358.54

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT

HILTON HHONORS
WALDORF ASTORIA
CONRAD
Hilton
DOUBLETREE
EMBASSY SUITES
Hilton Garden Inn
Hampton
HOMEWOOD SUITES BY HILTON
HOME2
Hilton Grand Vacations

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 080913 Check Number: 00338471 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/07/2013 | 082213-082513A | 172806745/ E HINES | $520.90 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 2418 | SHERATON - FOUR SEASONS | 00338471 | 08/09/2013 | 520.90 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 2418 | 08/09/2013 | 00338471 |

**$520.90**

*Pay* Five Hundred Twenty Dollars and 90 cents ******

*To The Order Of* SHERATON - FOUR SEASONS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00338471⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00338471

SHERATON - FOUR SEASONS
3121 HIGH POINT RD
GREENSBORO NC 27407

**Fran Mungo**

**From:** res1@sheratongreensboro.com
**Sent:** Tuesday, July 16, 2013 12:31 PM
**To:** franmungo@co.edgecombe.nc.us
**Cc:** reservations1@sheratongreensboro.com
**Subject:** Thank you for your reservation! 172806745

**Confirmation Number: 172806745**

**Welcome**

**Dear Elton Hines:**

Thank you for choosing the Sheraton Greensboro for your upcoming visit to Greensboro. Please review your reservation information carefully and contact us if we can be of further assistance. We look forward to welcoming you and wish you a most enjoyable stay.

Sincerely,

Reservations/Revenue Manager

1-336-292-9161

res1@sheratongreensboro.com

http://www.sheratongreensboro.com/

| Guest Info | Credit Card Info |
|---|---|
| Elton Hines<br>Email: franmungo@co.edgecombe.nc.us<br>Phone: 252-641-7834 | Card Type: VISA<br>Card Number: **********3453<br>Expiration Date: xx/xx |

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 110113 Check Number: 00340996 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 10/30/2013 | 0813 | TRAVEL | $152.00 |
| 10/30/2013 | 082013 | REIMBURSE COUTNY FOR WIFE FEES | -$100.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5708 | E. WAYNE HINES | 00340996 | 11/01/2013 | 52.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5708 | 11/01/2013 | 00340996 |

**$52.00**

*Pay* Fifty Two Dollars and 00 cents ******

*To The Order Of* E. WAYNE HINES

RBC Bank
RBC Bank (USA)

⑈00340996⑈

**FILE COPY**
**NON-NEGOTIABLE**

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00340996

E. WAYNE HINES
P O BOX 1995
ROCKY MOUNT NC 27802

NCACC
Conference

V5708

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF August 2013 2013

NAME E. Wayne Hines DEPT CODE 10 4110 5311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 8/22 | Rm | Greensboro | | | 137 | 55.5 | 76.04 | | |
| 8/25 | Greensboro | Rm | | | 137 | 55.5 | 76.04 | | |
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| TOTALS | | | | | | | 152.00 | | |

- 100.00
$52.00 owed to traveler

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

E Wayne Hines
SIGNATURE OF TRAVELER

8/1/2011

NORTH CAROLINA
ASSOCIATION OF COUNTY COMMISSIONERS

COUNTY Edgecombe

# Onsite Registration

## 2013 NCACC Annual Conference

**August 22-25, 2013**

**Registration fees: $249** full conference/**$150** one-day registration (Friday or Saturday)

**NAME:** Elton Hines

**TITLE:** _____

**EMAIL:** _____

**PHONE:** _____

| Total fees: | No. | Total $ | |
|---|---|---|---|
| Full Registration ($249) | | | |
| One-Day Registration ($150) | | | |
| Opening Reception Guest ($20) | | | |
| Horn O' Plenty Adult (~~$35~~) 30 | 2 | | $30.00 |
| Horn O' Plenty Child ($15) | | | |
| NCABCO Awards Luncheon ($35) | 1 | | 35.00 |
| President's Banquet ($35) | 2 | | 35.00 |
| Total | | | $100.00 |

**Payment:**

☐ Check (Make checks payable to NCACC) Check No. _____

Bill County

☐ Credit Card (Visa or MasterCard only)

Credit card #: _____ Exp. date: _____

Name on credit card: _____

215 N. Dawson St., Raleigh, NC 27603 * Phone: (919) 715-2893 * Fax: (919) 715-2121 * www.ncacc.org

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 041714

Check Number: 00346209



| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/15/2014 | 0424-0426 | CONF # 171106654/ W HINES | $280.91 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5151 | SHERATON IMPERIAL | 00346209 | 04/17/2014 | 280.91 |

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5151 | 04/17/2014 | 00346209 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

**$280.91**

*Pay* Two Hundred Eighty Dollars and 91 cents ******

**FILE COPY**
**NON-NEGOTIABLE**

*To The Order Of* SHERATON IMPERIAL

RBC Bank
RBC Bank (USA)

⑈00346209⑈

AP

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00346209

SHERATON IMPERIAL
4700 EMPEROR BLVD
DURHAM NC 27703

**Fran Mungo**

**From:** Sheraton Imperial Hotel & Convention Center <GCCUSTSERVICE@confirm.starwoodhotels.com>
**Sent:** Monday, March 31, 2014 10:05 AM
**To:** FRANMUNGO@CO.EDGECOMBE.NC.US
**Subject:** Sheraton Reservation #171106654. We look forward to seeing you.

Trouble seeing this email? View it in a browser for up-to-date reservation information, or to view in English, Francais, Español, Deutsch, 中文(简体), 日本語, Italiano, Português, Русский, العربية, 中國(傳統), 한국어

**Sheraton Imperial Hotel & Convention Center**
4700 Emperor Blvd, I-40 at Exit 282 (Page Road), Durham
North Carolina 27703, United States
Phone: (919) 941-5050 Fax: (919) 941-5156

- Contact Us
- Your Room
- Guest Services
- Dining Options
- In The Neighborhood
- Finding Your Way
- Meetings & Events

Hello Mr. Hines,

We're pleased to confirm your upcoming stay at the Sheraton Imperial Hotel & Convention Center and look forward to your arrival.

Sheraton Club offers our guests a higher level of comfort and convenience, complete with access to our Club lounge. To upgrade your room, click the banner to the right.

Finally, we hope you'll try out our new Farm to Table offerings at our restaurant, Seasons, during your stay. Click here to learn more.

If there's anything special we can do in preparation for your stay please don't hesitate to contact us. In the meantime, safe travels.

Michael J. Martino
GENERAL MANAGER

**For Your Stay**

Upgrade to Club for just $35 more per night or a Suite for $60 more per night.

**CONFIRMATION: 171106654**

**YOUR SCHEDULE:**

| | |
|---|---|
| Check In | 24-APR-2014 - 3:00 PM * |
| Check Out | 26-APR-2014 - 12:00 PM * |

Warrant #: 050914 Check Number: 00346935 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/07/2014 | 0414 | TRAVEL | $83.24 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5708 | E. WAYNE HINES | 00346935 | 05/09/2014 | 83.24 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5708 | 05/09/2014 | 00346935 |

**$83.24**

*Pay* Eighty Three Dollars and 24 cents ******

*To The Order Of* E. WAYNE HINES

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00346935⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00346935

E. WAYNE HINES
P O BOX 1995
ROCKY MOUNT NC 27802

V 5708

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2014

NAME E. Wayne Hines DEPT CODE 10410 5311 00

Black Summit

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | | | | |
| 4/24/14 | RM | Raleigh | | | 75 | 55.5 | 41.62 | | 41.62 |
| 4/26/14 | Raleigh | RM | | | 75 | 55.5 | 41.62 | | 41.62 |
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| TOTALS | | | | | | | | | 83.24 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

E. Wayne Hines

SIGNATURE OF TRAVELER

8/1/2011

Warrant #: 052314 Check Number: 00347455 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/21/2014 | 060114 | 3446 | $384.09 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00347455 | 05/23/2014 | 384.09 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 05/23/2014 | 00347455 |

**$384.09**

*Pay* Three Hundred Eighty Four Dollars and 09 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00347455⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00347455

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

nacomeetings@naco.org
Wednesday, April 16, 2014 4:18 PM
franmungo@co.edgecombe.nc.us
2014 NACo Annual Conference and Exposition Confirmation

4/16/2014

Dear Hon. E. Wayne Hines;

Thank you for registering for the 2014 NACo Annual Conference and Exposition taking place July 11-14, 2014 at the Ernest N. Morial Convention Center in Orleans Parish/New Orleans, Louisiana.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in New Orleans, Louisiana.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Hines E. Wayne | 1.00 | Member FAX Registration Rate (Early) | $515.00 | $0.00 | $515.00 | $0.00 |
| Hines E. Wayne | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Ernest N. Morial Convention Center.

The Registration Desk will be open during the following hours:

| | |
|---|---|
| Friday, July 11: | 7:30 a.m. - 5:00 p.m. |
| Saturday, July 12: | 7:30 a.m. – 5:00 p.m. |
| Sunday, July 13: | 7:30 a.m. – 4:00 p.m. |
| Monday, July 14: | 8:00 a.m. – 2:00 p.m. |

nacomeetings@naco.org
Wednesday, April 16, 2014 4:19 PM
franmungo@co.edgecombe.nc.us
2014 NACo Annual Conference and Exposition Confirmation

4/16/2014

Mrs. Carolyn Hines
P.O. Box 10
Tarboro, NC 27886

Dear Mrs. Carolyn Hines;

Thank you for registering for the 2014 NACo Annual Conference and Exposition taking place July 11-14, 2014 at the Ernest N. Morial Convention Center in Orleans Parish/New Orleans, Louisiana.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in New Orleans, Louisiana.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Hines Carolyn | 1.00 | Guest Registration Fee | $150.00 | $0.00 | $150.00 | $0.00 |
| Hines Carolyn | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $150.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Ernest N. Morial Convention Center.

The Registration Desk will be open during the following hours:

| | |
|---|---|
| Friday, July 11: | 7:30 a.m. - 5:00 p.m. |
| Saturday, July 12: | 7:30 a.m. – 5:00 p.m. |
| Sunday, July 13: | 7:30 a.m. – 4:00 p.m. |

Warrant #: 080712 Check Number: 00326495 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/01/2012 | 0816-0819 | 80456569 HINES & 85491899 POWE | $1,041.81 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 23884 | RALEIGH MARRIOTT CITY CENTER | 00326495 | 08/07/2012 | 1,041.81 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 23884 | 08/07/2012 | 00326495 |

**$1,041.81**

*Pay* One Thousand Forty One Dollars and 81 cents ******

*To The Order Of* RALEIGH MARRIOTT CITY CENTER

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00326495⑈

AP

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00326495

RALEIGH MARRIOTT CITY CENTER
500 FAYETTEVILLE STREET
RALEIGH NC 27601

326346

Marriott

Marriott Hotels & Resorts > Hotel > Step 4 - Thank You

## Raleigh Marriott City Center

500 Fayetteville Street · Raleigh, NC 27601 USA

MAPS & TRANSPORTATION
FACT SHEET
BUSINESS ATTRACTIONS
PRINT THIS RESERVATION
DRIVING DIRECTIONS
E-MAIL TO A FRIEND
SEND TO MICROSOFT OUTLOOK
PHOTO GALLERY

Marriott. RALEIGH CITY CENTER

### Confirmation Number: 85491899

Thank you for your reservation. Your reservation is guaranteed to your Visa card. An email with this information has been sent to franmungo@co.edgecombe.nc.us. We look forward to greeting you.

Join now and earn points for stays at participating hotels.

Reserve Another Room at this Hotel

Earn up to 7 Free Nights

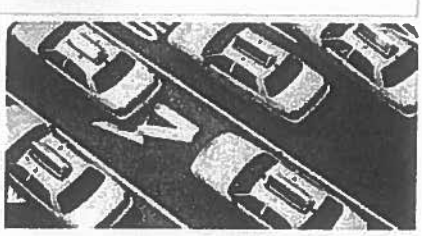
The Marriott Rewards Premier Credit Card
Learn More »

MORE CHOICES TO ENHANCE YOUR TRIP

Book rental cars, ground transportation, airport parking, tours and more to enhance your trip.
Visit Trip.Marriott.com »

FEATURED OFFERS

Save up to 35% and earn 500 points with Hertz ▸
From 26.94 USD



### Confirmation Details

**Dates**

**Check-In:**
Thursday, August 16, 2012
**Check-out:**
Sunday, August 19, 2012
**Number of rooms:** 1
**Guests per room:** 1

**Room(s)**

Guest room, 1 King or 2 Double
Room details

**Guest Information**

Evelyn Powell
Edgecombe County Government
Email: franmungo @co.edgecombe.nc.us
Phone: 252-641-7834

**Billing Information**

Your reservation is guaranteed to your:
Visa **********3453

**Preferences Summary**

This hotel has a smoke-free policy

No room preferences were selected.

**Summary of Charges**

No booking fees when you reserve on Marriott.com!

| Summary of Room Charges | Cost per night per room (USD) |
|---|---|
| Thursday, August 16, 2012 - Sunday, August 19, 2012 (3 nights) | 169.00 |
| Weekend rate | |
| Estimated government taxes and fees | 21.55 |
| **Total for stay (per room)** | **571.64** |

**ADDITIONAL CHARGES**

- On-site parking, fee: 3 USD hourly, 12 USD daily
- Valet parking, fee: 18 USD daily
- Off-site parking, fee: 3 USD hourly, 12 USD daily
- Changes in taxes or fees implemented after booking will affect the total room price.

**Rate Rules**

Weekend rate

**Canceling Your Reservation**

- You may cancel your reservation for no charge until 6:00 PM hotel time on August 16, 2012.

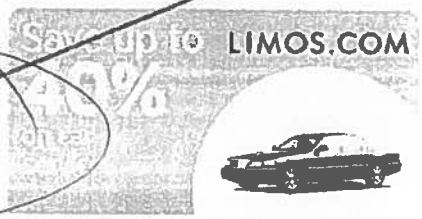
Travel Deals in The United States

Looking for things to do during your trip?
Reserve fun activities now!
start your adventure »

SAVE UP TO 35% & EARN UP TO 5,000 MARRIOTT REWARDS POINTS

Hertz.

Get this offer »




Search, Compare, and Book Today!

LIMOS.COM

Find Limo and Car Service.
Go »

**Marriott Mobile App**

Text "Marriott12" to 46746? or Point. Scan. Download.

Click here to download directly

Warrant #: 022114 Check Number: 00344292 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/18/2014 | 6300 | EVELYN POWELL | $30.00 |
| 02/18/2014 | 6301 | WAYNE HINES | $20.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 744 | NCACC | 00344292 | 02/21/2014 | 50.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 744 | 02/21/2014 | 00344292 |

**$50.00**

*Pay* Fifty Dollars and 00 cents ******

*To The Order Of* NCACC

RBC Bank
RBC Bank (USA)

⑈00344292⑈

**FILE COPY**
**NON-NEGOTIABLE**

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00344292

NCACC
215 NORTH DAWSON STREET
ATTN: FINANCE DEPT
RALEIGH NC 27603

***HISTORICAL***

NCACC
215 N. Dawson Street
Raleigh NC 27603

| | |
|---|---|
| INVOICE | IVC00000000006300 |
| Type | |
| Date | 10/14/2013 |
| Page | 1 |

PAST DUE

**Bill to:**

Edgecombe County
~~Fran Mungo~~ Attn: A/P
P O Box 10
Tarboro NC 27886

**Ship to:**

Edgecombe County
~~Fran Mungo~~
P O Box 10
Tarboro NC 27886

| Purchase Order ID | Customer ID | Salesperson ID | Shipping Method | Payment Terms ID |
|---|---|---|---|---|
| EVELYN POWELL | EDGEC01 | | | |

| Quantity | Item Number | Description | U Of M | Discount | Unit Price | Ext. Price |
|---|---|---|---|---|---|---|
| 1 | HORN O'PLENTY | | Each | $0.00 | $30.00 | $30.00 |

V# 744
A# 10-4110-5311-00

Laney Carr /

| | |
|---|---|
| Subtotal | $30.00 |
| Misc | $0.00 |
| Tax | $0.00 |
| Freight | $0.00 |
| Trade Discount | $0.00 |
| Total | $30.00 |

Warrant #: 080913 Check Number: 00338470 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/07/2013 | 082213-082513 | 172807078/ E POWELL | $520.90 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 2418 | SHERATON - FOUR SEASONS | 00338470 | 08/09/2013 | 520.90 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 2418 | 08/09/2013 | 00338470 |

**$520.90**

*Pay* Five Hundred Twenty Dollars and 90 cents ******

*To The Order Of* SHERATON - FOUR SEASONS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00338470⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00338470

SHERATON - FOUR SEASONS
3121 HIGH POINT RD
GREENSBORO NC 27407

**Fran Mungo**

**From:** res1@sheratongreensboro.com
**Sent:** Tuesday, July 16, 2013 12:36 PM
**To:** franmungo@co.edgecombe.nc.us
**Cc:** reservations1@sheratongreensboro.com
**Subject:** Thank you for your reservation! 172807078

---

**Confirmation Number: 172807078**

**Welcome**

**Dear Evelyn Powell:**

Thank you for choosing the Sheraton Greensboro for your upcoming visit to Greensboro. Please review your reservation information carefully and contact us if we can be of further assistance. We look forward to welcoming you and wish you a most enjoyable stay.

Sincerely,

Reservations/Revenue Manager

1-336-292-9161

res1@sheratongreensboro.com

http://www.sheratongreensboro.com/

| Guest Info | Credit Card Info |
|---|---|
| Evelyn Powell<br>Email: franmungo@co.edgecombe.nc.us<br>Phone: 252-641-7834 | Card Type: VISA<br>Card Number: **********3453<br>Expiration Date: xx/xx |

Warrant #: 091313 Check Number: 00339418 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/10/2013 | 0813 | TRAVEL | $168.17 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5013 | EVELYN POWELL | 00339418 | 09/13/2013 | 168.17 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5013 | 09/13/2013 | 00339418 |

**$168.17**

*Pay* One Hundred Sixty Eight Dollars and 17 cents ******

*To The Order Of* EVELYN POWELL

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00339418⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00339418

EVELYN POWELL
2349 MORNINGSTAR CHURCH RD
BATTLEBORO NC 27809

V5013

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF Aug 2013

NAME Evelyn Howell DEPARTMENT ___ DEPT CODE 10411053110 0

| DATE | TIME | BETWEEN WHAT PT FROM | TO | ODOMETER START | ODOMETER END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL | APPROVED |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 8/22/13 | 1:00 pm | Battleboro | Greensboro | 203551 | 203703 | 152 | 55.5 | 84.36 | – | 84.36 | |
| 8/24/13 | 2:00 pm | Greensboro | Battleboro | 203703 | 203854 | 151 | 55.5 | 83.805 | – | 83.805 | |
| | | | | | | | 55.5 | | | | |
| | | | | | | | 55.5 | | | | |
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| | | | | | | | 55.5 | | | | |
| TOTALS | | | | | | 303 | | 168.165 | 0 | 168.17 | |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 032814 Check Number: 00345405 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 03/25/2014 | 030614 | 3446 | $540.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00345405 | 03/28/2014 | 540.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 03/28/2014 | 00345405 |

**$540.00**

*Pay* Five Hundred Forty Dollars and 00 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00345405⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00345405

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 03/06/14 |
| **New balance** | **$540.00** |
| **Minimum payment** | **$15.00** |
| **Due date** | **03/31/14** |

**Questions?**
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $184.88 |
| Payment received on 02/28/14 - thank you | $184.88 |
| Purchases | $540.00 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$540.00** |
| **Minimum payment** | **$15.00** |
| **Due date** | **03/31/14** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $9,460.00 |
| Cash advance available credit | $2,500.00 |

V27273 R2

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 02/28 | 02/28 | 7443603ED9YZNPY7Y | BRANCH PAYMENT*THANK YOU WILMINGTON DE | $184.88- |
| **Total** | | | | **$184.88-** |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 02/11 | 02/11 | 2427539DVBVND9P37 | NATIONAL ASSC COUNTIES 202-393-6226 DC<br>MCC: 7399 MERCHANT ZIP: 20001 | $540.00 |
| **Total** | | | | **$540.00** |

10 4110 5311 00

nacomeetings@naco.org
Tuesday, February 11, 2014 4:07 PM
franmungo@co.edgecombe.nc.us
**Subject:** 2014 NACo Legislative Conference Confirmation

2/11/2014

Hon. Evelyn D. Powell
Commissioner
Edgecombe County
P O Box 10
Tarboro, NC 27886

Hon. Evelyn D. Powell:

Thank you for registering for the 2014 NACo Legislative Conference taking place March 1-5, 2014 at the Washington Hilton Hotel in Washington, D.C.

Please review your confirmation / receipt listed below. Any outstanding balance must be paid either before or on-site to obtain your badge and registration materials when you arrive in Washington, D.C.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Powell Evelyn D. | 1.00 | Member FAX Registration Rate (Advance) | $540.00 | $0.00 | $540.00 | $0.00 |
| Powell Evelyn D. | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $540.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk located in Columbia Hall at the Washington Hilton Hotel.

Registration hours are as follows:
Saturday, March 1 : 8:00 a.m. – 5:00 p.m.
Sunday, March 2: 7:00 a.m. – 4:00 p.m.

Warrant #: 022412 Check Number: 00320617 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/22/2012 | 0303-0307 | CONF # 325HVFXS/ V HARRIS | $1,012.18 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 250 | WASHINGTON HILTON & TOWERS | 00320617 | 02/24/2012 | 1,012.18 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 250 | 02/24/2012 | 00320617 |

**$1,012.18**

*Pay* One Thousand Twelve Dollars and 18 cents ******

*To The Order Of* WASHINGTON HILTON & TOWERS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00320617⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00320617

WASHINGTON HILTON & TOWERS
1919 CONNECTICUT AVE NW
WASHINGTON DC 20009

**Fran Mungo**

**From:** 2011 NACo Legislative Conference Housing Bureau [groupcampaigns@pkghlrss.com]
**Sent:** Monday, January 09, 2012 9:09 AM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Your Hotel Reservation - 2011 NACo Legislative Conference

NACo National Association of Counties
The Voice of America's Counties

## 2012 NACo Legislative Conference

### HOTEL RESERVATION ACKNOWLEDGEMENT
**#325HVFXS**
This is an automated acknowledgement, from the 2012 NACo Legislative Conference Housing Bureau. Please do not repl

Thank you for making your hotel reservation on 01/09/2012 for the 2012 NACo Legislative Conference in Washington, DC over the dates of 03/03/2012 - 03/07/2012.

All reservation changes can be made at the event reservations website; or by calling (888) 751-5182 b Monday through Friday. Please note: NO new reservations will be accepted via the call center phone

General Questions? Please email: nacomeetings@naco.org

PAID

### GUEST INFORMATION

Viola Harris
Edgecombe County
PO Box 10

Tarboro, NC 27886
US
252-641-7834
franmungo@co.edgecombe.nc.us

### HOTEL INFORMATION

Washington Hilton
1919 Connecticut Ave NW
Washington, DC 20009

### ROOM INFORMATION

| | |
|---|---|
| **Room Name:** | Run of House Room |
| **Check-in:** | 03/03/2012 |
| **Check-out:** | 03/07/2012 |
| **Requests:** | |
| **Accessible Room:** | No |

Warrant #: 022412 Check Number: 00320549 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/22/2012 | 020312 | 4777 6200 0114 5000 | $611.08 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 4472 | BANKCARD SERVICES | 00320549 | 02/24/2012 | 611.08 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 4472 | 02/24/2012 | 00320549 |

**$611.08**

*Pay* Six Hundred Eleven Dollars and 08 cents ******

*To The Order Of* BANKCARD SERVICES

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00320549⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00320549

BANKCARD SERVICES
P O BO 1070
CHARLOTTE NC 28201-1070

**Fran Mungo**

**From:** naco@naco.org
**Sent:** Friday, January 06, 2012 4:25 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** NACo 2012 Legislative Conference Confirmation

1/6/2012

Hon. Viola Harris
Commissioner
Edgecombe County
P.O. Box 10
Tarboro, NC 27886

Hon. Viola Harris:

Thank you for registering for the **2012 NACo Legislative Conference** taking place March 3-7, 2012 at the Washington Hilton Hotel in Washington, D.C.

Please review your confirmation / receipt listed below. Any outstanding balance must be paid either before or on-site to obtain your badge and registration materials when you arrive in Washington, D.C.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Viola | 1.00 | Member Fax Registration (Early) | $490.00 | $0.00 | $490.00 | $0.00 |
| Harris Viola | 1.00 | Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $490.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk at the Washington Hilton Hotel.

Registration hours are as follows:
Saturday, March 3: 8:00 a.m. – 5:00 p.m.
Sunday, March 4: 8:30 a.m. – 4:00 p.m.
Monday, March 5: 8:00 a.m. – 3:00 p.m.
Tuesday, March 6: 8:00 a.m. – 3:30 p.m.

PAID

NEW! If you wish to register a Spouse or Guest, you now can do it online by clicking here. You will be prompted to log back in. Under the heading *My Purchase History*, click on *Add Guest* under Actions or you can fill out the guest registration form on the website.

Lastly, if you haven't made your hotel reservations, click the link below to make them now.
https://api.passkey.com/RegLink/API?
Version=4.00.00&Mode=S&OP=GetForRedirectResWeb&Destination=2&PartnerID=12340&L
-GB48

If you have any questions regarding your registration please call (202) 942-4292 or email nacomeetings@naco.org.

Please refer to the Legislative Conference page on the NACo web site for details on planning your participation, ground transportation, and the latest on program updates.

RBC Bank

Call Customer Service: 1-888-257-6837

Or Write Us At:
RBC BANK PO BOX 2857
ROCKY MOUNT, NC 27802-2857

## ACCOUNT SUMMARY:

| | | |
|---|---|---|
| Previous Balance: | | 64.04 |
| Payments: | - | 0.00 |
| Credits: | - | 0.00 |
| Purchases & Other Charges: | + | 604.71 |
| Cash Advances: | + | 0.00 |
| FINANCE CHARGES: | + | 6.37 |
| New Balance: | = | 675.12 |
| Closing Date: | | 02-03-12 |

## ACCOUNT INFORMATION:

| | |
|---|---|
| Account Number: | 4777 6200 0114 5000 |
| Total Credit Line: | 10,000.00 |
| Available Credit Line: | 9,324.88 |
| Past Due Amount: | 15.00 |
| Amount Over Credit Limit: | 0.00 |
| Minimum Payment Due: | 32.37 |
| Payment Due Date: | 02-28-12 |
| Days In Billing Cycle: | 31 |

## MONTHLY TRANSACTION DETAIL:

| TRANS. DATE | POST DATE | REFERENCE # | DESCRIPTION | CHARGES | CREDITS |
|---|---|---|---|---|---|
| 01-06 | 01-09 | 24275392006900019800188 | NATIONAL ASSC COUNTIES 202-393-6226 DC | 490.00 | |
| 01-12 | 01-16 | 24013392013003475101791 | ROCKY MOUNT AREA CHAMBER | 40.00 | |
| 01-29 | 01-30 | 24692162029000482334347 | NORTON *ANNUAL RENEWAL 877-294-5265 CA | 74.71 | |
| 02-03 | 02-03 | | INTEREST CHARGE-PURCHASE | 6.37 | |

YOUR MINIMUM PAYMENT FOR THE LAST MONTH WAS NOT RECEIVED BY THE DUE DATE THE NEW MINIMUM PAYMENT IS SHOWN ON THIS STATEMENT. PLEASE FORWARD THIS AMOUNT WITHOUT FURTHER DELAY.

## FINANCE CHARGE DETAIL:

| | Average Daily Balance | Monthly Periodic Rate (may vary) | FINANCE CHARGE | Corresponding Annual Percentage Rate | ANNUAL PERCENTAGE RATE (APR) |
|---|---|---|---|---|---|
| PURCHASES | $566.56 | 0.03627% | $6.37 | 13.24% | N/A |
| CASH ADVANCES | $0.00 | 0.05477% | $0.00 | 19.99% | N/A |

approved

10-4120 - 5311.00 40.00
10-4110 - 5311.00 490.00
10-4120 - 5260.00 ~~74.71~~ 81.08



Registration hours are as follows:
Saturday, March 3: 8:00 a.m. – 5:00 p.m.
Sunday, March 4: 8:30 a.m. – 4:00 p.m.
Monday, March 5: 8:00 a.m. – 3:00 p.m.
Tuesday, March 6: 8:00 a.m. – 3:30 p.m.

NEW! If you wish to register a Spouse or Guest, you now can do it online by clicking here. You will be prompted to log back in. Under the heading *My Purchase History*, click on *Add Guest* under Actions or you can fill out the guest registration form on the website.

Lastly, if you haven't made your hotel reservations, click the link below to make them now.
https://api.passkey.com/RegLink/API?
Version=4.00.00&Mode=S&OP=GetForRedirectResWeb&Destination=2&PartnerID=12340&L
-GB48

If you have any questions regarding your registration please call (202) 942-4292 or email nacomeetings@naco.org.

Please refer to the Legislative Conference page on the NACo web site for details on planning your participation, ground transportation, and the latest on program updates.

1/9/2012

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 030212 Check Number: 00320853 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/29/2012 | 0102 | TRAVEL | $259.74 |
| 02/29/2012 | 022212 | TRAVEL ADVANCE FOR WASHINGTON | $250.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00320853 | 03/02/2012 | 509.74 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 03/02/2012 | 00320853 |

**$509.74**

*Pay* Five Hundred Nine Dollars and 74 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00320853⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00320853

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF Jan / Feb 2012

NAME Viola Harris DEPT CODE 104110 531100

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 1-27 | Trbo | Raleigh | 25,350 | 25,428 | 78 | 55.5 | | | 43.29 |
| 1-27 | Raleigh | Trbo | 25,428 | 25,506 | 78 | 55.5 | | | 43.29 |
| | | | | | | 55.5 | | | |
| 2-9 | Trbo | Raleigh | 26922 | 27,000 | 78 | 55.5 | | | 43.29 |
| 2-9 | Raleigh | Trbo | 27,000 | 27,078 | 78 | 55.5 | | | 43.29 |
| | | | | | | 55.5 | | | |
| 2-23 | Trbo | Raleigh | 30407 | 30485 | 78 | 55.5 | | | 43.29 |
| 2-23 | Raleigh | Trbo | 30485 | 30563 | 78 | 55.5 | | | 43.29 |
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| TOTALS | | | | | | | | | 259.74 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

Brad Cam

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

8/1/2011

**Fran Mungo**

**From:** Viola Harris [violaharris39@yahoo.com]
**Sent:** Wednesday, February 22, 2012 5:21 AM
**To:** lorenzo carmon
**Cc:** Frangie Mungo
**Subject:** DC trip

I will be driving to the Legislative Conference in Washington, DC. The parking at th hotel is now $39.00 per day. I am requesting a $250 advance for the trip which is March 3-7.

Is there anyway for me to call in for Monday's March 5 meeting to the Board room?

Lorenzo Carmon

V13040 2-22-12

10-4110-5311-00

Return check to Fran.
Thx.

PAID

Warrant #: 031612 Check Number: 00321486 

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 03/14/2012 | 0303-0307 | TRAVEL | $690.84 |
| 03/14/2012 | 030-0307C | ADVANCE | -$250.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00321486 | 03/16/2012 | 440.84 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 03/16/2012 | 00321486 |

**$440.84**

*Pay* Four Hundred Forty Dollars and 84 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00321486⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00321486

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

✓ 13040

Name: Viola Harris

Trip to: Washington DC

Purpose of trip: Legislative Conference

Date(s) of travel: 3/3 - 3/7/2012

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | 3-5 | 3-6 | 3-7 | | | 3/3 | 3/4 | |
| Hotel | | | | | | | | |
| Breakfast | | | | | | 18.27 | 24.55 | |
| Lunch | | 10.76 | | | | | | |
| Dinner | | | | | | 37.94 | 17.60 | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | 39.00 | 39.00 | | | | 39.00 | 39.00 | |
| Telephone | | | | | | | | |
| Baggage | | | 4.00 | | | 4.00 | 3.00 | |
| Regis. fee | 100.00 | | | | | | | |
| Other WAN | 35.00 | | | | | | | 411.12 |
| TOTAL | 174.00 | 49.76 | 4.00 | | | 99.21 | ~~96.15~~ 84.15 | ~~423.06~~ |

Account Number 104110531100

Due to Employee $ 452.78

~~702.78~~ 690.84

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Advance - 250.00

~~452.78~~ 440.84

Signature Viola S. Harris Date 3-7-12

Approved [illegible] Date 3-13-12

PAID

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF March 20___

NAME Viola Harris DEPT CODE _____

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 3-3-12 | Trbo | Wash DC | 32,000 | 32,252 | 252 | 55.5 | 139.86 | | 139.86 |
| 3-7-12 | Wash DC | Trbo | 32,252 | 32,504 | 252 | 55.5 | 139.86 | | 139.86 |
| | | | | | | 55.5 | | | |
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| TOTALS | | | | | | | | | 279.72 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

PAID

APPROVED BY:

_____
DEPT HEAD/COUNTY MANAGER

Viola S. Harris
SIGNATURE OF TRAVELER

8/1/2011

VIOLA S. HARRIS
NCDL 4771971
609 SAINT DAVID ST.NCDL PH. 252-824-0053
TARBORO, NC 27886-2634

66-8453/2531

2139

DATE 3-4-12

PAY TO THE ORDER OF NOBCO $ 100.00

One hundred + no/100 DOLLARS

LGFCU
LOCAL GOVERNMENT FEDERAL CREDIT UNION
61 TARBORO, NC

MEMO

Viola S. Harris

⑆253184537⑆011014215521⑈ 2139

PAID

**NOBCO ~ NABCO ~ BRT Meeting Schedule**
**NACo Legislative Conference, March 3 – 5, 2012**
**Washington Hilton, Washington, DC 20009**

**Saturday, March 3 - 5, 2012**
**Meet at NOBCO – NABCO - BRT Display Table**
**Time:** 9:00 a.m. – 4:30 p.m.
**Room:** Terrace Foyer (Terrace Level)

**Sunday, March 04, 2012**
**NOBCO Board of Directors Meeting**
**Time:** 10:00 a.m. ~ 11:30 a.m.
**Room:** Independence --- (Lobby Level)

**Sunday, March 4, 2012**
**NABCO Meeting**
**~~~NABCO Business Roundtable Meeting**
**Time:** 12:45 p.m. ~ 2:30 p.m.
**Room:** Georgetown --- East (Concourse Level)

**Monday, March 5, 2012**
**NOBCO Act Against AIDS Leadership Initiative - HIV Prevention Session**
**~ Elected Officials Discussion with Youth Commissioners**
**~ Youth Commissioners representing:**
**Chatham County, GA**
**Prince Georges County, MD**
**Time:** 9:00 a.m. ~ 1:30 p.m.
**Room:** Kalorama --- (Lobby Level)
***Lunch:*** *1:00 p.m. – 2:30 p. m.*
*Buca di Beppo Restaurant ~ 1825 Connecticut Ave, NW, Washington, DC 20009 ~ 202-232-8466-p*

Sub Total: 45.97
Tax: 3.00
GL = 75.97

ING WITH EIGHT OR MORE
LL BE AN 18% SERVICE
OUR CHECK--THANK YOU
WASHINGTON, DC 20024
) 488-8515
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| | 9.78 |
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| | 10.76 |
| | 11.00 |
| | 0.24 |

Store 3674

RECEIPT

DATE 3-5-12 No. 12697L

FROM Viola Hanni

Thanks for not

FOR RENT
FOR Dave & lunch

$35.00 DOLLARS

ACCT. | PAID | DUE

CASH
MONEY ORDER
CHECK
CREDIT CARD

FROM
TO
BY
Women of NAC

TOWNE PARK

Valet Parking Revenue Receivable

Ticket # 945 $157.00 73.00

Arrival Date 3-3-12 Capture Date 3-7-12

Nights 4 @$ 39 + tax (if applicable) = $160

WAFFLE HOUSE

To-Go Claim Check No. 923907 3/3

TOTAL 1639

Hilton Washington
McCLELLAN'S
Thank You for Joining Us

517 ANTHONY

74/1 2725 GST
MAR04'12 18:46

1 KOBE BURGER 16.00

Subtotal 16.00
Tax 1.60
Payment Due 17.60

GRATUITY 3.00

TOTAL 20.60

PRINT NAME

SIGNATURE

THANK YOU, GRATUITY NOT INCLUDED
EXCEPT FOR PARTIES OF 8 OR MORE

The District
Line

103 NASHMUL 1

42/1 1639 GST 2
MAR04'12 9:29

1 FRESH JUICE REG 5.00
1 COFFEE 4.00
1 ADULT B.FAST BUF 21.50
Subtotal 30.50
Tax 3.05
Total 33.55
Cash 33.55
--601 CLOSED MAR04 9:35--

$24.55

Warrant #: 033012 Check Number: 00321919 

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 03/28/2012 | 0306-0321 | TRAVEL & REIMBURSEMENT | $326.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00321919 | 03/30/2012 | 326.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 03/30/2012 | 00321919 |

**$326.60**

*Pay* Three Hundred Twenty Six Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00321919⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00321919

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF March 2012

NAME Viola Harris DEPT CODE 10411053110 0

| DATE | BETWEEN WHAT PT FROM | TO | ODOMETER START | END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL | |
|---|---|---|---|---|---|---|---|---|---|---|
| 3-6 | Trbo | Raleigh | 35,204 | 35,284 | 80 | 55.5 | 44.40 | | 44.40 | committee meeting. |
| 3-6 | Raleigh | Trbo | 35,284 | 35,364 | 80 | 55.5 | 44.40 | | 44.40 | |
| | | | | | | 55.5 | | | | |
| 3-21 | Trbo | Raleigh | 36,004 | 36,084 | 80 | 55.5 | 44.40 | | 44.40 | Alliance mtg |
| 3-21 | Raleigh | Trbo | 36,084 | 36,164 | 80 | 55.5 | 44.40 | | 44.40 | |
| | | | | | | 55.5 | | | | |
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| | | | | | | 55.5 | | | | |
| TOTALS | | | | | | | | | 177.60 | |

NCBEO Summit + 149.00

326.60

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

6/1/2011

# The Alliance of NC Black Elected Officials
## 2012 NC Black Summit
### Conference Registration

Name: Viola (First) S (MI) Harris (Last)

Address: 609 St. David St City Tarboro State NC Zip 27886

Phone: 824-0053 Fax: 823-1894 Email: violaharris39@yahoo.com

**REGISTRATION FEES**
*(Registration includes: Meal Functions, Work Sessions, Conference Tote, Program Booklet and Proceedings, and Social Events)*

- [X] Early Bird - $149 (January 1—March 27)
- [ ] Regular - $175 (March 27, - April 25)
- [ ] Onsite - $199 (April 26)
- [ ] Student/Spouse $99 *(Covers meal and workshop functions only-no promotional gift)

TOTAL $ _____

**METHOD OF PAYMENT** #1907

- [X] Check
- [ ] Money Order
- [ ] Visa
- [ ] MasterCard

Name as sown on the credit card: _____ (First) _____ (MI) _____ (Last)

Credit Card #: _____ Expiration (MMDDYYY) _____

CVC: _____ (on back of credit card)

Do you belong to a member organization? (Please check all that apply)
- __The NC Black Legislative Caucus
- X The NC Association of Black County Officials
- __The NC Conference of Black Mayors
- __The NC Conference of Black Municipal Officials
- __The NC Association of Black School Board Members

RECEIVED
MAR 2 1 REC'D
By

Are you a member of a support organization? (Please check all that apply)
- __NAACP
- __The NC Black Leadership Caucus
- __The NC CDC Initiative
- __ Faith Based Organization
- __Old North State Medical
- __Fraternal Organization
- __ Black Lawyers
- __ Other (Please specify) _____

**Make Checks payable to:** The NC Alliance of Black Elected Officials
P.O. Box 26615
Raleigh, NC 27611

Warrant #: 041312 Check Number: 00322411 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/10/2012 | 0426-0428 | V HARRIS/ CONF # 025273211 | $245.80 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 6473 | SHERATON RALEIGH HOTEL | 00322411 | 04/13/2012 | 245.80 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 6473 | 04/13/2012 | 00322411 |

**$245.80**

*Pay* Two Hundred Forty Five Dollars and 80 cents ******

*To The Order Of* SHERATON RALEIGH HOTEL

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈003224 1 1⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00322411

SHERATON RALEIGH HOTEL
421 S. SALISBURY STREET
RALEIGH NC 27601

**Fran Mungo**

**From:** Viola Harris [violaharris39@yahoo.com]
**Sent:** Wednesday, March 21, 2012 1:57 PM
**To:** Frangie Mungo
**Subject:** Fw: Sheraton Reservation #025273211. We look forward to seeing you.

Wanted to make sure you put this on your calendar. This is the NC Black Summit that I attend in Raleigh. I will need it paid by April 25. I have paid for early registration while I was in Raleigh today and will turn that in. Thanks.

V#6473

----- Forwarded Message -----
**From:** Sheraton Raleigh Hotel <GCCUSTSERVICE@CONFIRM.STARWOODHOTELS.COM>
**To:** "VIOLAHARRIS39@YAHOO.COM" <VIOLAHARRIS39@YAHOO.COM>
**Sent:** Monday, March 12, 2012 9:06 AM
**Subject:** Sheraton Reservation #025273211. We look forward to seeing you.

Trouble seeing this email? View it in a browser for up-to-date reservation information, or to view in English, Français, Español, Deutsch, Português, Italiano, [illegible], [illegible]

**Shera**
421 South Salisb
North Carolina 2
Phone: (919) 834-9900 F

10-4110-53.11-00

$ 245.80

approved
Lorenzo Carman

- Contact Us
- Your Room
- Guest Services
- Dining Options
- In The Neighborhood
- Finding Your Way
- Meetings & Events

Return Check to Viola

PAID

Hello Viola,
Welcome back. We're pleased to confirm your upcoming stay at the Sheraton Raleigh Hotel and look forward to your arrival.

If there's anything special we can do in preparation for your stay please don't hesitate to contact us. In the meantime, safe travels.

Larry Jones
General Manager

**CONFIRMATION: 025273211**

**YOUR SCHEDULE:**

| | |
|---|---|
| Check In | 26-APR-2012 - 3:00 PM * |
| Check Out | 28-APR-2012 - 12:00 PM * |
| Number of Rooms | 1 |
| Number of Guests | 2 |

**Your Starwood Preferred Guest Details**

Member Name:
Viola Harris

SPG Number:
xxxxxxxx720

Starpoint Balance:
1900

Login to Your Account

231.08
13.08 NT
245.80

Confirmation #
025273211

* Indicates standard hotel check-in and check-out times and does not reflect special arrangements made with the hotel.

## YOUR ACCOMMODATIONS: ROOM 1 OF 1

| | |
|---|---|
| Guest Name | VIOLA HARRIS |
| Number of Adults | 2 |
| Number of Children | 0 |

**Room Description**
**2 Double Beds**

- Traditional Non-smoking, Smoke-free
- 32 Inch Flat Panel Lcd Tv
- Comfortable Work Area
- Free Local/cc Access/800 Calls
- Starbucks Coffee In Room

Remarks

## YOUR RATE: ROOM 1 OF 1

Rates for the night of **26-Apr-12, 27-Apr-12**

**Rate Details**
Group Social 99/109D
one night deposit charged at time of booking - refundable ifreservation is cancelled at least 24 hrs prior to arrivall

**109.00** in US DOLLARS per night

**Taxes**
State Tax 6.75 Percent Per Room Per Night Not In The Rate
Occupancy Tax 6.0 Percent Per Room Per Night Not In The Rate

**Guarantee and Cancellation Policies**
Your room is guaranteed with a(n) VISA card.
Cancel by 6:00 PM Hotel time 1 days prior to avoid 1 Night penalty. There may be additional applicable charges and taxes.

Room taxes may be charged on penalties.
Debit and Credit cards will be authorized at check-in for the amount of your stay, plus an amount to cover incidentals. Please visit "Announcements" on the hotel website for more information.

## YOUR PRIVACY

Please note: For security purposes, you will be asked to provide a valid government or state-issued photo ID at check-in.

This email may contain links to websites that collect personally identifiable information about you. Starwood Hotels & Resorts Worldwide, Inc. is not responsible or liable for the actions of such independent websites, and encourages you to review the privacy statements and policies of such websites to understand how they collect, use and store

218.00
14.72 tax
13.08 OT
245.80

PAID

Warrant #: 050412 Check Number: 00323184 

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/02/2012 | 0426-0428 | TRAVEL | $136.96 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00323184 | 05/04/2012 | 136.96 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 05/04/2012 | 00323184 |

**$136.96**

*Pay* One Hundred Thirty Six Dollars and 96 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00323184⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00323184

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Raleigh
Purpose of trip: NC Black Summit

Date(s) of travel: 4/26 - 4/28

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | | | 8-26 | 8-27 | 8-28 | | |
| Hotel | | | | | | | | |
| Breakfast | | | | | | | | |
| Lunch | | | | | | | | |
| Dinner | | | | 16.16 | | | | 16.16 |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | 44.40 | | 44.40 | | 88.80 |
| Parking | | | | 12.00 | 12.00 | | | 24.00 |
| Telephone | | | | | | | | |
| Baggage | | | | 3.00 | | 3.00 | | 6.00 |
| Regis. fee | | | | | | | | |
| Other Tip | | | | 2.00 | | | | 2.00 |
| TOTAL | | | | 77.56 | 12.00 | 47.40 | | 136.96 |

Account Number 104110 531(07)

Due to Employee $ 136.96

V 13040

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris

Date 4/30/12

Approved

Date

PAID

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2012

NAME Viola Harris DEPT CODE

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 4-26 | Tarboro | Raleigh | 40,020 | 40,100 | 80 | 55.5 | 44.40 | | 44.40 |
| 4-28 | Raleigh | Tarboro | 40,100 | 40,180 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 88.80 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

Sheraton Raleigh
Hotel
thegalleryrestaurant.net
Restaurant

17 Lucas L

Tbl 104/2 Chk 59 Gst 1
Apr26'12 04:56PM

| | |
|---|---|
| 1 Beef Sliders | 10.00 |
| As Entree | |
| 1 House Salad | 5.00 |
| Ranch | |
| No Make Item | |
| Subtotal | 15.00 |
| Tax | 1.16 |
| 05:46PM Total | 16.16 |

Gratuity: 2.00

Total: 18.16

Room #

Viola Harris
Print Name

Viola Harris
Signature

Sheraton Raleigh
HOTEL

GUEST PARKING PASS

Check In:

Check Out: PAID

$12 per day
Present to garage attendant with parking ticket.

Sheraton Raleigh
HOTEL

GUEST PARKING PASS

Check In:

Check Out: PAID

$12 per day
Present to garage attendant with parking ticket.

Warrant #: 060812 Check Number: 00324436 

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/05/2012 | 0512 | TRAVEL | $266.40 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00324436 | 06/08/2012 | 266.40 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 06/08/2012 | 00324436 |

**$266.40**

*Pay* Two Hundred Sixty Six Dollars and 40 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00324436⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00324436

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF May 20 12

NAME Viola Harris DEPT CODE 10411053110 0

| DATE | BETWEEN WHAT PT FROM | TO | ODOMETER START | END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| 5-25 | Trbo | Raleigh | 36,201 | 36,281 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-25 | Raleigh | Trbo | 36,281 | 36,361 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 5-29 | Trbo | Raleigh | 36,511 | 36,591 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-29 | Raleigh | Trbo | 36,591 | 36,671 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 5-30 | Trbo | Raleigh | 36,700 | 36,780 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-30 | Raleigh | Trbo | 36,780 | 36,860 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 266.40 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

5-25 Public Education Committee NCACC
5-29 Human Svc. Committee NCACC
5-30 County Assembly Day NCACC

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 062212 Check Number: 00324964 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/20/2012 | 060512 | 4436-0331-5001-3446 | $585.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00324964 | 06/22/2012 | 585.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 06/22/2012 | 00324964 |

**$585.00**

*Pay* Five Hundred Eighty Five Dollars and 00 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00324964⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00324964

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 06/05/12 |
| New balance | $585.00 |
| Minimum payment | $15.00 |
| Due date | 06/30/12 |

Questions?
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $0.00 |
| Payment received | $0.00 |
| Purchases | $585.00 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$585.00** |
| **Minimum payment** | **$15.00** |
| **Due date** | **06/30/12** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $9,415.00 |
| Cash advance available credit | $2,500.00 |

V 27273 (R2)

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 05/08 | 05/08 | 2421073GH8AT86W7W | #NCACC 919-715-2893 NC<br>MCC: 7399 MERCHANT ZIP: 27603 | $95.00 |
| 05/17 | 05/17 | 2427539GSS66DV8GB | #NATIONAL ASSC COUNTIES 202-393-6226 DC<br>MCC: 7399 MERCHANT ZIP: | $490.00 |
| **Total** | | | | **$585.00** |

10 4110 5311 00

Loren Carmon/21

PAID

NCACC [Registration@signup4.net]
Tuesday, May 08, 2012 3:00 PM
ranmungo@co.edgecombe.nc.us
NCACC County Assembly Day registration confirmation

Subject:

Thank you for registering for the 2012 NCACC County Assembly Day. You have registered the following for the event:

Harris Viola

Cancellation Policy

If you should need to cancel your registration, please contact Kelly Brown at 919-715-2893. Cancellations must be made before 5 p.m. on Friday, May 25, to be eligible for a partial refund of $80 for each registration. If you should need to cancel a guest registration, you would be eligible for a partial refund of $30.

$195.00

PAID

Mungo

From: naco@naco.org
Sent: Thursday, May 17, 2012 9:58 AM
To: franmungo@co.edgecombe.nc.us
Subject: 2012 NACo Annual Conference Confirmation

NACo National Association of Counties
The Voice of America's Counties

5/17/2012

Hon. Viola Harris
Commissioner
Edgecombe County
P.O. Box 10
Tarboro, NC 27886

Dear Hon. Viola Harris;

Thank you for registering for the 2012 NACo Annual Conference and Exposition taking place July 13-17, 2012 at the David L. Lawrence Convention Center in Allegheny County/Pittsburgh, Pennsylvania.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Pittsburgh, Pennsylvania.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Viola | 1.00 | Member FAX Registration Rate (Early) | $490.00 | $0.00 | $490.00 | $0.00 |
| Harris Viola | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

**Total:** $490.00
**Balance:** $0.00

PAID

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the David L. Lawrence Convention Center.

The Registration Desk will be open during the following hours:

| | |
|---|---|
| Friday, July 13: | 7:30 a.m. - 5:00 p.m. |
| Saturday, July 14: | 7:30 a.m. – 5:00 p.m. |
| Sunday, July 15: | 8:30 a.m. – 4:00 p.m. |
| Monday, July 16: | 8:30 a.m. – 4:00 p.m. |
| Tuesday, July 17: | 8:30 a.m. – 2:00 p.m. |

NEW! If you wish to register a Spouse or Guest, you now can do it online by clicking here. You

Warrant #: 070612 Check Number: 00325441 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 07/03/2012 | 0714-0718 | #325WKTHP/ VIOLA HARRIS | $770.64 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 1608 | HAMPTON INN | 00325441 | 07/06/2012 | 770.64 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 1608 | 07/06/2012 | 00325441 |

**$770.64**

*Pay* Seven Hundred Seventy Dollars and 64 cents ******

*To The Order Of* HAMPTON INN

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00325441⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00325441

HAMPTON INN
1247 SMALLMAN STREET
PITTSBURGH PA 15222

**Fran Mungo**

**From:** NACo 2012 Annual Conference and Exposition Housing Bureau [groupcampaigns@pkghirss.com]
**Sent:** Monday, May 21, 2012 2:44 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Your Hotel Reservation -NACo 2012 Annual Conference and Exposition

V1608
R10

NACO National Association of Counties
The Voice of America's Counties

## 2012 NACo Annual Conference and Exposition

### HOTEL RESERVATION ACKNOWLEDGEMENT

#325WKTHP

This is an automated acknowledgement, from the 2012 NACo Annual Conference and Exposition Housing Bureau. Please acknowledgement.

Thank you for making your hotel reservation on 21-May-2012 for the 2012 NACo Annual Conference ar in Pittsburgh, PA over the dates of 13-Jul-2012 - 17-Jul-2012.

All reservation changes can be made at the event reservations website.

General Questions? Please email nacomeetings@naco.org.

***NOTICE:** If you have been confirmed for a hotel that is different from what you requested, this availability at your requested hotel(s). We have taken your hotel request(s) into consideration at a hotel most comparable to what you originally requested and closest to that hotel's locatio would like additional options of availability at alternative hotels within the NACo Housing syst Representative directly at 888-751-5182. You can also make modifications to your existing ho this number or going back to the Event Reservations Website and select "Already have a Reserv*

PAID

### GUEST INFORMATION

Viola Harris
Edgecombe County
PO Box 10

Tarboro, NC 27886
US
252-641-7834
franmungo@co.edgecombe.nc.us

### HOTEL INFORMATION

Hampton Inn and Suites Pittsburgh Downtown
1247 Smallman Street
Pittsburgh, PA 15222

### ROOM INFORMATION

| | |
|---|---|
| Room Name: | 1 Bedroom Suite |
| Check-In: | 14-Jul-2012 |

Warrant #: 070612 Check Number: 00325442 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 07/03/2012 | 07122012 | TRAVEL ADVANCE | $300.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00325442 | 07/06/2012 | 300.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 07/06/2012 | 00325442 |

**$300.00**

*Pay* Three Hundred Dollars and 00 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈0032544 2⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00325442

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

**Fran Mungo**

**From:** Viola Harris [violaharris39@yahoo.com]
**Sent:** Wednesday, June 27, 2012 11:01 AM
**To:** Frangie Mungo
**Subject:** NACo trip request

We will pay for my husband's airfare Thursday, July 12 when he gets paid. As I do every year, I am requesting a $300 advance for the trip. I'm leaving my car at the airport for 4 days.

V# 13040

10-4110-5311-00

Return ✓ to Prg

PAID

Warrant #: 071312 Check Number: 00325706 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 07/10/2012 | 0816-0819 | #91479141/ VIOLA HARRIS | $470.17 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 12334 | RALEIGH MARRIOTT CITY CENTER | 00325706 | 07/13/2012 | 470.17 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 12334 | 07/13/2012 | 00325706 |

**$470.17**

*Pay* Four Hundred Seventy Dollars and 17 cents ******

*To The Order Of* RALEIGH MARRIOTT CITY CENTER

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00325706⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00325706

RALEIGH MARRIOTT CITY CENTER
500 FAYETTEVILLE STREET
RALEIGH NC 27601

**Fran Mungo**

**From:** Viola Harris [violaharris39@yahoo.com]
**Sent:** Saturday, May 26, 2012 10:25 AM
**To:** Frangie Mungo
**Subject:** Fw: Raleigh Marriott City Center Reservation Confirmation #91479141

----- Forwarded Message -----
**From:** 'Marriott Hotels & Resorts Reservation' <reservations@marriott.com>
**To:** VIOLAHARRIS39@YAHOO.COM
**Sent:** Wednesday, May 23, 2012 6:17 PM
**Subject:** Raleigh Marriott City Center Reservation Confirmation #91479141

Marriott
RALEIGH
CITY CENTER

Raleigh Marriott City Center

500 Fayetteville Street,
Raleigh, North Carolina 27601 USA
Phone: 1-919-833-1120 Fax: 1-919-833-8912

Reservation for VIOLA HARRIS

**Confirmation Number: 91479141**
**Check-in:** Thursday, August 16, 2012 (04:00 PM)
**Check-out:** Sunday, August 19, 2012 (12:00 PM)

View hotel website
Modify or Cancel reservation

Driving Directions
Maps & Transportation

Reservation Confirmation
**Dear VIOLA HARRIS,**
We are pleased to confirm your reservation with Marriott. Below is a summary of your booking and room information. We look forward to making your stay gratifying and memorable. When you're traveling away from home you can always count on Marriott.

PAID

Raleigh Marriott City Center

Planning Your Trip

See what's happening in Raleigh during your stay
Check out some of Raleigh's top attractions

Book with Hertz: Save up to 35% and Earn 500 Rewards Points
Book Cars, Tours & More - get great rates on local tours and attractions

Reservation Details

**Confirmation Number: 91479141**
**Your hotel:** Raleigh Marriott City Center
**Check-in:** Thursday, August 16, 2012 (04:00 PM)
**Check-out:** Sunday, August 19, 2012 (12:00 PM)
**Room type:** Guest room, 1 King or 2 Double
**Number of rooms:** 1
**Guests per room:** 1
**Guest name:** VIOLA HARRIS
**Reservation confirmed:** Wednesday, May 23, 2012 (22:16:00 GMT)

Warrant #: 081012 Check Number: 00326554 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/08/2012 | 0712 | TRAVEL | $177.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00326554 | 08/10/2012 | 177.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 08/10/2012 | 00326554 |

**$177.60**

*Pay* One Hundred Seventy Seven Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00326554⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00326554

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

√ 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF July 2012

NAME Viola Harris DEPT CODE 1041105311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 7-10-12 | Trbo | Raleigh | 38,520 | 38,600 | 80 | 55.5 | 44.40 | | 44.40 |
| 7-10-12 | Raleigh | Trbo | 38,600 | 38,680 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 7-30-12 | Trbo | Raleigh | 40,010 | 40,090 | 80 | 55.5 | 44.40 | | 44.40 |
| 7-30-12 | Raleigh | Trbo | 40,090 | 40,170 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 177.60 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

Warrant #: 081712 Check Number: 00326826 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/15/2012 | 080612 | XXXX-XXXX-XXXX-3446 | $1,504.73 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00326826 | 08/17/2012 | 1,504.73 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 08/17/2012 | 00326826 |

**$1,504.73**

*Pay* One Thousand Five Hundred Four Dollars and 73 cents ******

**FILE COPY**
**NON-NEGOTIABLE**

*To The Order Of* PNC BANK

RBC Bank
RBC Bank (USA)

⑈00326826⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00326826

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 08/06/12 |
| New balance | $1,504.73 |
| ❶ Minimum payment | $23.00 |
| ❷ Due date | 08/31/12 |

**Questions?**
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $2,598.25 |
| Payment received on 07/30/12 - thank you | $2,598.25 |
| Purchases | $1,504.73 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$1,504.73** |
| ❶ **Minimum payment** | **$23.00** |
| ❷ **Due date** | **08/31/12** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $8,495.00 |
| Cash advance available credit | $2,500.00 |

V 27273 R2

Lorenzo Carmon

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 07/30 | 07/30 | 7443603K5SBZN38Z7 | PAYMENT*THANK YOU LOUISVILLE KY | $2,598.25- |
| **Total** | | | | $2,598.25- |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 07/05 | 07/07 | 2444574JQ2XFMGJ7K | OFFICE DEPOT #279 GREENVILLE NC<br>MCC: 5943 MERCHANT ZIP: 27834 | $360.73 |
| 07/16 | 07/16 | 2421073JN8AT7EEWW | NCACC 919-715-2893 NC<br>MCC: 7399 MERCHANT ZIP: 27603 | $284.00 |
| 07/16 | 07/16 | 2421073JN8AT7EEX4 | NCACC 919-715-2893 NC | $225.00 |

10-4110-5499.00 Cases for Commission Tablets

Harris 104110 5311.00 Ninty

PAID

(continued on next page)

## Transactions (continued)

| | POST DATE | REFERENCE NUMBER | DESCRIPTION | | AMOUNT |
|---|---|---|---|---|---|
| | | | MCC: 7399 | MERCHANT ZIP: 27603 | |
| 07/16 | 07/16 | 2421073JN8AT7EEZP | NCACC | 919-715-2893 NC | $285.00 |
| | | | MCC: 7399 | MERCHANT ZIP: 27603 | |
| 07/16 | 07/16 | 2421073JN8AT7EEZZ | NCACC | 919-715-2893 NC | $60.00 |
| | | | MCC: 7399 | MERCHANT ZIP: 27603 | |
| 07/26 | 07/26 | 2421073K08AT86W5L | NCACC | 919-715-2893 NC | $290.00 |
| | | | MCC: 7399 | MERCHANT ZIP: 27603 | |
| **Total** | | | | | **$1,504.73** |

Powell
Nixon
Lorenzo

## Your finance charges

| TYPE OF BALANCE | CORRESPONDING ANNUAL PERCENTAGE RATE (APR) | DAILY PERIODIC RATE (MAY VARY) | DAYS IN BILLING | AVERAGE DAILY BALANCE | FINANCE CHARGE |
|---|---|---|---|---|---|
| Purchases | 13.240% | 0.03628% | 31 | $0.00 | $0.00 |
| Cash advances | 19.990% | 0.05477% | 31 | $0.00 | $0.00 |
| | | | | | $0.00 |

Give employees access to your PNC Bank Visa Business credit card's purchasing power. Get employee cards on your account by calling customer service at 1-800-474-2101.

**...ungo**

**From:** Viola Harris [violaharris39@yahoo.com]
**Sent:** Monday, June 11, 2012 10:00 AM
**To:** Frangie Mungo
**Subject:** Fw: NCACC 2012 Annual Conference Registration Confirmation

----- Forwarded Message -----
**From:** NCACC <Registration@signup4.net>
**To:** "violaharris39@yahoo.com" <violaharris39@yahoo.com>
**Sent:** Monday, June 11, 2012 9:20 AM
**Subject:** NCACC 2012 Annual Conference Registration Confirmation
Thank you for registering for the 2012 NCACC Annual Conference. We look forward to seeing you in Wake County in August. Our records indicate that you have registered for the following:

NCCC12E185
Viola Harris

| | **Viola Harris** | |
|---|---|---|
| **QTY** | **Description** | **Cost** |
| 1 | Registration fees: Early registration (county officials only through July 16) - $185 | $185.00 |
| 1 | Registration fees: Horn O' Plenty Adult - $30 | $30.00 |
| 1 | Registration fees: President's Banquet - $35 | $35.00 |
| 1 | Registration fees: NCABCO Awards Luncheon - $35 | $35.00 |
| | **Cost** | $285.00 |
| | **Paid** | $1.00 |
| | **Due** | $284.00 |

Unpaid

PAID

If you need to add additional events to your registration, please click on this link, https://www.SignUp4.net/public/ap.aspx?OID=138&EID=NCCC12E.

If your plans should change and you need to cancel your registration, you must notify Kelly Brown (kelly.brown@ncacc.org) at the NCACC prior to Aug. 3, 2012, to be eligible for a full refund for your registration fee minus a $40 administrative charge, and/or a refund for the full amount of any tickets purchased.

Please remember to make your hotel reservations. For your convenience, here is the link to reservations information for the Raleigh Marriott City Center, the official conference hotel:

http://cwp.marriott.com/rdumc/ncacc/

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 083112 Check Number: 00327262 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/29/2012 | 081612 | TRAVEL | $22.80 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00327262 | 08/31/2012 | 22.80 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 08/31/2012 | 00327262 |

**$22.80**

*Pay* Twenty Two Dollars and 80 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00327262⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00327262

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Raleigh
Purpose of trip: NCACC Conf.

Date(s) of travel: 8-16-12/8-18-12

V13040

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | | | 8-16 | 8-17 | 8-18 | | |
| Hotel | | | | | | | | |
| Breakfast | | | | | | | | |
| Lunch | | | | | 3.80 | | | 3.80 |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | | | | | 9.50 | 9.50 | | 19.00 |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | | 13.30 | 9.50 | | 22.80 |

Account Number 1041105311 00

Due to Employee $ $111.60

88.80
22.80
111.60

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris Date 8-22-12

Approved [signature] Date 8-23-12

PAID

CITY OF RALEIGH
CONVENTION CENTER UNDERGROUND DECK
MCLAURIN PARKING
RALEIGH, NC

Rcpt# 36237
08/18/12 21:32 L#1 A# 21 Txn#152910
08/17/12 14:58 In 08/18/12 21:32 Out
Tkt# 022378

| | |
|---|---|
| Fee ..... 1 | $ 19.00 |
| Total Fee | $ 19.00 |
| CASH PAID | $ 19.00- |
| Cash Tender | $ 19.00 |
| Change Due | $ 0.00 |

THANK YOU!
HAVE A NICE DAY!
QUESTIONS? CALL 919-833-7522

YOUR RECEIPT
THANK YOU

08/17/2012 9:16AM 01
000000#9201 CLERK01

| | |
|---|---|
| DEPT.01 | $3.49 |
| MDSE S! | $3.49 |
| TAX1 | $0.31 |
| ITEMS | |
| ***TO | [illegible] |
| CASH | [illegible] |
| CHANGE | [illegible] |

Warrant #: 090412 Check Number: 00327391 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/04/2012 | 0812 | TRAVEL | $88.80 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00327391 | 09/04/2012 | 88.80 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 09/04/2012 | 00327391 |

**$88.80**

*Pay* Eighty Eight Dollars and 80 cents ******

*To The Order Of* VIOLA HARRIS

RBC Bank
RBC Bank (USA)

⑈00327391⑈

**FILE COPY**
**NON-NEGOTIABLE**

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00327391

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V # 13040

104110 5

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF August 2012

NAME Viola Harris DEPT CODE 10 41 05311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 8-16-12 | Tribo | Raleigh | 44,000 | 44,080 | 80 | 55.5 | 44.40 | | 44.40 |
| 8-18-12 | Raleigh | Tribo | 44,080 | 44,160 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 88.80 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

9/13/2006

Warrant #: 092812 Check Number: 00328136 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/26/2012 | 0919-0922 | TRAVEL | $100.62 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00328136 | 09/28/2012 | 100.62 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 09/28/2012 | 00328136 |

**$100.62**

*Pay* One Hundred Dollars and 62 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00328136⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00328136

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris  Date(s) of travel: 9-19 / 9-22

Trip to: Carolina Beach

Purpose of trip: Risk Mgt Retreat Bd of Trustees

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | | 9-19 | 9-20 | 9-21 | 9-22 | | |
| Hotel | | | | | 66.67 | | | 66.67 |
| Breakfast | | | | | | 4.05 | | 4.05 |
| Lunch | | | | | | | | |
| Dinner | | | | | 29.90 | | | 29.90 |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | | ~~29.90~~ 96.57 | 4.05 | | 100.62 |

Account Number 10 4110 531100

Due to Employee $ 100.62

V# 13040

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris  Date 9/22/12

Approved Lorenzo Cumbo  Date 9/25/12

PAID

PAID

COURTYARD Marriott

Courtyard by Marriott
Carolina Beach

100 Charlotte Ave
Carolina Beach Nc 28428
T 910.458.2030

V Harris

Room: 906
Room Type: QNQN
Number of Guests: 1
Rate: $63.90 Clerk:

Arrive: 19Sep12 Time: 05:08PM Depart: 22Sep12 Time: Folio Number: 90520

| Date | Description | Charges | Credits |
|---|---|---|---|
| 21Sep12 | Room Charge Rebate | | 59.00 |
| 21Sep12 | Occupancy Sales Tax | | 3.54 |
| 21Sep12 | State Occupancy Tax | | 4.13 |
| | | Balance: | 66.67 |

As a Rewards Member, you could have earned points toward your free dream vacation today. Start earning points and elite status, plus enjoy exclusive member offers. Enroll today at the front desk.

Want your final hotel bill by email? Just ask the Front Desk! See "Internet Privacy Statement" on Marriott.com.

BOWMAN'S
SEAFOOD
RESTAURANT
09/21/2012 6:58PM
ORDER#065392 CLERK#1
$14.95
$23.95
$1.00
$1.95
$3.00
$44.85
$2.93
ITEMS 50
SUBTOTAL $47.78
CASH $48.00
CHANGE $0.22
YOUR RECEIPT
THANK YOU
$29.90

THANK YOU FOR CHOOSING McDONALD'S
2740 S. US 117
GOLDSBORO, NC
27530
! ! ! THANK YOU ! ! !
TEL# 919 581 9483 Store 26468
KS# 3 Sep.22'12 (Sat) 09:32
MFY SIDE 2 KVS Order 51

| QTY | ITEM | TOTAL |
|---|---|---|
| 1 | SAUSAGE BISCUIT | 1.00 |
| 1 | SML ORANGE JUICE | 1.79 |
| 1 | SML DR. PEPPER | 1.00 |

Subtotal 3.79
Tax 0.26
Take-Out Total 4.05
Cash Tendered 5.00
Change 0.95

STORE 26468

Warrant #: 110212 Check Number: 00329208 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 10/31/2012 | 1024-1025 | TRAVEL | $25.28 |
| 10/31/2012 | 1012 | TRAVEL | $266.40 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00329208 | 11/02/2012 | 291.68 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 11/02/2012 | 00329208 |

**$291.68**

*Pay* Two Hundred Ninety One Dollars and 68 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00329208⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00329208

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V 13040

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Date(s) of travel: 10/24-10/25

Name: Viola Harris

Trip to: Raleigh

Purpose of trip: DSS Institute

ITEMIZED EXPENSES

| DATE | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| | | | 10-24 | 10-25 | | | | |
| Hotel | | | | | | | | |
| Breakfast | | | 3.52 | | | | | 3.52 |
| Lunch | | | 5.76 | | | | | 5.76 |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | 12.00 | | | | 12.00 |
| Auto Allowance | | | | | | | | |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | 2.00 | 2.00 | | | | 4.00 |
| Regis. fee | Tips | | 14.28 | 14.00 | | | | 25.28 |
| Other | | | | | | | | |
| TOTAL | | | | | | | | |

Account Number 10.4110.531100

Due to Employee $ ~~291.00~~ 25.28

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris Date 10/25/12

Approved [illegible] Date 10-30-12

PAID

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF October 2012

NAME Viola Harris DEPT CODE 10411053100

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 10-2 | Tribo | Raleigh | 45,100 | 45,180 | 80 | 55.5 | 44.40 | | 44.40 |
| 10-2 | Raleigh | Tribo | 45,180 | 45,260 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 10-12 | Tribo | Raleigh | 45,520 | 45,600 | 80 | 55.5 | 44.40 | | 44.40 |
| 10-12 | Raleigh | Tribo | 45,600 | 45,680 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 10-24 | Tribo | Raleigh | 46,000 | 46,080 | 80 | 55.5 | 44.40 | | 44.40 |
| 10-25 | Raleigh | Tribo | 46,080 | 46,160 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 266.40 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

10-2 - Public Education Committee
10-12 - Health + Human Svc Committee
10-24 - DSS Institute

ING GARAGE
25-2012 01-----
/25 10:54 10/25
12.00
12.00
DRIVE SAFELY
ING WITH US----

SAM & WALLY'S
Eatery

Sam & Wally's Eatery
BBeST Building
2 Hanover Square
Raleigh, NC 27601
Phone: (919) 829-7215
Fax: (919) 829-7246
http://www.samandwallys.com

10/24/2012 000000 BILL#1077170
#1072317 3:54PM ADAMS

ORDER#00000395

| | |
|---|---|
| ***PBAL | |
| HamCheese Sand | $0.00 |
| Sourdough | $5.35 |
| --ADD-- | |
| Mayo | |
| Plain | |
| TAKE_OUT | |
| SUBTOTAL | |
| BAL FWD | $5.76 |
| MDSE ST | $5.35 |
| TAX1 | $5.35 |
| | $0.41 |
| ***TOTAL | $5.76 |
| CASH | $6.00 |
| CHANGE | $0.24 |

THANK YOU FOR CHOOSING MCDONALDS

SHOW US YOUR SAME DAY GAS
RECEIPT AND RECEIVE A FREE 32OZ
SOFT DRINK OR TEA WITH ANY PURCHASE!

GENERAL MANAGER CHARLOTTE JONES
USHY 64 AND FAIRVIEW RD
ROCKY MOUNT , NC
27801
! ! ! THANK YOU ! ! !
TEL# 252-446-6102 Store# 16085

KS# 12 Oct.21'12 (Wed) 1:39

MFY SIDE 1 KVS Order 96

| QTY | ITEM | TOTAL |
|---|---|---|
| 1 | 4N/FRY/AP Hi ML TOY | 3.29 |
| 1 | TANGY HONEY MUST CUP | |
| 1 | LRG SWEET ICED TEA | 0.01 |
| | <Drink Upcharge> | |

| | |
|---|---|
| Subtotal | 3.30 |
| Tax | 0.22 |
| Take-Out Total | 3.52 |
| Cash Tendered | 5.00 |
| Change | 1.48 |

PAID

COME WORK WITH US!
APPLY ONLINE WWW.MCSTATE.COM/16085

Warrant #: 112012 Check Number: 00329812 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 11/19/2012 | 1113 | TRAVEL | $184.81 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00329812 | 11/20/2012 | 184.81 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 11/20/2012 | 00329812 |

**$184.81**

*Pay* One Hundred Eighty Four Dollars and 81 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00329812⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00329812

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V# 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF November 20 13

NAME Viola Harris DEPT CODE 104100 531100

| DATE | BETWEEN WHAT PT FROM | TO | ODOMETER START | END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| 11-14 | Trbo | Raleigh | 47,200 | 47,280 | 80 | 55.5 | 44.40 | 2.67 | 47.07 |
| 11-14 | Raleigh | Trbo | 47,280 | 47,360 | 80 | 55.5 | 44.40 | ~~44.40~~ | 44.40 |
| | | | | | | 55.5 | | | |
| 11-15 | Trbo | Raleigh | 47,400 | 47,480 | 80 | 55.5 | 44.40 | 4.54 | 48.94 |
| 11-15 | Raleigh | Trbo | 47,480 | 47,560 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTAL | | | | | | | | | 4.8 |

CHARGE RECEIPT

BOJANGLES #48
1438 East Raleigh Blvd
Rocky Mount NC 27801
Phone:(252)212-5150
Comments: (888)300-4BOJ/(888)300-4265

Date/Time : 11/14/12 7:18AM
Merchant : 104041004830
Store : 48
Check : 0069
Server : 00041/Shaunassy
CREDIT
Card Name : HARRIS/VIOLA S
Account : VI/XXXXXXXXXXXX4967
Approval : 730657
Bank Seq : 231912001959
Ref : 15
SubTotal : 2.67
Total : 2.67

PAID

SIGNATURE
I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT.
MERCHANT COPY

Legislat

I HEREBY CERTI
BEEN NECESSAR
INCURRED IN SE

APPROVED BY:

DEPT HEAD/COU

GUESTCHECK™

| Date | Table | Guests | Server |
|---|---|---|---|
| | | | 2843374 |

APPT-SOUP/SAL-ENTREE-VEG/POT-DESSERT-BEV

Central Cafe
11-15-12
Dutch
Paid

Thank You
Total
Tax
Total

GuestCheck™ www.mainstreetbooking.com

Warrant #: 122112 Check Number: 00330801 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 12/18/2012 | 1212 | TRAVEL | $277.12 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00330801 | 12/21/2012 | 277.12 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 12/21/2012 | 00330801 |

**$277.12**

*Pay* Two Hundred Seventy Seven Dollars and 12 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00330801⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00330801

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

641-0456

FRAN

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF December 2012

NAME Viola Harris DEPT CODE 10410 5311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 12-3 | Trbo | Raleigh | 46,003 | 46,083 | 80 | 55.5 | 44.40 | | 44.40 |
| 12-3 | Raleigh | Trbo | 46,083 | 46,163 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 12-6 | Trbo | Raleigh | 46,320 | 46,400 | 80 | 55.5 | 44.40 | 10.72 | 55.12 |
| 12-6 | Raleigh | Trbo | 46,400 | 46,480 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 12-10 | Trbo | Raleigh | 46,601 | 46,681 | 80 | 55.5 | 44.40 | | 44.40 |
| 12-10 | Raleigh | Trbo | 46,681 | 46,761 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | 266.40 | 10.72 | 277.12 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

PAID

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

9/13/2005

12-3 - NC Alliance Black Elected Officials
12-6 - NCACC Committee - Public Education
12-10 - NCACC committee - Human Svc.

CLARION - Top of the Tower
320 Hillsborough Street
Raleigh, NC 27603
Phone (919) 832-0501
Email:
chef@raleighclarion.com

Date: Dec06'12 09:20AM
Card Type: Visa
Acct #: XXXXXXXXXXXX4967
Card Entry: SWIPED
Trans Type: PURCHASE
Auth Code: 473007
Check: 3016
Table: 2/1
Server: 108 A. Armst

Subtotal: 10.72

Gratuity: _____

Total: _____

_____
Signature
I agree to pay above total according to my card issuer agreement.

* * * * Guest Copy * * * *

PAID

Warrant #: 011813 Check Number: 00331633 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 01/16/2013 | 101013 | TRAVEL ADVANCE | $150.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00331633 | 01/18/2013 | 150.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 01/18/2013 | 00331633 |

**$150.00**

*Pay* One Hundred Fifty Dollars and 00 cents ******

*To The Order Of* VIOLA HARRIS

RBC Bank
RBC Bank (USA)

⑈00331633⑈

**FILE COPY**
**NON-NEGOTIABLE**

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00331633

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

**Fran Mungo**

**From:** Viola Harris <violaharris39@yahoo.com>
**Sent:** Thursday, January 10, 2013 12:51 PM
**To:** Frangie Mungo; lorenzocarmon
**Subject:** trip to Raleigh

I need a $150 advance to travel to Raleigh Jan. 24-25, gas and parking. It's been a long month. I know you're closed for King holiday so I thought I better get this in so check can be cut by Jan. 18 since you're out Jan. 21. thanks.

PAID

Warrant #: 011813 Check Number: 00331653 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 01/16/2013 | 022412 | CONF # 55472005/ V HARRIS | $102.83 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5151 | SHERATON IMPERIAL | 00331653 | 01/18/2013 | 102.83 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5151 | 01/18/2013 | 00331653 |

**$102.83**

*Pay* One Hundred Two Dollars and 83 cents ******

*To The Order Of* SHERATON IMPERIAL

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00331653⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00331653

SHERATON IMPERIAL
4700 EMPEROR BLVD
DURHAM NC 27703

NORTH CAROLINA ASSOCIATION OF COUNTY COMMISSIONERS

Steps: 1 Find Rooms and Rates 2 Available Rooms 3 Guest Information 4 Reservation Review 5 Reservation Confirmed

**NCACC-2013 Legislative Goals Conference**

January 23 - 25, 2013
Event Venue : Sheraton Imperial Hotel and Convention Center

"PLEASE NOTE BLOCK IS FULL ON JANUARY 23 ONLY" IF RESERVATION IS NEEDED FOR THIS DATE PLEASE NOTE A BLOCK OF ROOMS ARE AVAILABLE AT SPRINGHILL SUITES LOCATED DIRECTLY BEHIND THE SHERATON IMPERIAL HOTEL PLEASE CALL 919-995-0500 TO MAKE A RESERVATION AT THE SPRINGHILL SUITES

Group rate available until January 2, 2013. Subject to Availability.

Event Contact >

Planner Log In >

## Step 5 - Reservation Confirmed

Thank you for your reservation! We look forward to seeing you.
Your confirmation number is 55472005.

### Hotel & Room Information

Sheraton Imperial Hotel & Convention Center
4700 Emperor Blvd
Durham, NC, 27703
United States
(919) 941-5000

Check-in: Jan 24, 2013
Check-out: Jan 25, 2013

01 room(s), 01 adult(s)
Wheelchair access required: No

Room Features: TRADITIONAL NON SMOKING, SWEET SLEEPER BED, COMP HDIA/LOCAL/800/LONG DISTA, 32 INCH FLAT SCREEN LCD TV, 2 LINE SPKPHN W/DATAPRT

### Rate Information

Rate Description: Ncacc-2013 Legislative Goals C

Average est. room total per night**
Room rate USD 91.00
Taxes**: USD 11.53
Estimated total**: USD 102.53

Estimated total for your stay**
01 room(s) for 1 night(s) USD 102.53

**The displayed totals are estimates only and do not include any additional charges that may be incurred at the hotel. The actual total will be calculated by the hotel in its local currency, based on the local taxes and currency exchange rate (if applicable) in effect at the time charging occurs.

Get complete details about this rate, taxes and other charges

### Personal & Credit Card Information

Name Mrs Viola Harris
Address P O Box 10
Tarboro
NC, United States, 27886
Phone 252-641-7834
Email franmungo@co.edgecombe.nc.us
Card Number xxxx-xxxx-xxxx-3453
Privacy Policy

### Starwood Preferred Guest Information

### Optional Information

Flight Information
Airline:
Flight Number :

Hotel Arrival Information
Arrival Time: PM

Special Requests:

PAID

### Terms & Conditions

Cancellation policy: If you cancel between 14-Dec-2012 and 6:00 PM hotel time on 22-Jan-2013, there will be no forfeiture amount. If you cancel after 6:00 PM hotel time on 22-Jan-2013, the forfeiture amount will be a 1 night stay.

Rate plan Description: Ncacc-2013 Legislative Goals C

GTD/Deposit policy:

Please note that any change in your reservation may change the rate and/or require payment of cancellation fees. For reservations guaranteed with a form of payment at time of booking, rooms are held until hotel check-out time the day following arrival. For reservations not guaranteed with a form of payment at time of booking, rooms are held until set cancellation time per the rules of the reservation. In the event more guests arrive than can be accommodated due to hotel overbooking or an unforeseen circumstance, and hotel is unable to hold rooms consistent with this room hold policy, hotel will attempt to accommodate guests, at its expense, at a comparable hotel in the area for the oversold night(s), and will pay for transportation to that hotel.

Warrant #: 012513 Check Number: 00331849 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 01/23/2013 | 010613 | #3446 | $764.20 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00331849 | 01/25/2013 | 764.20 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 01/25/2013 | 00331849 |

**$764.20**

*Pay* Seven Hundred Sixty Four Dollars and 20 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00331849⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00331849

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

Account # XXXX XXXX XXXX 3446
Statement closing date 01/06/13

## Your transactions (continued)

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| | | | MCC: 7513 MERCHANT ZIP: 27886 | |
| 12/18 | 12/18 | 2444500PJ2XLV6E5A | LANCASTERS U STORE IT TARBORO NC | $30.47 |
| | | | MCC: 7513 MERCHANT ZIP: 27886 | |
| 12/28 | 12/28 | 2427539PVS66K33LM | NATIONAL ASSC COUNTIES 202-3936226 DC | $515.00 |
| | | | MCC: 7399 MERCHANT ZIP: 20001 | |
| **Total** | | | | **$689.49** |

## Your finance charges

| TYPE OF BALANCE | CORRESPONDING ANNUAL PERCENTAGE RATE (APR) | DAILY PERIODIC RATE (MAY VARY) | DAYS IN BILLING | AVERAGE DAILY BALANCE | FINANCE CHARGE |
|---|---|---|---|---|---|
| Purchases | 13.240% | 0.03628% | 31 | $0.00 | $0.00 |
| Cash advances | 19.990% | 0.05477% | 31 | $0.00 | $0.00 |
| | | | | | $0.00 |

## Important information - please read

TOTAL *FINANCE CHARGE* PAID IN 2012 $34.63

With the start of the New Year, we would like to take the opportunity to thank you for being our customer. We value your business and the opportunity to serve you.

Remember, your credit card is a great financial tool that can help you start the year out right. To learn more about money-saving balance consolidation opportunities for your business, call us at 1-800-474-2101.

1-2

Fran Mungo

From: naco@naco.org
Sent: Friday, December 28, 2012 1:52 PM
To: franmungo@co.edgecombe.nc.us
Subject: NACo 2013 Legislative Conference Confirmation

12/28/2012

Hon. Viola Harris
Commissioner
Edgecombe County
PO BOX 10
Tarboro, NC 27886-0010

Hon. Viola Harris:

Thank you for registering for the 2013 NACo Legislative Conference taking place March 2-6, 2013 at the Washington Hilton Hotel in Washington, D.C.

Please review your confirmation / receipt listed below. Any outstanding balance must be paid either before or on-site to obtain your badge and registration materials when you arrive in Washington, D.C.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Viola | 1.00 | Member Fax Registration (Early) | $515.00 | $0.00 | $515.00 | $0.00 |
| Harris Viola | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk at the Washington Hilton Hotel.

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 021513 Check Number: 00332616 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/08/2013 | 0302-0305 | 3505216383/ VIOLA HARRIS | $786.62 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 250 | WASHINGTON HILTON & TOWERS | 00332616 | 02/15/2013 | 786.62 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 250 | 02/15/2013 | 00332616 |

**$786.62**

*Pay* Seven Hundred Eighty Six Dollars and 62 cents ******

*To The Order Of* WASHINGTON HILTON & TOWERS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00332616⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00332616

WASHINGTON HILTON & TOWERS
1919 CONNECTICUT AVE NW
WASHINGTON DC 20009

**Fran Mungo**

**From:** Hilton Hotels & Resorts Confirmed <hiltonhotels&resorts@res.hilton.com>
**Sent:** Monday, February 11, 2013 11:00 AM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Hilton Hotels & Resorts Confirmation #3505216383

V# 250 104110 531100

CONSIDER YOURSELF BOOKED

Hilton

**Washington Hilton**
1919 Connecticut Ave., NW | Washington | DC | United States 20009
T: 1-202-483-3000 | F: 1-202-232-0438

We're pleased to confirm your reservation and look forward to welcoming you to Hilton.

Rooms & Suites | Dining | Amenities & Services | Map & Directions

Thank you for booking with us, Viola Harris

**Confirmation: 3505216383** — Modify Reservation

Arrival: 02 Mar 2013 4:00 PM
Departure: 05 Mar 2013 11:00 AM

eStandby™ UPGRADE
Upgrade for as little as $9 extra per night. Upgrade now >

PAID

**Rate Information:**
Rate Type:
NATL ASSOC OF COUNTI
Rate per night: 229.00 USD
Total for Stay per Room:
Rate 687.00 USD
Taxes 99.62 USD
Total ~~786.62 USD~~

740 25
53 25 NT

**Total for Stay:** 786.62 USD
Includes estimated taxes and service charges. (Gratuities not included.)

**Tax:**
- There is a 14.50% per room per night tax.

**Additional Charges:**
- Valet parking: 43.00/night Self parking: 36.00/night

**Room Information:**
Rooms: 1
Clients: 1 Adult
Non-Smoking Confirmed
Room Type: 1 KING BED
Your room type preferences have been submitted with your reservation, and are subject to hotel availability.


HILTON HHONORS
JOIN HILTON HHONORS AND EARN POINTS, ROOM UPGRADES, FREE NIGHTS AND MORE.
Join now >

HILTON TO HOME
SHOP NOW >

SAVE & EARN.
Book Now
National Car Rental


Return Ck to Fran

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 022213 Check Number: 00332799 

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/20/2013 | 37280 | VIOLA HARRIS | $180.00 |
| 02/20/2013 | 37269 | VIOLA HARRIS | $180.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 670 | UNC SCHOOL OF GOVERNMENT | 00332799 | 02/22/2013 | 360.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 670 | 02/22/2013 | 00332799 |

**$360.00**

*Pay* Three Hundred Sixty Dollars and 00 cents ******

*To The Order Of* UNC SCHOOL OF GOVERNMENT

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00332799⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00332799

UNC SCHOOL OF GOVERNMENT
BUSINESS OFFICE
CB#3330, KANPP-SANDERS BLDG.
CHAPEL HILL NC 27599-3330

UNC
SCHOOL OF GOVERNMENT

# Invoice

School of Government
CB# 3330 Knapp-Sanders Building
Chapel Hill, NC 27599-3330
919.966.4119 (Publication Sales)
919.966.4110 (Accounting)
919.843.8502 (Registration)

| | |
|---|---|
| Date | 2/12/2013 |
| Invoice # | IN37280 |
| Terms | Net 30 |
| Due Date | 3/14/2013 |
| PO # | |

Bill To
VIOLA HARRIS
P O BOX 10
TARBORO NC 27886
UNITED STATES

Ship To
VIOLA HARRIS
P O BOX 10
TARBORO NC 27886
UNITED STATES

| Item | Quantity | Description | Unit Price | Options | Amount | Tax |
|---|---|---|---|---|---|---|
| 2013LDLM0018CR-RLOnly | 1 | RL Only-Chapel Hill | 180.00 | | 180.00 | |
| USPS-Media mail | 1 | Shipping | 0.00 | | 0.00 | Yes |
| | | | | Total | | $180.00 |

PAID

10-4110-5311-00
V670

approved
2-18-13

TARBORO NC 27886
UNITED STATES

TARBORO NC 27886
UNITED STATES

| Item | Quantity | Description | Unit Price | Options | Amount | Tax |
|---|---|---|---|---|---|---|
| 2013LDLM0003CR | 1 | Strategic Planning for Elected Officials - Greenville | 180.00 | | 180.00 | |
| USPS-Media mail | 1 | Shipping | 0.00 | | 0.00 | Yes |
| | | | | Total | | $180.00 |

PAID

10-4110-5311-00
V670

approved

Warrant #: 030113 Check Number: 00333040 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/26/2013 | 0213 | TRAVEL | $402.20 |
| 02/26/2013 | 022113 | ADVANCE FOR WASHINGTON TRIP | $500.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00333040 | 03/01/2013 | 902.20 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 03/01/2013 | 00333040 |

**$902.20**

*Pay* Nine Hundred Two Dollars and 20 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00333040⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00333040

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

Lorenzo Carmon 2-27-13 V13040

10 4110 5311 00

**Lorenzo Carmon**

**From:** violaharris39@yahoo.com
**Sent:** Thursday, February 21, 2013 1:13 PM
**To:** franmungo@co.edgecombe.nc.us; lcarmon@co.edgecombe.nc.us
**Subject:** Re: Hilton Hotels & Resorts Confirmation #3505216383

I need to request $500 advance, parking is still $37 per day and now gas is nearly $4 a gallon. Leaving Saturday morning March 2. Will pick up Friday March 1.
Sent from my U.S. Cellular BlackBerry® smartphone

**From:** "Fran Mungo" <franmungo@co.edgecombe.nc.us>
**Date:** Mon, 18 Feb 2013 10:25:08 -0500
**To:** 'Viola Harris'<violaharris39@yahoo.com>
**Subject:** FW: Hilton Hotels & Resorts Confirmation #3505216383

**From:** Hilton Hotels & Resorts Confirmed [mailto:hiltonhotels&resorts@res.hilton.com]
**Sent:** Monday, February 11, 2013 11:00 AM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Hilton Hotels & Resorts Confirmation #3505216383

Washington Hilton
1919 Connecticut Ave., NW | Washington | DC | United States 20009
T: 1-202-483-3000 | F: 1-202-232-0436

Rooms & Suites | Dining | Amenities & Services | Map & Directions

Thank you for booking with us, Viola Harris

**Confirmation: 3505216383** Modify Reservation

| | |
|---|---|
| Arrival: | 02 Mar 2013 4:00 PM |
| Departure: | 05 Mar 2013 11:00 AM |

**Rate Information:**

Rate Type:
NATL ASSOC OF COUNTI '

| | |
|---|---|
| Rate per night: | 229.00 USD |
| Total for Stay per Room: | |
| Rate | 687.00 USD |
| Taxes | 99.62 USD |
| Total | 786.62 USD |

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF February 2013

NAME Viola Harris DEPT CODE 10411053110 0

| DATE | BETWEEN WHAT PT FROM | TO | ODOMETER START | END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| 2-5-13 | Trbo | Raleigh | 52,010 | 52,090 | 80 | 55.5 | 44.40 | | 44.40 |
| 2-5-13 | Raleigh | Tarboro | 52,090 | 52,170 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 2-14-13 | Trbo | Raleigh | 53,300 | 53,380 | 80 | 55.5 | 44.40 | 4.51 | 48.91 |
| 2-14-13 | Raleigh | Tarboro | 53,380 | 53,460 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 2-15-13 | Trbo | Raleigh | 53,500 | 53,580 | 80 | 55.5 | 44.40 | 4.51 | 48.91 |
| 2-15-13 | Raleigh | Trbo | 53,580 | 53,660 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 2-22-13 | Trbo | ~~Raleigh~~ Chapel Hill | 55,010 | 55,120 | 110 | 55.5 | 61.05 | 4.68 | 65.73 |
| 2-22-13 | ~~Raleigh~~ Chapel Hill | Trbo | 55,120 | 55,230 | 110 | 55.5 | 61.05 | | 61.05 |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 402.20 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

2-5 Alliance
2-14 Public Education
2-15 Hillman Svc
2-22 Essentials of G. Grant

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Raleigh/Chapel Hill
Purpose of trip: meetings/training

Date(s) of travel: 2/5, 2/14, 2/15, 2/22 -2013

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | ~~SAT~~ FRI | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | 2-5 | | 2-14 | 2-15 | 2-22 | | |
| Hotel | | | | | | | | |
| Breakfast | | | | 4.51 | 4.51 | 4.68 | | |
| Lunch | | | | | | | | |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other | | | | | | | | |
| TOTAL | | | | 4.51 | 4.51 | 4.68 | | 13.70 |

Account Number _____

Due to Employee $ 402.20

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris  Date 2/25/13

Approved [illegible]  Date 2-25-13

PAID

SALE RECEIPT
Store #1852 tk 02/15/13 09:16:19
Subway Sandwiches & Salads

Trans# 11 Clerk 5 Na a
Dwr1 TRD1 021513 Reg- D E MAIN
Rec pt # 000058833
--- ITEM --- QTY TO$ MEMO FLU
EgChOmlt Br 1 T0$ 2.5 PRICE 0V29221
FRK-21oz 1 T $ 10002

SUBTOTAL $ 4.18
Sales Tx $ 0.32

TAKE-OUT **TOTAL $ 4.51
Cash AMT TEND $ 5.01

CHANGE DUE$ 0.50

How'd we do? Get a free cookie
Take 1 min. survey at www.tellsubway.

Welcome to Dunkin' Donuts
Sudré #307442
2120 Stone Rose Dr., Rocky Mount
2/22/2013 9:46:57 AM

Carry Out
Order Number: 853

Register:2 Tran Seq No: 2190853
Cashier:Cecilia S.

1 Wrap Ham YEL AM 1.89
1 Cooler MMaid Lemonade 1.
1 6 Munchkins 1.

PAID

Sub. Total: $4.38
Tax: $0.30
Total: $4.68
Discount Total: $0.00

Change $0.32
Cash $5 $5.0

LI RECEIPT
Store #1852 tk 02/14/13 06:08:1
Subway Sandwiches & Salads

Trans# 4 Clerk 5 Na a
Dwr1 TRD1 021413 Reg- D E MAIN
Rec pt # 000058866
--- ITEM --- QTY TO$ MEMO FLU
EgChOmlt Br 1 T0$ 2.5 PRICE 0V29221
FRK-21oz 1 T $ 1.6 10002

SUBTOTAL $ 4.1
Sales Tx $ 0.3

TAKE-OUT **TOTAL $ 4.5
Cash AMT TEND $ 10.0

CHANGE DUE$ 5.5

How'd we do? Get a free cookie
Take 1 min. survey at www.tellsubway.

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 041213 Check Number: 00334556 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/10/2013 | 040313 | TRAVEL | $237.80 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00334556 | 04/12/2013 | 237.80 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 04/12/2013 | 00334556 |

**$237.80**

*Pay* Two Hundred Thirty Seven Dollars and 80 cents ******

*To The Order Of* VIOLA HARRIS

RBC Bank
RBC Bank (USA)

⑈00334556⑈

**FILE COPY**
**NON-NEGOTIABLE**

AP

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00334556

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Raleigh
Purpose of trip: Black Summit

Date(s) of travel: 4/3/13

V13040

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | 4/3/13 | | | | | | |
| Hotel | | | | | | | | |
| Breakfast | | | | | | | | |
| Lunch | | | | | | | | |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | $149 | | | | | | |
| Other | | | | | | | | |
| TOTAL | | $149.00 | | | | | | |

Account Number 104110 531100

Due to Employee $ 237.80

149.00
88.80
$237.80

PAID

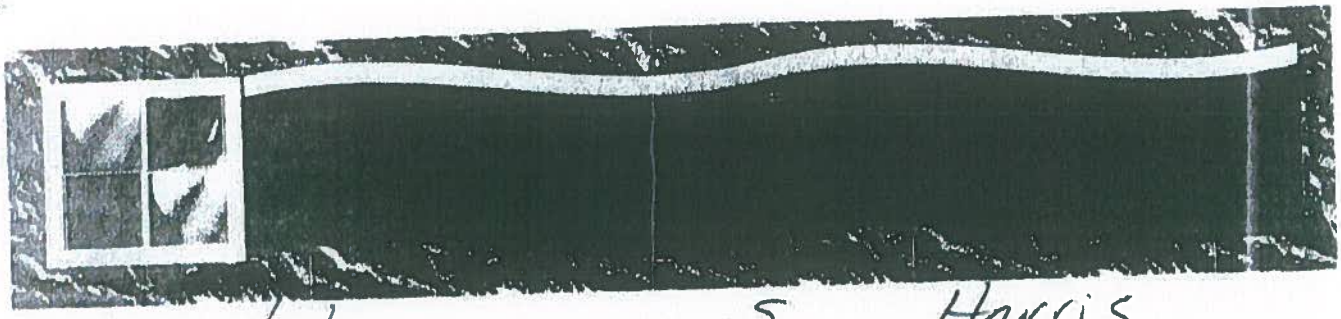
I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris

Date 4/3/13

Approved

Date



Name: Viola S Harris
First MI Last

Address: 609 St David St City Tarboro State NC Zip 27886

**REGISTRATION FEES**

*(Registration Includes: Meal Functions, Work Sessions, Conference Tote, Program Booklet and Proceedings, and Social Events.)*

- [x] Early Bird Special - $149 (January 21—March 25)
- [ ] Regular - $179 (March 26– April 24)
- [ ] Onsite - $199 (April 25)
- [ ] Student/Spouse $99* (Covers meal and workshop functions only—no promotional gift.)

TOTAL: $ 149

**METHODS OF PAYMENT**

- [x] Check #2379
- [ ] Money Order
- [ ] Visa
- [ ] MasterCard

PAID

Name as shown on the credit card: _____
First MI Last

Credit Card #: _____ Expiration (MM/DD/YYYY) _____

CVC: _____ (on back of credit card)

**Do you belong to a member organization?** *(Please check all that apply)*

- ___ The NC Black Legislative Caucus
- X The NC Association f Black County Officials
- ___ The NC Conference of Black Mayors
- ___ The NC Conference of Black Municipal Officials
- ___ The NC Association of Black School Board Members

**Are you a member of a support organization?** *(Please check all that apply)*

- ___ NAACP
- ___ The NC Black Leadership Caucus
- ___ The NC CDC Initiative
- ___ Faith-Based Organization
- ___ Old North State Medical
- ___ Fraternal Organization
- ___ Black Lawyers
- ___ Other *(Please specify)* _____
- ___ NCAE
- ___ AARP

**Make Checks Payable To: THE ALLIANCE OF NC BLACK ELECTED OFFICIALS**
P.O. Box 26615
Raleigh, NC 27611

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF ~~March~~ April 20 13

NAME Viola Harris DEPT CODE

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 4/2/13 | Tarb | Raleigh | 53360 | 53440 | 80 | 55.5 | 44.40 | | 44.40 |
| 4/2/13 | Raleigh | Tarb | 53440 | 53520 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 88.80 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 042413 Check Number: 00334981 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/24/2013 | 0425-0427 | CONF # 3518271922/ V HARRIS | $225.50 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 6354 | HILTON NORTH RALEIGH | 00334981 | 04/24/2013 | 225.50 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 6354 | 04/24/2013 | 00334981 |

**$225.50**

*Pay* Two Hundred Twenty Five Dollars and 50 cents ******

*To The Order Of* HILTON NORTH RALEIGH

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00334981⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00334981

HILTON NORTH RALEIGH
3415 WAKE FOREST ROAD
RALEIGH NC 27609

**Eran Mungo**

**From:** Viola Harris <violaharris39@yahoo.com>
**Sent:** Tuesday, April 16, 2013 1:27 PM
**To:** Frangie Mungo
**Subject:** Fw: Hilton Hotels & Resorts Confirmation #3518271922

Hold check

This is for the Black Summit.

----- Forwarded Message -----
**From:** Hilton Hotels & Resorts Confirmed <hiltonhotels&resorts@res.hilton.com>
**To:** "violaharris39@yahoo.com" <violaharris39@yahoo.com>
**Sent:** Tuesday, April 2, 2013 12:19 PM
**Subject:** Hilton Hotels & Resorts Confirmation #3518271922

Hilton North Raleigh/Midtown
3415 Wake Forest Road | Raleigh | NC |
United States 27609
T: 1-919-872-2323 | F: 1-919-878-0890

V 6354

10 4110 5311 00

Rooms & Suites | Dining | Amenities & Services | Map & Directions

Thank you for booking with us, Viola Harris

**Confirmation: 3518271922** **Modify Reservation**

Arrival: 25 Apr 2013 3:00 PM

Departure: 27 Apr 2013 12:00 PM

**Rate Information:**

Rate Type:
NC BLACK SUMMIT
Rate per night: 100.00 USD
Total for Stay per Room:
Rate 200.00 USD
Taxes 25.50 USD
Total 225.50 USD

4-22-13

211.50
11.50 NT

**Total for Stay:** 225.50 USD
Includes estimated taxes and service charges. (Gratuities not included.)

**Tax:**
- There is a 12.75% per room per night tax.

**Additional Charges:**
- Self parking: 0.00/night

**Room Information:**

Rooms: 1
Clients: 1 Adult

Warrant #: 050313 Check Number: 00335277 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/01/2013 | 0413 | TRAVEL | $88.80 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00335277 | 05/03/2013 | 88.80 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 05/03/2013 | 00335277 |

**$88.80**

*Pay* Eighty Eight Dollars and 80 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00335277⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00335277

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2013

NAME Viola Harris DEPT CODE 1041105311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 4-25 | Tarboro | Raleigh | 56,032 | 56112 | 80 | 55.5 | 44.40 | | 44.40 |
| 4-27 | Raleigh | Tarboro | 56,112 | 56192 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 88.80 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

Sap Carr

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

6/1/2011

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2013

NAME Viola Harris DEPT CODE 1041105311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 4-25 | Tarboro | Raleigh | 56,032 | 56112 | 80 | 55.5 | 44.40 | | 44.40 |
| 4-27 | Raleigh | Tarboro | 56,112 | 56192 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 88.80 |

Sub Total: 7.29
Tax 0.56
04/25 3:29p TOTAL: 7.85

Help Send a Child to Camp Cornel
Register or Donate at
www.CampCornel.org

CASH CASH-TEND CHANGE DUE
20.00 0.00

CASH/PAYOUT 12.15 7.85

TOTAL SALES: 7.85
04/25/13 3:29p

I HEREBY CERTI[illegible] HAVE BEEN NECESSA[illegible] WERE INCURRED IN SE[illegible]

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 053113 Check Number: 00336210 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/29/2013 | 052013 | TRAVEL | $177.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00336210 | 05/31/2013 | 177.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 05/31/2013 | 00336210 |

**$177.60**

*Pay* One Hundred Seventy Seven Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00336210⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00336210

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF May 2013 20__

NAME Viola Harris DEPT CODE 10411531100

| DATE | BETWEEN WHAT PT FROM | TO | ODOMETER START | END | MILES | RATE PER MILE | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| 5/17 | Trbo | Raleigh | 58,910 | 58,990 | 80 | 55.5 | 44.40 | | 44.40 |
| 5/17 | Raleigh | Trbo | 58,996 | 59,076 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 5/23 | Trbo | Raleigh | 59,500 | 59,580 | 80 | 55.5 | 44.40 | | 44.40 |
| 5/23 | Raleigh | Trbo | 59,580 | 59,660 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | 320 | | 177.60 | | 177.60 |

PAID

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

Warrant #: 062113 Check Number: 00336919 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/19/2013 | 060713 | NCAC10E128/ VIOLA HARRIS | $350.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 744 | NCACC | 00336919 | 06/21/2013 | 350.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 744 | 06/21/2013 | 00336919 |

**$350.00**

*Pay* Three Hundred Fifty Dollars and 00 cents ******

*To The Order Of* NCACC

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00336919⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00336919

NCACC
RALEIGH NC 27603

**Fran Mungo**

**From:** violaharris39@yahoo.com
**Sent:** Friday, June 07, 2013 6:36 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Fw: 2013 NCACC Annual Conference PAYMENT DUE

V744 R12

Please complete registration
Sent from my U.S. Cellular BlackBerry® smartphone

---

**From:** "NCACC" <Registration@signup4.net>
**Date:** Fri, 07 Jun 2013 15:39:08 -0400
**To:** violaharris39@yahoo.com<violaharris39@yahoo.com>
**ReplyTo:** kelly.brown@ncacc.org
**Subject:** 2013 NCACC Annual Conference PAYMENT DUE

Our records indicate that you have created a registration for the 2013 NCACC Annual Conference as indicated below and the **registration is incomplete**.

Confirmation Number NCAC10E128

| | **Viola Harris** | |
|---|---|---|
| **QTY** | **Description** | **Cost** |
| 1 | Registration fees: Early registration (county officials only through July 23) - $185 | $185.00 |
| 2 | Registration fees: Horn O' Plenty Adult - $30 | $60.00 |
| 1 | Registration fees: NCABCO Awards Luncheon - $35 | $35.00 |
| 2 | Registration fees: President's Banquet - $35 | $70.00 |
| | **Cost** | $350.00 |
| | **Due** | $350.00 |

PAID

6-18-13

10-4110-5311-00

Please know that if you do not complete this registration by returning to the website link,

**https://www.SignUp4.net/public/ap.aspx?OID=138&EID=NCAC10E**,

and completing the payment process, this registration **will be DELETED**.

You must finish this registration by Friday, Aug. 2. After Aug. 2, you will have to register on-site and pay the on-site registration fee.

If you have any questions, please contact me.

Kelly Brown
kelly.brown@ncacc.org
919-715-2893

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 081413 Check Number: 00338610 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/14/2013 | 0814113 | 1884705/ V HARRIS | $439.73 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 2418 | SHERATON - FOUR SEASONS | 00338610 | 08/14/2013 | 439.73 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 2418 | 08/14/2013 | 00338610 |

**$439.73**

*Pay* Four Hundred Thirty Nine Dollars and 73 cents ******

*To The Order Of* SHERATON - FOUR SEASONS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00338610⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00338610

SHERATON - FOUR SEASONS
3121 HIGH POINT RD
GREENSBORO NC 27407

**Fran Mungo**

**From:** Viola Harris <violaharris39@yahoo.com>
**Sent:** Tuesday, August 13, 2013 9:41 AM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Fw: Sheraton Greensboro at Four Seasons Reservation Confirmation

----- Forwarded Message -----
**From:** "SheratonGreensboroAtFourSeasons@starwoodhotels.com" <SheratonGreensboroAtFourSeasons@starwoodhotels.com>
**To:** violaharris39@yahoo.com
**Sent:** Tuesday, May 28, 2013 10:26 AM
**Subject:** Sheraton Greensboro at Four Seasons Reservation Confirmation

@+IMAGE[h1224logo2.tif]

Viola Harris
609 St David St

Tarboro NC 27886

May 28, 2013

Reservation # 1884705

Thank you for selecting the Sheraton Greensboro at Four Seasons for your upcoming visit to Greensboro.

For arrival 22-AUG-2013 and departure 25-AUG-2013, we have requested the following accommodations for you: DBDB.

The corresponding nightly rate for this room type is $130.00 + 6.75% state sales tax & 6% local occupancy tax.

Check in time: No earlier than 3 pm on the day of arrival.
Check out time: No later than 12 noon on the day of departure.

*Failure to cancel reservations by 72 hours prior to your arrival date will result in a one night room & tax charge.
*Rate is generally split among roommates. Cancellation of any roommate will result in the full charge on remaining accounts.
*Rollaway Beds are $20.00 plus tax nightly.
*Any guest checking out prior to their scheduled departure date will be charged 50% of their nightly rm rate +12.75% tax.
*Room type requests are based on availability.

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 083013 Check Number: 00339090 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/27/2013 | 0822-0825 | TRAVEL | $197.16 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00339090 | 08/30/2013 | 197.16 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 08/30/2013 | 00339090 |

**$197.16**

*Pay* One Hundred Ninety Seven Dollars and 16 cents ******

**FILE COPY**
**NON-NEGOTIABLE**

*To The Order Of* VIOLA HARRIS

RBC Bank
RBC Bank (USA)

⑈00339090⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00339090

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Greensboro
Purpose of trip: NCACC Conference

Date(s) of travel: 8/22 - 8/25

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | | | 8-22 | 8-23 | 8-24 | 8-25 | |
| Hotel | | | | | | | | |
| Breakfast | | | | 6.41 | 12.81 | | | 19.22 |
| Lunch | | | | | | | | |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other / Tips | | | | 5.00 | 2.00 | | | 7.00 |
| TOTAL | | | | | | | | 26.22 |

Account Number 10410 5311 00

Due to Employee $ 197.16

V 13040

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris Date 8/25/13

Approved [illegible] Date 8-29-13

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF August 20___

NAME Viola Harris DEPT CODE _____

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 8-22 | Trbo | Gnsb | 64,780 | 64,934 | 154 | 55.5 | | | 85.47 |
| 8-25 | Gnsb | Trbo | 64,934 | 65,088 | 154 | 55.5 | | | 85.47 |
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Sheraton Greensboro Hotel
Joseph's Restaurant
====(receipt)====

125 BISHMA

4/1 1793 GST 1
AUG23'13 8:40AM
REPRINT MEMO CHK

Seat:1
1 1-Egg w/Meat 8.50
1 $.50 Side Order 0.50
1 Coffee 3.00
Food Sales 12.00
Tax 0.81
9:02 Payment Du $12.81

Tip : _____

Total : _____

Room# : _____

Signature : _____

Please Print Name
*** THANK YOU ***

aton Greensboro Hotel
Cafe Expresso

PRESSO AM

26 AUG22 13 8:27GST 1

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| issant | 3.50 |
| bucks S | 2.50 |
| l Sales | 6.00 |
| | 0.41 |
| l Paid | 6.41 |
| CASH 0000549 | |
| l | 20.41 |
| ge Due | 14.00 |

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NAGER

SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 092713 Check Number: 00339838 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 09/24/2013 | 0913 | TRAVEL | $355.20 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00339838 | 09/27/2013 | 355.20 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 09/27/2013 | 00339838 |

**$355.20**

*Pay* Three Hundred Fifty Five Dollars and 20 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00339838⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00339838

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF September 2013

NAME Viola Harris DEPT CODE 10411105311.00

Committee meeting NCABCO

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 9-19-13 | Tarboro | Asheville | 7129 | 7449 | 320 | 55.5 | 177.60 | | 177.60 |
| 9-19-13 | Asheville | Tarboro | 7449 | 7769 | 320 | 55.5 | 177.60 | | 177.60 |
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| TOTALS | | | | | | | | | 355.20 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 121313 Check Number: 00342197 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 12/11/2013 | 1213 | TRAVEL | $177.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00342197 | 12/13/2013 | 177.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 12/13/2013 | 00342197 |

**$177.60**

*Pay* One Hundred Seventy Seven Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00342197⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00342197

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF December 20 13

NAME Viola Harris DEPT CODE 10410531100

NCACC Health + Human Svc.

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 12-5-13 | Trbo | Raleigh | 73,000 | 73,080 | 80 | 55.5 | 44.40 | | 44.40 |
| 12-5-13 | Raleigh | Trbo | 73,080 | 73,160 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 88.80 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

177 60

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

8/1/2011

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF November 2013

NAME Viola Harris DEPT CODE 10411053110 00

NCACC Education Committee

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 11-29-13 | Tarboro | Raleigh | 70,217 | 70,287 | 80 | 55.5 | 44.40 | | 44.40 |
| 11-29-13 | Raleigh | Tarboro | 70,287 | 70,367 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 88.80 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

Bob Cox
DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 012414

Check Number: 00343446



| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 01/23/2014 | 0114 | TRAVEL | $177.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00343446 | 01/24/2014 | 177.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 01/24/2014 | 00343446 |

**$177.60**

*Pay* One Hundred Seventy Seven Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00343446⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00343446

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF January 2014

NAME Viola Harris DEPT CODE 10410531100 / 13040

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 1-10-14 | Trbo | Raleigh | 72,020 | 72,100 | 80 | 55.5 | 44.40 | | 44.40 |
| 1-10-14 | Raleigh | Trbo | 72,100 | 72,180 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 1-14-14 | Trbo | Raleigh | 73,000 | 73,080 | 80 | 55.5 | 44.40 | | 44.40 |
| 1-14-14 | Raleigh | Trbo | 73,080 | 73,160 | 80 | 55.5 | 44.40 | | 44.40 |
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| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | ~~97.60~~ |

177.60

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

8/1/2011

Warrant #: 012414 Check Number: 00343447 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 01/23/2014 | 11014 | REIMBURSE | $2.98 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00343447 | 01/24/2014 | 2.98 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 01/24/2014 | 00343447 |

**$2.98**

*Pay* Two Dollars and 98 cents ******

*To The Order Of* VIOLA HARRIS

RBC Bank
RBC Bank (USA)

⑈0034344 7⑈

**FILE COPY**
**NON-NEGOTIABLE**

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00343447

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris

Date(s) of travel: 1-10-14 1-14-14

Trip to: Raleigh

Purpose of trip: NCABO mtg
NCACC Legislative Goals meeting

V13040

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | TOTAL |
|---|---|---|---|---|---|---|---|
| DATE | | | | | | | |
| Hotel | | | | | | | |
| Breakfast | | 2.79 | | | | | |
| Lunch | | | | | | | |
| Dinner | | | | | | | |
| Taxi/Bus | | | | | | | |
| Auto Allowance | | | | | | | |
| Parking | | | | | | | |
| Telephone | | | | | | | |
| Baggage | | | | | | | |
| Regis. fee | | | | | | | |
| Other | | | | | | | |
| TOTAL | | 2.79 | | | | | |

Account Number 104110531100

Due to Employee $ 2.98

I certify that the travel indicated was incurred in the service of th
submitted is correct.

Signature Viola Harris Date 1-

Approved [illegible] Date 1-16

FREE COOKIE OR APPLE PIE WITH PURCHASE!
Go to www.McDonaldsFeedback.com
and tell us about your visit.
Validation Code:_____
Limit one per customer per visit.
Valid at participating locations only.
GENERAL MANAGER RICK KUNKEL
501 W. WASHINGTON
NASHVILLE
NC
27856
! ! ! THANK YOU ! ! !
TEL# 252-459-3073 Store# 11932

KS# 13 Jan.14'14 (Tue) 09:03

MFY SIDE 2: KVS Order 75

| QTY ITEM | | TOTAL |
|---|---|---|
| 1 Country Ham Biscuit | | 2.79 |
| 1 L Sweet Iced Tea | 1P | 0.00 |
| Subtotal | | 2.79 |
| Tax | | 0.19 |
| Take-Out Total | | 2.98 |
| Cash Tendered | | 10.00 |
| Change | | 7.02 |

COME WORK WITH US!
APPLY ONLINE WWW.MCSTATE.COM/11932

Warrant #: 013114 Check Number: 00343684 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 01/27/2014 | 010614 | 3446 | $1,059.88 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00343684 | 01/31/2014 | 1,059.88 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 01/31/2014 | 00343684 |

**$1,059.88**

*Pay* One Thousand Fifty Nine Dollars and 88 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00343684⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00343684

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 01/06/14 |
| **New balance** | **$1,059.88** |
| **Minimum payment** | **$16.00** |
| **Due date** | **01/31/14** |

**Questions?**
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $0.00 |
| Payment received | $0.00 |
| Purchases | $1,059.88 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$1,059.88** |
| **Minimum payment** | **$16.00** |
| **Due date** | **01/31/14** |

| | |
|---|---|
| **Total credit limit** | **$10,000.00** |
| **Total available credit** | **$8,940.00** |
| **Cash advance available credit** | **$2,500.00** |

V27273R2

104105311 00
Approval

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 12/14 | 12/14 | 2469216AW00729H1W | #NORTON *ANNUAL RENEWAL 877-294-5265 CA<br>MCC: 5968 MERCHANT ZIP: 95014 | $74.88 |
| **Total** | | | | **$74.88** |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 12/13 | 12/13 | 2427539AWBNREX87N | NATIONAL ASSC COUNTIES 202-393-6226 DC<br>MCC: 7399 MERCHANT ZIP: 20001 | $515.00 |
| 12/30 | 12/30 | 2406065BDS66F0BVZ | NORTH CAROLINA BOARD 919-2461050 NC<br>MCC: 8699 MERCHANT ZIP: 27517 | $35.00 |

(continued on next page)

**Fran Mungo**

**From:** nacomeetings@naco.org
**Sent:** Friday, December 13, 2013 11:57 AM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2014 NACo Legislative Conference Confirmation

12/13/2013

Hon. Viola Harris
Commissioner
Edgecombe County
PO BOX 10
Tarboro, NC 27886-0010

Hon. Viola Harris:

Thank you for registering for the 2014 NACo Legislative Conference taking place March 1-5, 2014 at the Washington Hilton Hotel in Washington, D.C.

Please review your confirmation / receipt listed below. Any outstanding balance must be paid either before or on-site to obtain your badge and registration materials when you arrive in Washington, D.C.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Viola | 1.00 | Member Fax Registration (Early) | $515.00 | $0.00 | $515.00 | $0.00 |
| Harris Viola | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk located in Columbia Hall at the Washington Hilton Hotel.

Registration hours are as follows:
Saturday, March 1 : 8:00 a.m. – 5:00 p.m.
Sunday, March 2: 7:00 a.m. – 4:00 p.m.

Warrant #: 022114 Check Number: 00344312 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/18/2014 | 0302-030514 | VIOLA HARRIS | $820.97 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 250 | WASHINGTON HILTON & TOWERS | 00344312 | 02/21/2014 | 820.97 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 250 | 02/21/2014 | 00344312 |

**$820.97**

*Pay* Eight Hundred Twenty Dollars and 97 cents ******

*To The Order Of* WASHINGTON HILTON & TOWERS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00344312⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00344312

WASHINGTON HILTON & TOWERS
1919 CONNECTICUT AVE NW
WASHINGTON DC 20009

**Fran Mungo**

**From:** The ConferenceDirect Team <groupcampaigns@pkghlrss.com>
**Sent:** Friday, February 07, 2014 5:45 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** Hotel Modification Acknowledgement

NACO National Association of Counties
The Voice of America's Counties

Dear VIOLA,

Welcome to Washington for the 2014 NACo Legislative Conference.

Thank you for making your hotel reservation on 16-Dec-2013 for 2014 NACo Legislative Conference being held in Washington, DC, over the dates of 01-Mar-2014 - 05-Mar-2014. This modification to your hotel reservation was made on 17-Jan-2014.

All reservation changes can be made through the event website by clicking here, or by calling (888) 751-5182 between 8:30 AM-5:30 PM EST Monday through Friday. Please note: NO new reservations or cancellations will be accepted via the call center phone number.

General Questions? Please email nacomeetings@naco.org.

| Reservation Information | |
|---|---|
| **Passkey Acknowledgement Number:** | 327HS5RP |
| **Your hotel:** | Washington Hilton |
| **Check-In:** | 02-Mar-2014 |
| **Check-out:** | 05-Mar-2014 |
| **Room type:** | Run of House |
| **Guests per room:** | 1 |
| **Guest name:** | VIOLA HARRIS |
| **Share withs:** | |
| **Requests:** | ++1/17 : Arrival date status is :: Arrival date changed. -- |
| **Guarantee method:** | Credit card |
| **Nightly Rates:** | |

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 022814

Check Number: 00344643



| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 02/25/2014 | 022514 | TRAVEL ADVANCE | $300.00 |
| 02/25/2014 | 0214 | TRAVEL | $212.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00344643 | 02/28/2014 | 512.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 02/28/2014 | 00344643 |

**$512.60**

*Pay* Five Hundred Twelve Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00344643⑈

AP

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00344643

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

2-28-14

Need $300 advance for trip to DC on 3/2/14

Check on $35x2 for Breakfast NCACC-

Feb. 24. schedule NACo trip

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF February 20 14

NAME Viola Harris DEPT CODE 1041205311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| | | | | | | 55.5 | | | |
| 2-1-14 | Trbo | Raleigh | 71,109 | 71,189 | 80 | 55.5 | 44.40 | | 44.40 |
| 2-1-14 | Raleigh | Trbo | 71,189 | 71,269 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 2-19-14 | Trbo | Raleigh | 73,003 | 73,083 | 80 | 55.5 | 44.40 | | 44.40 |
| 2-19-14 | Raleigh | Trbo | 73,083 | 73163 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| | Ticket | for | NACO | Breakfast | | 55.5 | | | $35.00 |
| | | | | | | 55.5 | | | |
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| TOTALS | | | | | | | | | 212.60 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

Lamp Camp

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

8/1/2011

2-1-14 NCABCO/NCBEMO meeting @ NCACC

2-19-14 NCACC Public Education @ Quorum Ctr.

Warrant #: 031414 Check Number: 00345068 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 03/11/2014 | 0228-0304 | TRAVEL & MEALS | $545.45 |
| 03/11/2014 | 0228-0304C | ADVANCE | -$300.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00345068 | 03/14/2014 | 245.45 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 03/14/2014 | 00345068 |

**$245.45**

*Pay* Two Hundred Forty Five Dollars and 45 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00345068⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00345068

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF ~~Feb 28~~ March 4 2014

NAME Viola Harris DEPT CODE 1041105311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| ~~3-28-14~~ | Trbo | DC | 74,998 | 75,254 | 256 | 55.5 | 141.08 | | 141.08 |
| 3-4-14 | DC | Trbo | 75,254 | 75,510 | 256 | 55.5 | 141.08 | | 141.08 |
| | | | | | | 55.5 | | | |
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| | | | | | | 55.5 | | | |
| TOTALS | | | | | | | | | 284.16 |

+ [illegible]

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

245.45

261.29
284.16
545.45
- 300.00

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Washington DC
Purpose of trip: Legislative Conference

Date(s) of travel: 2-28 / 3-4

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | 3-3 | 3-4 | | | 2-28 | 3-1 | 3-2 | |
| Hotel | | | | | | | | |
| Breakfast | 21.95 | 18.40 | | | | | 24.15 | ~~84.50~~ 64.50 |
| Lunch | | | | | | | | |
| Dinner | 30.95 | | | | 19.80 | | 38.04 | 88.79 |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | 46.00 | | | | | | 46.00 | 92.00 |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | | | | | | | |
| Other (Tips) | 5.00 | 4.00 | | | 2.00 | | 5.00 | 16.00 |
| TOTAL | 103.90 | 22.40 | | | 21.28 | | 113.19 | ~~281.29~~ 261.29 |

Account Number _____

Due to Employee $ 263.45

281.29
282.16
563.45

~~563~~ 563.45
− 300.00 (Advance)
263.45

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola Harris Date 3/5/14

Approved [illegible] Date 3-12-14

# Washington Hilton

WASHINGTON HILTON
1919 Connecticut Avenue NW | Washington, DC | 20009
T: 202 483 3000 | F: 202 939 3271
W: washington.hilton.com

NAME AND ADDRESS:
HARRIS, VIOLA
P.O. BOX 10

TARBORO, NC 27886
US

Room: 3222/D2
Arrival Date: 3/2/2014 8:03:00AM
Departure Date: 3/4/2014 10:05:00AM
Adult/Child: 1/0
Room Rate:

RATE PLAN C-NACO

HH#
AL:
CAR:

CONFIRMATION NUMBER : 3108367271

3/4/2014 PAGE 1

| DATE | DESCRIPTION | ID | REF. NO | CHARGES | CREDITS | BALANCE |
|---|---|---|---|---|---|---|
| 3/2/2014 | EARLY CHECK-IN | EMATA | 9665070 | $25.00 | | |
| 3/2/2014 | ROOM TAX | EMATA | 9665070 | $3.63 | | |
| 3/2/2014 | VALET PARKING | CHRISTIAN | 9666813 | $46.00 | | |
| 3/3/2014 | VALET PARKING | CRICHARD | 9668620 | $46.00 | | |
| 3/4/2014 | VS *7082 | KLWIL | 9669011 | | $120.63 | |
| | BALANCE | | | | | $0.00 |

EXPENSE REPORT SUMMARY

| | 03/02/14 | 03/03/14 | STAY TOTAL |
|---|---|---|---|
| ROOM & TAX | $3.63 | $0.00 | $3.63 |
| MISCELLANEOUS | $71.00 | $46.00 | $117.00 |
| DAILY TOTAL | $74.63 | $46.00 | $120.63 |

$92.00

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

CARD MEMBER NAME VS *7082

3/3/14 AUTHORIZATION 1723894 A INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

HARRIS, VIOLA

PURCHASES & SERVICES

053616

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT

Hilton Washington
McCLELLAN'S
Thank You for Joining Us

SELMA D.

/1 6361 GST 1
MAR02'14 18:16

PIZZA 12
6 BUFF DRUMMETTE 17.25
ICED TEA 11.00
3.50

Subtotal 31.75
Serv Chg / Grat 2.83
Tax 3.46
Total 38.0
Cash 40.0
Change Due 1.9
-----505 CLOSED MAR02 18:42

The District
Line
120 ANA BANKS

73/1 1393 G:
MAR02'14 8:30

1 ADULT B.FAST BUF 21.95
Subtotal 21.95
Tax 2.20
Total 24.15
Cash 24.15
-----601 CLOSED MAR02 6:48-----

LongHorn 5178
3315 Crain Highway
Waldorf, MD 20603

Table 35 Check # :14706
Kayla G
08:53:38 02/28/2014 Gst 1

Guest No.3
1 Water
1 Cowboy Pork Chp D 15.99
1 Bowl Loaded Potato 2.69

Subtotal 18.68
Sales Tax 1.12

20:53:41 02/28/2014
Total 19.80
Cash 20.00
Amount Due 0.00
Change 0.20
Dine In

**********
Join our LongHorn Hospitality Club
for great deals and a FREE appetizer
with purchase of 1 adult dinner entree
www.longhornsteakhouse.com/join
**********

Frank Vasquez
Managing Partner

(301) 632-6300

AFFLE
OUSE
To-Go Claim Check No.
363910 TOTAL
-4-14

136
2

Subt
Tax
Total
Cash
Cha
-----52

The Dis
Lin
128 Weint H.
43/1 1
MAR03'14
ADULT B FAST
1 PAGEI W/ C.C
Subtotal
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.54 Payment Du
GRATUITY:
TOTAL:
ROOM #:
PRINT NAME:
SIGNATURE:

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 040414 Check Number: 00345689 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/01/2014 | 0314 | TRAVEL | $237.80 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00345689 | 04/04/2014 | 237.80 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 04/04/2014 | 00345689 |

**$237.80**

*Pay* Two Hundred Thirty Seven Dollars and 80 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00345689⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00345689

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13070

10 4110 5311 00

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF March 2014

NAME Viola Harris DEPT CODE

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 3-26-14 | Tarboro | Raleigh | 73,018 | 73,098 | 80 | 55.5 | 44.40 | | 44.40 |
| 3-26-14 | Raleigh | Tarboro | 73,098 | 73,138 | 80 | 55.5 | 44.40 | | 44.40 |
| | NC BEO Summit Registration | | | | | 55.5 | | | 149.00 |
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| TOTALS | | | | | | | | | ~~88.80~~ |

237.80

* NCACC Committee Mtg.

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola Harris

SIGNATURE OF TRAVELER

8/1/2011

Warrant #: 041714 Check Number: 00346208 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/15/2014 | 0424-0426A | CONF # 71073065/ V HARRIS | $280.91 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 5151 | SHERATON IMPERIAL | 00346208 | 04/17/2014 | 280.91 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 5151 | 04/17/2014 | 00346208 |

**$280.91**

*Pay* Two Hundred Eighty Dollars and 91 cents ******

*To The Order Of* SHERATON IMPERIAL

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00346208⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00346208

SHERATON IMPERIAL
4700 EMPEROR BLVD
DURHAM NC 27703

Mungo

**From:** Viola Harris <violaharris39@yahoo.com>
**Sent:** Monday, March 31, 2014 2:09 PM
**To:** Fran Mungo - Edgecombe Co. County Manager Office
**Subject:** Fw: Sheraton Reservation #71073065. We look forward to seeing you.

----- Forwarded Message -----
**From:** Sheraton Imperial Hotel & Convention Center <GCCUSTSERVICE@CONFIRM.STARWOODHOTELS.COM>
**To:** "VIOLAHARRIS39@YAHOO.COM" <VIOLAHARRIS39@YAHOO.COM>
**Sent:** Wednesday, February 19, 2014 2:08 PM
**Subject:** Sheraton Reservation #71073065. We look forward to seeing you.

Trouble seeing this email? View it in a browser for up-to-date reservation information, or to view in English, Français, Español, Deutsch, 中文(简体), 日本語, Italiano, Português, Русский, اللغة العربية, 中國(傳統), 한국어

# Sheraton Imperial Hotel & Convention Center

4700 Emperor Blvd, I-40 at Exit 282 (Page Road), Durham
North Carolina 27703, United States
Phone: (919) 941-5050 Fax: (919) 941-5156

- Contact Us
- Your Room
- Guest Services
- Dining Options
- In The Neighborhood
- Finding Your Way
- Meetings & Events

Hello Viola,
Welcome back. We're pleased to confirm your upcoming stay at the Sheraton Imperial Hotel & Convention Center and look forward to your arrival.

If there's anything special we can do in preparation for your stay please don't hesitate to contact us. In the meantime, safe travels.

Michael J. Martino
GENERAL MANAGER
Confirmation: 071073065

Schedule:

| | |
|---|---|
| Check In | 24-APR-2014 - 3:00 PM * |
| Check Out | 26-APR-2014 - 12:00 PM * |
| Number of Rooms | 1 |
| Number of Guests | 2 |

* Indicates standard hotel check-in and check-out times and does not reflect special arrangements made with the hotel.

Your Accommodations: Room 1 of 1

| | |
|---|---|
| Guest Name | VIOLA HARRIS |
| Number of Adults | 2 |
| Number of Children | 0 |

**Room Description**
**King Bed**
• Traditional Non-smoking, Smoke-free
• 31 Sq.m/338 Sq.ft
• 32 Inch Flat Screen Lcd Tv
• Sweet Sleeper Bed
• 2 Line Spkphn W/dataprt
• Free Hsia/bottled Water
Remarks

Your Rate: Room 1 of 1
Rates for the night of **24-Apr-14, 25-Apr-14**

**Rate Details**
Group 93 48hrs Cxl
must cancel 48hours prior to arrival to avoid one night cancel fee

**93.00** in US DOLLARS per night

**Taxes**
City Tax:
6.0 Percent Per Room Per Night Not In The Rate
State Tax:
7.5 Percent Per Room Per Night Not In The Rate

**Guarantee and Cancellation Policies**

If you cancel before 06:00 PM on Tuesday, 22 April 2014 there will be no forfeit amount.
If you cancel after 06:00 PM on Tuesday, 22 April 2014 the forfeiture amount will be 93.00.
Room taxes may be charged on penalties.
Debit and Credit cards will be authorized at check-in for the amount of your stay, plus an amount to cover incidentals. Please visit "Announcements" on the hotel website for more information.

Your Privacy
Please note: For security purposes, you will be asked to provide a valid government or state-issued photo ID at check-in.

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 050914 Check Number: 00346933 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 05/07/2014 | 0414 | TRAVEL | $337.89 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00346933 | 05/09/2014 | 337.89 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 05/09/2014 | 00346933 |

**$337.89**

*Pay* Three Hundred Thirty Seven Dollars and 89 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00346933⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00346933

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF April 2014

NAME Viola Harris DEPT CODE 10 4110 531100

V # 13040

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 4-9-14 | Trbo | Windsor | 77350 | 77395 | 45 | 55.5 | 24.97 | | 24.97 |
| 4-9-14 | Windsor | Trbo | 77395 | 77440 | 45 | 55.5 | 24.97 | | 24.97 |
| | | | | | | 55.5 | | | |
| 4-24-14 | Trbo | RaTP | 78,310 | 78398 | 88 | 55.5 | 48.84 | 9.57 | 58.41 |
| 4-24-14 | RTP | Trbo | 78,398 | 78574 | 88 | 55.5 | 48.84 | | 48.84 |
| | | | | | | 55.5 | | | |
| 4-29-14 | Trbo | Raleigh | 78,621 | 78701 | 80 | 55.5 | 44.40 | | 44.40 |
| 4-29-14 | Raleigh | Trbo | 78701 | 78781 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 4-30-14 | Trbo | Raleigh | 78800 | 78,880 | 80 | 55.5 | 44.40 | 3.09 | 47.49 |
| 4-30-14 | Raleigh | Trbo | 78,880 | 78,960 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | 12.66 | 337.88 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

$337.89

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola S. Harris

SIGNATURE OF TRAVELER

6/1/2011

* 4-9-14 District meeting

** 4-24-14 Black Summit

*** 4-29-14 Economic Symposium - NCACC

EDGECOMBE COUNTY

TRAVEL EXPENSE REPORT

Name: Viola Harris
Trip to: Raleigh
Purpose of trip: Black Summit

Date(s) of travel: April 9
April 24-26
April 29-30

ITEMIZED EXPENSES

| | MON | TUES | WED | THURS | FRI | SAT | SUN | TOTAL |
|---|---|---|---|---|---|---|---|---|
| DATE | | 4-29 | 4-30 | 4-24 | | | | |
| Hotel | | | | | | | | |
| Breakfast | | | | | | | | |
| Lunch | | | 3.09 | 9.57 | | | | 12.66 |
| Dinner | | | | | | | | |
| Taxi/Bus | | | | | | | | |
| Auto Allowance | | | | | | | | |
| Parking | | | | | | | | |
| Telephone | | | | | | | | |
| Baggage | | | | | | | | |
| Regis. fee | | 35.00 | | | | | | 35.00 |
| Other | | | | | | | | |
| TOTAL | | 35.00 | 3.09 | 9.57 | | | | 47.66 |

Account Number _____

Due to Employee $ 337.88

I certify that the travel indicated was incurred in the service of the County and that the information submitted is correct.

Signature Viola S. Harris Date 4/30/14

Approved _____ Date _____

Home Mail News Sports Finance Weather Games Groups Answers Screen Flickr Apps More

Viola

Compose

Inbox (1)
Drafts (4)
Sent
Spam (1)
Trash (14)
Folders
county information
Junk
Synced Messages
untitled
Recent

Sponsored

Nomorerack.com
Overstock Clearance - Women Sandals for only $12!

Delete Move Spam More

## NCACC Economic Development Symposium Registration

NCACC Apr 9 at 6:16 PM
To violaharris39@yahoo.com,

Thank you for registering for the NCACC Economic Development Symposium, which will be held April 29-30, 2014, at the Quorum Center, located at 323 W. Jones Street, Raleigh, NC 27603.

Our records indicate that you have registered for the following:

Attendee ID # ECON73E167

**Viola Harris**

Harris Viola violaharris39@yahoo.com Due= $0.00 Collected= $35.00

| | Viola Harris | |
|---|---|---|
| QTY | Description | Cost |
| 1 | Registration fee Registration ($35) (Group Charge) | $35.00 |
| | Cost | $35.00 |

Buy One Get One Free Large Fry
or Large Drink
Go To www.mcdvoice.com
and tell us about your visit.
Validation Code:
GENERAL MANAGER: RICK KUNKEL
511 W. WASHINGTON
WASHTLE
NC
27556
THANK YOU!!!
TEL# 252-459-3013 Store# 11932

Ket 13 Apr 30'14 (Wed) 12:33
MEY SIDE : VS Order 38

| QTY | ITEM | TOTAL |
|---|---|---|
| 1 | Hawaii Snack Wrap-Cby | 1.89 |
| | XIRL, Hiney, Mustard Sauce | |
| 1 | S Sweet Iced Tea | 1.00 |
| | Subtotal | 2.89 |
| | Tax | 0.20 |
| | Take-Out Total | 3.09 |
| | Cash Tendered | 5.00 |
| | Change | 1.91 |

Expires 30 days after receipt date.
Valid at participating McDonald's.
Not valid with other offers. Limit 1
coupon per person per visit. Prices may
vary on menu. May not be transferred,
sold, duplicated or transmitted
electronically.
JOIN MCD WITH US!
APPLY ONLINE www.MCDSTAFF.COM/11932

36 CAFE AM

Ck 9482 Apr24'14 03:52P Gst

| | |
|---|---|
| 1 MISCELLANEOUS | 3.99 |
| 1 CHIPS/ CRACKERS | 1.17 |
| 1 CANDYB BARS | 1.40 |
| 1 SODA 20oz | 2.34 |
| FOS CASH 0000702 | |
| Cash | 10.00 |
| Subtotal | 8.90 |
| Tax | 0.67 |
| Payment | 9.57 |
| Change Due | 0.43 |

Warrant #: 060614 Check Number: 00348003 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/03/2014 | 0513-0528 | TRAVEL | $355.20 |
| 06/03/2014 | FAXLINE147 | FAXLINE REIMBURSEMENT | $27.59 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00348003 | 06/06/2014 | 382.79 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 06/06/2014 | 00348003 |

**$382.79**

*Pay* Three Hundred Eighty Two Dollars and 79 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00348003⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00348003

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF May 2014

NAME Viola S. Harris DEPT CODE 10410 5311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 5-13-14 | Trbo | Raleigh | 79,800 | 79,880 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-13-14 | Ralgh | Trbo | 79,880 | 80,060 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 5-15-14 | Trbo | Raleigh | 80,190 | 80,270 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-15-14 | Raleigh | Trbo | 80,270 | 80,350 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 5-28-14 | Trbo | Raleigh | 80,642 | 80,722 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-28-14 | Raleigh | Trbo | 80,722 | 80,802 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 5-28-14 | Trbo | Raleigh | 80,890 | 80,970 | 80 | 55.5 | 44.40 | | 44.40 |
| 5-28-14 | Raleigh | Trbo | 80,970 | 81,050 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 355.20 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

DEPT HEAD/COUNTY MANAGER

Viola S. Harris
SIGNATURE OF TRAVELER

8/1/2011

* 5-13-14 EMS Advisory Bd
* 5-15-14 Health + Human Svc. Committee
* 5-28-14 Public Education Committee
* 5-28-14 County Assembly Day

Warrant #: 062714 Check Number: 00348658 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/25/2014 | 0614 | TRAVEL | $177.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 13040 | VIOLA HARRIS | 00348658 | 06/27/2014 | 177.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 13040 | 06/27/2014 | 00348658 |

**$177.60**

*Pay* One Hundred Seventy Seven Dollars and 60 cents ******

*To The Order Of* VIOLA HARRIS

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00348658⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00348658

VIOLA HARRIS
609 ST DAVID ST
TARBORO NC 27886

V 13040

# EDGECOMBE COUNTY

STATEMENT OF TRAVEL EXPENSES, MONTH OF June 2014

NAME Viola Harris DEPT CODE 1041105311 00

| DATE | BETWEEN WHAT PT | | ODOMETER | | MILES | RATE PER | AMOUNT | MEALS | TOTAL |
|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | START | END | | MILE | | | |
| 6/18/14 | Tarb | Raleigh | 81,887 | 81,967 | 80 | 55.5 | 44.40 | | 44.40 |
| 6/18/14 | Raleigh | Tarb | 81,967 | 82,047 | 80 | 55.5 | 44.40 | | 44.40 |
| | | | | | | 55.5 | | | |
| 6/20/14 | Tarb | Raleigh | 82,167 | 82,247 | 80 | 55.5 | 44.40 | | 44.40 |
| 6/20/14 | Raleigh | Tarb | 82,247 | 82,327 | 80 | 55.5 | 44.40 | | 44.40 |
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| TOTALS | | | | | | | | | 177.60 |

I HEREBY CERTIFY THAT THE DISTANCE FOR WHICH CHARGES IS MADE IN THIS STATEMENT HAVE BEEN NECESSARILY TRAVELED, THAT EXPENSES FOR WHICH REIMBURSEMENT IS CLAIMED WERE INCURRED IN SERVICE OF THE COUNTY

APPROVED BY:

Greg Cam
DEPT HEAD/COUNTY MANAGER

Viola Harris
SIGNATURE OF TRAVELER

8/1/2011

* 6/18/14 NCACC committee mtg
6/20/14 NCABCO mtg

Warrant #: 042514 Check Number: 00346402 Page 1 of 1

EDGECOMBE COUNTY, TARBORO, NC

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 04/22/2014 | 040414 | 3446 | $2,154.91 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00346402 | 04/25/2014 | 2,154.91 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 04/25/2014 | 00346402 |

**$2,154.91**

*Pay* Two Thousand One Hundred Fifty Four Dollars and 91 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00346402⑈

AP

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00346402

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 04/04/14 |
| New balance | $2,154.91 |
| Minimum payment | $33.00 |
| Due date | 04/29/14 |

**Questions?**
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $540.00 |
| Payment received on 03/28/14 - thank you | $540.00 |
| Purchases | $2,154.91 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$2,154.91** |
| **Minimum payment** | **$33.00** |
| **Due date** | **04/29/14** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $7,845.00 |
| Cash advance available credit | $2,500.00 |

V # 27273

10 4110 5311 00

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 03/28 | 03/28 | 7443603F99YZ494HK | BRANCH PAYMENT*THANK YOU WILMINGTON DE | $540.00- |
| **Total** | | | | **$540.00-** |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 03/13 | 03/13 | 2427539ETBTEWFDXM | NATIONAL ASSC COUNTIES 202-393-6226 DC<br>MCC: 7399 MERCHANT ZIP: 20001 | $515.00 |
| 03/13 | 03/13 | 2427539ETBTEWFDYP | NATIONAL ASSC COUNTIES 202-393-6226 DC<br>MCC: 7399 MERCHANT ZIP: 20001 | $515.00 |
| 03/13 | 03/13 | 2427539ETBTEWFDYZ | NATIONAL ASSC COUNTIES 202-393-6226 DC | $515.00 |

(continued on next page)

# Alliance of NC Black Elected Officials

## Pay securely with PayPalThanks for your order

You just made a payment of

$179.00 USD

Print receipt

Rev. Hines

Paid to
Alliance of NC Black Elected Officials
ncabeo@gmail.com
919 833 6394

Ship to
P O Box 10
Tarboro, NC 27886
United States

Site Feedback

PayPal. The safer, easier way to pay. For more information, read our User Agreement and Privacy Policy.

**Fran Mungo**

**From:** nacomeetings@naco.org
**Sent:** Wednesday, April 16, 2014 4:19 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2014 NACo Annual Conference and Exposition Confirmation

4/16/2014

Mrs. Carolyn Hines
P.O. Box 10
Tarboro, NC 27886

Dear Mrs. Carolyn Hines;

Thank you for registering for the 2014 NACo Annual Conference and Exposition taking place July 11-14, 2014 at the Ernest N. Morial Convention Center in Orleans Parish/New Orleans, Louisiana.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in New Orleans, Louisiana.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Hines Carolyn | 1.00 | Guest Registration Fee | $150.00 | $0.00 | $150.00 | $0.00 |
| Hines Carolyn | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $150.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Ernest N. Morial Convention Center.

The Registration Desk will be open during the following hours:

Friday, July 11: 7:30 a.m. - 5:00 p.m.
Saturday, July 12: 7:30 a.m. – 5:00 p.m.
Sunday, July 13: 7:30 a.m. – 4:00 p.m.

**Fran Mungo**

**From:** nacomeetings@naco.org
**Sent:** Thursday, March 13, 2014 4:14 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2014 NACo Annual Conference and Exposition Confirmation

3/13/2014

Hon. Evelyn D. Powell
Commissioner
Edgecombe County
P O Box 10
Tarboro, NC 27886

Dear Hon. Evelyn D. Powell;

Thank you for registering for the 2014 NACo Annual Conference and Exposition taking place July 11-14, 2014 at the Ernest N. Morial Convention Center in Orleans Parish/New Orleans, Louisiana.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in New Orleans, Louisiana.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Powell Evelyn D. | 1.00 | Member FAX Registration Rate (Early) | $515.00 | $0.00 | $515.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Ernest N. Morial Convention Center.

The Registration Desk will be open during the following hours:

Friday, July 11: 7:30 a.m. - 5:00 p.m.
Saturday, July 12: 7:30 a.m. – 5:00 p.m.

**Fran Mungo**

**From:** nacomeetings@naco.org
**Sent:** Thursday, March 13, 2014 4:12 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2014 NACo Annual Conference and Exposition Confirmation

3/13/2014

Hon. Viola Harris
Commissioner
Edgecombe County
PO BOX 10
Tarboro, NC 27886-0010

Dear Hon. Viola Harris;

Thank you for registering for the 2014 NACo Annual Conference and Exposition taking place July 11-14, 2014 at the Ernest N. Morial Convention Center in Orleans Parish/New Orleans, Louisiana.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in New Orleans, Louisiana.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Viola | 1.00 | Member FAX Registration Rate (Early) | $515.00 | $0.00 | $515.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Ernest N. Morial Convention Center.

The Registration Desk will be open during the following hours:

Friday, July 11: 7:30 a.m. - 5:00 p.m.
Saturday, July 12: 7:30 a.m. – 5:00 p.m.

**Fran Mungo**

**From:** Sheraton Imperial Hotel & Convention Center <GCCUSTSERVICE@confirm.starwoodhotels.com>
**Sent:** Monday, March 31, 2014 10:05 AM
**To:** FRANMUNGO@CO.EDGECOMBE.NC.US
**Subject:** Sheraton Reservation #171106654. We look forward to seeing you.

Trouble seeing this email? View it in a browser for up-to-date reservation information, or to view in English, Français, Español, Deutsch, 中文(简体), 日本語, Italiano, Português, Русский, اللغة العربية, 中國(傳統), 한국어

**Sheraton Imperial Hotel & Convention Center**
4700 Emperor Blvd, I-40 at Exit 282 (Page Road), Durham
North Carolina 27703, United States
Phone: (919) 941-5060 Fax: (919) 941-5166

- Contact Us
- Your Room
- Guest Services
- Dining Options
- In The Neighborhood
- Finding Your Way
- Meetings & Events

Hello Mr. Hines,

We're pleased to confirm your upcoming stay at the Sheraton Imperial Hotel & Convention Center and look forward to your arrival.

Sheraton Club offers our guests a higher level of comfort and convenience, complete with access to our Club lounge. To upgrade your room, click the banner to the right.

Finally, we hope you'll try out our new Farm to Table offerings at our restaurant, Seasons, during your stay. Click here to learn more.

If there's anything special we can do in preparation for your stay please don't hesitate to contact us. In the meantime, safe travels.

Michael J. Martino
GENERAL MANAGER

**CONFIRMATION: 171106654**

**For Your Stay**

Upgrade to Club for just $35 more per night or a Suite for $50 more per night.

**YOUR SCHEDULE:**

| | |
|---|---|
| Check In | 24-APR-2014 - 3:00 PM * |
| Check Out | 26-APR-2014 - 12:00 PM * |

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 083013 Check Number: 00339108 Page 1 of 1

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 08/27/2013 | 080613 | 3446 | $662.60 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00339108 | 08/30/2013 | 662.60 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 08/30/2013 | 00339108 |

**$662.60**

*Pay* Six Hundred Sixty Two Dollars and 60 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00339108⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00339108

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 08/06/13 |
| New balance | $662.60 |
| Minimum payment | $15.00 |
| Due date | 08/31/13 |

**Questions?**
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

V #27273 R2

## Your account summary

| | |
|---|---|
| Previous balance | $3,404.73 |
| Payment received on 07/29/13 - thank you | $3,404.73 |
| Purchases | $662.60 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$662.60** |
| **Minimum payment** | **$15.00** |
| **Due date** | **08/31/13** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $9,337.00 |
| Cash advance available credit | $2,500.00 |

1-2

1041105311 00 = 440 00
1041205311 00 = 222 60

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | | AMOUNT |
|---|---|---|---|---|---|
| 07/29 | 07/29 | 74436036JSBZNGQ0W | PAYMENT*THANK YOU | LOUISVILLE KY | $3,404.73- |
| **Total** | | | | | **$3,404.73-** |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | | |
| 07/16 | 07/16 | 2421073658AT7PKXR | NCACC | 919-715-2893 NC | $220.00 |
| | | | MCC: 7399 | MERCHANT ZIP: 27603 | |
| 07/16 | 07/16 | 2421073658AT7PKX6 | NCACC | 919-715-2893 NC | $220.00 |
| | | | MCC: 7399 | MERCHANT ZIP: 27603 | |
| 07/23 | 07/23 | 24210736Q8AT86W5N | NCACC | 919-715-2893 NC | $185.00 |

(continued on next page)

## actions (continued)

| POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|
| | | MCC: 7399 MERCHANT ZIP: 27603 | |
| 07/24 | 24610436D03TTN8NJ | HILTON HOTELS FORT WORTH FT WORTH TX | $37.60 |
| | | MCC: 3504 MERCHANT ZIP: 76102 | |
| | | LODGING CHECK-IN DATE: 07/19/13 | |
| **Total** | | | **$662.60** |

## Your finance charges

| TYPE OF BALANCE | CORRESPONDING ANNUAL PERCENTAGE RATE (APR) | DAILY PERIODIC RATE (MAY VARY) | DAYS IN BILLING | AVERAGE DAILY BALANCE | FINANCE CHARGE |
|---|---|---|---|---|---|
| Purchases | **13.240%** | 0.03627% | 32 | $0.00 | $0.00 |
| Cash advances | **19.990%** | 0.05476% | 32 | $0.00 | $0.00 |
| | | | | | $0.00 |

**Fran Mungo**

**From:** NCACC <Registration@signup4.net>
**Sent:** Tuesday, July 16, 2013 12:16 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** NCACC 2013 Annual Conference Registration Confirmation

Thank you for registering for the 2013 NCACC Annual Conference. We look forward to seeing you in Guilford County in August. Our records indicate that you have registered for the following:

Confirmation Number NCAC10E370

| | Evelyn Powell | |
|---|---|---|
| **QTY** | **Description** | **Cost** |
| 1 | Registration fees: Early registration (county officials only through July 23) - $185 | $185.00 |
| 1 | Registration fees: NCABCO Awards Luncheon - $35 | $35.00 |
| | **Cost** | $220.00 |
| | **Due** | $0.00 |

No, I do not plan to attend the Detention Center tour.

Payment Information

Payment Number: 2 Approval Code: 016190
Credit Card Fees : $ 220.00 Collected : $ 220.00
Visa **********3453 Reference # 5389235411
Lorenzo Carmon - franmungo@co.edgecombe.nc.us
P O Box 10 Tarboro NC, 27886

**Balance: $ 0.00**

If you need to add additional events to your registration, please click on this link,

**https://www.SignUp4.net/public/ap.aspx?OID=138&EID=NCAC10E**.

If your plans should change and you need to cancel your registration, you must notify me at the NCACC prior to Aug. 2, 2013, to be eligible for a full refund for your registration fee minus a $40 administrative charge, and/or a refund for the full amount of any tickets purchased.

Please remember to make your hotel reservations. For your convenience, here is the link to reservations information for the **Sheraton Greensboro:**

**https://bookings.ihotelier.com/Sheraton-Greensboro/bookings.jsp?hotelId=2576&userType=GRP**

Once on the Sheraton website, select "**Group Code**" at the top of the page and enter the Group Code "**NCACC**" (not case sensitive), then select "**Update**".

**Fran Mungo**

**From:** NCACC <Registration@signup4.net>
**Sent:** Tuesday, July 16, 2013 12:10 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** NCACC 2013 Annual Conference Registration Confirmation

Thank you for registering for the 2013 NCACC Annual Conference. We look forward to seeing you in Guilford County in August. Our records indicate that you have registered for the following:

Confirmation Number NCAC10E369

| | **Elton Hines** | |
|---|---|---|
| **QTY** | **Description** | **Cost** |
| 1 | Registration fees: Early registration (county officials only through July 23) - $185 | $185.00 |
| 1 | Registration fees: NCABCO Awards Luncheon - $35 | $35.00 |
| | **Cost** | $220.00 |
| | **Due** | $0.00 |

No, I do not plan to attend the Detention Center tour.

Payment Information

Payment Number: 2 Approval Code: 016043

Credit Card Fees : $ 220.00 Collected : $ 220.00

Visa **********3453 Reference # 5389213205

Lorenzo Carmon - franmungo@co.edgecombe.nc.us

P O Box 10 Tarboro NC, 27886

**Balance: $ 0.00**

If you need to add additional events to your registration, please click on this link,

**https://www.SignUp4.net/public/ap.aspx?OID=138&EID=NCAC10E**.

If your plans should change and you need to cancel your registration, you must notify me at the NCACC prior to Aug. 2, 2013, to be eligible for a full refund for your registration fee minus a $40 administrative charge, and/or a refund for the full amount of any tickets purchased.

Please remember to make your hotel reservations. For your convenience, here is the link to reservations information for the **Sheraton Greensboro:**

**https://bookings.iheteller.com/Sheraton-Greensboro/bookings.jsp?hotelId=2578&userType=GRP**

Once on the Sheraton website, select "**Group Code**" at the top of the page and enter the Group Code "**NCACC**" (not case sensitive), then select "**Update**".

## Lorenzo Carmon

**From:** NCACC <Registration@signup4.net>
**Sent:** Tuesday, July 23, 2013 11:39 AM
**To:** lcarmon@co.edgecombe.nc.us
**Subject:** NCACC 2013 Annual Conference Registration Confirmation

Thank you for registering for the 2013 NCACC Annual Conference. We look forward to seeing you in Guilford County in August. Our records indicate that you have registered for the following:

Confirmation Number NCAC10E452

| | Lorenzo Carmon | |
|---|---|---|
| **QTY** | **Description** | **Cost** |
| 1 | Registration fees: Early registration (county officials only through July 23) - $185 | $185.00 |
| | **Cost** | $185.00 |
| | **Due** | $0.00 |

No, I do not plan to attend the Detention Center tour.

Payment Information

Payment Number: 2 Approval Code: 023621

Credit Card Fees : $ 185.00 Collected : $ 185.00

Visa **********3453 Reference # 5405679804

Lorenzo Carmon - lcarmon@co.edgecombe.nc.us

P O Box 10 Tarboro NC, 27886

**Balance: $ 0.00**

If you need to add additional events to your registration, please click on this link,

**https://www.SignUp4.net/public/ap.aspx?OID=138&EID=NCAC10E**.

If your plans should change and you need to cancel your registration, you must notify me at the NCACC prior to Aug. 2, 2013, to be eligible for a full refund for your registration fee minus a $40 administrative charge, and/or a refund for the full amount of any tickets purchased.

Please remember to make your hotel reservations. For your convenience, here is the link to reservations information for the **Sheraton Greensboro:**

**https://bookings.ihotelier.com/Sheraton-Greensboro/bookings.jsp?hotelId=2576&userType=GRP**

Once on the Sheraton website, select "**Group Code**" at the top of the page and enter the Group Code "**NCACC**" (not case sensitive), then select "**Update**".

Hilton
FORT WORTH

HILTON FORT WORTH
815 Main Street | Fort Worth, TX | 76102
T: 817 870 2100 | F: 817 882 1351
W: fortworth.hilton.com

NAME AND ADDRESS:
CAROMN, LORENZO
XX

FORT WORTH, TX 76106
US

**Room:** 719/K1
**Arrival Date:** 7/19/2013 2:45:00PM
**Departure Date:** 7/23/2013

**Adult/Child:** 1/0
**Room Rate:** 165.00

RATE PLAN C-NAC

HH#
AL:
BONUS AL: CAR:

CONFIRMATION NUMBER : 3525043000

7/23/2013 PAGE 1

| DATE | DESCRIPTION | ID | REF. NO | CHARGES | CREDITS | BALANCE |
|---|---|---|---|---|---|---|
| 7/11/2013 | CHECK (NUMBER 337307) | MAYRAKG | 2197261 | | $759.00 | |
| 7/19/2013 | GUEST ROOM | DEITRA | 2203946 | $165.00 | | |
| 7/19/2013 | RM - CITY TAX | DEITRA | 2203946 | $14.85 | | |
| 7/19/2013 | RM - STATE TAX | DEITRA | 2203946 | $9.90 | | |
| 7/19/2013 | STATE COST=RECOVERY FEES | DEITRA | 2203946 | $1.34 | | |
| 7/20/2013 | GUEST ROOM | DEITRA | 2204681 | $165.00 | | |
| 7/20/2013 | RM - CITY TAX | DEITRA | 2204681 | $14.85 | | |
| 7/20/2013 | RM - STATE TAX | DEITRA | 2204681 | $9.90 | | |
| 7/20/2013 | STATE COST=RECOVERY FEES | DEITRA | 2204681 | $1.34 | | |
| 7/21/2013 | GUEST ROOM | DEITRA | 2205366 | $165.00 | | |
| 7/21/2013 | RM - CITY TAX | DEITRA | 2205366 | $14.85 | | |
| 7/21/2013 | RM - STATE TAX | DEITRA | 2205366 | $9.90 | | |
| 7/21/2013 | STATE COST=RECOVERY FEES | DEITRA | 2205366 | $1.34 | | |
| 7/22/2013 | GUEST ROOM | DEITRA | 2206237 | $165.00 | | |
| 7/22/2013 | RM - CITY TAX | DEITRA | 2206237 | $14.85 | | |
| 7/22/2013 | RM - STATE TAX | DEITRA | 2206237 | $9.90 | | |
| 7/22/2013 | STATE COST=RECOVERY FEES | DEITRA | 2206237 | $1.34 | | |
| | BALANCE | | | | | $5.36 |

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.
430666 A

CARD MEMBER NAME

AUTHORIZATION INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT

Hilton
FORT WORTH

HILTON FORT WORTH
815 Main Street | Fort Worth, TX | 76102
T: 817 870 2100 | F: 817 882 1351
W: fortworth.hilton.com

NAME AND ADDRESS:
CAROMN, LORENZO
XX

FORT WORTH, TX 76106
US

Room: 719/K1
Arrival Date: 7/19/2013 2:45:00PM
Departure Date: 7/23/2013

Adult/Child: 1/0
Room Rate:

RATE PLAN C-NAC

HH#
AL:
BONUS AL: CAR:

CONFIRMATION NUMBER : 3525043000

7/23/2013 PAGE 1

| DATE | DESCRIPTION | ID | REF. NO | CHARGES | CREDITS | BALANCE |
|---|---|---|---|---|---|---|
| 7/20/2013 | *CAFE TEXAS | LINTR | 2204152 | $37.60 | | |
| | BALANCE | | | | | $37.60 |

HILTON HHONORS

ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.
430666 B

CARD MEMBER NAME

AUTHORIZATION INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT

EDGECOMBE COUNTY, TARBORO, NC

Warrant #: 062113 Check Number: 00336924 

| Invoice Date | Invoice Number | Description | Invoice Amount |
|---|---|---|---|
| 06/19/2013 | 060513 | 3446 | $1,995.00 |

| Vendor No. | Vendor Name | Check No. | Check Date | Check Amount |
|---|---|---|---|---|
| 27273 | PNC BANK | 00336924 | 06/21/2013 | 1,995.00 |

**EDGECOMBE COUNTY**
CENTRAL DEPOSITORY
TARBORO, NC 27886

| Vendor Number | Check Date | Check Number |
|---|---|---|
| 27273 | 06/21/2013 | 00336924 |

**$1,995.00**

*Pay* One Thousand Nine Hundred Ninety Five Dollars and 00 cents ******

*To The Order Of* PNC BANK

**FILE COPY**
**NON-NEGOTIABLE**

RBC Bank
RBC Bank (USA)

⑈00336924⑈

**AP**

**EDGECOMBE COUNTY**
FINANCE DEPARTMENT
PO BOX 10
TARBORO, NC 27886

**ADDRESS SERVICE REQUESTED**

00336924

PNC BANK
P O BOX 856177
LOUISVILLE KY 40285-6177

PNC BANK

If you don't already have online access to account maintenance features, please call 1-877-459-9801 and establish an Account View Program Administrator User ID today.

# Business Card

| | |
|---|---|
| Account # | XXXX XXXX XXXX 3446 |
| Statement closing date | 06/05/13 |
| New balance | $1,995.00 |
| Minimum payment | $30.00 |
| Due date | 06/30/13 |

Questions?
pnc.com/accountview
1-800-474-2101 24 hours a day, 7 days a week

## Your account summary

| | |
|---|---|
| Previous balance | $952.54 |
| Payment received on 05/24/13 - thank you | $952.54 |
| Purchases | $1,995.00 |
| Credits | $0.00 |
| Cash advances | $0.00 |
| Late and overlimit fees | $0.00 |
| Finance charges | $0.00 |
| **New balance** | **$1,995.00** |
| **Minimum payment** | **$30.00** |
| **Due date** | **06/30/13** |

| | |
|---|---|
| Total credit limit | $10,000.00 |
| Total available credit | $8,005.00 |
| Cash advance available credit | $2,500.00 |

V#27273 22

10 4110 5311 00 = 1330.00
10 4120 5311 00 = 665.00

Approved

## Your transactions

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 05/24 | 05/24 | 74436034J9YGNAJ8N | BRANCH PAYMENT*THANK YOU WILMINGTON DE | $952.54- |
| **Total** | | | | **$952.54-** |
| LORENZO CARMON | | Card number: XXXX XXXX XXXX 3453 | | |
| 05/08 | 05/08 | 24275394OS66KVGWS | NATIONAL ASSC COUNTIES 202-3936226 DC<br>MCC: 7399 MERCHANT ZIP: 20001 | $515.00 |
| 05/08 | 05/08 | 24275394OS66KVGXL | NATIONAL ASSC COUNTIES 202-3936226 DC<br>MCC: 7399 MERCHANT ZIP: 20001 | $515.00 |
| 05/08 | 05/08 | 24275394OS66KVGXQ | NATIONAL ASSC COUNTIES 202-3936226 DC | $150.00 |

PAID

(continued on next page)

## Your transactions (continued)

| TRANS DATE | POST DATE | REFERENCE NUMBER | DESCRIPTION | AMOUNT |
|---|---|---|---|---|
| 05/08 | 05/08 | 242753940S66KVGXW | MCC: 7399 MERCHANT ZIP: 20001<br>NATIONAL ASSC COUNTIES 202-3936226 DC | $150.00 |
| 05/08 | 05/08 | 242753940S66KVGYQ | MCC: 7399 MERCHANT ZIP: 20001<br>NATIONAL ASSC COUNTIES 202-3936226 DC | $150.00 |
| 05/08 | 05/08 | 242753940S66KVGY4 | MCC: 7399 MERCHANT ZIP: 20001<br>NATIONAL ASSC COUNTIES 202-3936226 DC | $515.00 |
| **Total** | | | | **$1,995.00** |

## Your finance charges

| TYPE OF BALANCE | CORRESPONDING ANNUAL PERCENTAGE RATE (APR) | DAILY PERIODIC RATE (MAY VARY) | DAYS IN BILLING | AVERAGE DAILY BALANCE | FINANCE CHARGE |
|---|---|---|---|---|---|
| Purchases | 13.240% | 0.03627% | 30 | $0.00 | $0.00 |
| Cash advances | 19.990% | 0.05476% | 30 | $0.00 | $0.00 |
| | | | | | $0.00 |

1-2

Fran Mungo

**From:** naco@naco.org
**Sent:** Wednesday, May 08, 2013 4:32 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2013 County Solutions and Idea Marketplace Confirmation

5/8/2013

Mr. Lorenzo Carmon
County Manager
Edgecombe County
P.O. Box 10
Tarboro, NC 27886-0000

Dear Mr. Lorenzo Carmon;

Thank you for registering for the 2013 County Solutions and Idea Marketplace *(The Annual Conference of the National Association of Counties)* taking place July 19-22, 2013 at the Fort Worth Convention Center in Tarrant County/Fort Worth, Texas.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Fort Worth, Texas.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Carmon Lorenzo | 1.00 | Member FAX Registration Rate (Early) | $515.00 | $0.00 | $515.00 | $0.00 |
| Carmon Lorenzo | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Fort Worth Convention Center.

**Fran Mungo**

**From:** naco@naco.org
**Sent:** Wednesday, May 08, 2013 4:36 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2013 County Solutions and Idea Marketplace Confirmation

5/8/2013

Addie Carmon
Unknown
Tarboro , NC 27886

Dear Addie Carmon;

Thank you for registering for the 2013 County Solutions and Idea Marketplace *(The Annual Conference of the National Association of Counties)* taking place July 19-22, 2013 at the Fort Worth Convention Center in Tarrant County/Fort Worth, Texas.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Fort Worth, Texas.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Carmon Addie | 1.00 | Guest Registration Fee | $150.00 | $0.00 | $150.00 | $0.00 |
| Carmon Addie | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $150.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Fort Worth Convention Center.

The Registration Desk will be open during the following hours:

Fran Mungo

**From:** naco@naco.org
**Sent:** Wednesday, May 08, 2013 4:24 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2013 County Solutions and Idea Marketplace Confirmation

5/8/2013

Mr. Mitchell Harris
P.O. Box 10
Tarboro, NC 27886

Dear Mr. Mitchell Harris;

Thank you for registering for the 2013 County Solutions and Idea Marketplace *(The Annual Conference of the National Association of Counties)* taking place July 19-22, 2013 at the Fort Worth Convention Center in Tarrant County/Fort Worth, Texas.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Fort Worth, Texas.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Mitchell | 1.00 | Guest Registration Fee | $150.00 | $0.00 | $150.00 | $0.00 |
| Harris Mitchell | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $150.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Fort Worth Convention Center.

The Registration Desk will be open during the following hours:

**n Mungo**

**From:** naco@naco.org
**Sent:** Wednesday, May 08, 2013 4:22 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2013 County Solutions and Idea Marketplace Confirmation

5/8/2013

Hon. Viola Harris
Commissioner
Edgecombe County
PO BOX 10
Tarboro, NC 27886-0010

Dear Hon. Viola Harris;

Thank you for registering for the 2013 County Solutions and Idea Marketplace *(The Annual Conference of the National Association of Counties)* taking place July 19-22, 2013 at the Fort Worth Convention Center in Tarrant County/Fort Worth, Texas.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Fort Worth, Texas.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Harris Viola | 1.00 | Member FAX Registration Rate (Early) | $515.00 | $0.00 | $515.00 | $0.00 |
| Harris Viola | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Fort Worth Convention Center.

Fran Mungo

**From:** naco@naco.org
**Sent:** Wednesday, May 08, 2013 4:19 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2013 County Solutions and Idea Marketplace Confirmation

5/8/2013

Mrs. Carolyn Hines
P.O. Box 10
Tarboro, NC 27886

Dear Mrs. Carolyn Hines;

Thank you for registering for the 2013 County Solutions and Idea Marketplace *(The Annual Conference of the National Association of Counties)* taking place July 19-22, 2013 at the Fort Worth Convention Center in Tarrant County/Fort Worth, Texas.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Fort Worth, Texas.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Hines Carolyn | 1.00 | Guest Registration Fee | $150.00 | $0.00 | $150.00 | $0.00 |
| Hines Carolyn | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $150.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Fort Worth Convention Center.

The Registration Desk will be open during the following hours:

Fran Mungo

**From:** naco@naco.org
**Sent:** Wednesday, May 08, 2013 4:18 PM
**To:** franmungo@co.edgecombe.nc.us
**Subject:** 2013 County Solutions and Idea Marketplace Confirmation

5/8/2013

Dear Hon. E. Wayne Hines;

Thank you for registering for the 2013 County Solutions and Idea Marketplace *(The Annual Conference of the National Association of Counties)* taking place July 19-22, 2013 at the Fort Worth Convention Center in Tarrant County/Fort Worth, Texas.

Please review your confirmation / receipt listed below. Any outstanding balance due must be paid either before or on-site to obtain your badge and registration materials when you arrive in Fort Worth, Texas.

| Customer | Qty | Item | Sub-Total | Discount | Paid | Balance |
|---|---|---|---|---|---|---|
| Hines E. Wayne | 1.00 | Member FAX Registration Rate (Early) | $515.00 | $0.00 | $515.00 | $0.00 |
| Hines E. Wayne | 1.00 | Yes, I'd like a Tote Bag | $0.00 | $0.00 | $0.00 | $0.00 |

Total: $515.00
Balance: $0.00

You may pick-up your badge and registration materials at the NACo Conference Registration desk, located in the Fort Worth Convention Center.

The Registration Desk will be open during the following hours:

Friday, July 19: 7:30 a.m. - 5:00 p.m.
Saturday, July 20: 7:30 a.m. – 5:00 p.m.