

**VIA FACSIMILE AND CERTIFIED MAIL, RETURN RECEIPT
REQUESTED**

December 20, 2012

Ms. Karen E. Eastman
Secretary
Port Authority of New York & New Jersey
Office of the Secretary
225 Park Avenue South, 18th Floor
New York, NY 10003

12-26-12 P02:50 IN

**RE: Request Pursuant to Port Authority Freedom of Information
Policy**

Dear Secretary Eastman:

Pursuant to Port Authority of NY & NJ's Freedom of Information policy, I request the following information to be provided:

1. All Business Trip Authorization forms and any documentation submitted with those forms, including, but not limited to expense vouchers, for trips by employee Susan Baer submitted during the period commencing January 1, 2007 and concluding December 20, 2012.

I agree in advance to pay copying fees as provided for by the Port Authority Freedom of Information Policy.

Very Truly Yours,



D. John McAusland

DJM/kb

cc: FILE

THE PORT AUTHORITY OF NY & NJ

FOI Administrator

September 11, 2014

Mr. D. John McAusland
611 Palisade Avenue
Englewood Cliffs, NJ 07632

Re: Freedom of Information Reference No. 13657

Dear Mr. McAusland:

This is in response to your December 20, 2012 request, which has been processed under the Port Authority's Freedom of Information Code (the "Code", copy attached) for copies of all Business Trip Authorization forms and any documentation submitted with those forms, including, but not limited to expense vouchers, for trips by Susan Baer submitted between January 1, 2007 and December 20, 2012.

Material responsive to your request and available under the Code can be found on the Port Authority's website at <http://www.panynj.gov/corporate-information/foi/13657-O.pdf>. Paper copies of the available records are available upon request.

Certain material responsive to your request is exempt from disclosure pursuant to exemptions (1) and (5) of the Code.

Please refer to the above FOI reference number in any future correspondence relating to your request.

Very truly yours,



Daniel D. Duffy
FOI Administrator

Attachment

Employee Number: P23178 Trip Period from: 06/13/08 to 06/13/08
Name: Susan M Baer

Title: Dep Dir Avia/Caoo Org: 205
Telephone: 718-244-3601 Dir/Comm: N
Address: JFK-06
Account Code: 1000 X 556001 ~~321A04~~ ^{285A01 A01} ~~A01101000~~
Spouse/Guest: N
International: N Travel Company Used: N
Blanket Trip: N Trip Extension: N
Outside TDO: N Type:

2008 JUL 15 AM 10:00

Purpose: Meeting with Airtran at Corporate Headquarters, Orlando, Fla

Purpose Dates: 06/13/08 to 06/13/08
Business Destination: Orlando FL USA
Ticket Destination: Orlando FL USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	275	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	350
Travel Sub-Total	275	Other Sub-Total	350
		Total Exp	625

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: _____ Submitted: _____

Approver's Signature: [Signature] Date: 6/13/08 Emp# 2707 Title: Director



Kevin P. Healy
*Senior Vice President,
Marketing & Planning*

AirTran Airways
9955 AirTran Boulevard
Orlando, FL 32827
Tel: 407.318.5121
kevin.healy@airtran.com

AirTran.com



John P. Kirby
*Senior Director, Strategic
Planning & Scheduling*

AirTran Airways
9955 AirTran Boulevard
Orlando, FL 32827
Tel: 407.318.5255
Fax: 407.318.5910
john.kirby@airtran.com

AirTran.com

Susan M. Baer #23178
Meeting with Air Tran Executive
At Air Tran Corporate Headquarters
Orlando, Florida
June 13, 2008



PASSENGER RECEIPT
airtran.com

Date	Flight	Depart	Arrive	Fare Code
Jun 13	565	SWF	MCO	H
Jun 13	673	MCO	HPN	R

TOTAL FARE: 232.00
Total Tax: 7.00
September 11th Security Fee: 5.00
Passenger Facility Charges: 4.50
Other: 15.00
TOTAL:

Passenger: BEAR, SUSAN
Conf. Number: ZCZQ2N

PASSENGER RECEIPT
airtran.com



Conf. Number: ZCZQ2N
Issued Date: Jun 12, 2008
Total Fare This Ticket: 263.50

Transportation subject to terms of carriage printed



BOARDING PASS
airtran.com

Passenger Name: BEAR, SUSAN
Date: Jun 13, 2008
Flight: 673
Confirmation Number: ZCZQ2N
A+ Rewards Nbr:
Flights Close 10 MINUTES Before Departure
Please Be On Board Before This Time

GATE 94

ZONE
4

SEAT 25F

Depart: Orlando, FL(MCO) 3:32pm
Arrive: White Plains, NY(HPN) 6:19pm



BOARDING PASS
airtran.com



Passenger Name: BEAR, SUSAN
Date: Jun 13, 2008
Flight: 673
Confirmation Number: ZCZQ2N
A+ Rewards Nbr:
Flights Close 10 MINUTES Before Departure
Please Be On Board Before This Time

GATE 94 SEAT 25F

ZONE
4

Depart: Orlando, FL(MCO) 3:32pm
Arrive: White Plains, NY(HPN) 6:19pm



Susan M. Baer #23178
Meeting with Air Tran Executive
At Air Tran Corporate Headquarters
Orlando, Florida
June 13, 2008

**AirTran Airways
Boarding Pass**

565 GATE:3 13Jun

Name: Susan M. Baer
Frequent Flyer Rewards: N/A

Seat Number: 22D
Boarding Zone: 1

Depart: Newburgh, NY 07:00
Arrive: Orlando, FL 10:10

Confirmation Number: ZCZQ2N

Boarding pass MUST be presented
at the Gate not later than 10
minutes before departure.



**AirTran Airways
Customer Copy**

565 GATE:3 13Jun

Name: Susan M. Baer
Frequent Flyer Rewards: N/A

Seat Number: 22D

Depart: Newburgh, NY 07:00
Arrive: Orlando, FL 10:10

Susan M. Baer #23178
 Meeting with Air Tran Executive
 At Air Tran Corporate Headquarters
 Orlando, Florida
 June 13, 2008

ACE LIMO CAR SERVICE

Montclair, New Jersey to Stewart Airport to take Air Tran Flight #565 to Orlando, Florida

Car Service Total Cost \$181.00
 Receipt Attached

(Ex. 1)

Customer Account Number: 80
 DATE: 8/08
 SERVICE PROVIDER: ACE LIMO
 APPROVAL CODE: []
 AMEX D.C. DISC. MC VISA OTHER

UNIVERSAL CAR SERVICE CHARGE FORM

5352293 721
 140
 28
 2.20
 9.80
 1

896203

PASSENGER COPY

Susan M. Baer #23178
 Meeting with Air Tran Executive
 At Air Tran Corporate Headquarters
 Orlando, Florida
 June 13, 2008

ACE LIMO SERVICE

Car service plus tip from White Plains 'Westchester' Airport to Montclair, NJ (home)

(Ex. 1)

UNIVERSAL CAR SERVICE CHARGE FORM

DATE 6/13/08	TIME AM 6:12	START METER 522.95	CAR NO. 719	DATE TIME \$ 125
PICKUP POINT	ZONE	W.L.	PRH	FEES \$ 2.5
FINAL DESTINATION				TOL. (METER) \$ 6.06
			REG. TAX	TAX \$ 9.75
			DEF. ROUTE	WAIT TIME \$
			PACKAGE	
TOTAL DOLLARS				
166.25				

Customer Account Number: 01

Customer: 88370

Date of Charge: 06/13/08

Approval Code: 8-803-000-0000

Payment Method: AMEX D.C. DISC. MC VISA OTHER

Customer Signature: *Susan M. Baer*

895390

PASSENGER COPY

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization Trip Auth# 154632

Employee Number: P23178 Trip Period from: 10/22/08 to 10/25/08
 Name: Susan M Baer

Title: Dep Dir Avia/Caoo Org:
 Telephone: 212-435-3720 Dir/Comm:
 Address: 225PAS 1209
 Account Code: 1000 X 556001 321A04 A04101000
 Spouse/Guest: N
 International: N Travel Company Used: Y
 Blanket Trip: N Trip Extension: N
 Outside TDO: N Type:

285
 NOV 18 AM 9:23

Purpose: Participate in the IAWA 20th Annual Conference

Sponsor: International Aviation Women's Association

Purpose Dates: 10/22/08 to 10/25/08
 Business Destination: Chicago IL USA
 Ticket Destination: Chicago IL USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	750	Meals	100
Auto	0	Registration	450
Bus	0	Lodging	1,500
Rail	0	Other	200
Travel Sub-Total	750	Other Sub-Total	2,250
		Total Exp	3,000

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer

Date: 9/22/08 Submitted: 9/15/08

Approver's Signature: [Signature]

Date: 9/10/08 Emp# 4000 Title: [Signature]

Travel Arrangements for SUSAN M BAER

Record Locator LUZYVT
 Trip ID 11321856345
 PORT AUTHORITY
 PORT AUTHORITY

Agent ID : LR
 Phone: ... / Fax: ...

Invoice Details

Ticket Information

Airline Code 005 Ticket Date 9/17/08
 Ticket Number 7375319713 Invoice 0118224
 Check Digit 5 Electronic Yes

Charges

Ticket Base Fare 248.37
 Ticket Tax Fare 39.63
 Total (USD) Ticket Amount 288.00

Billing Code F7C23178XXXX321A04XXX

Airfare charged to American Express

Total 288.00

35.00 TRAVEL SERVICE FEE WITH AIR/RAIL

Travel Details

Wednesday October 22, 2008

Flight Information

Airline	CONTINENTAL AIR	Estimated time	2 hours 34 minutes
Flight	1163	Distance	719 Miles
Origin	Newark, NJ	Meal Service	Snack/brunch
Destination	Chicago O'Hare, IL	Plane	Boeing 737-500
Departing	12:29 PM		
Arriving	2:03 PM		
Departure Terminal	TERMINAL C		
Arrival Terminal	TERMINAL 2		
Seat	10D		
Class	Coach		

Travel Details

Friday October 24, 2008

Flight Information

Airline	CONTINENTAL AIR	Estimated time	2 hours 41 minutes
Flight	1170	Distance	719 Miles
Origin	Chicago O'Hare, IL	Meal Service	Snack/brunch
Destination	Newark, NJ	Plane	Boeing 737-500
Departing	4:20 PM		
Arriving	8:01 PM		
Departure Terminal	TERMINAL 2		
Arrival Terminal	TERMINAL C		
Seat	22D		
Class	Coach		

Travel Details

Wednesday April 22, 2009

THANK YOU FOR CALLING AMERICAN EXPRESS

Airline Record Locators

Airline Reference	Carrier
CVBHV	CONTINENTAL AIR

Additional Messages

TO REACH AMERICAN EXPRESS TRAVEL CALL 800-333-8844
PER OUR AGREEMENT WITH YOUR COMPANY AT TIME OF
INVOICING YOU WILL BE CHARGED A NON-REFUNDABLE
FEE FOR THE FOLLOWING SERVICE -
30.00 TRAVEL SERVICE FEE WITH AIR/RAIL

----- FOR RESERVATIONS CALL 1-800-333-8844 -----
FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844
FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
FARE IS NOT GUARANTEED UNTIL TICKETED. TICKETS MAY
BE NON-REFUNDABLE, NON-ENDORSABLE, NON-CHANGEABLE
AND ONLY VALID ON THE SAME CARRIERS.
CHANGES OR CANCELLATIONS MAY RESULT IN PENALTIES AND
ADDITIONAL FEES. SOME FARE RESTRICTIONS REQUIRE
CHANGES BE MADE PRIOR TO DEPARTURE DATE AND TIME
OR THE TICKET WILL HAVE NO FUTURE EXCHANGE VALUE.
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.

For Itinerary changes, please contact your travel office via telephone. Please use the phone number located in the remarks section on your Itinerary.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

THE PENINSULA

CHICAGO

Susan M Baer 225 Park Avenue South 9 Floor New York, NY 10003 US	Room No. : 1011 Arrival : 10-22-08 Departure : 10-24-08 Person(s) : 1 Rate Code : CH0399N Cashier : 62 Folio No. : 108745 Page No. : 1 of 1
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INVOICE

CIS Reference 5089747

Confirmation 5089747

DATE	DESCRIPTION	CHARGES	CREDITS
10-22-08	Room Charge	399.00	
10-22-08	State Occ. Tax 11.9%	47.48	
10-22-08	City Occ. Tax 3.5%	13.97	
10-23-08	Room Charge	399.00	
10-23-08	State Occ. Tax 11.9%	47.48	
10-23-08	City Occ. Tax 3.5%	13.97	
10-24-08	American Express XXXXXXXXXXXX1002		920.90
	Total	920.90	920.90
	Balance	0.00	

460.45

To:		Date	
Co.		# of Pgs.	THE PENINSULA CHICAGO
Dupl.		From	
Fax No.	212) 435-3833	Phone #	Fax #

Remarks: *Some packages may apply on certain nights only. Please be advised that room taxes are calculated based on your amenities and may vary during your stay.*

We wish to thank you for choosing The Peninsula Chicago. Let us look after you again soon at a Peninsula hotels in USA or Asia. To make a reservation, just call any Peninsula hotel or e-mail us at reservation@peninsula.com or visit www.peninsula.com.

I agree that I am personally liable for the payment of this account, and if the person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association

signature

THE PENINSULA

C H I C A G O

Susan M Baer 225 Park Avenue South 9 Floor New York, NY 10003 US	Room No. : 1011 Arrival : 10-22-08 Departure : 10-24-08 Person(s) : 1 Rate Code : CHGJ99N Cashier : 62 Folio No. : 108745 Page No. : 1 of 1
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INVOICE

CIS Reference 5089747

Confirmation 5089747

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10-23-08	State Occ. Tax 11.9%	47.48	
10-23-08	City Occ. Tax 3.5%	13.97	
10-24-08	American Express XXXXXXXXXXXX1002		920.90
Total		920.90	920.90
Balance		0.00	

460.45

To:	Date	THE PENINSULA CHICAGO
Co.	# of Pgs.	
Dupl.	From	
Fax No. 212 435 3833	Phono #	Fax #

Remarks: Some packages may apply on certain nights only. Please be advised that room taxes are calculated based on your amenities and may vary during your stay.

We wish to thank you for choosing The Peninsula Chicago. Let us look after you again soon at a Peninsula hotels in USA or Asia. To make a reservation, just call any Peninsula hotel or e-mail us at reservation@peninsula.com or visit www.peninsula.com.

I agree that I am personally liable for the payment of this account, and if the person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association.

Signature _____

Shared taxi -
hotel to airport - \$25
(no receipt)

snack at airport 6.25
~~6.25~~

Barrett, Lily Anne

From: Baer, Susan
Sent: Monday, September 15, 2008 2:52 PM
To: Barrett, Lily Anne
Subject: FW: IAWA's 20th Annual Conference

-----Original Message-----

From: karengriggs@iawa.org [mailto:karengriggs@iawa.org]
Sent: Monday, September 15, 2008 1:24 PM
To: karengriggs@iawa.org
Subject: IAWA's 20th Annual Conference

Dear IAWA Members and Friends:

Join us for a panel discussion on "The Right Approach to Environmental Stewardship" moderated by Board member **Julie Ellis**, Partner at Butler, Snow, O'Mara, Stevens and Cannada. This panel will explore the recent developments in environmental regulations such as capping emissions, trading emissions credits, and carbon taxes, as well as discuss industry environmental programs and commitments that include exploration of biofuel alternatives. Don't miss hearing great speakers on the panel, including **Mary K. Armstrong**, from The Boeing Company, **Nancy Young**, from the Air Transport Association, **Le Thi Mai**, from the Association of European Airlines and **Jane Hupe**, from ICAO.

Book your hotel (Peninsula Chicago at 312-337-2888), book your flight (check IAWA's special discount with Continental on www.iawa.org) and come for a very special conference to network with wonderful other aviation professionals!

October 22-24, 2008 in Chicago!

Deadline is October 1, 2008 for registration to the IAWA's 20th Anniversary Conference at www.iawa.org

14 7963



INTERNATIONAL AVIATION WOMEN'S ASSOCIATION

Print Email

Invoice Reference: 14013653

Registration Date: September 17, 2008
 Invoice Date: September 17, 2008
 Issued By: International Aviation Women's Association

Event: 20th Annual IAWA Conference
 Date/Time: Wednesday, October 22, 2008 - Friday, October 24, 2008

The following individual(s) are registered for the event:

Reference #	Name	Company/Organization	Rate
14013653	Mrs. Susan Baer	Port Authority of New York & New Jersey	\$450.00

Billing To:

Susan Baer
 Port Authority of New York & New Jersey
 225 Park Avenue South
 9th Floor
 New York, NY 10003
 212-435-3720
 sbaer@panynj.gov

Fees	Quantity	Unit Price	
Conference Fee (IAWA Member)	1	\$450.00	\$
		Subtotal:	\$
		Total:	\$

Your total includes a Discount Code savings of \$145.00.

Summary of Transactions	Date	Amount	
Transaction Amount	17-Sep-2008	\$450.00	\$
		Current Balance:	\$

Payment Information:

Payment Method: Wire Transfer
 Payment Instructions:

Please make your payment securely online using a **major Credit Card**.

You may also pay 'offline' via the following methods:

1. by check: payable to: IAWA (In US funds)
2. by **International Wire transfer**

Mail check to:
Karen Griggs, Executive Secretary
International Aviation Womens Association
P.O. Box 1088, Edgewater MD 21037

Wire transfers:
Chase Bank
JP Morgan Chase Bank, N.A.
Swift #: CHASUS33
Account No.:
International Aviation Womens Association
255 Alhambra Circle, Suite 750
Coral Gables, Florida 33134
Telephone No.: 305-441-1180

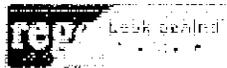
Refund Information

Note: A service charge of \$75.00 will be due on cancellations after October 1, 2008 !

2008 Diamond Conference Sponsor



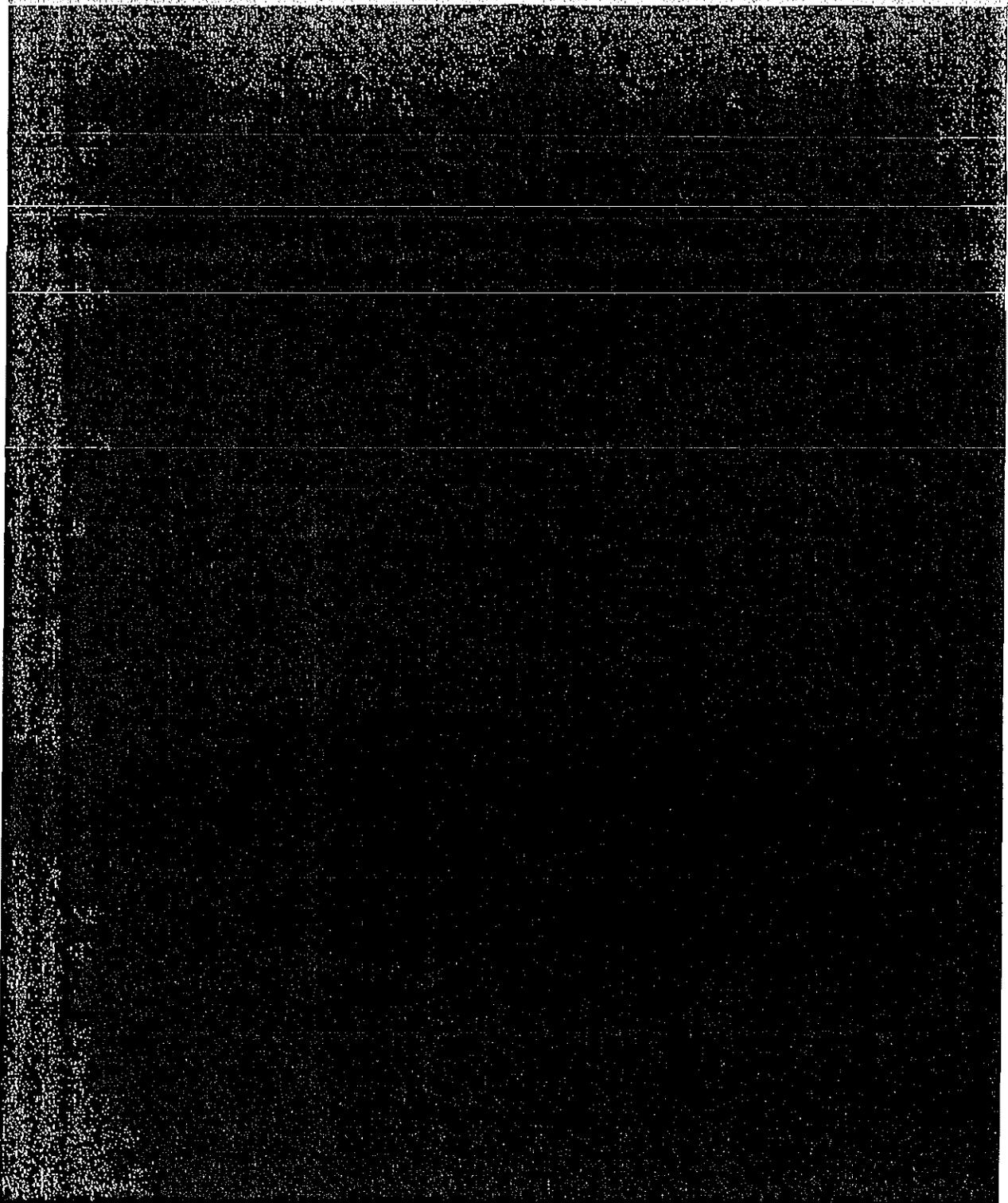
20th Annual IAWA Conference - 2008

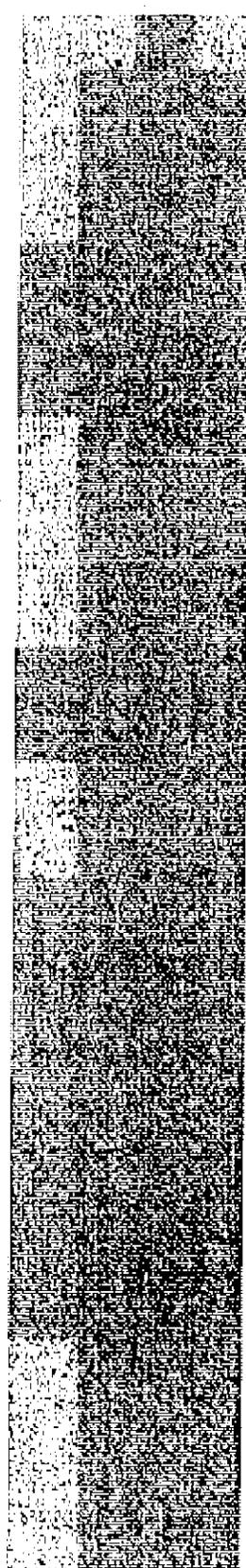


[Close this window](#)



108 International Aviation Womens Association. All rights reserved. P.O. Box 1088 | Edgewater MD 21037 | (410) 571-1990 | info@iawa.org





	Jane Hupe , Chief, Environmental Unit, International Civil Aviation Org Montreal, Canada
10:45 a.m. - 11:00 a.m.	Coffee Break
11:00 a.m. - 12:30 p.m.	General Aviation - A Critical Component of Our Local Economies Global Marketplace
	Moderator: Lisa Piccione , Senior Vice President, Government Affairs, National Business Aviation Association (NBAA), Washingt
	Elizabeth Dornak , Manager, Operations, DuPont Aviation, New Castle, Delaware
	Jolie S. Chung Howard , Director, Business Development, TAG Aviatio Ltd., Wanchai, Hong Kong
	Lori Lucion , Director, Marketing Communications, Cessna Aircraft Com Wichita, Kansas
	Mary Miller , Corporate Vice President, Customer Relations, Signature Support, Washington, DC
	Carla Tirel , Director - International Quality Management Team, NetJet Bluffton, South Carolina
12:30 p.m. - 2:00 p.m.	Luncheon and Keynote Address
	Captain Emily Warner , "Great Women Who Pioneered the Skies"
2:00 p.m. - 3:15 p.m.	Aviation Forecasts and New Product Lines: A Look at the (Not T Distant) Future
	Moderator: Susan Walsh , Industry Liaison - Manufacturers, Pratt & Whitney/United Technologies Corp., Washington, DC
	Robyn Brands , Director, CFM 56 Boeing Programs, CFM International, Cincinnati, Ohio
	Elizabeth Lund , Vice President, Product Development, Boeing
	Mary Ellen Jones , Vice President, Commercial Engines Marketing, Prat Whitney, East Hartford, Connecticut
	Mary Prettyman , Vice President Marketing, Airbus Americas, Herndon,
3:15 p.m. - 4:30 p.m.	The Use of Airport Resources in Our Ever Changing Economy
	Moderator: Carolanne Cunningham , Vice President & Counsel, GE Commercial Aviation Services, Shannon, County Clare, Ireland
	Rose Marie Andollino , Executive Director, O'Hare Modernization Progr Chicago, Illinois
	Catherine M. Lang , Deputy Associate Administrator for Airports, FAA, Washington, D.C.
	Sara L. Hall , Vice-President and General Counsel, Memphis-Sheilly Cou Airport Authority, Memphis, Tennessee
	Joyce F. Carter, C.A. , Vice President, Finance; Chief Financial Officer; Strategy Officer, Halifax International Airport Authority, Halifax, Canada
4:30 p.m. - 5:00 p.m.	Membership Meeting
	(all IAWA members are invited to attend)
6:30 p.m. - 10:00 p.m.	Anniversary Dinner, The University Club, Honoring IAWA's Past Presidents and Keynote Address by Best Selling Author Connie G Sponsored by FedEx Express

Friday October 24, 2008

8:30 a.m. - 9:45 a.m.

Everything You Wanted to Know About Claims Handling in the A Industry, and More!**Moderator: Mary Mortensen**, Customer Claims Administration Super Southwest Airlines Co., Dallas, Texas**Tracey E. Campbell**, Assistant Vice President, Global Aerospace, Short New Jersey**Sally A. Leible**, President and COO, Airport Terminal Services, Inc. (AT Louis, Missouri)**Cristina M. Schoen**, Senior Vice President, United States Aviation Und. Inc., New York, New York

10:00 a.m. - 10:30 a.m.

Elizabeth Moscrop, Author of "The 100 Greatest Women in Aviation," discusses Women's Contributions to the Aviation Indu

10:30 a.m. - 11:00 a.m.

Coffee Break

11:00 a.m. - 12:30 p.m.

Criminalization and Safety Issues in Today's Aviation Operations**Moderator: Kathlynn G. Fidelity**, Assistant Director of Aviation, U.S. Department of Justice, Washington, DC**Dorothea Capone**, Managing Partner, Baumeister & Samuels, P.C., Ne New York**Vonnick Le Guillou**, Partner, Bird & Bird, Paris, France**Vanessa Leigh**, Partner, Gates and Partners, London, England**Carson Seeligson**, Litigation Consultant, Continental Airlines, Houston

12:30 p.m. - 2:30 p.m.

Luncheon and Keynote Address**FAA Deputy Administrator Ruth Leverenz**

2:30 p.m. - 5:00 p.m.

Break Out Groups

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization Trip Auth# 156263

Employee Number: P23178 Trip Period from: 12/15/08 to 12/16/08
 Name: Susan M Baer

Title: Dep Dir Avia/CAOO Org: 285
 Telephone: 212-435-3720 Dir/Comm: N
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01
 Spouse/Guest: N
 International: N Travel Company Used: Y
 Blanket Trip: N Trip Extension: N
 Outside TDO: N Type:

Purpose: Meeting with US Airways to discuss US Airways Service from SWF

Purpose Dates: 12/15/08 to 12/16/08
 Business Destination: Phoenix AZ USA
 Ticket Destination: Phoenix AZ USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	1,269	Meals	220
Auto	0	Registration	0
Bus	0	Lodging	900
Rail	0	Other	111
Travel Sub-Total	1,269	Other Sub-Total	1,231
		Total Exp	2,500

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: Submitted: 11/26/08

Approver's
Signature

[Signature]

Date: 11/26/08 Emp# 40877

Title: *[Signature]*

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization Trip Auth# 156263

Employee Number: P23178 Trip Period from: 12/15/08 to 12/16/08
 Name: Susan M Baer

Title: Dep Dir Avia/CAOO Org: 285
 Telephone: 212-435-3720 Dir/Comm: N
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01
 Spouse/Guest: N Travel Company Used: Y
 International: N Trip Extension: N
 Blanket Trip: N Type:
 Outside TDO: N

Purpose: Meeting with US Airways to discuss US Airways Service from SWF

Purpose Dates: 12/15/08 to 12/16/08
 Business Destination: Phoenix AZ USA
 Ticket Destination: Phoenix AZ USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
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Auto	0	Registration	0
Bus	0	Lodging	900
Rail	0	Other	111
Travel Sub-Total	1,269	Other Sub-Total	1,231
		Total Exp	2,500

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer Date: _____ Submitted: 11/26/08
 Approver's Signature: [Signature] Date: 11/26/08 Emp# 4057 Title: [Signature]



Hyatt Place Tempe/Phoenix Airport
1413 W. Rio Salado Pkwy.

Jan 08, 2009
8:45 am

Tempe, AZ 85281

Telephone: (480)804-9544 Fax: (480)804-9548

SUSAN M BAER

(Ex. 1)

Account #: 90913
Room Number: 321
Rate: \$122.00
Pay Method: AX1002

Arrival Date: December 15, 2008
Departure Date: December 16, 2008

Information:

Date	Department	Reference	Voucher	Room	Debit	Credit
12/15/2008	Room postings	Auto Posted		321	\$122.00	
12/15/2008	Occ Tax - State	Auto Posted		321	\$8.87	
12/15/2008	Occ Tax - City	Auto Posted		321	\$5.86	
12/16/2008	American Express	CHECKED-OUTAX1002		321		\$136.73

I agree that my liability for any charges incurred by me or my party will not be waived. The hotel is not liable for items not kept in the safe. Smoking in a non-smoking room will result in a minimum fee of \$200.00. Any smoking fees or room damage fees will be added to your bill and charged to your on file method of payment. Your privacy is important to us. Please visit us at HyattPlace.com to review our Privacy Policy.

Tax Summary	
Occ Tax - S	\$8.87
Occ Tax - C	\$5.86
Balance:	\$0.00

Signature _____

HMSHost
 DICK CLARK'S AMERICAN BANDSTAND
 NEWARK INTERNATIONAL AIRPORT
 CHECK#: 403
 TABLE: 133/1
 SERVER: 10097 MARIA
 DATE: DEC15'08 5:33PM
 CARD TYPE: MSTRCARD A1 5*
 ACCT #: XXXXXXXXXXXX8192
 EXP DATE: XX.XX
 AUTH CODE: 581374
 SUSAN M BAER

SUBTOTAL: 24.36
 I AGREE TO COMPLY WITH THE CARD
 ISSUER'S CREDIT CARD AGREEMENT

TIP _____
 TOTAL _____
 SIGNATURE _____

HMSHost
 NI CPK
 Phoenix Sky Harbor Int'l Airport
 864: HALINA
 CHK 1817 DEC16'08 3:30PM
 Subtotal

1 600 CHP SALAD	8.40
Subtotal	8.49
Tax	0.70
Amt Paid	9.19
Cash	10.00
Change Due	0.81

HMSHost
 NI CPK
 Phoenix Sky Harbor Int'l Airport

U.S AIRWAYS

Name of Passenger

BAER/SUSANM
 CONF: BKR48G/US ZONE 7
 FFD:
 PHOENIX
 NEWARK
 Flight Date
 683 DEPARTS 16DEC
 405P
 Gate Boarding Time Seat
 A20 335P 8D

Expense Acct - *Hotel Bill*
Rec'd from Hotel 11/8/09

A seem to have lost the hotel receipt - was shedding too much paper as I went. I will double check at home!

Other costs:

- ✓ \$ 24.36 - delayed flight*
- ✓ \$ 2.00 water on flight*
- 2.00 tip for hotel maid*
- ✓ \$ 9.19 - dinner*
- ✓ 2.00 water on flight*

Travel Arrangements for SUSAN M BAER

Record Locator: MXXBQY
 Trip ID: 17387238074
 PORT AUTHORITY
 PORT AUTHORITY

Agent ID: VO

Phone: / Fax:

Invoice Details

Ticket Information

Airline Code: 005 Ticket Date: 8/11/2009
 Ticket Number: 7697261839 Invoice: 0211890
 Check Digit: 3 Electronic: Yes
 Billing Code: F7C23178XXX285A03XXX

Charges

Ticket Base Fare: 3,630.00
 Ticket Tax Fare: 69.90
 Total (USD) Ticket Amount: 3,699.90

Airfare charged to American Express

Billing Account: AXXXXXXXXXXX1002

Total: 3,899.90

35.00 TRAVEL SERVICE FEE WITH AIR/RAIL
 NONREFUNDABLE E-TKT 3899.90USD-CO CONFO.*CN62YS*
 DEPARTURE COACH CLASS-RETURN BUSINESS CLASS.
 FULL VALUE OF A WHOLLY UNUSED TICKET MAY BE
 APPLIED TOWARDS PURCHASE OF A NEW TICKET PROVIDED
 ORIGINAL RESERVATIONS ARE CANCELED PRIOR TO
 ORIGINALLY SCHEDULE FLIGHTS--- AND ---
 RESERVATIONS FOR NEW ITINERARY ARE MADE AND
 TICKETS REISSUED NO LATER THAN 1 YEAR FROM
 DATE OF ISSUE ON ORIGINAL PURCHASED TICKET.
 AIRLINE WILL CHARGE USD 250.00 MINIMUM CHANGE FEE
 FOR ANY CHANGE-PLUS ANY APPLICABLE FARE DIFFERENCE.
 IF UNABLE TO TRAVEL-PLEASE CANCEL BEFORE FLIGHT TIMES
 OR TICKET VALUE IS LOST.

35
 3934.90

Travel Details

Thursday September 10, 2009

Flight Information

Airline	CONTINENTAL AIR	Estimated time	13 hours 40 minutes
Flight	89	Distance	6,837 Miles
Origin	Newark, NJ	Meal Service	Lunch
Destination	Beijing, CHINA	Plane	Boeing 777
Departing	12:10 PM		
Arriving	1:50 PM		
Departure Terminal	TERMINAL C		
Arriving on	September 11, 2009		
Arrival Terminal	TERMINAL 3		
Seat	43F		
Class	Coach		

Travel Details

Thursday September 10, 2009

03/04

CROWNE PLAZA
INTERNATIONAL AIRPORT
BEIJING
 北京航空皇冠假日酒店

Crowne Plaza International Airport Beijing
 50, Fuqian 1 St., Tianzhu, Shunyi District,
 Beijing 101312, P.R.China
 北京航空皇冠假日酒店
 中国北京顺义区天竺地区府前一街50号
 邮编:101312

tel/ 电话: 86-10 5810 8888
 fax 传真: 86-10 5810 1188
 www.crowneplaza.com

Ms Baer Susan
 225 Park Avenue South 9th Floor New York Ny
 10003 United

Room No. : 2901
 Arrival : 09-11-09
 Departure : 09-13-09
 Page No. : 1
 Folio No. : 2578607
 Cashier : 29 FOALICE
 Date : 10/14/09

Membership No. :
 Company :
 Group Code :
 AR Number :

Date 日期	Description 项目	Reference 说明	Charges 借方 RMB 人民币	Credits 贷方 RMB 人民币
09-11-09	Room Charge		804.00	
09-11-09	15% Service Charge & Tax		120.60	
09-11-09	Deposit Transfer at Check-In			7,945.35
09-12-09	Room Charge		1,489.00	
09-12-09	15% Service Charge & Tax		224.85	
09-13-09	Crowne Cafe		182.00	
09-13-09	Balance Transfer		5,114.80	
Total 总额			7,945.35	7,945.35
Balance 余额			0.00	

I have received the goods and/or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, association or credit card issuer fails to pay for any part of the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.
 本人同意上述账单真实有效,并且在本人所指定的,应对该付账单担责任的个人,公司,其他机构或信用卡发卡行没有承担责任的情况下,承担个人责任,如果使用信用卡支付,本人同意履行与发卡行指定的全部条款。

POINT (N FULL FOLIO 全账单积分)
 Priority Club Rewards members can earn 10 points per US dollar or qualifying charges which include Qualifying Room Rate, Food, Beverage, Phone Service Charge, In-Room Movies and Laundry in Crowne Plaza International Airport Beijing. Points awarded may vary depending on hotel location. For terms and conditions please go to www.priorityclub.com or consult with Front Desk.
 酒店优悦会会员可在每次合格消费的房费,食品,饮料,电话服务费,房间内点播电影和洗衣上赚取积分,每1美元即可获得10分,得到的实际积分,按不同酒店情况而定。详情请登陆www.priorityclub.com,或咨询酒店前台。

洲际酒店集团与中国青少年基金会旗下的希望工程合作筹资在全国各地建造10所希望小学以帮助贫困地区失学儿童重返校园。
 感谢您的5元爱心捐款,与我们一起为孩子们创造未来。
 On behalf of China Youth Development Foundation and Project Hope, we would like to thank you for your generous contribution of RMB 5 towards our

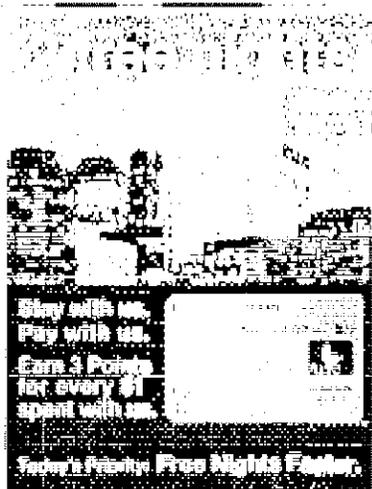
Signature 签署人 _____



Smoking Preference: Non-Smoking
 Number of Nights: 6
 Number of Rooms: 1
 Person(s): 1 Adult(s), 0 Child(ren)

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		Sep 1	2	3	4	5
6	7	8	9	10	CNY804.0	CNY1499.0
CNY1499.0	CNY1499.0	CNY804.0	CNY804.0			
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

Featured Offer



Fri 11 Sep 2009	CNY804.0 CNY per night (1 room(s))
Sat 12 Sep 2009 - Mon 14 Sep 2009	CNY1499.0 CNY per night (1 room(s))
Tue 15 Sep 2009 - Wed 16 Sep 2009	CNY804.0 CNY per night (1 room(s))
Total Hotel Service Charges †	CNY690.9 CNY
Total Tax †	CNY345.45 CNY
Estimated Total Price †:	CNY7945.35 CNY

Rules & Restrictions

- ADVANCE PURCHASE REQUIRED
- MUST PURCHASE AT LEAST 7 DAYS IN ADVANCE.
- Check-in Time: 02:00 PM
- Check-out Time: 12:00 PM
- Canceling your reservation before null (local hotel time) on null will result in no charge. Canceling your reservation or failing to show will result in a charge for the entire stay per room to your credit card. Taxes may apply.
- Only the reservation as entered into and confirmed by our system will be honored. Any written or printed confirmation that has been altered may be rejected by the hotel.
- As exchange rates may fluctuate from the time a reservation is made until the actual stay, the confirmed rate is guaranteed in the hotel's base currency.

† As taxes and service charges may fluctuate from the time a reservation is made until the actual stay and during the actual stay, the Total Price is an estimate. Other hotel-specific service charges may also apply. Check with hotel for details. Additional taxes may apply for hotels booked in Tokyo, Japan that exceeds 10,000JPY/person per stay.

Important, please note: Starting June 1, 2009, the Western Hemisphere Travel Initiative (WHTI) goes into effect, establishing new document requirements for travel into the U.S. from Canada, Mexico, Bermuda and the Caribbean, by land and sea. All U.S., Canadian and Bermudian citizens are subject to these new requirements, effective June 1, 2009. For more

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ABOUT THE EVENT

The Beijing 2009 World Route Development Forum, the biggest event ever organized by the Route Development Group Ltd, was officially opened on Sept. 13 in Beijing, China. It has attracted over 3,000 registered delegates from more than 500 airport operators, 200 international and domestic airlines, 100 suppliers, 60 travel and trade agencies and 10 international organizations from a total of 120 countries. Details

LATEST NEWS

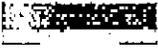
Frans meets with eight airlines at World Routes Conference

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Beijing Airport spreads wings

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PHOTOS



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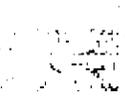
Sep 14, 2009



Macau and Hong Kong face traffic adjustment

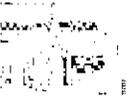
Sep 14, 2009

VIDEO & AUDIO



Propaganda film of 2009 World Routes

Sep 14, 2009



Propaganda film of emblem

Sep 14, 2009

THEY ARE THERE WITH US



Mr. Li Jiaxiang, Minister of CAAC (former GM of China National Aviation Corporation), was there at 2003 IATA AGM Washington with us



Mr. Yang Yuanyuan, former Minister of CAAC, was there at Aviation Expo/China 2007 with us



Mr. Wang Changshun, Vice Minister of CAAC, was there at Air Show China 2008 with us | Video



Mr. Xia Xinghua, former Vice Minister of CAAC, was there at Aviation Expo/China 2005 with us | Video

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AvBuyer.com.cn is the authorized Official Web Partner & Official Online Broadcasting Partner of Aviation Expo/China 2009 & Aviation Expo/China 2007 & Aviation Expo/China 2005.

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PRESS RELEASES

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Nov 23, 2007

en.AvBuyer.com.cn now introduces ABC Magazine channel

Mar 23, 2006

The Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 160723

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 10/11/09 to 10/13/09

Title: Dep Dir Avia/Caoo
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing: Y
Org: 285
Dir/Comm: N
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: PARTICIPATE IN THE ANNUAL ACI CONFERENCE

Sponsor: ACI

NEW 30 AMB

Purpose Dates: 10/11/09 to 10/13/09

Business Destination: Austin TX USA

Ticket Destination: Austin TX USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	1,000	Meals	75
Auto	0	Registration	0
Bus	0	Lodging	550
Rail	0	Other	50
Travel Sub-Total	1,000	Other Sub-Total	675
		Total Exp	1,675

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan Baer

Date: 9-25-09 Submitted:

Approver's
Signature

[Signature]

Date: 10/5/09 Emp# 19624 Title: COO

[Signature]

A. Paul Blanco, CFO

Emp # 20058

10/8/09

Date:

Travel Arrangements for SUSAN BAER

Record Locator JHQHDA
 Trip ID 11178846382
 PORT AUTHORITY

Agent ID: PR
 Phone: / Fax:

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0228959
 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 500.46
 Ticket Tax Fare 58.74
 Total (USD) Ticket Amount 559.20

Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 559.20

35.00 TRAVEL SERVICE FEE WITH AIR/RAIL
 AIRFARE - 559.20USD NONREFUNDABLE.
 ELECTRONIC TICKET - NO FLIGHT COUPONS WILL BE ISSUED.
 YOUR JET BLUE CONFIRMATION NUMBER IS MV3QF0.

Travel Details

Sunday October 11, 2009

JETBLUE AIRWAYS CORP.TICKETLESS-A

Flight Information

Airline	JET BLUE	Estimated time	4 hours 8 minutes
Flight	1089	Distance	1,519 Miles
Origin	New York JFK, NY	Meal Service	No Meal Service
Destination	Austin, TX	Plane	E90
Departing	8:00 PM		
Arriving	11:08 PM		

Departure Terminal TERMINAL 5
 Seat Unassigned
 Class Economy

SEAT-19B

Travel Details

Monday October 12, 2009

Flight Information

Airline	JET BLUE	Estimated time	3 hours 51 minutes
Flight	1088	Distance	1,519 Miles
Origin	Austin, TX	Meal Service	No Meal Service
Destination	New York JFK, NY	Plane	Airbus A320
Departing	4:15 PM		
Arriving	8:06 PM		

Arrival Terminal TERMINAL 5
 Seat Unassigned
 Class Economy

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For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

**JetBlue
Customer Receipt**

Itinerary Number: MV3QF0
 Passenger: BAER/SUSAN
 Payment Type: American Express

Flight Itinerary

11OCT09 Flight No(s): 1069
 New York City - JFK Depart:2000
 Austin Arrive:2308

Class of Service: B-COACH
 One Way Fare: 250.23
 Taxes: 22.37
 Security Fee(s): 2.50
 Passenger Facility Charge(s): 4.50

12OCT09 Flight No(s): 1068
 Austin Depart:1615
 New York City - JFK Arrive:2106

Class of Service: B-COACH
 One Way Fare: 250.23
 Taxes: 22.37
 Security Fee(s): 2.50
 Passenger Facility Charge(s): 4.50

Total Fare: 500.46
 Total Taxes: 44.74
 Total Security Fee(s): 5.00
 Total Passenger Facility Charge(s): 9.00
 Other Charges: 0.00

Tot: .20

**JetBlue Airways
Customer Copy**

Name: BAER/SUSAN MV3QF0
Gate 24 @ 07:30pm Seat 2C

11OCT09 Seq# 69 Flt No: 1069

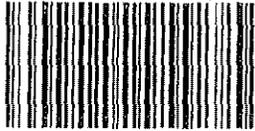
Depart: New York City - JFK 08:00pm
 Arrive: Austin 11:08pm

Bag Tag# 's:

DHS status:

New! Check flight status from your
 mobile device at mobile.jetblue.com

jetBlue AIRWAYS CUSTOMER COPY

Name: BAER, SUSAN TrueBlue Number:		12OCT09 SEQ#12		AUSJFK MV3QF0	
GATE 19 SEAT 6D FLT # 1068		CONFIRMATION # MV3QF0		Name: BAER, SUSAN TrueBlue Number:	
12OCT09 SEQ#12		BOARDING AT 3:45 p.m.		GATE 19 SEAT 6D	
Depart: Austin, TX 4:15 p.m. Arrive: New York/JFK, NY 9:06 p.m.		Check flight status and more from your mobile device at jetblue.com		FLT# 1068 3:45 p.m.	
				 QQ121068	

As of September 26, 2009

ACI-NA 18th ANNUAL CONFERENCE AND EXHIBITION
Committing to the Future: Transforming Ideas into Actions
October 11 – 14, 2009
Pre-Conference Seminars – October 10 – 11, 2009
Austin, TX

PRELIMINARY SCHEDULE

Most events will be held at the Austin Convention Center.

Meetings/events scheduled for the Hilton Austin are noted with (H) below. Locations are subject to change.

Saturday, October 10, 2009

07:00 am – 08:00 pm Registration
08:00 am – 09:00 am Pre-Conference Seminars Continental Breakfast
08:00 am – 10:00 am Executive Committee (H) (*Executive Committee members only*)
08:00 am – 05:00 pm Human Resources Committee Steering Group (*steering group members only*) (H)
08:00 am – 08:00 pm Exhibition Hall Move-In
09:00 am – 05:00 pm **Business Information Technologies Pre-Conference Seminar**
09:00 am – 05:00 pm **Operations & Technical Affairs Pre-Conference Seminar**
09:00 am – 12:00 pm Environmental Affairs Committee Steering Group
(*steering group members only; ACI-NA members may attend to observe*)
10:00 am – 10:30 am Pre-Conference Seminars AM Break
10:00 am – 12:00 pm Legal Affairs Committee Steering Group (*steering group members only*)
10:00 am – 12:00 pm U.S. Government Affairs Steering Group (*steering group members only*) (H)
10:00 am – 01:00 pm WBP/Associates Board of Directors (H)
12:00 pm – 01:00 pm Pre-Conference Seminars Buffet Luncheon
01:00 pm – 05:00 pm Board of Directors (H)
01:00 pm – 05:00 pm **Environmental Affairs Pre-Conference Seminar**
01:00 pm – 05:15 pm **Legal Affairs Pre-Conference Seminar**
03:00 pm – 03:30 pm Pre-Conference Seminars PM Break
03:00 pm – 05:00 pm **Finance Pre-Conference Seminar**
05:00 pm – 06:00 pm Operations & Technical Affairs Committee Steering Group
06:00 pm – 09:00 pm Board of Directors & Commissioners Dinner (*by invitation only*)

Monday, October 12, 2009 – CANADIAN THANKSGIVING

07:00 am – 06:30 pm Registration

07:30 am – 10:00 am Exhibition Hall Open (continental breakfast on show floor)

09:00 am – 04:00 pm Guest Tour 3: LBJ Ranch Tour

10:00 am – 10:15 am AM Break

10:15 am – 12:00 pm **General Session I: Welcome and Keynote Address**

Airports today are facing unprecedented challenges from reduced revenues, cuts in airline service and increased security regulations. In these difficult economic times, it is even more essential that new requirements provide real benefits for the traveling public. In the eight years since the 2001 terrorist attacks the system has greatly improved, but are we responding to today's threat instead of preparing for tomorrow's? Peter Bergen will provide his insights on the evolving terrorist threat worldwide and the implications for airports in North America.

Moderator: Greg Principato, President, ACI-NA

Welcomes: G. Hardy Acree, Director of Airports, Sacramento County Airport System;
First Vice Chair, ACI-NA

Jim Smith, Executive Director of Aviation, City of Austin Department of Aviation

Guest: City of Austin Mayor Lee Leffingwell

Keynote: Peter Bergen, CNN National Security Analyst and Best-Selling Author

12:00 pm – 03:00 pm Exhibition Hall Open (buffet luncheon on show floor)

02:00 pm – 03:00 pm Press Briefing

03:00 pm – 03:15 pm PM Break

03:15 pm – 05:00 pm Concurrent Educational Sessions

1. NextGen: It Begins and Ends At Airports

The FAA's NextGen Program promises far-reaching, fundamental redevelopment of the United States' air transportation system. NextGen work efforts appear to have intensified this year, with high level-commitments from both the Obama Administration and Congress regarding funding, research, and implementation. Much of the discussion this year has centered on what can be done now, and in the very near future, to realize NextGen benefits. In this session, come hear about critical efforts that have taken place over the summer, how airports fit into NextGen plans, and what your airport can be doing now to be ready.

Moderator: Charles "Skip" T. Miller, Executive Director of Airports, Louisville Regional Airport Authority

Speakers: Dr. Agam N. Sinha, Senior Vice President, The MITRE Corporation
Steve Vail, Senior Manager, Air Traffic Operations, FedEx
James M. Crites, Executive Vice President Operations, Dallas/Fort Worth International Airport
John Crichton, President & CEO, NAV CANADA
Chris Oswald, Vice President, Safety & Technical Operations, ACI-NA

(Monday, October 12, 2009 continued on page 4)

Tuesday, October 13, 2009

07:00 am – 07:00 pm Registration

07:30 am – 09:00 am **World Business Partners & Associates Business Breakfast**

All ACI-NA/ACI World Business Partner and Associate Members are invited to breakfast (no RSVP required). Hear about the latest news from your association, then enjoy the always-lively and informative Airport Director Roundtable Discussion.

Moderator: Bob Hazel, Partner, Oliver Wyman; Chair, ACI-NA WBP/Associates Board

Panelists: John D. Clark, III, Executive Director and CEO, Indianapolis Airport Authority; Chairman, ACI-NA

Kim Day, Manager of Aviation, City and County of Denver, Denver International Airport

Jeffrey P. Fegan, Chief Executive Officer, Dallas/Fort Worth International Airport

Barry Rempel, President & CEO, Winnipeg Airports Authority; Chair, Canadian Airports Council

Jim Smith, Executive Director of Aviation, City of Austin Department of Aviation

08:00 am – 09:00 am Continental Breakfast

09:00 am – 10:30 am **General Session II: Airlines and Airports: Working on the Relationship**

Shrinking airline revenues have led to increased pressure for reductions in airport charges and delays or cancellations of capital programs. But there is a need to plan for the future and the inevitable return of passengers and cargo. How do we reconcile the fact that airlines are principally focused on short term survival while airports must also concentrate on the long term air service and economic needs of their communities?

Join us for a spirited discussion about how airports and airlines can better work together to ensure operational and financial success in the short and long term.

Moderator: John D. Clark, III, Executive Director/CEO, Indianapolis Airport Authority; Chair, ACI-NA

Speakers: Larry Kellner, Chairman and CEO, Continental Airlines Inc.

Robert J. Deluce, President and CEO, Porter Airlines Inc.

Jeffrey W. Hamiel, Executive Director, Minneapolis-St. Paul Metropolitan Airports Commission

09:00 am – 04:00 pm *Guest Tour 4: Wildflower Center/Umlauf Gardens*

10:30 am – 01:30 pm Exhibition Hall Open (buffet luncheon on show floor, 11:30 am – 1:30 pm)

01:30 pm – 01:45 pm PM Break 1

(Tuesday, October 13, 2009 continued on page 6)

Tuesday, October 13, 2009, continued

03:15 pm – 04:30 pm Concurrent Educational Sessions

5. What's Air Cargo Worth to Your Airport and Your Community?

As airport and community leaders deal with the recession and position themselves for recovery, air cargo is increasingly recognized as a potential centerpiece. Moving goods on a secure, timely basis is a key to becoming and remaining competitive in the global market, especially through creative partnerships of communities, freight forwarders, logistics partners, and airlines. Case studies and examples of the macro and micro economic impact will be presented, as well as relevant information from the ongoing ACRP "Economic Impact of Air Cargo" project. Speakers will also address the extent to which the current shift to surface transportation of freight is likely to be permanent, and the economic impacts of the TSA 100% belly cargo screening requirement and its affect on airports, airlines, and their business partners.

Moderator: Mark VanLoh, Director of Aviation, Kansas City Aviation Department

Speakers: Ian Morgan, VP, The Americas, Cargolux Airlines International S.A.

Garth Atkinson, President and CEO, Calgary Airport Authority

Alex Brown, Vice President, Global Supply Management, Advanced Micro Devices

6. Sustainability: We're Drinking the Kool-Aid™

Sustainability is not just a buzzword anymore – it's a way of doing business. Attend this session to learn about the benefits of incorporating the fundamentals of sustainability into everyday business practices. Hear the perspectives of three different organizations that have committed to the triple-bottom line principles of sustainability, including the tools and approaches they have used to enable them to implement sustainable thinking into a successful business enterprise.

Moderator: Barry Rempel, President & CEO, Winnipeg Airports Authority; Chairman, Canadian Airports Council

Speakers: Eric Dillinger, Vice President Principal, Jacobs Carter Burgess

Elaine Karnes, Senior Environmental Manager, Southwest Airlines

John Huey, Director of Sustainability and Environmental Affairs, Delaware North Companies

04:30 pm – 05:30 pm New Member and Airport/Associate Member Official Representatives Reception
(by invitation only)

05:30 pm – 07:00 pm Exhibition Hall Open (reception on show floor)

07:00 pm – 11:00 pm Exhibition Hall Move-out

Wednesday, October 14, 2009, continued

03:00 pm – 04:30 pm Concurrent Educational Sessions

9. Banking on the American Recovery and Reinvestment – How Do You Spell Relief?

Debt financing of capital projects has become more tenuous and more expensive for airports as the financial markets have withered under the stress of the collapse of multiple bond insurers and investment and commercial banks. Will the temporary relief from AMT help airport bonds? Is there more legislative relief on the horizon for airport issuers? How have disclosure practices changed as a result of the tumult in the municipal market? Hear from market participants on the volatility of municipal markets over the last 12 months and prospects for relief from the American Recovery and Reinvestment Act. Find out what airports are doing to better market their bonds to investors and hear updates on the latest in disclosure practices. Listen to what issues are weighing on the minds of rating agencies and investors.

Moderator: David N. Edwards, Jr., Executive Director, Greenville-Spartanburg International Airport

Speakers: Lynn Hampton, Vice President & CFO, Metropolitan Washington Airports Authority

Guy Nagahama, Director, Jefferies First Albany

Steven J. Grossman, CEO and Executive Director, Jacksonville Aviation Authority

Michael Craft, Research Analyst, Fidelity Investments

10. Numbers, Numbers Everywhere: A View from the Director's Chair

Airport and airline operations generate a flood of numbers and statistics – but what are the key metrics that successful airports actually use day-to-day, week-to-week and month-to-month to keep on top of their operations, spot failures in the making, and prevent problems altogether? This session brings leaders in the industry together to discuss what metrics are important to them and why, and how you can determine the right metrics to track for your airport.

Moderator: John Payne, Chief Information Officer, San Francisco Airport Commission

Speakers: Kim Day, Manager of Aviation, City and County of Denver, Denver International Airport

Jeffrey P. Fegan, Chief Executive Officer, Dallas/Fort Worth International Airport

Jeffrey W. Hamiel, Executive Director, Minneapolis-St. Paul Metropolitan Airports Commission

06:30 pm

Closing Night Event: Bob Bullock Texas State History Museum

Reception: Sponsored by Allegheny County Airport Authority, your 2010 hosts

Dinner: Sponsored by City of Austin and Austin-Bergstrom International Airport, your 2009 hosts

Thursday, October 15, 2009

09:00 am 11:00 am Behind the Scenes at ABIA

Buses for the airport tour will leave the Hilton Austin at 8:30 am.

**** Please note that this schedule is subject to change. Check the ACI-NA website www.aci-na.org or call the ACI-NA Conference Department (202) 293-8500 for the most up-to-date information.**

Carrier Amtrak
Train 198
Origin WASHINGTON DC
Destination NEWARK NJ
Departing 5:05 PM
Arriving 8:20 PM

Seat Unassigned

Amtrak Information: AMTRAK 002YB COACH

Amtrak Locator: 10A69C

AMTRAK CONFIRMATION...10A69C.

Travel Details

Tuesday May 11, 2010

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A TRAVEL SERVICE FEE OF 25.00 WILL BE CHARGED FOR REFUNDED
RAIL TICKETS
FEE FOR THE FOLLOWING SERVICE -

--- FOR RESERVATIONS CALL 1-800-333-8844 ---
FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844
FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 338-291-0104, CODE S-9LVA
NO CAR OR HOTEL REQUESTED

ADVISORY Effective August 15, based on your itinerary, you may be subject to the U.S. Transportation Security Administrations Secure Flight requirements to provide your name, date of birth and gender before the airline can issue your boarding pass.

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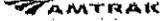
For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

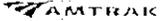
For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800489694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhoda Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Riders **1**  Baggage
 Name of Passenger
BAER/SUSAN
 From
WASHINGTON, DC
 To
NEWARK PENN STA, NJ
 Train
2V 178 Date
12NOV09
 Super/Car
YA
RESERVD COACH
 Class of Payment
EX103.00AX21.00 2000
 Rate Paid **\$124.00** Account Charge **\$0.00**
 Total Paid **\$124.00**
AQF1
3167562425292 01 01
12NOV09 10A69C
 PASSENGER RECEIPT

Riders **1**  Baggage
 Name of Passenger
BAER/SUSAN
 From
NEWARK PENN STA, NJ
 To
WASHINGTON, DC
 Train
2V 111 Date
12NOV09
 Super/Car
YE
RESERVD COACH
 Class of Payment
AR72.00AX 1002
 Rate Paid **\$72.00** Account Charge **\$0.00**
 Total Paid **\$72.00**
Q.F.1
168533005320 01 01
12NOV09 10A69C
 PASSENGER RECEIPT

Parking Receipt

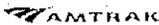
12/12/09 12:07:08 PM

9.00

The line above shows time, date of receipt, and amount paid.



Location *22* Cashier *[Signature]*

PETER  FAS 1480
 Name of Passenger: AER/SUSAN
 From: NEWARK, PENN. STA, NJ
 To: WASHINGTON, DC
 Class: 2V 111 Date: 23NOV09
 Account: V D Service/Car: RESERVD COACH
 Form of Payment: P49.00AX 100? Account Charge: \$0.00
 Full Fare: \$49.00 Total: \$49.00
 Ticket Number: 271641010461 No. of Seats: 01
 Date of Issue: 23NOV09 Release: 10A956
 PASSENGER RECEIPT

PETER  FAS 1480
 Name of Passenger: AER/SUSAN
 From: WASHINGTON, DC
 To: NEWARK, PENN. STA, NJ
 Class: 2V 178 Date: 23NOV09
 Account: YB Service/Car: RESERVD COACH
 Form of Payment: P103.00AX 100? Account Charge: \$0.00
 Full Fare: \$103.00 Total: \$103.00
 Ticket Number: 271641010479 No. of Seats: 01
 Date of Issue: 23NOV09 Release: 10A956
 PASSENGER RECEIPT

Parking Receipt

RECEIPT 19:42 23NOV09 \$9.00 B 3 4192 PLAZA STA

tip 1.00

The line above shows time, date of receipt, and amount paid.



Location M Cashier [Signature]

TH Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 162114

21

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/23/10 to 02/24/10

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209

Org: 7001 APR - 2 285 10:55
Dir/Comm: Y

Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: N Travel Company Used: N
Blanket Trip: N Conferences, Seminars, Training and Testing: Y Trip Extension: N
Outside TPO: N Type:

Purpose: Participate in the ACC/AAAE Planning, Design & Construction Symposium

Sponsor: AAAE

Purpose Dates: 02/23/10 to 02/24/10
Business Destination: Atlanta GA USA
Ticket Destination: Atlanta GA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	75
Travel Sub-Total	0	Other Sub-Total	75
		Total Exp	75

#Signature below implies approval of 2 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer Date: 1/26/10 Submitted: 3/17/10

Approver's Signature: [Signature] Date: 2/18/10 Emp# 19624 Title: COO

02 / 03



UNITED EXPRESS CAB
335 Martin Luther King Jr., Drive
Atlanta, Georgia 30312
404-658-1638

FARES	
METERED RATE	
\$2.50 Flag Pull to 1st 1/8 mile or portion thereof, .25¢ each add. 1/8 miles. \$2.00 each add. passenger & \$21.00 per hour for waiting time.	
AIRPORT / DOWNTOWN FLAT RATE -	\$30.00
AIRPORT / MIDTOWN FLAT RATE -	\$32.00
AIRPORT / BUCKHEAD FLAT RATE -	\$40.00
\$2.00 each additional person to above fares	
DOWNTOWN OR MIDTOWN OR BUCKHEAD BUSINESS TO BUSINESS FLAT RATE ZONE CHARGE	
\$8.00 for 1st person, \$2.00 each additional passenger. 20% Discount to Senior/Disabled Citizen with Proper I.D. (Each fare \$2.00 fuel charge) All taxi fares include sales tax.	

Date: 2/23
 Pickup location: Airport
 Dismissal point: Omni
 Cab# / Driver Name: _____
 # of Passengers 1

Fare \$	<u>32.00</u>
Tip \$	<u>5.00</u>
Total Chg. \$	<u>37.00</u>



(404) 898-0554
1042 Lindbergh Dr.
Atlanta, GA 30324

Taxi Service Receipt

Date: 2/23 Cab# _____
 From: Omni
 To: BLT Restaurant
 Driver: _____

Fare, \$ 10.00
 Tips, \$ 2.00
 Total, \$ 12.00



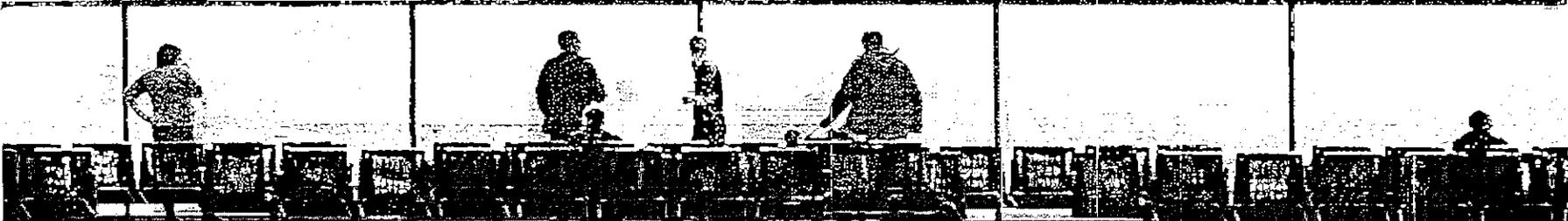
(404) 222-9888
55 Milton Ave. SE,
Atlanta, GA 30315

Taxi Service Receipt

Date: 2/24 Cab# _____
 From: Omni hotel
 To: Airport
 Driver: _____

Fare, \$ 32.00
 Tips, \$ 5.00
 Total, \$ 37.00





Events

- ACC Institute
- Institute Events
- ACC Annual Conference
- Summer Workshop Series
- 2nd Annual Security Technology Day

ACC Events

ACC events enable members to stay at the forefront of the industry and to assemble the strongest possible teams for their clients. Each year, ACC organizes the ACC/AAAE Airport Planning, Design and Construction Symposium, the ACC/FAA/TSA Summer Workshop Series, the ACC Annual Conference and other training programs that give airport consultants and aviation officials excellent opportunities to learn about technical subjects relating to critical airport and business development.

Educate yourself and advance your professional career by enrolling in one of these exciting events.

All sessions were well formatted with good to very good content covering full range of perspectives from the entire industry with regard to changes in the industry and threats to doing business as a consultant. Very impressed.

ACC Annual Conference
First Time Attendee

ACC/AAAE Airport Planning, Design & Construction Symposium

February 24-26, 2010 > Atlanta, GA
(ACC Committee Meetings - February 23)

General Information

The 2010 Airport Consultants Council/American Association of Airport Executives Airport Planning, Design & Construction Symposium, February 24-26 in Atlanta, Georgia, is your one stop event highlighting the latest tools, methods, concepts and new ideas in airport development and operations. This is a must-attend event for aviation directors, airport managers, operations managers and airport staff responsible for planning, engineering, finance, sustainability, information technology and legal aspects at public airports. Architects, engineers, IT consultants, specialty consultants, airlines, FAA, TSA, state personnel and equipment service providers also will benefit greatly from participating in this program.

The symposium includes sessions for new and seasoned airport development professionals alike. The workshops will range from providing "the basics" to highly technical sessions. Five concurrent technical workshops are scheduled under five tracks: planning; terminals and landside; airside; project management and construction management; and, for the first time, a new track on sustainability. Information technology will be a theme woven into the individual tracks. The combined "super tracks" will feature insights on decision-making in volatile economic times and international collaboration opportunities. The plenary sessions will provide the latest perspectives from airports and the airlines that will benefit airport staff and consultants alike, particularly in this time of uncertainty in the aviation industry.

Be sure to join your colleagues at the preeminent airport technical event of the year.

**2010 ACC/AAAE Airport Planning, Design & Construction
Symposium Website
Sponsored By:**

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 163092

01

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 03/16/10 to 03/16/10

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing : N
Org: 285
Dir/Comm: Y
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: Speak at the International Aviation Club March 16th Luncheon

Sponsor: IAC

Purpose Dates: 03/16/10 to 03/16/10
Business Destination: Washington DC USA
Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	250	Other	50
Travel Sub-Total	250	Other Sub-Total	50
		Total Exp	300

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature Susan Baer

Date: 2/25/10 Submitted: 2/26/10

Approver's
Signature Susan Baer

Date: 2/25/10 Emp# 23178 Title: Director



Travel Arrangements for SUSAN BAER

Record Locator PASWSJ
Trip ID 11529799427
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003

Agent ID: PG

Phone: / Fax: ..

Itinerary Details

Itinerary Only

Billing Code: F7C23178XXX285A01XXX

Travel Details

Tuesday March 16, 2010

AMTRAK CF 055DA4 FARE 180.00 ADVANCE PAID

Flight Information

Airline AMTRAK
Flight 111
Origin NEWARK, NJ Meal Service No Meal Service
Destination WASHINGTON DC
Departing 5:46 AM
Arriving 8:42 AM
Seat Unassigned
Class Conventional

TRAIN 111 DPT-NEWARK PENN ST NJ ARV-WASHINGTON

Flight Information

Airline AMTRAK
Flight 198
Origin WASHINGTON DC Meal Service No Meal Service
Destination NEWARK, NJ
Departing 5:05 PM
Arriving 8:20 PM
Seat Unassigned
Class Conventional

TRAIN 198 DPT-WASHINGTON DC ARV-NEWARK PENN

Travel Details

Wednesday July 14, 2010

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Airline Record Locators

Airline Reference Carrier
055DA4 AMTRAK

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CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA



FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
PLEASE REVIEW THIS ITINERARY//INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

ADVISORY Effective August 15, based on your itinerary, you may be subject to the U.S. Transportation Security Administration's Secure Flight requirements to provide your name, date of birth, and gender before the airline can issue your boarding pass.

ExpAcct:
 3183 (02)
 Susan M. Baer
 3110 11th St NW
 Washington, DC

Riders Baggage

Name of Passenger
BAER/SUSAN

From NEWARK PENN STA, NJ
 To WASHINGTON, DC
 Date 11 16 MAR 10
 Accomp Space/Car
 RESERVD COACH

Fare Plan
 Total \$74.00
 Rail Fare \$74.00
 Accom Charge \$0.00

BOF1
 Ticket Number 0759333000769
 Date of Issue 16 MAR 10
 Reservation 01 01
 Reservation 55 D A 4

PASSENGER RECEIPT

Riders Baggage

Name of Passenger
BAER/SUSAN

From WASHINGTON, DC
 To NEWARK PENN STA, NJ
 Date 196 16 MAR 10
 Accomp Space/Car
 RESERVD COACH

Fare Plan
 Total \$106.00
 Rail Fare \$106.00
 Accom Charge \$0.00

BOF1
 Ticket Number 0759333000777
 Date of Issue 16 MAR 10
 Reservation 01 01
 Reservation 55 D A 4

PASSENGER RECEIPT

Parking Receipt

RECEIPT 08:30 16 MAR 10 \$35.00 E 3861 PLR39 177

The line above shows time, date of receipt, and amount paid.



Location ZZ Cashier [Signature]

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 164235

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 05/25/10 to 05/25/10

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing : N
Org: 285
Dir/Comm: Y
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: Kick-off meeting for the Blue Ribbon Commission

Sponsor: FAA

Purpose Dates: 05/25/10 to 05/25/10
Business Destination: Washington DC USA
Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	700	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	50
Travel Sub-Total	700	Other Sub-Total	50
		Total Exp	750

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 5-9-10 Submitted: _____

Approver's
Signature

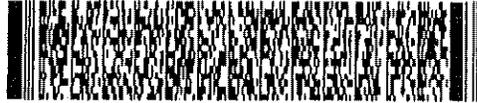
[Signature]

Date: 5/11/10 Emp: 40871 Title: *[Signature]*



BOARDING PASS

Name: **BAER/SUSANM**
 OnePass: **ES965464**
 Flight: **CO 2909 Economy (H)**
 Operated By: **ExpressJet Airlines**
 Miles: **215**
 Date: **Tuesday, May 25, 2010**
 Depart: **Newark-Liberty Intl 7:00 AM**
 Arrive: **Washington-Reagan Natl 8:20 AM**
 Board Time: **6:25 AM**
 Gate: **A23a Shuttles Available from C71**
 Seat: **17A**
 Confirmation: **CZH9TP eTicket: 00578918789385**



Seq: **25**
2909
17A
CZH9TP

Go paperless and use your mobile phone or PDA as your boarding pass! Mobile boarding passes are now an option for most customers departing from New York/Newark - Liberty (EWR). Go to <http://pda.continental.com> - Flight Check-in and then choose mobile boarding pass as your delivery option.

A STAR ALLIANCE MEMBER

Bag check must be completed no later than 30 minutes before departure. Each traveler is allowed to carry-on one bag and one personal



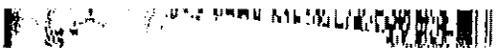
Name: **BAER/SUSANM**
 Date: **TUE 25 MAY 2010**
 OnePass: **ES965464**
 Mileage: **215 Miles**
 Flight: **CO 3398 H Operated by Colgan Air**

Gate: **12**

Seat: **14B**

Confirmation: **CZH9TP**

eTicket



Name: **BAER/SUSANM**
 Date: **TUE 25 MAY 2010**
 OnePass: **ES965464**
 Mileage: **215 Miles**
 Flight: **CO 3398 H**

Gate: **12**

Seat: **14B**

Depart: **Washington-Reagan Natl 5:00 PM**
 Arrive: **Newark-Liberty Intl 6:22 PM**
 Board Time: **4:25 PM**

eTicket 00578918789385

A STAR ALLIANCE MEMBER



Travel Arrangements for SUSAN M BAER

Record Locator FCRZYK
Trip ID 10928454340
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003
PORT AUTHORITY

Agent ID: D6
Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 005 Ticket Date 5/21/2010
Ticket Number 7891878938 Invoice 0028288
Check Digit 5 Electronic Yes
Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 0.00
Ticket Tax Fare 0.00
Total (USD) Ticket Amount 0.00
Current Fare 635.40
Prior ticket 0057888078221 credit -635.40
Exchange Fee 0.00
Airfare charged to American Express
Billing Account: AXXXXXXXXXXXXX1002
Total 0.00

Travel Details

Tuesday May 25, 2010

Flight Information

Airline CONTINENTAL AIR Estimated time 1 hour 20 minutes
Flight 2909 Distance 199 Miles
OPERATED BY /EXPRESSJET AIRLINES INC DBA CO EXPRESS
Origin Newark, NJ Meal Service No Meal Service
Destination Washington Reagan, DC Plane Embraer 145 J61
Departing 7:00 AM
Arriving 8:20 AM
Departure Terminal TERMINAL A
Arrival Terminal TERMINAL B
Seat 17A
Class Coach

SINGLE SEAT SIDE

Flight Information

Airline CONTINENTAL AIR Estimated time 1 hour 22 minutes
Flight 3398 Distance 199 Miles
OPERATED BY /COLGAN AIR DBA CONTINENTAL CONNECTION
Origin Washington Reagan, DC Meal Service No Meal Service
Destination Newark, NJ Plane D14
Departing 6:00 PM
Arriving 8:22 PM
Departure Terminal TERMINAL B
Arrival Terminal TERMINAL C
Seat 14B



Class Coach

Travel Details

Wednesday September 22, 2010

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
CONTINENTAL AIR	ES965464	SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
CZH9TP	CONTINENTAL AIR

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.

CONTACT THE ABOVE NUMBER FOR COMPLETE

TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY Effective August 15, based on your itinerary, you may be subject to the U.S. Transportation Security Administrations Secure Flight requirements to provide your name, date of birth and gender before the airline can issue your boarding pass.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7898. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1102; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 164187

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 05/23/10 to 05/30/10

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds
for disciplinary action including dismissal. Please be accurate.

Employee's
Signature



Date:

4/28/10

Submitted: _____

Approver's
Signature



Date:

4/30/10

Emp#

19624

Title:

COO



26-28 May • Leipzig

IFTF 2010
Transport & Information
Understanding the Potential

Registration Number: 205417

Dear Ms. Baer,

Many thanks for your registration. You have ordered the following services:

Quantity	Designation	Unit price EUR	Total price EUR
1	Registration fee		0,00
1	The Fürstenhof Hotel ***** Single room Classic	195,00	195,00
		Total price:	195,00 EUR

We have also made the following hotel reservation for you:

1 single room classic

Arrival: 26 May 2010 **Departure:** 27 May 2010

The hotel prices are including breakfast and VAT

Address of the hotel:

Hotel Fuerstenhof Leipzig *****
Tröndlinring 8
04105 Leipzig
Germany
phone.: +49 – (0)3 41 / 140-0
fax: +49 – (0)341 / 140 3700-222
Internet: www.starwoodhotels.com

Please note:

Hotel Reservation, Cancellation and Congress Cancellations and changes can only be accepted if submitted in writing to info@itf-leipzig.org or by fax to +49 341 678 8972.

Hotel bookings may be cancelled free of charge until 10 May 2010. Cancellations after this date will incur a charge of the rate for one roomnight. Credit notes in respect of payments made for hotel rooms will be issued directly.

We have debited your credit card with the total amount of 195,00 EUR by order and for account of OECD (2, rue André Pascal, 75775 Paris Cedex 16, France).

We ask you to bring along this confirmation to Leipzig. It will be your legitimation at our welcome desks in the Congress Center Leipzig (CCL).

If you want to alter your booking or to view your data please follow this link:

www.itf-leipzig.org → use your access code again

In case of any question please do not hesitate to contact us.

Sincerely Yours,

Your ITF 2010 Team

Contact:

e-mail	info@itf-leipzig.org
phone	0049 (0) 341 678 8944
fax	0049 (0) 341 678 8950



Gold Card

Ameriprise Financial

74,634 Membership Rewards Points Available

Prepared For SUSAN M BAER

Account Number

Closing Date 06/02/10

Page 1 of 6

001 003 01500 ROSNS50C 0 1 4 0 07043 070

Previous Balance \$	Payment Activity \$	New Activity \$ Inc. Adjustments	New Balance \$

Payment Due Date 06/27/10

Please refer to page 3 for important information regarding your account

To manage your card account online or to pay your bill, please visit us at www.americanexpress.com. For general servicing or additional contact information, please see the reverse side of this page or call the number on the back of your card.

Activity

* Indicates posting date

** Foreign Currency conversion rate in base 2.7%. See page 2 for details

Amount \$

Activity	Amount \$
Due in Full Activity for SUSAN M BAER	

06/04/10	LEIPZIGER MESSE INTERNET, LEIPZIG 01042335	185.00 **European Union Euro	264.01
----------	---	---------------------------------	--------

05/12/10	SHERATON AMSTERDAM AIRPORT, SCHIPHOL GOODS	435.00 **European Union Euro	589.24
----------	---	---------------------------------	--------

Please fold on the perforation below, detach and return with your payment

Do not staple or use paper clips

Payment Coupon

Account Number XXXX-XXXXX8-32000

Payment Due Date: 06/27/10

Continued on Page 3

To Pay by Computer, visit: americanexpress.com/pbo.

Enter account number on all documents. Make check payable to American Express.

Amount Due

See Finance Charges section on reverse side for a description of when additional Finance Charges are not assessed on Features.

Check here if address or phone number has changed. Note changes on reverse side.

SUSAN M BAER

1933

Mail Payment to:

AMERICAN EXPRESS
P.O. BOX 1270
NEWARK NJ 07101-1270

05578 ROSNS50C 01500 00102. (2)

(000)

Travel Arrangements for SUSAN M BAER

Record Locator: JERCFH
 Trip ID: 1190449253
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: GD
 Phone: ... / Fax: ...

Invoice Details

Ticket Information

Airline Code: 220 Ticket Date: 4/30/2010
 Ticket Number: 7888376607 Invoice: 0022198
 Check Digit: 2 Electronic: Yes

Charges

Ticket Base Fare: 544.00
 Ticket Tax Fare: 489.30
 Total (USD) Ticket Amount: 1,033.30

Ticket Information

Airline Code: 220 Ticket Date: 4/30/2010
 Ticket Number: 7888376611 Invoice: 0022200
 Check Digit: 8 Electronic: Yes

Charges

Ticket Base Fare: 998.00
 Ticket Tax Fare: 204.70
 Total (USD) Ticket Amount: 1,202.70

Billing Code: F7C23178XXX285A01XXX

Airfare charged to American Express

Billing Account: AX XXXXXXXXXXXX1002

Total: 2,234.00

Travel Details

Tuesday May 25, 2010

Flight Information

Airline: LUFTHANSA GERMAN AIRLINES Estimated time: 8 hours 0 minutes
 Flight: 413 Distance: 4,055 Miles
 Origin: Newark, NJ Meal Service: Meal service
 Destination: Munich, GERMANY Plane: Airbus A340-600
 Departing: 8:10 PM
 Arriving: 10:10 AM
 Departure Terminal: TERMINAL B
 Arriving on: May 26, 2010
 Arrival Terminal: TERMINAL 2
 Seat: 34D
 Class: Economy

Travel Details

Wednesday May 26, 2010

Flight Information

Airline: LUFTHANSA GERMAN AIRLINES Estimated time: 1 hour 5 minutes
 Flight: 1116 Distance: 228 Miles
 Origin: Munich, GERMANY Meal Service: Refreshment
 Destination: Leipzig, GERMANY Plane: Dh4
 Departing: 11:25 AM
 Arriving: 12:30 PM

*****IMPORTANT VISA/PASSPORT SERVICE INFORMATION*****

A VALID PASSPORT IS REQUIRED FOR ALL INTERNATIONAL DESTINATIONS. ADDITIONAL DOCUMENTATION SUCH AS A VISA MAY ALSO BE REQUIRED. SOME COUNTRIES REQUIRE YOUR PASSPORT BE VALID FOR 6 MONTHS BEYOND YOUR INTENDED STAY. ACCESS WWW.CIBT.COM FOR ALL INTERNATIONAL DOCUMENTATION REQUIREMENTS.

Travel Details

Wednesday September 22, 2010

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
CONTINENTAL AIR		SUSAN M BAER
LUFTHANSA GERMAN AIRLINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
2DQQWZ	LUFTHANSA GERMAN AIRLINES
DDCNL0	CONTINENTAL AIR

Additional Messages

PER OUR AGREEMENT WITH YOUR COMPANY AT TIME OF INVOICING YOU WILL BE CHARGED A NON REFUNDABLE SERVICE FEE FOR THE FOLLOWINGSERVICES 20.00 INTERNATIONAL SURCHARGE

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
CAR DECLINED
HOTEL DECLINED

.....INTERNATIONAL DOCUMENTATION.....

U.S. PASSPORT HOLDER..PASSPORT-YES..VISA-NO
YOUR PASSPORT SHOULD BE VALID FOR AT LEAST 6 MONTHS
PAST THE DATE OF YOUR RETURN FLIGHT.

NO CAR OR HOTEL REQUESTED

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID PASSPORT IS REQUIRED FOR ALL INTERNATIONAL
DESTINATIONS. ADDITIONAL DOCUMENTS SUCH AS A
VISA MAY ALSO BE REQUIRED. PLEASE CONTACT CIBT
FOR PASSPORT AND VISA ASSISTANCE AT 800-677-2428 AND
PROVIDE ID 43267. INFORMATION AVAILABLE ONLINE AT
WWW.CIBT.COM

PLEASE CHECK IN 2-3 HOURS PRIOR TO DEPARTURE
DEPENDING ON AIRLINE AND DESTINATION. CONTACT
AMERICAN EXPRESS FOR SPECIFIC CHECK-IN TIMES.

CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY Effective August 15, based on your Itinerary, you may be subject to the U.S. Transportation Security Administration's Secure Flight requirements to provide your name, date of birth and gender before the airline can issue your boarding pass.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1182; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

STEIGENBERGER
AIRPORT HOTEL
 FRANKFURT

Susan Baer
 (Ex. 1)
 U.S.A

INVOICE

Invoice No. 2282370 / Original

Date : 28.05.10

Guest : Susan Baer

Room No. : 236
 Arrival : 27.05.10
 Departure : 28.05.10
 Page : 1 of 1
 User ID : P014-ISEEWALD

Date	Description	Debit	Credit
27.05.10	Room Service Food - POS 19%	35,50	
	CHECK# 0073521		
27.05.10	Non Revenue - Paldouts / Tip F&B General	10,00	
	CHECK# 0028989		
27.05.10	Best Available Rate	159,00	
28.05.10	Breakfast 19%	28,00	
	CHECK# 0042303		
28.05.10	CC American Express manual		232,50

V.A.T. Detail	Net EUR	V.A.T. EUR	Gross EUR	Total	232,50	232,50
V.A.T. 19%	53,36	10,14	63,50	Balance	0,00	EUR
V.A.T. 07%	148,60	10,40	159,00			
Non Hotel Supplies	10,00		10,00			
Total	211,96	20,54	232,50			
Balance	211,96	20,54	232,50			

Steigenberger Airport Hotel Frankfurt · Unterschweinstiege 16 · 60549 Frankfurt am Main · Germany
 Telefon: +49 69 6975-0 · Telefax: +49 69 6975-2505 · info@airport-hotel.steigenberger.de · www.airport-hotel.steigenberger.de

Ein Betrieb der Steigenberger Hotels Aktiengesellschaft · Sitz der Gesellschaft: Frankfurt · HRB 25755 · Amtsgericht Frankfurt
 Vorsitzender des Aufsichtsrates: Dr. Ralf Corsten · Vorstand: Matthias Heck





Sheraton

Mrs. Susan Baer

(Ex. 1)

United States of America

Company Name :

Invoice : 587627

Room Number : 701

No of Person (s) : 1

Cashier No. : 21, Philipp Hassman

Page No. : 1 of 2

Arrival : 28-05-10

Departure : 30-05-10

Sheraton Amsterdam Airport, 30-05-10

Date	Description	Charges	Credits
28-05-10	Deposit Transferred at C/I		435.00
28-05-10	Room Charge	217.50	
28-05-10	City tax	11.41	
29-05-10	Voyager Restaurant Line# 701 : CHECK# 1589	48.59	
29-05-10	Room Charge	217.50	
29-05-10	City tax	11.41	
30-05-10	American Express		71.41
Balance			0.00

VAT %	Excl. VAT	VAT	Incl. VAT
VAT 0%	0.00	0.00	0.00
VAT 6%	445.99	26.76	472.75
VAT 19%	9.11	1.73	10.84
CITY TAX			22.82
Total in EUR			506.41

As a privileged A Starwood Preferred Guest member your SPG account 52001539752 will be credited with 380 StarPoints.

You can now check your balance at www.spg.com. We look forward to welcoming you back soon!

Thank you for visiting the Sheraton Amsterdam Airport Hotel & Conference Center. Only on STARWOODHOTELS.COM we offer the best rates, guaranteed! For your next reservation in our hotels book the Internet-only rates on STARWOODHOTELS.COM.

SHERATON AMSTERDAM AIRPORT HOTEL & CONFERENCE CENTER
Schiphol Boulevard 101
Schiphol Airport 1118 BG
The Netherlands

t +31 (0) 20 3164300
f +31 (0) 20 3164399

Sheraton.com/amsterdamair



Sheraton

Mrs. Susan Baer

(Ex. 1)

United States of America

Company Name :

Invoice : 587627

Room Number : 701

No of Person (s) : 1

Cashier No. : 21, Philipp Hassman

Page No. : 2 of 2

Arrival : 28-05-10

Departure : 30-05-10

Sheraton Amsterdam Airport, 30-05-10

Date	Description			Charges	Credits
Transaction ID	12063414	Credit Card #	XXXXXXXXXXXX2000	Amount	71.41 EURO
Approval Code	000047	Credit Card Expiry	XX/XX	EUR	
Approval Amt	71.41			Refund amount:	71.41 EUR
Capture Method	Manual			Tip	_____
				Total	_____
				Signature	_____
Transaction ID	12063414	Credit Card #	XXXXXXXXXXXX2000	Amount	435.00 EURO
Approval Code		Credit Card Expiry	XX/XX	EUR	
Approval Amt	435			Refund amount:	435 EUR
Capture Method	Manual			Tip	_____
				Total	_____
				Signature	_____

SHERATON AMSTERDAM AIRPORT HOTEL & CONFERENCE CENTER
Schiphol Boulevard 101
Schiphol Airport 1118 BG
The Netherlands

t— +31 (0) 20 3164300
f— +31 (0) 20 3164399

Sheraton.com/amsterdamair

MELIÁ WHITE HOUSE

Ms Susan Baer
 (Ex. 1)
 United States

Room No.: 613
 Arrival: 30/05/10
 Departure: 01/06/10
 Conf No.: 1960100
 Date: 01/06/10
 Invoice No: 128228
 Cashier No: 121
 Page No: 1 of 1

INVOICE

Date	Description	Debit	Credit
30/05/10	Telephone	12.00 ✓	
30/05/10	Accommodation & Breakfast	165.00 ✓	
31/05/10	Accommodation & Breakfast	165.00 ✓	
31/05/10	Accommodation VAT 17.5%	57.76 ✓	
01/06/10	American Express		399.76

	Net Amount GBP	VAT Amount GBP	Gross Amount GBP	Total GBP	
VAT 17.5%	340.21	59.55	399.76	399.76	399.76
				Balance GBP	0.00

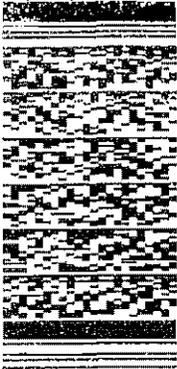
Guest Signature _____

Melia White House at Regents Park is the trading name of Lomondo Limited. Reg. in England No. 2793825 VAT Reg. No. 626 7830 20

220 7886376611 BUSINESS

009

etix etkt etix etkt



LUFTHANSA

BAER/SUSAN M

FRA LH 4680 J 28MAY
AMS

3D

LH 4680 /009

COP

Name of passenger

BAER/SUSAN M

ETKT 220 7886376611

FRA
AMS

LUFTHANSA

COP

Carrier Flight No./Class Date
LH 4680 J 28MAY

Gate Boarding time Seat
A36 1620 3D

NONSMOKER

Pos. Cl. Wt. Uncl. Wt. Rec. Cl. Wt. Cl. Wt.
01 / 19 (7)

BOARDING PASS

FLIGHT

KL1009 09.30

GATE

D41

CLASS

C

SEAT

02C

* CHECK MONITORS IF YOUR GATE NUMBER IS STILL UP TO DATE.
AFTER BOARDING CLOSURE TIME PASSENGERS WILL BE REFUSED.



NAME: BAER/SUSANM

FROM: AMSTERDAM/AMS

FREQUENT FLYER NO:

TO: LONDON/LHR

DATE: 30MAY10

SELF SERVICE C/I

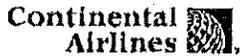
DEPARTURE TIME: 10.20

YOU ARE FLYING WITH: KLM ROYAL DUTCH AIRLINES

ETKT: 32207886376611

SECURITY NO: 147

NATIONALITY:



INTL Verify US Passport



NAME: BAER/SUSANM
DATE: TUE 01 JUN 2010
OnePass: ES965464

NAME: BAER/SUSANM
DATE: TUE 01 JUN 2010 133
OnePass: ES965464

Mileage: 3466 Miles
FLIGHT: CO 19 L

Mileage: 3466 Miles
FLIGHT: CO 19 L

GATE: 1C

SEAT: 31C

GATE: 1C

SEAT: 31C

CONFIRMATION: DDCNLO

DEPART: 6:30 PM

London-Heathrow

ARRIVE: 9:40 PM

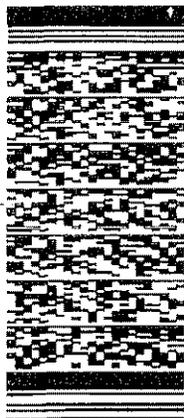
Newark-Liberty Intl

BOARD TIME: 5:45 PM



eTicket
BOARDING PASS

eTicket 22078863766072



220 7886376607 BUSINESS 100
 etix etkt etix etkt

LUFTHANSA * *
 BAER/SUSAN M * *
 EWR LH 413 I 25MAY *
 MUC * *

7A
 LH 413 /100
 COP

Name of passenger		API OK
BAER/SUSAN M		
ETKT 220 7886376607		
EWR		
MUC		
LUFTHANSA		COP

Carrier	Flight No./Class	Date
LH 413	I 25MAY	
Gate	Boarding time	Seat
B63	1940	7A
NONSMOKER		

Pcs Ck. Wt. Unck. Wt. Pos. Ck. Wt. Unck. Wt.
 01

220 7886376607 ECONOMY 026
 etix etkt etix etkt

LUFTHANSA * * * *
 BAER/SUSAN M * * * *
 MUC LH 1116 W 26MAY * * * *
 LEJ * * * *

6A
 LH 1116 /026
 COP OPERATED BY AUGSBURG AIRWAYS
 MAX 1 HANDGEPAECK/HANDLUGGAGE

Name of passenger		BAER/SUSAN M
ETKT 220 7886376607		
MUC		
LEJ		
LUFTHANSA		COP

Carrier	Flight No./Class	Date
LH 1116	W 26MAY	
Gate	Boarding time	Seat
G01	1055	6A
NONSMOKER		

Pcs Ck. Wt. Unck. Wt. Pos. Ck. Wt. Unck. Wt.
 01

220 7886376611 BUSINESS 070
 etix etkt etix etkt

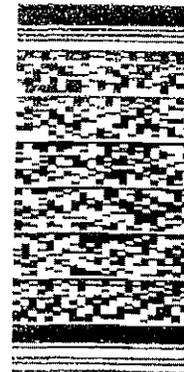
LUFTHANSA * *
 BAER/SUSAN M * *
 LEJ LH 1111 J 27MAY * *
 FRA * *

3C
 LH 1111 /070
 COP

Name of passenger		BAER/SUSAN M
ETKT 220 7886376611		
LEJ		
FRA		
LUFTHANSA		COP

Carrier	Flight No./Class	Date
LH 1111	J 27MAY	
Gate	Boarding time	Seat
024	1815	3C
NONSMOKER		

Pcs Ck. Wt. Unck. Wt. Pos. Ck. Wt. Unck. Wt.
 01



The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 164766

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 07/06/10 to 07/06/10

Title: Dir Aviation Org: 285
 Telephone: 212-435-3720 Dir/Comm: Y
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 or Business Clients: Y Travel Company Used: Y
 International: N
 Blanket Trip: N Conferences, Seminars, Training and
 Testing : N Trip Extension: N
 Outside TDO: N Type:

Purpose: PARTICIPATE IN THE SAFETY SUBCOMMITTEE MEETING-FUTURE AVIATION AVISTORY
 COMMITTEE

Purpose Dates: 07/06/10 to 07/06/10
 Business Destination: Chicago IL USA
 Ticket Destination: Chicago IL USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	500	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	100
Travel Sub-Total	500	Other Sub-Total	100
		Total Exp	600

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds
 for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer Date: 6/11/10 Submitted: _____

Approver's Signature: [Signature] Date: 6/21/10 Emp# 19624 Title: COO

Travel Arrangements for SUSAN BAER

Record Locator: 6ZJZAG
 Trip ID: 11329503452
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003

Agent ID: PG
 Phone: / Fax:

Invoice Details

Ticket Information

Airline Code: 016 Ticket Date: 6/28/2010
 Ticket Number: 7901087493 Invoice: 0037230
 Check Digit: 6 Electronic: Yes
 Billing Code: F7C23178XXX285A01XXX

Charges

Ticket Base Fare: 260.46
 Ticket Tax Fare: 40.94
 Total (USD) Ticket Amount: 301.40

Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total: 301.40

Travel Details

Tuesday July 6, 2010

Flight Information

Airline: UNITED AIRLINES Estimated time: 2 hours 37 minutes
 Flight: 681 Distance: 733 Miles
 Origin: New York Lga, NY Meal Service: No Meal Service
 Destination: Chicago O'Hare, IL Plane: Airbus A320
 Departing: 9:00 AM
 Arriving: 10:37 AM
 Departure Terminal: CENTRAL TERMINAL
 Arrival Terminal: TERMINAL 1
 Seat: 26B
 Class: Standard

Flight Information

Airline: UNITED AIRLINES Estimated time: 2 hours 19 minutes
 Flight: 7888 Distance: 733 Miles
 OPERATED BY /UNITED EXPRESS/SHUTTLE AMERICA
 Origin: Chicago O'Hare, IL Meal Service: No Meal Service
 Destination: New York Lga, NY Plane: E70
 Departing: 7:00 PM
 Arriving: 10:19 PM
 Departure Terminal: TERMINAL 1; CHECK-IN WITH UNITED AIRLINES TERM 1
 Arrival Terminal: CENTRAL TERMINAL
 Seat: 13D
 Class: Standard

Travel Details

Wednesday November 3, 2010

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
UNITED AIRLINES		SUSAN BAER

Airline Record Locators

Airline Reference	Carrier
MZ6081	UNITED AIRLINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 338-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.

CONTACT THE ABOVE NUMBER FOR COMPLETE

TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,

NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,

SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON

SAME CARRIER

ADVISORY Effective August 15, based on your itinerary, you may be subject to the U.S. Transportation Security Administrations Secure Flight requirements to provide your name, date of birth and gender before the airline can issue your boarding pass.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

DATE	CLERK
AUTHORIZATION	SERVER
REFERENCE NO.	

RETAIN FOR YOUR RECORDS

QTY.	DESCRIPTION	AMOUNT
SALES SLIP	TAX	
	TIP MSC.	
TOTAL		

CUSTOMER COPY

PURCHASER SIGN HERE

X *[Signature]*
 Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer.

8132

DATE	CLERK
AUTHORIZATION	SERVER
REFERENCE NO.	

RETAIN FOR YOUR RECORDS

5996055

QTY.	DESCRIPTION	AMOUNT
SALES SLIP	TAX	
	TIP MSC.	
TOTAL		

CUSTOMER COPY

PURCHASER SIGN HERE

X *[Signature]*
 Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer.

UNITED

BAER/SUSAN

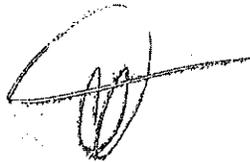
BOARDING PASS
CO ES965464

UA 661 JUL 6
FROM NYC/LAGUARDIA
TO CHICAGO/OHARE

GATE C9
BOARDS AT 8:30 AM

SEAT **26B**

CONFIRMATION NBR MZ6081
016 7901087493 CPN 1
ISSUED BY RLGRWDS AT 000000 LGACC



SEATING

3



ETKT

BAER/SUSAN

CO ES965464

UA 661 JUL 6
FROM NYC/LAGUARDIA
TO CHICAGO/OHARE

GATE C9
DEPARTS AT 9:00 AM

GIVE FEEDBACK - WWW.UALSURVEY.COM

SEAT **26B**

Y-CABIN
016 7901087493 CPN 1



UNITED

BAER/SUSAN

BOARDING PASS
CO ES965464

UA 836 JUL 6
FROM CHICAGO/OHARE
TO NYC/LAGUARDIA

GATE B11
BOARDS AT 5:35 PM

SEAT **27A**

CONFIRMATION NBR MZ6081
016 7901087493 CPN 2
ISSUED BY RORDCB9 AT 000000 GRACS

SEATING

2



ETKT

BAER/SUSAN

CO ES965464

UA 836 JUL 6
FROM CHICAGO/OHARE
TO NYC/LAGUARDIA

GATE B11
DEPARTS AT 6:05 PM

GIVE FEEDBACK - WWW.UALSURVEY.COM

SEAT **27A**

Y-CABIN
016 7901087493 CPN 2



UNITED

6JUL10 ORD1

AGENT ID: RORDCB9

CUSTOMER: BAER/SM

TKT NBR: 016 7901087493

NUMBER OF ITEMS PURCHASED: 01

ITINERARY:UA 0836 V 06JUL ORD LGA

CUSTOMER RECEIPT

016 4067905714

ITEMS: CONFIRMED ITINERARY CHANGE WITHIN THREE HOURS

FORM OF PAYMENT: AXXXXXXXXXXXX2000

PRICE USD75.00

TAX1 USD0.00

TAX2

TOTAL USD75.00

CRI DOCUMENT NUMBER CK

016 4067905714 6



The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 164678

Employee Number: P23178

Trip Period from: 07/08/10 to 07/08/10

Name: Susan M Baer

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: N Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing: Y Trip Extension: N
 Outside TDO: N Type:

Purpose: Participate in a roundtable discussion on small airports

Sponsor: ACI

Purpose Dates: 07/08/10 to 07/08/10

Business Destination: Minneapolis MN USA

Ticket Destination: Minneapolis MN USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	925	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	75
Travel Sub-Total	925	Other Sub-Total	75
		Total Exp	1,000

#Signature below implies approval of 2 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
 Signature 

Date: 6-7-10 Submitted: _____

Approver's
 Signature 

Date: 6/15/10 Emp# 19624 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator: 0ALGUK
 Trip ID: 11460995809
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: CD
 Phone: / Fax:

Invoice Details

Ticket Information

Airline Code: 006 Ticket Date: 6/28/2010
 Ticket Number: 7901520254 Invoice: 0037240
 Check Digit: 1 Electronic: Yes
 Billing Code: F7C23178XXX285A01XXX

Charges

Ticket Base Fare: 793.56
 Ticket Tax Fare: 80.92
 Total (USD) Ticket Amount: 874.48

Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total: 874.48

Travel Details

Thursday July 8, 2010

Flight Information

Airline: DELTA AIR LINES Estimated time: 3 hours 2 minutes
 Flight: 2719 Distance: 1,020 Miles
 Origin: New York Lga, NY Meal Service: Cont breakfast
 Destination: Minneapolis St Pl, MN Plane: McDonnell DOUGLAS 87
 Departing: 6:05 AM
 Arriving: 8:07 AM
 Departure Terminal: DELTA TERMINAL
 Arrival Terminal: TERMINAL 1 - LINDBERGH
 Seat: 11C
 Class: Coach

CAR NOT NEEDED OR REQUESTED

Flight Information

Airline: DELTA AIR LINES Estimated time: 2 hours 55 minutes
 Flight: 2292 Distance: 1,020 Miles
 Origin: Minneapolis St Pl, MN Meal Service: Cont breakfast
 Destination: New York Lga, NY Plane: Airbus A320
 Departing: 3:35 PM
 Arriving: 7:30 PM
 Departure Terminal: TERMINAL 1 - LINDBERGH
 Arrival Terminal: DELTA TERMINAL
 Seat: 23B
 Class: Coach

Travel Details

Tuesday May 24, 2011

THANK YOU FOR CALLING AMERICAN EXPRESS BUSINESS TRAVEL.

Airline Record Locators

Airline Reference	Carrier
CMHLGO	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844
FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3067. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.
TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY Effective August 15, based on your Itinerary, you may be subject to the U.S. Transportation Security Administrations Secure Flight requirements to provide your name, date of birth and gender before the airline can issue your boarding pass.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7898. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 164765

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 07/13/10 to 07/14/10

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: Y Conferences, Seminars, Training and Testing: N Trip Extension: N
Outside TDO: N Type:

Purpose: PARTICIPATE IN THE FUTURE AVIATION ADVISORY COMMITTEE

Sponsor: FAA

Purpose Dates: 07/13/10 to 07/14/10
Business Destination: Atlanta GA USA
Ticket Destination: Atlanta GA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	800	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	400
Rail	0	Other	150
Travel Sub-Total	800	Other Sub-Total	550
		Total Exp	1,350

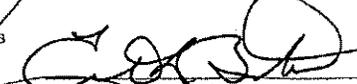
MULTIPLE EMPLOYEE LISTING

<u>Auth. Number</u>	<u>Employee ID</u>	<u>Org</u>	<u>Employee Name</u>
	P40474	285	Patricia A Clark

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature:  Date: 6/28/10 Submitted: _____

Approver's Signature:  Date: 6/30/10 Emp# 19624 Title: CDO

 7/1/10 20058 CFO

Travel Arrangements for SUSAN BAER

Record Locator GUIFQY
 Trip ID 11018707514
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: EH
 Phone: / Fax:

Itinerary Details

Itinerary Only

ROUND-TRIP NONREFUNDABLE FARE,.....229.40

Travel Details

Wednesday July 14, 2010

Flight Information

Airline	DELTA AIR LINES	Estimated time	2 hours 31 minutes
Flight	415	Distance	761 Miles
Origin	New York Lga, NY	Meal Service	Cont breakfast
Destination	Atlanta, GA	Plane	Boeing 757
Departing	6:00 AM		
Arriving	8:31 AM		
Departure Terminal	DELTA TERMINAL		
Arrival Terminal	SOUTH TERMINAL		
Seat	38C		
Class	Economy		

Flight Information

Airline	DELTA AIR LINES	Estimated time	2 hours 28 minutes
Flight	2385	Distance	761 Miles
Origin	Atlanta, GA	Meal Service	Cont breakfast
Destination	New York Lga, NY	Plane	Boeing 757
Departing	4:40 PM		
Arriving	7:08 PM		
Departure Terminal	SOUTH TERMINAL		
Arrival Terminal	DELTA TERMINAL		
Seat	37F		
Class	Economy		

Travel Details

Thursday November 11, 2010

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Airline Record Locators

Airline Reference	Carrier
26HPYN	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844
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CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

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COLLECT 338-291-0104, CODE S-9LVA
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CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
FARE IS NOT GUARANTEED UNTIL TICKETED.
CONTACT THE ABOVE NUMBER FOR COMPLETE
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For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 164883

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 07/28/10 to 07/30/10

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y
 Blanket Trip: N Conferences, Seminars, Training and
 Outside TDO: N Testing: N

Org: 285
 Dir/Comm: Y
 Travel Company Used: Y
 Trip Extension: N
 Type: N

Purpose: Participate in the US Travel Summer Board of Directors Meeting

Sponsor: US Travel

Purpose Dates: 07/28/10 to 07/30/10
 Business Destination: Boston MA USA
 Ticket Destination: Boston MA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	500	Meals	105
Auto	0	Registration	0
Bus	0	Lodging	500
Rail	0	Other	150
Travel Sub-Total	500	Other Sub-Total	755
		Total Exp	1,255

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: *Susan M Baer* Date: 4/22/10 Submitted: _____

Approver's Signature: *[Signature]* Date: 6/30/10 Emp# 12024 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator: 00000000
 Trip ID: 111100000000
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: LJ
 Phone: ... / Fax: ...

Invoice Details

Ticket Information

Airline Code: 008 Ticket Date: 7/27/2010
 Ticket Number: 7908395606 Invoice: 0043790
 Check Digit: 2 Electronic: Yes
 Billing Code: F7C23178XXXX285A01XXX

Charges

Ticket Base Fare: 220.00
 Ticket Tax Fare: 0.00
 Total (USD) Ticket Amount: 220.00
 Current Fare: 357.40
 Prior ticket 0087904920709 credit: -287.40
 Exchange Fee: 150.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total: 220.00

ROUND-TRIP NONREFUNDABLE FARE IS ...287.40
 TICKET EXCHANGE TOTAL,.....220.00

Travel Details

Wednesday July 28, 2010

Flight Information

Airline: DELTA AIR LINES
 Flight: 1388
 Origin: New York Lga, NY
 Destination: Boston, MA
 Departing: 2:30 PM
 Arriving: 3:40 PM
 Departure Terminal: TERMINAL B
 Arrival Terminal: TERMINAL A
 Seat: Unassigned
 Class: Coach

Estimated time: 1 hour 10 minutes
 Distance: 185 Miles
 Meal Service: No Meal Service
 Plane: Airbus A319

Travel Details

Thursday July 29, 2010

Flight Information

Airline: DELTA AIR LINES
 Flight: 1391
 Origin: Boston, MA
 Destination: New York Lga, NY
 Departing: 3:30 PM
 Arriving: 4:39 PM

Estimated time: 1 hour 9 minutes
 Distance: 185 Miles
 Meal Service: No Meal Service
 Plane: Airbus A319

Departure Terminal	TERMINAL A
Arrival Terminal	TERMINAL B
Seat	Unassigned
Class	Coach

Travel Details

Tuesday, November 25, 2014

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Airline Record Locators

Airline Reference	Carrier
QNCQEQ	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

INTERCONTINENTAL
BOSTON

07-29-10

Susan Baer (Ex. 1) US	Folio No. : A/R Number : Group Code : EF7 Company : U.S. Travel Association Membership No. : Invoice No. :	Cashier No. : 58 	Room No. : 1016 Arrival : 07-28-10 Departure : 07-29-10 Conf. No. : 60679064 Rate Code : Page No. : 1 of 1
---	---	---	--

Date	Description	Charges	Credits
07-28-10	*Accommodation	205.00	
07-28-10	State Tax-5.7%	11.69	
07-28-10	Local Tax-6%	12.30	
07-28-10	Convention Center Tax -2.75%	5.64	
Total		234.63	0.00
Balance		234.63	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon, I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Thank you for staying at the InterContinental Boston.

For any post stay inquiries please email our Instant Service Department at icbostonbilling@ihg.com.

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 165345

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 08/24/10 to 08/25/10

Title: Dir Aviation Org: 285
 Telephone: 212-435-3720 Dir/Comm: Y
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Trip Extension: N
 Outside TDO: N Testing : N Type:

Purpose: Participate in the second sub committee safety meeting and FAAC Meeting

Sponsor: FAAC

Purpose Dates: 08/24/10 to 08/25/10
 Business Destination: Chicago IL USA
 Ticket Destination: Chicago IL USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	1,000	Meals	200
Auto	0	Registration	0
Bus	0	Lodging	400
Rail	0	Other	150
Travel Sub-Total	1,000	Other Sub-Total	750
		Total Exp	1,750

MULTIPLE EMPLOYEE LISTING

<u>Auth. Number</u>	<u>Employee ID</u>	<u>Org</u>	<u>Employee Name</u>
	P40474	285	Patricia A Clark

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Employee's Signature: Susan M Baer Date: 8/25/10 Submitted: _____

Approver's Signature: [Signature] Date: 8/19/10 Emp# 19624 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator F010JMM
 Trip ID 10927773998
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR.
 NEW YORK, NY 10003

Agent ID: PG
 Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 016 Ticket Date 8/16/2010
 Ticket Number 7913370852 Invoice 0048790
 Check Digit 8 Electronic Yes
 Billing Code F7C23178XXX285A01XXX

Charges

Ticket Base Fare 184.18
 Ticket Tax Fare 35.22
 Total (USD) Ticket Amount 219.40

Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 219.40

Travel Details

Tuesday August 24, 2010

Flight Information

Airline	UNITED AIRLINES	Estimated time	2 hours 24 minutes
Flight	669	Distance	733 Miles
Origin	New York Lga, NY	Meal Service	No Meal Service
Destination	Chicago O'Hare, IL	Plane	Airbus A319
Departing	6:00 AM		
Arriving	7:24 AM		
Arrival Terminal	TERMINAL 1		
Seat	22C		
Class	Economy		

Travel Details

Wednesday August 25, 2010

Flight Information

Airline	UNITED AIRLINES	Estimated time	2 hours 8 minutes
Flight	838	Distance	733 Miles
Origin	Chicago O'Hare, IL	Meal Service	No Meal Service
Destination	New York Lga, NY	Plane	Airbus A319
Departing	6:06 PM		
Arriving	9:13 PM		
Departure Terminal	TERMINAL 1		
Seat	AIRPORT CHECK IN		
Class	Economy		

Travel Details

Wednesday December 22, 2010

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
UNITED AIRLINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
M3PBR4	UNITED AIRLINES

Additional Messages

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Breakfast

TUSCANY CAFE 77

77 West Wacker Drive
Chicago, Illinois
Tel: 312-252-0863
Check: 749189

Server: am cashier Date: 08/24/2010
Table: 501 Time: 07:55
Guests: 1

1 Small Coffee 1.25
1 Bagel 1.25

SUB-TOT: 2.50
 : 0.28

TOTAL: 2.78

CASH : 5.00
CHANGE: 2.22

Come in after work and try our new
\$2 Bar Bites!
Looking for something to go?
Build your own 16" pizza!

Taxi Affiliation Services, LLC
2230 South Michigan
Chicago, Illinois 60616
www.yellowcabchicago.com

*taxi to united
from airport*

\$ 37.95 Time Date

Received from:

45.95

Cab fare from:

To:

Driver:

Cab #:

Account #:

*Thank you for
riding with us!*



312-243-2537

312-829-4222

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 165523

Employee Number: P23178 Trip Period from: 09/16/10 to 09/16/10
Name: Susan M Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Trip Extension: N
Outside TDO: N Testing: N Type:

Purpose: Participate in several meeting with FAA officials

Purpose Dates: 09/16/10 to 09/16/10
Business Destination: Washington DC USA
Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	0	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	500	Other	0
Travel Sub-Total	500	Other Sub-Total	0
		Total Exp	500

UCY 508318

MULTIPLE EMPLOYEE LISTING

Auth. Number	Employee ID	Org	Employee Name
	P35292	285	Ralph Tragale

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date:

8/23/10

Submitted: _____

Approver's
Signature

Susan M Baer

Date:

8/23/10

Emp# _____

Title: _____

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-672-3067. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE, CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts or omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7898. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800489894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

AMTRAK
 Name of Passenger
 BAER/SUSAN M

From
 NEWARK PENN STA, NJ
 To
 WASHINGTON, DC
 2V 183 16SEP10
 YB RESERVD COACH
 Ticket Number: 32426069327 01 of 01
 Date of Issue: AUG 10 CA47B
 PASSENGER RECEIPT

AMTRAK
 Name of Passenger
 BAER/SUSAN M

From
 WASHINGTON, DC
 To
 NEWARK PENN STA, NJ
 2V 196 16SEP10
 YB RESERVD COACH
 Ticket Number: 32426069335 01 of 01
 Date of Issue: 1 AUG 10 CA47B
 PASSENGER RECEIPT

PLAZA STATION
 Register 3 Sequence 1506
 Credit Card Purchase
 Account XXXXXXXXXXXXX8 132
 BAER/SUSAN M
 From 06:55 September 16, 2010
 To 20:31 September 16, 2010
 Elapsed time: day(s),
 13 hour(s), 36 minute(s)
 For \$25.00
 Thank you

 **Taxi Cab Receipt**
 DATE: 9/16 TIME: _____
 ORIGIN Union Station CAB # _____
 DESTINATION: Rayburn Building
 8.20+
 FARE: \$ 1.50 tip SIGNATURE _____
 10.00

TAXICAB RECEIPT

 Time: 9/16
 Date: _____
 Origin of trip: FAA Headquarters
 Destination: Union Station
 Fare: 8.50 tip
 10.00 Sign: _____

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 165658

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 09/23/10 to 09/23/10

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing : N Trip Extension: N
 Outside TDO: N Type:

Purpose: Participate in the NAC Meeting

Sponsor: RTCA

Purpose Dates: 09/23/10 to 09/23/10
 Business Destination: Flushing NY USA
 Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	550	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	50
Travel Sub-Total	550	Other Sub-Total	50
		Total Exp	600

MULTIPLE EMPLOYEE LISTING

<u>Auth. Number</u>	<u>Employee ID</u>	<u>Org</u>	<u>Employee Name</u>
	P40474	285	Patricia A Clark

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: _____ Submitted: _____

Approver's Signature: [Signature] Date: 8/31/10 Emp# 19624 Title: COO

DELTA
BAER/SUSANM

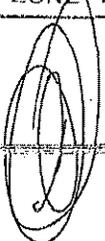
1 006 7918100142 0
GQV16D

Q7SHLGA

FLIGHT DATE CLASS ORIGIN DEPARTS
DL5901 23SEP Q NYC-LAGUARDIA 630A
OPERATED BY SHUTTLE AMERICA COACH DESTINATION BRD TIME
WAS-R REAGAN NA 550A

SEAT
Y
ZONE 2

DEPARTURE GATE SH5 **SUBJECT TO CHANGE**



DELTA

BOARDING PASS

BAER/SUSANM

2 006 7918100142 3
GQVJ6D

Q7SHLGA
FLIGHT DATE CLASS ORIGIN DEPARTS
DL5920 23SEP Q WAS-R REAGAN NA 330P
OPERATED BY SHUTTLE AMERICA COACH DESTINATION BRD TIME
NYC-LAGUARDIA 250P

SEAT
Y
ZONE 2

DEPARTURE GATE 20 **SUBJECT TO CHANGE**



BOARDING PASS

BAER/SUSANM

FLIGHT DATE
DL5920 23SEP

ORIGIN
WAS-R REAGAN NA
DESTINATION
NYC-LAGUARDIA
OPERATED BY SHUTTLE AMERICA
A DELTA CONNECTION CARRIER

SEAT
Y
ZONE 2



tip - 1.75 =

HIWAY CAB \$10.00

TAXI # 111
98827

05/23/13 11:35a

05/23/13 11:46a

TRIP # 2368

DIST. 1.87 mi

Rate 1 \$ 6.75

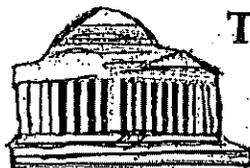
EXTRAS \$ 1.50

TOTAL \$ 8.25

COMPLAINTS CALL

800-645-6018

05/23/13



TAXICAB RECEIPT

Time: 9/23

Date:

Origin of trip: Capital Hilton

Destination: DCA - Reagan Airport

Fare: \$19.00

Sign:

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 166013

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 10/06/10 to 10/08/10

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y
 Blanket Trip: N Conferences, Seminars, Training and
 Outside TDO: N Testing : N
 Org: 285
 Dir/Comm: Y
 Travel Company Used: Y
 Trip Extension: N
 Type:

Purpose: PARTICIPATE IN THE IAWA (INTERNATIONAL AVIATION WOMENS ASSOCIATION) BOARD MEETING

Sponsor: IAWA

Purpose Dates: 10/06/10 to 10/08/10

Business Destination: Boston MA USA

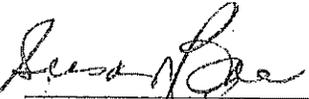
Ticket Destination: Boston MA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	700	Meals	300
Auto	0	Registration	0
Bus	0	Lodging	1,000
Rail	0	Other	125
Travel Sub-Total	700	Other Sub-Total	1,425
		Total Exp	2,125

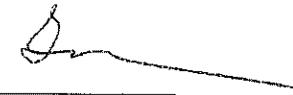
#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
 Signature 

Date: 10/5/10 Submitted: _____

Approver's
 Signature 

Date: 10/5/10 Emp# 40810 Title: 

Travel Arrangements for SUSAN M BAER

Record Locator: **ETPDEY**
 Trip ID: **10715020588**
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10008

Agent ID: **A0**
 Phone: / Fax:

Invoice Details

Ticket Information

Airline Code: **006** Ticket Date: **10/5/2010**
 Ticket Number: **7926965079** Invoice: **0083219**
 Check Digit: **3** Electronic: **Yes**
 Billing Code: **F7C23178XXX285A01XXX**

Charges

Ticket Base Fare: **490.98**
 Ticket Tax Fare: **68.22**
 Total (USD) Ticket Amount: **549.20**

Airfare charged to American Express
 Billing Account: **AX XXXXXXXXXXXX1002**

Total: **549.20**

Travel Details

Wednesday October 6, 2010

FARE IS 549.20

Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 6 minutes
Flight	1386	Distance	185 Miles
Origin	New York Lga, NY	Meal Service	No Meal Service
Destination	Boston, MA	Plane	Airbus A319
Departing	2:30 PM		
Arriving	3:36 PM		

Departure Terminal: **TERMINAL A**
 Arrival Terminal: **TERMINAL A**
 Seat: **AIRPORT CHECK IN**
 Class: **Coach**

Travel Details

Friday October 8, 2010

Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 13 minutes
Flight	1393	Distance	185 Miles
Origin	Boston, MA	Meal Service	No Meal Service
Destination	New York Lga, NY	Plane	Airbus A319
Departing	4:30 PM		
Arriving	6:43 PM		

Departure Terminal: **TERMINAL A**
 Arrival Terminal: **TERMINAL A**
 Seat: **AIRPORT CHECK IN**
 Class: **Coach**

Travel Details

Thursday February 3, 2011

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Airline Record Locators

Airline Reference	Carrier
GWZJ4Y	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

~~PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR~~
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.
TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800489694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Boarding Pass printed from delta.com

DELTA

BOARDING PASS

BAER/SUSANM

1 006 7925955079 6
GWZJ4Y

YSHLGA/APA8

FLIGHT DATE CLASS ORIGIN
DL 1386 06OCT Y NYC-LAGUARDIA
OPERATED BY COACH
DELTA SHUTTLE DESTINATION
BOSTON

DEPARTS
230P
BRD TIME ZONE 2
150P

SEAT
Y

DEPARTURE GATE SEE AIRPORT MONITORS

Marine Air Terminal

SEQ NO
001



LGA0E1232/WW

DELTA
BAER/SUSANM

BOARDING PASS

2 006 7925955079 2
GWZJ4Y

YSHLGA/APA8

FLIGHT DATE CLASS ORIGIN
DL 1391 08OCT Y BOSTON
OPERATED BY COACH
DELTA SHUTTLE DESTINATION
NYC-LAGUARDIA

DEPARTS
330P
BRD TIME
250P

SEAT
Y
ZONE 2

DEPARTURE GATE A3 **SUBJECT TO CHANGE**

SEQ NO
038



BOS17C424/KI

BOARDING PASS

BAER/SUSANM

FLIGHT DATE
DL 1391 08OCT
ORIGIN
BOSTON

DESTINATION
NYC-LAGUARDIA
OPERATED BY DELTA SHUTTLE

SEAT
Y
ZONE 2

SEQ NO
038

PASSAGE
HACK#: 00007023
CAB#: 1816
DATE: 10/ 8/2010
ST. TIME: 14:00
END TIME: 14:11
TRIP#: 7411
DIST : 4.50 MI
FARE : \$ 15.80
EXTRA : \$ 2.75
TIP : \$
GR. TOT: \$ 22.27
CARDNUMBER: 5693
AUTH#: 10495P
HACKNEY CARRIAGE
(617) 536-TAXI.
EMAIL: TAXI.BPD@
CITYOFBOSTON.GOV

10/06/10 TR 8:00
START END MIL
84:29 84:47 4
Fare: \$ 22.80
Extra: \$ 7.50
Toll: \$ 0.00
Sprch: \$ 0.00
Tip: \$ 7.55
TOTAL: \$ 37.85

Card: 8132
AUTH: 712583

JTLINE
3-TAXI
TAXI.BPD@
X C W2



Boston

Baer, Susan
US
Email: (Ex. 1)

Information invoice (no tax-relevant document)

Page 1 of 1

Inhouse guests: Baer, Susan

Room No./Type:	1605	C1K->B1K	Cashier ID:	Praveen Khare
Rate/Code:	275.00	GCXAVIAT	Pax:	1
Nationality:	United_States		Res ID:	17918277
Arrival:	10/8/2010		Time:	4:52:00PM
Departure:	10/8/2010		Time:	12:00:00PM
Invoice printed:	10/8/2010		Time:	11:25:59AM
Taj Inncircle:			Invoice ID:	17918825

Booked by: Baer, Susan

Billing Instruction:

Date	Description	Remarks/Transfer Info	Amount
10/6/2010	Room Charge		275.00 USD
10/6/2010	Room Occupancy Tax - City 6%		16.50 USD
10/6/2010	Room Occupancy Tax - ConvCenter		7.56 USD
10/6/2010	Room Occupancy Tax - State 5.70%		15.68 USD
10/7/2010	Room Charge		275.00 USD
10/7/2010	Room Occupancy Tax - ConvCenter		7.56 USD
10/7/2010	Room Occupancy Tax - State 6.70%		15.68 USD
10/7/2010	Room Occupancy Tax - City 6%		16.50 USD
Gross			629.48 USD
Total to pay			629.48 USD

Cardholder signature: _____

Taj Hotels Resorts and Palaces

15 Arlington Street, Boston, Massachusetts 02116, U.S.A. Tel: 617-536-5700. Fax: 617-536-1335. www.tajhotels.com

A member of *The Leading Hotels of the World*

INTERNATIONAL AVIATION WORKERS ASSOCIATION

22nd Annual IAWA Conference

Wednesday, October 06, 2010 8:00 AM - Friday, October 08, 2010 4:00 PM (Eastern Time)

The Taj Boston Hotel
 15 Arlington Street
 Boston, Massachusetts 02116
 United States
 (877) 482-5267

Event Details

Phone: 410-571-1990, Email: info@iawa.org

**Please note, that hotel accommodations must be reserved directly with the hotel
 Please read the information on the IAWA website regarding conference rooms and rates.**

Personal Information



Registration ID: 26055365

Registrant: Ms. Susan M. Baer
 Director, Aviation Department
 Port Authority of New York & New Jersey
 225 Park Avenue South
 9th Floor
 New York, NY 10003
 United States

Registration Date: 7/16/2010 11:41 AM

Type: IAWA Member

Status: Confirmed

Work Phone: 212 435 3720

Email: sbaer@panynj.gov

Name as it would appear on a badge: Sue Baer

Contact Name: Debbie D'Amico

Contact Phone: 212 435 3706

Contact Email: ddamico@panynj.gov

Conference Fees

Conference Fee (IAWA Member) (Details)

Fee Summary

Fee	Quantity	Unit Price	Amount
Conference Fee (IAWA Member)	1	\$0.00	\$0.00
Total:			\$0.00
By using a discount code, you have saved: \$595.00.			

Payment Information

Payment Method: Not Applicable

Refund Information

Note: A service charge of \$75.00 will be due on cancellations after September 22, 2010!

22nd Annual IAWA Conference - 2010

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 165755

Employee Number: P23178 Trip Period from: 10/14/10 to 10/15/10
Name: Susan M Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Trip Extension: N
Outside TDO: N Testing: N Type:

Purpose: PARTICIPATE IN THE FAAC SAFETY SUBCOMMITTEE MEETING

Sponsor: FAAC

Purpose Dates: 10/14/10 to 10/15/10
Business Destination: Denver CO USA
Ticket Destination: Denver CO USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	600	Meals	70
Auto	0	Registration	0
Bus	0	Lodging	300
Rail	0	Other	80
Travel Sub-Total	600	Other Sub-Total	450
		Total Exp	1,050

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: 9/14/10 Submitted: _____

Approver's Signature: [Signature] Date: 9/15/10 Emp# 19624 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator: 1111111111
 Trip ID: 11053809288
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: D6
 Phone: / Fax: ..

Invoice Details

Ticket Information

Airline Code: 018 Ticket Date: 9/21/2010
 Ticket Number: 7922427204 Invoice: 0059247
 Check Digit: 0 Electronic: Yes
 Billing Code: F7C23178XXXX285A01XXX

Charges

Ticket Base Fare: 286.61
 Ticket Tax Fare: 42.89
 Total (USD) Ticket Amount: 329.40

Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total: 329.40

Travel Details

Thursday October 14, 2010

THE FARE FOR THIS ITINERARY IS 329.40 NONREFUNDABLE. THIS IS THE LOWEST FARE AVAILABLE ON NON-STOP FLIGHTS.

Flight Information

Airline: UNITED AIRLINES Estimated time: 4 hours 25 minutes
 Flight: 409 Distance: 1,619 Miles
 Origin: New York Lga, NY Meal Service: Food for purchase
 Destination: Denver, CO Plane: Boeing 757-200
 Departing: 6:46 PM
 Arriving: 8:11 PM
 Departure Terminal: TERMINAL B
 Seat: 22A
 Class: Standard

Travel Details

Friday October 15, 2010

Flight Information

Airline: UNITED AIRLINES Estimated time: 3 hours 39 minutes
 Flight: 406 Distance: 1,619 Miles
 Origin: Denver, CO Meal Service: Food for purchase
 Destination: New York Lga, NY Plane: Boeing 757-200
 Departing: 4:20 PM
 Arriving: 9:59 PM
 Arrival Terminal: TERMINAL B
 Seat: 22A
 Class: Economy

Travel Details

Friday February 11, 2011

Loyalty Programs

Vendor	Account	Traveler
UNITED AIRLINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
QMS2T4	UNITED AIRLINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844
 FOR EMERGENCIES -ONLY- AFTER HOURS PLEASE

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 336-291-0104, CODE S-9LVA
 NO CAR OR HOTEL REQUESTED
 PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
 WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
 A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
 PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
 CONTACT THE ABOVE NUMBER FOR COMPLETE
 TICKET RESTRICTIONS.
 TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
 NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
 SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
 SAME CARRIER

ADVISORY TSA requires all reservations with any US cily segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The ~~maximum amount of reimbursement is \$15,000 per person per year for the total amount of travel services purchased from the seller of travel, not to exceed \$15,000.~~ A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600489694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

UNITED ECONOMY PLUS

BAER/SUSANM

BOARDING PASS
CO E6965464

UA 409 OCT 14
FROM NYC/LAGUARDIA
TO DENVER

GATE C14
BOARDS AT 5:16 PM

SEAT **14F**

CONFIRMATION NBR QMS2T4
016 7922427204 CPN 1
ISSUED BY U175573 AT 410F88 LQAGS


SEATING
2



ETKT

BAER/SUSANM

CO E6965464

UA 409 OCT 14
FROM NYC/LAGUARDIA
TO DENVER

GATE C14
DEPARTS AT 5:46 PM

GIVE FEEDBACK - WWW.UALSURVEY.COM

SEAT **14F**

Y-CABIN 
016 7922427204 CPN-1

UNITED

BAER/SUSANM

BOARDING PASS
CO ES965464

UA 406 OCT 15
FROM DENVER
TO NYC/LAGUARDIA

BOARDS AT 3:50 PM

SEAT **22A**

CONFIRMATION NBR QMS2T4
016 7922427204 CPN 2
ISSUED BY R0ENLP3 AT 000000 DENCS

SEATING
2



ETKT

BAER/SUSANM

CO ES965464

UA 406 OCT 15
FROM DENVER
TO NYC/LAGUARDIA

DEPARTS AT 4:20 PM

GIVE FEEDBACK - WWW.UALSURVEY.COM

SEAT **22A**

Y-CABIN 
016 7922427204 CPN-2



EMBASSY SUITES
HOTELS®

7001 Yampa Street • Denver, CO 80249
Phone (303) 574-3000 • Fax (303) 574-9118
For reservations across the nation
www.embassysuites.com or 1-800-EMBASSY

Name & Address

BAER, SUSAN
(Ex. 1)

Suite 422/KNGN
Arrival Date 10/14/2010 8:56:00PM
Departure Date 10/15/2010

Adult/Child 1/0
Suite Rate \$219.95

RATE PLAN LV4
HH#
AL
BONUS AL CAR

Confirmation: 87243840

10/15/2010 PAGE 1

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DATE	REFERENCE	DESCRIPTION	AMOUNT
10/14/2010	1388268	*DIAZZA RESTAURANT	\$37.24
10/14/2010	1388353	GUEST ROOM	\$219.95
10/14/2010	1388353	DENVER CITY TAX	\$23.64
10/14/2010	1388353	COLORADO STATE TAX	\$9.02
WILL BE SETTLED TO AX *2000			\$289.85
EFFECTIVE BALANCE OF			\$0.00
ESTIMATED CURRENCY TOTAL			

EXPRESS CHECK-OUT

Good Morning! We hope you enjoyed your stay. With Express Check-Out there is no need to stop at the Front Desk to check out.

- Please review this statement. It is a record of your charges as of late last evening.
- For any charges after your account was prepared, you may:
 - + pay at the time of purchase.
 - + charge purchases to your account, then stop by the Front Desk for an updated statement.
 - + or request an updated statement be mailed to you within two business days.

Simply call the Front Desk from your suite and tell us when you are ready to depart. Your account will be automatically checked out and you may use this statement as your receipt. Feel free to leave your key(s) in the suite.

Please call the Front Desk if you wish to extend your stay or if you have any questions about your account.

DATE OF CHARGE	FOLIO NO./CHECK NO.	
AUTHORIZATION	352624	INITIAL
PURCHASES & SERVICES		
TAXES		
TIPS & MISC.		
TOTAL AMOUNT	0.00	

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 170616

Employee Number: P23178 Trip Period from: 10/05/11 to 10/05/11
Name: Susan M Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Testing: N Trip Extension: N
Outside TDO: N Type:

Purpose: Attend meetings with Susan Kurland, Assistant Secretary, TSA

Purpose Dates: 10/05/11 to 10/05/11
Business Destination: Washington DC USA
Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	950	Other	50
Travel Sub-Total	950	Other Sub-Total	50
		Total Exp	1,000

MULTIPLE EMPLOYEE LISTING

<u>Auth. Number</u>	<u>Employee ID</u>	<u>Org</u>	<u>Employee Name</u>
	P40474	285	Patricia A Clark

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: [Signature] Date: 9/15/11 Submitted: _____

Approver's Signature: [Signature] Date: 9/15/11 Emp# 4087 Title: [Signature]



Travel Arrangements for SUSAN M BAER

Record Locator HKKASR
 Trip ID 11062464427
 PORT AUTHORITY
 226 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: EH

Phone: / Fax: ..

Itinerary Details

Itinerary Only

ROUND-TRIP ACELA.....418.00

Travel Details

Wednesday October 5, 2011

Rail Information

Carrier Amtrak
 Train 2103
 Origin NEWARK NJ
 Destination WASHINGTON DC
 Departing 6:15 AM
 Arriving 8:50 AM

Seat Unassigned

Amtrak Information: AMTRAK 001KB BSNSS
 Amtrak Locator: 02762D

Rail Information

Carrier Amtrak
 Train 2122
 Origin WASHINGTON DC
 Destination NEWARK NJ
 Departing 5:00 PM
 Arriving 7:29 PM

Seat Unassigned

Amtrak Information: AMTRAK 002K BSNSS
 Amtrak Locator: 02762D

Travel Details

Wednesday May 30, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
 CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 338-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS



WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800489894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Airline **AMTRAK** **Passage**

1 Name of Passenger
BAER/SUSAN M

From
NEWARK PENN STA, NJ
To
WASHINGTON, DC

Class
2V
Main
2103 Date
05OCT11

Accom
KB Space/Car
EXPRSS BSNESS

Form of Payment
AX186.00 1002
Net Fare
\$186.00
Fare Plan

Accom Charge
\$0.00
Total
\$186.00

BOAE
Ticket Number
2637033561546 No. of
01 01
Date of Issue
20SEP11 Reservation #
2762D

PASSENGER RECEIPT

Airline **AMTRAK** **Passage**

1 Name of Passenger
BAER/SUSAN M

From
WASHINGTON, DC
To
NEWARK PENN STA, NJ

Class
2V
Main
2122 Date
05OCT11

Accom
K Space/Car
EXPRSS BSNESS

Form of Payment
AX232.00 1002
Net Fare
\$232.00
Fare Plan

Accom Charge
\$0.00
Total
\$232.00

KOAE
Ticket Number
2637033561553 No. of
01 01
Date of Issue
20SEP11 Reservation #
2762D

PASSENGER RECEIPT

*Union Station
DOT Head*

DC TRIP / CAP
PRESIDENTIAL
HACK ID # 53
10/05/11 TR
START END M
09:13 09:28
FARE FOR EA
RATE 1: \$
EXTRA: \$
TOTAL: \$ 10.00
TAG H-9289
DC TAXICAB C
TEL 202 645-
TIP *1.00*

ExecuCar

TRIP VOUCHER

Driver # _____
Car # _____
Date ____/____/____

Pass.
Name (MS MR MRS) _____
Company _____
Address/Bldg. _____
City _____ Zip _____
Acct # _____
Ref # _____ Dept # _____
Pick-up Time _____ Drop off Time _____
From *Gaylord* To: *Union Station*

Stand by \$	# _____ Guest(s)
Fare \$ <i>35.00</i>	CREDIT CARD
Sub Total \$	DIRECT BILL
Gratully \$ <i>5.00</i>	CASH RECEIPT <input checked="" type="checkbox"/>
Total \$ <i>40.00</i>	PREPAID

Comments: _____
Hotel Authorization: _____
x *Susan Baer*
Customer signature here authorizes direct-bill or credit card charges.
WHITE - ExecuCar YELLOW - ExecuCar PINK - Customer

Parking Receipt

PLAZA STATION 22
Register 3 Sequence 4 100
Credit Card Purchase
Account XXXXXXXXXXXXX5893
From 05:44 October 5, 2011
To 19:29 October 5, 2011
Elapsed time: day(s),
13 hour(s), 45 minute(s)
For \$ 14.00
Thank you *Parkings -
Penn Station
Union Station to Newark
DOT Headquarters*



Travel Arrangements for SUSAN M BAER

Record Locator: EMHWUG
 Trip ID: 10884313736
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: LJ

Phone: ... / Fax: ...

Itinerary Details

Itinerary Only

Travel Details

Saturday October 15, 2011

CURRENT AIRFARE 559.10 NON REFUNDABLE. AIRFARE IS NOT GUARANTEED UNTIL TICKETS ARE ISSUED.

Flight Information

Airline	CONTINENTAL AIR	Estimated time	5 hours 50 minutes
Flight	1228	Distance	2,425 Miles
Origin	Newark, NJ	Meal Service	Dinner
Destination	San Diego, CA	Plane	Boeing 737-800
Departing	6:29 PM		
Arriving	8:19 PM		
Departure Terminal	TERMINAL C		
Arrival Terminal	TERMINAL 2		
Seat	26B		
Class	Coach		

Travel Details

Tuesday October 18, 2011

Flight Information

Airline	CONTINENTAL AIR	Estimated time	5 hours 21 minutes
Flight	1565	Distance	2,425 Miles
Origin	San Diego, CA	Meal Service	Breakfast
Destination	Newark, NJ	Plane	Boeing 737-700
Departing	8:00 AM		
Arriving	4:21 PM		
Departure Terminal	TERMINAL 2		
Arrival Terminal	TERMINAL C		
Seat	32C		
Class	Coach		

Loyalty Programs

Vendor	Account	Traveler
CONTINENTAL AIR	ES965484	SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
BWJEBY	CONTINENTAL AIR



Additional Messages

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Rhode Island Registration Number: ML#11192; Nevada Seller of Travel Registration No.: NV#2001-0128; Iowa: TA# 002 Registered Iowa Travel Agency



BOARDING PASS

Name: BAER/SUSANM

OnePass: ES965464

Flight: CO 1228 Economy (Q)

Miles: 2425

Date: Saturday, October 15, 2011

Depart: Newark-Liberty Intl 5:29 PM

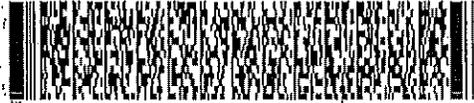
Arrive: San Diego 8:19 PM

Board Time: 4:54 PM

Gate: Terminal C *Gate Not Yet Assigned*

Seat: 11A

Confirmation: BWJEBY eTicket: 00586863584533



Seq: 45
1228
11A
BWJEBY

Go paperless and use your mobile phone or PDA as your boarding pass! Mobile boarding passes are now an option for most customers departing from New York/Newark - Liberty (EWR). Go to <http://pda.continental.com> - Flight Check-In and then choose mobile boarding pass as your delivery option.

A STAR ALLIANCE MEMBER



Name: BAER/SUSANM

Date: 18OCT

OnePass: ES965464

BWJEBY

Flight: CO 1566Y

AZ



Name: BAER/SUSANM

Date: 18OCT

OnePass: ES965464

Mileage: 2425 MILES

Q ID Flight: CO 1566Y

Gate: 36

Seat: 14C

Gate: 36 Seat: 14C



00586863584533
EWR ETICKET

Depart: 800A
SAN DIEGO
Arrive: 421P
NEWARK
Board Time: 725A
00586863584533

BOARDING PASS



Manchester Grand Hyatt San Diego
One Market Place
San Diego, CA 92101
Tel: 619.232.1234
Fax: 619.233.6464

INVOICE

Payee Ms Susan Baer
(Ex. 1)

Room No. 1511
Arrival 10-15-11
Departure 10-18-11
Page No. 1 of 2
Folio Window 1
Folio 303102
Invoice

Membership
Bonus Code
Confirmation No. 6100021301
Group Name

Date	Description		Charges	Credits
10-15-11	- Grand Lobby Bar Food	Room# 1511 : CHECK# 3835	33.00	
10-15-11	Guest Room		175.00	
10-15-11	Occupancy Tax 10.5%		18.38	
10-15-11	SD TMD Assessment 2.0%		3.50	
10-15-11	CA Tourism Assessment Fee		0.21	
10-16-11	- Lael's Breakfast Food	Room# 1511 : CHECK# 8963	21.86	
10-16-11	Guest Room		175.00	
10-16-11	Occupancy Tax 10.5%		18.38	
10-16-11	SD TMD Assessment 2.0%		3.50	
10-16-11	CA Tourism Assessment Fee		0.21	
10-17-11	Guest Room		175.00	
10-17-11	Occupancy Tax 10.5%		18.38	
10-17-11	SD TMD Assessment 2.0%		3.50	
10-17-11	CA Tourism Assessment Fee		0.21	
10-18-11	American Express	XXXXXXXXXXXX4006 XX/XX		646.13



Manchester Grand Hyatt San Diego
One Market Place
San Diego, CA 92101
Tel: 619.232.1234
Fax: 619.233.6464

INVOICE

Payee Ms Susan Baer
(Ex. 1)

Room No. 1511
Arrival 10-15-11
Departure 10-18-11
Page No. 2 of 2
Folio Window 1
Folio 303102
Invoice

Membership
Bonus Code
Confirmation No. 6100021301
Group Name

Date	Description	Charges	Credits	
No frequent traveler account has been credited for this stay. To enroll in Gold Passport, call 1-800-51-HYATT, or visit www.GoldPassport.com.		Total	646.13	646.13
		Balance	0.00	

Guest Signature

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

I accept delivery of The Wall Street Journal. If refused, a refund of \$1.00 will be provided.

We hope you had an exceptional stay at the Manchester Grand Hyatt and look forward to hearing your feedback.

Please e-mail your comments to:
Chad Eding at chad.eding@hyatt.com
Billing Inquiries: NA.CustomerService@hyatt.com
Lost & Found: gordana.leger@hyatt.com
Phone 1.888.552.7410 Fax 1.918.512.4083

Please remit payment to:
Manchester Grand Hyatt
P O BOX 94054
Seattle, WA 98128

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 170617

Employee Number: P23178 Trip Period from: 10/15/11 to 10/19/11
Name: Susan M Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209

Account Code: 1000-X 556001-285A01-A01101000-
Spouse/Guest: N Meeting with Government Agency reps or Business Clients: Y Travel Company Used: Y
International: N
Blanket Trip: N Conferences, Seminars, Training and Testing: N Trip Extension: N
Outside TDC: N Type:

Purpose: Participate in the G-10 Meeting

Purpose Dates: 10/15/11 to 10/18/11
Business Destination: San Diego CA USA
Ticket Destination: San Diego CA USA

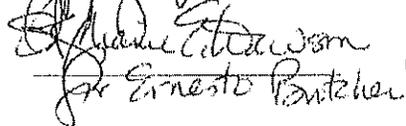
ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	600	Meals	150
Auto	0	Registration	0
Bus	0	Lodging	675
Rail	0	Other	125
Travel Sub-Total	600	Other Sub-Total	950
		Total Exp	1,550

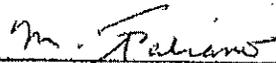
#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature:  Date: 9/22/11 Submitted: _____

Approver's Signature:  Date: 9/30/2011 Emp# 19624 Title: Chief Operating Officer

CONCURRED:


Michael Fabiano
Chief Financial Officer

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 170809

Employee Number: E23178

Trip Period from: 11/26/11 to 12/03/11

Name: Susan M Baer

Approver's
Signature

Manuel E Dawson
for Ernesto Butcher

Date:

9/29/2011

Emp#

19624

Title:

*Chief Operating
Officer*

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 170809

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 11/26/11 to 12/03/11

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

- 01 Attach concurrence of the Chief Financial Officer (CFO)

- 02 Attach written approval by your Department Director for international trip.



Travel Arrangements for SUSAN M BAER

Record Locator **ONBUZR**
 Trip ID **11490372775**
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: LR

Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code	005	Ticket Date	10/12/2011
Ticket Number	8716179238	Invoice	0032722
Check Digt	3	Electronic	Yes

Charges

Ticket Base Fare	809.00
Ticket Tax Fare	308.70
Total (USD) Ticket Amount	1,117.70

Ticket Information

Airline Code	178	Ticket Date	10/12/2011
Ticket Number	8716179236	Invoice	0032719
Check Digt	6	Electronic	Yes

Charges

Ticket Base Fare	950.00
Ticket Tax Fare	23.30
Total (USD) Ticket Amount	973.30

Ticket Information

Airline Code	607	Ticket Date	10/12/2011
Ticket Number	8716179237	Invoice	0032721
Check Digt	2	Electronic	Yes

Charges

Ticket Base Fare	721.00
Ticket Tax Fare	21.80
Total (USD) Ticket Amount	742.80

Billing Code **F7C23178XXXX285A01XXX**

Transaction Fee **35.00**

Airfare charged to American Express

Billing Account: **AX XXXXXXXXXXXX1002**

Total 2,866.80

TOTAL 2833.80

Travel Details

Saturday November 26, 2011

Flight Information

Airline	EMIRATES AIRLINES	Estimated time	12 hours 30 minutes
Flight	202	Distance	6,850 Miles
Origin	New York JFK, NY	Meal Service	Meal service
Destination	Duba, UNITED ARAB EMIRATES	Plane	388
Departing	11:00 PM		
Arriving	8:30 PM		

Departure Terminal **TERMINAL 4**
 Arriving on **November 27, 2011**
 Arrival Terminal **TERMINAL 3**
 Seat **AIRPORT CHECK IN**
 Class **Economy**

Travel Details

Thursday December 1, 2011



Flight Information

Airline	ETIHAD AIRWAYS	Estimated time	8 hours 5 minutes
Flight	19	Distance	3,431 Miles
Origin	Abu Dhabi Intl, UNITED ARAB EMIRATES	Meal Service	Meal service
Destination	London Heathrow, UK	Plane	Airbus A340-600
Departing	8:20 AM		
Arriving	12:25 PM		
Departure Terminal	TERMINAL 3		
Arrival Terminal	TERMINAL 4		
Seat	24A		
Class	Economy		

Travel Details

Saturday December 3, 2011

Flight Information

Airline	CONTINENTAL AIR	Estimated time	8 hours 25 minutes
Flight	19	Distance	3,488 Miles
Origin	London Heathrow, UK	Meal Service	Breakfast
Destination	Newark, NJ	Plane	Boeing 767-200
Departing	8:40 AM		
Arriving	12:05 PM		
Departure Terminal	TERMINAL 4		
Arrival Terminal	TERMINAL C		
Seat	26F		
Class	Coach		

*****IMPORTANT VISA/PASSPORT SERVICE INFORMATION*****

A VALID PASSPORT IS REQUIRED FOR ALL INTERNATIONAL DESTINATIONS.
 ADDITIONAL DOCUMENTATION SUCH AS A VISA MAY ALSO BE REQUIRED.
 SOME COUNTRIES REQUIRE YOUR PASSPORT BE VALID FOR 6 MONTHS
 BEYOND YOUR INTENDED STAY. ACCESS WWW.US.CIBT.COM FOR ALL
 INTERNATIONAL DOCUMENTATION REQUIREMENTS.

Travel Details

Sunday April 1, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
CONTINENTAL AIR	ES986464	SUSAN M BAER
ETIHAD AIRWAYS	UK29002	SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
E114YX	CONTINENTAL AIR
GFGTTF	EMIRATES AIRLINES
ZUUP5D	ETIHAD AIRWAYS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
 CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

 FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
 WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

PLEASE CHECK IN 2-3 HOURS PRIOR TO DEPARTURE
 DEPENDING ON AIRLINE AND DESTINATION. CONTACT

AMERICAN EXPRESS FOR SPECIFIC CHECK-IN TIMES.
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.
TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER
AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Jumeirah

EMIRATES TOWERS

Ms. Susan Baer
225 Park Avenue South, 9th floor
New York NY 10003
United States

PO Box 72127, Dubai, UAE.
Tel: +971 4 330 0000 Fax: +971 4 330 3030
JETInfo@jumeirah.com
jumeirah.com

Arrival : 27.11.11

Departure : 29.11.11

Sirlus / FF No :

Invoice No : 165153

Room No. : 114010

No of person (s) : 1

Cashier : 4284 Ahmed Haleem

Page No : 1 of 2

Check Out Time : 07:57

Ms. Susan Baer

Date	Description	Debit	Credit
27.11.11	Room Package	1,770.00	
28.11.11	Room Package	1,770.00	
28.11.11	Minibar - Bev Alcoholc	98.00	
29.11.11	American Express		3,638.00
Total		3,638.00	3,638.00
Balance		0.00	

Merchant ID : 9760121335

Transaction ID : 3429567

Approval Code : A582526

Approval Amount : 3,638.00

Credit Card # : XXXXXXXXXXXX4008

Credit Card Expiry : XX/XX

Capture Method : Swiped

Guest Signature

Shangri-La hotel

QARYAT AL BERI, ABU DHABI

Ms Susan M Baer
225 Park Avenue South
9th floor
New York NY 10003
United States

INVOICE

Folio No. : 110012
Room No. : 0536
Person(s) : 1
Arrival : 29/11/11 12:19
Departure : 01/12/11 06:02
Cashier No. : FOISLAM / 18
Page No. : 1 of 1
FFP Type : QNM

Shangri-La Hotel, Qaryat Al Beri 01/12/11 06:02

DATE	TEXT	REF#	TIME	DEBITS	CREDITS
29/11/11	Room Charge			1,350.00	
29/11/11	Service Charge			135.00	
29/11/11	Tourism Fee			81.00	
30/11/11	Room Charge			1,350.00	
30/11/11	Service Charge			135.00	
30/11/11	Tourism Fee			81.00	
01/12/11	CC-American Express				3,132.00
Total				3,132.00	3,132.00
Balance				0.00	AED

Ms Susan Baer
 225 Park Avenue South
 10003 New York
 United States

Room No.: 610
 Arrival: 01/12/11
 Departure: 03/12/11
 Conf No.: 5196378
 Date: 03/12/11
 Invoice No: 11094084
 Cashier No: 843
 Page No: 1 of 1

INVOICE

Date	Description	Debit	Credit
01/12/11	Accommodation & Breakfast	265.00	
02/12/11	Accommodation & Breakfast	275.00	
02/12/11	Accommodation VAT 20%	108.00	
03/12/11	American Express		648.00

	Net Amount GBP	VAT Amount GBP	Gross Amount GBP	Total GBP	648.00	648.00
VAT 20%	540.00	108.00	648.00	Balance GBP		0.00
Vat 15%	0.00	0.00	0.00			

Guest Signature _____

Merchant ID: 540436504179243 Credit Card #: XXXXXXXXXXXX4006
 Transaction ID: 4850454 Credit Card Expiry: XX/XX
 Approval Code: 16 Capture Method: Manual
 Approval Amount: 648.00 Transaction Amount: 648.00

Melia White House at Regents Park is the trading name of Lomondo Limited. Reg. in England No. 2793825 VAT Reg. No. 626 7830 20



BUSINESS

BAER/SUSANM
 From JFK To DXB
 Flight Date Time
 EK 202 26NOV 2300

ZONE Seat Seq No
B 23F 0072

POS/WF 2/ 46
 ETKT 1768716179236-1

بطاقة دخول الطائرة
 Boarding Pass



GUEST			
BAER/SUSAN M			
FROM	ABU DHABI	AUH	
TO	LONDON	LHR	
FLIGHT: EY 19 CLASS: J DATE: 01DEC0930			
GATE	BOARDING TIME	SEAT	
30	0830	1C	
PCS	WT	LNCKD	SEQ NUMBER
1	20	0	265

K1 ETKT 0078716179237-1

INTL Verify US Passport

NAME: BAER/SUSANM
 DATE: SAT 03 DEC 2011
 OnePass: ES965464

FLIGHT: CO 19 Y

GATE: 2

CONFIRMATION: E114YX



NAME: BAER/SUSANM
 DATE: SAT 03 DEC 2011 98
 OnePass: ES965464

FLIGHT: CO 19 Y

Mileage: 3446 Miles

SEAT: 12C GATE: 2 SEAT: 12C

DEPART: 8:40 AM

London-Heathrow

ARRIVE: 12:05 PM

Newark-Liberty Intl

BOARDING TIME: 7:55 AM

1768716179236

BOARDING PASS

Dial-a-Cab

OWNERS DRIVERS TAXI SERVICE (LTD) LTD

Thank you for using Dial

020 7253 5000



PICK UP FROM	DATE	MONTH	YEARS
	13	12	11
TRIP REFERRED			
LAP			

WHY NOT OPEN A CREDIT ACCOUNT

For details: phone 020 7251 058
 or write for: Dial-a-Cab House
 39-47 East Road, London N1 6A

CHARGES	AMOUNT
METER	
EXTRAS	
TOTAL CHARGES	65
CHARGE NO.	SIGNATURE



Travel Arrangements for SUSAN M BAER

Record Locator DEGEUU
Trip ID 10810340662
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003

Agent ID: SU
Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 005 Ticket Date 1/11/2012
Ticket Number 8735519268 Invoice 0050641
Check Digt 3 Electronic Yes
Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 214.88
Ticket Tax Fare 59.32
Total (USD) Ticket Amount 274.20

Airfare charged to American Express
Billing Account: AX XXXXXXXXXXXX1002
Total 274.20

AIRFARE IS 287.20 AND SUBJECT TO CHANGE UNTIL TICKETED.
LAST DAY TO PURCHASE 11JAN

Travel Details

Thursday February 2, 2012

Flight Information

Airline DELTA AIR LINES Estimated time 2 hours 41 minutes
Flight 1647 Distance 761 Miles
Origin New York Lga, NY Meal Service Cont breakfast
Destination Atlanta, GA Plane Boeing 767
Departing 11:00 AM
Arriving 1:41 PM
Departure Terminal TERMINAL D
Arrival Terminal SOUTH TERMINAL
Seat 24D
Class Coach

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 26 minutes
Flight 1019 Distance 366 Miles
Origin Atlanta, GA Meal Service No Meal Service
Destination Daytona Beach, FL Plane McDonnell DOUGLAS 87
Departing 3:15 PM
Arriving 4:41 PM
Departure Terminal SOUTH TERMINAL
Seat 16D
Class Coach

Travel Details

Friday February 3, 2012



Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 35 minutes
Flight	1019	Distance	366 Miles
Origin	Daytona Beach, FL	Meal Service	No Meal Service
Destination	Atlanta, GA	Plane	McDonnell DOUGLAS 87
Departing	5:21 PM		
Arriving	6:56 PM		
Arrival Terminal	SOUTH TERMINAL		
Seat	15E		
Class	Economy		

Flight Information

Airline	DELTA AIR LINES	Estimated time	2 hours 19 minutes
Flight	458	Distance	761 Miles
Origin	Atlanta, GA	Meal Service	Cont breakfast
Destination	New York Lga, NY	Plane	Boeing 767
Departing	7:40 PM		
Arriving	9:59 PM		
Departure Terminal	SOUTH TERMINAL		
Arrival Terminal	TERMINAL D		
Seat	23D		
Class	Economy		

Travel Details

Saturday June 2, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES	6913404874	SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
GG4V9V	DELTA AIR LINES

Additional Messages

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COLLECT 336-291-0104, CODE S-9LVA

NO CAR OR HOTEL REQUESTED.

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A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.

FARE IS NOT GUARANTEED UNTIL TICKETED.

CONTACT THE ABOVE NUMBER FOR COMPLETE

TICKET RESTRICTIONS.

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Travel Arrangements for SUSAN M BAER

Record Locator DEGEUU
Trlp ID 10810340662
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003

Agent ID: SU
Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 008 Ticket Date 1/11/2012
Ticket Number 8735519268 Invoice 0050841
Check Digit 3 Electronic Yes
Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 214.88
Ticket Tax Fare 59.32
Total (USD) Ticket Amount 274.20

Airfare charged to American Express
Billing Account: AX XXXXXXXXXXXX1002
Total 274.20

AIRFARE IS 287.20 AND SUBJECT TO CHANGE UNTIL TICKETED.
LAST DAY TO PURCHASE 11JAN

Travel Details

Thursday February 2, 2012

Flight Information

Airline DELTA AIR LINES Estimated time 2 hours 41 minutes
Flight 1647 Distance 761 Miles
Origin New York Lga, NY Meal Service Cont breakfast
Destination Atlanta, GA Plane Boeing 757
Departing 11:00 AM
Arriving 1:41 PM
Departure Terminal TERMINAL D
Arrival Terminal SOUTH TERMINAL
Seat 24D
Class Coach

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 26 minutes
Flight 1019 Distance 308 Miles
Origin Atlanta, GA Meal Service No Meal Service
Destination Daytona Beach, FL Plane McDonnell DOUGLAS 87
Departing 3:15 PM
Arriving 4:41 PM
Departure Terminal SOUTH TERMINAL
Seat 16D
Class Coach

Travel Details

Friday February 3, 2012



Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 35 minutes
Flight	1019	Distance	388 Miles
Origin	Daytona Beach, FL	Meal Service	No Meal Service
Destination	Atlanta, GA	Plane	Mcdonnell DOUGLAS 87
Departing	6:21 PM		
Arriving	8:58 PM		
Arrival Terminal	SOUTH TERMINAL		
Seat	16E		
Class	Economy		

Flight Information

Airline	DELTA AIR LINES	Estimated time	2 hours 19 minutes
Flight	468	Distance	781 Miles
Origin	Atlanta, GA	Meal Service	Cont breakfast
Destination	New York Lga, NY	Plane	Boeing 757
Departing	7:40 PM		
Arriving	9:59 PM		
Departure Terminal	SOUTH TERMINAL		
Arrival Terminal	TERMINAL D		
Seat	23D		
Class	Economy		

Travel Details

Saturday June 2, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
GG4V9V	DELTA AIR LINES

Additional Messages

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FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

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Travel Arrangements for SUSAN M BAER

Record Locator DEGEUU
 Trip ID 10810340662
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003

Agent ID: SU
 Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 008 Ticket Date 1/13/2012
 Ticket Number 8738007688 Invoice 0051377
 Check Digt 5 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 117.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 117.00
 Current Fare 241.20
 Prior ticket 0068735519268 credit -274.20
 Exchange Fee 150.00
 Transaction Fee 70.00
 Airfare charged to American Express
 Billing Account: AXXXXXXXXXXX1002
 Total 187.00

AIRFARE IS 287.20 AND SUBJECT TO CHANGE UNTIL TICKETED.
 LAST DAY TO PURCHASE 11JAN

Travel Details

Thursday February 2, 2012

Flight Information

Airline DELTA AIR LINES Estimated time 2 hours 44 minutes
 Flight 2047 Distance 761 Miles
 Origin New York Lga, NY Meal Service Cont breakfast
 Destination Atlanta, GA Plane Airbus A320
 Departing 8:00 AM
 Arriving 10:44 AM

Departure Terminal TERMINAL D
 Arrival Terminal SOUTH TERMINAL
 Seat 18A
 Class Economy

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 22 minutes
 Flight 1087 Distance 366 Miles
 Origin Atlanta, GA Meal Service No Meal Service
 Destination Daytona Beach, FL Plane McDonnell DOUGLAS B7
 Departing 12:08 PM
 Arriving 1:30 PM

Departure Terminal SOUTH TERMINAL
 Seat 14A



Class Economy

Travel Details

Friday February 3, 2012

Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 35 minutes
Flight	1019	Distance	366 Miles
Origin	Daytona Beach, FL	Meal Service	No Meal Service
Destination	Atlanta, GA	Plane	Mcdonnell DOUGLAS 87
Departing	6:21 PM		
Arriving	8:56 PM		
Arrival Terminal	SOUTH TERMINAL		
Seat	16E		
Class	Economy		

Flight Information

Airline	DELTA AIR LINES	Estimated time	2 hours 19 minutes
Flight	466	Distance	761 Miles
Origin	Atlanta, GA	Meal Service	Cont breakfast
Destination	New York Lga, NY	Plane	Boeing 757
Departing	7:40 PM		
Arriving	9:59 PM		
Departure Terminal	SOUTH TERMINAL		
Arrival Terminal	TERMINAL D		
Seat	23D		
Class	Economy		

Travel Details

Saturday June 2, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES	6913404674	SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
GG4V9V	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

NO CAR OR HOTEL REQUESTED,
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.
TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER
AIR RAIL TRANSACTION OR BOOKING FEE 35.00, TICKET

EXCHANGE FEE 35.00

Page 3 of 3

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

The Port Authority of NY & NJ
Business Trip and Reimbursements Authorization

Trip # 171932

Employee Number: P23178 Trip Period from: 02/02/12 to 02/03/12
Name: Susan M Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Testing: Y Trip Extension: N
Outside TDO: N Type:

Purpose: ATTEND THE NAC MEETING

Sponsor: LOCKHEED MARTIN

Purpose Dates: 02/02/12 to 02/03/12
Business Destination: Daytona Beach FL USA
Ticket Destination: Daytona Beach FL USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	600	Meals	100
Auto	0	Registration	0
Bus	0	Lodging	175
Rail	0	Other	125
Travel Sub-Total	600	Other Sub-Total	400
		Total Exp	1,000

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 12/28/11 Submitted: _____

Approver's
Signature

C. J. [Signature]

Date: 5/1/12 Emp# 19624 Title: COO

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/02/12 to 02/03/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

- 01 Attach written approval for domestic trip outside the self-approved regions
by the your Chief

The Shores

RESORT & SPA

2637 S. Atlantic Avenue
Daytona Beach Shores
Florida 32118

tel: 386.767.7350
fax: 386.760.3651

FOLIO NO.: 23F0MY
ROOM NO.: 0633 CLERK: WB
ARRIVE: 02/02/12
DEPART: 02/03/12
146.00
RATE/PACKAGE DESCRIPTION: Lockheed Martin
NO. IN PARTY: 2

Baer, Ms Susan
225 Park Ave S
New York, NY 10003

DATE	DESCRIPTION	CHARGES	PAYMENT
------	-------------	---------	---------

Your feedback is important to us. We would sincerely appreciate your writing a review at tripadvisor.com, expedia.com, travelocity.com, Igougo.com or any other website that accepts hotel guest feedback.

Thank you.

12/28/11	001AMX 1 XXXXXXXXXXXX4006	JL	163.24
02/02/12	400ROM 1 Lockheed Martin	--	129.00
02/02/12	795RAF 1 Resort Fee	--	17.00
02/02/12	002TX1 1 Occupancy Tax	--	16.13
02/02/12	002TX2 1 Sales Tax	--	1.11
Subtotals		\$	163.24
			163.24

PAID IN FULL --- THANK YOU!

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any or the full amount of these charges.

Guest Signature _____

The Shores
RESORT & SPA
www.shoresresort.com

THURSDAY, FEBRUARY 2, 2012

Susanm Baer Skymiles #XXXXXX4874 **DELTA** BOARDING DOCUMENT

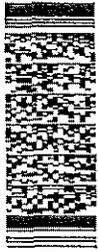
~

LGA ▶ ATL

NYC-LAGUARDIA (LGA) ▶	BOARDING	GATE*	ZONE	SEAT	
Atlanta (ATL)	7:20am	-	4	9A	Depart Thu, 8:00am
FLIGHT DL2047		Delta Terminal		Economy (U)	Arrive Thu, 10:44am

*Gates may change. Check airport monitors. Fly Paperless: www.delta.com/app

Confirmation: GG4V9V
Ticket#: 006 8736007688



THURSDAY, FEBRUARY 2, 2012

Susanm Baer Skymiles #XXXXXX4874 **DELTA** BOARDING DOCUMENT

ATL ▶ DAB

ATLANTA (ATL) ▶	BOARDING	GATE*	ZONE	EXIT SEAT	🕒 Layover	1h 24m
Daytona Beach (DAB)	11:28	-	1	25E	Depart Thu, 12:08pm	
FLIGHT DL1087				Economy (U)	Arrive Thu, 1:30pm	

*Gates may change. Check airport monitors. Fly Paperless: www.delta.com/app

Confirmation: GG4V9V
Ticket#: 006 8736007688



Susanm Baer

SkyMiles #XXXXXX4874

DAB ▶ ATL

DAYTONA BEACH (DAB) ▶ Atlanta (ATL) FLIGHT DL1019	BOARDING 4:41pm	GATE* ~	ZONE 4	SEAT 18D Economy (U)	Depart Fri, 5:21pm	Arrive Fri, 6:56pm
---	--------------------	------------	-----------	----------------------------	-----------------------	-----------------------

*Gates may change. Check airport monitors.

Fly Paperless: www.delta.com/app

Confirmation: GG4V9V
Ticket#: 006 8736007688
KDABTKFTXPKIA01



Susanm Baer

SkyMiles #XXXXXX4874

ATL ▶ LGA

ATLANTA (ATL) ▶ Nyc-Laguardia (LGA) FLIGHT DL456	BOARDING 7:00pm	GATE* ~	ZONE 4	SEAT 23B Economy (U)	⌚ Layover 0h 44m	Depart Fri, 7:40pm	Arrive Fri, 9:59pm
--	--------------------	------------	-----------	----------------------------	---------------------	-----------------------	-----------------------

*Gates may change. Check airport monitors.

Fly Paperless: www.delta.com/app

Confirmation: GG4V9V
Ticket#: 006 8736007688
KDABTKFTXPKIA01



Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/07/12 to 02/10/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

-
- 01 Attach concurrence of the Chief Financial Officer (CFO)

 - 02 Attach written approval for domestic trip outside the self-approved regions by the your Chief

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 171520

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/07/12 to 02/10/12

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: N
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing : Y
12 MAY 11 PM 1:30
Org: 285
Dir/Comm: Y
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: PARTICIPATE IN THE 2012 WINTER BOARD OF DIRECTORS MEETING & CEO FORUM

Sponsor: ACI-NA

Purpose Dates: 02/07/12 to 02/10/12
Business Destination: Salt Lake City UT USA
Ticket Destination: Salt Lake City UT USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	650	Meals	200
Auto	0	Registration	395
Bus	0	Lodging	700
Rail	0	Other	100
Travel Sub-Total	650	Other Sub-Total	1,395
		Total Exp	2,045

#Signature below implies approval of 2 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 1/4/12 Submitted: _____

Approver's
Signature

C. D. [Signature]

Date: 1/11/12 Emp# 19624 Title: COO

ACI-NA REGISTRATION FORM

FEBRUARY 8-10, 2012 THE GRAND AMERICA HOTEL, SALT LAKE CITY UTAH

Please use one registration form for each attendee. Please print or type form.

Mr./Ms. Name: SUSAN BAER
Badge Name: SUE BAER Title: DIRECTOR, AVIATION
Organization: THE PORT AUTHORITY OF NEW YORK & NEW JERSEY
Address: 225 PARK AVENUE SOUTH, 9TH FLOOR
City: NEW YORK State: NY Zip/Postal Code: 10003 Country: USA
Phone: 212-435-3720 Fax: 212-435-3833 *Email: sbaer@panynj.gov
Guest name, if attending (complimentary-no charge): _____
*Automated confirmation letter will be sent to this email. If you want confirmation sent to an additional email address, please list here: _____



Are you a first time attendee? Yes No

REGISTRATION FEES

Please enclose payment with registration!

- CEO Forum \$395

Total Amount Enclosed

\$ _____

Full payment must accompany your registration form. Credit card payment must be included for faxed registrations. Check payment will only be accepted with mailed forms. Your signature below authorizes ACI-NA to charge your credit card the total/correct amount due and acknowledges there are no refunds after Friday, January 13, 2012.

\$\$\$ FORM OF PAYMENT \$\$\$

Please check the appropriate boxes.

Check made payable to ACI-NA enclosed

OR

Credit Card:

- Master Card Visa
 Amex Diners Club

Credit Card Number: _____

Expiration Date: _____

Name on Card: _____

Signature: _____

ADA: Please check here if you require assistance in order to fully participate in this meeting.

Badges: Only individuals who register and present badges and/or tickets may attend conference events. A badge is required for all conference sessions.

Hotel Reservations: Call the hotel directly at (801) 258-6000 or (800) 437-5288 to make room reservations. Be sure to request the Airports Council International group rate of \$204.00 plus tax single/double occupancy. Refunds will be issued on individual hotel reservations canceled no later than 4 pm **two days in advance** of the confirmed arrival date. Cancellations received after that time will be charged one night's room and tax. **The hotel cut-off date is Friday, January 13, 2012. Reservations made after this date can only be accepted on a space available basis at the group rate. The hotel may sell out of rooms or rooms at the conference rate before the cut-off date. Make your reservations early!**

Refund Policy: Registration fees will be fully refunded if written notice is received at ACI-NA no later than Friday, January 31, 2012. After January 13, all refunds will have a processing fee of \$100 deducted. **No refunds will be issued on cancellations received after Friday, January 13, 2012.** Substitutions will be honored at any time. All no-shows will be billed.

Note: ACI-NA reserves the right to cancel this program if the number of registrants is insufficient. In that event, we will notify all registrants and refund the registration fee in full. However, any costs incurred by the registrant, such as hotel cancellation or airline penalties, are the responsibility of the registrant.

Please fax OR mail this form to:

ACI-NA Attention: 2012 CEO Forum
Fax: (202) 466-5555

1775 K St., NW, Suite 500 Washington, DC 20006
Phone: (202) 293-8500



Travel Arrangements for SUSAN M BAER

Record Locator **EEZIMK**
 Trip ID **10871698188**
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: A0
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code **008** Ticket Date **1/18/2012**
 Ticket Number **8737002195** Invoice **0052284**
 Check Digit **1** Electronic **Yes**
 Billing Code **F7C23178XXX285A01XXX**

Charges

Ticket Base Fare **429.77**
 Ticket Tax Fare **53.83**
 Total (USD) Ticket Amount **483.60**
 Transaction Fee **35.00**
 Airfare charged to American Express
 Billing Account: **AXXXXXXXXXXX1002**
 Total **518.60**

Travel Details

Wednesday February 8, 2012

Flight Information

Airline	DELTA AIR LINES	Estimated time	5 hours 23 minutes
Flight	828	Distance	1,988 Miles
Origin	Newark, NJ	Meal Service	Food for purchase
Destination	Salt Lake City, UT	Plane	Airbus A320
Departing	7:00 AM		
Arriving	10:23 AM		
Departure Terminal	TERMINAL B		
Arrival Terminal	TERMINAL UNIT 2		
Seat	24F		
Class	Economy		

Travel Details

Saturday February 11, 2012

Flight Information

Airline	DELTA AIR LINES	Estimated time	4 hours 32 minutes
Flight	1186	Distance	1,988 Miles
Origin	Salt Lake City, UT	Meal Service	Food for purchase
Destination	Newark, NJ	Plane	Airbus A320
Departing	9:57 AM		
Arriving	4:29 PM		
Departure Terminal	TERMINAL UNIT 2		
Arrival Terminal	TERMINAL B		
Seat	6B		
Class	Economy		



Travel Details

Sunday June 10, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
G1173U	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 339-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.

CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts or omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$16,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-8001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800469894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Susan Baer
 225 Park Avenue South
 New York, NY 10003



02-11-12

Room No. : 2487
 Arrival : 02-08-12
 Departure : 02-11-12
 Page No. : 1 of 1
 Folio No. : 594693
 Conf. No. : 3703470
 Cashier No. : 649
 User ID : JTUCKETT
 Invoice No. :

INFORMATION INVOICE

Membership No. :
 A/R Number :
 Group Code : ACIN0212
 Company Name : Airports Council International-1

Date	Description	Additional Information	Charges	Credits
02-08-12	Room Charge		204.00	
02-08-12	Taxes Room Tax		11.73	
02-08-12	Taxes State Sales Tax		13.97	
02-09-12	Grand America Spa	Line# 2487 : CHECK# 6	10.00	
02-09-12	Room Charge		204.00	
02-09-12	Taxes Room Tax		11.73	
02-09-12	Taxes State Sales Tax		13.97	
02-10-12	Room Charge		204.00	
02-10-12	Taxes Room Tax		11.73	
02-10-12	Taxes State Sales Tax		13.97	
02-11-12	Room Service Breakfast	Room# 2487 : CHECK# 3895	27.37	
02-11-12	American Express Payment			726.47

XXXXXXXXXXXX4006 XX/XX

Total	726.47	726.47
Balance		0.00

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges.

Guest Signature: _____



BOARDING PASS

BAER/SUSANM

1 006 8737002195 4
GII73U

BAER/SUSANM

DL6913404874
UD14A0NQ

FLIGHT DL928 DATE 08FEB
OPERATED BY DELTA AIR LINES INC

CLASS U ORIGIN NEWARK
COACH DESTINATION SALT LAKE CITY

DEPARTS 700A
BRD TIME 620A

SEAT 6F
ZONE 4

DL6913404874

FLIGHT DL928 DATE 08FEB
ORIGIN NEWARK

DESTINATION SALT LAKE CITY
OPERATED BY DELTA AIR LINES INC

SEAT 6F
ZONE 4

DEPARTURE GATE 46 **SUBJECT TO CHANGE**

Handwritten signature



SATURDAY, FEBRUARY

Susanm Baer

SkyMiles #XXXXXX4874

DELTA BOARDING DOCUMENT

SLC → EWR

Handwritten signature

SALT LAKE CITY (SLC) →	BOARDING	GATE*	ZONE	SEAT	Depart	Sat, 9:57am
Newark (EWR)	9:17am	D01	4	6F	Arrive	Sat, 4:29pm
FLIGHT DL1185		Terminal 2		Economy (U)		

Confirmation: GII73U
Ref#: 006 8737002195
CTK3XPJIA05



onitors.

Fly Paperless: www.delt...

YELLOW CAB COMPANY

(801) 521-2100 Fax (801) 521-1857
ON LINE WWW.YELLOWCABUTAH.COM

24/7 SERVICE
MAJOR CREDIT CARDS ACCEPTED

FROM SLC
TO Hotel
AMOUNT REC. \$ 26.00 DATE 2/8/12
CAB # _____ DRIVER _____

HMSHOST
CALIFORNIA PIZZA KITCHEN
MOUNT LAKE CITY INT'L AIRPORT
CHECK: 678
SERVER: 6358 Sara
DATE: FEB11'12 8:56AM
CARD TYPE: MSTRCARD A1
CT #: XXXXXXXXXXXX8132
EXP DATE: XX/XX
MCC CODE: 219113

TOTAL: 12.49

P -----

TOTAL -----

X -----
I AGREE TO PAY THE ABOVE AMOUNT
IN ACCORDANCE WITH THE CARD
ISSUER'S AGREEMENT.

lunch 2/11/12

ACI-NA REGISTRATION FORM

2012 ACI-NA CEO FORUM
FEBRUARY 8-10, 2012 THE GRAND AMERICA HOTEL, SALT LAKE CITY, UTAH

Please use one registration form for each attendee. Please print or type form.

Mr./Ms. Name: SUSAN BAER
Badge Name: SJB-BAER Title: DIRECTOR, AVIATION
Organization: THE PORT AUTHORITY OF NEW YORK & NEW JERSEY
Address: 225 PARK AVENUE SOUTH, 9TH FLOOR
City: NEW YORK State: NY Zip/Postal Code: 10003 Country: USA
Phone: 212-435-3720 Fax: 212-435-3833 *Email: sbaer@panynj.gov
Guest name, if attending (complimentary-no charge): _____



*Automated confirmation letter will be sent to this email. If you want confirmation sent to an additional email address, please list here: _____

Are you a first time attendee? Yes No

REGISTRATION FEES

Please enclose payment with registration!

- CEO Forum \$395

Total Amount Enclosed

\$ _____

Full payment must accompany your registration form.

Credit card payment must be included for faxed registrations. Check payment will only be accepted with mailed forms. Your signature below authorizes ACI-NA to charge your credit card the total/correct amount due and acknowledges there are no refunds after Friday, January 13, 2012.

\$\$\$ FORM OF PAYMENT \$\$\$

Please check the appropriate boxes.

Check made payable to ACI-NA enclosed

OR

Credit Card:

- Master Card Visa
 Amex Diners Club

Credit Card Number: _____

Expiration Date: _____

Name on Card: _____

Signature: _____

ADA: Please check here if you require assistance in order to fully participate in this meeting.

Badges: Only individuals who register and present badges and/or tickets may attend conference events. A badge is required for all conference sessions.

Hotel Reservations: Call the hotel directly at (801) 258-6000 or (800) 437-5288 to make room reservations. Be sure to request the Airports Council International group rate of \$204.00 plus tax single/double occupancy. Refunds will be issued on individual hotel reservations canceled no later than 4 pm **two days in advance** of the confirmed arrival date. Cancellations received after that time will be charged one night's room and tax. **The hotel cut-off date is Friday, January 13, 2012. Reservations made after this date can only be accepted on a space available basis at the group rate. The hotel may sell out of rooms or rooms at the conference rate before the cut-off date. Make your reservations early!**

Refund Policy: Registration fees will be fully refunded if written notice is received at ACI-NA no later than Friday, January 31, 2012. After January 13, all refunds will have a processing fee of \$100 deducted. **No refunds will be issued on cancellations received after Friday, January 13, 2012.** Substitutions will be honored at any time. All no-shows will be billed.

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Please fax OR mail this form to:

ACI-NA Attention: 2012 CEO Forum
Fax: (202) 466-5555

1775 K St., NW, Suite 500 Washington, DC 20006
Phone: (202) 293-8500

The Port Authority of NY & NJ
Business Trip and Reimbursements Authorization

Trip # 171935

Employee Number: P23178

Trip Period from: 02/17/12 to 02/17/12

Name: Susan M Baer

Title: Dir Aviation Org: 285
 Telephone: 212-435-3720 Dir/Comm: Y
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: N Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing: Y Trip Extension: N
 Outside TDO: N Type:

Purpose: ATTEND MEETING - FORUM ON AIR & SPACE LAW UPDATE CONFERENCE

Sponsor: ABA

Purpose Dates: 02/17/12 to 02/17/12

Business Destination: Washington DC USA

Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	450	Other	50
Travel Sub-Total	450	Other Sub-Total	50
		Total Exp	500

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 1-13-12 Submitted: _____

Approver's
Signature

Susan M Baer

Date: 1-13-12 Emp# 23178 Title: DIRECTOR AVIATION

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/17/12 to 02/17/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

01 Attach concurrence of the Chief Financial Officer (CFO)



Travel Arrangements for SUSAN M BAER

Record Locator **NFYQAP**
 Trip ID **11417536673**
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: A0
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0052208
 Electronic Yes
 Billing Code F7C23178XXXX2B5A01XXX

Charges

Ticket Base Fare 162.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 162.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 197.00

Travel Details

Wednesday January 18, 2012

AMTRAKTICKETLESS-A

Travel Details

Friday February 17, 2012

AMTRAK CONF 23B669 FARE 162.00

Rail Information

Carrier Amtrak
 Train 183
 Origin NEWARK NJ
 Destination WASHINGTON DC
 Departing 7:33 AM
 Arriving 10:40 AM

Seat Unassigned

Amtrak Information: AMTRAK 001YE COACH
 Amtrak Locator: 23B669

Rail Information

Carrier Amtrak
 Train 136
 Origin WASHINGTON DC
 Destination NEWARK NJ
 Departing 6:06 PM
 Arriving 8:20 PM

Seat Unassigned

Amtrak Information: AMTRAK 002YB COACH
 Amtrak Locator: 23B669



Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

YOUR AMTRAK TICKET HAS BEEN ADVANCED PAID.

PLEASE SHOW PROPER IDENTIFICATION UPON
ARRIVAL AT THE STATION.

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800469684. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Additional Messages

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WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1182; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Riders **AMTRAK** Baggage

Name of Passenger
BAER/SUSAN M

From
NEWARK PENN STA, NJ
To
WASHINGTON, DC

Class
2V-183 Date
17 FEB 12

Accom Space/Car
YE

Form of Payment
RESERVD COACH

Rate \$49.00
Accom Charge \$0.00
Total \$49.00

Form of Payment
EX49.00

Rate \$49.00
Accom Charge \$0.00
Total \$49.00

Form of Payment
E08N

Rate \$49.00
Accom Charge \$0.00
Total \$49.00

Ticket Number
0477730567823 No. of
01

Date of Issue
16 FEB 12 Reservation
23B669

PASSENGER RECEIPT

Riders **AMTRAK** Baggage

Name of Passenger
BAER/SUSAN M

From
WASHINGTON, DC
To
NEWARK PENN STA, NJ

Class
2V-178 Date
17 FEB 12

Accom Space/Car
Y

Form of Payment
RESERVD COACH

Rate \$153.00
Accom Charge \$0.00
Total \$153.00

Form of Payment
EX113.00

Rate \$153.00
Accom Charge \$0.00
Total \$153.00

Form of Payment
Y0FC

Rate \$153.00
Accom Charge \$0.00
Total \$153.00

Ticket Number
0477730567831 No. of
01

Date of Issue
16 FEB 12 Reservation
23B669

PASSENGER RECEIPT

DC TRIP / CAPPED
PRESIDENTIAL 1023
HACK ID # 71638
02/17/12 TR 4542
START END MILES
14:51 15:07 2.8
FARE FOR EA RATE
RATE 1: \$ 9.00
EXTRA: \$ 1.00
TOTAL: \$ 10.00
TAG H-96473
DC TAXICAB COMM
TEL 202 645-6014
+ tip 2.00
\$12.00



Taxi Cab Receipts

DATE: 2/17/12 TIME: _____

TRIP ORIGIN: Union Station

DESTINATION: Ritz Carlton - ABA

FARE: \$13.00 + \$2.00 tip = \$15.00 SIGNATURE: Av & Space Forum

PLAZA STATION 22

Register 3 Sequence 928
Credit Card Purchase
Account XXXXXXXXXXXXX8 132
BAER/SUSAN M
From 08:46 February 17, 2012
To 19:20 February 17, 2012
Elapsed time: day(s),
12 hour(s), 34 minute(s)
For \$14.00
+ 2.00 tip
Thank you
\$16.00

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 172046

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/27/12 to 02/28/12

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209

12 MAY 11 PM 1:31

Org: 285
Dir/Comm: Y

Account Code: 1000 X 55G001 285A01 A01101000

Spouse/Guest: N Meeting with Government Agency reps
or Business Clients:

N Travel Company Used: Y

International: N Conferences, Seminars, Training and
Testing :

Trip Extension: N

Blanket Trip: N Outside TDO: N

Type:

Purpose: PARTICIPATE ON A PANEL TO DISCUSS THE CHALLENGES & OUTLOOK ON THE INDUSTRY

Sponsor: ARN

Purpose Dates: 02/27/12 to 02/28/12

Business Destination: Orlando FL USA

Ticket Destination: Orlando FL USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	600	Meals	50
Auto	0	Registration	400
Bus	0	Lodging	250
Rail	0	Other	75
Travel Sub-Total	600	Other Sub-Total	775
		Total Exp	1,375

#Signature below implies approval of 2 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 1/5/12 Submitted: _____

Approver's
Signature

[Signature]

Date: 1/11/12 Emp# 19624 Title: COO

Employee Number: P23178

Trip Period from: 02/27/12 to 02/28/12

Name: Susan M Baer

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

-
- 01 Attach concurrence of the Chief Financial Officer (CFO)

 - 02 Attach written approval for domestic trip outside the self-approved regions
by the your Chief



REGISTRATION FORM

ARN 2012 REVENUE CONFERENCE & EXHIBITION
JW MARRIOTT GRANDE LAKES IN ORLANDO, FL. FEB. 26-28, 2012
HOSTED BY: AIRPORT REVENUE NEWS
WWW.2012CONFERENCE.AIRPORTREVENUENEWS.COM

REGISTRATION INFORMATION (Please print and use one form for each registrant. Copies accepted.)

NAME (Last, First, MI): BAER SUSAN M.

NAME ON BADGE: SUE BAER

TITLE: DIRECTOR, AVIATION DEPARTMENT JOB CATEGORY: _____

ORGANIZATION/COMPANY: THE PORT AUTHORITY OF NEW YORK & NEW JERSEY

MAILING ADDRESS: 225 PARK AVENUE SOUTH, 9TH FLOOR

CITY: NEW YORK STATE: NEW YORK ZIP: 10003

PHONE NO.: 212-435-3720 FAX NO.: 212-435-3833

E-MAIL: sbaer@panynj.gov

EMERGENCY CONTACT

NAME (Last, First, MI): MARTELLA, JOSEPH

PHONE NO.: _____ CELL NO.: _____

E-MAIL: _____

RATES

REGISTRATION FEE Subscriber \$725 (per person) Non-Subscriber \$950 (per person)

MULTIPLE (3 OR MORE)* Subscriber \$575 (per person) Non-Subscriber \$800 (per person)

ROOM RATE **\$189 + 16% tax (tax subject to change)** TOTAL NUMBER OF NIGHTS: _____
For additional nights, please contact Barb Moreno. AFTER January 21st, we will no longer guarantee room availability or room rates. Nights of: 2/26 2/27 2/28 3/1 AMOUNT: _____

SUBSCRIBE TO ARN** One Year \$150 Two Years \$275

AWARDS DINNER* Awards Dinner Only* \$100

AIRPORT TOUR*** I Will Attend

GOLF \$120 Club Rentals \$75 TOTAL: _____

*Please fill out a separate form for each attendee if only attending the awards dinner. **A new subscription will qualify you for the SUBSCRIBER rates. ***Details on the Airport Tour will follow.

PAYMENT OPTIONS

Check enclosed payable to: Airport Revenue News

If you intend to wire funds please contact
Beth Haulon at 561.477.3417 Ext. 124

Visa MasterCard

NAME ON CARD: _____

CARD NO.: _____

EXP. DATE: _____ CODE: _____

SIGNATURE: _____

FOR MORE INFORMATION

Barb Moreno
561.477.3417, Ext. 123
Fax: 561.228.0882
Email: barb@airportrevenue.com
www.airportrevenue.com
or www.2012conference.airportrevenue.com

Mail checks to
Airport Revenue News
4371 Northlake Blvd. #365
Palm Beach Gardens, FL 33410

CANCELLATION FEES

In the event of cancellation or no-shows, conference fees are refundable less a \$200 handling fee. No refunds on rooms are accepted after January 21st. All refunds will be made at the conclusion of the conference.



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 WWW.2012CONFERENCE.AIRPORTREVENUENEWS.COM

REGISTRATION INFORMATION (Please print and use one form for each registrant. Copies accepted.)

NAME (Last, First, MI): BAER SUSAN M.		
NAME ON BADGE: SUE BAER		
TITLE: DIRECTOR AVIATION	JOB CATEGORY:	
ORGANIZATION/COMPANY: THE PORT AUTHORITY OF NEW YORK & NEW JERSEY		
MAILING ADDRESS: 225 PARK AVENUE SOUTH, 9TH FLOOR		
CITY: NEW YORK	STATE: NY	ZIP: 10003
PHONE NO.: 212-435-3720	FAX NO.: 212-435-3833	
E-MAIL: sbaer@panynj.gov		

EMERGENCY CONTACT

NAME (Last, First, MI): MAETELLA JOSEPH	
PHONE NO.:	CELL NO.:
E-MAIL:	

RATES

REGISTRATION FEE	<input type="checkbox"/> Subscriber \$725 (per person) <input type="checkbox"/> Non-Subscriber \$950 (per person)	
MULTIPLE (3 OR MORE)*	<input type="checkbox"/> Subscriber \$575 (per person) <input type="checkbox"/> Non-Subscriber \$800 (per person)	
ROOM RATE	\$189 + 16% tax (tax subject to change)	TOTAL NUMBER OF NIGHTS:
For additional nights, please contact Barb Moreno. AFTER January 21st, we will no longer guarantee room availability or room rates.		AMOUNT:
Nights of: <input type="checkbox"/> 2/26 <input type="checkbox"/> 2/27 <input type="checkbox"/> 2/28 <input type="checkbox"/> 3/1		
SUBSCRIBE TO ARN**	<input type="checkbox"/> One Year \$150 <input type="checkbox"/> Two Years \$275	
AWARDS DINNER*	<input type="checkbox"/> Awards Dinner Only* \$100	
AIRPORT TOUR***	<input type="checkbox"/> I Will Attend	
GOLF	<input type="checkbox"/> \$120 <input type="checkbox"/> Club Rentals \$75	TOTAL:

*Please fill out a separate form for each attendee if only attending the awards dinner. **A new subscription will qualify you for the SUBSCRIBER rates.

***Details on the Airport Tour will follow.

PAYMENT OPTIONS

<input checked="" type="checkbox"/> Check enclosed payable to: Airport Revenue News
If you intend to wire funds please contact Beth Hanlon at 561.477.3417 Ext. 124
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
NAME ON CARD:
CARD NO.:
EXP. DATE:
SIGNATURE:

FOR MORE INFORMATION

Barb Moreno
 561.477.3417, Ext. 123
 Fax: 561.228.0882
 Email: barb@airportrevenue.com
 www.airportrevenue.com
 or www.2012conference.airportrevenue.com

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**Airport Revenue News a Division
of Urban Expositions LLC**

4371 Northlake Blvd #365
Palm Beach Gardens, FL 33410

**ARN 2012 Revenue Conference &
Exhibition**

Hosted by Airport Revenue News

**JW Marriott
Orlando, FL**

Feb. 26 - 28, 2012

1/11/2012

Bill To
Port Authority New York & New Jersey Susan Baer, Director Of Aviation 225 Park Ave South, 19th floor New York NY 10003

Description	Invoice #	Terms	Due Date
	2012081	Net 15	1/26/2012
	Qty	Rate	Amount
Director's Registration Fee	1	400.00	400.00
<p>Pay via wire: Contact Beth Hanlon at beth@airportrevenue.com</p> <p>Amex, Visa, Mastercard Acct. # _____ Exp. Date _____ Code _____</p> <p>Or make check payable in U.S. Dollars to: Urban Expositions, LLC 1690 Roberts Blvd, NW Suite 111 Kennesaw, GA 30144</p> <p>For Billing questions, please call Beth Hanlon at 561-477-3417, X 124 email: beth@airportrevenue.com</p>			
Total			\$400.00
Payments/Credits			\$0.00
Balance Due			\$400.00



Travel Arrangements for SUSAN M BAER

Record Locator NUZKBG
 Trip ID 11442769820
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: A0
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code 005 Ticket Date 1/17/2012
 Ticket Number 8737002018 Invoice 0052070
 Check Digt 2 Electronic Yes
 Billing Code F7C23178XXX285A01XXX

Charges

Ticket Base Fare 282.79
 Ticket Tax Fare 42.81
 Total (USD) Ticket Amount 325.60

 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002

 Total 360.60

Travel Details

Monday February 27, 2012

Flight Information

Airline	CONTINENTAL AIR	Estimated time	2 hours 47 minutes
Flight	1582	Distance	938 Miles
Origin	Newark, NJ	Meal Service	Food-bev/pur
Destination	Orlando Intl, FL	Plane	Boeing 737-800
Departing	6:15 AM		
Arriving	9:02 AM		
Departure Terminal	TERMINAL C		
Seat	22A		
Class	Coach		

Travel Details

Tuesday February 28, 2012

Flight Information

Airline	CONTINENTAL AIR	Estimated time	2 hours 36 minutes
Flight	1242	Distance	938 Miles
	OPERATED BY /UNITED AIRLINES		
Origin	Orlando Intl, FL	Meal Service	No Meal Service
Destination	Newark, NJ	Plane	Boeing 767-200
Departing	8:00 AM		
Arriving	10:36 AM		
Departure Terminal	CHECK-IN WITH CHECK IN WITH UNITED		
Arrival Terminal	TERMINAL C		
Seat	31F		
Class	Coach		



Travel Details

Wednesday June 27, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
CONTINENTAL AIR		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
LNTTL2	CONTINENTAL AIR

Additional Messages

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WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.

CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

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For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7898. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600466604. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

GUEST FOLIO



JW Marriott® Orlando Grande Lakes • 4040 Central Florida Parkway, Orlando, FL 32837 • 407.206.2300 • www.marriott.com/mcojw

16017	BAER/SUSAN	Rate	02/28/12	11:00	11413	5574
<small>Room</small>	<small>Name</small>		<small>Depart</small>	<small>Time</small>	ACCT#	GROUP
NDDL			02/27/12	09:37		
<small>Type</small>			<small>Arrive</small>	<small>Time</small>		
352						

<small>Room Clerk</small>	<small>Address</small>	<small>Payment</small>	<small>MRW#</small>
DATE			
02/27	ROOM TR	16017, 1	209.00
02/27	ROOM TAX	16017, 1	13.59
02/27	OCC TAX	16017, 1	12.54
02/28	AX CARD		\$235.13

TO BE SETTLED TO: AMERICAN EXPRESS CURRENT BALANCE .00

THANK YOU FOR CHOOSING THE JW MARRIOTT! TO EXPEDITE YOUR CHECK-OUT, PLEASE PRESS THE "MENU" BUTTON ON YOUR TV REMOTE CONTROL TO ACCESS VIDEO CHECK-OUT.

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
DDAMICO@PANYNJ.GOV
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

Mear's Trans GPP:
(0104)
27/02/12 09:36



(5616)
02/28/12 06:46

AUTH# 55930P
MAST
XXXXXXXXXXXX5093
ED:XXXX
108770

MAST XXXXXXXXXXXXXXX5093
ED:XXXX
#49017 AUTH# 41754

FARE: 34.00
TIP: 7.00
TOTAL: 41.00

FARE: 40.00
TIP: 12.00
TOTAL: \$60.00

X_____

X_____

Employee Number: P23178 Trip Period from: 03/09/12 to 03/09/12
 Name: Susan M Baer

Title: Dir Aviation Org: 285
 Telephone: 212-435-3720 Dir/Comm: Y
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing: N Trip Extension: N
 Outside TDO: N Type:

Purpose: Meeting with Deputy Secretary Pocari (DOT) and Patrick Foye via ACELA

Purpose Dates: 03/09/12 to 03/09/12
 Business Destination: Washington DC USA
 Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	450	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	50
Travel Sub-Total	450	Other Sub-Total	50
		Total Exp	500

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan Baer

Date: 3/7/12 Submitted: _____

Approver's
Signature

Susan Baer

Date: 3/7/12 Emp# 23178 Title: Director



Travel Arrangements for: SUSAN M BAER

Record Locator BGRXKK
 Trip ID 10693306012
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003

Agent ID: PG
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0064847
 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 387.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 387.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 422.00

Travel Details

Friday March 9, 2012

AMTRAKTICKETLESS-A

Rail Information

Carrier Amtrak
 Train 2107
 Origin NEWARK, PENN ST
 Destination WASHINGTON DC
 Departing 7:15 AM
 Arriving 9:47 AM

Seat Unassigned

Amtrak Information: AMTRAK 001KD BSNSS
 Amtrak Locator: 29EC9A

Rail Information

Carrier Amtrak
 Train 2168
 Origin WASHINGTON DC
 Destination NEWARK, PENN ST
 Departing 2:00 PM
 Arriving 4:29 PM

Seat Unassigned

Amtrak Information: AMTRAK 002K BSNSS
 Amtrak Locator: 29EC9A

Travel Details

Saturday July 7, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS



Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST

CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE

CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL

COLLECT 338-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR

CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS

WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

AMTRAK
 1
 Name of Passenger
 BAER/SUSAN M

From
 NEWARK PENN STA, NJ
 To
 WASHINGTON, DC
 Carrier Train Date
 2V 2107 09MAR12

Accom Space/Car
 KD EXPRSS BSNESS

Form of Payment AX145.00 1002
 Rail Fare \$145.00
 Accom Charge \$0.00
 Fare Plans Total \$145.00

DOAE
 Ticket Number 0673046582452 No. of 01 of 01
 Date of Issue 07MAR12 Reservation # 29EC9A

PASSENGER RECEIPT

AMTRAK
 1
 Name of Passenger
 BAER/SUSAN M

From
 WASHINGTON, DC
 To
 NEWARK PENN STA, NJ
 Carrier Train Date
 2V 2168 09MAR12

Accom Space/Car
 K EXPRSS BSNESS

Form of Payment AX242.00 1002
 Rail Fare \$242.00
 Accom Charge \$0.00
 Fare Plans Total \$242.00

KOAE
 Ticket Number 0673046582460 No. of 01 of 01
 Date of Issue 07MAR12 Reservation # 29EC9A

PASSENGER RECEIPT

PLAZA STATION 22
 Register 3 Sequence 0554
 Credit Card Purchase
 Account XXXXXXXXXXXXX8132
 BAER/SUSAN M
 From 06:31 March 9, 2012
 To 10:35 March 9, 2012
 Elapsed time: day(s),
 10 hour(s), 4 minute(s)
 For \$14.00

Thank you

tip 2.00
 16.00

lunch

Au Bon Pain

STORE #000125
 50 Mass Ave NE
 Washington DC 20001
 Ice Catering Specialists 800-765-4227

QUESTIONS - CONCERNS?
 Call us at 1 800 TALK ABP
 Visit us at our website:
<http://WWW.AUBONPAIN.COM>

Ticket #169419

2012-03-09 1:14 PM
 000125 6 26092 169419

PM Napa Chix Wrap 6.4
 FOR HERE 6.49
 Tax .65
 Amount Due \$7.14
 \$20 CASH \$20.00
 Change \$12.86

IN / OUT DC TRIP
 GRAND
 AB #276
 03/09/12 TR 5805
 START END MILES
 02:54 03:16 4.4
 FARE FOR EA RATE
 RATE 2: \$ 11.75
 EXTRA: \$ 2.50
 TOTAL: \$ 14.25
 THANKS
 DC TAXICAB COMM
 TEL 202 645-6018

tip 2.00
 16.25

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 172411

Employee Number: P23178 Trip Period from: 03/14/12 to 03/15/12
Name: Susan M Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Testing : N Trip Extension: N
Outside TDO: N Type:

Purpose: ATTEND MEETINGS WITH ACI MEMBERS

Purpose Dates: 03/14/12 to 03/15/12
Business Destination: Washington DC USA
Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	85
Auto	0	Registration	0
Bus	0	Lodging	375
Rail	450	Other	75
Travel Sub-Total	450	Other Sub-Total	535
		Total Exp	985

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: 3/12/12 Submitted: _____
Approver's Signature: Susan M Baer Date: 3/12/12 Emp# 23178 Title: Director



Travel Arrangements for SUSAN M BAER

Record Locator JYXJFD
 Trip ID 11207629113
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: M6
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0066149
 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 383.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 383.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 418.00

TOTAL AMTRAK FARE 383.00

Travel Details

Tuesday March 13, 2012

AMTRAKTICKETLESS-A

Travel Details

Wednesday March 14, 2012

Rail Information

Carrier Amtrak
 Train 2163
 Origin NEW YORK PENN
 Destination WASHINGTON DC
 Departing 3:00 PM
 Arriving 6:47 PM

Seat Unassigned

Amtrak Information: AMTRAK 001K BSNS

Amtrak Locator: 02C61F

Travel Details

Thursday March 15, 2012

Rail Information

Carrier Amtrak
 Train 178
 Origin WASHINGTON DC
 Destination NEWARK, NJ
 Departing 4:02 PM
 Arriving 8:56 PM

Seat Unassigned



Amtrak Information: AMTRAK 002YA COACH
Amtrak Locator: 02C61F

Travel Details

Wednesday January 30, 2013

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Hyatt Regency Washington on Capitol Hill
 400 New Jersey Avenue, NW
 Washington, D.C., USA 20001
 Tel: 202-737-1234
 Fax: 202-737-5773
 washingtonregency.hyatt.com

INFORMATION INVOICE

Payee Susan Baer
 225 Park Ave So
 9th Fl
 New York NY 10003
 United States

Room No. 0840
 Arrival 03-14-12
 Departure 03-15-12
 Page No. 1 of 1
 Invoice
 Folio No. W15620-1/1

Membership
 Bonus Code
 Confirmation No. 15620-1
 Group Name AAE

Date	Description	Charges	Credits
03-14-12	Group Room	299.00	
03-14-12	Occupancy Tax	43.36	
03-15-12	American Express		-342.36

Total	342.36	-342.36
Balance		0.00

Guest Signature

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. If I do not check out in the Lounge with a host, I authorize the hotel to process all charges incurred during the stay to the credit card I presented at the time of check-in.

Please direct any billing inquiries/concerns to:
 Email: na.customerservice@hyatt.com
 Phone: 1-888-472-2870

AMTRAK
 1 Name of Passenger
 BAER/SUSAN M

From
 NEW YORK PENN, NY
 To
 WASHINGTON, DC
 Carrier Train Date
 2V 2163 14MAR12

Accom Space/Car
 K EXPRESS BSNESS
 Form of Payment
 AX 242.00 1002
 Rail Fare \$242.00 Accom Charge \$0.00
 Fare Plans Total \$242.00
 KOAE
 Ticket Number 0739527616588 No. of 01
 Date of Issue 13MAR12 Reservation 2C61F
 PASSENGER RECEIPT

AMTRAK
 1 Name of Passenger
 BAER/SUSAN M

From
 WASHINGTON, DC
 To
 NEWARK AIRPORT, NJ
 Carrier Train Date
 2V 178 15MAR12

Accom Space/Car
 RESERVD COACH
 Form of Payment
 AX 141.00 1002
 Rail Fare \$141.00 Accom Charge \$0.00
 Fare Plans Total \$141.00
 JF9
 Ticket Number 739527616596 No. of 01
 Date of Issue 13MAR12 Reservation 2C61F
 PASSENGER RECEIPT

NEWARK 3866
 DRIVER: 421830
 MERCHANT COPY
 03/14/12 TR 5845
 START END MILES
 01:59 02:12 3.3
 Regular Fare
 RATE 1: \$ 10.50
 SURCH: \$ 0.00
 STSRCH: \$ 0.50
 TIP: \$ 2.20
 TOTAL: \$ 13.20

CARD TYPE: MAST
 XXXXXXXXXXXX0132
 AUTH: 042588
 115 Bureau
 Penn Station

Senate office
 building →
 restaurant
 DC TRIP / CAPPED
 COLUMBIA 112
 (202) 832-4662
 03/14/12 TR 2282
 START END MILES
 18:32 18:37 1.0
 FARE FOR EA RATE
 RATE 1: \$ 4.75
 EXTRA: \$ 2.50
 TOTAL: \$ 7.25
 THANKS
 DC TAXICAB COMM
 TEL 202 645-6018
 tip 2.00
 0.25

Dinner
 Zola
 800 F Street NW
 Washington, DC 20004
 Date: Mar14'12 09:00PM
 Card Type: Amex
 Acct #: XXXXXXXXXXXX4006
 Card Entry: SWIPED
 Trans Type: PURCHASE
 Auth Code: 521987
 Check: 8177
 Table: 203/1
 Server: 387 David M

Subtotal: 26.40
 Gratuity: 6.00
 Total: \$32.40

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

*** Guest Copy ***



TAXICAB RECEIPT

Time: 3/14/12
Date: _____

Origin of trip: Zola

Destination: Hotel - Hyatt Capital Hill

Fare: 13.50
2.00 tip
15.50 Sign: _____

ON CAPITOL HILL
ARTICLE ONE

5/2012 7:54

Article One

ck: 268172 Table: 70
ver: P.D. Guests: 9
minal: 23

- Rest Large Party
- 1 W&G Omelet 15.00
- 1 Steel Cut Oatmeal 8.00
- 1 Crab Omelet 18.00
- 1 W&G Omelet 15.00
- 1 Cage Free Eggs 14.00
- 1 Toast 4.00
- 1 Seasonal Fruits 7.00
- 1 Toast 4.00
- 1 Coffee 4.00
- 1 Juice 5.00

Subtotal 126.00
Gratuity 22.68
Tax 13.50

SALES DRAFT

Article One Bar
400 New Jersey Avenue, NW
Washington, DC 20001
202-737-1234

MERCH ID: 255596
CASHIER: Les B
TERMINAL: 21

American Express

NAME: BAER/SM
NUMBER: XXXXXXXXXXXX4006
EXPIRE: XX/XX
MTH: 588516
AMOUNT: 34.10

CHECK: 218806
BLE: _____

TOTAL: 34.10

GRATUITY: 6.00

TOTAL: \$40.10



TAXICAB RECEIPT

Time: 3/15
Date: _____

Origin of trip: DOT Headquarters

Destination: Hotel - Hyatt Capital Hill

Fare: 16.68 Sign: _____

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 172838

Employee Number: P23178 Trip Period from: 04/01/12 to 04/04/12
 Name: Susan M Baer

Title: Dir Aviation Org: 285
 Telephone: 212-435-3720 Dir/Comm: Y
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: Y or Business Clients: Y Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Trip Extension: N
 Outside TDO: N Testing: N Type:

Purpose: MEET WITH KEITH WILLIAMS, CEO, BRITISH AIRWAYS

Purpose Dates: 04/01/12 to 04/04/12
 Business Destination: London England
 Ticket Destination: London England

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	7,500	Meals	300
Auto	0	Registration	0
Bus	0	Lodging	1,600
Rail	0	Other	300
Travel Sub-Total	7,500	Other Sub-Total	2,200
		Total Exp	9,700

MULTIPLE EMPLOYEE LISTING

<u>Auth. Number</u>	<u>Employee ID</u>	<u>Org</u>	<u>Employee Name</u>
172984	P41466	284	James S Steven

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: 3/23/12 Submitted: _____

Approver's Signature: [Signature] Date: 3/23/12 Emp# 19624 Title: COO

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 04/01/12 to 04/04/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

01 Attach written approval by your Department Director for international trip.



Travel Arrangements for SUSAN M BAER

Record Locator ICIIDD
 Trip ID 11109410177
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: D6

Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code 125 Ticket Date 3/27/2012
 Ticket Number 7047945135 Invoice 0069161
 Check Digit 3 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 621.00
 Ticket Tax Fare 654.00
 Total (USD) Ticket Amount 1,275.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 1,310.00

Travel Details

Sunday April 1, 2012

THE FARE FOR THIS ITINERARY IS 1275.00 NONREFUNDABLE. DECLINED DELTA ROUNDTRIP FOR 1245.00. NEEDS TO BE BRITISH AIR OR BRITISH AIR CODESHARE FLIGHT DUE TO MEETINGS WITH BRITISH AIRWAYS.

Flight Information

Airline BRITISH AIRWAYS Estimated time 7 hours 10 minutes
 Flight 1511 Distance 3,452 Miles
 OPERATED BY AMERICAN AIRLINES
 Origin New York JFK, NY Meal Service Dinner/cont breakf
 Destination London Heathrow, UK Plane Boeing 777
 Departing 6:10 PM
 Arriving 6:20 AM
 Departure Terminal TERMINAL 8
 Arriving on April 2, 2012
 Arrival Terminal TERMINAL 3
 Seat 32E
 Class Economy

CENTER SEAT 32E
PREFERRED SEAT NOT AVAILABLE. RESERVED MIDDLE.

Travel Details

Wednesday April 4, 2012

Flight Information

Airline BRITISH AIRWAYS Estimated time 7 hours 55 minutes
 Flight 1588 Distance 3,452 Miles
 OPERATED BY AMERICAN AIRLINES
 Origin London Heathrow, UK Meal Service Lunch/snack
 Destination New York JFK, NY Plane Boeing 777
 Departing 12:35 PM



Arriving 3:30 PM
 Departure Terminal TERMINAL 3
 Arrival Terminal TERMINAL 8
 Seat 36G
 Class Economy

AISLE SEAT 36G

*****IMPORTANT VISA/PASSPORT SERVICE INFORMATION*****

A VALID PASSPORT IS REQUIRED FOR ALL INTERNATIONAL DESTINATIONS.
 ADDITIONAL DOCUMENTATION SUCH AS A VISA MAY ALSO BE REQUIRED.
 SOME COUNTRIES REQUIRE YOUR PASSPORT BE VALID FOR 6 MONTHS
 BEYOND YOUR INTENDED STAY. FOR ALL INTERNATIONAL TRAVEL
 DOCUMENTATION REQUIREMENTS AND TO OBTAIN SPECIAL NEGOTIATED RATES
 FOR AMERICAN EXPRESS CUSTOMERS PLEASE ACCESS
 WWW.TRAVISA.COM/AMERICANEXPRESS OR WWW.CIBT.COM/AMERICANEXPRESS

Travel Details

Thursday August 2, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
BRITISH AIRWAYS		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
6PYOS6	BRITISH AIRWAYS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844
 FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
 CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

 FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 336-291-0104, CODE S-9LVA
 NO CAR OR HOTEL REQUESTED
 PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
 WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
 PLEASE CHECK IN 2-3 HOURS PRIOR TO DEPARTURE
 DEPENDING ON AIRLINE AND DESTINATION. CONTACT
 AMERICAN EXPRESS FOR SPECIFIC CHECK-IN TIMES.
 CONTACT THE ABOVE NUMBER FOR COMPLETE
 TICKET RESTRICTIONS.
 TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
 NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
 SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
 SAME CARRIER
 AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022316-10.

Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600468894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

MELIÀ WHITE HOUSE

Ms Susan Baer
 225 Park Avenue South
 10003 New York
 United States

Room No.: 348
 Arrival: 02/04/12
 Departure: 04/04/12
 Conf No.: 6253040
 Date: 04/04/12
 Invoice No: 12025875
 Cashier No: 103
 Page No: 1 of 1

INVOICE

Date	Description	Debit	Credit
02/04/12	Accommodation & Breakfast	175.00	
02/04/12	Accommodation Supplement	35.00	
03/04/12	Accommodation & Breakfast	175.00	
03/04/12	Accommodation Supplement	35.00	
03/04/12	Accommodation VAT 20%	84.00	
04/04/12	American Express		504.00

	Net Amount GBP	VAT Amount GBP	Gross Amount GBP	Total GBP	504.00	504.00
VAT 20%	420.00	84.00	504.00	Balance GBP		0.00
Vat 15%	0.00	0.00	0.00			

Guest Signature _____

Merchant ID: 540436504179243	Credit Card #: XXXXXXXXXXXX4006
Transaction ID: 5785307	Credit Card Expiry: XX/XX
Approval Code: 19	Capture Method: Manual
Approval Amount: 504.00	Transaction Amount: 504.00

Melia White House at Regents Park is the trading name of Lomondo Limited. Reg. in England No. 2793825 VAT Reg. No. 626 7830 20

American Airlines

BOARDING PASS

NAME OF PASSENGER
BAER/SUSAN M
AA UK29002 ADV
TO NEW YORK JFK
FROM LONDON HEATHROW
AMERICAN AIRLINES

CARRIER FLIGHT CLASS DATE TIME
AA 100 H 01 APR 6 10P
SOLD AS BA 1511
DATE 3 BOARDING TIME SEAT NO
3 530P 21A NO

ADDITIONAL SEAT INFORMATION
PCR. CK. WT. UNCK. WT. SEC. NO. SEAT NO. SMOKE
GROUP 4
BAGGAGE ID NO.
COUPON AIRLINE FORM SERIAL NO. CK
410 /JFK

**AMERICAN AIRLINES
BOARDING PASS**

NAME OF PASSENGER
BAER/SUSAN M
AA UK29002 ADV
TO LONDON HEATHROW
FROM NEW YORK JFK
AMERICAN AIRLINES

CARRIER FLIGHT CLASS DATE TIME
AA 139 R 04 APR 150P
SOLD AS BA 1588
DATE 23 BOARDING TIME SEAT NO
23 105P 11A NO

ADDITIONAL SEAT INFORMATION
PCR. CK. WT. UNCK. WT. SEC. NO. SEAT NO. SMOKE
BAGGAGE ID NO.
COUPON AIRLINE FORM SERIAL NO. CK
570 /LHR

Hex Sgl

Single

Use By 04 APR 2012

Class Adult Child Fare
EXP 1 0 £ 19.00X
From Heathrow Express
To Paddington 38470

Thanks For Traveling With Heathrow Exp

02/04/2012 06:44 0080 1119

Heathrow → train station

**NOT VALID FOR TRAVEL
CREDIT/DEBIT CARD PAYMENT RECEIPT**

Heathrow Express Ltd
Sale £ 19.00X
American Express 371700****4006
Expiry 08/14
Start
Issue
Source Swiped
Merchant No. 9444750928
Transaction No. 23520

CARDHOLDER'S COPY
Debit my card account with the total amount
Please retain for your records

02/04/2012 06:44 0080 1119SMON

Time: 4/4/2012 10:09

EX 3717xxxxxxxx006
pires: 8/2014
th: 74

ater fare: 61.80
tras: 0.00
penses: 0.00
tality: 0.00
ndling charge: 7.72

TOTAL: 69.52

T Content: 1.29

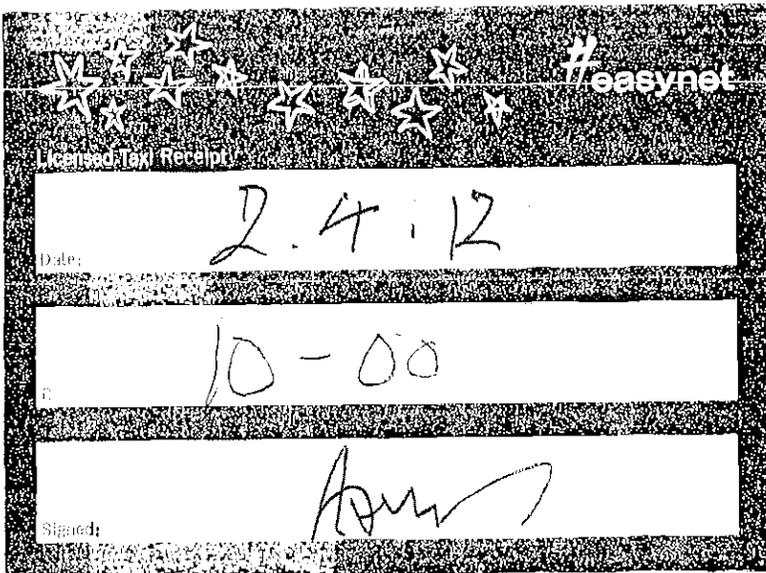
b number: 21406261

om NW1 to LAP

gnature:

Handling charge:
10.41x (Min: £0.00) levied on each Journey.
Charges include VAT.

Radio Taxis Group Ltd.
Mountview House
Lennox Road



CARLUCCIOS

70
t Christophers Place
American Express
71700XXXXXXXXX006
xpiry: 08/14
WIPED
ALE
Please debit my
account
mount: £27.85
tality: £5.00
TOTAL: £32.85

SIGNATURE VERIFIED

Please keep receipt
for your records
TID: 24929842
ID: 9427658372
ID: 25912602
ate: 02/04/2012
ime: 19:27:02
EFTSN: 6528
Authcode: 96



Transaction Details
 Prepared for
SUSAN M BAER
 Account Number
 XXXX-XXXXXX-34008
 AMP Gold Card / April 3, 2012 to April 6, 2012

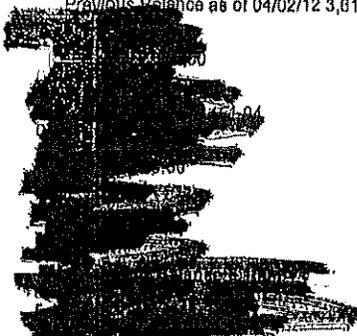
1 - 17 of 17 Transactions

Date	Foreign Spend	Description	Cardmember	Amount
04/09/2012	Fri			
04/05/2012	Thu			
04/05/2012	Thu ✓	RADIO TAXI 088 LOND LONDON GB	SUSAN M BAER	110.62
04/04/2012	Wed ✓	FOREIGN TRANSACTION FEE	SUSAN M BAER	0.30
04/04/2012	Wed ✓	FOREIGN TRANSACTION FEE	SUSAN M BAER	1.44
04/04/2012	Wed ✓	FOREIGN TRANSACTION FEE	SUSAN M BAER	4.00
04/04/2012	Wed ✓	FOREIGN TRANSACTION FEE	SUSAN M BAER	21.06
04/04/2012	Wed			
04/04/2012	Wed			
04/04/2012	Wed ✓	MELIA WHITE HOUSE LONDON GB	SUSAN M BAER	601.07
04/04/2012	Wed			
04/03/2012	Tue ✓	FOREIGN TRANSACTION FEE	SUSAN M BAER	0.82
04/03/2012	Tue ✓	HEATHROW EXPRESS OPE LONDON GB	SUSAN M BAER	30.62
04/02/2012	Mon ✓	CARLUCCIO'S ST CHRIS LONDON GB	SUSAN M BAER	62.60
04/02/2012	Mon ✓	FOREIGN TRANSACTION FEE	SUSAN M BAER	1.42
03/30/2012	Fri			
03/30/2012	Fri			

1 - 17 of 17 Transactions

Pay In Full Pay Over Time Total

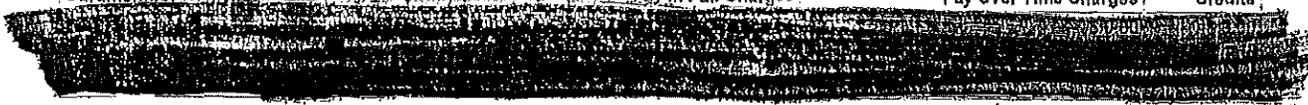
Previous Balance as of 04/02/12 3,616.40 3,616.40



This is a foreign currency transaction. Expand the transaction for foreign currency details.

Activity by Card

Cardmember Name	Payments	Pay In Full Charges	Pay Over Time Charges	Credits
-----------------	----------	---------------------	-----------------------	---------



The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 165824

Trip Period from: 10/18/10 to 10/21/10

Employee Number: P23178
Name: Susan M Baer

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N
International: N
Blanket Trip: N
Outside TDO: N

Org: 285
Dir/Comm: Y

Meeting with Government Agency reps
or Business Clients: Y
Conferences, Seminars, Training and
Testing: N

Travel Company Used: Y
Trip Extension: N
Type:

Purpose: PARTICIPATE IN THE FAAC MEETING AND THE SAFETY SUBCOMMITTEE MEETING

Reasons:

FAA

Purpose Dates: 10/18/10 to 10/21/10
Business Destination: Seattle WA USA
Ticket Destination: Seattle WA USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Auto	0	Registration	0
Rail	0	Other	150
Travel Sub-Total	1,000	Other Sub-Total	900
		Total Exp	1,900

MULTIPLE EMPLOYEE LISTING

Auth. Number	Employee ID	Org	Employee Name
165885	P40474	285	Patricia A Clark

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 10/4/10 Submitted: _____

Approver's
Signature

[Signature]

Date: 10/5/10 Emp# 19624 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator **K33RUCR**
 Trip ID **31253885631**
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003
PORT AUTHORITY

Agent ID: M7
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code **008** Ticket Date **10/6/2010**
 Ticket Number **7926434347** Invoice **0063841**
 Check Digit **2** Electronic **Yes**

Charges

Ticket Base Fare **203.26**
 Ticket Tax Fare **41.14**
 Total (USD) Ticket Amount **304.40**

Ticket Information

Airline Code **279** Ticket Date **10/6/2010**
 Ticket Number **7926434348** Invoice **0063842**
 Check Digit **3** Electronic **Yes**

Charges

Ticket Base Fare **92.09**
 Ticket Tax Fare **17.61**
 Total (USD) Ticket Amount **109.70**

Billing Code **F7C23178XXXX285A01XXX**

Airfare charged to American Express

Billing Account: **AX XXXXXXXXXXXX1002**

Total **414.10**

CAR RENTAL AND HOTEL DECLINED.

Travel Details

Monday October 18, 2010

Flight Information

Airline	DELTA AIR LINES	Estimated time	6 hours 28 minutes
Flight	1843	Distance	2,421 Miles
Origin	New York JFK, NY	Meal Service	Food for purchase
Destination	Seattle Tacoma, WA	Plane	Boeing 737
Departing	3:59 PM		
Arriving	7:27 PM		

Departure Terminal **TERMINAL 3**
 Seat **22A**
 Class **Economy**

Travel Details

Tuesday October 19, 2010

Flight Information

Airline	JET BLUE	Estimated time	2 hours 28 minutes
Flight	293	Distance	985 Miles
Origin	Seattle Tacoma, WA	Meal Service	No Meal Service
Destination	Long Beach, CA	Plane	Airbus A320
Departing	5:27 PM		
Arriving	7:55 PM		

Seat Unassigned
 Class O

CONFIRMED WINDOW SEAT 9F

Wednesday, October 20, 2010

Flight Information

Airline	DELTA AIR LINES	Estimated Time	5 hours 18 minutes
Flight	2382	Distance	2,476 Miles
Origin	Los Angeles, CA	Meal Service	No Meal Service
Destination	New York JFK, NY	Plane	Boeing 767-200
Departing	4:00 PM		
Arriving	12:18 AM		

Handwritten notes:
 9:30 PM 2867
 5:46 AM
 Susan M Baer

Departure Terminal TERMINAL 5
 Arriving on October 21, 2010
 Arrival Terminal TERMINAL 3
 Seat 28D
 Class Economy

Travel Details

Tuesday, February 15, 2011

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES	6013404874	SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
GWWWDT	DELTA AIR LINES
LWAZPI	JET BLUE

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
 CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
 WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
 PLEASE CHECK IN 60 MINUTES PRIOR TO DEPARTURE.

CONTACT THE ABOVE NUMBER FOR COMPLETE
 TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
 NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
 SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
 SAME CARRIER

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Travel Arrangements for SUSAN M BAER

Record Locator KYHJ...
 Trip ID 1121...
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: M7

Phone: / Fax: ..

Invoice Details

Ticket Information

Airline Code 008 Ticket Date 10/19/2010
 Ticket Number 7929508478 Invoice 0067730
 Check Digit 6 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 150.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 150.00
 Current Fare 304.40
 Prior ticket 0067928434347 credit -304.40
 Exchange Fee 150.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 150.00

CAR RENTAL AND HOTEL DECLINED.

Travel Details

Monday October 18, 2010

Flight Information

Airline	DELTA AIR LINES	Estimated time	6 hours 28 minutes
Flight	1843	Distance	2,421 Miles
Origin	New York JFK, NY	Meal Service	Food for purchase
Destination	Seattle Tacoma, WA	Plane	Boeing 737
Departing	3:59 PM		
Arriving	7:27 PM		
Departure Terminal	TERMINAL 3		
Seat	22A		
Class	Economy		

Travel Details

Tuesday October 19, 2010

Flight Information

Airline	JET BLUE	Estimated time	2 hours 28 minutes
Flight	293	Distance	965 Miles
Origin	Seattle Tacoma, WA	Meal Service	No Meal Service
Destination	Long Beach, CA	Plane	Airbus A320
Departing	5:27 PM		
Arriving	7:55 PM		
Seat	Unassigned		
Class	O		

CONFIRMED WINDOW SEAT 9F

Wednesday October 20, 2010

Flight Information

Airline	DELTA AIR LINES	Estimated time	5 hours 16 minutes
Flight	2862	Distance	2,475 Miles
Origin	Los Angeles, CA	Meal Service	No Meal Service
Destination	New York JFK, NY	Plane	Boeing 757-200
Departing	9:30 PM		
Arriving	5:46 AM		
Departure Terminal	TERMINAL 5		
Arriving on	October 21, 2010		
Seat	28F		
Class	Economy		

Tuesday February 16, 2011

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
GWWWDT	DELTA AIR LINES
LWAZPI	JET BLUE

Additional Messages

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FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

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CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

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CONTACT THE ABOVE NUMBER FOR COMPLETE

TICKET RESTRICTIONS.

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NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services

which is not refunded in any other manner by the seller of travel. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1182; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

THE *Fairmont*
OLYMPIC HOTEL

411 UNIVERSITY STREET
SEATTLE, WASHINGTON 98101
T 206 621 1700 F 206 682 9633

Room : 0327
Folio # : 326926
Cashier # : 257
Page # : 1 of 1

Susan Baer
225 Park Avenue South
9th Floor
New York, NY 10003
US

Arrival : 10-18-10
Departure : 10-19-10

Date	Description	Additional Information	Charges	Credits
10-18-10	In Room Dining <i>Dinner</i>	Room# 0327 : CHECK# 0031439	46.09	
10-18-10	Room Charge		229.00	
10-18-10	Room Tax - 15.6%		35.72	
10-19-10	Georgian Room <i>brkfst</i>	Room# 0327 : CHECK# 0011086	24.45	
10-19-10	American Express	XXXXXXXXXXXX2000 XX/XX		335.26
Total			335.26	335.26
Balance Due			0.00	

Guest signature X
For information or reservations, visit us at
www.fairmont.com or call Fairmont Hotels & Resorts from:
United States or Canada 1 800-441-1414

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, travel agent or association fails to pay for the full amount of the charges. Overdue balances subject to a surcharge at the rate of 1.5% per month (18.98% per annum). All accounts deemed delinquent may be subject to legal fees and all other costs associated with the bill. Account is payable on presentation or departure.

I have accepted delivery of The New York Times. Had I refused, I would have been eligible for a \$5.00 (Mon - Fri) and \$2.00 (Sat) credit to my account. (At participating hotels).

Thank you for choosing to stay with Fairmont Hotels & Resorts

AYRES HOTEL

AYRES HOTEL/MANHATTAN BEACH/CA

Ayres Hotel Manhattan Beach

14400 Hindry Avenue
Hawthorne, CA 90250
p. 310.536.0400 f. 310.536.7665
www.ayreshotels.com

Page 1 of 1

Susan Baer

Room	Folio	CheckIn	CheckOut	Balance
354	82156	10/19/2010	10/20/2010	0.00

Us

Room And Tax

Direct Bill: 129537253

Date	Room	Description / Voucher	Charges	Credits	Balance
10/19/2010	354	Restairant Charge - 781 - dinner	51.80	0.00	51.80
10/19/2010	354	Room Taxable	123.00	0.00	174.80
10/19/2010	354	Occupancy Tax - 12.000%	14.76	0.00	189.56
10/19/2010	354	CA Trade Assessment - 0.065%	0.08	0.00	189.64
10/20/2010	354	American Express - ...2000 AP: 160610	0.00	189.64	0.00
		Balance Due			0.00
Summary and Taxes					
		Taxable Sales			123.00
		Occupancy Tax 12.00%			14.76
		CA Trade Assessment 0.07%			0.08

Guest Signature:
Thank you for staying with us!

DELTA

BOARDING PASS

BOARDING PASS

BAER/SUSANM

1 006 7926434347 5
GWWWDT

BAER/SUSANM

UA07B3SY

FLIGHT DATE CLASS ORIGIN
DL 1843 18OCT U NYC-KENNEDY
OPERATED BY COACH DESTINATION
DELTA AIR LINES INC SEATTLE

DEPARTS
359P
BRD TIME
319P

SEAT
10A
ZONE 2



FLIGHT DATE
DL 1843 18OCT
ORIGIN
NYC-KENNEDY

SEAT
10A
ZONE 2

DESTINATION
SEATTLE
OPERATED BY DELTA AIR LINES INC

DEPARTURE GATE - SEE AIRPORT MONITORS

Terminal 3

M



JFK059F17/WW

JETBLUE AIRWAYS

NAME BAER/SUSAN M
19OCT
FQTV
FLIGHT 293
ET1 279 7926434348 6

GATE SEAT
A10 11F

SEQ040 DEP SEA 0527P
ARR LGB 0755P
BOARDING TIME 457P
E X I T

DELTA
BAER/SUSANM

BOARDING PASS

BOARDING PASS

1 006 7929508478 2
GWWWDT

BAER/SUSANM

FLIGHT DATE CLASS ORIGIN
DL2962 20OCT T LOS ANGELES
OPERATED BY COACH DESTINATION
DELTA AIR LINES INC NYC-KENNEDY

DEPARTS
930P
BRD TIME
850P

SEAT
20F
ZONE 4



FLIGHT DATE
DL2962 20OCT
ORIGIN
LOS ANGELES

SEAT
20F
ZONE 4

DESTINATION
NYC-KENNEDY
OPERATED BY DELTA AIR LINES INC

DEPARTURE GATE - SEE AIRPORT MONITORS

55A



(A) 34

LAX189234/KI

STITA TAXI
DATE: 18-10-2010
TIME: 20:29
MDT ID: 933
MADGE#: 12043

OG ID: 1762721
ETER: 3286

ROPOFF: 1004

YRE: 39.75
IPENSES I: 1.00 (0)
P: 9.00

TAL 49.75

ON SEATAC AIRPORT TO:

MASTERCARD
52621881***8132
04/11
AUTHORIZATION: 933063

SWIPE
CUSTOMER'S COPY

STITA TAXI 206.246.9999
WWW.STITATAXI.COM

From: FAA Pacific Region
To: LAX Headquarters

Driver: _____

Cab No.: _____

Date: 10/20/10 Amount: \$23.75
6.25
\$30.00

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 166655

Employee Number: P23178 Trip Period from: 11/17/10 to 11/18/10
Name: Susan N Baer

Title: Dir Aviation Org: 285
Telephone: 212-435-3720 Dir/Comm: Y
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps or Business Clients: Y Travel Company Used: Y
International: N Conferences, Seminars, Training and Teating : N Trip Extension: N
Blanket Trip: N
Outside TDO: N Type:

Purpose: Participate in the FAAC subcommittee meeting

Sponsor: FAA

Purpose Dates: 11/17/10 to 11/18/10

Business Destination: Washington DC USA

Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	105
Auto	0	Registration	0
Bus	0	Lodging	250
Rail	500	Other	50
Travel Sub-Total	500	Other Sub-Total	405
		Total Exp	905

No Flags Occurred

FEB 1 AM 9:42

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan Baer

Date: 11/16/10 Submitted: _____

Approver's
Signature

Susan Baer

Date: 11/16/10 Emp# 23178 Title: Director

Travel Arrangements for SUSAN M BAER

Record Locator FXLNOL
 Trip ID 10963430437
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: A0

Phone: / Fax:

Invoice Details

Ticket Information

Ticket Number Ticketclass Invoice 0075766
 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 450.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 450.00

Airfare charged to American Express

Billing Account: AX XXXXXXXXXXXX1002

Total 450.00

Travel Details

Tuesday November 16, 2010

AMTRAKTICKETLESS-A

Travel Details

Wednesday November 17, 2010

AMTRAK CONF 08C4EC FARE 450.00

Rail Information

Carrier Amtrak
 Train 2165
 Origin NEWARK NJ
 Destination WASHINGTON DC
 Departing 4:14 PM
 Arriving 6:49 PM

Seat Unassigned

Amtrak information: AMTRAK 001K BSNSS

Amtrak Locator: 08C4EC

Travel Details

Thursday November 18, 2010

Rail Information

Carrier Amtrak
 Train 2122
 Origin WASHINGTON DC
 Destination NEWARK NJ
 Departing 6:00 PM
 Arriving 7:28 PM

Seat Unassigned

Amtrak information: AMTRAK 002K BSNSS



Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844
FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-281-0104, CODE S-9LVA
YOUR AMTRAK TICKET HAS BEEN ADVANCED PAID.
PLEASE SHOW PROPER IDENTIFICATION UPON
ARRIVAL AT THE STATION.
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency



Washington Hilton

1919 Connecticut Ave. NW • Washington, DC 20009
 Phone (202) 483-3000 • Fax (202) 232-0438
 Reservations
 www.hilton.com or 1 800 HILTONS

Name & Address

BAER, SUSAN
 (Ex. 1)
 US

Room 7234/D2
 Arrival Date 11/17/2010 9:38:00PM
 Departure Date 11/18/2010 9:07:00AM
 Adult/Child 1/0
 Room Rate 181.00

RATE PLAN L-G1

HH#
 AL:
 CAR:

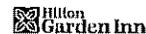
Folio

CONFIRMATION NUMBER : 3407710841

11/18/2010 PAGE 1

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
11/17/2010	TDL BAR	LINTR	7152425	\$23.80		
11/17/2010	GUEST ROOM	DIKOSSIE	7153268	\$181.00		
11/17/2010	ROOM TAX	DIKOSSIE	7153268	\$26.25		
11/18/2010	THE DISTRICT LINE	LINTR	7153948	\$26.10		
11/18/2010	AX *3008	PBUNDU	7153996		\$257.15	
	BALANCE					\$0.00
EXPENSE REPORT SUMMARY						
		11/17/10	11/18/10	STAY TOTAL		
ROOM & TAX	\$207.25	\$0.00	\$207.25			
FOOD & BEVERAGE	\$23.80	\$26.10	\$49.90			
DAILY TOTAL	\$231.05	\$26.10	\$257.15			

The Hilton Family



Official Sponsor

ACCOUNT NO.

CARD MEMBER NAME
AX *3008

ESTABLISHMENT NO. & LOCATION ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT
BAER, SUSAN

DATE OF CHARGE 11/17/10 9:38:00PM

FOLIO NO./CHECK NO. 1178010 A

AUTHORIZATION INITIAL

PURCHASES & SERVICES

520513

TAXES

TIPS & MISC.

TOTAL AMOUNT

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

PAYMENT DUE UPON RECEIPT

F

Register 3 sequenc
 Credit Card Purchase
 Account XXXXXXXXXXXX8 132
 From 15:23 November 17, 2010
 To 18:20 November 18, 2010
 Elapsed time: 1 day(s),
 2 hour(s), 57 minute(s)
 For \$43.00

Thank you

Riders Baggage

1
 Name of Passenger
BAER/SUSAN M

From
NEWARK PENN STA, NJ
 To
WASHINGTON, DC
 Carrier Train Date
2V 2165 17NOV10
 Accom Space/Car
K EXPRESS BSNESS

Form of Payment
AX225.00 1002
 Rail Fare **\$225.00** Accom Charge **\$0.00**
 Fare Plans Total **\$225.00**

KOAE
 Ticket Number **3209941056396** No. of **01**
 Date of Issue **16NOV10** Reservation # **8C4EC**

PASSENGER RECEIPT

Riders Baggage

1
 Name of Passenger
BAER/SUSAN M

From
WASHINGTON, DC
 To
NEWARK PENN STA, NJ
 Carrier Train Date
2V 148 18NOV10
 Accom Space/Car
Y RESERVD COACH

Form of Payment
EX147.00
 Rail Fare **\$147.00** Accom Charge **\$0.00**
 Fare Plans Total **\$147.00**

YOFC
 Ticket Number **3220590069564** No. of **01**
 Date of Issue **18NOV10** Reservation # **8C4EC**

PASSENGER RECEIPT



TAXI RECEIPT

Time: 7 0 am ~~pm~~ Date: 11/17

Origin of Trip: Union Station

Destination: Washington Hilton

Fare: \$15.00 (incl tip) Sign: _____

dcgoodsamaritan.com e-lost and Found
 If lost on earth, can be found in cyberspace

Riders Baggage

REFUND RECEIPT

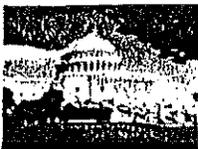
01 TIKTS RFD/ 3209941056404
 Name of Passenger

ORIG AMT PAID	225.00
USED PORTION	147.00
FORFEITED AMOUNT	0.00
EXC VOUCHER	0.00
REFUND FEE	7.80
CCR AX 1002	70.20

Form of Payment
 Rail Fare Accom Charge
 Fare Plans Total

AGENT: 0590
 Ticket Number **18NOV10/ 224P WAS** No. of **01**
 Date of Issue Reservation #

PASSENGER RECEIPT



TAXICAB RECEIPT

Time: 9 am
 Date: 11/18

Origin of trip: Washington Hilton

Destination: 1201 Pennsylvania Ave

Fare: \$14.00 (incl tip) Sign: _____



TAXICAB RECEIPT

Time: 1:50 pm
Date: 11/18

Origin of trip: 1201 PA Ave

Destination: Union Station

Fare: \$11.00 Sign: _____

Hotel Washington
Washington, DC
THE TRAVEL TIRE

CHECK: 234413
TABLE: 23241
SERVICE: 117 Yazoo St.
DATE: NOV 17 10 2013
CARD TYPE: American Express
ACCT #: XXXXXXXXXXX3008
EXP. DATE: XX/XX
CITY CODE: 622073
SM BBER

SUBTOTAL: 65.43
Gratuity: 12.55
Total: 77.98

Signature: [Handwritten Signature]

I agree to pay this total amount according to card holder agreement.
Beer & Liquor Prices include Tax

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 167505

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 12/14/10 to 12/15/10

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing : N Trip Extension: N
 Outside TDO: N Type:

Purpose: Attend the Final FAAC Meeting

Sponsor: FAA

Purpose Dates: 12/14/10 to 12/15/10
 Business Destination: Washington DC USA
 Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	100
Auto	0	Registration	0
Bus	0	Lodging	210
Rail	600	Other	100
Travel Sub-Total	600	Other Sub-Total	410
		Total Exp	1,010

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer

Date: 12-14-10 Submitted: _____

Approver's Signature: Susan Baer

Date: 12-14-10 Emp# 23178 Title: Director



Courtyard by Marriott
 Washington Capitol Hill
 Navy Yard

140 L St Se
 Washington Dc 20003
 T 202.479.0027

S. Baer
 (Ex. 1)

Room: 712
 Room Type: QNQN
 Number of Guests: 1
 Rate: \$181.00 Clerk:

Arrive: 14Dec10 Time: 08:25PM Depart: 15Dec10 Time: Folio Number: 70596

Date	Description	Charges	Credits
14Dec10	Restaurant Room Charge	29.60	
14Dec10	Room Charge	181.00	
14Dec10	Room Tax	26.25	
15Dec10	American Express		236.85

Card #: AXXXXXXXXXXXXXXXXX3008/XXXX
 Amount: 236.85 Auth: 547040 Signature on File
 This card was electronically swiped on 14Dec10

Balance: 0.00

Rewards Account # XXXXX8959. Your Rewards points/miles earned on your eligible earnings will be credited to your account. Check your Rewards Account Statement or your online Statement for updated activity.

Thank you for choosing the Courtyard Navy Yard for your visit to Washington, D.C.! If for any reason your stay was not "perfect", please contact the Front Office Manager, Whitney Miller at extension 7125 prior to checking out. Or you may email me at whitney.miller@cycapitolhill.com with any comments. Thank you for staying, and we look forward to seeing you again!

As requested, a final copy of your bill will be emailed to you at: PCLARK@PANYNJ.GOV. See "Internet Privacy Statement" on Marriott.com.

Travel Arrangements for SUSAN M BAER

Record Locator OFOCPP
 Trip ID 11477618685
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: L1

Phone: / Fax:

Invoice Details

Billing Code F7C23178XXX285A01

Billing Account:

1002

Travel Details

Tuesday December 14, 2010

AMTRAK TICKETLESS CONFIRMATION 085851-A

Rail Information

Carrier Amtrak
 Train 2187
 Origin NEWARK NJ
 Destination WASHINGTON DC
 Departing 5:14 PM
 Arriving 7:47 PM

Seat Unassigned

Amtrak Information: AMTRAK 001PK FIRST
 Amtrak Locator: 085851

Travel Details

Wednesday December 15, 2010

Rail Information

Carrier Amtrak
 Train 2172
 Origin WASHINGTON DC
 Destination NEWARK NJ
 Departing 4:00 PM
 Arriving 6:29 PM

Seat Unassigned

Amtrak Information: AMTRAK 002K BSNS
 Amtrak Locator: 085851

Travel Details

Monday October 10, 2011

**THANK YOU FOR CHOOSING AMERICAN EXPRESS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844
 FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE



CALL 800-872-3057. IDENTIFY YOUR CODE AS 6-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE 6-9LVA
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Older  Baggage

Name of Passenger
AER/SUSAN M

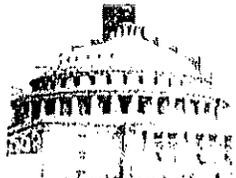
Older  Baggage

Name of Passenger
AER/SUSAN M

From
NEWARK PENN STA, NJ
To
WASHINGTON, DC
Carrier Train Date
2V
2167 14DEC10
Accom Space/Car
PK
EXPRESS FIRST
Form of Payment
AX327.00 1002
Rail Rate
\$225.00 Accom Charge
\$102.00
Fare Plans Total
\$327.00
OAE
Ticket Number No. of
483105044692 01 01
Date of Issue Reservation #
4DEC10 85851
PASSENGER RECEIPT

From
WASHINGTON, DC
To
NEWARK PENN STA, NJ
Carrier Train Date
2V
2172 15DEC10
Accom Space/Car
K
EXPRSS BSNESS
Form of Payment
AX225.00 1002
Rail Rate
\$225.00 Accom Charge
\$.00
Fare Plans Total
\$225.00
OAE
Ticket Number No. of
483105044700 01 01
Date of Issue Reservation #
4DEC10 85851
PASSENGER RECEIPT

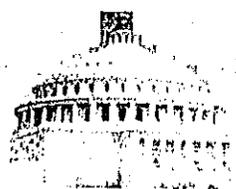
Register 3 Sequence 7010
Credit Card Purchase
Account XXXXXXXXXXXX3008
From 16:02 December 14, 2010
To 18:42 December 15, 2010
Elapsed time: 1 day(s),
2 hour(s), 40 minute(s)
For \$38.00
Thank you



TAXICAB RECEIPT

Time: _____
Date: 12/14

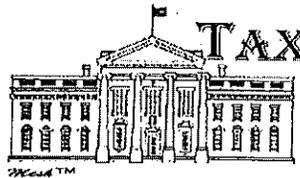
Origin of trip: Union Station
Destination: Courtyard Marriott
Fare: \$16.00 Sign: _____



TAXICAB RECEIPT

Time: _____
Date: 12/15

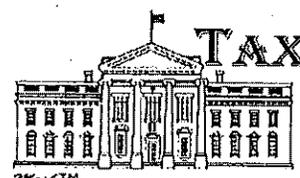
Origin of trip: Courtyard Marriott
Destination: Hay-Adams Hotel
Fare: \$20.00 Sign: _____



TAXICAB RECEIPT

Time: _____
Date: 12/15

Origin of trip: Hay Adams Hotel
Destination: DOT Headquarters
Fare: \$13.00 Sign: _____



TAXICAB RECEIPT

Time: _____
Date: 12/15

Origin of trip: Marriott Courtyard
Destination: Union Station
Fare: \$14.00 Sign: _____

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 167614

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 02/11/11 to 02/11/11

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps or Business Clients: Y
International: N
Blanket Trip: N Conferences, Seminars, Training and Testing: N
Outside TDO: N
Org: 285
Dir/Comm: 2011 MAR 10 AM 11:00
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: Participate in the RTCA meeting

Purpose Dates: 02/11/11 to 02/11/11
Business Destination: Washington DC USA
Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

Travel	Amount	Other	Amount
Air	900	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	75
Travel Sub-Total	900	Other Sub-Total	75
		Total Exp	975

MULTIPLE EMPLOYEE LISTING

Auth. Number	Employee ID	Org	Employee Name
	P40474	285	Patricia A Clark

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: _____ Submitted: _____

Approver's
Signature

Chris B...

Date: 1/25/11 Emp# 19424 Title: COO

Mr. Taliano

1/28/11 23299 CFO

Travel Arrangements for SUSAN M BAER

Record Locator KKFEVL
 Trip ID 11243634961
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: EH
 Phone: / Fax: ..

Invoice Details

Ticket Information

Airline Code 006 Ticket Date 1/28/2011
 Ticket Number 7952790259 Invoice 0092832
 Check Digit 4 Electronic Yes

Charges

Ticket Base Fare 287.21
 Ticket Tax Fare 32.24
 Total (USD) Ticket Amount 319.45

Ticket Information

Airline Code 006 Ticket Date 1/28/2011
 Ticket Number 7952790261 Invoice 0092834
 Check Digit 6 Electronic Yes

Charges

Ticket Base Fare 140.47
 Ticket Tax Fare 21.84
 Total (USD) Ticket Amount 170.31

Billing Code F7C23178XXXX285A01XXX

Airfare charged to American Express

Billing Account: AX XXXXXXXXXXXX1002

Total 489.76

ROUND-TRIP NONREFUNDABLE FARE,.....489.76

Travel Details

Friday February 11, 2011

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 10 minutes
 Flight 5901 Distance 214 Miles
 OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE
 Origin New York Lga, NY Meal Service No Meal Service
 Destination Washington Reagan, DC Plane Embraer 175
 Departing 8:29 AM
 Arriving 7:39 AM

Departure Terminal TERMINAL A
 Arrival Terminal TERMINAL B
 Seat Unassigned
 Class Coach

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 10 minutes
 Flight 5916 Distance 214 Miles
 OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE
 Origin Washington Reagan, DC Meal Service No Meal Service
 Destination New York Lga, NY Plane Embraer 175
 Departing 1:30 PM
 Arriving 2:40 PM



Departure Terminal	TERMINAL B
Arrival Terminal	TERMINAL A
Seat	Unassigned
Class	Coach

Travel Details Saturday June 11, 2011

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
HJM69Y	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE,
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts or omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 8001, Larkspur, CA 94977-8001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

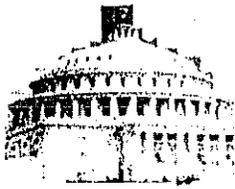
Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

View Boarding Pass

DELTA		BOARDING PASS			
BAER/SUSANM		1 006 7952790259 0	HJM69Y		
DL6913404874					
FLIGHT	DATE	CLASS	ORIGIN	DEPARTS	SEAT Y
DL5901	11FEB	Q	NYC-LAGUARDIA	629A	
OPERATED BY	COACH	DESTINATION		BRD TIME	ZONE 2
SHUTTLE AMERICA		WASHINGTON-REAG		549A	
DEPARTURE GATE	**SUBJECT TO CHANGE**				
					
LGA1BB93A/WW					

TAXICAB RECEIPT



Time: _____
Date: 2-16-11

Origin of trip: _____

Destination: _____

Fare: 18.00 Sign: [Signature]

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 167879

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 03/01/11 to 03/02/11

Title: Dir Aviation Org: 285
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Trip Extension: N
Outside TDC: N Testing : N Type:

Purpose: MC the Awards Dinner

Sponsor: ARN

Purpose Dates: 03/01/11 to 03/02/11
Business Destination: National Harbor MD USA
Ticket Destination: National Harbor MD USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	450	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	100
Travel Sub-Total	450	Other Sub-Total	100
		Total Exp	550

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: *Susan M Baer* Date: 2/8/11 Submitted: _____

Approver's Signature: *[Signature]* Date: 2/15/11 Emp# 192624 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator DAJYVQ
 Trip ID 10803788118
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: K0
 Phone: / Fax:

Itinerary Details

Itinerary Only

Travel Details

Tuesday March 1, 2011

Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 13 minutes
Flight	6917	Distance	214 Miles
	OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE		
Origin	New York Lga, NY	Meal Service	No Meal Service
Destination	Washington Reagan, DC	Plane	Embraer 175
Departing	2:30 PM		
Arriving	3:43 PM		
Departure Terminal	TERMINAL A		
Arrival Terminal	TERMINAL B		
Seat	Unassigned		
Class	Coach		

Travel Details

Wednesday March 2, 2011

Flight Information

Airline	DELTA AIR LINES	Estimated time	1 hour 14 minutes
Flight	6910	Distance	214 Miles
	OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE		
Origin	Washington Reagan, DC	Meal Service	No Meal Service
Destination	New York Lga, NY	Plane	Embraer 175
Departing	10:30 AM		
Arriving	11:44 AM		
Departure Terminal	TERMINAL B		
Arrival Terminal	TERMINAL A		
Seat	Unassigned		
Class	Coach		

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
F8ORVD	DELTA AIR LINES



Additional Messages

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FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
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CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
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FARE IS NOT GUARANTEED UNTIL TICKETED.
CONTACT THE ABOVE NUMBER FOR COMPLETE
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For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800468694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1182; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency



BAER/SUSANM

BOARDING PASS
1 006 7958319657 0
F8ORVD

DL6913404874

FLIGHT DATE CLASS ORIGIN DEPARTS
DL5917 01MAR K NYC-LAGUARDIA 230P
OPERATED BY SHUTTLE AMERICA
DEPARTURE GATE **SUBJECT TO CHANGE**

SEAT
Y
ZONE 2



LGA1B4A18/WH



BAER/SUSANM

BOARDING PASS

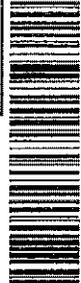
2 006 7958319657 3
F8ORVD

DL6913404874

K7SHPLN

FLIGHT DATE CLASS ORIGIN DEPARTS
DL5910 02MAR K WASHINGTON-REAG1030A
OPERATED BY SHUTTLE AMERICA
DEPARTURE GATE 22 **SUBJECT TO CHANGE**

SEAT
Y
ZONE 2



SEQ NO
021



DCA054314/KI

BOARDING PASS

BAER/SUSANM

DL6913404874

FLIGHT DATE CLASS ORIGIN DEPARTS
DL5910 02MAR K WASHINGTON-REAG1030A
OPERATED BY SHUTTLE AMERICA
DEPARTURE GATE 22 **SUBJECT TO CHANGE**

SEAT
Y
ZONE 2

SEQ NO
021

03/02/11

08:24

SALES DRAFT

Pienza
Gaylord National
Waterfront Street,
National Harbor, MD 20745

ID: 000000000044109312
SER: Patricia
INAL: 100

American Express

BAER/SM

R: XXXXXXXXXXXXX3008

E: XX/XX

520507

AMOUNT: 16.43

CHECK: 1052332

TABLE: 83

TOTAL: 16.43

4.00

20.43

to pay the above total
according to my card
agreement.

Susan Bae
SIGNATURE

Customer Copy



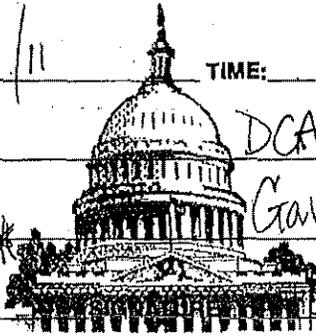
Taxi Cab Receipt

DATE: 3/1/11 TIME: _____

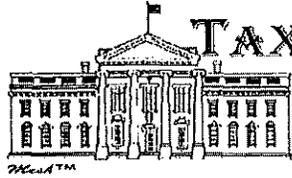
TRIP ORIGIN: _____ DCA

DESTINATION: _____ Gaylord

FARE: \$ _____



*taxi driver
got very lost
& charged
less than fare



TAXICAB RECEIPT

Time: 3/1/11

Date: _____

Origin of trip: Gaylord

Destination: DCA

Fare: \$40.00 +
6.00 tip Sign: _____

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 168750

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 06/14/11 to 06/15/11

2011 JUN 29 AM 10:45

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209

Org:
 Dir/Comm:

Account Code: 1000 X 556001 285A01 A01101000

Spouse/Guest: N Meeting with Government Agency reps
 or Business Clients:

International: N

Blanket Trip: N Conferences, Seminars, Training and
 Outside TDO: N Testing :

Travel Company Used: Y
 Trip Extension: N
 Type:

Purpose: PARTICIPATE IN THE RTCA SYMPOSIUM

Sponsor: RTCA

Purpose Dates: 06/14/11 to 06/15/11

Business Destination: Washington DC USA

Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	600	Meals	60
Auto	0	Registration	0
Bus	0	Lodging	275
Rail	0	Other	75
Travel Sub-Total	600	Other Sub-Total	410
		Total Exp	1,010

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
 Signature

Susan M Baer

Date: 5/4/11 Submitted: _____

Approver's
 Signature

C. J. [Signature]

Date: 5/10/11 Emp# 19624 Title: COO

Travel Arrangements for SUSAN M BAER

Record Locator BLCSPY
 Trip ID 10700906966
 PORT AUTHORITY
 226 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: D6
 Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 008 Ticket Date 5/17/2011
 Ticket Number 8852880932 Invoice 0123748
 Check Digit 3 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 372.10
 Ticket Tax Fare 49.30
 Total (USD) Ticket Amount 421.40

Airfare charged to American Express

Billing Account: AX XXXXXXXXXXXX1002

Total 421.40

Travel Details

Tuesday June 14, 2011

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 21 minutes
 Flight 5921 Distance 214 Miles
 OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE
 Origin New York Lga, NY Meal Service No Meal Service
 Destination Washington Reagan, DC Plane Embraer 175
 Departing 4:30 PM
 Arriving 8:51 PM
 Departure Terminal TERMINAL A
 Arrival Terminal TERMINAL B
 Seat Unassigned
 Class Coach

AIRLINE DOES NOT PRE-ASSIGN SEATS.

Travel Details

Wednesday June 15, 2011

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 30 minutes
 Flight 5928 Distance 214 Miles
 OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE
 Origin Washington Reagan, DC Meal Service No Meal Service
 Destination New York Lga, NY Plane Embraer 175
 Departing 7:30 PM
 Arriving 9:00 PM
 Departure Terminal TERMINAL B
 Arrival Terminal TERMINAL A
 Seat Unassigned
 Class Coach

AIRLINE DOES NOT PRE-ASSIGN SEATS.

Travel Details

Wednesday October 12, 2011

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
GNX4W5	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

NO CAR OR HOTEL REQUESTED

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CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
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CONTACT THE ABOVE NUMBER FOR COMPLETE

TICKET RESTRICTIONS.

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NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

D'amico, Debbie

From: Hampton Confirmed [hampton@res.hilton.com]
Sent: Wednesday, May 04, 2011 2:43 PM
To: D'amico, Debbie
Subject: Hampton Confirmation #83074134

Follow Up Flag: Follow up
Due By: Monday, May 30, 2011 9:00 AM
Flag Status: Flagged

Your reservation is confirmed



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Hampton Inn Washington, DC- Convention Center

901 6th Street., NW
Washington, DC
United States, 20001
Tel: 1 202-842-2500
Fax: 1 202-842-4100

[Directions to Hotel](#)

[5-Day Weather Forecast](#)

[Local Guide](#)

Confirmation Number: 83074134

> [Click here](#) to view or edit your reservation.

Name: Susan Baer
Arrival Date: 14 Jun 2011
Departure Date: 15 Jun 2011
Check-in Time: 4:00 PM
Check-out Time: 12:00 PM

Rate Information:

Rate Type: RTCA Annual Symposiu
Rate per night: 239.00 USD
Total for Stay per Room:
Rate 239.00 USD
Taxes 34.66 USD
Total 273.66 USD

Total for Stay: 273.66 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: 34.00/night

Rate Rules and Cancellation Policy:
• Your reservation is guaranteed for late arrival.
• Please contact us should you need to cancel your reservation
• Cancellations are required by 4PM on 13 Jun 2011 local hotel time.
• Cancellation penalties may apply.

Room Information:

Rooms: 1
Clients: 1 Adult
Room Type: 2 QUEEN BEDS NONSMOKING

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Official Sponsor

View Boarding Pass



BAER/SUSANM

BOARDING PASS
1 006 8652960932 6
GNX4W5

DL6913404874
L14SHPLN

FLIGHT	DATE	CLASS	ORIGIN	DEPARTS
DL5921	14JUN	L	NYC-LAGUARDIA	430P
OPERATED BY		COACH		
SHUTTLE AMERICA			DESTINATION	BRD TIME
			WASHINGTON-REAG	350P
DEPARTURE GATE	**SUBJECT TO CHANGE**			



LGA1B4A21/WW



BAER/SUSANM

DL6913404874
L14SHPLN

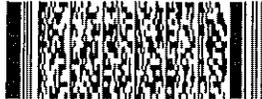
BOARDING PASS

2 006 8652960932 2
GNX4W5

FLIGHT	DATE	CLASS	ORIGIN	DEPARTS
DL5928	15JUN	L	WASHINGTON-R	730P
OPERATED BY		COACH	DESTINATION	BRD TIME
SHUTTLE AMERICA			NYC-LAGUARDI	650P

DEPARTURE GATE 22 **SUBJECT TO CHANGE**

SEQ NO
046



DCA1A0913 R

BOARDING PASS

BAER/SUSANM

DL6913404874

SEAT
Y
ZONE 2

FLIGHT	DATE
DL5928	15JUN
ORIGIN	
WASHINGTON-R	

DESTINATION	
NYC-LAGUARDI	
OPERATED BY	SHUTTLE AMERICA

SEAT
Y
ZONE 2

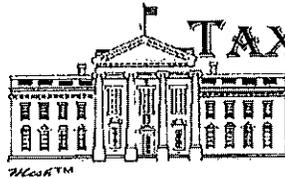
SEQ NO
046



Blue Top Cab Receipt

Date 6/14 Time 7:15
 From DCA
 To Hampton Inn
 Run # _____ Fare \$ 16.45
 Cab # _____ Signature 3.65

703/243-TAXI 520.00



TAXICAB RECEIPT

Time: 6:15 PM
 Date: 6/15
 Origin of trip: Washington Convention Center
 Destination: DCA
 Fare: \$18.25 Sign: _____
3.75 \$22.00



STORE MGR DAN CLARKSON 202-719-2435
THANK YOU FOR SHOPPING WITH US!

DELI

0.32 lb @ \$5.99 /lb
WT SALAD BAR SMALL 1.92
SUSHI CA ROLL RICE 5.99
INARI SUSHI 4.99

LIQUOR

VF NOBILO SAUV BLANC 15.99

MISCELLANEOUS

2 @ .05
MR DSPSBL BAG CHARGE .10
**** TAX 1.64 BAL 32.63
VF DEBIT CARD 32.63
CHANGE .00

NUMBER OF ITEMS = 4

6/14/11 19:29 2737 01 0446 0893

TOTAL SAVINGS COULD BE APPROX \$ 7.00

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WASHINGTON, D.C. 20001
202-719-2435

EFT DEBIT SALE 06/14/11 19:29
CARD # 8132 PRIMARY
TOTAL TRANSACTION AMOUNT 32.63

REF:110614192944

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 168106

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 06/21/11 to 06/22/11

ACCOUNTS PAYABLE

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209

11 JUL -1 AM 10:29
Org: 285
Dir/Comm: Y

Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing: N

Travel Company Used: Y
Trip Extension: N
Type:

Purpose: Meet with the Unitd Airlines Executive Staff

Purpose Dates: 06/21/11 to 06/22/11
Business Destination: Chicago IL USA
Ticket Destination: Chicago IL USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	1,500	Meals	300
Auto	0	Registration	0
Bus	0	Lodging	975
Rail	0	Other	225
Travel Sub-Total	1,500	Other Sub-Total	1,500
		Total Exp	3,000

MULTIPLE EMPLOYEE LISTING

<u>Auth. Number</u>	<u>Employee ID</u>	<u>Org</u>	<u>Employee Name</u>
168385	P33541	285	David A Kagan
168383	P24096	321	John S Jacoby

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature Susan M Baer

Date: 5/4/11 Submitted: _____

Approver's
Signature Cathy B...

Date: 5/10/11 Emp# 19624 Title: COU

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 168106

Employee Number: P23178

Trip Period from: 06/21/11 to 06/22/11

Name: Susan M Baer

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

- 01 Attach written approval for domestic trip outside the self-approved regions
by the your Chief



Travel Arrangements for SUSAN M BAER

Record Locator DYFJSD
Trip ID 10043892717
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003
PORT AUTHORITY

Agent ID: CD
Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 016 Ticket Date 5/17/2011
Ticket Number 8663221785 Invoice 0123869
Check Digit 6 Electronic Yes
Billing Code F7C23178XXX285A01XXX

Charges

Ticket Base Fare 202.80
Ticket Tax Fare 36.60
Total (USD) Ticket Amount 239.40

Airfare charged to American Express
Billing Account: AX XXXXXXXXXXXX1002

Total 239.40

Travel Details

Tuesday June 21, 2011

Flight Information

Airline UNITED AIRLINES
Flight 301
Origin New York Lga, NY
Destination Chicago O'Hare, IL
Departing 4:00 PM
Arriving 5:30 PM

Estimated time 2 hours 38 minutes
Distance 733 Miles
Meal Service No Meal Service
Plane Airbus A319

Departure Terminal TERMINAL B
Arrival Terminal TERMINAL 1
Seat 26F
Class Economy

CAR NOT NEEDED OR REQUESTED
HOTEL NOT NEEDED OR REQUESTED

Travel Details

Wednesday June 22, 2011

Flight Information

Airline UNITED AIRLINES
Flight 627
Origin Chicago O'Hare, IL
Destination New York Lga, NY
Departing 4:00 PM
Arriving 7:15 PM

Estimated time 2 hours 16 minutes
Distance 733 Miles
Meal Service No Meal Service
Plane Airbus A319

Departure Terminal TERMINAL 1
Arrival Terminal TERMINAL B
Seat 23A
Class Economy



Travel Details

Wednesday April 11, 2012

THANK YOU FOR CALLING AMERICAN EXPRESS BUSINESS TRAVEL.

Loyalty Programs

Vendor	Account	Traveler
UNITED AIRLINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
PDL8KY	UNITED AIRLINES

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: IA# 002 Registered Iowa Travel Agency

BAER/SUSANM

CO ES965464

UA 649 JUN 21
FROM NYC/LAGUARDIA
TO CHICAGO/OHARE

GATE C11
DEPARTS AT 5:00 PM

GIVE FEEDBACK - WWW.UALSURVEY.COM

SEAT 11A

Y-CABIN

016 8653221785 



Boarding Pass

<p>UNITED  Economy</p> <p>BAER, SUSANM</p> <p>CO ES965464</p> <p>United 627 / Jun 22</p> <p>From: Chicago, IL (ORD) To: New York City, NY (LGA)</p> <p>Seating 2</p> <p>Seat 23A</p> <p>Boards at: 3:30 PM Departs at: 4:00 PM</p> <p>Gate: B14</p>  	<p>BAER, SUSANM</p> <p>CO ES965464</p> <p>United 627 / Jun 22</p> <p>From: Chicago, IL (ORD) To: New York City, NY (LGA)</p> <p>Boards at: 3:30 PM Departs at: 4:00 PM</p> <p>Seat 23A</p> <p>Cabin: United Economy</p>
---	---



san Baer

07043

W #: 1510147

You have Checked Out of Room 1051

Description	Amount
21 Guest Room	\$279.00
21 Occupancy Tax	\$42.94
22 - BISTRO At 151 Breakfast	\$24.81
22 American Express	\$346.75CR

Balance: \$0.00

I: *****4006

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qualitychicago@hyatt.com or 312-565-1234

Billing: christopher.service@hyatt.com or
312-565-1234 ext. 4620 and an Accounting
Customer Service Agent will assist you.
Lost and Found E-mail:
mike.pattson@hyatt.com.

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6/22/2011 9:19:49 AM

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Auth# 168174

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 07/11/11 to 07/11/11

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing: N
Org: 285
Dir/Comm: 11 AUG -3 AM 8:38
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: PARTICIPATE IN THE WOMEN IN LEADERSHIP EVENT

Sponsor: BOMBARDIER

Purpose Dates: 07/11/11 to 07/11/11

Business Destination: Pittsburgh PA USA
Ticket Destination: Pittsburgh PA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	450	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	50
Travel Sub-Total	450	Other Sub-Total	50
		Total Exp	500

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
Signature

Susan M Baer

Date: 5/5/11 Submitted: _____

Approver's
Signature

[Signature]

Date: 5/10/11 Emp# 19624 Title: COO

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 168174

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 07/11/11 to 07/11/11

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

- 01 Attach written approval for domestic trip outside the self-approved regions
by the your Chief



Travel Arrangements for SUSAN M BAER

Record Locator MZKJMH
Trip ID 11390000985
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003
PORT AUTHORITY

Agent ID: EH
Phone: / Fax:

Invoice Details

Ticket Information

Airline Code 037 Ticket Date 6/21/2011
Ticket Number 8662096084 Invoice 0006904
Check Digit 0 Electronic Yes
Billing Code F7C23178XXX265A01XXX

Charges

Ticket Base Fare 472.55
Ticket Tax Fare 56.86
Total (USD) Ticket Amount 529.40

Airfare charged to American Express

Billing Account: AX XXXXXXXXXXXX1002

Total 529.40

ROUND-TRIP NONREFUNDABLE FARE,.....529.40

Travel Details

Monday July 11, 2011

Flight Information

Airline US AIRWAYS Estimated time 1 hour 30 minutes
Flight 3720 Distance 336 Miles
OPERATED BY US AIRWAYS EXPRESS-AIR WISCONSIN
Origin New York Lga, NY Meal Service No Meal Service
Destination Pittsburgh, PA Plane Canadair RegionalJet
Departing 7:59 AM
Arriving 9:29 AM
Departure Terminal TERMINAL C
Seat 10A
Class Coach

Flight Information

Airline US AIRWAYS Estimated time 1 hour 36 minutes
Flight 3516 Distance 336 Miles
OPERATED BY US AIRWAYS EXPRESS-TRANSSTATES AIRLINES
Origin Pittsburgh, PA Meal Service No Meal Service
Destination New York Lga, NY Plane Embraer 145 Jet
Departing 5:45 PM
Arriving 7:20 PM
Arrival Terminal TERMINAL C
Seat 6A
Class Economy



Travel Details

Saturday January 7, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
US AIRWAYS		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
FS6M73	US AIRWAYS

Additional Messages

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ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

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For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 102231B-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600468894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

 U.S AIRWAYS

BAER/SUSANM
US FLIGHT: 3720 11JUL

NEW YORK LAGUARDIA
PITTSBURGH

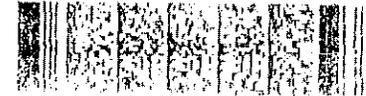
API OK E-TICKET

SEAT: 10A

FS6M73/US

SEQ 67

ZONE 3



BAER/SUSANM
CONF: FS6M73/US ZONE 3
FFD: ES965464CO
NEW YORK LAGUARDIA
PITTSBURGH
FLIGHT DEPARTS DATE
3720 759A 11JUL

GATE BOARD TIME SEAT
B26 515P 6A

 U.S AIRWAYS

BAER/SUSANM
US FLIGHT: 3516 11JUL

PITTSBURGH
NEW YORK LAGUARDIA

API OK E-TICKET

SEAT: 6A

FS6M73/US

SEQ 19

ZONE 4



BAER/SUSANM
CONF: FS6M73/US ZONE 4
FFD: ES965464CO
PITTSBURGH
NEW YORK LAGUARDIA
FLIGHT DEPARTS DATE
3516 545P 11JUL

GATE BOARD TIME SEAT
B26 515P 6A

SUNOCO # 7741

NOCC North
BOX #405 MP 41.
SECON, NJ 08201
R#: H334E532B1001

1/16/11 15:04:08

mp#: 14 /Full
cashier: 45
product: 1Regular
gallons 13.106
/Gal \$ 3.613
Fuel Sale \$ 47.43
Total Sale \$ 47.43

XXXXXXXXXXXX0132
C

Trans# 087628
Approval# 854205

173128s224c:4
THANK YOU FOR

Atlantic City
Convention Center
Parking Garage
RECEIPT K22

ENTRY TIME:
08/16/11 10:00
EXIT TIME:
08/16/11 14:21
PARK-DUR.: HRS:MIN
0:04:21
AMOUNT:
\$ 14.00

KIND OF PAYMENT:
CASH
TICKET-TYPE:
VALID BETWEEN:
AMOUNT:
\$ 14.00
08/16/11 14:21

THANK YOU FOR YOUR
VISIT

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 169803

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 08/16/11 to 08/16/11

ACCOUNTS RECEIVABLE

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps or Business Clients: N
International: N
Blanket Trip: N Conferences, Seminars, Training and Testing: Y
Outside TDO: N
Org: 285
Dir/Comm: Y
Travel Company Used: N
Trip Extension: N
Type:

11 NOV 14 AM 9:54

Purpose: KEYNOTE SPEAKER AT THE 53RD ANNUAL NEC AAAE CONFERENCE

Sponsor: NEC

Purpose Dates: 08/16/11 to 08/16/11
Business Destination: Atlantic City NJ USA
Ticket Destination: Atlantic City NJ USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	0
Travel Sub-Total	0	Other Sub-Total	0
		Total Exp	0

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer Date: 6/27/11 Submitted: _____

Approver's Signature: [Signature] Date: 6/27/11 Emp# 19624 Title: COO

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 169803

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 08/16/11 to 08/16/11

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

01 Attach concurrence of the Chief Financial Officer (CFO)



Travel Arrangements for SUSAN M BAER

Record Locator HCUHBS
 Trip ID 11049502520
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: LR
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code 006 Ticket Date 9/8/2011
 Ticket Number 8880119856 Invoice 0023308
 Check Dglt 5 Electronic Yes
 Billing Code F7C23178XXX285A01XXX

Charges

Ticket Base Fare 418.60
 Ticket Tax Fare 52.80
 Total (USD) Ticket Amount 471.40
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 508.40

FARE IS 471.40 NONREFUNDABLE TICKET BY 7SEP

Travel Details

Tuesday September 27, 2011

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 20 minutes
 Flight 5911 Distance 214 Miles
 OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE
 Origin New York Lga, NY Meal Service No Meal Service
 Destination Washington Reagan, DC Plane Embraer 175
 Departing 11:30 AM
 Arriving 12:50 PM
 Departure Terminal TERMINAL A
 Arrival Terminal TERMINAL B
 Seat AIRPORT CHECK IN
 Class Coach

Travel Details

Thursday September 29, 2011

Flight Information

Airline DELTA AIR LINES Estimated time 1 hour 16 minutes
 Flight 5924 Distance 214 Miles
 OPERATED BY SHUTTLE AMERICA-DL CONNECTION-DL SHUTTLE
 Origin Washington Reagan, DC Meal Service No Meal Service
 Destination New York Lga, NY Plane Embraer 175
 Departing 5:30 PM
 Arriving 6:46 PM
 Departure Terminal TERMINAL B



Arrival Terminal TERMINAL A
Seat AIRPORT CHECK IN
Class Coach

Travel Details

Friday January 27, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
DELTA AIR LINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
G84DAA	DELTA AIR LINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844
FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-281-0104, CODE S-9LVA
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.
TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER
AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to
include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

255 BAER/SUSAN/MS 211.00 09/29/11 12:00 7199
 Room Name Rate Depart Time ACCT#
 SK THE PORT AUTHORITY 0 09/27/11 14:43
 Type Arrive Time

4

Room Address Payment MRW#:
 Clerk

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
09/27	ROOM	255, 1	211.00	
09/27	ROOMTAX	255, 1	30.60	
09/28	ATRIUM	9598 255	22.75	
09/28	ROOM	255, 1	211.00	
09/28	ROOMTAX	255, 1	30.60	
09/29	AX CARD			505.95

TO BE SETTLED TO: AMERICAN EXPRESS CURRENT BALANCE .00

TO EXPEDITE YOUR CHECK OUT, PLEASE USE OUR VOICE MAIL
 CHECK OUT SERVICE AT EXTENSION 6931.
 THANK YOU FOR STAYING AT THE WASHINGTON MARRIOTT.

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

09/27	ROOM&TAX	241.60
09/28	ATRIUM	22.75
	ROOM&TAX	241.60

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
 DDAMICO@PANYNJ.GOV
 SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

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 checkout, you will owe us interest from the checkout 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 _____



BOARDING PASS

U.S AIRWAYS

BAER/SUSANM

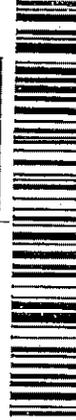
1 006 8680119856 1
G84DAA

6913404874

SHPLN

FLIGHT DATE CLASS ORIGIN DEPARTS
5913 27SEP L NYC-LAGUARDIA 1230P
OPERATED BY COACH DESTINATION BRD TIME
DELTA AMERICA WASHINGTON-REAG 1150

SEAT
Y
ZONE 2



BAER/SUSANM

CONF: BHSCMK/US ZONE 5

FFD: WASHINGTON - DCA

NEW YORK LAGUARDIA

FLIGHT DEPARTS DATE
2180 500P 29SEP
Gate Boarding Time Seat

GATE BOARD TIME SEAT
40 430P 14E

DEPARTURE GATE SH5 **SUBJECT TO CHANGE**

AD

SEQ NO
017



LGA035324/HV

KING CAB CO.

ALEXANDRIA, VA.

PH: 703-549-3530

FROM DCA Airport
TO Washington Marriott
DATE 9/27 FARE \$ 18.75 + 3.25 tip
\$ 22.00
DRIVER'S NAME CAB#



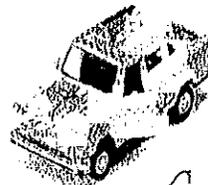
TAXICAB RECEIPT

Time: _____
Date: 9/27
Origin of trip: Washington Marriott
Destination: Washington Convention Center
Fare: 8.75
1.25
10.00
Sign: _____



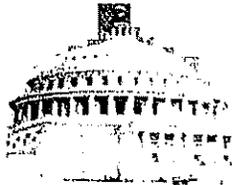
TAXICAB RECEIPT

Time: _____
Date: 9/27
Origin of trip: Convention Center
Destination: Washington Marriott
Fare: 12.00
Sign: _____



TAXICAB RECEIPT

Time: _____
Date: 9/27
Origin of trip: Smithsonian Air & Space
Destination: Washington Marriott
Fare: 11.00
Sign: _____



TAXICAB RECEIPT

Time: 9/28
Date: _____

Origin of trip: Washington Marriott

Destination: Penn Ave + 12th St. -

Fare: 11.50 Sign: _____
1.75 TIP
13.25

lunch meeting

*FAA Headquarters
to
Cosmos Club*

DC TRIP / CAPPED
D. ABEBE CAB
CAB # 249
09/28/11 TR 9286
START END MILES
15:30 15:44 3.8
FARE FOR FA RATE
RATE \$ 9.15
EXTRA: \$ 1.00
TOTAL: \$ 10.75

THANKS
DC TAXICAB COMM
TEL 202 645-6018

*tip 1.50
4-12.25*



TAXI CAB RECEIPT

DATE 9/28 TIME 9:10

ORIGIN Cosmos Club CAB # _____

DESTINATION Marriott

FARE: \$ 7.30 + SIGNATURE _____
1.00 TIP
8.30

*RTCA to
Washington National
Airport*

TAXI FARE RECEIPT

DIAMOND CAB
1100 Q ST., N.W.
WASHINGTON, DC 20009



387-5200

24 HOUR RADIO DISPATCH

CAB NO. 818 ID. NO. 57145

SIGNED [Signature] DATE 9/29

TRIP ORIGIN _____

DESTINATION _____

FARE 9.22

*hotel -> Smithsonian
Reception*

DC FLYER CAB
TAXI # 47

09/27/11 06:32P

09/27/11 06:47P

TRIP # 4426

DIST 2.57 mi

Rate 1 \$ 8.50

EXTRAS \$ 1.00

TOTAL \$ 9.50

COMPLAINTS CALL

202 645 6018

HAVE A NICE DAY!

*1.50 tip
11.00*

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization Trip Authorization 173837

Employee Number: P23178 Trip Period from: 05/23/12 to 05/24/12
 Name: Susan M Baer

Title: Dir Aviation Org: 285
 Telephone: 212-435-3720 12 AUG 21 AM 9:15 Dir/Comm: Y
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps or Business Clients: Y Travel Company Used: Y
 International: N
 Blanket Trip: N Conferences, Seminars, Training and Testing: N Trip Extension: N
 Outside TDO: N Type:

Purpose: PARTICIPATE IN THE NAC MEETING

Sponsor: NAC

Purpose Dates: 05/23/12 to 05/24/12
 Business Destination: Seattle WA USA
 Ticket Destination: Seattle WA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	1,250	Meals	100
Auto	0	Registration	0
Bus	0	Lodging	250
Rail	0	Other	100
Travel Sub-Total	1,250	Other Sub-Total	450
		Total Exp	1,700

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer Date: 5/17/12 Submitted: _____

Approver's Signature: St. Maurice Edwards Date: 5/17/2012 Emp# 40183 Title: Acting COO

Employee Number: P23178

Trip Period from: 05/23/12 to 05/24/12

Name: Susan M Baer

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

-
- 01 Attach written approval for domestic trip outside the self-approved regions
by the your Chief



Travel Arrangements for SUSAN M BAER

Record Locator PKPTVR
Trip ID 11646461847
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: CD

Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code 279 **Ticket Date** 5/18/2012
Ticket Number 7062018388 **Invoice** 0081011
Check Digit 6 **Electronic** Yes
Billing Code F7C23178XXX285A01XXX

Charges

Ticket Base Fare 754.42
Ticket Tax Fare 78.18
Total (USD) Ticket Amount 832.60

Transaction Fee 35.00
Airfare charged to American Express
Billing Account: AX XXXXXXXXXXXX1002

Total 867.60

Travel Details

Wednesday May 23, 2012

Flight Information

Airline	JET BLUE	Estimated time	5 hours 58 minutes
Flight	175	Distance	2,421 Miles
Origin	New York JFK, NY	Meal Service	No Meal Service
Destination	Seattle Tacoma, WA	Plane	Airbus A320
Departing	10:35 AM		
Arriving	1:33 PM		
Departure Terminal	TERMINAL 5		
Seat	17E		
Class	Economy		

CAR NOT NEEDED OR REQUESTED
HOTEL NOT NEEDED OR REQUESTED

Travel Details

Thursday May 24, 2012

Flight Information

Airline	JET BLUE	Estimated time	5 hours 18 minutes
Flight	82	Distance	2,421 Miles
Origin	Seattle Tacoma, WA	Meal Service	No Meal Service
Destination	New York JFK, NY	Plane	Airbus A320
Departing	9:40 PM		
Arriving	5:58 AM		
Arriving on	May 25, 2012		
Arrival Terminal	TERMINAL 5		
Seat	AIRPORT CHECK IN		
Class	Economy		



SEAT ASSIGNED AT AIRPORT CHECK IN ONLY

Travel Details

Saturday April 13, 2013

THANK YOU FOR CALLING AMERICAN EXPRESS BUSINESS TRAVEL.

Loyalty Programs

Vendor	Account	Traveler
JET BLUE		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
DQXRAM	JET BLUE

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3067. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.

CONTACT THE ABOVE NUMBER FOR COMPLETE
TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

jetBlue
AIRWAYS

BOARDING PASS

jetBlue
AIRWAYS

Name
SUSAN M BAER

TrueBlue number
AAUK29002

WCI SEQ
49

Name
SUSAN M BAER

From
New York - John F. Kennedy, NY(JFK)

To
Seattle, WA(SEA)

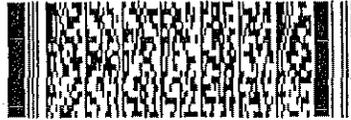
From/To
JFK/SEA

Date	Time	Flight	Class	Seat	Gate
23 MAY 12	10:35 AM	B6 175	Q	6A	15

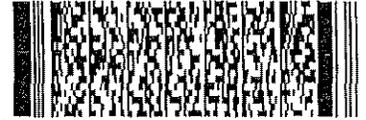
Date	Time
23 MAY 12	10:35 AM

Boarding time	PNR	E-Ticket
10:05 AM	DQXRAM	2797062018386

Flight	Class	Seat
B6 175	Q	6A



GATE CLOSES 15 MINUTES BEFORE DEPARTURE.
GATE ASSIGNMENTS ARE SUBJECT TO CHANGE. PLEASE
RECONFIRM THE GATE ASSIGNMENT AT THE AIRPORT.



jetBlue

NAME BAER/SUSAN M
DATE 24MAY
FQTV UK29002



DQXRAM BOARDING TIME

910P

FLT B6 82 SEATTLE, WA
NEW YORK, NY

OK TO BOARD
SEQ145

GATE A10 SEAT 06D

E - T I C K E T
2797062018386
BOARDING PASS SEAK01

jetBlue

NAME BAER/SUSAN M
DATE 24MAY
FQTV UK29002
FLT B6 82
ET2797062018386

SEAK01
GATE SEAT

A10 06D

SEQ145 DEP SEA 940P
ARR JFK 535A
BOARDING TIME 910P

THE *Fairmont*
OLYMPIC HOTEL

411 University Street
Seattle, Washington 98101
T 206 621 1700 F 206 682 9633

Room : 0304
Folio # : 441555
Cashier # : 7
Page # : 1 of 1

Group Name Next Generation Advisory Committee

Boeing Customer Relations
Susan Baer
225 Park Avenue South
9th Floor
New York, NY 10003
US

Arrival : 05-23-12
Departure : 05-24-12

Date	Description	Additional Information	Charges	Credits
05-23-12	Room Charge		177.00	
05-23-12	Room Tax - 15.6%		27.61	
05-23-12	Seattle Tourism Assessment		2.00	
05-24-12	American Express	XXXXXXXXXXXX4006		206.61
Total			206.61	206.61
Balance Due			0.00	

Thank you for choosing Fairmont Hotels & Resorts.
To provide feedback about your stay please contact Dennis Clark, General Manager, at Dennis.ClarkGM@Fairmont.com.
We also invite you to share memories of your experience on our community forum - visit www.everyonesanoriginal.com.

For information or reservations, visit us at
www.fairmont.com or call Fairmont Hotels & Resorts from:
United States or Canada 1 800-441-1414

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, travel agent or association fails to pay for the full amount of the charges. Overdue balance subject to a surcharge at the rate of 1.5% per month (18.56% per annum). All accounts deemed delinquent may be subject to legal fees and all other costs associated with the bill. Account is payable on presentation or departure.

I have accepted delivery of The New York Times. Had I refused, I would have been eligible for a \$3.50 (Mon - Sat) and \$2.00 (Sun) credit to my account. (At participating hotels).

Thank you for choosing to stay with Fairmont Hotels & Resorts

The
The Fairmont Olympic Hotel
411 University
atle, Washington
206) 821-1700



ECK: 1405
BLE: 181/3
RVER: 3013 Vicente
TE: MAY24'12 7:47PM
RD TYPE: American Express
CT #: XXXXXXXXXXXX4006
P DATE: XX/XX
TH CODE: 560322
SM BAER

(206) 824-6300

1052 Ma. Luz

Chk 1763 May24'12 08:57P Gst 0

1 TURKEY WRAP 5.49
1 SM WATER 1.69
Cash 20.00

SUBTOTAL: 14.24

SUBTOTAL 7.18
TAX 0.68
AMOUNT PAID 7.86
Change Due 12.14

Signature: _____

I agree to pay
amount according to _____

THANK YOU!

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 06/04/12 to 06/05/12

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing : Y
 Outside TDO: N Testing : N
 Org: 285
 Dir/Comm: Y
 Travel Company Used: Y
 Trip Extension: N
 Type:

Purpose: Attend meeting with RTCA Advisory Committee

Purpose Dates: 06/04/12 to 06/05/12
 Business Destination: Washington DC USA
 Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	85
Auto	0	Registration	0
Bus	0	Lodging	380
Rail	350	Other	100
Travel Sub-Total	350	Other Sub-Total	565
		Total Exp	915

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
 Signature

Susan M Baer

Date: 6-4-12 Submitted: _____

Approver's
 Signature

Susan M Baer

Date: 6-4-12 Emp# 23178 Title: DIRECTOR, AVIATION



Travel Arrangements for SUSAN M BAER

Record Locator KWXSUG
 Trip ID 11264648264
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: D6
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0084289
 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 216.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 216.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 251.00

A PHOTO ID IS REQUIRED FOR TRAVEL
 RESERVATIONS MUST BE CANCELLED IF NOT TRAVELING
 PENALTIES APPLY
 YOU NEED TO PICK-UP THE PAPER TICKET FROM THE
 KIOSK AT THE TRAIN STATION BEFORE BOARDING
 THE TRAIN.
 ACCOMMODATION CHARGE MAY BE FORFEITED
 JOIN GUEST REWARDS AT WWW.AMTRAK.COM

Travel Details

Monday June 4, 2012

AMTRAKTICKETLESS-A

THE AMTRAK FARE IS 216.00. FARES ARE ALWAYS SUBJECT TO CHANGE.

Rail Information

Carrier Amtrak
 Train 137
 Origin NEWARK, PENN ST
 Destination WASHINGTON DC
 Departing 8:41 PM
 Arriving 9:42 PM

Seat Unassigned

Amtrak Information: AMTRAK 001YE COACH

Amtrak Locator: 081FD6

AMTRAK CONFIRMATION...081FD6

Travel Details

Tuesday June 5, 2012

Rail Information



Carrier Amtrak
Train 148
Origin WASHINGTON DC
Destination NEWARK, PENN ST
Departing 3:02 PM
Arriving 8:10 PM

Seat Unassigned

Amtrak Information: AMTRAK 002YA COACH

Amtrak Locator: 081FD6

AMTRAK CONFIRMATION...081FD6

Travel Details

Wednesday October 3, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 338-291-0104, CODE S-9LVA

NO CAR OR HOTEL REQUESTED

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS

WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.
AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10.

Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600468694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency



901 6th Street NW • Washington, DC 20001
 Phone (202) 842-2500 • Fax (202) 842-4100



BAER, SUSAN (Ex. 1) US	name address	room number: 304/KXLE arrival date: 6/4/2012 9:24:00PM departure date: 6/5/2012 adult/child: 1/0 room rate: \$329.00	If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.
------------------------------	-----------------	--	---

Confirmation: 81046142 6/5/2012 PAGE 1	RATE PLAN LV1 HH# 721544085 BLUE AL CAR BONUS AL
---	---

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. I have requested weekday delivery of USA TODAY. If refused, a credit of \$0.75 will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by checking here:

signature: _____

date	reference	description	amount
6/4/2012	1461879	GUEST ROOM	\$329.00
6/4/2012	1461879	ROOM TAXES	\$47.71
		WILL BE SETTLED TO AX *4006	\$376.71
		EFFECTIVE BALANCE OF	\$0.00

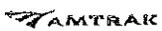
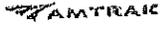
You have earned approximately 3290 Hilton HHonors points for this stay. Visit HHonors.com to check your point balance from stays at any of the 3,700 hotels within the Hilton Worldwide portfolio.

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

for reservations call 1.800.hampton or visit us online at hampton.com thanks.

account no.	date of charge	folio/check no.
card member name	authorization	296543 A initial
establishment no. and location <small>establishment agrees to transmit to card holder for payment</small>	purchases & services	
	taxes	
	tips & misc.	
signature of card member X	total amount	0.00



Riders  Baggage Riders  Baggage
 1 BAER/SUSAN M 1 BAER/SUSAN M

(From) NEWARK PENN STA, NJ
 WASHINGTON, DC
 2V^{Yr} Train 193 Date 04JUN12

WASHINGTON, DC
 NEWARK PENN STA, NJ
 2V^{Yr} Train 94 Date 05JUN12

AOB Space/Car YB RESERVD COACH
 Form of Payment EX88.00IK33.00 8132
 Rail Fare \$113.00 Accom Charges \$0.00
 Fare Plans Total \$113.00

AOB Space/Car YA RESERVD COACH
 Form of Payment EX136.00
 Rail Fare \$136.00 Accom Charges \$0.00
 Fare Plans Total \$136.00

AOF1
 Ticket Number 566529618174 01 01
 Date of Issue 04JUN12 81FDB

AOF1
 Ticket Number 1575984574400 01 01
 Date of Issue 05JUN12 81FDB

PASSENGER RECEIPT

PASSENGER RECEIPT

Au Bon Pain
 STORE #000125
 50 Mass Ave. NE
 Washington DC 20001
 Ice Catering Specialists 800-765-4227

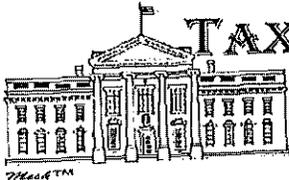
QUESTIONS - CONCERNS?
 Call us at 1 800 TALK ABP
 Visit us at our website:
<http://WWW.AUBONPAIN.COM>



TAXICAB RECEIPT

Time: 9:20 pm
 Date: 6/4/12

Origin of trip: Union Station
 Destination: Hampton Inn
 Fare: \$8.75
 Tip: 1.25



TAXICAB RECEIPT

Time: 6/5/12
 Date:

Origin of trip: Hampton Inn
 Destination: FAA Headquarters
 Fare: 11.65
 Tip: 1.35

Ticket #155732
 2012-06-04 9:02 PM
 000125 5 15 155732

16.9 oz Spring Water	1.89
Assorted Nuts	1.99
PM Thai Chix Wrap	6.19
HERB CC PORTIONS	2.99
DR HERE	13.06
ix	1.31
Amount Due	\$14.37
CREDIT	\$14.37
Change	\$0.00

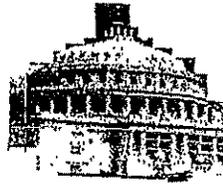
ABP GUEST CONNECTION SWEEPSTAKES

Complete the guest survey:
 YOU COULD WIN \$2,000

Visit:
www.abpsurvey.com

All completed entries must be received by last day of month to be included in monthly drawing.
 Sweepstakes open to legal US residents 18 years and older.
 ABP employees and immediate family not eligible.
 No purchase necessary.
 Void where prohibited.
 For complete rules visit abpsurvey.com

Au Bon Pain
STORE #000125
50 Mass Ave NE
Washington DC 20001
Office Catering Specialists 800-765-4227



TAXICAB RECEIPT

Time: _____

Date: 6/5/12

Origin of trip: FAA Headquarters

Destination: Union Station

Fare: 10.55 Sign: _____

tip 1.45

QUESTIONS - CONCERNS?
Call us at 1 800 TALK ABP
Visit us at our website:
<http://WWW.AUBONPAIN.COM>

Ticket #163579

2-06-05 1:45 PM
000125 6 85 163579

Choc Covered Almonds	2.19
Choc Coverd Macarron	1.69
Napa Chix Wrap	6.49
CHEDDAR PORTIONS	2.99

HERE	13.36
TAX	1.34
Amount Due	\$14.70

CREDIT	\$14.70
Change	\$0.00

GUEST CONNECTION SWEEPSTAKES

Complete the guest survey:
YOU COULD WIN \$2,000

Visit:
www.abpsurvey.com

Completed entries must be received
last day of month to be included in
monthly drawing.
Sweepstakes open to legal US residents
18 years and older.
Employees and immediate family
not eligible.
Purchase necessary.
Void where prohibited.
For complete rules visit abpsurvey.com

LAZA STATION 22

Register 3 Sequence 5453
Credit Card Purchase
Account XXXXXXXXXXXXX8132
From 17:32 June 4, 2012
To 17:06 June 5, 2012
Elapsed time: day(s),
23 hour(s), 34 minute(s)
For \$20.00

Thank you



Travel Arrangements for SUSAN M BAER

Record Locator EWFDDBG
 Trip ID 10900991276
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003
 PORT AUTHORITY

Agent ID: M7

Phone: .. / Fax: ..

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0086216
 Electronic Yes

Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 308.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 308.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXXX1002
 Total 341.00

CAR RENTAL AND HOTEL DECLINED.

Travel Details

Thursday June 14, 2012

AMTRAK ELECTONIC TICKET CONFIRMATION NUMBER 12BE90-A

Rail Information

Carrier Amtrak
 Train 85
 Origin NEWARK, PENN ST
 Destination WASHINGTON DC
 Departing 3:22 PM
 Arriving 6:25 PM
 Seat Unassigned

Amtrak Information: AMTRAK 001Y COACH
 Amtrak Locator: 12BE90

Travel Details

Friday June 15, 2012

Rail Information

Carrier Amtrak
 Train 148
 Origin WASHINGTON DC
 Destination NEWARK, PENN ST
 Departing 3:02 PM
 Arriving 6:10 PM
 Seat Unassigned

Amtrak Information: AMTRAK 002Y COACH



Travel Details

Wednesday April 10, 2013

THANK YOU FOR CHOOSING AMERICAN EXPRESS.

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.
AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US cfly segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$16,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7898. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800468694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0128; Iowa: TA# 002 Registered Iowa Travel Agency

1011 <small>Room#</small>	BAER/SUSAN/MS <small>Name</small>	419.00 <small>Rate</small>	06/15/12 <small>Depart</small>	06:50 <small>Time</small>	4603 <small>ACCT#</small>
GD <small>Rate</small>	THE PORT AUTHORITY 0		06/14/12 <small>Arrive</small>	18:57 <small>Time</small>	
66 <small>Room</small>	225 PARK AVENUE SOUT NEW YORK NY 10003 <small>Clerk Address</small>		PASSPORT: AXXXXXXXXXXXXX4006 <small>Payment</small>		MRW#:

DA REFERENCE CHARGES CREDITS BALANCE D

06/14 ROOM	1011, 1	419.00	
06/14 RM TAX	1011, 1	60.76	
06/15 RM SERV	49931011	15.60	
06/15 CCARD-AX			495.36
SETTLED TO:	AMERICAN EXPRESS	XXXXXXXXXXXX4006	

.00

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
DDAMICO@PANYNJ.GOV
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

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 checkout, you will owe us interest from the checkout 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 _____

Dinner

Taxi Receipt

COSI #677 - 12th & G
700 11th St
Washington DC 20001
202-824-0730

Date/Time _____
To Marriott Meta Center
From Union Station

Sofia 06/14/2012
940 7:49 PM
40355
Type: To Go
Wild Salmon Salad 8.49
Total 8.49
0.85
Go Total 9.34
20.00
Change 10.66

Driver/Cab # _____
Passenger _____
Cost: Ride 12.01
Tip 1.99
TOTAL 14.00

LIFE
SHOULD BE
DELICIOUS!

FAA STATION 22
Register 3 Sequence 8927
Edit Card Purchase
Account XXXXXXXXXXXXXB132
USER/SUSAN M
From 14:12 June 14, 2012
To 20:30 June 15, 2012
Elapsed time: 1 day(s),
6 hour(s), 18 minute(s)
For \$43.00
Thank you
tip \$2.00

Metro North
Washington DC
FOR CUSTOMER SERVICE
CALL 202-962-5719
12th G St. NW
MEZZANINE 35
MACHINE 39
AN: *****8132
VENDOR: 035-39-30448
REF NO: 304488605694
AUTH NO: 000334
DEBIT PURCHASE
QUANTITY SELECTED: 1
COST IS \$7.00 PER
FARECARD
S/N:
304480708605696
TOTAL AMOUNT: \$7.00

DC-H-90658
TEL.202-526-1200
FORD/XX164430
06/15/12 04:09P
06/15/12 04:19P
TRIP # 40
DIST 1.23 mi
Rate 1 \$ 7.86
EXTRAS \$ 1.00
TOTAL \$ 8.86
S/N 33744/CM06
COMPLAINTS CALL
202 645 6018
HAVE A NICE DAY!

tip 1.50
\$ 10.36
FAA → Union Station

THANK YOU
FOR RIDING METRORAIL

THE FUTURE IS
RIDING ON METRO

DATE _____ AMOUNT \$ \$12.50
tip 2.50
RECEIVED FROM FAA
FROM Falls Church Metro
DESTINATION Mitre
CAB # _____ DRIVER I.D. # _____
DRIVERS NAME _____

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 173873

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 06/24/12 to 06/29/12

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: Y or Business Clients: N
Blanket Trip: N Conferences, Seminars, Training and
Outside TDO: N Testing : Y
Org: 285
Dir/Comm: Y
Travel Company Used: Y
Trip Extension: N
Type:

Purpose: PARTICIPATE IN THE 3RD TRANSATLANTIC AVIATION ISSUES CONFERENCE

Sponsor: AAAE

Purpose Dates: 06/24/12 to 06/29/12

Business Destination: Brussels Belgium

Ticket Destination: Brussels Belgium

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	3,000	Meals	300
Auto	0	Registration	0
Bus	0	Lodging	1,500
Rail	0	Other	200
Travel Sub-Total	3,000	Other Sub-Total	2,000
		Total Exp	5,000

#Signature below implies approval of 2 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer Date: 6/13/12 Submitted: _____

Approver's Signature: Stephanie E. Daws Date: 6/14/12 Emp# 40183 Title: Acting COO

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 06/24/12 to 06/29/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

01 Attach concurrence of the Chief Financial Officer (CFO)

02 Attach written approval by your Department Director for international trip.



Travel Arrangements for SUSAN M BAER

Record Locator PJZMVB
Trip ID 11545229703
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEWYORK, NY 10003

Agent ID: PG
Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code 589 Ticket Date 6/15/2012
Ticket Number 7088866698 Invoice 0088650
Check Digit 0 Electronic Yes
Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 977.00
Ticket Tax Fare 588.10
Total (USD) Ticket Amount 1,565.10
Transaction Fee 35.00
Airfare charged to American Express
Billing Account: AX XXXXXXXXXXXX1002
Total 1,600.10

Travel Details

Sunday June 24, 2012

Flight Information

Airline JET AIRWAYS INDIA Estimated time 7 hours 20 minutes
Flight 227 Distance 3,681 Miles
Origin Newark, NJ Meal Service Dinner/breakfast
Destination Brussels, BELGIUM Plane Airbus A330-200
Departing 6:30 PM
Arriving 7:50 AM
Departure Terminal TERMINAL B
Arriving on June 25, 2012
Seat 30K
Class Economy

Travel Details

Friday June 29, 2012

Flight Information

Airline JET AIRWAYS INDIA Estimated time 8 hours 20 minutes
Flight 228 Distance 3,681 Miles
Origin Brussels, BELGIUM Meal Service Lunch/snack
Destination Newark, NJ Plane Airbus A330-200
Departing 10:10 AM
Arriving 12:30 PM
Arrival Terminal TERMINAL B
Seat AIRPORT CHECK IN
Class Economy



*****IMPORTANT VISA/PASSPORT SERVICE INFORMATION*****

A VALID PASSPORT IS REQUIRED FOR ALL INTERNATIONAL DESTINATIONS.
 ADDITIONAL DOCUMENTATION SUCH AS A VISA MAY ALSO BE REQUIRED.
 SOME COUNTRIES REQUIRE YOUR PASSPORT BE VALID FOR 6 MONTHS
 BEYOND YOUR INTENDED STAY. FOR ALL INTERNATIONAL TRAVEL
 DOCUMENTATION REQUIREMENTS AND TO OBTAIN SPECIAL NEGOTIATED RATES
 FOR AMERICAN EXPRESS CUSTOMERS PLEASE ACCESS
 WWW.TRAVISA.COM/AMERICANEXPRESS OR WWW.CIBT.COM/AMERICANEXPRESS

Travel Details Saturday October 27, 2012

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
JET AIRWAYS INDIA		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
NLFAEI	JET AIRWAYS INDIA

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
 CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

 FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 336-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
 WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

PLEASE CHECK IN 2-3 HOURS PRIOR TO DEPARTURE
 DEPENDING ON AIRLINE AND DESTINATION. CONTACT
 AMERICAN EXPRESS FOR SPECIFIC CHECK-IN TIMES.
 CONTACT THE ABOVE NUMBER FOR COMPLETE
 TICKET RESTRICTIONS.

TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
 NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
 SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
 SAME CARRIER

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts or omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$60 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$16,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7888. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1182; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Transaction Date:	08/07/2012 Thu
Transaction Description:	FOREIGN TRANSACTION FEE CONRAD BRUSSELS 0000BRUSSELS BE \$1181.50
Cardmember Name:	LISA MARIE BOARD
Amount \$:	31.91
Reference Number:	820121600154994463
Category:	Fees & Adjustments

Transaction Date:	08/07/2012 Thu
Transaction Description:	CONRAD BRUSSELS 0000BRUSSELS BE 02380190533 +32 2 542 40 05 +32 2 642 40 05
Cardmember Name:	LISA MARIE BOARD
Amount \$:	1,181.09
Foreign Spend Amount:	938.00 EURO
Doing Business As:	CONRAD BRUSSELS
Merchant Address:	AVENUE LOUISE 71 BRUXELLES B-1050 BELGIUM
Reference Number:	320121800154954403
Category:	Travel - Lodging

COURSE EFFECTUÉE LE: 26/06/12

ENDROIT DE DÉPART: Schua

LIEU D'ARRIVÉE: Conrad

MONTANT DE LA COURSE:
 € 15,6
 6% T.V.A. COMPRISE

SIGNATURE: 

TICKET KLANT
 RESTAURANT LA DENTELLIER
 E
 8000 BRUGGE

Terminal: 70252102
 Arch.: 1169670102

Mod: 0036
 Transaction: 00360004
 MasterCard
 Card: xxxxxxxxxxxx5893
 Valid thru: 01/15

TE
 Date: 25/06/2012 14:25
 Ch. code: 80470P

ROPABANK Ref: 553258

Montant: 25,10 EU
 Extra: 4,90 EU

Total: 30,00 EUR

Signature:
lunch 25 June

Thank you- Dank U- Merci
 - Thanks for your visit

TRANSPORT TAXI

ATTESTATION

Course en taxi effectuée le _____

Endroit de départ : _____

Lieu d'arrivée : _____

Montant de la course

Signature du conducteur :
15 Euros

TAXIS BLEUS
 BLUE CABS s.a.



A remplir soigneusement par le conducteur uniquement selon les instructions de nos centraux.

Date : 28/06/12 Montant : €

Nom de la société cliente : _____

Nom de la personne transportée : Hotel Conrad

Adresse de prise en charge : _____

Heure début mission : _____ Heure fin mission : _____

Adresse de destination : _____

Remarques éventuelles : REPORT

Nom et N° chauffeur : _____ Voiture N° _____

Signature du passager,

CONRAD BRUSSELS
71 AVENUE LOUISE
BRUSSELS, 1050

Name & Address

DAER, SUSAN

(Ex. 1)

US

Room Number: 624
Date: 28/06/2012
Time: 17:00:26

Passport ID:

Receipt Number: 35872

Exchange Receipt

<u>Currency</u>	<u>Amount</u>	<u>Rate</u>	<u>Equivalent In</u>
US Dollar	100.00	1.3944000000	71.72 EUR
USD			

*** I / We agree to the exchange rate stated above. ***

Guest Signature

Cashier Signature

Please Check Carefully Before Leaving the Counter

Exchange rate

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 174724

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 09/11/12 to 09/12/12

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209

Org: ACCOUNTS PAYABLE
 285
 Dir/Comm: 12 DEC 20 AM 11:01

Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y
 Blanket Trip: N Conferences, Seminars, Training and
 Outside TDO: N Testing : N

Travel Company Used: Y
 Trip Extension: N
 Type:

Purpose: PARTICIPATE IN THE NEXTGEN HEARING

Purpose Dates: 09/11/12 to 09/12/12
 Business Destination: Washington DC USA
 Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	100
Auto	0	Registration	0
Bus	0	Lodging	550
Rail	350	Other	100
Travel Sub-Total	350	Other Sub-Total	750
		Total Exp	1,100

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: 9-7-12 Submitted: _____

Approver's Signature: Susan M Baer Date: 9-7-12 Emp# _____ Title: _____



Travel Arrangements for SUSAN M BAER

Record Locator LMKBPL
 Trip ID 11307689645
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003

Agent ID: LA
 Phone: .. / Fax: ..

Itinerary Details

Itinerary Only

A PHOTO ID IS REQUIRED FOR TRAVEL
 RESERVATIONS MUST BE CANCELLED IF NOT TRAVELING
 PENALTIES APPLY
 YOU NEED TO PICK-UP THE PAPER TICKET FROM THE
 KIOSK AT THE TRAIN STATION BEFORE BOARDING
 THE TRAIN.
 ACCOMMODATION CHARGE MAY BE FORFEITED
 JOIN GUEST REWARDS AT WWW.AMTRAK.COM
 *** NEW IMPORTANT INFORMATION BELOW ***
 YOUR ETICKET IS ONLY VALID FOR THE SERVICES LISTED.
 IF YOUR TRAVEL PLANS CHANGE, CALL US BEFORE
 DEPARTURE TO CHANGE YOUR RESERVATION.
 IF YOU DO NOT BOARD YOUR TRAIN YOUR ENTIRE
 RESERVATION FROM THAT POINT WILL BE CANCELED
 AND SOME OR ALL OF THE MONEY PAID
 WILL TRANSFER TO AN AMTRAK-EVOUCHER.
 IF YOU BOARD A DIFFERENT TRAIN WITHOUT
 NOTIFYING US, YOU WILL HAVE TO PAY FOR IT SEPARATELY.
 THE CONDUCTOR CANNOT APPLY THE MONEY PAID FOR YOUR
 FOR YOUR PRIOR RESERVATION,
 REFUND RESTRICTIONS AND PENALTIES FOR FAILURE TO
 CANCEL MAY APPLY.

Travel Details

Tuesday September 11, 2012

THE FARE FOR THIS ITINERARY IS 100.00 AND IS NOT GUARANTEED UNTIL PURCHASED. THE LAST DATE TO TICKET IS TODAY SEPTEMBER 7.

Rail Information

Carrier Amtrak
 Train 173
 Origin NEWARK, PENN ST
 Destination WASHINGTON DC
 Departing 3:51 PM
 Arriving 8:47 PM
 Seat Unassigned

Amtrak Information: AMTRAK 006YD COACH
 Amtrak Locator: 24C1AB

Travel Details

Wednesday September 12, 2012

Rail Information

Carrier Amtrak
 Train 138



Origin WASHINGTON DC
Destination NEWARK, PENN ST
Departing 8:05 PM
Arriving 9:12 PM

Seat Unassigned

Amtrak Information: AMTRAK 004YF COACH
Amtrak Locator: 24C1AB

Travel Details Saturday, August 3, 2013

THANK YOU FOR CALLING AMERICAN EXPRESS BUSINESS TRAVEL.

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844
FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 336-291-0104, CODE S-9LVA
PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10.

Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

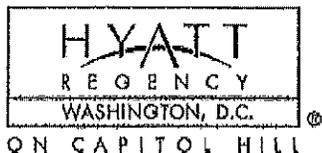
For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

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Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency



Hyatt Regency Washington on
 Capitol Hill
 400 New Jersey Avenue, NW
 Washington, DC 20001
 Telephone: 1 202 737 1234
 Fax: 1 202 737 5773
 www.hyattregencywashington.com

INVOICE

Payee Susan Baer
 (Ex. 1)

United States

Membership

Bonus Code

Confirmation No. 1033586901

Group Name

Room No. 1152
 Arrival 09-11-12
 Departure 09-12-12
 Page No. 1 of 1
 Follo Window 1
 Follo 554410
 Invoice

Date	Description		Charges	Credits
09-11-12	- Restaurant Dinner Food	Room# 1152 : CHECK# 261869	21.00	
09-11-12	- Restaurant Dinner Beverage	Room# 1152 : CHECK# 261869	11.00	
09-11-12	- Restaurant Dinner Tax	Room# 1152 : CHECK# 261869	3.20	
09-11-12	- Restaurant Dinner Gratuity	Room# 1152 : CHECK# 261869	7.00	
09-11-12	Guest Room		459.00	
09-11-12	Occupancy Tax		66.56	
09-12-12	American Express	XXXXXXXXXXXX4006 XX/XX		567.76

No frequent traveler account has been credited for this stay. To enroll in Gold Passport, call 1-800-51-HYATT, or visit www.GoldPassport.com.

Total 567.76 567.76

Balance 0,00

Guest Signature

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges.

Was your stay exceptional? Please let us know what you think...
 Simply e-mail us at QualityWasrw@hyatt.com

For more information on the Hyatt Regency Washington on Capitol Hill or other Hyatt Hotels and Resorts, visit us on the web at WWW.HYATT.COM

Lost & Found questions, please email Lost@hyatt.com

Please remit payment to:
 Hyatt Regency Washington on Capitol Hill
 PO Box 6012
 Washington, DC 20042

Customer Service number: 1-888-863-3020
 Customer Service email: Na.CustomerService@Hyatt.com

AMTRAK Ticket Coupon of 01
 I acknowledge receipt of ticket(s) and agree to accept billing to the credit card identified below.
EXCHANGE RECEIPT
 Date of Issue: 12Sep12 0339PM
 Place of Issue: WAS
 Res. #: 800-USA-RAIL
 RES# 24C1AB-070912
 Name of Passenger: SUSAN M BAER
 From: [Blank]
 To: [Blank]
 Endorsement/Restrictions: [Blank]

AMTRAK Riders Baggage
EXCHANGE RECEIPT
 Name of Passenger: [Blank]
 ORIG AMOUNT PAID: 160.00
 TRAVELLED AMOUNT: 80.00
 FORFEITED AMOUNT: 0.00
 AVAILABLE AMOUNT: 80.00
 REVISED FARE: 153.00
 TKT DELIVERY FEE: 0.00
 REFUNDABLE AMOUNT: 0.00
 REFUND FEE: 0.00
 American Express: 73.00

Form of Payment
AMTRAK Merch ID: 05228
 Account Charge
 Total Charge: 096965577155
 PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.
 NRP 96 STOCK CONTROL NO. TKT NO - DO NOT MARK OR STAMP IN THIS BLOCK

Form of Payment
 Rail Fare: [Blank]
 Fare Plans: [Blank]
VOUCHER
 REFUNDED: 0.00 of
 Date of Issue: 12Sep12 0339PM
 Reservation #: 24C1AB
PASSENGER RECEIPT

AMTRAK Ticket Coupon of 01
 I acknowledge receipt of ticket(s) and agree to accept billing to the credit card identified below.
RETAIN DURING TRIP
 Date of Issue: 12Sep12/ 4:02PM
 Place of Issue: WASHINGTON, DC
 Res. #: RES# 24C1AB-07SEP12
 Name of Passenger: SUSAN M BAER
 From: WASHINGTON, DC
 To: WASHINGTON, DC
 Endorsement/Restrictions: [Blank]

AMTRAK Riders Baggage
RES# 24C1AB-07SEP12
 Name of Passenger: SUSAN M BAER
 From: [Blank]
 To: [Blank]
 Carrier: [Blank]
 Train: [Blank]
 Date: [Blank]
 Accom: [Blank]
 Space/Car: [Blank]

AMTRAK GUEST REWARDS 4341278200 - MEMBER
 Form of Payment
ETICKET
 DOCUMENT HAS NO VALUE
 ID REQD ON BOARD
 096965577144
ETICKET TRAVEL DOCUMENT
 P1 03:39:12:0332
 NRP 96 STOCK CONTROL NO. TKT NO - DO NOT MARK OR STAMP IN THIS BLOCK

Form of Payment
 OTHER TERMS AND CONDITIONS APPLY.
 REFUND AND EXCHANGE FEES MAY APPLY
PASSENGER RECEIPT

Taxi Cab Receipts
 DATE: 9/12/12 TIME: [Blank]
 TRIP ORIGIN: Hyatt
 DESTINATION: Peninsula Hotel for breakfast
 FARE: \$ 13.00 SIGNATURE: [Blank]

Taxi Cab Receipts
 DATE: 9/12/12 TIME: [Blank]
 TRIP ORIGIN: Rayburn Building (House Testerman)
 DESTINATION: Hyatt
 FARE: \$ 10.32
 \$ 12.00 SIGNATURE: [Blank]

Hyatt → FAA

IN - OUT DC TRIP
IN CAB 3
HACK ID # 71552
09/12/12 TR 7928
START END MILES
13:35 13:44 1.1
FARE FOR EA RATE
RATE 1: \$ 7.59
EXTRA: \$ 0.00
TOTAL: \$ 7.59
THANKS 7.41
TAXICAB COMM
TEL 202 645-6018

\$9.00

FAA →
Union Station

DC TRIP
GEORGETOWN
CAB #51
09/12/12 TR 9615
START END MILES
15:17 15:26 1.4
FARE FOR EA RATE
RATE 1: \$ 7.59
EXTRA: \$ 0.00
TOTAL: \$ 7.59
THANKS
DC TAXICAB COMM

\$9.00

50 Mass Ave NE
Washington DC 20001
Ice Catering Specialists 800-765-422

QUESTIONS - CONCERNS?
Call us at 1 800 TALK ABP
Visit us at our website:
<http://WWW.AUBONPAIN.COM>

Ticket #124799

09-12 3:31 PM
000125 2 24 124799

PM Thai Chix Wrap	6.19
Smart Water	2.29
Green Apple	.99
FOR HERE	9.47
Tax	.95
Amount Due	\$10.42
\$20 CASH	\$20.00
Change	\$9.58

ABP GUEST CONNECTION
SWEEPSTAKES

Complete the guest survey:
YOU COULD WIN \$2,000

Visit:
www.abpsurvey.com

1 completed entries must be received
last day of month to be included in
monthly drawing.
Sweepstakes open to legal US residents
18 years and older.
ABP employees and immediate family
not eligible.
No purchase necessary.
Void where prohibited.
For complete rules visit abpsurvey.com

PL

Register 3 Sequence 2803
Edit Card Purchase
Account XXXXXXXXXXXX4006
From 15:11 September 11, 2012
to 19:08 September 12, 2012
Elapsed time: 1 day(s),
3 hour(s), 57 minute(s)
or \$43.00

Thank you

tip \$2.00

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 174935

Employee Number: P23178
 Name: Susan M Baer

Trip Period from: 10/03/12 to 10/05/12

Title: Dir Aviation
 Telephone: 212-435-3720
 Address: 225PAS 1209

Org: 285

Dir/Comm: 12 DEC 20 AM 11:00

Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y
 Blanket Trip: N Conferences, Seminars, Training and
 Outside TDO: N Testing: N

Travel Company Used: Y

Trip Extension: N

Type:

Purpose: ATTEND THE NEXTGEN ADVISTORY COMMITTEE (NAC) MEETING

Purpose Dates: 10/03/12 to 10/05/12

Business Destination: Dayton OH USA

Ticket Destination: Dayton OH USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	800	Meals	100
Auto	0	Registration	0
Bus	0	Lodging	600
Rail	0	Other	100
Travel Sub-Total		Other Sub-Total	
	800		800
		Total Exp	1,600

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's
 Signature

Susan M Baer

Date: 9/18/12 Submitted: _____

Approver's
 Signature

[Signature]

Date: 9/20/12 Emp# 40857 Title: _____

[Signature]

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 174935

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 10/03/12 to 10/05/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

- 01 Attach written approval for domestic trip outside the self-approved regions
by the your Chief



Travel Arrangements for SUSAN M BAER

Record Locator PXVMEX
Trip ID 11668657113
PORT AUTHORITY
225 PARK AVENUE SOUTH - 9TH FLR
NEW YORK, NY 10003

Agent ID: K0

Phone: / Fax: ..

Invoice Details

Ticket Information

Airline Code 018 Ticket Date 9/26/2012
Ticket Number 7136400203 Invoice 0105956
Check Digit 2 Electronic Yes

Charges

Ticket Base Fare 403.72
Ticket Tax Fare 41.08
Total (USD) Ticket Amount 444.80

Ticket Information

Airline Code 037 Ticket Date 9/26/2012
Ticket Number 7136400201 Invoice 0105954
Check Digit 0 Electronic Yes

Charges

Ticket Base Fare 185.12
Ticket Tax Fare 35.48
Total (USD) Ticket Amount 220.60

Billing Code F7C23178XXXX285A01XXX

Transaction Fee 35.00

Airfare charged to American Express

Billing Account: AX XXXXXXXXXXXXX1002

Total 700.40

Travel Details

Wednesday October 3, 2012

Flight Information

Airline US AIRWAYS Estimated time 1 hour 24 minutes
Flight 4115 Distance 96 Miles
OPERATED BY US AIRWAYS EXPRESS-PIEDMONT AIRLINES
Origin New York Lga, NY Meal Service No Meal Service
Destination Philadelphia, PA Plane Dash 8 Turboprop
Departing 9:15 AM
Arriving 10:39 AM

Departure Terminal TERMINAL C
Arrival Terminal TERMINAL F
Seat AIRPORT CHECK IN
Class Economy

Flight Information

Airline US AIRWAYS Estimated time 1 hour 34 minutes
Flight 2307 Distance 477 Miles
OPERATED BY US AIRWAYS EXPRESS-PSA AIRLINES
Origin Philadelphia, PA Meal Service No Meal Service
Destination Dayton, OH Plane Canadair RegionalJet
Departing 11:20 AM
Arriving 12:54 PM

Departure Terminal TERMINAL F
Seat 9F



Class Economy

Travel Details

Thursday October 4, 2012

Flight Information

Airline	UNITED AIRLINES	Estimated time	1 hour 49 minutes
Flight	4092	Distance	533 Miles
	OPERATED BY /EXPRESSJET AIRLINES DBA UNITED EXPRESS		
Origin	Dayton, OH	Meal Service	No Meal Service
Destination	Newark, NJ	Plane	Embraer RJ135/146
Departing	6:39 PM		
Arriving	8:28 PM		
Arrival Terminal	TERMINAL A		
Seat	AIRPORT CHECK IN		
Class	Economy		

Travel Details

Friday February 1, 2013

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
UNITED AIRLINES		SUSAN M BAER
US AIRWAYS		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
AXXG4F	US AIRWAYS
NM2H5B	UNITED AIRLINES

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
 CALL TOLL FREE 800-333-8844
 FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
 CALL 800-872-3067. IDENTIFY YOUR CODE AS S-9LVA

 FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
 COLLECT 336-291-0104, CODE S-9LVA
 PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
 CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
 WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
 A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.
 PLEASE CHECK IN 90 MINUTES PRIOR TO DEPARTURE.
 CONTACT THE ABOVE NUMBER FOR COMPLETE
 TICKET RESTRICTIONS.
 TICKETS MAY BE NON-REFUNDABLE, NON-ENDORSEABLE,
 NON-CHANGEABLE OR REQUIRE ADVANCE NOTICE TO CHANGE,
 SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
 SAME CARRIER
 AIR RAIL TRANSACTION OR BOOKING FEE 35.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public Internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10.

Upon cancellation of the transportation or travel services; where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 8001, Larkspur, CA 94977-8001; or by faxing a request to: (415) 927-7698. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0128; Iowa: TA# 002 Registered Iowa Travel Agency



WRIGHT-PATTERSON INN

2439 SCHLATTER DRIVE
WRIGHT-PATTERSON, OH 45433
(937) 257-3451 Fax: (937) 257-2488

FOLIO
Account: 20770001403
Arrival: 10/3/2012
Departure: 10/4/2012
Room: 2134
Rate: \$66.75

Baer, MS Susan
(Ex. 1)

UNITED STATES

DATE	ITEM DESCRIPTION	COMMENT	DEBIT	CREDIT
10/3/2012	1 MASTERCARD PAYMENT	MASTERCARD PAYMENT		(66.75)

BALANCE DUE: (66.75)

*** Signature required for refunds only*

Guest Signature: _____

Clerk Signature: _____

U.S. AIRWAYS
A STAR ALLIANCE MEMBER

BAER/SUSANM
US FLIGHT: **3569** 03OCT

NEW YORK LAGUARDIA

PHILADELPHIA

SEAT: **7D**

AXXG4F/US

API OK E-TICKET

SEQ 59

ZONE 4

U.S. AIRWAYS
A STAR ALLIANCE MEMBER

BAER/SUSANM
US FLIGHT: **2307** 03OCT

PHILADELPHIA

DAYTON

SEAT: **9F**

AXXG4F/US

API OK E-TICKET

SEQ 38

ZONE 4

UNITED

NAME: BAER/SUSANM
DATE: THU 04 OCT 2012
MileagePlus: ES965464

FLIGHT: UA 4092 M
Operated by ExpressJet Airlines dba United Express

GATE: **C15** Gate May Change
Check Before Departure

CONFIRMATION: NM2H5B



SEAT: **7A**

6
Boarding Group

BOARDING PASS

U.S. AIRWAYS



BAER/SUSANM
CONF: AXXG4F/US ZONE 4

FFD: ES965464UA
NEW YORK LAGUARDIA
PHILADELPHIA

FLIGHT DEPARTS DATE
3569 730A 03OCT

GATE BOARD TIME SEAT
C36 700A 7D

U.S. AIRWAYS



BAER/SUSANM
CONF: AXXG4F/US ZONE 4

FFD: ES965464UA
PHILADELPHIA
DAYTON

FLIGHT DEPARTS DATE
2307 1120A 03OCT

GATE BOARD TIME SEAT
F37 1050A 9F

NAME: BAER/SUSANM
DATE: THU 04 OCT 2012 **89**
MileagePlus: ES965464

FLIGHT: UA 4092 M
Mileage: 533 Miles

GATE: **C15** SEAT: **7A**

DEPART: **6:39 PM**

Dayton
ARRIVE: **8:28 PM**

Newark-Liberty Intl
BOARD TIME: **6:04 PM**

ETICKET 01071354002012

PHILADELPHIA INT'L AIRPORT
 TERMINAL F
 PHILADELPHIA, PA 19153

STORE: 01231 REG: 003 CASHIER: TIRUWOK
 CHICKEN SALAD SANDWICH

411384 1 @ 7.49 7.49
 WATER 1 LITER
 338006 1 @ 3.99 3.99 N
 DRIED FRUIT CHIP
 201045 1 @ 1.99 1.99-N
 IL 13.47
 TAX (8.00000%) .60
TOTAL 14.07
 TENDERED
20.10
 PAYMENT 20.10
 CHANGE 6.03

Transaction: 15514 10/3/2012 11:44 AM
 Comments\Inquiries? (800) 326-7711
 or Comments@Hudsonsgroup.com
 Thank you for shopping with us.



Dayton Airport
 Dayton, Ohio

PURE LIFE WATER 16.9 27089190000
 2.39 T
 PURE LIFE WATER 16.9 27089190000
 2.39 T
 COW TIP MAGNET OFFIC 60949606003
 3.99 TT

SUBTOTAL \$8.77
 TAX02 \$0.30
TOTAL \$9.07
 CASH \$20.10
 CHANGE \$11.03

ITEMS 3
 10/04/12 06:53PM
 0544 02 54594 JAMES 5253

Thank You for Shopping at
 The Paradise Shops
 Dayton Airport

PHILADELPHIA INT'L AIRPORT
 TERMINAL F
 PHILADELPHIA, PA 19153

STORE: 01231 REG: 003 CASHIER: TIRUWOK
 D COFFEE GR HOT

000411 1 @ 1.85 1.85
 TAX 1.
 TAX (8.00000%)
TOTAL 2.1

TENDERED 10.1
 PAYMENT 10.00
 CHANGE 8.00
 Transaction: 15424 10/3/2012 9:56 AM
 Comments\Inquiries? (800) 326-7711
 or Comments@Hudsonsgroup.com
 Thank you for shopping with us.



Dayton International Airport
 CHECK: 715
 TABLE: 107/1
 SERVER: 4029 Sheryl
 DATE: OCT04'12 5:41PM
 CARD TYPE: AMEX A3
 CCT # XXXXXXXXXXXX4006
 EXP DATE: XX/XX
 UTH CODE: 588229

OTA: 17.17
 agree to comply with the car
 older agreement.

ip _____
 sta \$ 20.17
 signature _____



taxi Dayton Airport
 to Wright Patterson

Diamond Taxi

"The Leader in Airport Transportation"

Isaac Ajak

Call 937-789-6860

From:
 To:
 Amount:



\$ 63.00
 tip 8.00
 53.00

The Port Authority of NY & NJ
 Business Trip and Reservations Authorization

Trip Auth# 175100

ACCOUNTS PAYABLE
 285
 12 DEC 20 AM 10:52

Employee Number: P23178 Trip Period from: 10/09/12 to 10/09/12
 Name: Susan M Baer

Title: Dir Aviation Org:
 Telephone: 212-435-3720 Dir/Comm:
 Address: 225PAS 1209
 Account Code: 1000 X 556001 285A01 A01101000
 Spouse/Guest: N Meeting with Government Agency reps
 International: N or Business Clients: Y Travel Company Used: Y
 Blanket Trip: N Conferences, Seminars, Training and Testing: Y Trip Extension: N
 Outside TDO: N Type:

Purpose: MEET WITH SECRETARY LA HOOD

Purpose Dates: 10/09/12 to 10/09/12
 Business Destination: Washington DC USA
 Ticket Destination: Washington DC USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	600	Meals	0
Auto	0	Registration	0
Bus	0	Lodging	0
Rail	0	Other	100
Travel Sub-Total	600	Other Sub-Total	100
		Total Exp	700

No Flags Occurred

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan Baer
 Approver's Signature: Susan Baer

Date: 10/2/12 Submitted: 10/2/12
 Date: 10/2/12 Emp# 23178 Title: DIRECTOR, AVIATION



Travel Arrangements for SUSAN M BAER

Record Locator FGTWPL
 Trip ID 10935261913
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003

Agent ID: K0

Phone: .. / Fax: ..

Invoice Details

Ticket Information

Airline Code 016 Ticket Date 10/9/2012
 Ticket Number 7138589379 Invoice 0108481
 Check Dglt 8 Electronic Yes
 Billing Code F7C23178XXXX285A01XXX

Charges

Ticket Base Fare 348.77
 Ticket Tax Fare 37.03
 Total (USD) Ticket Amount 386.80
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 421.80

Travel Details

Tuesday October 9, 2012

Flight Information

Airline UNITED AIRLINES Estimated time 1 hour 11 minutes
 Flight 4129 Distance 199 Miles
 OPERATED BY JEXPRESSJET AIRLINES DBA UNITED EXPRESS
 Origin Washington Reagan, DC Meal Service No Meal Service
 Destination Newark, NJ Plane Embraer RJ135/146
 Departing 2:33 PM
 Arriving 3:44 PM
 Departure Terminal TERMINAL B
 Arrival Terminal TERMINAL A
 Seat Unassigned
 Class Economy

Travel Details

Wednesday February 8, 2013

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Loyalty Programs

Vendor	Account	Traveler
UNITED AIRLINES		SUSAN M BAER

Airline Record Locators

Airline Reference	Carrier
IDR609	UNITED AIRLINES



Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES -ONLY- AFTER HOURS, PLEASE
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COLLECT 338-281-0104, CODE S-9LVA

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CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.

A VALID GOVERNMENT ISSUED PHOTO ID IS REQUIRED.

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TICKET RESTRICTIONS.

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SUBJECT TO PENALTY/TRANSACTION FEE, AND ONLY VALID ON
SAME CARRIER

AIR RAIL TRANSACTION OR BOOKING FEE 35.00

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For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#800469694. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

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Rhode Island Registration Number: MI#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

UNITED 

BAER/SUSANM
09OCT
ES965464
IDR609

UA 4129Y

42

BAER/SUSANM
09OCT
ES965464
199 MILES

42

B0

UA 4129Y

12

01671385893796
EWR ETICKET

01671385893796
EWR ETICKET

3A

BOARDING GROUP:

07

12

3A

233P
WASHINGTON
344P
NEWARK

208P
01671385893796

A STAR ALLIANCE MEMBER

08 08
09 05



 opens doors

Warning: Keep this forward away from magnetic devices and other magnetic strips to minimize a loss of fare value.

PLAZA STATION 22

Register 3 Sequence 9702
edit Card Purchase
count XXXXXXXXXXXXX8 132
ER/SUSAN M
from 05:37 October 9, 2012
to 17:07 October 9, 2012
Elapsed time: day(s),
11 hour(s), 30 minute(s)
or \$16.00

Thank you

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 175352

Employee Number: P23178 Trip Period from: 11/15/12 to 11/16/12
Name: Susan M Baer

ACCOUNTS PAYABLE
285
12 DEC 20 AM 10: 52

Title: Dir Aviation
Telephone: 212-435-3720
Address: 225PAS 1209
Account Code: 1000 X 556001 285A01 A01101000
Spouse/Guest: N Meeting with Government Agency reps
International: N or Business Clients: Y Travel Company Used: Y
Blanket Trip: N Conferences, Seminars, Training and Trip Extension: N
Outside TDO: N Testing: N Type:

Purpose: ATTEND AVIATION ADVISORY COMMITTEE MEETING

Sponsor: MITRE CORPORATION

Purpose Dates: 11/15/12 to 11/16/12
Business Destination: Mclean VA USA
Ticket Destination: Mclean VA USA

ESTIMATED TRIP EXPENSES

<u>Travel</u>	<u>Amount</u>	<u>Other</u>	<u>Amount</u>
Air	0	Meals	60
Auto	0	Registration	0
Bus	0	Lodging	450
Rail	450	Other	100
Travel Sub-Total	450	Other Sub-Total	610
		Total Exp	1,060

#Signature below implies approval of 1 flag(s) listed on attached sheet(s).

Filling out this form with incorrect or false information, receipts or documentation is grounds for disciplinary action including dismissal. Please be accurate.

Employee's Signature: Susan M Baer Date: 10/29/12 submitted: _____

Approver's Signature: Stephanie Dawson Date: 11/8/12 Emp# 40183 Title: Acting COO

The Port Authority of NY & NJ
Business Trip and Reservations Authorization

Trip Auth# 175352

Employee Number: P23178
Name: Susan M Baer

Trip Period from: 11/15/12 to 11/16/12

Detail Item Flags

(Place the number preceding the Flag Description on the Attachment or Receipt)

-
- 01 Attach written approval for domestic trip outside the self-approved regions
by the your Chief



Travel Arrangements for SUSAN M BAER

Record Locator MOXPFY
 Trip ID 11372139278
 PORT AUTHORITY
 225 PARK AVENUE SOUTH - 9TH FLR
 NEW YORK, NY 10003

Agent ID: EH
 Phone: .. / Fax: ..

Invoice Details

Ticket Information

Ticket Number Ticketless Invoice 0115558
 Electronic Yes
 Billing Code F7C23178XXX285A01XXX

Charges

Ticket Base Fare 364.00
 Ticket Tax Fare 0.00
 Total (USD) Ticket Amount 364.00
 Transaction Fee 35.00
 Airfare charged to American Express
 Billing Account: AX XXXXXXXXXXXX1002
 Total 399.00

ROUND-TRIP AMTRAK,.....364.00

Travel Details

Wednesday November 14, 2012

AMTRAKTICKETLESS-A

Travel Details

Thursday November 15, 2012

Rail Information

Carrier Amtrak
 Train 85
 Origin NEW YORK PENN STN , NY
 Destination WASHINGTON , DC
 Departing 3:05 PM
 Arriving 6:25 PM

Seat Unassigned

Amtrak Information: AMTRAK 001YA COACH
 Amtrak Locator: 458C30

Travel Details

Friday November 16, 2012

Rail Information

Carrier Amtrak
 Train 178
 Origin WASHINGTON , DC
 Destination NEWARK, INTL APT NJ
 Departing 4:02 PM
 Arriving 6:56 PM

Seat Unassigned



Amtrak Information: AMTRAK 003Y COACH
Amtrak Locator: 458C30

Travel Details

Monday September 30, 2013

THANK YOU FOR CHOOSING AMERICAN EXPRESS

Additional Messages

FOR ALL TRAVEL RESERVATIONS/ASSISTANCE 800A-800P EST
CALL TOLL FREE 800-333-8844

FOR EMERGENCIES ONLY AFTER HOURS, PLEASE
CALL 800-872-3057. IDENTIFY YOUR CODE AS S-9LVA

FOR EMERGENCIES WHILE TRAVELING OVERSEAS, PLEASE CALL
COLLECT 338-291-0104, CODE S-9LVA

PLEASE REVIEW THIS ITINERARY/INVOICE. CHANGES OR
CANCELLATIONS MUST BE REPORTED TO AMERICAN EXPRESS
WITHIN 24 HOURS TO MINIMIZE/AVOID PENALTIES.
CANCELLATION FEE MAY APPLY ON AMTRAK TICKETS.
AIR RAIL TRANSACTION OR BOOKING FEE 36.00

ADVISORY TSA requires all reservations with any US city segment or flying over the US or booked on a US based carrier to include full name, date of birth, and gender. Failure to provide this information will result in your reservation being cancelled.

Liability Statement. American Express Travel Related Services Company, Inc. and its parent, subsidiaries, affiliates and representatives (collectively, "Amex") act as an agent for travel suppliers and you understand and agree that Amex shall not be liable for any loss, injury, expense or damage to persons or property resulting, directly or indirectly, from (1) the acts of omissions of travel suppliers, including but not limited to delays, overbookings, cancellation of services, cessation of operations, accidents or failures of equipment, or changes in fares, itineraries or schedules; or (2) acts of God, fires, earthquakes, floods, climatic aberrations, acts of governmental authorities, civil unrest, strikes, riots, theft, disease, accidents or failures related to the public internet, telecommunications lines or facilities, or third party technology systems, or any other cause beyond the control of Amex.

For customers purchasing travel from within the state of California: Our California State Seller of Travel Registration Number is: 1022318-10. Upon cancellation of the transportation or travel services, where you, the customer, are not at fault and have not canceled in violation of the terms and conditions, if any, of the contract for transportation or travel services, all sums paid to American Express for services not received by you will be promptly refunded to you unless you otherwise advise American Express in writing, after cancellation. American Express is a participant in the California Travel Consumer Restitution Fund (the "Fund"). If you, the passenger, were located in California at the time of your purchase, you may request reimbursement from the Fund if you are owed a refund of more than \$50 for transportation or travel services which was not refunded in a timely manner by the seller of travel who was registered and participating in the Fund at the time of sale. The maximum amount which may be paid by the Fund to any one passenger is the total amount paid on behalf of the passenger to the seller of travel, not to exceed \$15,000. A claim must be submitted within six months after the scheduled completion date of the travel. A claim must include sufficient information and documentation to prove your claim and a \$35 processing fee. You must agree to waive your right to other civil remedies against a registered participating seller of travel for matters arising out of a sale for which you file a claim against the Fund. You may request a claim form by writing to: Travel Consumer Restitution Corporation, P.O. Box 6001, Larkspur, CA 94977-6001; or by faxing a request to: (415) 827-7888. Note: Sales transactions with customers located outside of California are not covered by the Fund and such customers are not eligible to file a claim against the Fund.

For customers purchasing travel in the state of Oregon: Transportation, lodging, meals, entertainment and all other services are sold to you to you either on a refundable or non-refundable basis. If all or part of the transportation or services are canceled by any person, we shall, within 2 working days of learning of the cancellation, request on your behalf that the service suppliers or wholesalers provide a refund of all sums sent them on your behalf. We shall send any refund received from the service suppliers or wholesalers to you within 2 working days after the refund received by us has cleared the bank.

For customers purchasing travel in the state of Washington: Our Washington State Seller of Travel Registration Number is: UBI#600489894. If transportation or other services are canceled by the seller of travel, all sums paid to the seller of travel for services not performed in accordance with the contract between the seller of travel and the purchaser will be refunded within thirty days of receiving the funds from the vendor with whom the services were arranged, or if the funds were not sent to the vendor, the funds shall be returned within fourteen days after cancellation by the seller of travel to the purchaser unless the purchaser requests the seller of travel to apply the money to another travel product and/or date.

Cancellation and change penalties may apply to these arrangements. Details will be provided upon request.

Intermediary Disclosure. Amex helps manage your company's travel expenses and assists you in finding travel suppliers and making arrangements that meet your individual needs. We consider various factors in identifying travel suppliers and recommending specific itineraries. In this role, we are acting as an independent third party and not as a fiduciary. We want you to be aware that certain suppliers pay us commissions as well as incentives for reaching sales targets or other goals, and from time to time may also provide incentives to our travel counselors. Certain suppliers may also provide compensation to us for various marketing and administrative services that we perform for them, such as granting them access to our marketing channels, participating in marketing programs and supporting technology initiatives. In addition, we receive compensation from suppliers when customers use the American Express® Card or other American Express products to pay for supplier products and services. From time to time we may enter into other business relationships with suppliers and these arrangements, including levels and types of compensation and incentives we receive, are subject to change. In identifying suppliers and recommending itineraries, we may consider a number of factors, including supplier availability, your preferences, and any agreements we have to book travel in accordance with your company's travel policy. The relationships we have with suppliers may also influence the suppliers we identify and the itineraries we recommend.

Rhode Island Registration Number: ML#1192; Nevada Seller of Travel Registration No.: NV#2001-0126; Iowa: TA# 002 Registered Iowa Travel Agency

Westin Tysons Corner
 7801 Leesburg Pike
 Falls Church, VA 22043
 703-893-1340 / 703-847-9520
<http://www.starwood.com/>



Baer, Susan Page Number 1 Invoice Nbr 1000046466
 (Ex. 1) Guest Number 417847 Arrive Date 11-15-2012

 07043 Folio ID A Depart Date 11-16-2012

No. Of Guest 1
 Room Number 707
 Club Account SPG - A50973586022
 Time 11-16-2012 07:10

Invoice				
Date	Reference	Description	Charges	Credits
11-15-2012	RT707	Room Charge - Best Available	\$299.00	
11-15-2012	RT707	5% Sales Tax	\$14.95	
11-15-2012	RT707	4% Occupancy Tax	\$11.96	
11-16-2012	AX	American Express		\$-325.91
		** Total	\$325.91	\$-325.91
		** Balance	\$-0.00	

For Authorization Purpose Only

SM BAER

Date	Credit Card	Code	Authorized
11-15-2012	XXXX4006	500790	448.50

0.00
 0.00
 0.00
 0.00
 0.00

EXPENSE SUMMARY REPORT

Currency: USD

Date	Tax	Food	Telecomm	Misc	Other	Total	Payment
11-15-2012	\$26.91	\$0.00	\$0.00	\$0.00	\$299.00	\$0.00	\$0.00
11-16-2012	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-325.91
Total	\$26.91	\$0.00	\$0.00	\$0.00	\$299.00	\$0.00	\$-325.91

Your SPG Account A50973586022 earned at least 598 Starpoints. Get 10,000 more with the SPG Credit Card. spg.com/axpcard

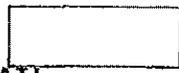
Continued on the next page



EXCHANGE RECEIPT

Ticket Coupon of 01 of 01

WAS



EXCHANGE RECEIPT AMTRAK

Baggage

I acknowledge receipt of tickets and agree to accept billing to the credit card identified below.

Date of Issue

Place of Issue 800-USA-RAIL

RES# 458C30-141112

X

16 Nov 12 02:18 PM

ORIG AMOUNT PAID 304.00
 TRAVELLED AMOUNT 141.00
 FORFEITED AMOUNT 0.00
 AVAILABLE AMOUNT 163.00
 REVISED FARE 163.00
 TKT DELIVERY FEE 0.00
 REFUNDABLE AMOUNT 0.00
 REFUND FEE 0.00

BAER, SUSAN

Riders Type Rider Status

From Carrier Train Date Time

To Space/Car

Endorsement/Restrictions

Not Valid Before/After

Accom

Form of Payment

Rail Fare

Fare Plans

Tkt. Ptr.

Accom Charge

Pricing Pts

Total Charge

096963138020

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

NRPT 96

STOCK CONTROL NO.

TKT NO - DO NOT MARK OR STAMP IN THIS BLOCK

Form of Payment

Rail Fare

Accom Charge

VOUCHER

01.00

REFUNDED

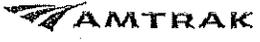
0.00

Ticket Number

No. of

16 Nov 12 02:18 PM 458C30 on #

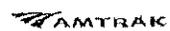
PASSENGER RECEIPT



Ticket Coupon of 01 of 01

RETAIN DURING TRIP

Riders



Baggage

I acknowledge receipt of tickets and agree to accept billing to the credit card identified below.

RES# 458C30-14NOV12

RES# 458C30-14NOV12

BAER, SUSAN

Name of Passenger

16 Nov 12 / 3:02 PM

RESERVED COACH SEAT

From WASHINGTON, DC Carrier TO NEWARK AIRPORT, NJ

To

Endorsement/Restrictions

Not Valid Before/After

Accom

From

To

Carrier Train Date

Accom Space/Car

Form of Payment

Rail Fare

Fare Plans

Tkt. Ptr.

HAS NO

Pricing Pts

ID REQD ON BOARD

VALUE

096963138016
P1 02:18:50:0272**ETICKET TRAVEL DOCUMENT**

Total Charge

NRPT 96

STOCK CONTROL NO.

TKT NO - DO NOT MARK OR STAMP IN THIS BLOCK

OTHER TERMS AND CONDITIONS APPLY. REFUND AND EXCHANGE FEES MAY APPLY

Fare Plans

Total



PASSENGER RECEIPT

DATE 11/16 AMOUNT \$12.00

RECEIVED FROM

FROM Western

DESTINATION Mitic Corporation

CAB # DRIVER I.D. #

DRIVERS NAME