

BATCH #

## 2026 TRAVEL AUTHORIZATION FORM

## SECTION 1a:

Dept/Agency: Sheriff ☐ PVL ☒ SLT  
 Employee Name: Greg Almos  
 Standard Work Hours:  
 Employee Job Title: Deputy  
 Fiscal Contact/Ext: Courtney Johnson/5191  
 EE Vendor/Suffix #: 5319  
 Destination: South Lake Tahoe  
 Funding source: General  
 Dept Date/Time: 06/09/26 7:00pm  
 Ret Date/Time: 06/12/26 11:00 AM

**SIGNATURE BLOCK:** I have read the County Travel and Credit Card Policies and understand that I cannot claim more than actual and necessary expenses. If I travel by private vehicle, I hereby certify that I possess a valid California/Nevada driver's license, and that I have sufficient public liability and property damage insurance at least equal to the requirements of financial responsibility laws of the State of California (Vehicle Code Section 16430). I also understand that I must submit my claim for reimbursement along with all the original receipts within thirty days of my return.

Employee \_\_\_\_\_ Date \_\_\_\_\_

Department Authorization \_\_\_\_\_ Date \_\_\_\_\_

Purpose of trip: Security Detail for CSSA Board Meeting  
 no acronyms

## SECTION 1b:

## Estimated Travel Details

Departing Address for Mileage ☐ SHORTEST ROUTE Destination Address for Mileage

**TRANSPORTATION** ☒ COUNTY VEHICLE miles rate  
 Private Auto Est. Mileage 0.725 \$ -  
 Fuel Est if using County Car  
 Airfare  
 Shuttle/Taxi Service  
 Airport Parking  
 Car Rental  
 Bridge/Toll  
 Other (Specify)  
 Page 2 \$ - Total Transportation: \$ -

**LODGING** GSA Rate \$ 171.00  
 Nights booked 3 Hotel Rate \$ 180.00 \$ 540.00  
 Tax/Surcharge/Resort Fee \$ 200.00  
 Parking  
 Other (Specify)  
 Page 2 \$ - Total Lodging: \$ 740.00

**PER DIEM (date)**  
 Breakfasts  
 Lunches  
 Dinners  
 Incidentals  
 Page 2 \$ - Total Meals: \$ -

GSA Rate \$86.00

PER DIEM: If dates and amounts vary from the estimates, use the "Sup. After Travel" worksheet.

## OTHER EXPENSES (SPECIFY)

Registration  
 Baggage Fee  
 Other (Specify)  
 Other (Specify)  
 Page 2 \$ - Total Other Expenses: \$ -

## ESTIMATED EXPENSES

GRAND TOTALS \$ 740.00

## Section 2b

Explanation of additional expenses or other notes as needed:

\$25 daily rate for parking for Dpt Almos total \$75. The additional \$75 was spouse parking Dpt. Almos repaid  
 Cash on 6/12 Deposit # 324572

Approval for additional expenses:

\$59.59

## SECTION 2c:

## \*\*\*\*UPON RETURN\*\*\*\*

## ACTUAL:

Departure Date/Time

6/19/26 1900

Return Date/Time

6/12/26 1100

I hereby certify that the expenses listed were incurred by me on authorized official County business and authorized within the County Travel and Credit Card Policies.

Greg Almos

Greg Almos (Jun 21, 2026 14:14:11 PDT)

06/21/2026

Employee

Date

Department Authorization

Date

6-21

Fenne 6/23

BATCH #

## 2026 TRAVEL AUTHORIZATION FORM

## SECTION 1a:

Dept/Agency: Sheriff ☒ PVL ☐ SLT  
Employee Name: Greg Almos  
Standard Work Hours:  
Employee Job Title: Deputy  
Fiscal Contact/Ext: Courtney Johnson/5191  
EE Vendor/Suffix #: 5319  
Destination: South Lake Tahoe  
Funding source: General  
Dept Date/Time: 06/09/26 7:00pm  
Ret Date/Time: 06/12/26 11:00 AM  
Purpose of trip: Security Detail for CSSA Board Meeting  
no acronyms

SIGNATURE BLOCK: I have read the County Travel and Credit Card Policies and understand that I cannot claim more than actual and necessary expenses. If I travel by private vehicle, I hereby certify that I possess a valid California/Nevada driver's license, and that I have sufficient public liability and property damage insurance at least equal to the requirements of financial responsibility laws of the State of California (Vehicle Code Section 16430). I also understand that I must submit my claim for reimbursement along with all the original receipts within thirty days of my return.

Greg Almos

06/08/2026

Greg Almos (Jun 8, 2026 18:58:08 PDT)

Employee

Date

Department Authorization

Date

## SECTION 1b:

## Estimated Travel Details

Departing Address for Mileage ☐ SHORTEST ROUTE Destination Address for Mileage

TRANSPORTATION ☒ COUNTY VEHICLE miles rate  
Private Auto Est. Mileage 0.725 \$ -  
Fuel Est if using County Car  
Airfare  
Shuttle/Taxi Service  
Airport Parking  
Car Rental  
Bridge/Toll  
Other (Specify)  
Page 2 \$ - Total Transportation: \$ -

LODGING  
Nights booked 3 GSA Rate \$ 171.00  
Hotel Rate \$ 180.00 \$ 540.00  
Tax/Surcharge/Resort Fee \$ 200.00  
Parking  
Other (Specify)  
Page 2 \$ - Total Lodging: \$ 740.00

PER DIEM (date) 6/9 6/10 6/11 6/12  
Breakfasts INC INC INC \$ -  
Lunches INC INC INC \$ -  
Dinners INC INC INC \$ -  
Incidental \$ -  
Page 2 \$ - Total Meals: \$ -

GSA Rate \$86.00

PER DIEM: If dates and amounts vary from the estimates, use the "Sup. After Travel" worksheet.

## OTHER EXPENSES (SPECIFY)

Registration  
Baggage Fee  
Other (Specify)  
Other (Specify)  
Page 2 \$ - Total Other Expenses: \$ -

## ESTIMATED EXPENSES

GRAND TOTALS \$ 740.00

## SECTION 2a:

## Actual Travel Details

## Payment Processed By:

## Changes

| Adv Ck | Emp Reimb | Pcard | Other | over/(under) |
|--------|-----------|-------|-------|--------------|
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
| \$ -   | \$ -      | \$ -  | \$ -  | \$ -         |
|        |           |       |       | \$ (540.00)  |
|        |           |       |       | \$ (200.00)  |
|        |           |       |       | \$ -         |
|        |           |       |       | \$ -         |
| \$ -   | \$ -      | \$ -  | \$ -  | \$ (740.00)  |

| Adv Ck | Emp Reimb | Pcard | Other |      |
|--------|-----------|-------|-------|------|
|        |           |       |       | \$ - |
|        |           |       |       | \$ - |
|        |           |       |       | \$ - |
|        |           |       |       | \$ - |
| \$ -   | \$ -      | \$ -  | \$ -  | \$ - |

## ACTUAL EXPENSES

## Section 2b

Explanation of additional expenses or other notes as needed:

Approval for additional expenses:

## SECTION 2c:

## \*\*\*\*UPON RETURN\*\*\*\*

Audit

Date

## ACTUAL:

Departure Date/Time

Return Date/Time

I hereby certify that the expenses listed were incurred by me on authorized official County business and authorized within the County Travel and Credit Card Policies.

Employee

Date

Department Authorization

Date



Almos, Greg

Confirmation Number: 3394669277-1

Room Number: 407

Room Type: K

No. of Guests: 1

| ARRIVAL<br>06/09/2026     |                     | DEPARTURE<br>06/12/2026                          |                                     | RATE PLAN<br>GGOVT |  | ACCOUNT |
|---------------------------|---------------------|--------------------------------------------------|-------------------------------------|--------------------|--|---------|
| Room Number               | Confirmation Number | Name                                             |                                     |                    |  |         |
| Date                      | Code                | Description                                      | Comments                            | Amount (USD)       |  |         |
| 407                       | 3394669277-1        | Almos, Greg                                      |                                     |                    |  |         |
| 06/09/2026                | 1210                | Valet Parking                                    | 20260610 040910 710590 Almos 710590 | \$25.00            |  |         |
| 06/09/2026                | 1000                | Room Charge                                      | Almos                               | \$173.00           |  |         |
| 06/09/2026                | OT                  | Occupancy Tax 14%                                |                                     | \$24.22            |  |         |
| 06/09/2026                | CT                  | California Tourism Fee                           |                                     | \$0.34             |  |         |
| 06/09/2026                | TBID                | Tourism Business Improvement District Tax \$4.00 |                                     | \$4.00             |  |         |
| 06/09/2026                | 2020                | Resort Fee                                       |                                     | \$35.00            |  |         |
| 06/09/2026                | RFT                 | Resort Fee Tax 14%                               |                                     | \$4.90             |  |         |
| 06/09/2026                | CT                  | California Tourism Fee                           |                                     | \$0.07             |  |         |
| 06/10/2026                | 1000                | Room Charge                                      |                                     | \$173.00           |  |         |
| 06/10/2026                | OT                  | Occupancy Tax 14%                                |                                     | \$24.22            |  |         |
| 06/10/2026                | CT                  | California Tourism Fee                           |                                     | \$0.34             |  |         |
| 06/10/2026                | TBID                | Tourism Business Improvement District Tax \$4.00 |                                     | \$4.00             |  |         |
| 06/10/2026                | 2020                | Resort Fee                                       |                                     | \$35.00            |  |         |
| 06/10/2026                | RFT                 | Resort Fee Tax 14%                               |                                     | \$4.90             |  |         |
| 06/10/2026                | CT                  | California Tourism Fee                           |                                     | \$0.07             |  |         |
| 06/11/2026                | 1210                | Valet Parking                                    | 20260612 041340 710590 Almos 710590 | \$25.00            |  |         |
| 06/11/2026                | 1210                | Valet Parking                                    | 20260612 041349 710401 ALMOS 710401 | \$120.00           |  |         |
| 06/11/2026                | 1000                | Room Charge                                      | ALMOS                               | \$173.00           |  |         |
| 06/11/2026                | OT                  | Occupancy Tax 14%                                |                                     | \$24.22            |  |         |
| 06/11/2026                | CT                  | California Tourism Fee                           |                                     | \$0.34             |  |         |
| 06/11/2026                | TBID                | Tourism Business Improvement District Tax \$4.00 |                                     | \$4.00             |  |         |
| 06/11/2026                | 2020                | Resort Fee                                       |                                     | \$35.00            |  |         |
| 06/11/2026                | RFT                 | Resort Fee Tax 14%                               |                                     | \$4.90             |  |         |
| 06/11/2026                | CT                  | California Tourism Fee                           |                                     | \$0.07             |  |         |
| 06/12/2026                | 1211                | Adj Parking Overnight                            | 20260610 040910 710590 Almos 710590 | (\$20.00)          |  |         |
| 06/12/2026                | 9004                | Visa Payment *****                               | Almos                               | (\$874.59)         |  |         |
| Subtotal for 3394669277-1 |                     |                                                  |                                     | \$0.00             |  |         |
| Sub-Total :               |                     |                                                  |                                     | \$774.00           |  |         |
| Total Tax :               |                     |                                                  |                                     | \$100.59           |  |         |
| Total Payments :          |                     |                                                  |                                     | (\$874.59)         |  |         |
| Total Due :               |                     |                                                  |                                     | \$0.00             |  |         |