

BATCH #

2026 TRAVEL AUTHORIZATION FORM

SECTION 1a:

Dept/Agency: Sheriff ☒ PVL ☐ SLT
Employee Name: Krystal Hamon
Standard Work Hours:
Employee Job Title: Executive Assistant
Fiscal Contact/Ext: Courtney Johnson/5191
EE Vendor/Suffix #: 11293
Destination: South Lake Tahoe
Funding source: General
Dept Date/Time: 06/09/26 12:00 PM
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: Event Coordinator 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
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 22.00 INC INC \$ 22.00
Lunches INC 23.00 \$ 23.00
Dinners 36.00 INC INC \$ 36.00
Incidental 5.00 5.00 5.00 5.00 \$ 20.00
Page 2 \$ - Total Meals: \$ 101.00

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 \$ 841.00

Section 2b

Explanation of additional expenses or other notes as needed:

SECTION 2a:

Actual Travel Details

Payment Processed By:				Changes
Adv Ck	Emp Reimb	Pcard	Other	over/(under)
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
\$ -	\$ -	\$ -	\$ -	\$ -
Adv Ck	Emp Reimb	Pcard	Other	
		\$ 519.00		\$ (21.00)
		\$ 205.59		\$ 5.59
		\$ 75.00		\$ 75.00
				\$ -
\$ -	\$ -	\$ 799.59	\$ -	\$ 59.59
Adv Ck	Emp Reimb	Pcard	Other	
	\$ 22.00			\$ -
	\$ 23.00			\$ -
	\$ 36.00			\$ -
	\$ 20.00			\$ -
\$ -	\$ 101.00	\$ -	\$ -	\$ -
Adv Ck	Emp Reimb	Pcard	Other	
				\$ -
				\$ -
				\$ -
				\$ -
\$ -	\$ -	\$ -	\$ -	\$ -
ACTUAL EXPENSES				\$ 900.59

\$59.59

Approval for additional expenses:

SECTION 2c:

*****UPON RETURN*****

Audit

Date

ACTUAL:

Departure Date/Time
Return Date/Time

06/09/2026 1200
06/19/2026 0800

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.

Krystal Hamon
Krystal Hamon (Jun 17, 2026 13:00:01 PDT)

06/17/2026

Employee

Date

Department Authorization

Date

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Krystal Hamon
Krystal Hamon (Jun 8, 2026 10:05:02 PDT)
Employee

06/08/2026

[Signature]
Department Authorization

Date

Date

Purpose of trip: Event Coordinator 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
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Fuel Est if using County Car
Airfare
Shuttle/Taxi Service
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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) 6/9 6/10 6/11 6/12
Breakfasts 22.00 INC INC \$ 22.00
Lunches INC 23.00 \$ 23.00
Dinners 36.00 INC INC \$ 36.00
Incidental 5.00 5.00 \$ 15.00
Page 2 \$ - Total Meals: \$ 96.00

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 \$ 836.00

Section 2b

Explanation of additional expenses or other notes as needed:

Approval for additional expenses:

SECTION 2c:

****UPON RETURN****

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



Hamon, Krystal

Confirmation Number: 7359727917-1

Room Number: 425

Room Type: K

No. of Guests: 1

ARRIVAL		DEPARTURE		RATE PLAN	ACCOUNT
06/09/2026		06/12/2026		GGOVT	
Room Number	Confirmation Number	Name			
Date	Code	Description	Comments	Amount (USD)	
425	7359727917-1	Hamon, Krystal			
06/09/2026	1210	Valet Parking	20260610 041437 710566 Hamon 710566 Hamon	\$25.00	
06/09/2026	1000	Room Charge		\$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	1210	Valet Parking	20260611 040630 710566 Hamon 710566 Hamon	\$25.00	
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 040226 710566 Hamon 710566 Hamon	\$25.00	
06/11/2026	1000	Room Charge		\$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	9004	Visa Payment *****		(\$799.59)	

Subtotal for 7359727917-1

Sub-Total : \$699.00

Total Tax : \$100.59

Total Payments : (\$799.59)

Total Due : \$0.00

Signature
Pcard holder