#### INTEROL-ICE COMMUNICATI( )

### **WASHINGTON STATE PATROL**

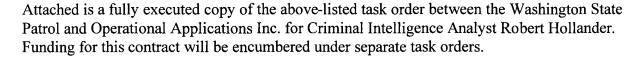
TO: Lieutenant Randy Drake, Investigative Assistance Division-

FROM: Mr. Jeff Hugdahl, Budget and Fiscal Services

SUBJECT: WSP Contract No. C110169PSC and Task Order No. 1

**DATE:** September 30, 2010

SEP 3 0 2010



Please ensure that the WSP employee preparing payment documents for this contract has a copy of this contract to ensure the payment documents are filled out correctly.

The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above; please use this number on all correspondence and payment documents associated with this contract. If you need further assistance, please contact Ms. Cindy Haider, Budget and Fiscal Services, at Micro 12, ext. 11071.

Joy JRH:clh
Attachment

cc:

Captain Tim Braniff, Investigative Assistance Division

Ms. Tanya Pierce, Accounts Payable Section

Ms. Melissa Stricklett, Budget Section



#### Washington State Patrol

Date 9 / 17 10

Budget and Fiscal Services Contract Notification Form TAS											
☐ Billable over \$10,000 ☐ Billable under \$				610,000 🛛 Payable 🔲 Other:							
C110169PSC (1)				Other Contract Number				A/R Num			
				Contr 9/30/	ract End D /2011	Date			CFDA N		FSR Yes
Contract Title											
CRIMINAL INTELLIGENCE ANALYST SER Contractor Name									Contractor E	IN/SSN	
OPERATIONAL APPLICATIONS INC.											
Contractor Contact Address											
4227 SOUTH			E <b>C</b> 366	<i></i>							
Contractor Co		₃me	1			ntact Phone			BFS Contrac	•	Name
DOUG LARN Contractor E-N		drace			226-9564 actor Cor				CINDY HAIDER BFS Fiscal Analyst Name		
doug.larm@or			s com	Cona	acioi co.	lldul i an			TANYA PIERCE		
WSP Project N	Manage	r/Position No		WSP	Section/E	Division/Bur	eau		BFS Budget Analyst Name		
LIEUTENAN	T RAN	DY DRAKE		IAD					MELISSA S	TRICKLET	r
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300-365-522 (R 7/09)

⊠Budget Analyst

☑ Other: <u>CAPTAIN BRANIFF</u>

#### WASHINGTON STATE PATROL Task Order

WSP Contract Number:

C110169PSC

Task Order Number:

Contractor: Operational Applications Inc.

Period of Performance

October 1,

September 30,

for Task Order:

Start Date:

2010

End Date:

2011

Description of Service:

The Contractor's Employee (Robert J. Hollander) shall provide criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local worksite for the Contractor's Employee during this Task Order is

the Washington State Fusion Center (WSFC).

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$50.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C110169PSC.

Maximum Task Order Amount: \$109,000.00

WSP Contact Name and

Telephone Number:

Lieutenant Randy Drake, (360) 704-2393

Contractor Contact Name and

Mr. Doug Larm, (253) 226-9564

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

John R. Baliste, Chief Date Signature

Printed Name and Title

#### Washington State Patrol

Date 9 / 17/10 TAS \_\_\_\_\_\_\_ Budget and Fiscal Services Contract Notification Form

☐ Billable over \$10,000 ☐ Billable under \$10,000 ☒ Payable ☐ Other:												
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			Contra	Contract End Date				CFDA N	0.	QFSR		
					R 30, 2012			0.2	1	]Yes		
Contract Title												
CRIMINAL I	NTEL	IGENCE A	NALYS'	Γ SERV	ICES_							
Contractor Name									Contractor E	Contractor EIN/SSN		
OPERATIONAL APPLICATIONS INC. (DOI				. (DOU	JG LARM)							
Contractor Contact Address												
4227 SOUTH MERIDIAN SUITE C366, PUY								-				
l l				1		ntact Phone	)		BFS Contracts Specialist Name			
DOUG LARI					26-956				CINDY HAIDER			
Contractor E-				Contra	actor Co	ntact Fax			BFS Fiscal Analyst Name			
doug.larm@o WSP Project				WSP	Section	Division/Bur	200		TANYA PIERCE			
LIEUTENAN	_			IAD	oeciioi <i>ii</i>	DIVISION/DUI	cau	1	BFS Budget Analyst Name MELISSA STRICKLETT			
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Regular Time												
Overtime	Overtime Yes No											
Voluntary Ove	rtime	☐ Yes	☐ No									
Mileage Yes No												
Allow Leave		☐ Yes	☐ No	1	Positions hard-coded to contract: Yes No							
Captain Overti	ime	☐ Yes	□No		Indirect Costs Yes No Rate:							
Limit By Org C	ode	☐ Yes	☐ No		Primary	Org Code:						
External Contr		☐ Yes	□No		•	rg Codes:						
Type of Receipt: Revenue Interager					ency Re	eimburseme	nt	Reco	very of Expe	nditure		

Distribution: ☑ Project Manager ☑ Fiscal Analyst ☑ Budget Analyst 300-365-522 (R 7/09)

WASHINGTON STATE	PATROI	WSP Contract No.			
PERSONAL SERVICE CO		C110169PSC			
Criminal Intelligence Analy		Other Contract No.			
		iton State Patrol a	nd the Contractor identified below, and is		
governed by chapter 39.29 RCW.	vvasimigtori, vvasimig	ton State Fatior at	nd the Contractor Identified below, and is		
CONTRACTOR NAME		Contractor Doing I	Business As (DBA)		
Operational Applications Inc.					
Contractor Address		Contractor Federa	al Employer Identification Number		
4227 South Meridian Suite C366	*	,			
Puyallup WA 98373		O4-4-T-1			
Contact Name		Contact Telephone	e		
Mr. Doug Larm Contact Fax		253-226-9564 Contact E-mail Ad	Idroop		
Contact Fax	i i		rationalapplications.com		
	WSP Contact		rationalappilications.com		
WSP Project Manager Name and Title		WSP Project Mar	nager Address		
		WSP Investigative Assistance Division			
Lieutenant Randy Drake		PO Box 2347, Olympia WA 98507-2347			
Telephone	Fax		E-mail Address		
(360) 704-2393	(360) 704-2973		randy.drake@wsp.wa.gov		
WSP Administrative Contact Name and	d Title	WSP Administrative Contact Address			
Mr. Jeff Hugdahl		PO Box 42602			
Grants and Contracts Manager		Olympia WA 98504-2602			
Telephone	Fax		E-mail Address		
(360) 596-4052	(360) 596-4077		jeff.hugdahl@wsp.wa.gov		
Contract Start Date	Contract End Date		Maximum Contract Amount		
October 1, 2010	September 30, 201				
ATTACHMENTS. When the boxes below are marked with an X, the following Exhibits are attached to and incorporated into this Contract by reference:					
Exhibit A, Statement of Work.					
Exhibit B, General Terms and Conditions					
Additional Exhibits as specified: Exhibit C, Contractor Employee Nondisclosure Agreement					
This Contract, including the attached Terms and Conditions and any other documents incorporated by reference,					
contains all of the terms and conditions agreed upon by the parties. No other understandings or representations, oral or otherwise, regarding the subject matter of this Contract shall be deemed to exist or bind the parties. The parties signing					
below warrant that they have read and					
FOR THE WASHINGTON STATE PAT		FOR THE CONTI			
WSP Signature	Date	Contractor Signature Date			
MIL	9-29-10	Allie 25 SEP 2010			
Printed Name and Title	30.4	Printed Name and Title			
John B. Potioto Chiof	unitz Deputy	DOUG LARM PRESIDENT			
	ORM BY THE OFFICE	OF THE ATTORNEY GENERAL 2/20/02			

WSP Personal Service Contract

2/12/02

#### STATEMENT OF WORK

#### 1. Statement of Work.

- a. <u>General</u>. As assigned by WSP, the Contractor Employee(s) identified below shall provide criminal intelligence analyst services at the Location of Work in order to provide the following products:
  - Raw intelligence classification and analysis
  - Daily intelligence briefings
  - Weekly and monthly written intelligence bulletins
  - Periodic intelligence assessments
  - Information dissemination to local law enforcement agencies
  - Effective communication to help others learn, understand and apply specific criminal intelligence analysis principles, techniques or information.
  - Effective identification, collection, organization and documentation of criminal intelligence data and information in ways that make the information most useful for subsequent assessment, analysis and investigation.

Contractor Employee Location of Work
Robert J. Hollander WSFC

- b. <u>Task Orders</u>. Work shall be assigned by a negotiated Task Order and must be signed by both parties. Each Task Order must identify the Contractor's Employee assigned to do the work ("Contractor Employees"), the Local Worksite to which the Contractor's Employee will be assigned and a start and end date for work at that location.
- 2. Contractor Qualifications. During the period of performance of this Contract, the Contractor Employee must maintain a federal Top Secret level security clearance.
- **3. Rules of Conduct.** During the period of performance of this Agreement, the Contractor must follow these basic rules of conduct while providing instruction:
  - a. Alcohol and Drug Use. The Contractor shall not consume any alcohol or intoxicating beverage while providing services under this Contract, and will not appear for work while under the influence of alcohol or while having alcohol in their system. The Contractor shall not possess, use, or store alcoholic beverages while at any WSP facility or local worksite. Contractor employees shall not use or possess any narcotic, dangerous drug, or controlled substance except at the direction of a physician, dentist, or other medical authority for medical purposes. If the Contractor is directed by competent medical authority to use a narcotic, dangerous drug, or controlled substance, he/she shall not use such medication to the extent that their performance is affected while at any WSP facility or local worksite.

#### STATEMENT OF WORK (Continued)

- b. <u>Courtesy</u>. The Contractor shall be courteous to WSP staff, other law enforcement partners, and the public. The Contractor shall be tactful in the performance of their duties, shall control their tempers and exercise the utmost patience and discretion, and shall not engage in argumentative discussions. In the performance of their duties, the Contractor shall not use coarse, violent, profane, or insolent language or gestures, and shall not express any prejudice concerning race, religion, sex, politics, national origin, lifestyle, or similar personal characteristics.
- c. <u>Appearance</u>. WSP expects the Contractor to present a professional image when providing services under this Contract. Clothing shall be neat, clean, and in good condition.
- 4. Confidential Information. The Contractor acknowledges that some of the material and information that may come into its possession or knowledge in connection with this Contract or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.17 RCW or other state or federal statutes ("Confidential Information"). Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information. The Contractor agrees to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without WSP's express written consent or as provided by law.

The Contractor agrees to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information. Immediately upon expiration or termination of this Contract, the Contractor shall, at WSP's option: (i) certify to WSP that the Contractor has destroyed all Confidential Information; or (ii) return all Confidential Information to WSP; or (iii) take whatever other steps WSP requires of the Contractor to protect Confidential Information. WSP reserves the right to monitor, audit, or investigate the use of Confidential Information collected, used, or acquired by the Contractor through this Contract.

Contractor Employees working under this Contract shall complete and sign Exhibit C, Contractor Employee Nondisclosure Agreement, attached hereto and incorporated into the Contract herein. Violation of this section by the Contractor may result in termination of this Contract and demand for return of all Confidential Information, monetary damages, or penalties. Furthermore, the Contractor is subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.

**5. Fees.** WSP will reimburse the Contractor a maximum one hundred and seventy-three (173) hours per month at the hourly rate identified below for services provided by the Contractor Employee(s) under this Contract.

<u>Contractor Employee</u> 10/1/10 – 9/30/11 10/1/11 – 9/30/12 Robert J. Hollander \$50.00 \$50.00

#### STATEMENT OF WORK (Continued)

When services are required by WSP at locations other than the local worksite, WSP will reimburse the Contractor for authorized lodging, subsistence and business vehicle mileage costs at current State of Washington approved reimbursement rates. These rates are published in the State Accounting and Administrative Manual (SAAM). This manual is available at the Office of Financial Management's SAAM website: <a href="http://www.ofm.wa.gov/policy/saamintro.htm">http://www.ofm.wa.gov/policy/saamintro.htm</a>

#### 6. Insurance Requirements.

- a. <u>Worker's Compensation Coverage</u>. The Contractor will at all times comply with all applicable workers' compensation, occupational disease, and occupational health and safety laws, statutes, and regulations to the full extent applicable. WSP will not be held responsive in any way for claims filed by the Contractor or their employees for services performed under the terms of this contract.
- b. <u>Business Auto Policy</u>. As applicable, the Contractor shall maintain business auto liability and, if necessary, commercial umbrella liability insurance with a limit not less than \$500,000 per accident. Such insurance shall cover liability arising out of "Any Auto." Business auto coverage shall be written on ISO form CA 00 01, 1990 or later edition, or substitute liability form providing equivalent coverage. The Contractor shall furnish evidence of Business Auto Policy insurance meeting contract requirements at the request of WSP.

#### **GENERAL TERMS AND CONDITIONS**

#### 1. Definitions.

"Contract" means this Personal Service Contract, including all documents attached or incorporated by reference.

"Contractor" means the entity performing services to this Contract and includes the Contractor's owners, members, officers, director, partners, employees and/or agents unless otherwise stated in this Contract. For purposes of any permitted Subcontract, "Contractor" includes any Subcontractor and its owners, members, officers, director, partners, employees and/or agents.

"General Terms and Conditions" means this Exhibit B.

"Statement of Work" means the Special Terms and Conditions of this Contract, which is attached hereto and incorporated herein as Exhibit A.

"Subcontract" means a separate contract between the Contractor and an individual or entity ("Subcontractor") to perform all or a portion of the duties and obligations that the Contractor is obligated to perform pursuant to this Contract.

"RCW" means the Revised Code of Washington. All references in the Contract to RCW chapters or sections shall include any successor, amended or replacement statutes.

"USC" means United States Code. All references in the Contract to USC chapters or sections shall include any successor, amended or replacement statutes.

"WSP" means the State of Washington, Washington State Patrol, and its officers, directors, trustees, employees and/or agents.

- 2. Payment. WSP shall reimburse the Contractor an amount not to exceed the Maximum Contract Amount specified on the Face Sheet of this Contract.
- 3. Billing Procedure. WSP shall reimburse the Contractor according to Exhibit A, Statement of Work, for work performed to the satisfaction of the WSP Project Manager. Compensation for services rendered shall be payable upon receipt of properly completed invoices, which shall be submitted not more often than monthly to the WSP Project Manager. The invoices shall describe and document to WSP's satisfaction a description of the work performed, activities accomplished, the progress of the project, fees and expenses, and WSP's contract number.
- **4.** Advance Payments Prohibited. WSP shall not make any payments in advance or anticipation of the delivery of goods or services provided by the Contractor pursuant to this Contract.
- Assignment. The work to be provided under this Contract, and any claim arising thereunder, is not assignable or delegable by the Contractor in whole or in part, without the express written consent of WSP.
- 6. Attorneys' Fees and Costs. If any litigation is brought to enforce any term, clause, provision or section of this Contract or as a result of this Contract in any way, the prevailing party shall be awarded

its reasonable attorney's fees together with expenses and costs incurred with such litigation, including necessary fees, costs and expenses for services rendered at both trial and appellate levels as well as subsequent to judgement in obtaining execution thereof. In the event that parties to this Contract engage in arbitration, mediation or any other alternative dispute resolution forum to resolve a dispute in lieu of litigation, both parties shall share equally in the cost of the alternative dispute resolution, including the cost of mediation or arbitration services. Each party shall be responsible for their own attorney's fees incurred as a result of the alternative dispute resolution method.

- 7. Compliance with Civil Rights Laws. During the period of performance for this Contract, the Contractor shall comply with all federal and state nondiscrimination laws, including, but not limited to, Title VII of the Civil Rights Act, 42 USC 12101 et seq.; the Americans with Disabilities Act (ADA); and Chapter 49.60 RCW.
- 8. Confidentiality. The Contractor shall not use or disclose any information concerning WSP, or information that may be classified as confidential, to any third party without the written permission of WSP. The Contractor shall destroy or return all such information to the WSP Program Manager at the end of this Contract.
- 9. Contract Execution and Amendments. This Contract shall be binding on WSP only upon signature by the Chief of WSP or designee. WSP and the Contractor may mutually amend this Contract. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind WSP and the Contractor.
- 10. Contractor Certification Regarding Ethics. The Contractor certifies that the Contractor is in compliance with Chapter 42.52 RCW, Ethics in Public Service, and will comply with Chapter 42.52 RCW throughout the term of the Contract.
- 11. Disputes. In the event that a dispute arises under this Contract, it shall be resolved by a Dispute Board in the following manner: The Chief of WSP shall appoint a member to the Dispute Board. The Contractor shall appoint a member to the Dispute Board. The Chief of WSP and the Contractor shall jointly appoint a member to the Dispute Board. The Dispute Board shall evaluate the dispute and make a determination of the dispute. The determination of the Dispute Board shall be final and binding to all parties to this Contract.
- 12. Governing Law. This Contract shall be governed in all respects by the laws of the State of Washington. The jurisdiction for any action hereunder shall be the Superior Court for the State of Washington. The venue of any action hereunder shall be in the Superior Court for Thurston County, State of Washington.
- 13. Indemnification. The Contractor shall indemnify, defend and hold harmless WSP from and against all claims arising out of or resulting from the performance of this Contract. The Contractor expressly agrees to indemnify, defend and hold harmless WSP for any claim arising out of or incident to the Contractor's performance or failure to perform this Contract. The Contractor shall be required to indemnify, defend and hold WSP harmless to the extent claim is caused in whole or in part by negligent acts or omissions of the Contractor.
- 14. Independent Capacity. The Contractor acknowledges that the Contractor is an independent contractor, and not an officer, employee or agent of WSP or the State of Washington. The Contractor shall not hold itself out as, nor claim status as, and officer, employee or agent of WSP or the State of Washington. The Contractor shall indemnify and hold WSP harmless from all obligations to pay or withhold federal or state taxes or contributions on behalf of the Contractor or the Contractor's employees unless otherwise specified in this Contract.

- 15. Industrial Insurance Coverage. Prior to performing work under this Contract, the Contractor shall provide or purchase industrial insurance coverage for its employees, as may be required of an "employer" as defined in Title 51 RCW, and shall maintain full compliance with Title 51 RCW during the period of performance for this Contract. WSP shall not be responsible for payment of industrial insurance premiums or for any other claim or benefit for the Contractor, or any subcontractor or employee of the Contractor, which might arise under the industrial insurance laws during the performance of duties and services under this Agreement.
- 16. Insurance. The Contractor shall provide insurance coverage as set out in Exhibit A, Statement of Work. The intent of the required insurance is to protect the State of Washington should there be any claims, suits, actions, costs, damages or expenses arising from any negligent or intentional act or omission of the Contractor or any subcontractor, or agents of either, while performing under the terms of this Contract.
- 17. Inspection; Maintenance of Records. During the term of this Contract and for one year following termination or expiration of this Contract, the Contractor shall give reasonable access to the Contractor's place of business and records to WSP and any other employee or agent of the State of Washington or the United States of America for the purpose of inspecting the Contractor's place of business and its records, and monitoring, auditing and evaluating the Contractor's performance and compliance with applicable laws, regulations, rules and this Contract.

During the term of this Contract and for six years following termination or expiration of this Contract, the Contractor shall maintain records sufficient to document (i) performance of all acts required by statute, regulation, rule, or this Contract; (ii) substantiate the Contractor's statement of its organization's structure, tax status, capabilities and performance; and (iii) demonstrate accounting procedures, practices and records that sufficiently and properly document the Contractor's invoices to WSP and all expenditures made by the Contractor to perform as required by this Contract.

**18. Order of Precedence.** In the event of any inconsistency in the terms of this Contract, or between its terms and any applicable statute or rule the inconsistency shall be resolved by giving precedence in the following order to:

Applicable federal and state law, regulations and rules; Exhibit A, Statement of Work; Any other provision of this Contract; and Any document incorporated by reference.

- 19. Overpayments to Vendors. Upon notice of an erroneous payment or overpayment to which the Contractor is not entitled pursuant to this Contract, the Contractor shall promptly refund to WSP the full amount of any such payment or overpayment.
- 20. Personnel. WSP employees performing work under the terms of this Contract (if any) shall be under the direct command and control of the Chief of WSP or designee, and shall perform duties required under this Contract in a manner consistent with WSP policy and regulations, and applicable federal, state and local laws. The assignment of WSP personnel under this Contract shall be at the discretion of the Chief of WSP or designee.

- 21. Rights in Data. Unless otherwise provided, data that originates from this Contract shall be "works for hire" as defined by the U.S. Copyright Act of 1976 and shall be owned by WSP. Data shall include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions. Ownership includes the right to copyrights, patent, register, and the ability to transfer these rights.
  - Material delivered by the Contractor under the terms of this Contract, but which does not originate therefrom, shall be transferred with a nonexclusive, royalty-free irrevocable license to publish, translate, reproduce, deliver, performs, dispose of, and to authorize others to do so, provided that such a license shall be limited to the extent which the Contractor has a right to grant such a license. The Contractor shall exert all reasonable efforts to advise WSP at the time of material delivery of all known or potential invasions of privacy contained therein and of any portion of such material which was not produce in performance of this Contract. WSP shall receive prompt written notice of each notice or claim of copyright infringement received by the Contractor with respect to any material delivered under this Contract. WSP shall have the right to modify or remove any restrictive markings placed upon the data by the Contractor.
- 22. Savings. In the event that funds WSP relied upon to establish this Contract are withdrawn, reduced or limited, or if additional or modified conditions are placed on such funding, WSP may immediately terminate this Contract by providing written notice to the Contractor. This termination shall be effective on the date specified in the notice of termination.
- 23. Severability. If any provision of this Contract or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Contract which can be given effect without the invalid provision, if such remainder conforms to the requirements of applicable law and the fundamental purpose of this Contract, and to this end the provisions of this Contract are declared to be severable.
- 24. Site Security. While on WSP's premises, the Contractor shall conform in all respects with physical, fire or other security regulations communicated to the Contractor by WSP.
- **25. Subcontracting.** Except as otherwise provided in this Contract, the Contractor may subcontract for any of the services provided under this Contract with the prior, written approval of WSP. The Contractor shall be responsible for the acts and omissions of any subcontractor.
- 26. Survivorship of Provisions. Any terms, conditions and warranties contained in this Contract that by their sense and context are intended to survive performance by the parties to this Contract shall so survive the completion of the period of performance or termination of this Contract.
- 27. Taxes. WSP shall pay sales and use taxes imposed on services provided by the Contractor under this Contract if required by state law. The Contractor shall pay all other taxes, including, but not limited to, Washington State Business and Occupation Tax, taxes based on the Contractor's income, or personal property taxes levied or assessed on the Contractor's personal property to which WSP does not own title.
- 28. Termination for Convenience. Except as otherwise provided in this Contract, either party may terminate this Contract upon thirty (30) calendar days written notification. If this Contract is so terminated, the terminating party shall be liable only for performance in accordance with the terms of this Contract for performance rendered prior to the effective date of termination.

29. Termination for Default. WSP may terminate the Contract for default, in whole or in part, if WSP has a reasonable basis to believe that the Contractor failed to perform under any provision of this Contract; violated any applicable law, regulation, rule or ordinance; or otherwise breached any provision or condition of this Contract.

WSP shall notify the Contractor in writing of the need to take corrective action. If corrective action is not taken within five (5) calendar days, the Contract may be terminated. WSP reserves the right to suspend all or part of the Contract, withhold further payments, or prohibit the Contractor from incurring additional obligations of funds during investigation of the alleged breach and pending corrective action by the Contractor or a decision by WSP to terminate the Contract.

In the event of termination for default, the Contractor shall be liable for damages as authorized by law including, but not limited to, any cost difference between the original contract and the replacement or cover contract, and all administrative costs directly related to procuring the replacement contract. If it is determined that the Contractor was not in default the termination shall be deemed a termination for convenience. The rights and remedies of WSP provided under this Contract are not exclusive and are in addition to any other rights and remedies provided by law.

- **30. Termination Procedure.** The following provisions shall survive and be binding on the parties to this Contract in the event this Contract is terminated.
  - a. The Contractor shall stop work under this Contract on the date specified in the notice of termination, and shall comply with all instructions contained in the notice of termination.
  - b. The Contractor shall deliver to the WSP Project Manager identified on the Face Sheet of this Contract, all WSP property in the Contractor's possession and any WSP property produced under this Contract. The Contractor grants WSP the right to enter upon the Contractor's premises for the sole purpose of recovering any WSP property that the Contractor fails to return within ten (10) calendar days of termination of the Contract. Upon failure to return WSP property within ten (10) calendar days of the Contract termination, the Contractor shall be charged with all reasonable costs of recovery, including transportation and attorney's fees. The Contractor shall protect and preserve any property of WSP that is in the possession of the Contractor pending return to WSP. The Contractor shall provide written certification to WSP that the Contractor has returned all WSP property in the Contractor's possession.
  - c. WSP may direct assignment of the Contractor's rights to and interest in any subcontract or orders placed to WSP. WSP may terminate any subcontract or orders, and settle or pay any or all claims arising out of the termination of such orders and subcontracts.
  - d. WSP shall be liable for and shall pay for only those services authorized and provided through the date of termination. WSP may pay an amount agreed to by the parties for partially completed work and services, if work products are useful to WSP.
  - e. In the event of termination for default, WSP may withhold a sum from the final payment to the Contractor that WSP determines necessary to protect WSP against loss or additional liability.

- 31. Treatment of Assets. Title to all property furnished by WSP to the Contractor under the terms of this Contract shall remain with WSP. Any property furnished by WSP to the Contractor under the terms of this Contract shall be used only for the performance of this Contract. The Contractor shall be responsible for any loss or damage of property provided to the Contractor by WSP resulting from the failure on the part of the Contractor to maintain and administer that property in accordance with sound management practices. Upon the discovery of loss or damage of WSP property, the Contractor shall notify WSP and take all reasonable steps to prevent any further loss or damage. Upon the termination or completion of this Contract the Contractor shall surrender all WSP property to the WSP Project Manager indicated on the Face Sheet of this Contract.
- **32. Waiver.** A failure by WSP to exercise its rights under this Contract shall not preclude WSP from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Contract unless stated to be such in writing and signed by an authorized representative of WSP and attached to the original Contract.

#### CONTRACTOR EMPLOYEE NONDISCLOSURE AGREEMENT

I acknowledge that some of the material and information that may come into my possession or knowledge in connection with Washington State Patrol Contract Number C110169PSC or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.17 RCW or other state or federal statutes ("Confidential Information").

Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information.

I agree to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without the Washington State Patrol's express written consent or as provided by law.

I also agree to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information.

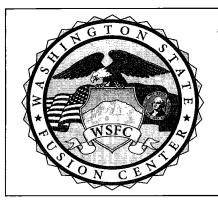
Immediately upon expiration or termination of this Contract or my employment with the Contractor, I shall surrender any and all Confidential Information in my possession to the Vendor for its disposition according to the terms of the Contract.

I understand that I am subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.

Signature of Contractor Employee

Printed Name and Title

Date



# WASHINGTON STATE FUSION CENTER

1110 3<sup>rd</sup> Ave, Seattle, WA 98101 WSFC: 1-877-843-9522 || Fax: 206-262-2014

## FAX

To: LEO	From: WSFC
Fax: 304-625-5399	Pages: 11
Phone:	Date: 02Nov10
Re: Account Access	CC·



#### **WARNING**

LEO is an official U.S. Government system for authorized use only by authorized members of the law enforcement, criminal justice and public safety community. Information presented in this system is considered sensitive but not classified and is for official law enforcement/criminal justice/public safety use only. The use of this system will be monitored for security and administration purposes and accessing this system constitutes consent to such monitoring. Any unauthorized access of this system or unauthorized use of the information provided on the LEO network is prohibited and may be subject to criminal and civil penalties under federal law.

This FBI system is for the sole use of authorized users for official business only. You have no expectation of privacy in its use. To protect the system from unauthorized use and to insure that the system is functioning properly, individuals using this computer are subject to having all their activities on this system monitored and recorded by system personnel. Anyone using this system expressly consents to such monitoring and is advised that if such monitoring reveals evidence of possible abuse or criminal activity, system personnel may provide the results of such monitoring to appropriate officials.

results of such monitoring to appropriate officials.

LEO will collect and store system and network related information in a persistent cookie. The purpose of collecting and storing this information is so that LEO can enhance its security by employing advanced authentication reliant on this information. The information is encrypted and LEO will not share this with any unauthorized parties. Warning! The use of publicly accessible computers (e.g. libraries, airports, cafes, hotels, etc.) to access LEO is unauthorized. This type of usage may result in the involuntary dissemination of information to unauthorized entities. Data may be left on this computer resulting in the next person using this machine the ability to view your data.

#### PRIVACY ACT STATEMENT

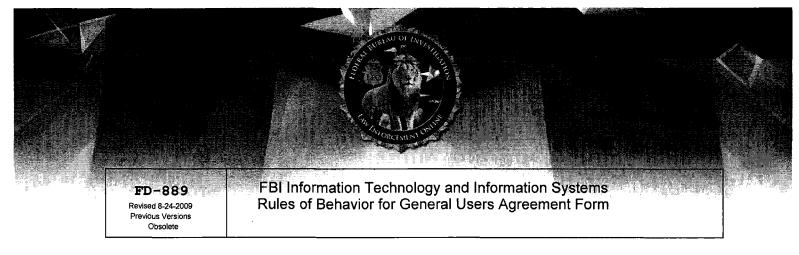
General - This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974) for individuals completing LEO user application forms. Authority - LEO is a federally funded national communications system established by the FBI. Application information is solicited under the authority of the Federal Records Act (Title 44, United States Code) and national communications system established by the FBI. Application Information Information solutions of the FBI code of Federal Regulations, chapter XII). Purpose and Use - The principal purposes of LEO User application forms are to collect information needed to determine qualifying factors for authorized use, and verification of identity. This completed application will be used to register this account as a qualified LEO account. All or part of the submitted information may be disclosed outside the FBI to federal, state, local, or tribal law enforcement agencies charged with the responsibility of investigating a violation or potential violation of the law and to applicant agency or organization to periodically verify continued access to LEO. Disclosure may otherwise be made pursuant to the routine uses most recently published in the Federal Register for the FBI's Central Records System (Justice/FBI 002). Failure to provide the requested information shall result in the denial of this application.

Instructions: Type or write the information requested. ALL FIELDS ARE MANDATORY. When completed, fax or mail to the information provided in the upper right hand portion of page one of this form. Send all pages, including the signed FD-889 Rules of Behavior form. IMPORTANT: Non-legible applications will not be processed

	i legisle application of the processor.
1. Contractor Applicant Information	
Name (Last, First, MI): Hollander, K	
Employing Company Name: Operations A  Title / Position: (do not abbreviate) Intelligence	applications
Title / Position: (do not abbreviate)  In telligence	Analyst
E-mail Address: rob, Hollande	re wstc. wa.gov
Are you a US citizen? Yes No D	Dual List all citizenships held other than US:
Business Mailing Address: (no PO Boxes)  /// Ø 3rd Ave	Phone: 206-262-2257
Seattle, WA 98101	Alternate Phone:
2. Contractor Applicant Security Verification Informat	ion
Last 6 digits	Date of
(ex: mother's maiden name):	



3. FBI Sponsoring Party / Point of Contact				
Name (Last, First, MI): Turnen	Theodone R			
	Seattle			
Title / Position: (do not abbreviate) Tytell, General	Procesam Coordinator			
	Program Coordination  Phone: 206-423-5675			
1110 312 AV	Alternate Phone: 206 - 622 - 0450			
Seattle, OA	LEO E-mail:			
98101				
	Alternate E-mail:  Preadone - tunnena ic. Fbi, goi			
4. Name and Description of Project, Justification	of Access			
Project Title: Washington State	Fusion Center			
Project Description: Provides support to Security Missions for agencies as well as pr	the public safety and homeland federal, state, local, and tribal rivate sector entities.			
Justification for Access:	·			
Co-located with the F	-81			
Length of Access From: 8 0cT 2016	70: 31 DEC 2015			
Type of Access (Circle One): LEO Email Only	LEO Email & Specific SIG & VCC			
Specify Requested SIG & VCC Access Permissions:				
5. Sponsoring Party / Point of Contact Certificatio	n (Please complete signature lines)			
,	nal is authorized to have access to the Law Enforcement Online of re-certify access to LEO for the above named individual every			
x 71, 27	11/2/10			
SIGNATURE	MONTH / DAY / YEAR			



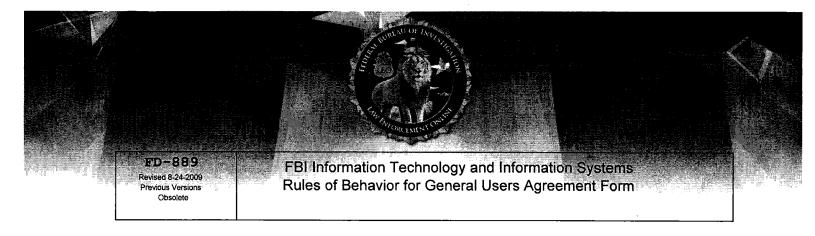
**Purpose:** This agreement outlines the acceptable and unacceptable uses of FBI Information Technology (IT) and Information Systems (IS). It also outlines the signer's responsibilities regarding stewardship and use of FBI IT/IS and Public Key Infrastructure (PKI) assets and capabilities if a PKI token is issued.

**Scope:** This agreement applies to anyone granted access to any FBI IT/IS, including but not limited to: FBI employees, contractors, interns, detailees, and personnel from Other Government Agencies (e.g., Federal, state, municipal, or tribal). All references to IT/IS monitoring herein pertain to data communications only (emails, facsimile, computer database use and data storage, digital transmission of data, etc.) and not to voice communications. This agreement form must be signed before access to any FBI IT/IS is granted. To remain compliant with applicable statutes, orders, regulations, and directives, the FBI will update this form. It is your responsibility to maintain current knowledge of the FBI IT/IS Rules of Behavior for General Users.

#### References:

- Standards of Ethical Conduct Regulation (5 CFR Parts 2635 and 3801).
- The Federal Information Security Management Act (FISMA) of 2002.
- Corporate Policy Directive 0071D, FBI Information System Use Policy
- The FBI Security Policy Manual (SPM).
- FBI Manual of Investigative Operations and Guidelines (MIOG) Part II Section 16-18.
- $\bullet$  FBI Manual of Administrative Operations and Procedures (MAOP) Part II Section 2-1.1 and Section 9-3.1.5.
- FBI Unclassified Network (UNet) Policy Version 1.0, 3 April, 2007
- U.S. Department of Justice (DOJ) Public Key Infrastructure X.509 Certificate Policy v1.13, 15 December, 2006.
- X.509 Certification Practices Statement for the Federal Bureau of Investigation High Assurance Certificate Authority v3.0, 31 October 2005.
- FD-1001 (1-22-2007) DOJ Consent For Warrantless Searches Of Department Of Justice Workplaces.
- US Code, Title 18, Section 798.
- The Privacy Act of 1974 (as amended) 5 USC 552a
- FD-291, FBI Employment Agreement
- FD-857, Sensitive Information Nondisclosure Agreement
- FD-868, Nondisclosure Agreement for Joint Task Force Members, Contractors, Detailees, Assignees, and Interns
- SF-312, Classified Information Nondisclosure Agreement
- Form 4414, Sensitive Compartmented Information Nondisclosure Agreement
- Office of Management and Budget (OMB) Circular A-130
- Department of Justice (DOJ) IT Security Standards
- Department of Justice (DOJ) 2740.1 series
- Internal Revenue Service Code, sections 7213 and 7213 A (USC 26, 7213).

**Statement of Responsibility:** I understand that I am to use FBI systems for lawful, official use and authorized purposes as set forth in Title 5 CFR Parts 2635 and 3801 (Federal Ethics Regulations) and as further outlined in this document and other FBI policy directives. Even where granted access, I must only access the system files and information on a need-to-know basis and only in furtherance of authorized tasks or mission related-functions.



**General.** I am responsible for all activity on any FBI IS that is authorized to operate in FBI space and that occurs on my individual account(s) once my logon credential or password has been used to logon. If I am a member of a "group account," I am responsible for all of my activity when I am logged on an IS associated with that account.

I am responsible for all IT that I introduce into FBI approved space including devices that are privately owned, or those owned by another government agency. I understand that I must obtain written permission to introduce any non-FBI hardware, software, or media into FBI controlled space, and that I may not use non-FBI hardware, software, or media to connect to or communicate with any FBI system without authorization from the Head of my Division and the Assistant Director for Security, or designee.

I acknowledge that the ultimate responsibility for ensuring the protection of FBI non-public information lies with me, the user of FBI IT/IS and non-FBI IT/IS authorized to operate in FBI spaces.

I acknowledge that I am prohibited from accessing or using FBI or Department of Justice information about other individuals, including tax information and personally identifiable information, except on a need-to-know basis in furtherance of authorized tasks or mission related-functions. I am obligated to maintain, process, and protect information about other individuals with sufficient care to ensure the security and confidentiality of the information and protect it from inadvertent or unauthorized disclosure. I am not permitted to disclose information about other individuals outside the Department of Justice except when authorized under the Privacy Act (5 USC 552a(b)).

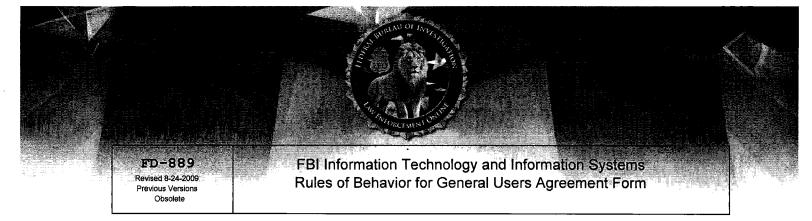
Revocability: The ability to use IT in FBI space and access to FBI IT/IS is a revocable privilege.

Rules of Behavior: I will adhere to the following Rules of Behavior (ROB):

- 1. I consent to monitoring or search of any IT/IS equipment or media I bring into, or remove from, FBI owned, controlled or leased facilities. When asked by authorized personnel I will provide unfettered access to all equipment or media brought into or removed from such FBI facilities. I also understand that FBI or FBI leased IS may be monitored or otherwise accessed for law enforcement or other compliance purposes and my agreement to this FBI ROB constitutes my consent to be monitored and to allow access to FBI IS accessed by me.
- 2. The following applies **only** to personnel from Other Government Agencies whose duties require them to bring IT/IS assets (e.g., laptop or desktop computers) owned or leased by their parent agency into FBI facilities.

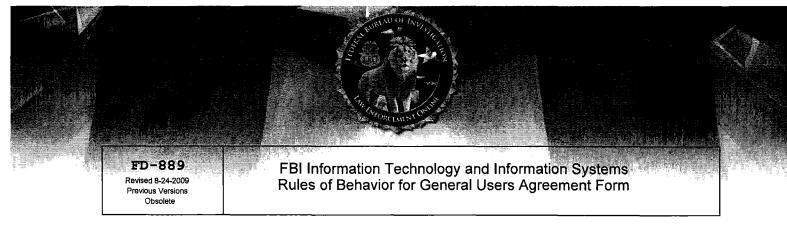
I understand that the aforementioned IT/IS assets are also subject to FBI search and/or monitoring; however, prior to any search or monitoring the FBI will coordinate with the appropriate Security Personnel or other responsible representatives of my parent agency to afford my agency an opportunity to provide warnings to the FBI about the types of information that may exist within my IT/IS devices and to ensure that my agency is afforded the opportunity to have appropriate representation during any and all searches.

3. I will read, understand, and adhere to all FBI information assurance policy directives, including the FBI Security Policy Manual (SPM), Policy Directives of the FBI, MAOP, MIOG and local Standard Operating Procedures and I will address any questions regarding policy,

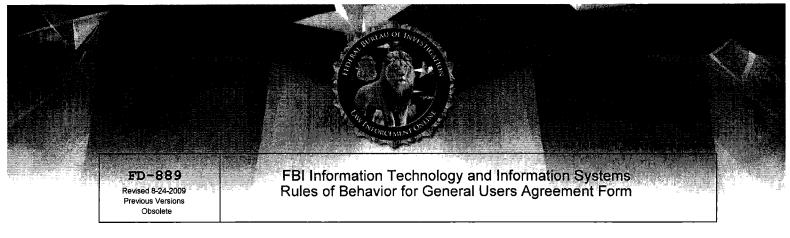


responsibilities, and duties to my Information System Security Officer (ISSO), Information System Security Manager (ISSM), or Chief Security Officer (CSO). I will:

- a. Use only properly licensed FBI approved software and hardware.
- b. Protect all copyright and other intellectual property rights according to terms and conditions contained in FBI approved software and hardware licenses.
- Use FBI IT equipment, including but not limited to portable electronic devices (PED) and keyboard, video, monitor (KVM) switch devices, according to and in compliance with FBI policy directives.
- d. Use FBI computer and network applications and systems, including but not limited to, email, databases, and web services according to and in compliance with FBI policy directives.
- e. Use FBI embedded and add-on peripheral devices including cameras, microphones, and storage devices according to and in compliance with FBI policy directives.
- 4. I will read and understand the FBI standard information system (IS) and network warning banner that is presented prior to IS or network log on. I will address any questions regarding that banner to my Information System Security Officer (ISSO), Information System Security Manager (ISSM), or Chief Security Officer (CSO). I will:
  - a. Ensure that I understand and respect the accredited security level of FBI facilities and of FBI IT systems that I work with or access.
  - b. Operate FBI IT systems and technology processing classified information only in space that is approved for the highest classification level of the information contained on the IT system or technology. When not in use, I will store classified computers and harddrives in an approved security container or in a facility approved for open storage of the information that the device or system contains.
  - c. Operate IT systems processing sensitive but unclassified information only in space approved for processing of that sensitive but unclassified information. When not in use, I will store sensitive unclassified computers and hard-drives according to FBI security policy for the information to which I have access.
  - d. Use FBI approved Cross Domain Data Transfer procedures for every transfer of information between FBI security domains.
- 5. When using FBI IT/IS, I will:
  - a. Use strong passwords as defined in the FBI SPM and Policy Directives of the FBI, and agree to change my password with a frequency as specified by policy or as requested for security reasons.
  - b. Protect my password(s) according to the classification level of the system or at the highest classification of the data being secured. I will protect my passwords from disclosure to other people.



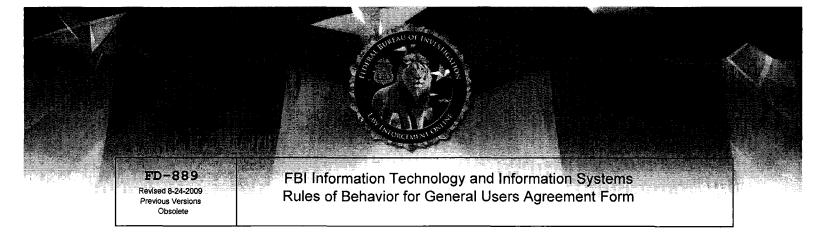
- c. Use screen locks or logoff my workstation upon departing the immediate area.
- d. Use all required virus-checking procedures before accessing information from all removable media or before accessing email attachments from unknown sources.
- e. Use only authorized media (thumb drives, diskettes, etc) and procedures to download or store FBI information.
- f. Properly mark and label classified and sensitive information and media (removable and fixed) according to FBI policy, the Department of Justice Program Operating Manual, DOJ Order 2620.7, and the Director of National Intelligence (DNI) Controlled Access Program Coordination Office (CAPCO) guidelines, as appropriate.
- g. Encrypt, using FBI approved solutions, all sensitive and classified data that is stored on portable electronic or optical media, and data stored on computers that are transported outside of FBI controlled spaces.
- h. Disseminate any FBI non-public information only to persons who have a verified authorization to access the information and appropriate security clearance.
- Destroy copies and extracts of sensitive data that are no longer needed using FBI approved destruction procedures.
- 6. While traveling on FBI business, I will minimize information on my accessible IT systems and components to exactly what is needed to perform my mission.
- 7. Prior to traveling overseas or to a foreign nation, I will attend to all required overseas travel briefings, as related to traveling with Information Technology or Information Systems.
- 8. I will complete the FBI's Annual INFOSEC Awareness Training or provide my ISSO, ISSM or CSO with adequate documentation of my completion of my employing agency's annual information security training.
- 9. If designated as a "*Privileged User*" I will complete the required Privileged User Security training and sign the *Privileged User* Rules of Behavior form.
- 10. I will immediately report known or suspected security incidents or improper use of FBI IT/IS to my CSO according to FBI Policy Directives upon discovery regardless of whether such action results in loss of control or unauthorized disclosure of sensitive information according to the appropriate FBI incident response plan, and Security Incident Response System (SIRS) procedures.
- 11. *If* issued digital certificates by the FBI PKI Certification Authority (CA), in addition to the above I will:
  - a. Use the certificate and corresponding keys exclusively for authorized and legal purposes for which they are issued and only use key pairs bound to valid certificates. Note: Explanation of what certificates, keys, and key pairs are and how to use them is explained on the PKI Registration Form when the token is issued.



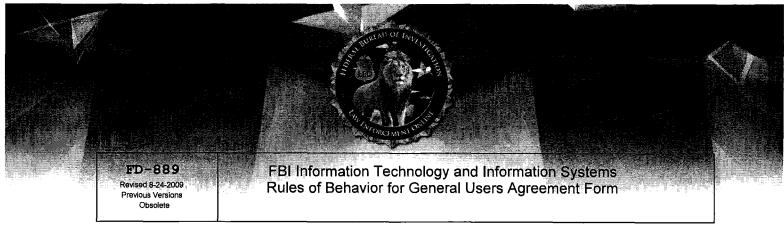
- b. Re-authenticate my identity to the FBI CA in-person and register for certificate re-key at least once every three years, or as instructed by designated authorities.
- c. Protect my token and private keys from unauthorized access and be aware of the location of my token and ensure its security at all times, whether in my immediate possession, in FBI space, or in my home.
- d. Use strong passwords.
- e. Immediately request my ISSO, ISSM, or CSO or an authorized FBI PKI authority to revoke my associated credentials if I suspect that my token or keys are lost/stolen or if my password was compromised.

**Expressly Prohibited Behavior:** I will **NOT** conduct or participate in any of the following behaviors or activities on any FBI IT, IS, or on other agency IT/IS systems authorized to operate in FBI space. Unless required as part of my official duties, I will not:

- 1. Knowingly violate any statute or order, such as compliance legislation, copyright laws, or laws governing disclosure of information, including but not limited to:
  - Attempt to process or enter information onto a system exceeding the authorized classification level for that IT/IS (e.g., placing Secret information on an Unclassified enclave).
  - b. Connect classified IT/IS to the Internet or other unclassified systems.
  - Remove sensitive/classified media (paper or electronic) from controlled areas/facilities (i.e. taking classified media home) without authorization.
  - d. Use FBI IT/IS or FBI non-public information for personal benefit, profit, to benefit other persons, non-profit business dealings, any political (e.g., lobbying or campaigning) party candidate or issue or for any illegal activity.
- 2. Misuse my FBI IT/IS privileges including:
  - a. Reveal my password to anyone or permit anyone to use my account, user ID, or password(s).
  - b. Permit any unauthorized person access to a government-owned or government-operated system, device, or service.
  - c. Use an account, user ID, or password not specifically assigned to me, masquerade as another user, or otherwise misrepresent my identity and privileges to IT/IS administrators and security personnel.
- 3. Exhibit behavior that could lead to damage, endangerment or degradation of FBI equipment, software, media, data, facilities, services, or people, including but not limited to:
  - Attempt to circumvent access controls or to use unauthorized means (e.g., penetration testing, password cracking, "sniffer" programs), to gain access to accounts, files, folders or data on FBI IT/IS.



- b. Change configuration settings of operating systems or security related software, or security related information. Nor will I remove, modify, or add any hardware or software to/from FBI IT/IS without approval of my ISSO.
- c. Tamper (e.g., alter, change, configure, install software or hardware, or connect IT or systems) with my computer to circumvent any FBI policy and IT/IS protections.
- d. Open e-mails or other messages from suspicious sources (e.g., sources that you do not recognize as legitimate for your line of business).
- e. Visit untrustworthy or inappropriate Web sites. For example, I will pay careful attention to the Universal Resource Locator (URL) of a web site inasmuch as URLs for malicious or untrustworthy web sites may look identical to a legitimate web site, but the URL may use a variation in spelling or a different domain (e.g., .com instead of net; or .com in place of .gov).
- f. Introduce executable code (such as, but not limited to, .exe, .com, .vbs, or .bat files).
- g. Create or intentionally spread malicious code (i.e. viruses and Trojans).
- h. Attempt to access any security audit trail information that may exist without authorization.
- Install or connect non-FBI owned or leased (including privately owned) software or hardware (e.g., PEDS, such as Palm Pilots, Blackberrys, MP3 Players...etc.) and removable media (e.g., thumb drives, memory sticks...etc.) to FBI IT/IS.
- j. Introduce wireless devices into FBI space without authorization from the ISSM.
- 4. Participate in prohibited activities, including but not limited to:
  - a. Download, view, or send pornography or obscene material.
  - b. Download, view, or send matter that involves racist, discriminatory, supremacist or "hate" type causes.
  - Access, retrieve, create, communicate or print text or graphics that are generally inappropriate or unprofessional according to FBI standards of professional behavior.
  - d. Download Peer-to-Peer file sharing software or applets, or to use any other means to download music, video or game files.
  - e. Use internet "chat" services (e.g., AOL, Instant Messenger (IM), Microsoft Network IM, Yahoo IM...etc).
  - f. Engage in email hoaxes, gossip, chain emails, forwarding virus warnings, or advertisements (spam).
  - g. "Surf" through FBI files containing personal information merely for personal curiosity.



- h. Setup automatic forwarding of email to non-government accounts (e.g., Gmail, Yahoo, Hotmail, business/vendor email accounts, etc.).
- i. Use personal e-mail services (such as Yahoo, Gmail, etc.) for government business.
- j. Download attachments via Outlook Web Access to a non-government computer.

#### **Privacy Act Statement:**

The information solicited on this form is collected pursuant to the Federal Information Security Management Act (FISMA) of 2002, the Computer Security Act of 1987, the general recordkeeping provision of the Administrative Procedures Act (5 U.S.C. § 301) and Executive Order 9397, as amended by Executive Order 13478, which permits (but does not require) the collection of social security numbers.

The Public Key Infrastructure (PKI) portion of this agreement is collected pursuant to 5 U.S.C. §§ 3301, 9101, Exec. Order No. 12968, Exec. Order No. 10450, and 28 C.F.R. § 0.138. Pursuant to the Privacy Act of 1974, 5 U.S.C. § 552a, we are providing the following information on principal purposes and routine uses.

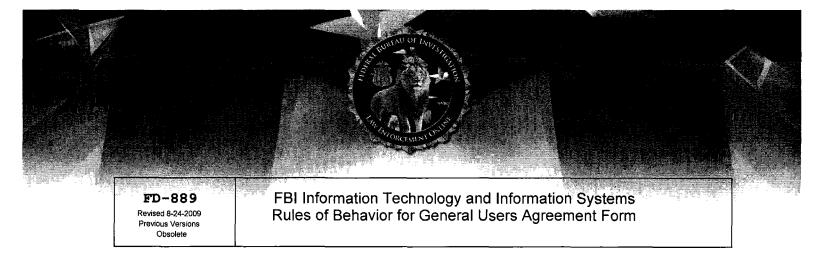
The principal purpose of this form is to verify that individual signatories are aware of the rules of behavior that govern access to FBI IT/IS that operate in FBI space. If a digital certificate from the FBI PKI is issued, this form also supports the operation of the PKI Program, which is designed to increase the security posture of the FBI. For the PKI Program, the information submitted will be used to verify user identity in support of the digital signatures and data encryption/decryption provided by the FBI PKI system. This information, in conjunction with the PKI digital signatures and data encryption/decryption, is used to provide Authentication, Non-repudiation, and Confidentiality services.

The information on this form may be shared within the Department of Justice (DOJ) components and with other governmental agencies for the purpose of providing access to these facilities, facilitating information sharing (i.e., sending encrypted e-mails), and for other authorized purposes.

In addition, information may be disclosed to the following;

- 1. Appropriate federal, state, local, tribal, foreign or other public authorities conducting criminal, intelligence, or security background investigations.
- 2. Officials or employees of other federal agencies to assist in the performance of their duties when disclosure is compatible with the purposes for which the information was collected.
- 3. To contractors, grantees, experts, consultants, or others when necessary to accomplish an agency function.
- 4. Pursuant to applicable routine uses for the FBI's Central Records System (Justice/FBI-002), which is where the information solicited on this form will be maintained.

The provision of the information is voluntary, but without your acknowledgment of the rules of behavior for accessing FBI information, and IT/IS that operate in FBI space, you may not be permitted such access or receive FBI PKI credentials and certificates, which may affect your ability to perform your official duties. Disclosure of the last four digits of your social security number is also voluntary, but will help to differentiate you from other individuals with the same or a similar name.



#### **Acknowledgment**

I acknowledge that I have read and understand the above listed Rules of Behavior. I also state that I will adhere to these Rules of Behavior and that failure to do so may constitute a security violation resulting in denial of access to FBI IT/IS networks or facilities. I also understand that violation of these rules of behavior will be reported to the appropriate authorities and may result in administrative, criminal, or other adverse disciplinary action deemed appropriate

Printed Name: _	Robert:	J. Ho	llander		Date: _	8 Oct 20	010			
Employee Signa	ature:		1/2_			xxx-xx	·			
FBI Personnel F Note: If applical	ile Number (if ble, other Govi	known): _	(Federal, state	or municipa	lity) G	ontractor	with	WA	State	Patrol

**Filing Instructions**: Completion of the FBI's annual INFOSEC Awareness Training satisfied the signatory and acknowledgement requirements for the purpose of storage and audit of this form. When a hardcopy is required, CSOs are responsible for filing this form IAW EC 319W-HQ-A1487698-SECD Serial 88 Form Owner: Career Services Management Unit and Information Assurance Section, FBI SecD.

#### Szrama, James

From:

Tran, Jade N. <CTR>

Sent:

Wednesday, November 03, 2010 12:40 PM

To: Cc: StateandLocalClearances

Szrama, James

Subject: Attachments: **HSDN Application - WSFC** CRoss.pdf; CMelton.pdf

Good Afternoon -

Attached HSDN applications for review/clearance validation, please.

Thank you.

Jade Tran Systems Support Manager **DHS Classified Data Networks** Phone: 202-282-8842

FAX:

202-612-1673

DHS E-mail: mailto:jade.tran@associates.dhs.gov

NG E-mail: mailto:jade.tran@ngc.com

CHECK ONE: M NEW HSDN ACCOUNT REQUEST

☐ HSDN ACCOUNT CHANGE REQUEST

	FOR ACCOUNT REACTIVATION, COMPLETE SECTIONS I AND V.  The Change of Reactivation quest, please provide your reent User ID  The Change of Reactivation quest, please provide your reent User ID				
Section I. User (	and the state of t	rmation ds are current and correct.			
Last Name: Hol/a	nder	First Name: Rober +	Mid	dle Name/Init: John	
Parent Agency: Washington State	Patrol	Component: Washington State Fusion	Center In-	artment/Office: Helligence & Analysi.	
Site Address:		City: Seattle		e & Zip Code: A 9810	
Building (name/number): Abraham Lincoln Bldg.		Floor: 5th Floor	Roo	m: J/A	
Rank/Title: Intelligence Analyst		Phone: 206 - 262 - 2257		nail (unclassified): 5. Hollander & wstc. u	
Supervisor Name: Bill Evans		Supervisor E-mail: bill, evanso wstc.wa	Sup	ervisor Phone: 6-262-2514	
Government Employ Yes:□ No:Ⅸ	/ee? S&L:□	For Non-Government: Contract No:		oany Name:	
Section II. Requ	ested Accou	nt Services/Privileges			
User Privileges:	Description:	The state of the s	: a 073-8 W 507- 5 W 18 I	Selection:	
General User	Ability to Access and file sharing)	s basic desktop services, e-mail, and	d web browsing,		
SIPRNet Web Access	Ability to access	s SIPRNet/ADNet services (e.g., wel	o sites)	X	
AMHS Access	ess If Automated Message Handling System (AMHS) access is required please fill out Section III			Yes: 🌠 No: □	
Remote Access to Servers for Application Administrators	Key FOB S/N:			Require Dongle*?: Yes: ☐ No: 🇷	
	Supporting App	lication:		*Replacement Fee of \$50.00	

AMHS User	Ability to read organizational messaging	Yes: 🛛 No: □	Message Releaser
	traffic		(ÖNLY)
MHS Drafter	Ability to draft organizational messaging traffic	Yes: ☐ No: 🏻	Precedence Privileges: (Select Highest Required)
MHS Releaser	Ability to release organizational messaging traffic on behalf of the organization (Note: This is not a common selection)	Yes: ☐ No: 🏻	☐ CRITIC
Distinguished Name	c=US/o=U.S. Government/ou=DHS/	. j	☐ EMERGENCY
DN):			☐ FLASH
s controller			☐ IMMEDIATE
Control and Contro		,	☐ PRIORITY
			☐ ROUTINE
artian TV Pay	sonal Authentication Informa		
4 - 18	rity related support. This is information needs	Contract of the Contract of th	in identifying you. This will no
	g-in data. This information will help prevent ur		
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1. 4-Digit PIN:(A)	ny) 2. Unique Word: (4-9 char	,	Badge Number:
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User Account Form H-S-10-1007-16 User Account Process Version 16 June 3, 2010

	Printed Name:	Re-validation of Serv	vices/Privileges:		
		LAN	HSDN		
4. AMHS Authorization:		AMHS User			
	Signature and Date:	AMHS Drafter			
		AMHS Releaser			
		Precedence Privileges			
	Printed Name:	Re-validation of Serv	vices/Privileges:		
5. Server Remote Access Authorization:	Signature and Date:	Supporting Application:			
	Printed Name:		Re-validation of Services/Privileges:  SIPRNet Web Access		
6. Component or Agency POC:	Signature and Date:				
Component POC: Submit t	his form to the HSDN Connectio	on Approval Office			
Only)	on & Authorization (HSI	ON Connection Approva	l Office Use		
Site ID Verification:					
HCAO Review/Authorizat	ion:				
Questions about the user a	account process can be directed 703-968-3451 or HCAC Fax 202-447-0	O@DHS.gov			

User Account Form H-S-10-1007-16

 $\pmb{Comments:} \ \ \text{Please use this section to provide additional information or explanations for omitted information.}$ 

# DEPARTMENT OF HOMELAND SECURITY CLASSIFIED NETWORK USER AGREEMENT FORM Rev. 3, March 7, 2005

#### **User Agreement Form**

#### Introduction

You have requested computer access to HSDN computer systems. Before this access is granted, you must agree to abide by usage and access policies and to use your computer account in an acceptable and ethical manner, as described below. Read the information carefully, and sign in the area provided. Also be aware that managers of certain data areas will require you to complete additional documents.

## Your privileges and responsibilities as a computer user

The following are provisions of a user of the HSDN computer systems:

- You are responsible for the correct use of the tools the HSDN computer system provides for maintaining the security and confidentiality of information stored on it.
- Your computer account is assigned to you alone and should not be shared with any other personnel. You must generate and protect your password according to HSDN Access and Password Policy.
- You must read, agree to and sign the HSDN Rules of Behavior form.
- You must understand levels of classification of each computer system.
- You must not use computer resources for illegal purposes, including: intentional harassment of other users; intentional destruction of or damage to equipment, software, or data belonging to the DHS systems or other users; intentional disruption or unauthorized monitoring of electronic communications; and unauthorized copying of copyrighted materials.
- You must refrain from unethical (and possibly illegal) usage, including: violation of computer system security; unauthorized use of computer accounts, access codes or devices, or network ID numbers assigned to others; intentional use of computer telecommunication facilities in ways that unnecessarily impede the computing activities of others; use of computing facilities for private business purposes; academic dishonesty; violation of software licenses; violation of network usage policies and regulations; and violation of other users' privacy.
- You must be aware of computer viruses and other destructive computer programs, and take steps to avoid being their victim or unwitting vector.

#### Policies governing access to DHS data

- You will access DHS data only in the conduct of DHS business.
- You will respect the confidentiality and privacy of individuals whose records you may access.
- You will observe any ethical restrictions that apply to data to which you have access, and to abide by applicable laws or policies with respect to access, use, or disclosure of information.
- You are forbidden to disclose sensitive data (as defined by the policy) or distribute such data in any medium, except as allowed by law and required by your job responsibilities.

If you choose not to accept these standards of behavior, you may be denied access to the relevant computing systems and networks. Violators of these standards may also be subject to penalties under the applicable regulations or federal laws.

I understand and agree to abide by the conditions outlined above.	
Signature & Date: 8 oct 2010	
Printed Name: Robert J Hollander	

# **Appendix B – Rules of Behavior Form**

# **Table of Contents**

Section	Page
INTRODUCTION	B-1
RESPONSIBILITIES	B-2
OTHER POLICIES AND PROCEDURES	B-3
APPLICATION RULES	B-4
Work At Home	B-4
Dial-in Access	B-4
Connection to the Internet	B-4
Protection of Copyright Licenses (Software)	B-4
Unofficial Use of Government Equipment	B-4
Use of Passwords	B-4
System Privileges	B-5
Individual Accountability	B-5
ACKNOWLEDGMENT	B-5

## Introduction

The Department of Homeland Security (DHS) Rules of Behavior (ROB) are part of a comprehensive program to provide complete information security. These guidelines are established to hold users accountable for their actions and responsible for IT security. The ROB establishes standards of behavior in recognition of the fact that knowledgeable users are the foundation of a successful security program. OMB Circular A-130 requires that all major applications and general support systems have Rules of Behavior.

Before receiving access to a system, all users of any DHS Information Technology (IT) system shall be trained on the ROB for the system(s) to which they will be granted access. All users shall sign a statement acknowledging that they have received and understand the training.

Any failure to comply with the ROB shall be considered a security incident. If the incident is deemed willful, it will be escalated to a security violation. Non-compliance with any of the ROB will be enforced through sanctions commensurate with the level of infraction. Depending on the severity of the violation, actions that can be taken against a DHS employee or contractor may include any of the following:

- A verbal or written warning,
- Removal of system access for a specific period of time,
- Reassignment to other duties, or
- Termination.

Refer to NIST SP 800-18 for examples of Rules of Behavior.

# Responsibilities

Organizational Element (OE) Information System Security Managers (ISSMs) and Information System Security Officers (ISSOs) shall establish a ROB for each general support system and major application. ISSOs shall ensure that all users receive training concerning the ROB and sign a statement acknowledging receipt of the ROB before they are granted access to the system(s). The ROB statement may be filed in either the employee's official personnel file (OPF) or in the employee's personnel file (EPF) maintained by the office.

The ISSO for each system is responsible for ensuring the system has an adequate level of protection, through an appropriate mix of technical, administrative, and managerial controls. The ISSO, in coordination with the ISSM:

- Develops policies and procedures,
- Ensures the development and presentation of user and contractor awareness sessions, and
- Inspects and spot checks to determine that an adequate level of compliance with security requirements exists.

The ISSO is responsible for periodically conducting vulnerability analyses to help determine if security controls are adequate. Special attention will be given to those new and developing technologies, systems, and applications that may result in vulnerabilities to the security posture.

Users are responsible for following system procedures to minimize security threats. Managers will conduct periodic reviews to ensure that users are operating systems in a secure manner.

## Other Policies and Procedures

The rules are not to be used in place of existing policy. They are intended to enhance and further define the specific rules each user must follow while accessing major applications. Specific rules of behavior are available in documentation, guides, and directives associated with individual applications.

A ROB letter shall be provided to all non-DHS users who will use major applications or general support systems. The letter shall transmit the applicable DHS policies and user responsibilities while using DHS systems.

User responsibilities shall be included in the computer security training DHS provides for users and agency security points of contact. Interagency agreements or other formal agreements or documents between DHS and other organizations shall present DHS policies and user responsibilities pertaining to use of DHS systems.

# **Application Rules**

#### **Work At Home**

Processing of classified information may not be performed at home.

#### **Dial-in Access**

Dial-in access to classified system will not be allowed, unless via provided and approved secure workstations and encryption devices. If dial-in access is allowed, the ISSO will regularly review telecommunications logs and DHS phone records, and conduct spot-checks to determine if users are complying with controls placed on the use of dial-in lines.

#### Connection to the Internet

Access to the Internet via HSDN will not be allowed.

## **Protection of Copyright Licenses (Software)**

DHS personnel and contractors shall comply with all copyright licenses associated with major applications, general support systems, or Computer-Off-the-Shelf (COTS) software. End users, supervisors, and functional managers are ultimately responsible for this compliance. LAN and PC users shall not download LAN-resident software. Audit logs will be reviewed to determine whether employees attempt to access LAN servers to which users have not been granted access. Audit logs will also show users' use of a "copy" command, which may indicate attempts to illegally download software. Unauthorized copying of PC-based software is also prohibited.

# **Unofficial Use of Government Equipment**

Users should be aware that personal use of DHS information resources, applications, networks, LANS, and PCs is not authorized.

#### Use of Passwords

Users shall follow DHS password management rules, as presented in Attachment J, Security Procedural Guide – Password Management. Users shall keep passwords confidential (protected at the secret level for HSDN connections) and not share passwords with anyone.

# **System Privileges**

Users are given access to major applications or general support systems based on a need to perform specific work. Users shall work within the confines of the access allowed and shall not attempt to access systems or applications to which access has not been authorized.

## **Individual Accountability**

Users will be held accountable for their actions on all DHS applications and systems. This accountability shall be stressed during computer security awareness training sessions

# **Acknowledgment**

I acknowledge receipt of, understand my responsibilities, and will comply with the rules of behavior for DHS major applications and general support systems.

80cT 2010	Signature of Use
Date	

# Appendix C – Department Homeland Security (DHS) Automated Message Handling System (AMHS) User Account Computer Usage Agreement

#### UNCLASSIFIED//FOR OFFICIAL USE ONLY

# Department of Homeland Security (DHS) Automated Message Handling System (AMHS) User Account Computer Usage Agreement

As a user of DHS Automated Information Systems (AIS), I shall adhere to the following security rules:

- 1. I shall use DHS AIS (computers, peripherals, and networks) only for authorized purposes.
- 2. I shall not import any software or install firmware/hardware on any computer (i.e.; client, workstation, server) without first getting the appropriate written approval from my Systems Administrator (SA), Information Systems Security Officer (ISSO), and Special Security Officer (SSO).
- 3. I shall not try to access data or use operating systems or programs, except as specifically authorized.
- 4. I acknowledge that I will be issued a unique identifier and a password to authenticate my identifier (i.e.; a User ID). After receiving my User ID; I will protect the password that authenticates the identifier.
  - a) If I am assigned an individual user account, I will not permit anyone else to use my password, nor will I reveal my password to anyone else. If my account is on a classified network, I will protect the password in accordance with (IAW) the level of the network's classification level.
  - b) I am responsible for all activity that occurs on my individual account once my password has been used to log on.
  - c) If I have a classified account, I understand that the security manager or ISSO requires the password be changed at least every 30 days for a classified account and every 90 days for an unclassified account.
  - d) When selecting my own password, I will ensure that the passwords for both classified and unclassified accounts meet current DHS standards (i.e.; length, character set, no prohibited sequences or combinations) as directed by the ISSO.
  - e) I shall not store my password on any processor or microcomputer or on any magnetic or electronic media unless approved in writing by the ISSO.
  - f) I shall not tamper with my computer to avoid adhering to DHS password policy.
  - g) I shall never leave my classified computer unattended while I am logged on or unprotected by a "passworded" screensaver.
- 5. I acknowledge that it is a violation of policy for any computer user to try to mask or hide his or her identity, or to try to assume the identity of someone else.

#### 6. I acknowledge:

- a) Any magnetic media used on the system must be classified and protected at the systemhigh level, regardless of the implied classification of the data (until declassified or downgraded by an approved process).
- b) All material printed out will be classified and protected at the system-high level until I or someone with the appropriate clearance personally reviews and classifies the material.
- c) Information shall not be entered into a system if the information has a higher classification than the system-high level. I shall not enter information that is proprietary, contractorexcluded, or otherwise needs special protection or handling, unless approved in writing by the ISSO.
- d) Only authorized cleared personnel with a valid need-to-know are to be allowed un-escorted access to the system.
- e) Magnetic media shall not be removed from the computer area without the approval of the local security manager.
- 7. I acknowledge that TEMPEST (Red/Black) separation requirements for system components exist, and I shall ensure that those requirements are met and maintained. I shall not move firmware/hardware or alter communications connections without first getting approval from the System Administrator and the ISSO.
- 8. I shall ensure all magnetic media is checked for malicious code before loading it onto a DHS system or network.
- 9. I shall not forward chain-mail or virus warnings. (The ISSM and/or Network Security Manager, DHS, issues virus alerts and threat advisories). I shall report chain e-mail or virus warnings to my ISSO. I shall not attempt to run "sniffer" or other hacker-related software on the system.
- 10. I acknowledge that I am subject to disciplinary action for any violation or abuse of access privileges.
- 11. If I observe anything that indicates inadequate security on the system, I shall immediately notify the site ISSO. I acknowledge knowing what constitutes a security incident and acknowledge that I shall immediately report such incidents to the ISSO or other proper authority.
- 12. I shall comply with all security guidance issued by my System Administrator and ISSO.
- 13. I acknowledge that this agreement merely summarizes key points governing the use of Government AIS in DHS, and is not an all-inclusive list of requirements and procedures governing the use of DHS AIS.

I understand this agreement and that my actions IAW the above rules will keep the system secure. If I am the site supervisor, group chief, system administrator, or ISSO, I shall ensure all users in my area of responsibility have signed this agreement. Any problems / questions call 202-282-9238.

NAME: Robert J. Hollander
(Type or Print)

SIGNATURE: BOCT 2010



# **WSFC In-Processing Checklist**

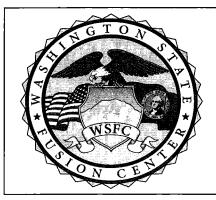
Employee's Name:		Robert Hollander		
Sponso	or's Name:	Kia Graham		
			Date Completed	Sponsor's Initials
1.	Administrative	Tasks		
a.	Desk/Workstation	on Assignment	04 OCT 10	- Pull
b.	-	C Business Card form	04 OCT IU	- KIN
c.		Line / Voicemail Set-up	06 OCT 10	- KIN
d.		ebook (sign for receipt)	03 NOV 10	BIN
d.	•	Policy (sign for compliance)	<u>04 OCT 10</u>	- Huy
e.	Office Call with		<u>05 oct 10</u>	4445
f.	Section Supervis	sor In-Brief (Roles & Responsibilities)	<u>05 OCT 10</u>	<u>+W)</u>
2.	Security			
a.	Clearance			or new man were a server of the server of th
	- Date DOD (DC)	OJ clearance was PASSED (INITIATED)		
	- Date DOD / DO (circle one)	OJ clearance was <b>GRANTED</b>		
b.	FBI Security Br	iefing		
c.	Access Badges			
	- FBI Badge			
	- Agency Badge (	(WSP, SPD, etc.)		
3.	<b>Training</b>			
a.	<b>WSFC</b> Training	-		
	- WSFC SOP Fan	niliarization	05 OCT 10	- KUL
	_	g (Global User Interface (GUI))		
	- 28 CFR Part 23		08 OCT 10	- full
	- WSFC Privacy 1	•		
	•	vity Reporting (SAR) Training		
	- RISS/WSIN	Classification Amelianis T		
	- Fundamentals of	f Intelligence Analysis Training (FIAT)		



# **WSFC In-Processing Checklist**

(continued)

		Date Completed	Sponsor's Initials
b.	FBI Training		
	- Domestic Investigations and Operations Guide (DIOG)		
	- Guardian Training		
	- IDW Training		
	- Information Awareness / InfoSec (Annual)		
	- Phone Training		
		```	
	Systems Access		
a.	WSFC Internal Network	A THE STORY WANTED AND THE COURT OF THE SAME STORY	en a Richard April and Selving
	- WSFC Fusion Core Access	04 OCT 10	RUM
	- WSFC Email Account	04 001 10	
	- Microsoft Outlook Mailbox	04 001 10	- FLAM
b.	SIPR Network/Databases		- F/AJ
	- FBI SIPR Account		
	- FBI Academy		
	- Guardian/ACS Access		
	- Homeland Secure Data Network (HSDN)		
	- Investigative Data Warehouse (IDW)		
c.	NIPR Network/Databases		
	- Automated Critical Asset Management System (ACAMS)		
	- ACCESS: National Crime Information Center (NCIC)		
	- Accurint / Lexis-Nexis (sent in 260000)	18 OCT 10	KUS
	- Choice Point/CLEAR \	18 OCT 10	- KIND
	- Dunn and Bradstreet )	18 OCT 10	FMY)
	- E-Guardian		
	- Homeland Security Info Network - Intel (HSIN-Intel)		
	- Intelink-U (Intelink Passport)		
	- Law Enforcement Information Exchange (LINX)	19 oct 10	W
	- Law Enforcement Online (LEO) (Son + on 02NOVIO)		
	- NW Warning and Alert Response Network (NW-WARN)	04 OCT 10	- felle)
	- Open Source Center (OSC)		
	- Western States Info Network (WSIN) / (RISS) (Sent on 2NOVIO)		
	- SAR Vetting Tool (SVT)		
	- SAR Search Tool (through RISS)		



# WASHINGTON STATE FUSION CENTER

1110 3<sup>rd</sup> Ave, Seattle, WA 98101 WSFC: 1-877-843-9522 || Fax: 206-262-2014

# FAX

To: WSIN	From: WSFC
Fax: 916-263-1180	Pages: 2
Phone:	Date: 02Nov10
Re: Account Access	CC:

Notes:		



#### **WESTERN STATES INFORMATION NETWORK RISSNET PORTAL / SSL REQUEST FORM**

WSIN TECHNOLOGY UNIT P.O. Box 903198 Sacramento, CA



FAX: (916) 263-1180

## PART 1

Date of Request: 8 OCT 2010	
First Name and Last Name: Robert Hollander	
Agency Name: Washington State Fusion Center	
Agency Address: 1110 3rd Ave	
Agency City, State, and Zip: Seattle WA 98101	
Agency Telephone Number (including area code & extension): 206-20	62-2257
Agency E-mail address: 10b. Hollawere wsfc, wa, go	/
Notification to your Agency E-mail address when you have WSIN RISSNET	
<u>PART 2</u>	
Your signature below constitutes your request for RISSNET access and your agree set forth in the WSIN Security Policy, the WSIN Constitution and Bylaws, the 28 Code RISS policies, and all other applicable federal, state and local laws.	
	800718
Signature	Date
PART 3	
<u>FARI 3</u>	

FAX THIS SIGNED FORM TO WSIN at (916) 263-1180 FOR PROCESSING. YOU WILL BE CONTACTED VIA E-MAIL ONCE YOUR ACCOUNT IS ESTABLISHED.

NOTE:

Your SSL account will not be established if a WS IN security control card is not on file. This request form will be destroyed after 5 days if a security control card is not on file or received!

Questions? Call WSIN at (800) 952-5258 or (916) 263-1163 and ask for (RISSNET) assistance. -(rev. 05/05/2009)

HTTP://WWW.RISS.NET

#### WSIN RISSNET Portal / SSL Request Form Instructions

- 1) Complete Part 1 of the form: all fields. PLEASE PRINT LEGIBLY.
- 2) Complete Part 2 of the form: sign and date.
- 3) Follow Part 3 instructions of the form: fax the completed form to 916-263-1180.

WSIN will then contact you via your e-mail to establish your account. You should receive three e-mails within 1 to 3 days. **PLEASE PRINT & SAVE EACH OF THE THREE E-MAILS**. The e-mails will contain the following:

## 1<sup>st</sup> EMAIL

- ✓ RISSNET Portal user id.
- ✓ RISSNET WSIN email account username
- ✓ Instructions

## 2<sup>nd</sup> EMAIL

- ✓ RISSNET Certificate password
- ✓ RISSNET Portal password
- ✓ RISSNET WSIN email account password

## 3rd EMAIL

- ✓ RISSNET Portal Certificate
- ✓ 28 CFR Part 23 Guidelines
- ✓ WSIN Intranet Security and Operating Policy for Member Agencies

#### <u>Instructions for – Installing the Certificate & Logon to the RISSNET Portal</u>

#### STEP 1 - Installing the Certificate

- 1. From your 3rd email, download your RISSNET Portal Certificate file (.PFX icon) to your computer's desktop.
- 2. On your computer's desktop, double-click and open your Certificate file (.PFX icon).
- 3. On the "Welcome to the Certificate Import Wizard" screen, click the NEXT button.
- 4. On the "File to Import" screen, click the NEXT button.
- 5. On the "Password" screen, type in your Certificate password: EXAMPLE Abc123!% Note: Be sure to enter the <u>Certificate password</u>, NOT the Portal password.
- 6. Click the NEXT button on the "Password" screen to continue.
- 7. On the "Certificate Store" screen, click on the NEXT button.
- 8. On the "Completing the Certificate Import Wizard" screen, click on the FINISH button.

#### STEP 2 - Logon to the RISSNET Portal for the first time

- 1. Open your Internet Browser (i.e. Internet Explorer, Netscape, Firefox, etc).
- 2. Go to public website address: http://www.riss.net
- 3. Add this address to your "favorites or bookmarks' or save it as a shortcut on your desktop (right click the page and "create shortcut" on your desktop)
- 4. At http://www.riss.net, logon to the RISSNET Portal in the RISSNET Login section, located in the upper right side of the page at follows:
  - a. Type in your RISSNET Portal user id: EXAMPLE jsmith@wsin.riss.net
  - b. Type in your RISSNET Portal password: EXAMPLE Xyz789!% Note: Be sure to enter the <u>Portal password</u>, NOT the Certificate password.
  - c. Type in the RISSNET Portal random session id (located on the website page): EXAMPLE 123456
  - d. Click on the "SIGN ON" button.

#### STEP 3 - Subsequent visits to the RISSNET Portal

1. Double click your new Regional Information Sharing Systems -RISS desktop icon or go to the

#### RISS Internet website at: http://www.riss.net

- 2. At http://www.riss.net, logon to the RISSNET Portal in the RISSNET Login section, located in the upper right side of the page at follows:
  - a. Type in your RISSNET Portal user id: EXAMPLE jsmith@wsin.riss.net
  - b. Type in your RISSNET Portal password: EXAMPLE Xyz789!% Note: Be sure to enter the <u>Portal password</u>, NOT the Certificate password.
  - c. Type in the RISSNET Portal random session id (located on the website page): EXAMPLE 123456
  - d. Click on the "SIGN ON" button.

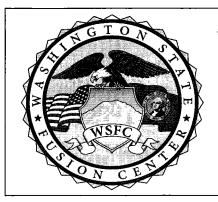
Accessing the WSIN Homepage, WSIN Database & other WSIN Services- Once you are signed on you are taken to the WSIN page of the RISSNET Portal. To get to the WSIN homepage, database and other services, click on the WSIN logo or scroll down the "My Directory of Services" to WSIN Website Homepage and click on it.

You will now have the ability to access the RISSNET/WSIN systems from any <u>law enforcement</u> computer that has internet access. To do so you simply download your "RISSNET Portal Certificate" to a portable storage device, then install the certificate to the computer you are going to access using the portable storage device and the directions listed above. NOTE- YOU ARE RESPONSIBLE FOR THE SECURITY OF YOUR PORTAL CERTIFICATE. YOUR CERTIFICATE SHOULD BE REMOVED FROM ANY COMPUTER YOU DO NOT HAVE CONTROL OVER OR USE ON A REGULAR BASIS. If using internet explorer, delete the certificate by going to the internet browser, click on tools, click on internet options, click on content, and click on the certificate, highlight it and delete it.

Questions? Call your WSIN regional Coordinator or the WSIN Technology Unit at (800) 952-5258 or (916) 263-1163 and ask for RISSNET assistance.

Need training on the use of the WSIN Database & other WSIN Services? - Call your regional WSIN coordinator. Don't have your regional coordinator's phone number? Call WSIN, toll free at 1-800-952-5258 and they will give you your coordinator's contact information.

WSIN Security Control Card Instructions: PLEASE PRINT LEGIBLY - If you are a new representative, check that box. There is only one PLO per agency, if that is you, check that box. If not, check the ALO box. Fill in biographical information. On the title/rank line, list your title or rank along with your work location, i.e. Sergeant/Patrol. Check the RISSNET box. If you have a security control card on file, but want to update the facts, write UPDATED INFO in large letters in the space to the right of the RISSNET box. List 7 personal facts about yourself. List facts that don't ever change, i.e. (named pets die), kids, parents names, schools you went to don't change. Sign your name on the bottom right and have your boss sign on the bottom left of the page. FAX to WSIN at 916-263-1180, fax or mail a copy to your WSIN Coordinator & keep a copy for yourself.



# WASHINGTON STATE FUSION CENTER

1110 3<sup>rd</sup> Ave, Seattle, WA 98101 WSFC: 1-877-843-9522 || Fax: 206-262-2014

# FAX

To: WSIN/NW HIDTA From: WSFC

Fax: 206-352-3696 Pages: 2

Phone: Date: 02Nov10

Re: Security Control Card CC:

# Notes:

This is the corrected copy.
Sorry for the inconvenience



# **SECURITY CONTROL CARD**

# WESTERN STATES INFORMATION NETWORK® (WSIN)



APPLICANT			n/ +		
Name:	Hollander		Robert	John Middle	
Agency: Washingto	n State Fusion Ca	Mter Unit/A	ssignment:	State: WA	
Title: Intelligence	Analyst s	SN (Last 4):		DOB (mm/dd/yyyy):	
Bus. Phone: 296-26	62-2257 c	ell Phone:		Email: rob, Hollander wsfc w	a . gov
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APPLICANT SIGNATU	RE				
AGENCY APPROVAL					
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WSIN Use Only					
RISSNET				SINS	
RISSIntel	<b>▼</b> RISSGang			CSII	
RISSafe	OSIN			CIMS	
REMARKS					

#### **INSTRUCTIONS**

To obtain access to the WSIN database or any databases or programs connected through RISS (e.g. RISSafe, CSII or OSIN), a completed Security Control Card Form must be completed.

- 1. Name. Fill in completely as you prefer to be identified (e.g. real name Robert but goes by Bob.)
- 2. Agency. Fill in the complete name of the agency and acronym, if any, which has authorized your access to the WSIN database.
- 3. State. Include the state in which your agency is located.
- 4. Title. Fill in completely (e.g. Officer, Agent, Sergeant, etc.)
- 5. SSN (Last 4). Enter the last four digits of your Social Security Number.
- 6. DOB (mm/dd/yyyy). Enter your date of birth.
- 7. Telephone Numbers. Enter all phone numbers that apply. Be sure to include area code.
- 8. New Applicant / New Assignment Box. Check this box if this is the first time you have applied for access to WSIN or you are submitting a new card after being deleted, or have been assigned to a new section.
- 9. Primary Agency Representative (R / PLO). Check if you have been designated by your agency to be the WSIN primary contact. The R/PLO is contacted when WSIN is unable to contact a submitting agent/officer for data dissemination or to discuss sensitive issues. The R/PLO is mailed all publications produced by WSIN (e.g. Digest, Drug Prices/Purity List, etc.).
- 10. Alternate Agency Representative (A / ALO). Check for access to WSIN but not as the primary contact person.
- 11. Applicant Security (Seven Personal Facts). Beginning with your Place of Birth, fill in seven personal facts in the form of questions that can be asked of you for telephonic identification purposes (e.g. my favorite sport is baseball, my favorite color is blue, etc)
- 12. Applicant Signature. You must sign the Security Control Card to signify that you have read, understand, and will comply with the statement.
- 13. Unit Supervisor. The Unit Supervisor or Regional Coordinator MUST PRINT AND SIGN here.
- 14. Fax or Mail the completed Security Control Card to your respective Watch Center.
- 15. Call or fax WSIN or contact your Regional Coordinator when any of the following changes occur:

Phone: business, pager, cellular and area codes.

Agency Personnel: personnel are added, deleted, or transferred.

Agency Address: includes physical and mailing address of an Agency.

While working at your parent agency you are transferred to a Task Force and then transferred back to your parent agency.

16. Watch-center fax numbers:

**WSIN HQs, Sacramento: 916-263-1439** 

Hawaii HIDTA: 808-356-4499

LA CLEAR War Room: 323-869-2566 and 323-869-2531

Northwest HIDTA: 206-352-3696

Oregon DOJ Criminal Justice Division, Attention WSIN: 503-378-2261
San Diego Law Enforcement Coordination Center (SD LECC): 858-495-7223



# WASHINGTON STATE FUSION CENTER BUSINESS CARD ORDER FORM

(via e-mail/fax)

DATE: 4 OCT 10

TO: Bev Wood

**QUANTITY:** (standard order of 250)

FROM:

PHONE:

# **WASHINGTON STATE FUSION CENTER**

## **Protection and Prevention Through Knowledge**

NAME: Robert J. Hollander
TITLE: Intelligence Analyst
AGENCY: Washington State Fusion Center
ADDRESS1: (PO BOX) (Leave blank if PO Box is not available):
ADDRESS2: (Physical Address) (Building Name, Street Address, etc.):  1110 Third Avenue
ADDRESS3: (City, State, Zip): Sea+1/e, WA 98/Ø1
PHONE NUMBER (including area code): (206) 262 - 2257
FAX NUMBER (including area code): (2¢6) 262 - 2¢1 4
E-MAIL ADDRESS: rob. Hollandere wistc. wa. gov
COMMENTS:

**AUTHORIZING SIGNATURE:** 

FORM								
A19-1A								
(Rev. 3/95)								



STATE VASHINGTON INVOICE VOUCHER

AGENCY USE ONLY										
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.								
225	341009/34107									

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

(SIGN IN INK)

President, Operational Applications Inc.
(TITLE) (DATE)

DATE GOODS/SERVICES RECEIVED

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## **CONTRACTOR SERVICE HOURS**

Beginning

Period:

12/1/2010 mm/dd/yr 12/31/2010

**Ending** 

mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Dec	1		Analyst, WSP, WSFC
Dec	2		Analyst, WSP, WSFC
Dec	3	8.5	Analyst, WSP, WSFC
Dec	4	0	Regular Day Off
Dec	5	0	Regular Day Off
Оес	6	8.5	Analyst, WSP, WSFC
∠ec	7	8.5	Analyst, WSP, WSFC
Dec	8		Analyst, WSP, WSFC
Dec	9		Analyst, WSP, WSFC
Dec	10	8.5	Analyst, WSP, WSFC
Dec	11	0	Regular Day Off
Dec	12		Regular Day Off
Dec	13		Analyst, WSP, WSFC
Dec	14		Analyst, WSP, WSFC
Dec	15		Analyst, WSP, WSFC
Dec	16	10.5	Analyst, WSP, WSFC
Dec	17	8.5	Analyst, WSP, WSFC
Dec	18	0	Regular Day Off
Dec	19		Regular Day Off
Dec	20		Analyst, WSP, WSFC
Dec	21		Analyst, WSP, WSFC
ec_	22		Analyst, WSP, WSFC
ec	23		Analyst, WSP, WSFC
Dec	24		Federal Holiday (Christmas)
Dec	25		Regular Day Off
Dec	26		Regular Day Off
Dec	27		Analyst, WSP, WSFC
Dec	28		Analyst, WSP, WSFC
Dec	29		Analyst, WSP, WSFC
Dec	30		Analyst, WSP, WSFC
Dec	31		Federal Holiday (New Year's)
Total	Hours:	173/	
	7 ///		

Contractor Signature/Date

31-Dec-10

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Mame

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	FO.	RM
	A19	-1A
(	Rev.	3/95



# STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

	AGENCY	NAME
Washington State	Patrol	•
<b>Investigative Ass</b>	istance Div	/ision
PO Box 2347		
Olympia MAA OOF	07 2247	

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

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SIGN IN INK)

President Operational Applications Inc.

(TITLE)

(DATE)

1-30 November 2010

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# Washington State Patrol CONTRACTOR SERVICE HOURS

 Beginning
 Ending

 Period:
 11/1/2010
 11/30/2010

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

lame:	Robert Hollander	Location:	1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hrs.	Description of Services Provided
Nov	1		Analyst, WSP, WSFC
Nov	2		Analyst, WSP, WSFC
Nov	3	9	Analyst, WSP, WSFC
Nov	4	9	Analyst, WSP, WSFC
Nov	5		Analyst, WSP, WSFC
Nov	6		Regular Day Off
Nov	7		Regular Day Off
Nov	8		Analyst, WSP, WSFC
Nov	9		Analyst, WSP, WSFC
Nov	10	9	Analyst, WSP, WSFC
Nov	11		Federal Holiday (Veteran's Day)
Nov	12		Analyst, WSP, WSFC
Nov	13		Regular Day Off
Nov	14		Regular Day Off
Nov	15	9	Analyst, WSP, WSFC
Nov	16	9	Analyst, WSP, WSFC
Nov	17		Analyst, WSP, WSFC
Nov	18		Analyst, WSP, WSFC
Nov	19		Analyst, WSP, WSFC
Nov	20		Regular Day Off
Nov	21		Regular Day Off
Nov	22		Analyst, WSP, WSFC
Nov	23		Inclement Weather
Nov	24	-	Inclement Weather
Nov	25		Federal Holiday (Thanksgiving)
Nov	26		Analyst, WSP, WSFC
Nov	27		Regular Day Off
Nov.	28	0	Regular Day Off
Nov	29		Analyst, WSP, WSFC
Nov	30	9	Analyst, WSP, WSFC
Total	Hours:	162 ~	

Contractor Signature/Date

30-Nov-10

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

LANCE B LAUTUSS

Local Reviewer Signature/Date

FORM
A19-1A
(Rev. 3/95)



#### STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the Items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

WSP/SGT Jaymon,

(TITLE)

DATE GOODS/SERVICES RECEIVED

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ACCC	UNTING AF	PR	OVAL FO	R PAY	MEN	1	<u> </u>	<u> </u>	1	<u></u>	DATE				<u> </u>	WA	RRANT TO	TAL		WARRANT NUMBER
			·		_												86	50		000076

# Washington State Patrol CONTRACTOR SERVICE HOURS

Beginning

10/1/2010

Ending 10/31/2010

Period: 10/1

mm/dd/yr mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.			
	Day		Description of Services Provided
Oct	1		Requested Time Off
Oct	2		Regular Day Off
Oct	3		Regular Day Off
Oct	4		Analyst, WSP, WSFC
Oct	5		Analyst, WSP, WSFC
Oct	6		Analyst, WSP, WSFC
Oct	7		Analyst, WSP, WSFC
Oct	8		Analyst, WSP, WSFC
Oct	9		Regular Day Off
Oct	10		Regular Day Off
Oct	11	0	Federal Holiday (Columbus Day)
Oct	12		Analyst, WSP, WSFC
Oct	13		Analyst, WSP, WSFC
Oct	14	9	Analyst, WSP, WSFC
Oct	15		Analyst, WSP, WSFC
Oct	16		Regular Day Off
Oct	17		Regular Day Off
Oct	18		Analyst, WSP, WSFC
Oct	19		Analyst, WSP, WSFC
Oct	20		Analyst, WSP, WSFC
Oct	21	10	Analyst, WSP, WSFC
Oct	22	10	Analyst, WSP, WSFC
Oct	23	0	Regular Day Off
Oct	24	0	Regular Day Off
Oct	25	8	Analyst, WSP, WSFC
Oct	26	9	Analyst, WSP, WSFC
Oct	27		Analyst, WSP, WSFC
Oct	28	-8	Analyst, WSP, WSFC
Oct	29		Analyst, WSP, WSFC
Oct	30		Regular Day Off
Oct	31	0	Regular Day Off
Total I	lours:	173 /	

Contractor Signature/Date

29-Oct-10

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

FORM						
A19-1A						
(Rev. 3/95)						

DATE



#### OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY								
AGENCY INC	LOCATION CODE	P.R. OR AUTH. NO.						
225	341009/34107							

		-	/ 1			
AG	Er	1 C	Y F	N A	W	⊏

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

UNIT PRICE

31 JW 214 (DATE) President, Operational Applications Inc (TITLE)

**AMO** 

DATE GOODS/SERVICES RECEIVED

1-30 June 2011

FOR AGENCY USE ONLY 50.00 Analytical services for June2011 (Rob Hollander) 173 Hour 1-30 Jun 11 Services performed under C110169PSC PREPARED BY TELEPHONE NUMBER Doug Larm (253)226-9564 30 Jun 11 11 PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. VENDOR NUMBER UBI NUMBER USE 602632122 MASTER INDEX COUNTY CITY/TOWN SUB OJECT ORG SUB PROJ PROJ PHAS TRANS CODE PROJECT INVOICE NUMBER FUND BUDGET UNIT AMOUNT PROGRAM INDEX ALLOC \$ 8650 210 001 014 U 271 5762 June ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT TOTAL \$8650 WARRANT NUMBER 000078

QUANTITY

## **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 6/1/2011 6/30/2011 mm/dd/yr mm/dd/yr

Name:	Robert Hollander		Location: 1110 3rd Avenue, Seattle, WA 98101

( <del></del>	<del>- </del> -		
Mo.	Day		Description of Services Provided
Jun	1		Analyst, WSP, WSFC
Jun	2		Analyst, WSP, WSFC
Jun	3		Analyst, WSP, WSFC
Jun	4		Regular Day Off
Jun	5		Regular Day Off
Jun	6		Analyst, WSP, WSFC
Jun	7	8.5	Analyst, WSP, WSFC
Jun	8		Analyst, WSP, WSFC
ĭU	9		Analyst, WSP, WSFC
Jun	10		Analyst, WSP, WSFC
Jun	11		Regular Day Off
Jun	12	0	Regular Day Off
Jun	13		Analyst, WSP, WSFC
Jun	14		Analyst, WSP, WSFC
Jun	15		Analyst, WSP, WSFC
Jun	16	8.5	Analyst, WSP, WSFC
Jun	17	8.5	Analyst, WSP, WSFC
Jun	18		Regular Day Off
Jun	19		Regular Day Off
Jun	20		Analyst, WSP, WSFC
Jun	21		Analyst, WSP, WSFC
Jun	22		Analyst, WSP, WSFC
Jun	23		Analyst, WSP, WSFC
Tun	24		Requested Time Off
in	25		Regular Day Off
Jun	26		Regular Day Off
Jun	27		Analyst, WSP, WSFC
Jun	28		Analyst, WSP, WSFC
Jun	29		Analyst, WSP, WSFC
Jun	30	8.5	Analyst, WSP, WSFC
Total	Hours:	173	
		2	

-30-Jun-11

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name



# STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO
225	341009/34107	

	1 5 5 5	VOCUCI INVIIIT
Washing	ton Sta	te Patrol
Investiga	tive As	sistance Division
PO Box 2	2347	
Olympia.	WA 98	3507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

ACENCY NAME

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

Y SIGN IN INK

President Operational Applications Inc.
(TITLE)

(DAT

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) RECEIVED BY DATE GOODS/SERVICES RECEIVED WSP/SGT Jarmon. 1-31 May 2011 SGT Ladines AMO UNIT PRICE DATE **DESCRIPTION** QUANTITY UNIT FOR AGENCY USE ONLY 1-31 May 11 Analytical services for May2011 (Rob Hollander) 173 Hour 50.00 Services performed under C110169PSC AGENCY API PREPARED BY TELEPHONE NUMBER (253)226-9564 1 Jun 11 Doug Larm PMT DUE DATE | CURRENT DOC. NO. VENDOR NUMBER REF. DOC. NO. VENDOR MESSAGE DOC. DATE 602632122 TAX COUNTY CITY/TOWN SUB SUB CUECT M 0 D TRANS FUND INVOICE NUMBER PROGRAM BUDGET ALLOC \$8650 5761 Œ DIX ACCOUNTING APPROVAL FOR PAYMENT DATÉ

# Washington State Patrol CONTRACTOR SERVICE HOURS

Period:

5/1/2011 mm/dd/yr

5/31/2011 mm/dd/yr

**Ending** 

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

<del></del>	T		
Mo.	Day		Description of Services Provided
May	1		Analyst, WSP, WSFC
May	2		Analyst, WSP, WSFC
May	3		Analyst, WSP, WSFC
May	4		Analyst, WSP, WSFC
May	5		Analyst, WSP, WSFC
May	6		Analyst, WSP, WSFC
May	7		Regular Day Off
May	8		Regular Day Off
May	9		Analyst, WSP, WSFC
May	10		Analyst, WSP, WSFC
May	11		Analyst, WSP, WSFC
May	12		Analyst, WSP, WSFC
May	13		Analyst, WSP, WSFC
May	14		Regular Day Off
May	15		Regular Day Off
May	16		Analyst, WSP, WSFC
May	17		Analyst, WSP, WSFC
May	18		Analyst, WSP, WSFC
May	19		Analyst, WSP, WSFC
May	20_		Analyst, WSP, WSFC
May	21		Regular Day Off
May	22		Regular Day Off
May	23		Analyst, WSP, WSFC
May	24		Analyst, WSP, WSFC
May	25		Analyst, WSP, WSFC
May	26		Analyst, WSP, WSFC
May	27		Analyst, WSP, WSFC
May	28		Regular Day Off
May	29		Regular Day Off
May	30		Federal Holiday (Memorial Day)
May	31		Analyst, WSP, WSFC
Total	Hours:	1737	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Janus 6

4/01/11

Local Reviewer Signature/Date

**FORM** A19-1A



#### STATE OF WASHINGTON

(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

Online Help

This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at

nd appropriate signatures, forward to the Fiscal Office for payment.								
AGENCY USE ONLY								
AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.						

## **AGENCY NAME** INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim

**Washington State Patrol** 

VENDOR OR CLAIMANT (Warrant is to be payable to)

Robert John Hollander

payment for materials, merchandise or services. Show complete detail for each

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or

(SIGN IN INK)

11May2011

			/ (1	TILE)	7 (DATE)	
FEDERAL I.D. N	O. OR SOCIAL SECURITY NO. (For Reporting Personal Services Control	act Payments to I.R	.s. REC	Tiraly	17(1)21	DATE RECEIVED 5-17-1/
DATE	DESCRIPTION	QUANTITY	UNIT /	UNIT / PRICE	AMOUNT	FOR AGENCY USE
5/01/11	Mileage Silverdale and SeaTac Airport	134	mi	.51	68.34	
5/01/11	Bridge Toli- Tacoma Narrows	1	pass	4.00	4.00	
5/01/11	LEIU Conference: Flight	1 .	ticket	332.90	332.90	·
5/01/11	Meal per diem (travel day 75% of 66)	11	day	49.50	49.50	
5/01/11	LEIU Hotel per diem	11	night	110.00	110.00	<u></u>
5/01/11	LEIU Hotel Tax (city, resort, room)	1	night	25.09	25.09	
5/01/11	LEIU Hotel Misc (internet)	11	night	15.00	15.00	
5/02/11	LEIU Registration Fee	11	conf	425.00	425.00	<u> </u>
5/02/11	LEIU Hotel per diem	1	night	110.00	110.00	
5/02/11	LEIU Hotel Tax (city, resort, room)	1	night	25.09	25,09.	
5/02/11	LEIU Hotel Misc (internet)	1	night	15.00	15.00	
5/02/11	Meal per diem	1	day	66.00	66.00	
5/03/11	LEIU Hotel per diem	1	night	110.00	110.00	
5/03/11	LEIU Hotel Tax (city, resort, room)	11	night	25.09	25.09	
5/03/11	LEIU Hotel Misc (internet)	11	night	15.00	15.00	
5/03/11	Meal per diem	1	day	66.00	66.00	·
5/04/11	LEIU Hotel per diem	1	night	110.00	110.00	
5/04/11	LEIU Hotel Tax (city, resort, room)	1	night	25.09	25.09	
5/04/11	LEIU Hotel Misc (internet)	1	night	15.00	15.00	
5/04/11	Meal per diem	11	day	66.00	66.00	
5/05/11	LEIU Hotel per diem	1	night	110.00	110.00	
5/05/11	LEIU Hotel Tax (city, resort, room)	1	night	25.09	25.09	
5/05/11	LEIU Hotel Misc (internet)	1	night	15.00	15.00	
5/05/11	Meal per diem	1	day	66.00	66.00	
5/06/11	LEIU Hotel per diem	1	night	110.00	110.00	
5/06/11	LEIU Hotel Tax (city, resort, room)	11	night	25.09	25.09	000083

	5/06/11 Meal per diem (travel day 75% of 66)						1		day	49.5	501		49.50				
	5/06/1	1	Parking Sea-Tac						1		hr	3.0	001		3.00		
Ŀ	5/06/1	1_	L	В	ridge	Toll- Ta	acoma N	arrows		1_		pass	4.0	001	<u> </u>	4.00	<u> </u>
	5/06/1			Milea	ge Se	aTac A	irport an		dale	134	丄	mi		1		68.34	
P	REPARED	BY					TELEPHON	E NUMBER	DATE	Ī		ACENCY	APPROVAL	ft.	$\frac{2}{110}$	J.	DATE S 25
	DOC DAT	E	F	PMT DUE D	DATE	CURREN	T DOC. NO.	REF.	DOC. NO.	VENDOR	NUMBE	ER	VEND	OR MES	SAGE	USE TAX	UBI NUMBER
Rido	F TRAN	VS NE	¥ 0£	FUND	APPN INDEX	PROGRAM INDEX	SUB	SUB SUB OBJECT	ORG INDEX	WORKCLASS	BUDGET UNIT	TOWN TOWN	PROJECT	9UB PRGJ	PROJ PHAS	AMOUNT	INVOICE NUMBER
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	211	v		out	01#	271	60						5767		,	81,00	mulicy horit
										_							, ,
ACCOUNTING APPROVAL FOR PAYMENT  DATE  WARRANT TOTAL  \$2154 12										WARRANT NUMBER							



### Thank you for your purchase!

Air Confirmation:

**XL8U96** 

Seattle, WA to Nashville, TN (05/01/2011 - 05/06/2011)

Air

Car

Hotel

Confirmation: XL8U96

Choose from 14 different rental

Air Total: \$332.90

companies.

Shop over 40,000 hotels

Browse hotels

FarlyBird Check-In Purchased

Browse cars

Total Paid Now

\$332.90

**Trip Total** 

\$332.90

Air

Passeng ADULT	er Type Name ROBERT HOLLANDER		Confirmation Number XL8U96	Rapid Rewards - None Entered	Number
ITINERAR	<b>XY</b>		and the second s		\$ 1 1 2 2 2 2 2 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
DEPART MAY 1	Seattle, WA to Nashville, TN Sunday, May 1, 2011 Travel Time 4 h 25 m (Nonstop)	#902	Depart Seattle/Tacoma, WA (SI Arrive in Nashville, TN (BNA)	<b>(A)</b>	11:25 AM 5:50 PM
return may 6	Nashville, TN to Seattle, WA Friday, May 6, 2011 Travel Time 4 h 55 m (Nonstop)	#716	Depart Nashville, TN (BNA) Arrive in Seattle/Tacoma, WA (	SEA)	2:40 PM 5:35 PM

#### PRICE

Passenger Type	Trip	Routing	Fare Type	Base Fare	Govt. Taxes and Fees	Quantity	Total
Adult	Depart	SEA-BNA	Wanna Get Away	\$175.81	\$23.89	ī	\$199.70
Adult	Return	BNA-SEA	Wanna Get Away	\$96.74	\$16.46	1	\$113.20
Please read the fare rule	associated w	vith this purches	e.	\$272.55	\$40.35	1	\$312.90

Rapid Rewards points will be deposited into the Member's account once the entire ticket has been flown, exchanged, or refunded (if applicable).

Total \$312.90

### EARLYBIRD CHECK-IN PRICING

Option	Passenger	Price	Quantity	Details	Receipt #	Total
EarlyBird Check-In	ROBERT HOLLANDER	\$10.00	1	SEA-BNA	5260635309725	\$10.00
EarlyBird Check-In	ROBERT HOLLANDER	\$10.00	i	BNA-SEA	5260635309724	\$10.00

Total

\$332.90

Billing

Billing Address **Purchaser Name** 

Robert Hollander

Form of Payment

**Amount Applied** 

Visa - XXXXXXXXXXXXXX-2042

\$332.90

**Total Paid Now** 

\$332.90

Trip Total \$332.90



## GAYLORD OPRYLAND

RESORT & CONVENTION CENTER

Nashville

ROBERT HOLLANDER

 ROOM
 MG M1203

 ARRIVAL
 5/01/11

 DEPARTURE
 5/06/11

 NO. IN PARTY
 1

 GROUP I.D.
 A-IALE1

 PAGE
 1

 STATEMENT DATE
 5/06/11

**RESV NUMBER** 406158367156 **FOLIO NUMBER** 406633629178

DATE	DESCRIPTION	COMMENTS	<b>7777</b>	
5/01/11	CITY TAX	CITY TAX	CHARGES	PAYMENTS
	RESORT FEE	oli im	2.50	
	RESORT FEE TAX		15.00	
5/01/11	SELF PARKING	NO PARKING	1.39	
5/01/11	ROOM CHARGE MGM1203	NO PARKING		
	TAX		139.00	
5/01/11	APPLIED DEPOSIT	****	21.20	
5/02/11	CITY TAX	**********2042		-160.20
	RESORT FEE	CITY TAX	2.50	
3/02/11			15.00	
5/02/11	RESORT FEE TAX 203		1.39	
5/02/11	SELF PARKING	NO PARKING		
3/02/11	ROOM CHARGE MGM1203		139.00	
E/02/11	TAX		21.20	
	CITY TAX	CITY TAX	2.50	
5/03/11	RESORT FEE		15.00	
	RESORT FEE TAX 203		1.39	
5/03/11	SELF PARKING	NO PARKING		
5/03/11	ROOM CHARGE MGM1203		139.00	
	TAX		21.20	
	CITY TAX	CITY TAX	2.50	•
5/04/11	RESORT FEE		15.00	
	RESORT FEE TAX 203			
5/04/11	SELF PARKING	NO PARKING	1.39	
	ROOM CHARGE MGM1203		400.00	
	TAX		139.00	
			21.20	



## GAYLORD OPRYLAND®

RESORT & CONVENTION CENTER

Nashville

ROBERT HOLLANDER

 ROOM
 MG M1203

 ARRIVAL
 5/01/11

 DEPARTURE
 5/06/11

 NO. IN PARTY
 1

 GROUP I.D.
 A-IALE1

 PAGE
 2

 STATEMENT DATE
 5/06/11

RESV NUMBER 406 FOLIO NUMBER 406

406158367156 406633629178

<b>DATE</b> 5/05/11	DESCRIPTION CITY TAX		COMMENTS CITY TAX	CHARGES 2.50	PAYMENTS
5/05/11	RESORT FEE			15.00	
	RESORT FEE TAX 203			1.39	
5/05/11	SELF PARKING		NO PARKING		
5/05/11	ROOM CHARGE MGM1203			139.00	
	TAX			21.20	
5/06/11	F/O MASTERCARD	0512	**********8467		-735.25

TOTALS

895.45

895.45

Thank you for staying with us

BALANCE DUE

.00

TACOMA NARROWS BRIDGE 1701 24th Street NW GIG HARBOR, WA 98335 1-866-936-8246

LANE: 2 COLLECTOR: 4042

Sun May 01, 2011 09:22:05 CLASS 2 TOLL PAID \$ 4.00 Cash RECEIPT # 02894954

Please retain this receirt for 60 days.

TACOHA NARROWS BRIDGE 1701 24th Street NW GIG HARBOR, WA 98335 1-866-936-8246

LANE: 5 COLLECTOR: 4026

Fri Hay 06, 2011 16:45:36 CLASS 2 TOLL PAID \$ 4.00 Cash RECEIP1 # 02069060

Please retain this receipt for 60 days.



Nashville, Tennessee May 2-6, 2011

# **Robert Hollander**

**WA State Fusion Center** 

Criminal Intelligence: Increasing Criminal Intelligence Capabilities to Counter Evolving Threats

Registration Receipt
2011 LEIU/IALEIA Annual Training Seminar

Received

On

3/15/2011

From

**Robert Hollander** 

Van Godsey, General Chairman

Ritchie A. Martinez, President IALEIA

# Furt or Seattle

SeaTar: International Airport P.O. Box 68727 Seattle, WA 98168 Phone: (206)-787-5308

Receipt #0073/5068/801 05/06/11 18:21

Parking - 05/06/11 17:34 - 05/06/11 18:21 Length of stay: 0 Dy. 0 Hr. 47 Min.

total amount	3.00 \$
Cash tendered Tax 9.50 %	3.00 \$ 0.18 \$
City of SeaTacTax	0.00 \$

FORM
A19-1A
(Rev. 3/95)



## STA DE L'ASHINGTON INVOICE VOUCHER

ON R AGENCY USE ONLY

LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

#### **AGENCY NAME**

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

Y HILLE

President, Operational Applications Inc. (TITLE)

MAY ZUU

RECEIVED BY FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) DATE GOODS/SERVICES RECEIVED WSP/SGT Jarmon, 1-30 April 2011 **SGT Ladines** AMO DATE DESCRIPTION **QUANTITY** UNIT **UNIT PRICE** FOR AGENCY USE ONLY UNT 155 Hour 50.00 1-30 Apr 11 Analytical services for Apr 2011 (Rob Hollander) Services performed under C110169PSC tisca PREPARED BY TELEPHONE NUMBER (253)226-9564 3 May 11 Doug Larm DOC. DATE PMT DUE DATE CURRENT DOC. NO. UBI NUMBER USE 602632122 COUNTY CITY/TOWN VORKCLASS PROJECT INVOICE NUMBER PROGRAM \$ 7750 UD 271 5741 001 01¥ April ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT NUMBER 000091

# **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 4/1/2011
 4/30/2011

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Apr	1		Requested Time Off
Apr	2		Regular Day Off
Apr	3		Regular Day Off
Apr	4		Analyst, WSP, WSFC
Apr	5		Analyst, WSP, WSFC
Apr	6		Analyst, WSP, WSFC
Apr	7		Analyst, WSP, WSFC
Apr	8		Analyst, WSP, WSFC
Apr	9		Regular Day Off
Apr	10		Regular Day Off
Apr	11		Analyst, WSP, WSFC
Apr	12		Analyst, WSP, WSFC
Apr	13		Analyst, WSP, WSFC
Apr	14		Analyst, WSP, WSFC
Apr	15	8.5	Analyst, WSP, WSFC
Apr	16	0	Regular Day Off
Apr	17		Regular Day Off
Apr	18		Analyst, WSP, WSFC
Apr	19		Analyst, WSP, WSFC
Apr	20	7.5	Analyst, WSP, WSFC
Apr	21		Analyst, WSP, WSFC
Apr_	22	0	Requested Time Off
Apr	23	0	Regular Day Off
Apr	24		Regular Day Off
Apr	25		Analyst, WSP, WSFC
Apr	26		Analyst, WSP, WSFC
Apr	27		Analyst, WSP, WSFC
Apr	28		Analyst, WSP, WSFC
Apr	29	8.5	Analyst, WSP, WSFC
Apr	30	0	Requested Time Off
Total I	Hours:	155 -	

Contractor Signature/Date

30-Apr-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

A	FO \19 ev.	)-	 )
		-	



# STATE OF WASHINGTON INVOICE VOUCHER

# AGENCY USE ONLY AGENCY NO LOCATION CODE P.R. OR AUTH. NO. 225 341009/34107

AGENCY NAME	Ë
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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, haddicap, religion, or Vietnam era or disabled veterans status.

BY MINISTER IN INK

WSP/SGT Jan

President Operational Applications Inc. (DAT

DATE GOODS/SERVICES RECEIVED

000093

1-31 March 2011 SGT Ladines/ QUANTITY DATE DESCRIPTION UNIT **UNIT PRICE** FOR AGENCY USE ONLY 173 Hour 1-31 Mar 11 Analytical services for Mar 2011 (Rob Hollander) 50.00 Services performed under C110169PSC PREPARED BY TELEPHONE NUMBER AGENCY APPROVA (253)226-9564 3 Apr 11 Doug Larm DOC. DATE REF. DOC. NO. UBI NUMBER PMT DUE DATE CURRENT DOC. NO. USE 602632122 COUNTY CITY/TOW MASTER INDEX TRANS ORG INDEX PROJ PHAS PROJECT INVOICE NUMBER FUND \$8450 210 SH2 ODI DIX 271 lt WARRANT TOTAL WARRANT NUMBER DATE ACCOUNTING APPROVAL FOR PAYMENT

## **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 3/1/2011 3/31/2011 mm/dd/yr mm/dd/yr

Name:	Robert Hollander	Location:	1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hrs.	Description of Services Provided
Mar	1 1	9	Analyst, WSP, WSFC
Mar	2	_	Analyst, WSP, WSFC
Mar	3		Analyst, WSP, WSFC
Mar	4	8.5	Analyst, WSP, WSFC
Mar	5	0.5	Regular Day Off
Mar	6		Regular Day Off
Mar	7 1		Analyst, WSP, WSFC
Mar	8		Analyst, WSP, WSFC
Mar	9		Analyst, WSP, WSFC
Mar	10		Analyst, WSP, WSFC
Mar	11	8.5	Analyst, WSP, WSFC
Mar	12		Regular Day Off
Mar	13		Regular Day Off
Mar	14		Analyst, WSP, WSFC
	15		
Mar			Analyst, WSP, WSFC
Mar	16		Analyst, WSP WSFC
Mar	17 18		Analyst, WSP, WSFC
Mar			Analyst, WSP, WSFC
Mar	19		Regular Day Off
Mar	20		Regular Day Off
Mar	21		Analyst, WSP, WSFC
Mar	22		Analyst, WSP, WSFC
Mar	23		Analyst, WSP, WSFC
Mar	24		Analyst, WSP, WSFC
Mar	25		Analyst, WSP, WSFC
Mar	26		Regular Day Off
Mar	27		Regular Day Off
Mar	28		Analyst, WSP, WSFC
Mar	29		Requested Time Off
Mar	30		Requested Time Off
Mar	31	0	Requested Time Off
Total	Hours.	173	

Contractor Signature/Date

31-Mar-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

FO	RM
A19	-1A
(Rev.	3/95)



#### STATE C. WASHINGTON **INVOICE VOUCHER**

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

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Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puvallup Washington 98374

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BY

## **CONTRACTOR SERVICE HOURS**

Beginning

Period:

Ending

2/1/2011 mm/dd/yr 2/28/2011 mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.   Day   Hrs.   Description of Services Provided	
Feb   2   9.5   Analyst, WSP, WSFC     Feb   3   9   Analyst, WSP, WSFC     Feb   4   8.5   Analyst, WSP, WSFC     Feb   5   0   Regular Day Off     Feb   6   0   Regular Day Off     Feb   6   0   Regular Day Off     Feb   8   9   Analyst, WSP, WSFC     Feb   9   9.5   Analyst, WSP, WSFC     Feb   10   9   Analyst, WSP, WSFC     Feb   11   8.5   Analyst, WSP, WSFC     Feb   12   0   Regular Day Off     Feb   13   0   Regular Day Off     Feb   14   9   Analyst, WSP, WSFC     Feb   15   9   Analyst, WSP, WSFC     Feb   16   10   Analyst, WSP, WSFC     Feb   17   12   Analyst, WSP, WSFC     Feb   18   8.5   Analyst, WSP, WSFC     Feb   19   0   Regular Day Off     Feb   19   0   Regular Day Off     Feb   20   0   Regular Day Off     Feb   21   0   Federal Holiday     Feb   22   10   Analyst, WSP, WSFC     Feb   24   8.5   Analyst, WSP, WSFC     Feb   25   8.5   Analyst, WSP, WSFC     Feb   26   0   Regular Day Off     Feb   27   0   Regular Day Off     Feb   28   8   Knalyst, WSP, WSFC     Feb   29   8   Knalyst, WSP, WSFC     Feb   20   8   K	
Feb   3	
Feb	
Feb         5         0         Regular Day Off           Feb         6         0         Regular Day Off           Feb         7         9         Analyst, WSP, WSFC           eb         8         9         Analyst, WSP, WSFC           Feb         19         9.5         Analyst, WSP, WSFC           Feb         10         9         Analyst, WSP, WSFC           Feb         11         8.5         Analyst, WSP, WSFC           Feb         12         0         Regular Day Off           Feb         13         0         Regular Day Off           Feb         14         9         Analyst, WSP, WSFC           Feb         15         9         Analyst, WSP, WSFC           Feb         16         10         Analyst, WSP, WSFC           Feb         17         12         Analyst, WSP, WSFC           Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           Feb         23         8.5         Analyst, WSP, WSFC<	
Feb	
Feb   7   9   Analyst, WSP, WSFC	
Feb   9   9.5   Analyst, WSP, WSFC     Feb   10   9   Analyst, WSP, WSFC     Feb   11   8.5   Analyst, WSP, WSFC     Feb   12   0   Regular Day Off     Feb   13   0   Regular Day Off     Feb   14   9   Analyst, WSP, WSFC     Feb   15   9   Analyst, WSP, WSFC     Feb   16   10   Analyst, WSP, WSFC     Feb   17   12   Analyst, WSP, WSFC     Feb   18   8.5   Analyst, WSP, WSFC     Feb   19   0   Regular Day Off     Feb   20   0   Regular Day Off     Feb   21   0   Federal Holiday     Feb   22   10   Analyst, WSP, WSFC     Feb   23   8.5   Analyst, WSP, WSFC     Feb   25   8.5   Analyst, WSP, WSFC     Feb   26   0   Regular Day Off     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   28   8	
Feb   9   9.5   Analyst, WSP, WSFC     Feb   10   9   Analyst, WSP, WSFC     Feb   11   8.5   Analyst, WSP, WSFC     Feb   12   0   Regular Day Off     Feb   13   0   Regular Day Off     Feb   14   9   Analyst, WSP, WSFC     Feb   15   9   Analyst, WSP, WSFC     Feb   16   10   Analyst, WSP, WSFC     Feb   17   12   Analyst, WSP, WSFC     Feb   18   8.5   Analyst, WSP, WSFC     Feb   19   0   Regular Day Off     Feb   20   0   Regular Day Off     Feb   21   0   Federal Holiday     Feb   22   10   Analyst, WSP, WSFC     Feb   23   8.5   Analyst, WSP, WSFC     Feb   25   8.5   Analyst, WSP, WSFC     Feb   26   0   Regular Day Off     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   28   8   Analyst	
Feb   10   9   Analyst, WSP, WSFC   Feb   11   8.5   Analyst, WSP, WSFC   Feb   12   0   Regular Day Off   Feb   13   0   Regular Day Off   Feb   14   9   Analyst, WSP, WSFC   Feb   15   9   Analyst, WSP, WSFC   Feb   16   10   Analyst, WSP, WSFC   Feb   17   12   Analyst, WSP, WSFC   Feb   18   8.5   Analyst, WSP, WSFC   Feb   19   0   Regular Day Off   Feb   20   0   Regular Day Off   Feb   21   0   Federal Holiday   Feb   22   10   Analyst, WSP, WSFC   Feb   23   8.5   Analyst, WSP, WSFC   Feb   25   8.5   Analyst, WSP, WSFC   Feb   26   8.5   Analyst, WSP, WSFC   Feb   27   0   Regular Day Off   Feb   28   8   Analyst, WSP, WSFC   Feb   26   0   Regular Day Off   Feb   27   0   Regular Day Off   Feb   28   8   Analyst, WSP, WSFC   Feb   29   8   Analyst, WSP, WSFC   20   10   10   10   10   10   10   10	
Feb   11	
Feb   12   0   Regular Day Off     Feb   13   0   Regular Day Off     Feb   14   9   Analyst, WSP, WSFC     Feb   15   9   Analyst, WSP, WSFC     Feb   16   10   Analyst, WSP, WSFC     Feb   17   12   Analyst, WSP, WSFC     Feb   18   8.5   Analyst, WSP, WSFC     Feb   19   0   Regular Day Off     Feb   20   0   Regular Day Off     Feb   21   0   Federal Holiday     Feb   22   10   Analyst, WSP, WSFC     Feb   23   8.5   Analyst, WSP, WSFC     Feb   24   8.5   Analyst, WSP, WSFC     Feb   25   8.5   Analyst, WSP, WSFC     Feb   26   0   Regular Day Off     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   8   Analyst, WSP, WSFC     Feb   28   8   Analyst, WSP, WSFC     Feb   29	
Feb         13         0         Regular Day Off           Feb         14         9         Analyst, WSP, WSFC           Feb         15         9         Analyst, WSP, WSFC           Feb         16         10         Analyst, WSP, WSFC           Feb         17         12         Analyst, WSP, WSFC           Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           Feb         23         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Analyst, WSP, WSFC	
Feb         14         9         Analyst, WSP, WSFC           Feb         15         9         Analyst, WSP, WSFC           Feb         16         10         Analyst, WSP, WSFC           Feb         17         12         Analyst, WSP, WSFC           Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           *eb         23         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Knalyst, WSP, WSFC	
Feb         15         9         Analyst, WSP, WSFC           Feb         16         10         Analyst, WSP, WSFC           Feb         17         12         Analyst, WSP, WSFC           Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           *eb         23         8.5         Analyst, WSP, WSFC           *eb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Analyst, WSP, WSFC	
Feb         16         10         Analyst, WSP, WSFC           Feb         17         12         Analyst, WSP, WSFC           Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           eb         23         8.5         Analyst, WSP, WSFC           Feb         24         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Analyst, WSP, WSFC	
Feb         17         12         Analyst, WSP, WSFC           Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           Feb         23         8.5         Analyst, WSP, WSFC           Feb         24         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Knalyst, WSP, WSFC	
Feb         18         8.5         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           eb         23         8.5         Analyst, WSP, WSFC           ab         24         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Analyst, WSP, WSFC	
Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           Feb         23         8.5         Analyst, WSP, WSFC           Feb         24         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Analyst, WSP, WSFC	
Feb   20	·
Feb         21         0         Federal Holiday           Feb         22         10         Analyst, WSP, WSFC           eb         23         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Knalyst, WSP, WSFC	
Feb         22         10         Analyst, WSP, WSFC           eb         23         8.5         Analyst, WSP, WSFC           Feb         24         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Knalyst, WSP, WSFC	
eb         23         8.5         Analyst, WSP, WSFC           ab         24         8.5         Analyst, WSP, WSFC           Feb         25         8.5         Analyst, WSP, WSFC           Feb         26         0         Regular Day Off           Feb         27         0         Regular Day Off           Feb         28         8         Knalyst, WSP, WSFC	
24   8.5   Analyst, WSP, WSFC   Feb   25   8.5   Analyst, WSP, WSFC   Feb   26   0   Regular Day Off   Feb   27   0   Regular Day Off   Feb   28   8   Knalyst, WSP, WSFC   Kna	
Feb 25 8.5 Analyst, WSP, WSFC Feb 26 0 Regular Day Off Feb 27 0 Regular Day Off Feb 28 8 Knalyst, WSP, WSFC	
Feb 26 0 Regular Day Off Feb 27 0 Regular Day Off Feb 28 8 Knalyst, WSP, WSFC	
Feb 27 0 Regular Day Off Feb 28 8 Analyst, WSP, WSFC	
Feb 28 8 Knalyst, WSP, WSFC	
Feb 28 8 Analyst, WSP, WSFC	
Total Hours: 173 /	

28-

Contractor Signature/Date

28-Feb-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

LANCE B LAOVOU

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A19-1A (Rev. 3/95)



#### STATE OF WASHINGTON INVOICE VOUCHER

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AGE	ENCY	NAM	E	

Washington State Patrol Investigative Assistance Division PO Box 2347

Olympia, WA 98507-2347

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Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puvallup, Washington 98374

	AGENCY USE ONLY	
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(TITLE)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) 1-31 January 2011 SGT Ladines QUANTITY **UNIT PRICE** UNIT DATE DESCRIPTION FOR AGENCY USE ONLY 1-31 Jan 11 Analytical services for Jan 2011 (Rob Hollander) 173 Hour 50.00 Services performed under C110169PSC PREPARED BY TELEPHONE NUMBER AGENCY APPROVAL (253)226-9564 7 Feb 11 Doug Larm UBI NUMBER DOC. DATE PMT DUE DATE REF. DOC. NO. VENDOR MESSAGE 602632122 COUNTY CITY/TOWN SUB SUB CJECT REF DOC SUF SUB CUECT TRANS PROJECT SUB PROJ AMOUNT FUND APPN INDEX BUDGET ALLOC 210 001 011 271 5711 WARRANT NUMBER ACCOUNTING APPROVAL FOR PAYMEN \$ 8650

# Washington State Patrol CONTRACTOR SERVICE HOURS

Period: 1/1/2011 mm/dd/yr

1/31/2011 mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Jan	1		National Holiday
Jan	2		Regular Day Off
Jan	3		Analyst, WSP, WSFC
Jan	4	8.5	Analyst, WSP, WSFC
Jan.	5	9 .	Analyst, WSP, WSFC
Jan	6	9	Analyst, WSP, WSFC
Jan	7	8.5	Analyst, WSP, WSFC
Jan	8	0	Regular Day Off
Jan	9	0	Regular Day Off
Jan	10	8.5	Analyst, WSP, WSFC
Jan	11	8.5	Analyst, WSP, WSFC
Jan	12		Analyst, WSP, WSFC
Jan	13	8.5	Analyst, WSP, WSFC
Jan	14	8.5	Analyst, WSP, WSFC
Jan	15		Regular Day Off
Jan	16		Regular Day Off
Jan	17		Federal Holiday (MLK)
Jan	18		Reserve Duty
Jan	19	9.5	Reserve Duty
Jan	20	9	Analyst, WSP, WSFC
Jan	21	8.5	Analyst, WSP, WSFC
Jan	22		Regular Day Off
Jan	23	_ 0	Regular Day Off
Jan	24	8.5	Analyst, WSP, WSFC
Jan	25	8.5	Analyst, WSP, WSFC
Jan	26	8.5	Analyst, WSP, WSFC
Jan	27	8.5	Analyst, WSP, WSFC
Jan	28		Analyst, WSP, WSFC
Jan	29		Regular Day Off
Jan	30		Regular Day Off
Jan	31	8.5	Analyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.
(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

31-Jan-11

LANCE B LADENS

Local Reviewer Name

**FORM 119-1A** (Rev. 3/95)



## STATE OF WASHINGTON

## **INVOICE VOUCHER**

### **AGENCY NAME**

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

	AGENCY USE ONLY	_
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

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President, Operational Applications Inc.

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# **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 9/1/2012 9/30/2012 mm/dd/yr mm/dd/yr

Name: Robert Hollander	Location:	1110 3rd Avenue, Seattle, WA 98101
------------------------	-----------	------------------------------------

Mo.	Day	Hrs.	Description of Services Provided
Sep	1		Regular Day Off
Sep	2		Regular Day Off
Sep	3		National Holiday (Labor Day)
Sep	4	8.5	Analyst, WSP, WSFC
Sep	5	8.5	Analyst, WSP, WSFC
Sep	6	0	Requested Time Off
Sep	7	8.5	Analyst, WSP, WSFC
Sep	8	0	Regular Day Off
Sep	9		Regular Day Off
Sep	10	8.5	Analyst, WSP, WSFC
Sep	11		Analyst, WSP, WSFC
Sep	12		Analyst, WSP, WSFC
Sep	13		Analyst, WSP, WSFC
Sep	14		Analyst, WSP, WSFC
Sep	15		Analyst, WSP, WSFC
Sep	16		Analyst, WSP, WSFC
Sep	17		Analyst, WSP, WSFC
Sep	18		Analyst, WSP, WSFC
Sep	19		Analyst, WSP, WSFC
Sep	20		Analyst, WSP, WSFC
Sep	21		Analyst, WSP, WSFC
Sep	22		Regular Day Off
Sep	23		Regular Day Off
Sep	24		Analyst, WSP, WSFC
Sep	25		Analyst, WSP, WSFC
Sep	26		Analyst, WSP, WSFC
Sep	27		Analyst, WSP, WSFC
Sep	28		Requested Time Off
Sep	29		Regular Day Off
Sep	30	0	Regular Day Off
	Hours:	173 4	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

27-Sep-12

George R Mars
Local Revigiver Name

TIC

28-Sep-12

CORM A 19-1 A (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

<del></del>	AGENCY USE ONLY								
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.							
225	341009/34107	·							

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AGE	NUC	N	А	M	

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT:	Submit this form to claim
payment for materials, merchandise or services.	Show complete detail for
each item.	

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

Y (SIGN IN INK)

4561 201Z\_ President, Operational Applications Inc (TITLE) FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) DATE GOODS/SERVICES RECEIVED 1-31 August 2012 AMO QUANTITY UNIT PRICE DATE DESCRIPTION FOR AGENCY USE ONLY UNT 1-31 Aug 12 Analytical services for Aug 2012 (Rob Hollander) 173 Hour 50.00 Services performed under C110169PSC PREPARED BY TELEPHONE NUMBER (253)226-9564 4 Sep 12 Doug Larm PMT DUE DATE CURRENT DOC. NO REF. DOC. NO. DOC. DATE 602632122 COUNTY ICITY/TOWN M 0 D SUB TRANS CODE PROJECT FUND AMOUNT INVOICE NUMBER PROGRAM BUDGET ALLOC 68450-271 572 210 001 014 ACCOUNTING APPROVAL FOR PAYMENT WARRANT NUMBER <del>000101</del>

# **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 8/1/2012
 8/31/2012

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hrs.	Description of Services Provided
Aug	1 I		Analyst, WSP, WSFC
Aug	2		Analyst, WSP, WSFC
Aug	3		Analyst, WSP, WSFC
Aug	4	0	Regular Day Off
Aug	5		Regular Day Off
Aug	6		Analyst, WSP, WSFC
Aug	7		Analyst, WSP, WSFC
Aug	8		Analyst, WSP, WSFC
Aug	9		Analyst, WSP, WSFC
Aug	10		Analyst, WSP, WSFC
Aug	11		Regular Day Off
Aug	12		Regular Day Off
	13		Analyst, WSP, WSFC
Aug	14		Requested Time Off
Aug	15		Analyst, WSP, WSFC
Aug	16		Analyst, WSP, WSFC
	17	0.5	Requested Time Off
Aug	18		Regular Day Off
Aug	19		
Aug			Regular Day Off
Aug	20		Analyst, WSP, WSFC
Aug	21		Analyst, WSP, WSFC
Aug	22		Analyst, WSP, WSFC
Aug	23		Analyst, WSP, WSFC
Aug	24		Analyst, WSP, WSFC
Aug	25	0	Regular Day Off
Aug	26	0	Regular Day Off
Aug	27		Analyst, WSP, WSFC
Aug	28		Analyst, WSP, WSFC
Aug	29		Analyst, WSP, WSFC
Aug	30	8.5	Analyst, WSP, WSFC
Aug	31	3	Analyst, WSP, WSFC
Total	Hours:	173	

Control of Construct Data

31-Aug-12

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE. must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

(To ensure reimbursement, this form

Local Reviewer Name

31-Aug-12

FORM **A19-1A** (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR
225	341009/34107	

	<b>AGENCY NAME</b>
Washington State	Patrol
Investigative Assis	tance Division
PO Box 2347	
Olympia, WA 9850	7-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

AUTH. NO.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

President, Operational Applications Inc. / AVS 2012

DATE GOODS/SERVICES RECEIVED

1-31 July 2012 DESCRIPTION QUANTITY WHIT PRICE DATE UNIT FOR AGENCY USE ONLY 173 1-31 Jul 12 Analytical services for July 2012 (Rob Hollander) Hour 50.00 Services performed under C110169PSC PREPARED BY TELEPHONE NUMBER -31-12 Tige | UBI NUMBER (253)226-9564 |1 Aug 12 Doug Larm VENDOR MESSAGE DOC. DATE PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. VENDOR NUMBER 602632122 MASTER INDEX
APPN PROGRAINDEX INDEX WORKCLASS COUNTY CITY/TOWN SUB SUB OJECT M O SUB PROJ PHAS TRANS SUB PROJECT INVOICE NUMBER FUND PROGRAM BUDGET AMOUNT ALLOC 58650 210 LE SFC2 01 X 271 001 ACCOUNTING APPROVAL FOR PAYMENT WARRANT NUMBER

## **CONTRACTOR SERVICE HOURS**

**Beginning** 

Period:

7/1/2012 mm/dd/yr

**Ending** 7/31/2012

mm/dd/yr

Location: Name: Robert Hollander 1110 3rd Avenue, Seattle, WA 98101

· · · · ·	<del></del>		
Mo.	Day	Hrs.	Description of Services Provided
Jul	1	0	Hegular Day Off
Jul	2	0	Requested Time Off
Jul	3	0	Requested Time Off
Jul	4		Analyst, WSP, WSFC
Jul	5		Analyst, WSP, WSFC
Jul	6		Analyst, WSP, WSFC
Jul	7	0	Regular Day Off
Jul	8	0	Regular Day Off
Jul	9	8.5	Analyst, WSP, WSFC
Jul	10		Analyst, WSP, WSFC
Jul	11		Analyst, WSP, WSFC
Jul	12	8.5	Analyst, WSP, WSFC
Jul	13		Analyst, WSP, WSFC
Jul	14	0	Regular Day Off
Jul	15	0	Regular Day Off
Jul	16		Analyst, WSP, WSFC
Jul	17		Analyst, WSP, WSFC
Jul	18		Analyst, WSP, WSFC
Jul	19	9.5	Analyst, WSP, WSFC
Jul	20		Analyst, WSP, WSFC
Jul	21		Regular Day Off
Jul	22		Regular Day Off
Jul	23		Analyst, WSP, WSFC
Jul	24		Analyst, WSP, WSFC
Jul	25		Analyst, WSP, WSFC
Jul	26		Analyst, WSP, WSFC
Jul	27		Requested Time Off
Jul	28		Regular Day Off
Jul	29		Regular Day Off
Jul	30		Analyst, WSP, WSFC
Jul	31	8.5	Apatyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date

LEERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

31-Jul-12

STEPHEN R. BURNS
ocal Reviewer Name

31-Jul-12

FCRM A19-1A (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

<u> </u>	11 1 1 L	AGENC	NAME
Washington	State	Patrol	

Investigative Assistance Division PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin handicap, religion, or Vietnam era or disabled veterans status.

SY (SIGN IN INK)

President, Operational Applications Inc. 2 JULIOR (DATE)

DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

30 June 2012

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QUANTITY

# **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 6/30/2012 6/1/2012

					mm/dd/yr	mm/dd/yr
Namo	e:	Robert	Hollander	Location:	1110 3rd Avenue, Seattle, WA 98101	
Mo.	Day	Hrs.	Description of Services Provided			· · · · · · · · · · · · · · · · · · ·
Jun	1	8.5	Analyst, WSP, WSFC			<del></del>
Jun	2	0	Regular Day Off			
Jun	3	0	Regular Day Off			-
Jun	4	8.5	Analyst, WSP, WSFC			
Jun	5	8.5	Analyst, WSP, WSFC			
Jun	6	8.5	Analyst, WSP, WSFC			
Jun	7	8.5	Analyst, WSP, WSFC			
Jun	8	8.5	Analyst, WSP, WSFC			
Jun	9	0	Regular Day Off			
Jun	10	0	Regular Day Off			
Jun	11	10.5	Analyst, WSP, WSFC			-
Jun	12	9.5	Analyst, WSP, WSFC			
Jun	13	8.5	Analyst, WSP, WSFC			
Jun	14		Analyst, WSP, WSFC			_
Jun	15		Analyst, WSP, WSFC			
Jun	16	0	Regular Day Off			
Jun	17	0	Regular Day Off			
Jun	18		Analyst, WSP, WSFC			
Jun	19		Analyst, WSP, WSFC			
Jun	20		Analyst, WSP, WSFC			
Jun	21	8.5	Analyst, WSP, WSFC			
Jun	22	8.5	Analyst, WSP, WSFC			
Jun	23	0	Regular Day Off	- <del></del>	<u> </u>	
Jun	24	0	Regular Day Off			
Jun	25	0	Requested Time Off			
Jun	26	8.5	Analyst, WSP, WSFC			
Jun	27	8.5	Analyst, WSP, WSFC			
Jun	28	8.5	Analyst, WSP, WSFC	· · · · · · · · · · · · · · · · · · ·		
Jun	29	8.5	Analyst, WSP, WSFC			
Jun	30	0 /	Regular Day Off		2	
Total	Hours:	173				
			29-Jun-12	·	KANDY WAKE	
	•	gnature/ HE INFORM	Date Nation Reported is true and complete.		Local Reviewer Name	
Fo ensur	re reimburs	sement, this	form must be accompanied by a State of Washington Voucher Distribution Form A	A19-2A)	Kall PALL	29-Jun-12

Local Reviewer Signature/Date

**FORM** A19-1A

(Rev. 1/91)



### STATE OF WASHINGTON

INVOICE VOUCHER (new online version 12/01)

Online Help
This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

AGENCY USE ONLY

AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.

			A	GENC'	Y NAME					,						
Washin																nit this form to claim v complete detail for each
VEN	DO	ROR	CLAIN	/ANT (	Warrant	is to be	payab	le to)								
Robert	Jol	hn Ho	olland	er						totals li furnishe service sex, ma Vietnar	sted hereinged to the Sis rendered arital status in era or di	n are prostate of the have to so race,	oper cha Washing been pro- creed, co veterans	rges for ma ton, and the vided witho olor nation	terials, me at all good ut discrimi al origin, h	of perjury that the items are chandise or services as furnished and/or ination because of age, nandicap, religion, or
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ACCOUNTING	APP	ROVAL F	OR PAYME	ENT			1	D/	ATE				WARD	NT TOTAL (	15	WARRANT NUMBER

Guest Name:

Robert Hollander

Page No. 1

Room #:

439

Folio #:

R269B7

Group #:

Guests:

Clerk:

**AFINO** 

CL #:

Arrive: 06/11/12

Time: 02:42 PM

Depart: 06/12/12

Time: 09:11 AM

Status: HIST

Date	Description	Reference	Comment	Charges	Credits
05/31/2012 06/11/2012 06/11/2012 06/11/2012	DEP VISA ROOM CHARGE TOURISM PROMOTION A LODGING FEE- AIRWAYS		*************2042  TOURISM PROMOTION AREA FEE LODGING FEE, AIRWAY HEIGHTS	\$0.00 \$87.00 \$2.00 \$1.65	(\$90.65) \$0.00 \$0.00 \$0.00

Folio Balance:



FORM A19-1A (Rev. 3/95)

DATE



## STALE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

AG	<b>ENCY</b>	NΔ	ME

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

**DESCRIPTION** 

1-31 May 12 Analytical services for May 2012 (Rob Hollander)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin handicap, religion, or Vietnam era or disabled veterans status.

BY W (SIGN IN INK)

UNIT PRICE

50.00

President, Operational Applications Inc. (DATE)

AMO UNT DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-31 May 2012

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	TRANS CODE	M O D	FUND	MASTE APPN INDEX	PROGRAM INDEX	SUB			WORKCLAS	COUNTY ]	CITY/TOWN	PROJECT SFC.	T SUB		WARR	USE TAX AMOUNT	)	602632122 INVOICE NUMBER

**QUANTITY** 

173

UNIT

Hour

## **Washington State Patrol**

# **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 5/1/2012
 5/31/2012

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name:	Robert Hollander	Location	1: 1110 3rd Avenue, Seattle, WA 98	101

	<del></del>		
Mo.	Day		Description of Services Provided
May	_ 1		Analyst, WSP, WSFC
May	2		Analyst, WSP, WSFC
May	3		Analyst, WSP, WSFC
May	4		Analyst, WSP, WSFC
May	5		Regular Day Off
May	6		Regular Day Off
May	7		Requested Time Off
May	8		Analyst, WSP, WSFC
May	9		Analyst, WSP, WSFC
Мау	10		Analyst, WSP, WSFC
May	11		Analyst, WSP, WSFC
May	12		Regular Day Off
May	13		Regular Day Off
May	14		Analyst, WSP, WSFC
May	15		Analyst, WSP, WSFC
May	16		Analyst, WSP, WSFC
May	17	9.5	Analyst, WSP, WSFC
May	18	0	Requested Time Off
May	19		Regular Day Off
May	20		Regular Day Off
May	21	8.5	Analyst, WSP, WSFC
May	22	8.5	Analyst, WSP, WSFC
May	23	8.5	Analyst, WSP, WSFC
May	24	8.5	Analyst, WSP, WSFC
May	25	8.5	Analyst, WSP, WSFC
May	26	0	Regular Day Off
May	27		Regular Day Off
May	28		Analyst, WSP, WSFC
May	29		Analyst, WSP, WSFC
May	30	8.5	Analyst, WSP, WSFC
May	31	8.5	Analyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

31-May-12

Local Reviewer Name

31-May-12

Local Reviewer Signature/Date

000110

FORM
A19-1A
(Rev. 3/95)



# STAIL OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY LOCATION CODE AGENCY NO P.R. OR AUTH. NO.

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														1	\$ 445-	000111	

### Hollander, Rob

From:

Homeland Security Outlook [orders@eventbrite.com]

Sent:

Tuesday, May 15, 2012 2:16 PM

To:

Hollander, Rob

Subject:

Order Confirmation for Small Vessel Security Threats Forum Puget Sound

Attachments:

3208616057-87237771-tickets.pdf

Your order for Small **Vessel Security Threats** Forum Puget Sound is complete!

Small Vessel Security Threats Forum Puget Sound **Kitsap Conference Center** 100 Washington Avenue Bremerton, WA WA



Your tickets are attached to this email or download them here. Please print and bring them to the event.

Or get the mobile app to access tickets on your phone.

Questions about the event? Contact sareth.neak@neakmedia.com

## Your Receipt

May 15, 2012

Order #: 3208616057-87237771

Attendee Type Quantity Paid Early Bird Rob Government/NGO/Non 1 \$445.00 Hollander **Profit** 

TOTAL \$445.00

This order is subject to Eventbrite Terms of Service

Share this event with your friends! Email

	FORM
	A19-1Å
į	(Rev. 3/95)



## STA JF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AG	EN	CY	N	A۱	ИE
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Washington State Patrol
Investigative Assistance Division
PO Box 2347
Olympia, WA 98507-2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, mandicap, religion, or Vietnam era or disabled veterans

BY + All SSS

President, Operational Applications Inc. / WAY 20/2
(TITLE) (DATE)

E GOODS/SERVICES RECEIVED

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	DATE				DESC	CRIPTI	ON			QUANTITY	UNIT	· Jy	NIT PRIC	E	AMO JANT	FOR A	AGENCY USE ONLY	
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## **CONTRACTOR SERVICE HOURS**

Beginning Period:

4/1/2012 mm/dd/yr

**Ending** 4/30/2012 mm/dd/yr

Name: Robert Hollander Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.   Day   Hrs.   Description of Services Provided	<del></del>	<del></del>		
Apr   2	Mo.	Day		
Apr   3	Apr	1		
Apr   4	Apr			
Apr   5	Apr			
Apr   6	Apr	4		
Apr   7	Apr			
Apr   8	Apr	6		
Apr   9	Apr	7		
Apr   10	Apr			
Apr   11	Apr			
Apr   12	Apr			
Apr   13	Apr			
Apr	Apr			
Apr   15	Apr			
Apr         16         8.5         Analyst, WSP, WSFC           Apr         17         8.5         Analyst, WSP, WSFC           Apr         18         8.5         Analyst, WSP, WSFC           Apr         19         8.5         Analyst, WSP, WSFC           Apr         20         7         Analyst, WSP, WSFC           Apr         21         0         Regular Day Off           Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147	Apr			
Apr         17         8.5         Analyst, WSP, WSFC           Apr         18         8.5         Analyst, WSP, WSFC           Apr         19         8.5         Analyst, WSP, WSFC           Apr         20         7         Analyst, WSP, WSFC           Apr         21         0         Regular Day Off           Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147	Apr			
Apr         18         8.5         Analyst, WSP, WSFC           Apr         19         8.5         Analyst, WSP, WSFC           Apr         20         7         Analyst, WSP, WSFC           Apr         21         0         Regular Day Off           Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147	Apr			
Apr         19         8.5         Analyst, WSP, WSFC           Apr         20         7         Analyst, WSP, WSFC           Apr         21         0         Regular Day Off           Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147	Apr			
Apr         20         7         Analyst, WSP, WSFC           Apr         21         0         Regular Day Off           Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147	Apr			
Apr         21         0         Regular Day Off           Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147         Analyst, WSP, WSFC	Apr		8.5	
Apr         22         0         Regular Day Off           Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147         147	Арг		7	
Apr         23         8.5         Analyst, WSP, WSFC           Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147         Analyst, WSP, WSFC	Apr			
Apr         24         8.5         Analyst, WSP, WSFC           Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147         147	Apr			
Apr         25         8.5         Analyst, WSP, WSFC           Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147         147	Apr			
Apr         26         8.5         Analyst, WSP, WSFC           Apr         27         5.5         Analyst, WSP, WSFC           Apr         28         0         Regular Day Off           Apr         29         0         Regular Day Off           Apr         30         8.5         Analyst, WSP, WSFC           Total Hours:         147         147				
Apr 27 5.5 Analyst, WSP, WSFC Apr 28 0 Regular Day Off Apr 29 0 Regular Day Off Apr 30 8.5 Analyst, WSP, WSFC Total Hours: 147				
Apr 28 0 Regular Day Off Apr 29 0 Regular Day Off Apr 30 8.5 Analyst, WSP, WSFC Total Hours: 147				
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Apr 30 8.5 Analyst, WSP, WSFC Total Hours: 147	Apr			
Total Hours: 147	Apr			
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			147	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

30-Apr-12

30-Apr-12

Local Reviewer Signature/Date

FO	RM
A19	1-1A
(Rev.	3/95)



#### STATE OF WASHINGTON **INVOICE VOUCHER**

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AG	EN	CV	NA	ME

Washington State Patrol **Investigative Assistance Division** PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

ACCOUNTING APPROVAL FOR PAYMENT

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

WARRANT NUMBER

000115

WARRANT TOTAL \$ 8650

4.APE 2012 FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) -31 March 2012 AMO DATE DESCRIPTION QUANTITY UNIX PRICE FOR AGENCY USE ONLY 173 1-31 Mar 12 Analytical services for Mar 2012 (Rob Hollander) Hour 50.00 Services performed under C110169PSC PREPARED BY TELEPHONE NUMBER AGENCY APPROVA 412 4 Apr 12 (253)226-9564 Doug Larm PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. VENDOR NUMBER VENDOR MESSAGE UBI NUMBER USE 602632122 COUNTY ICITY/TOW MASTER INDEX REF DOC SUF 000 FUND PROJECT PROGRAM INDEX BUDGET ALLOC \$ 8650-Marcin Œ 271 5FC 2 210 wi 014

DATE

## **CONTRACTOR SERVICE HOURS**

Beginning Period:

3/1/2012 mm/dd/yr

Ending 3/31/2012

mm/dd/yr

Name: Location: 1110 3rd Avenue, Seattle, WA 98101 Robert Hollander

Mo.	Day	Hrs.	Description of Services Provided
Mar	1		Analyst, WSP, WSFC
Mar	2		Analyst, WSP, WSFC
Mar	3		Regular Day Off
Mar	4		Regular Day Off
Mar	5		Analyst, WSP, WSFC
Mar	6		Analyst, WSP, WSFC
Mar	7		Analyst, WSP, WSFC
Mar	8		Analyst, WSP, WSFC
Mar	9		Analyst, WSP, WSFC
Mar	10		Regular Day Off
Mar	11		Regular Day Off
Mar	12		Analyst, WSP, WSFC
Mar	13	8.5	Analyst, WSP, WSFC
Mar	14	8.5	Analyst, WSP, WSFC
Mar	15		Analyst, WSP, WSFC
Mar	16	8.5	Analyst, WSP, WSFC
Mar	17		Regular Day Off
Mar	18		Regular Day Off
Mar	19		Analyst, WSP, WSFC
Mar	20		Analyst, WSP, WSFC
Mar	21		Analyst, WSP, WSFC
Mar	22		Analyst, WSP, WSFC
Mar	23		Analyst, WSP, WSFC
Mar	24		Regular Day Off
Mar	25		Regular Day Off
Mar	26		Analyst, WSP, WSFC
Mar	27		Analyst, WSP, WSFC
Mar	28		Analyst, WSP, WSFC
Mar	29		Analyst, WSP, WSFC
Mar	30	0	Requested Time Off
Mar	31		Regular Day Off
Total	Hours:	173 -	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

29-Mar-12

29-Mar-12

Local Reviewer Signature/Date

FORM
A19-1A
(Rev. 3/95)



## ST. OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY									
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.							
225	341009/34107								

Δ	GEN	1CA	NΔ	ME

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT:	Submit this form to claim
payment for materials, merchandise or services.	Show complete detail for
each item.	

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handigap, religion, or Vietnam era or disabled veterans status.

BY

(BIGNMN INK)

President, Operational Applications Inc. 29 PCB 2012

ODS/SERVICES RECEIVED

(TITLE)

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																	<u> </u>		\$	200	50		<b>0</b> 00117	
																							_	

## **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 2/1/2012 2/29/2012 mm/dd/yr mm/dd/yr

Name: Robert Hollander	Location:	1110 3rd Avenue, Seattle, WA 98101
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Mo.	Day	Hre	Description of Services Provided
Feb	1 I		Analyst, WSP, WSFC
Feb	2		Analyst, WSP, WSFC
Feb	3		Analyst, WSP, WSFC
Feb	4		Regular Day Off
Feb	5		Regular Day Off
Feb	6		Analyst, WSP, WSFC
Feb	7		Analyst, WSP, WSFC
Feb	8		Analyst, WSP, WSFC
-eb	9		Analyst, WSP, WSFC
Feb	10	8.5	Analyst, WSP, WSFC
Feb	11	0	Regular Day Off
Feb	12	0	Regular Day Off
Feb	13		Analyst, WSP, WSFC
Feb	14		Analyst, WSP, WSFC
Feb	15	9.5	Analyst, WSP, WSFC
Feb	16		Analyst, WSP, WSFC
Feb	17		Reserve Duty
Feb	18		Regular Day Off
Feb	19		Regular Day Off
Feb	20		Federal Holiday (President's Day)
Feb	21		Analyst, WSP, WSFC
Feb	22		Analyst, WSP, WSFC
Feb	23		Analyst, WSP, WSFC
Feb	24		Analyst, WSP, WSFC
eb	25		Regular Day Öff
Feb	26		Regular Day Off
Feb	27		Analyst, WSP, WSFC
Feb	28		Analyst, WSP, WSFC
Feb	29	8.5	Analyst, WSP, WSFC
	Hours:	173	

Contractor Signature/Date

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

29-Feb-12

29-Feb-12

Local Reviewer Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

FORM	
A19-1A	
(Rev. 3/95)	



## STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY												
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.										
225	341009/34107											

	 		ME
nr:	, · v	BI A	

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handidap, religion, or Vietnam era or disabled veterans status.

President, Operational Applications Inc. (TITLE) (D

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## **CONTRACTOR SERVICE HOURS**

Period: 2/1/2012 - mm/dd/yr

Ending
2/29/2012
mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hrs.	
	7		Description of Services Provided
		9	Lead Analyst, WSP, WSFC
Feb	2	9	Lead Analyst, WSP, WSFC
Feb	3	9	Lead Analyst, WSP, WSFC
Feb	4		Regular Day Off
Feb	5		Regular Day Off
Feb	6	9	Lead Analyst, WSP, WSFC
Feb	7	9	Lead Analyst, WSP, WSFC
Feb	8	9	Lead Analyst, WSP, WSFC
Feb	9	9	Lead Analyst, WSP, WSFC
Feb	10	9	Lead Analyst, WSP, WSFC
Feb	11		Regular Day Off
Feb	12	0	Regular Day Off
Feb	13	9	Lead Analyst, WSP, WSFC
Feb	14	9	Lead Analyst, WSP, WSFC
Feb	15	7	Lead Analyst, WSP, WSFC
Feb	16	8	Lead Analyst, WSP, WSFC
Feb	17	8	Lead Analyst, WSP, WSFC
Feb	18		Regular Day Off
Feb	19	0	Regular Day Off
Feb	20	8	Lead Analyst, WSP, WSFC
Feb	21	8	Lead Analyst, WSP, WSFC
Feb	22	8	Lead Analyst, WSP, WSFC
Feb	23		Lead Analyst, WSP, WSFC
Feb	24	4	Lead Analyst, WSP, WSFC
Feb	25		Regular Day Off
Feb	26		Regular Day Off
Feb	27	8	Lead Analyst, WSP, WSFC
Feb	28	8	Lead Analyst, WSP, WSFC
Feb	29	8	Lead Analyst, WSP, WSFC
Total F	lours:	173	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

29-Feb-12

Local Reviewer Name

29-Feb-12

Local Reviewer Signature/Date

FORM
A19-1A
(Rev. 3/95)

DATE



STATE	OF \	NAS	HING	TON
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	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AGENCY NAME Washington State Patrol **Investigative Assistance Division** PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, hapolicap, religion, or Vietnam era or disabled veterans status.

BY President, Operational Applications Inc

DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-31 Jan 2012

(TITLE)

UNIT PRICE

OMA

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QUANTITY

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# **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 1/1/2012 1/31/2012 mm/dd/yr mm/dd/yr

Vame:	Robert Hollander	Location:	1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Jan	1		Regular Day Off
Jan	2		Federal Holiday (New Years Day)
Jan	3		Analyst, WSP, WSFC
Jan	4		Analyst, WSP, WSFC
Jan	5		Analyst, WSP, WSFC
Jan	6		Analyst, WSP, WSFC
Jan	7		Regular Day Off .
Jan	8		Regular Day Off
Jan	9		Analyst, WSP, WSFC
Jan	10		Analyst, WSP, WSFC
Jan	11	8.5	Analyst, WSP, WSFC
Jan	12		Analyst, WSP, WSFC
Jan	13		Analyst, WSP, WSFC
Jan	14		Regular Day Off
Jan	15		Regular Day Off
Jan	16		Federal Holiday (MLK Day)
Jan	17	9.5	Analyst, WSP, WSFC
Jan	18	0	Inclement Weather Conditions
Jan	19		Analyst, WSP, WSFC
Jan	20		Analyst, WSP, WSFC
Jan	21		Analyst, WSP, WSFC
Jan	22		Regular Day Off
Jan	23		Analyst, WSP, WSFC
Jan	24		Analyst, WSP, WSFC
Jan	25		Analyst, WSP, WSFC
Jan	26		Analyst, WSP, WSFC
Jan	27		Analyst, WSP, WSFC
Jan	28		Analyst, WSP, WSFC
Jan	29		Regular Day Off
Jan	30		Analyst, WSP, WSFC
Jan	31		Analyst, WSP, WSFC
Total	Hours:	173/	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

31-Jan-12

31-Jan-12

Local Reviewer Signature/Date

#### INTEROFFICE COMMUNICATION

# **WASHINGTON STATE PATROL**

TO: Captain Randy Drake, Homeland Security Division

FROM: Ms. Cindy Haider, Budget and Fiscal Services

**SUBJECT:** WSP Contract No. C130018PSC & Task Order 1

**DATE:** July 3, 2012



Attached is a fully executed copy of the above-listed task order between the Washington State Patrol and Mr. David Duty, Duty Investigative Consulting. Funding for this contract has been encumbered under the budget code listed on the attached <u>Budget and Fiscal Services Contract</u> Notification Form. Please take the following steps to ensure the correct payment of this contract:

- If you feel the indicated budget code is incorrect, please contact me within fifteen days from the date of this IOC.
- Please ensure that the WSP employee preparing payment documents for this contract has a copy of this contract to ensure the payment documents are filled out correctly.
- The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above. Please ensure that all persons preparing payment documents for this contract reference this WSP Contract Number and use the indicated budget code on all payment documents.
- The final payment document for the contract must be marked "Final Payment" so the Accounts Payable Section can liquidate the remaining encumbrance balance for this contract.
- If the contract period of performance crosses fiscal year boundaries, please work with your assigned budget analyst to address any fiscal year end balances.

Please contact me at Micro 12, ext. 11071, if you have any questions or concerns regarding this contract.

clh

Attachment

cc:

Ms. Tanya Pierce, Budget and Fiscal Services

Ms. Melissa Stricklett, Budget and Fiscal Services



Washington State Patrol
Budget and Fiscal Services Contract Notification Form

☐ Billable over \$10,000 ☐ Billable under \$10,000 ☐ Payable ☐ Other:													
WSP Contrac		r		Other	r Contrac	t Number			A/R Num	A/R Number			
C130018PS				Ca=+-	act End	Date		CFDA No		FSR			
Contract Start 7/1/2012	Date				act End 1	Date			CFDAIN	l	Yes □No		
Contract Title				31301	2017						100		
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DAVID DUT				206-3	375-677	4			CINDY HAIL	DER			
Contractor E-I		ress		Contr	actor Co	ntact Fax			BFS Fiscal A	nalyst Name			
Duty4002@d	comcast	.net		i					TANYA PIE				
WSP Project I	Manager	Position No		WSP	Section/	Division/Bur	eau		BFS Budget	-			
CAPTAIN RA	ANDY D	RAKE		HSD		·-··			MELISSA S	TRICKLET	Τ		
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Distribution: ⊠ Project Manager ⊠ Fiscal Analyst 300-365-522 (R 7/09)

⊠Budget Analyst

Other:

### WASHINGTON STATE PATROL Task Order

WSP Contract Number:

C130018PSC

Task Order Number:

Contractor: David Duty dba Duty Investigative Consulting

Period of Performance

September 30,

for Task Order:

Start Date:

July 1, 2012

End Date:

2013

Description of Service:

The Contractor shall provide criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local worksite for the Contractor's Employee during this Task Order is the Washington State Fusion Center

(WSFC).

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$50.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C130018PSC.

Maximum Task Order Amount: \$137,000.00

WSP Contact Name and

Captain Randy Drake, (206) 389-2728

Telephone Number:

Contractor Contact Name and

Mr. David Duty, (206) 375-6774

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

John R. Batiste, Chief Date Signature

David J. Karnitz, Deputy Chief

DAVID W. DUTY CONSULTANT

Printed Name and Title

## Washington State Patrol

Date <u>6 1201 12</u>

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Budget and Fiscal Services Contract Notification Form

☐ Billable ove	er \$10,00	00 🗌 Billa	ble under	\$10,000	⊠ Payable	□ c	Other:			
WSP Contract Number Other C130018PSC				ther Contrac	ner Contract Number				nber	
Contract Start 7/1/2012	Date			Contract End   0/30/2017	Date			CFDA No	o. QF	
Contract Title										
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300-365-522 (R 7/09)

		WSP Contract N				
WASHINGTON STATE PA		C130018PSC				
PERSONAL SERVICE CON Criminal Intelligence Analysi		Other Contract I	No.			
This Contract is between the State of W governed by chapter 39.29 RCW.	ashington, Washing	ton State Patrol ar	nd the Contractor	identified below, and is		
CONTRACTOR NAME		Contractor Doing E	Business As (DBA	٨)		
David W. Duty	,	<b>Duty Investigative</b>				
Contractor Address		Statewide Vendor	Registration Num	ber		
4063 56 <sup>th</sup> Ave SW Seattle WA 98116		SWV00				
Contact Name		Contact Telephone	?			
Mr. David Duty						
Contact Fax		Contact E-mail Ad				
		Duty4002@com	cast.net			
W00 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	WSP Contact		A -l-l			
WSP Project Manager Name and Title		WSP Project Man WSP Homeland		nn.		
Captain Randy Drake				JH		
		1519 Alaskan Way So, Bldg 4 Seattle WA 99134				
Telephone	Fax	E-mail Address				
(206) 389-2728	(206) 389-2730	randy.drake@wsp.wa.gov				
WSP Administrative Contact Name and 1	Γitle	WSP Administrative Contact Address				
Mr. Jeff Hugdahl		PO Box 42602				
Grants and Contracts Manager		Olympia WA 98504-2602				
Telephone (200) 500 4050	Fax (200) 500 4077	E-mail Address jeff.hugdahl@wsp.wa.gov				
(360) 596-4052	(360) 596-4077		jen.nugdani@	wsp.wa.gov		
Contract Start Date	Contract End Date		Maximum Cont	ract Amount		
1	September 30, 20					
ATTACHMENTS. When the boxes below				ed to and incorporated		
into this Contract by reference:	•	_		·		
Exhibit A, Statement of Work.						
<ul><li>Exhibit B, General Terms and C</li><li>Additional Exhibits as specified:</li></ul>		or Employoo Nondi	colocuro Agroom	ont.		
This Contract, including the attached						
contains all of the terms and conditions a						
otherwise, regarding the subject matter of	of this Contract shall	be deemed to exis	st or bind the par	ties. The parties signing		
below warrant that they have read and ur	nderstand this Contr	act and have the a	uthority to enter in	nto this Contract.		
FOR THE WASHINGTON STATE PATR	OL:	FOR THE CONT				
WSP Signature	Date	Contractor Signat	ture	Date		
1) 1/2	6-2-9/12	Dandy	Duta	6-23-12		
Printed Name and Title ,	Deputy	Printed Name and	d Title			
John R. Batiste, Chief David J. Kurr	ritz, chief	DAVID W.	NITY	CANCINTAINT		
APPROVED AS TO FOR	0110.			CONSULTANT 120/02		

2/12/02

#### STATEMENT OF WORK

#### 1. Statement of Work.

- a. <u>General</u>. As assigned by WSP, the Contractor Employee(s) identified below shall provide criminal intelligence analyst services at the Location of Work in order to provide the following products:
  - Raw intelligence classification and analysis
  - Daily intelligence briefings
  - Weekly and monthly written intelligence bulletins
  - Periodic intelligence assessments
  - Information dissemination to local law enforcement agencies
  - Effective communication to help others learn, understand and apply specific criminal intelligence analysis principles, techniques or information.
  - Effective identification, collection, organization and documentation of criminal intelligence data and information in ways that make the information most useful for subsequent assessment, analysis and investigation.

Contractor EmployeeLocation of WorkDavid W. DutyWSFC

- b. <u>Task Orders</u>. Work shall be assigned by a negotiated Task Order and must be signed by both parties. Each Task Order must identify the Contractor's Employee assigned to do the work ("Contractor Employees"), the Local Worksite to which the Contractor's Employee will be assigned and a start and end date for work at that location.
- 2. Contractor Qualifications. During the period of performance of this Contract, the Contractor Employee must maintain a federal Top Secret level security clearance.
- **3. Rules of Conduct.** During the period of performance of this Agreement, the Contractor must follow these basic rules of conduct while providing instruction:
  - a. Alcohol and Drug Use. The Contractor shall not consume any alcohol or intoxicating beverage while providing services under this Contract, and will not appear for work while under the influence of alcohol or while having alcohol in their system. The Contractor shall not possess, use, or store alcoholic beverages while at any WSP facility or local worksite. Contractor employees shall not use or possess any narcotic, dangerous drug, or controlled substance except at the direction of a physician, dentist, or other medical authority for medical purposes. If the Contractor is directed by competent medical authority to use a narcotic, dangerous drug, or controlled substance, he/she shall not use such medication to the extent that their performance is affected while at any WSP facility or local worksite.

#### STATEMENT OF WORK (Continued)

- b. <u>Courtesy</u>. The Contractor shall be courteous to WSP staff, other law enforcement partners, and the public. The Contractor shall be tactful in the performance of their duties, shall control their tempers and exercise the utmost patience and discretion, and shall not engage in argumentative discussions. In the performance of their duties, the Contractor shall not use coarse, violent, profane, or insolent language or gestures, and shall not express any prejudice concerning race, religion, sex, politics, national origin, lifestyle, or similar personal characteristics.
- c. <u>Appearance</u>. WSP expects the Contractor to present a professional image when providing services under this Contract. Clothing shall be neat, clean, and in good condition.
- 4. Confidential Information. The Contractor acknowledges that some of the material and information that may come into its possession or knowledge in connection with this Contract or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.17 RCW or other state or federal statutes ("Confidential Information"). Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information. The Contractor agrees to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without WSP's express written consent or as provided by law.

The Contractor agrees to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information. Immediately upon expiration or termination of this Contract, the Contractor shall, at WSP's option: (i) certify to WSP that the Contractor has destroyed all Confidential Information; or (ii) return all Confidential Information to WSP; or (iii) take whatever other steps WSP requires of the Contractor to protect Confidential Information. WSP reserves the right to monitor, audit, or investigate the use of Confidential Information collected, used, or acquired by the Contractor through this Contract.

Contractor Employees working under this Contract shall complete and sign Exhibit C, Contractor Employee Nondisclosure Agreement, attached hereto and incorporated into the Contract herein. Violation of this section by the Contractor may result in termination of this Contract and demand for return of all Confidential Information, monetary damages, or penalties. Furthermore, the Contractor is subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.

**5. Fees.** WSP will reimburse the Contractor a maximum one hundred and seventy-three (173) hours per month at the hourly rate identified below for services provided by the Contractor Employee(s) under this Contract.

Contractor Employee:	7/1/12 -	10/1/13 -	10/1/14 -	10/1/15 -	10/1/16 -	
	9/30/13	9/30/14	9/30/15	9/30/16	9/30/17	
David W. Duty	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00	

#### STATEMENT OF WORK (Continued)

When services are required by WSP at locations other than the local worksite, WSP will reimburse the Contractor for authorized lodging, subsistence and business vehicle mileage costs at current State of Washington approved reimbursement rates. These rates are published in the State Accounting and Administrative Manual (SAAM). This manual is available at the Office of Financial Management's SAAM website: <a href="http://www.ofm.wa.gov/policy/saamintro.htm">http://www.ofm.wa.gov/policy/saamintro.htm</a>

#### 6. Insurance Requirements.

- a. <u>Worker's Compensation Coverage</u>. The Contractor will at all times comply with all applicable workers' compensation, occupational disease, and occupational health and safety laws, statutes, and regulations to the full extent applicable. WSP will not be held responsive in any way for claims filed by the Contractor or their employees for services performed under the terms of this contract.
- b. <u>Business Auto Policy</u>. As applicable, the Contractor shall maintain business auto liability and, if necessary, commercial umbrella liability insurance with a limit not less than \$500,000 per accident. Such insurance shall cover liability arising out of "Any Auto." Business auto coverage shall be written on ISO form CA 00 01, 1990 or later edition, or substitute liability form providing equivalent coverage. The Contractor shall furnish evidence of Business Auto Policy insurance meeting contract requirements at the request of WSP.

#### **GENERAL TERMS AND CONDITIONS**

#### 1. Definitions.

"Contract" means this Personal Service Contract, including all documents attached or incorporated by reference.

"Contractor" means the entity performing services to this Contract and includes the Contractor's owners, members, officers, director, partners, employees and/or agents unless otherwise stated in this Contract. For purposes of any permitted Subcontract, "Contractor" includes any Subcontractor and its owners, members, officers, director, partners, employees and/or agents.

"General Terms and Conditions" means this Exhibit B.

"Statement of Work" means the Special Terms and Conditions of this Contract, which is attached hereto and incorporated herein as Exhibit A.

"Subcontract" means a separate contract between the Contractor and an individual or entity ("Subcontractor") to perform all or a portion of the duties and obligations that the Contractor is obligated to perform pursuant to this Contract.

"RCW" means the Revised Code of Washington. All references in the Contract to RCW chapters or sections shall include any successor, amended or replacement statutes.

"USC" means United States Code. All references in the Contract to USC chapters or sections shall include any successor, amended or replacement statutes.

"WSP" means the State of Washington, Washington State Patrol, and its officers, directors, trustees, employees and/or agents.

- 2. Payment. WSP shall reimburse the Contractor an amount not to exceed the Maximum Contract Amount specified on the Face Sheet of this Contract.
- 3. Billing Procedure. WSP shall reimburse the Contractor according to Exhibit A, Statement of Work, for work performed to the satisfaction of the WSP Project Manager. Compensation for services rendered shall be payable upon receipt of properly completed invoices, which shall be submitted not more often than monthly to the WSP Project Manager. The invoices shall describe and document to WSP's satisfaction a description of the work performed, activities accomplished, the progress of the project, fees and expenses, and WSP's contract number.
- 4. Advance Payments Prohibited. WSP shall not make any payments in advance or anticipation of the delivery of goods or services provided by the Contractor pursuant to this Contract.
- Assignment. The work to be provided under this Contract, and any claim arising thereunder, is not
  assignable or delegable by the Contractor in whole or in part, without the express written consent of
  WSP.
- 6. Attorneys' Fees and Costs. If any litigation is brought to enforce any term, clause, provision or section of this Contract or as a result of this Contract in any way, the prevailing party shall be awarded

its reasonable attorney's fees together with expenses and costs incurred with such litigation, including necessary fees, costs and expenses for services rendered at both trial and appellate levels as well as subsequent to judgement in obtaining execution thereof. In the event that parties to this Contract engage in arbitration, mediation or any other alternative dispute resolution forum to resolve a dispute in lieu of litigation, both parties shall share equally in the cost of the alternative dispute resolution, including the cost of mediation or arbitration services. Each party shall be responsible for their own attorney's fees incurred as a result of the alternative dispute resolution method.

- Compliance with Civil Rights Laws. During the period of performance for this Contract, the Contractor shall comply with all federal and state nondiscrimination laws, including, but not limited to, Title VII of the Civil Rights Act, 42 USC 12101 et seg.; the Americans with Disabilities Act (ADA); and Chapter 49.60 RCW.
- Confidentiality. The Contractor shall not use or disclose any information concerning WSP, or information that may be classified as confidential, to any third party without the written permission of WSP. The Contractor shall destroy or return all such information to the WSP Program Manager at the end of this Contract.
- Contract Execution and Amendments. This Contract shall be binding on WSP only upon signature by the Chief of WSP or designee. WSP and the Contractor may mutually amend this Contract. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind WSP and the Contractor.
- 10. Contractor Certification Regarding Ethics. The Contractor certifies that the Contractor is in compliance with Chapter 42.52 RCW, Ethics in Public Service, and will comply with Chapter 42.52 RCW throughout the term of the Contract.
- 11. Disputes. In the event that a dispute arises under this Contract, it shall be resolved by a Dispute Board in the following manner: The Chief of WSP shall appoint a member to the Dispute Board. The Contractor shall appoint a member to the Dispute Board. The Chief of WSP and the Contractor shall jointly appoint a member to the Dispute Board. The Dispute Board shall evaluate the dispute and make a determination of the dispute. The determination of the Dispute Board shall be final and binding to all parties to this Contract.
- 12. Filing Requirement. This Contract may be required to be filed with the Department of Enterprise (DES). No contract required to be so filed is effective and no work shall be commenced nor payment made until ten (10) business days following the date of filing, and if required, until approved by DES. In the event DES fails to approve the Contract, the Contract shall be null and void.
- 13. Governing Law. This Contract shall be governed in all respects by the laws of the State of Washington. The jurisdiction for any action hereunder shall be the Superior Court for the State of Washington. The venue of any action hereunder shall be in the Superior Court for Thurston County, State of Washington.
- 14. Indemnification. The Contractor shall indemnify, defend and hold harmless WSP from and against all claims arising out of or resulting from the performance of this Contract. The Contractor expressly agrees to indemnify, defend and hold harmless WSP for any claim arising out of or incident to the Contractor's performance or failure to perform this Contract. The Contractor shall be required to indemnify, defend and hold WSP harmless to the extent claim is caused in whole or in part by negligent acts or omissions of the Contractor.

- 15. Independent Capacity. The Contractor acknowledges that the Contractor is an independent contractor, and not an officer, employee or agent of WSP or the State of Washington. The Contractor shall not hold itself out as, nor claim status as, and officer, employee or agent of WSP or the State of Washington. The Contractor shall indemnify and hold WSP harmless from all obligations to pay or withhold federal or state taxes or contributions on behalf of the Contractor or the Contractor's employees unless otherwise specified in this Contract.
- 16. Industrial Insurance Coverage. Prior to performing work under this Contract, the Contractor shall provide or purchase industrial insurance coverage for its employees, as may be required of an "employer" as defined in Title 51 RCW, and shall maintain full compliance with Title 51 RCW during the period of performance for this Contract. WSP shall not be responsible for payment of industrial insurance premiums or for any other claim or benefit for the Contractor, or any subcontractor or employee of the Contractor, which might arise under the industrial insurance laws during the performance of duties and services under this Agreement.
- 17. Insurance. The Contractor shall provide insurance coverage as set out in Exhibit A, Statement of Work. The intent of the required insurance is to protect the State of Washington should there be any claims, suits, actions, costs, damages or expenses arising from any negligent or intentional act or omission of the Contractor or any subcontractor, or agents of either, while performing under the terms of this Contract.
- 18. Inspection; Maintenance of Records. During the term of this Contract and for one year following termination or expiration of this Contract, the Contractor shall give reasonable access to the Contractor's place of business and records to WSP and any other employee or agent of the State of Washington or the United States of America for the purpose of inspecting the Contractor's place of business and its records, and monitoring, auditing and evaluating the Contractor's performance and compliance with applicable laws, regulations, rules and this Contract.

During the term of this Contract and for six years following termination or expiration of this Contract, the Contractor shall maintain records sufficient to document (i) performance of all acts required by statute, regulation, rule, or this Contract; (ii) substantiate the Contractor's statement of its organization's structure, tax status, capabilities and performance; and (iii) demonstrate accounting procedures, practices and records that sufficiently and properly document the Contractor's invoices to WSP and all expenditures made by the Contractor to perform as required by this Contract.

19. Order of Precedence. In the event of any inconsistency in the terms of this Contract, or between its terms and any applicable statute or rule the inconsistency shall be resolved by giving precedence in the following order to:

Applicable federal and state law, regulations and rules; Exhibit A, Statement of Work; Any other provision of this Contract; and Any document incorporated by reference.

- **20. Overpayments to Vendors.** Upon notice of an erroneous payment or overpayment to which the Contractor is not entitled pursuant to this Contract, the Contractor shall promptly refund to WSP the full amount of any such payment or overpayment.
- 21. Personnel. WSP employees performing work under the terms of this Contract (if any) shall be under the direct command and control of the Chief of WSP or designee, and shall perform duties required under this Contract in a manner consistent with WSP policy and regulations, and applicable federal,

- state and local laws. The assignment of WSP personnel under this Contract shall be at the discretion of the Chief of WSP or designee.
- 22. Rights in Data. Unless otherwise provided, data that originates from this Contract shall be "works for hire" as defined by the U.S. Copyright Act of 1976 and shall be owned by WSP. Data shall include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions. Ownership includes the right to copyrights, patent, register, and the ability to transfer these rights.

Material delivered by the Contractor under the terms of this Contract, but which does not originate therefrom, shall be transferred with a nonexclusive, royalty-free irrevocable license to publish, translate, reproduce, deliver, performs, dispose of, and to authorize others to do so, provided that such a license shall be limited to the extent which the Contractor has a right to grant such a license. The Contractor shall exert all reasonable efforts to advise WSP at the time of material delivery of all known or potential invasions of privacy contained therein and of any portion of such material which was not produce in performance of this Contract. WSP shall receive prompt written notice of each notice or claim of copyright infringement received by the Contractor with respect to any material delivered under this Contract. WSP shall have the right to modify or remove any restrictive markings placed upon the data by the Contractor.

- 23. Savings. In the event that funds WSP relied upon to establish this Contract are withdrawn, reduced or limited, or if additional or modified conditions are placed on such funding, WSP may immediately terminate this Contract by providing written notice to the Contractor. This termination shall be effective on the date specified in the notice of termination.
- 24. Severability. If any provision of this Contract or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Contract which can be given effect without the invalid provision, if such remainder conforms to the requirements of applicable law and the fundamental purpose of this Contract, and to this end the provisions of this Contract are declared to be severable.
- **25. Site Security.** While on WSP's premises, the Contractor shall conform in all respects with physical, fire or other security regulations communicated to the Contractor by WSP.
- **26. Statewide Vendor Payment Registration.** The Contractor is required to be registered in the Statewide Vendor Payment System prior to submitting a request for payment under this Contract. The Washington State Office of Financial Management (OFM) maintains the Statewide Vendor Payment System; to obtain registration materials go to <a href="http://www.ofm.wa.gov/isd/vendors.asp">http://www.ofm.wa.gov/isd/vendors.asp</a>.
- 27. Subcontracting. Except as otherwise provided in this Contract, the Contractor may subcontract for any of the services provided under this Contract with the prior, written approval of WSP. The Contractor shall be responsible for the acts and omissions of any subcontractor.
- 28. Survivorship of Provisions. Any terms, conditions and warranties contained in this Contract that by their sense and context are intended to survive performance by the parties to this Contract shall so survive the completion of the period of performance or termination of this Contract.
- 29. Taxes. WSP shall pay sales and use taxes imposed on services provided by the Contractor under this Contract if required by state law. The Contractor shall pay all other taxes, including, but not limited to, Washington State Business and Occupation Tax, taxes based on the Contractor's income, or personal property taxes levied or assessed on the Contractor's personal property to which WSP does not own title.

- **30. Termination for Convenience.** Except as otherwise provided in this Contract, either party may terminate this Contract upon thirty (30) calendar days written notification. If this Contract is so terminated, the terminating party shall be liable only for performance in accordance with the terms of this Contract for performance rendered prior to the effective date of termination.
- 31. Termination for Default. WSP may terminate the Contract for default, in whole or in part, if WSP has a reasonable basis to believe that the Contractor failed to perform under any provision of this Contract; violated any applicable law, regulation, rule or ordinance; or otherwise breached any provision or condition of this Contract.

WSP shall notify the Contractor in writing of the need to take corrective action. If corrective action is not taken within five (5) calendar days, the Contract may be terminated. WSP reserves the right to suspend all or part of the Contract, withhold further payments, or prohibit the Contractor from incurring additional obligations of funds during investigation of the alleged breach and pending corrective action by the Contractor or a decision by WSP to terminate the Contract.

In the event of termination for default, the Contractor shall be liable for damages as authorized by law including, but not limited to, any cost difference between the original contract and the replacement or cover contract, and all administrative costs directly related to procuring the replacement contract. If it is determined that the Contractor was not in default the termination shall be deemed a termination for convenience. The rights and remedies of WSP provided under this Contract are not exclusive and are in addition to any other rights and remedies provided by law.

- **32. Termination Procedure.** The following provisions shall survive and be binding on the parties to this Contract in the event this Contract is terminated.
  - a. The Contractor shall stop work under this Contract on the date specified in the notice of termination, and shall comply with all instructions contained in the notice of termination.
  - b. The Contractor shall deliver to the WSP Project Manager identified on the Face Sheet of this Contract, all WSP property in the Contractor's possession and any WSP property produced under this Contract. The Contractor grants WSP the right to enter upon the Contractor's premises for the sole purpose of recovering any WSP property that the Contractor fails to return within ten (10) calendar days of termination of the Contract. Upon failure to return WSP property within ten (10) calendar days of the Contract termination, the Contractor shall be charged with all reasonable costs of recovery, including transportation and attorney's fees. The Contractor shall protect and preserve any property of WSP that is in the possession of the Contractor pending return to WSP. The Contractor shall provide written certification to WSP that the Contractor has returned all WSP property in the Contractor's possession.
  - c. WSP may direct assignment of the Contractor's rights to and interest in any subcontract or orders placed to WSP. WSP may terminate any subcontract or orders, and settle or pay any or all claims arising out of the termination of such orders and subcontracts.
  - d. WSP shall be liable for and shall pay for only those services authorized and provided through the date of termination. WSP may pay an amount agreed to by the parties for partially completed work and services, if work products are useful to WSP.
  - e. In the event of termination for default, WSP may withhold a sum from the final payment to the Contractor that WSP determines necessary to protect WSP against loss or additional liability.

- 33. Treatment of Assets. Title to all property furnished by WSP to the Contractor under the terms of this Contract shall remain with WSP. Any property furnished by WSP to the Contractor under the terms of this Contract shall be used only for the performance of this Contract. The Contractor shall be responsible for any loss or damage of property provided to the Contractor by WSP resulting from the failure on the part of the Contractor to maintain and administer that property in accordance with sound management practices. Upon the discovery of loss or damage of WSP property, the Contractor shall notify WSP and take all reasonable steps to prevent any further loss or damage. Upon the termination or completion of this Contract the Contractor shall surrender all WSP property to the WSP Project Manager indicated on the Face Sheet of this Contract.
- **34. Waiver.** A failure by WSP to exercise its rights under this Contract shall not preclude WSP from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Contract unless stated to be such in writing and signed by an authorized representative of WSP and attached to the original Contract.

#### CONTRACTOR EMPLOYEE NONDISCLOSURE AGREEMENT

I acknowledge that some of the material and information that may come into my possession or knowledge in connection with Washington State Patrol Contract Number C130018PSC or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.17 RCW or other state or federal statutes ("Confidential Information").

Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information.

I agree to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without the Washington State Patrol's express written consent or as provided by law.

I also agree to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information.

Immediately upon expiration or termination of this Contract or my employment with the Contractor, I shall surrender any and all Confidential Information in my possession to the Vendor for its disposition according to the terms of the Contract.

I understand that I am subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.

Dawdw Duty Signature of Contractor Empl	
Signature of Contractor Empl	loyee
DAVID W. DUTY Printed Name and Title	CONSULTANT
6-23-12	
Date	

## WASHINGTON STATE FUSION CENTER

1110 Third Avenue Seattle, WA 98101



I have been provided with a copy of the Washington State Fusion Center Privacy Policy. I have read and am familiar with the contents, and I understand that I must adhere to this policy when carrying out my WSFC responsibilities at the direction of the WSFC and its representatives, or otherwise acting within the scope of my assigned WSFC duties. I also understand that nothing in this policy is, however, meant to preempt superseding federal or state laws, regulations, or constitutional provisions.

DAVID W. DUTY Name

Date

Signature



# WASHINGTON STATE FUSION CENTER | 1110 Third Avenue | Seattle, WA 98101

I have been provided with a copy of the Washington State Fusion Center Desk manual. I have read, understand and will comply with the materials contained therein as I carry out my duties at the Fusion Center.

DAVID W. DUTY	7-5-12			
Name (please print)	Date			

Samolly Dut

I have received and read a copy of the Access Policy for JBRS.

I understand that JBRS is for criminal justice use only. By accepting the terms of usage, it is agreed that the information obtained through JBRS will only be used to carry out valid, legal, and official law enforcement, public safety, and correctional facility purposes and for no other reason.

The information obtained through JBRS shall not be disclosed to any third party, except when necessary to carry out criminal justice duties. The information obtained shall not be used to discriminate, threaten, or harass any person. Any misuse of this information may result in disciplinary action and/or criminal charges.

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Jail Booking & Reporting System	THE NATIONAL CRIMINAL JUSTICE INSTRUMENTON PORTAL
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Print Name

DAVID W. DUTY

Badge

Date

Dandw Sity Signature

Once you have reviewed the JBRS Access Policy, sign and date this form and e-mail to <u>CommunicationsSupport@wsp.wa.gov</u> or fax to (360) 704-2287 within five business days of receiving your JBRS sign-on.

FORM a19-1a



# STATE OF WASHINGTON

**AGENCY NAME** 

VENDOR OR CLAIMANT (Warrant is to be payable to)

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)

Washington State Patrol

David W. Duty

Online	Hel
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AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.
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INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each

furnished to the State of Washington, and that all goods furnished and/or

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services

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## **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

Period: 10/1/2012

10/1/2012 mm/dd/yr - 10/31/2012

mm/dd/yr

**Ending** 

Name: Duty, David Location: Washington State Fusion Center

	<del></del>			
Mo.	Day		Description of Services Provided	WSP Contract # 130018PSC
10	1	9	Fusion Center Intake Analyst	
10	2	9	Fusion Center Intake Analyst	
10	3	9	Fusion Center Intake Analyst	
10	4	10	Fusion Center Intake Analyst	
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10	26			
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10	28			
10	29		Fusion Center Intake Analyst	
10	30	9	Fusion Center Intake Analyst	
10	31	8	Edsion Center Intake Analyst	
Total	Hours:	173 1	1	

Dandy Duty

10/31/12

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

George Mars

Local Reviewer Name

TIC

1/1/2000142

Local Deviewer Signature/Date

**FORM** A19-1A



ST: \_OF

WASHINGTON

**AGENCY NAME** 

VENDOR OR CLAIMANT (Warrant is to be payable to)

(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

Washington State Patrol

Online Help

This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

AGE	 UOE	ONLY

AGENCY NO.	LOCATION CODE	P.R. OR AUTH, NO

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each

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7/3	31/12	<u> </u> c	Contra	ct Serv	<u>/ice Ho</u>	urs for	<u>#130018</u>	BPSC			1	70	\$50.0	0	\$8,50	00.00		
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## **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 8/1/2012
 8/31/2012

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name:	Duty, David	Location: Washington State Fusion Center

Mo.	Day	Hrs.	Description of Services Provided	WSP Contract # 130018PSC
9	1			
9	2			
9	3			
9	4	9	Fusion Center Intake Analyst	
9	5	9	Fusion Center Intake Analyst	
9	6	10	Fusion Center Intake Analyst	
9	7	9	Fusion Center Intake Analyst	
9	8			
9	9			
9	10	9	Fusion Center Intake Analyst	
9	11	8	Fusion Center Intake Analyst	
9	12			
9	13	9	Fusion Center Intake Analyst	
9	14	9	Fusion Center Intake Analyst	
9	15			
9	16	5	Spokane Conference Travel	
9	17	6	Spokane Conference	
9	18	13	Spokane Conference + Travel	
9	19	9	Fusion Center Intake Analyst	
9	20		Fusion Center Intake Analyst	
9	21	9	Fusion Center Intake Analyst	
9	22			
9	23			<u> </u>
9	24	9	Fusion Center Intake Analyst	
9	25	9	Fusion Center Intake Analyst	
9	26	10	Fusion Center Intake Analyst	
9	27	9	Fusion Center Intake Analyst	
9	28	10	Fusion Center Intake Analyst	
9	29			
9	30			
9	31			
Total	Hours:	170		

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

George R. Mars

Local Reviewer Name

May 9)

1/27/16/24

Local Reviewer Signature/Date

**FORM** A19-1A



## S1. JOF

WASHINGTON

**AGENCY NAME** 

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)

Onli	ne Help
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This document is a protected form for use colline. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

Δ	GF	NC	Y 11	SE	ONLY	

AGENCY NO. LOCATION CODE P.R. OR AUTH. NO.

Wa	Vashington State Patrol										payment for materials, merchandise or services. Show complete detail for each item.								
	VEN	00	R OR	CLAIN	/ANT (	Warrant	is to be	payab	le to)		]								
Du 40 Se	David W. Duty Duty Investigative Consulting 4063 56 <sup>th</sup> Ave SW Seattle, WA. 98116 SWV # 014143300										Vendor's Certificate. I hereby certify under penalty of perjury that the items ar totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.  BY (SIGN IN INK)  Owner / SoleProprietor OWNER								
													(TIT	LE)	1	n	(DA	TE)	-
FEDE	RAL I.D. N	10.0	OR SOCIA	AL SECURI	ITY NO. (Fo	r Reporting P	ersonal Servi	ices Contra	ct Payment	ts to I.R.		NWW/	y J	Ph	pt		_	RECEIVED	
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		Analyst Conference for #130018PSC																	
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9/1	6/12	Spokane -Per Diem - lunch / dinner												\$46.00					
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9/1	7/12	Spokane -Per Diem brkfast/lunch/dinner												\$6	31.00				
9/1	7/12	1	Northe	rn Que	est Hote	el – Lodg	ging					<u> </u>		\$	90.65				
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Guest Name:

Dave Duty

Washington State Fusion Center

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Page No. 1

704 Room #:

Folio #:

R2A56C - 1

Group #:

4411

Guests:

Clerk:

**ARSMITH** 

CL #:

Arrive: 09/16/12

Time: 01:44 PM

Depart: 09/18/12

Time: 03:53 PM

Status: HIST

Date	Description	Reference	Comment	Charges	Credits
09/16/2012	ROOM CHARGE	704		\$87.00	\$0.00
09/16/2012	TOURISM PROMOTION A	704t	TOURISM PROMOTION AREA FEE	\$2.00	\$0.00
09/16/2012	LODGING FEE- AIRWAYS		LODGING FEE, AIRWAY HEIGHTS	\$1.65	\$0.00
09/17/2012	ROOM CHARGE	704		\$87.00	\$0.00
09/17/2012	TOURISM PROMOTION A	704t	TOURISM PROMOTION AREA FEE	\$2.00	\$0.00
09/17/2012	LODGING FEE- AIRWAYS	704t	LODGING FEE, AIRWAY HEIGHTS	\$1.65	\$0.00
09/18/2012	PAY VISA	Ck Out 15:53	*********1466	\$0.00	(\$181.30)

Falia	Dolonoo	\$0.00
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**FORM** A19-1A



### Si. .EOF WASHINGTON

(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

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Online Help
This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

**AGENCY USE ONLY** 

AGENCY NO. LOCATION CODE P.R. OR AUTH. NO.

	AGENCY NAME												<del>-</del>				
Wa	ashin	gto	n Sta	ite Pa	atrol	_	_			INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.							
	VEN	DO	R OR	CLAIN	ANT (V	Varrant	is to be	payab	le to)	1							
David W. Duty Duty Investigative Consulting 4063 56 <sup>th</sup> Ave SW Seattle, WA. 98116 SWV # 014143300							Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.  BY						andise or services nished and/or in because of age, cap, religion, or				
FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.I.								R.S.	REC	EIVED BY	(TITI			DATE F	RECEIVED		
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															<u> </u>		

## Washington State Patrol

## **CONTRACTOR SERVICE HOURS**

	Beginning		Ending				
Period:	7/1/2012	-	7/31/2012				
•	mm/dd/yr	•	mm/dd/yr				

Name:	Duty, David NND	Location: Washington State Fusion Center

Mo.	Day	Hrs.	Description of Services Provided WSP Contract # 130018PSC	
7	1 1			
7	2			
7	3			
7	4			
7	5	5	Fusion Center Intake Analyst	
7	6	9	Fusion Center Intake Analyst	
7	7			
7	8			
7	9	5	Fusion Center Intake Analyst	
7	10	9	Fusion Center Intake Analyst	
7	11	9	Fusion Center Intake Analyst	
7	12	9	Fusion Center Intake Analyst	
7	13	9	Fusion Center Intake Analyst	]
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7	15			
7	16	7	Fusion Center Intake Analyst	
7	17	9	Fusion Center Intake Analyst	
7	18	9	Fusion Center Intake Analyst	
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7	21			
7	22			
7	23	10	Fusion Center Intake Analyst	
7	24	11	Fusion Center Intake Analyst	
7	25			
7	26			
7	27			
7	28			
7	29	40		
7	30	10	Fusion Center Intake Analysi	
	31 Hours:	10 129 4	Eusion Center Intake Affairst	
Liolai	nouis.	129 7		

Contractor Signature/Date

6-1-12

Local Rever Name

Local/Reviewer Signature/Date

8-14.908148

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

# INTERC FICE COMMUNICATION WASHINGTON STATE PATROL

TO: Lieutenant Randy Drake, Investigative Assistance Division

FROM: Mr. Jeff Hugdahl, Budget and Fiscal Services

SUBJECT: WSP Contract No. C090550PSC and Task Order No. 1

**DATE:** January 27, 2009

MSPIAD

Attached is a fully executed copy of the above-listed contract and task order between the Washington State Patrol and Operational Applications, Inc. for Criminal Intelligence Analyst Ms. Kathleena Almquist. Funding for this contract will be encumbered under separate task orders.

Please ensure that the WSP employee preparing payment documents for this contract has a copy of this contract to ensure the payment documents are filled out correctly.

The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above; please use this number on all correspondence and payment documents associated with this contract. If you need further assistance, please contact Ms. Cindy Haider, Budget and Fiscal Services, at Micro 12, ext. 11071.

L+{ JRH:clh 'Attachment

cc:

Ms. Sue Aschenbrenner, Budget Section

Captain Tim Braniff, Investigative Assistance Division

Ms. Tanya Pierce, Accounts Payable Section



## Washington State Patrol

Budget au Fiscal Services Contract Noting ation Form

Date	<u> 1/8/09</u>
LDS	1

☐ Billable over \$10,000 ☐	Rillable un		Payable		Other:	HOIT I OIT				
WSP Contract Number			Other Contract Number				A/R Number			
C090550PSC (1) Contract Start Date JANUARY 15 2009		Contract End D				AFRS E	AFRS End Date			
Contract Title		SEPTEMBER	30, 2009		<del></del>	CFDA N	o. Q	FSR		
Criminal Intelligence Analys	t Services						I	]Yes □No		
Contractor Name						_				
Operational Applications Inc. (Doug Larm)  Contractor Contact Address										
Contractor Contact Address 4227 South Meridian Suite C366, Puyallup WA 98373										
Contractor Contact Name										
Doug Larm		253-226-9564					L			
Contractor E-Mail Address		Contractor Con	tact Fax			BFS Account				
doug.larm@operationalapplica WSP Project Manager	tions.com	WSP Section/D	ivision/Bur			TANYA PIE BFS Budget		20		
LT RANDY DRAKE	·	IAD			4	SUE ASCH	~			
Remarks: TASK ORDER NO.	1. PERIOD	OF PERFORMA	NCE AND	AMOUN	IT IS FOR	THIS TASK	ORDER			
ONLY. REIMBURSES CONT	RACTOR A	THOURLY RATE	OF \$48.0	0 (SFY0	9).					
ONLY. REIMBURSES CONTE										
Contract Amount		Position	Position Signature and Date							
Previous Contract Amount \$	Gra	ants and Contracts	Manager	10ant	May 1	1.1/1	h 19	·		
Amendment Amount \$	Bu	siness Office Mana	iger/							
Revised Total Amount \$79,000	Bu							☐Yes ☐No ☐Yes ☑No		
Indirect Costs%	Acc	counting Manager								
Master Index Fund AI	PI	Project	Sub Object	Major Group	Revenue Major Source	Sub Source	TAR Code	Percent/ Amount		
WAJ8 001 01*	0027	1 WAJ8	CE					100%		
		Billable	Contracts	Only						
Mileage Allowed: Yes	□No					•		Y <del>es</del> □No		
Std Mileage Rate:  Yes	□No				Specia	al Mileage Ra		per mile		
Travel Authorized: Yes	□No					√Volunta	ary O/T:	Yes ∐No		
Special Rules: ☐Yes	□No _	·								
Prorate Leave to Contract:	□Yes [	□No			AF	 RS Code As	signed:	Yes □No		
Overtime Allowed:		No				Only (On D	_	Yes □No		
Contract Pays Only O/T Cost:	Yes [	_ ∐No				rum Call Out	•			
Primary Org Code:										
Type of Receipt: ☐Revenue		Interagency Rei	mburseme	nt	Reco	very of Expe	nditure			

Distribution: ⊠ Project Manager ⊠ Accountant 300-365-522 (R 6/03)

⊠Budget Analyst

**⊠** Other: Captain Braniff

## **WASHINGTON STATE PATROL** Task Order

WSP Contract Number:

C090550PSC

Task Order Number:

1

Contractor: Operational Applications Inc.

Period of Performance

January 15,

September 30,

for Task Order:

Start Date:

2009

End Date:

2009

Description of Service:

The Contractor's Employee (Kathleena Almquist) shall provide criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local worksite for the Contractor's Employee during this Task Order is

the WAJAC.

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$48.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C090550PSC.

Maximum Task Order Amount: \$79,000.00

WSP Contact Name and

Lieutenant Randy Drake, (360) 704-2393

Telephone Number:

Contractor Contact Name and

Mr. Doug Larm, (253) 226-9564

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

Signature Date

DOUG LARM, PRESIDENT Printed Name and Title

Washington State Patrol
Budget and Fiscal Services Contract Notification Form

Date	<u>1/8/09</u>
LDS	7

☐ Billable ov	er \$10,	000 🗌 Bil	lable und	der \$10,000	 ⊠ Payable		Other:					
WSP Contrac C090550PS		er		Other Contrac	t Number			A/R Nun	nber			
Contract Start	Date			Contract End Date				AFRS E	AFRS End Date			
January 152	009	<del></del> -		September 3	30, 2012			CFDA N		QFSR		
Contract Title Criminal Inte	lligen	so Analyst S	arvicas					CFDAIN	1	ursk ∐Yes ∐No		
Contractor Na		e Analyst St	el vices				<del></del> .					
Operational		ations Inc. (	Doug La	arm)								
Contractor Co							_					
4227 South I	Meridi	an Suite C36	6, Puya	allup WA 9837	3							
Contractor Co	ntact N	lame		Contractor Co		)		Contractor E	IN/SSN			
Mr. Doug La		1-1		253-226-956				2EC A	Sarah Naman			
Contractor E-l doug.larm@or			c com	Contractor Co	ntact Fax			BFS Account Fanya Piero				
WSP Project			5.00111	WSP Section/	Division/Bu	eau —		3FS Budget		me		
Lt. Randy Dr				IAD				Sue Ascher	•			
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	tract A	mount		Position	1		$\alpha$	Signature a	Signature and Date			
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Amendment Amount	\$		Bu	siness Office Mar	nager							
Revised Total Amount	\$3	35,000	Bu	Budget Manager			12/09	Unanticipat		t: □Yes □No t: □Yes □No		
Indirect	t Costs	%	Acc	Accounting Manager Accounting Manager			1/12/61					
Master Index	Fund	AI	PI	Project	Sub Object	Major Group	Revenue ( Major Source	Sub Source	TAR Cod	e Percent/ Amount		
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,		=		Billable	e Contracts	Only		<u> </u>				
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Std Mileage	Rate:	□Yes □	No				Specia	I Mileage Ra	ate \$	per mile		
Travel Author	orized:	□Yes □	No					√olunta	ary O/T:	]Yes □No		
Special	Rules:	□Yes □	No _	<del></del>								
			_				· -		_	_		
Prorate Lea				]No				RS Code As	-	]Yes □No		
			Yes	No				Only (On D	•	_Yes		
Contract Pays	•	D/T Cost:	Yes [	]No •••			Minim	um Call Out	Hours:			
Primary Org Co			<u> </u>		ner Org Cod							
Type of Receip	ot:	Revenue		Interagency Re	eimburseme	nt	∐ Reco	very of Expe	nditure			

WASHINGTON STATE P	ATROL	WSP Contract N	<del>10</del> .	
PERSONAL SERVICE CO		C090550PSC		
Criminal Intelligence Analys	st Services	Other Contract N	,	
This Contract is between the State of V governed by chapter 39.29 RCW.	Vashington, Washing	iton State Patrol ar	nd the Contractor ide	entified below, and is
CONTRACTOR NAME		Contractor Doing B	Business As (DBA)	
Operational Applications Inc.				
Contractor Address		Contractor Federal	l Employer Identificati	ion Number
4227 South Meridian Suite C366				
Puyallup WA 98373				
Contact Name		Contact Telephone	<b>;</b>	
Mr. Doug Larm		253-226-9564	<del></del>	
Contact Fax		Contact E-mail Add		
			rationalapplications.	.com
14/OD Designation of Title	WSP Contact		A -1-1	
WSP Project Manager Name and Title	ļ	WSP Project Man		-:
Lieutenant Randy Drake	1		ive Assistance Divis	
Talanhana	Fax	PU BOX 2341, U	Olympia WA 98507- E-mail Address	-2341
Telephone (360) 704-2393	(360) 704-2973	,	randy.drake@ws	WO GOV
WSP Administrative Contact Name and			ive Contact Address	sp.wa.gov
Mr. Jeff Hugdahl	line	PO Box 42602	VE CONTROL Address	
Grants and Contracts Manager	ļ	Olympia WA 98	504_2602	
Telephone	Fax	Olympia 117, 00.	E-mail Address	
(360) 596-4052	(360) 596-4077	,	jeff.hugdahl@ws	en wa nov
(300) 330 -302	1 (000) 000	<del> </del>	Jen.nagaana	sp.vva.gov
Contract Start Date	Contract End Date		Maximum Contract	t Amount
· · · · · · · · · · · · · · · · · · ·	September 30, 201	12	\$335,000	
ATTACHMENTS. When the boxes belo			<u> </u>	o and incorporated
into this Contract by reference:		174 4.0 (2.0)	All the table and a large	,
Exhibit A, Statement of Work.	•			
Exhibit B, General Terms and C			-	
Additional Exhibits as specified:				
This Contract, including the attached				
contains all of the terms and conditions otherwise, regarding the subject matter	agreed upon by the particle of this Contract shall	parties. No other u	inderstandings or rep	Dresentations, oral or
otherwise, regarding the subject matter below warrant that they have read and u				
FOR THE WASHINGTON STATE PATE		FOR THE CONTR		IIIS OUTRIGOL
WSP Signature	Date	Contractor Signat		Date
VVSF Signature		XIII	.uie	,
Jan S. Sechler	1-21-09	11MM	·	12 JAN 2009
Printed Name and Title Paul S. Bec	Key !	Printed Name and		
John R. Batiste, Chief De Oude Ch	ist'	DOUG LARV	M PAESIDENT	

APPROVED AS TO FORM BY THE OFFICE OF THE ATTORNEY GENERAL 2/20/02

#### STATEMENT OF WORK

#### 1. Statement of Work.

- a. <u>General</u>. As assigned by WSP, the Contractor Employee(s) identified below shall provide criminal intelligence analyst services at the Location of Work in order to provide the following products:
  - Raw intelligence classification and analysis
  - Daily intelligence briefings
  - Weekly and monthly written intelligence bulletins
  - Periodic intelligence assessments
  - Information dissemination to local law enforcement agencies
  - Effective communication to help others learn, understand and apply specific criminal intelligence analysis principles, techniques or information.
  - Effective identification, collection, organization and documentation of criminal intelligence data and information in ways that make the information most useful for subsequent assessment, analysis and investigation.

Contractor Employee Location of Work
Kathleena Almquist WAJAC

- b. <u>Task Orders</u>. Work shall be assigned by a negotiated Task Order and must be signed by both parties. Each Task Order must identify the Contractor's Employee assigned to do the work ("Contractor Employees"), the Local Worksite to which the Contractor's Employee will be assigned and a start and end date for work at that location.
- 2. Contractor Qualifications. During the period of performance of this Contract, the Contractor Employee must maintain a federal Top Secret level security clearance.
- **3. Rules of Conduct.** During the period of performance of this Agreement, the Contractor must follow these basic rules of conduct while providing instruction:
  - a. Alcohol and Drug Use. The Contractor shall not consume any alcohol or intoxicating beverage while providing services under this Contract, and will not appear for work while under the influence of alcohol or while having alcohol in their system. The Contractor shall not possess, use, or store alcoholic beverages while at any WSP facility or local worksite. Contractor employees shall not use or possess any narcotic, dangerous drug, or controlled substance except at the direction of a physician, dentist, or other medical authority for medical purposes. If the Contractor is directed by competent medical authority to use a narcotic, dangerous drug, or controlled substance, he/she shall not use such medication to the extent that their performance is affected while at any WSP facility or local worksite.

## TATEMENT OF WORK (Continue)

- b. <u>Courtesy</u>. The Contractor shall be courteous to WSP staff, other law enforcement partners, and the public. The Contractor shall be tactful in the performance of their duties, shall control their tempers and exercise the utmost patience and discretion, and shall not engage in argumentative discussions. In the performance of their duties, the Contractor shall not use coarse, violent, profane, or insolent language or gestures, and shall not express any prejudice concerning race, religion, sex, politics, national origin, lifestyle, or similar personal characteristics.
- c. <u>Appearance</u>. WSP expects the Contractor to present a professional image when providing services under this Contract. Clothing shall be neat, clean, and in good condition.
- 4. Confidential Information. The Contractor acknowledges that some of the material and information that may come into its possession or knowledge in connection with this Contract or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.17 RCW or other state or federal statutes ("Confidential Information"). Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information. The Contractor agrees to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without WSP's express written consent or as provided by law.

The Contractor agrees to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information. Immediately upon expiration or termination of this Contract, the Contractor shall, at WSP's option: (i) certify to WSP that the Contractor has destroyed all Confidential Information; or (ii) return all Confidential Information to WSP; or (iii) take whatever other steps WSP requires of the Contractor to protect Confidential Information. WSP reserves the right to monitor, audit, or investigate the use of Confidential Information collected, used, or acquired by the Contractor through this Contract.

Contractor Employees working under this Contract shall complete and sign Exhibit C, Contractor Employee Nondisclosure Agreement, attached hereto and incorporated into the Contract herein. Violation of this section by the Contractor may result in termination of this Contract and demand for return of all Confidential Information, monetary damages, or penalties. Furthermore, the Contractor is subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.

**5. Fees.** WSP will reimburse the Contractor at the hourly rate identified below for services provided by the Contractor Employee(s) under this Contract.

Contractor Employee	Initial - 9/30/09	10/1/09 - 9/30/10	10/1/10 - 9/30/11	10/1/11 - 9/30/12
Kathleena Almquist	\$48.00	\$50.00	\$52.00	\$54.00

## JTATEMENT OF WORK (Continue)

When services are required by WSP at locations other than the local worksite, WSP will reimburse the Contractor for authorized lodging, subsistence and business vehicle mileage costs at current State of Washington approved reimbursement rates. These rates are published in the State Accounting and Administrative Manual (SAAM). This manual is available at the Office of Financial Management's SAAM website: <a href="http://www.ofm.wa.gov/policy/saamintro.htm">http://www.ofm.wa.gov/policy/saamintro.htm</a>

### 6. Insurance Requirements.

- a. <u>Worker's Compensation Coverage</u>. The Contractor will at all times comply with all applicable workers' compensation, occupational disease, and occupational health and safety laws, statutes, and regulations to the full extent applicable. WSP will not be held responsive in any way for claims filed by the Contractor or their employees for services performed under the terms of this contract.
- b. <u>Business Auto Policy</u>. As applicable, the Contractor shall maintain business auto liability and, if necessary, commercial umbrella liability insurance with a limit not less than \$500,000 per accident. Such insurance shall cover liability arising out of "Any Auto." Business auto coverage shall be written on ISO form CA 00 01, 1990 or later edition, or substitute liability form providing equivalent coverage. The Contractor shall furnish evidence of Business Auto Policy insurance meeting contract requirements at the request of WSP.

#### **GENERAL TERMS AND CONDITIONS**

#### 1. Definitions.

"Contract" means this Personal Service Contract, including all documents attached or incorporated by reference.

"Contractor" means the entity performing services to this Contract and includes the Contractor's owners, members, officers, director, partners, employees and/or agents unless otherwise stated in this Contract. For purposes of any permitted Subcontract, "Contractor" includes any Subcontractor and its owners, members, officers, director, partners, employees and/or agents.

"General Terms and Conditions" means this Exhibit B.

"Statement of Work" means the Special Terms and Conditions of this Contract, which is attached hereto and incorporated herein as Exhibit A.

"Subcontract" means a separate contract between the Contractor and an individual or entity ("Subcontractor") to perform all or a portion of the duties and obligations that the Contractor is obligated to perform pursuant to this Contract.

"RCW" means the Revised Code of Washington. All references in the Contract to RCW chapters or sections shall include any successor, amended or replacement statutes.

"USC" means United States Code. All references in the Contract to USC chapters or sections shall include any successor, amended or replacement statutes.

"WSP" means the State of Washington, Washington State Patrol, and its officers, directors, trustees, employees and/or agents.

- 2. Payment. WSP shall reimburse the Contractor an amount not to exceed the Maximum Contract Amount specified on the Face Sheet of this Contract.
- 3. Billing Procedure. WSP shall reimburse the Contractor according to Exhibit A, Statement of Work, for work performed to the satisfaction of the WSP Project Manager. Compensation for services rendered shall be payable upon receipt of properly completed invoices, which shall be submitted not more often than monthly to the WSP Project Manager. The invoices shall describe and document to WSP's satisfaction a description of the work performed, activities accomplished, the progress of the project, fees and expenses, and WSP's contract number.
- 4. Advance Payments Prohibited. WSP shall not make any payments in advance or anticipation of the delivery of goods or services provided by the Contractor pursuant to this Contract.
- Assignment. The work to be provided under this Contract, and any claim arising thereunder, is not assignable or delegable by the Contractor in whole or in part, without the express written consent of WSP.
- 6. Attorneys' Fees and Costs. If any litigation is brought to enforce any term, clause, provision or section of this Contract or as a result of this Contract in any way, the prevailing party shall be awarded

its reasonable attorney's fees together with expenses and costs incurred with such litigation, including necessary fees, costs and expenses for services rendered at both trial and appellate levels as well as subsequent to judgement in obtaining execution thereof. In the event that parties to this Contract engage in arbitration, mediation or any other alternative dispute resolution forum to resolve a dispute in lieu of litigation, both parties shall share equally in the cost of the alternative dispute resolution, including the cost of mediation or arbitration services. Each party shall be responsible for their own attorney's fees incurred as a result of the alternative dispute resolution method.

- 7. Compliance with Civil Rights Laws. During the period of performance for this Contract, the Contractor shall comply with all federal and state nondiscrimination laws, including, but not limited to, Title VII of the Civil Rights Act, 42 USC 12101 et seq.; the Americans with Disabilities Act (ADA); and Chapter 49.60 RCW.
- 8. Confidentiality. The Contractor shall not use or disclose any information concerning WSP, or information that may be classified as confidential, to any third party without the written permission of WSP. The Contractor shall destroy or return all such information to the WSP Program Manager at the end of this Contract.
- 9. Contract Execution and Amendments. This Contract shall be binding on WSP only upon signature by the Chief of WSP or designee. WSP and the Contractor may mutually amend this Contract. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind WSP and the Contractor.
- 10. Contractor Certification Regarding Ethics. The Contractor certifies that the Contractor is in compliance with Chapter 42.52 RCW, Ethics in Public Service, and will comply with Chapter 42.52 RCW throughout the term of the Contract.
- 11. **Disputes.** In the event that a dispute arises under this Contract, it shall be resolved by a Dispute Board in the following manner: The Chief of WSP shall appoint a member to the Dispute Board. The Contractor shall appoint a member to the Dispute Board. The Chief of WSP and the Contractor shall jointly appoint a member to the Dispute Board. The Dispute Board shall evaluate the dispute and make a determination of the dispute. The determination of the Dispute Board shall be final and binding to all parties to this Contract.
- 12. Governing Law. This Contract shall be governed in all respects by the laws of the State of Washington. The jurisdiction for any action hereunder shall be the Superior Court for the State of Washington. The venue of any action hereunder shall be in the Superior Court for Thurston County, State of Washington.
- 13. Indemnification. The Contractor shall indemnify, defend and hold harmless WSP from and against all claims arising out of or resulting from the performance of this Contract. The Contractor expressly agrees to indemnify, defend and hold harmless WSP for any claim arising out of or incident to the Contractor's performance or failure to perform this Contract. The Contractor shall be required to indemnify, defend and hold WSP harmless to the extent claim is caused in whole or in part by negligent acts or omissions of the Contractor.
- 14. Independent Capacity. The Contractor acknowledges that the Contractor is an independent contractor, and not an officer, employee or agent of WSP or the State of Washington. The Contractor shall not hold itself out as, nor claim status as, and officer, employee or agent of WSP or the State of Washington. The Contractor shall indemnify and hold WSP harmless from all obligations to pay or withhold federal or state taxes or contributions on behalf of the Contractor or the Contractor's employees unless otherwise specified in this Contract.

- 15. Industrial Insurance Coverage. Prior to performing work under this Contract, the Contractor shall provide or purchase industrial insurance coverage for its employees, as may be required of an "employer" as defined in Title 51 RCW, and shall maintain full compliance with Title 51 RCW during the period of performance for this Contract. WSP shall not be responsible for payment of industrial insurance premiums or for any other claim or benefit for the Contractor, or any subcontractor or employee of the Contractor, which might arise under the industrial insurance laws during the performance of duties and services under this Agreement.
- 16. Insurance. The Contractor shall provide insurance coverage as set out in Exhibit A, Statement of Work. The intent of the required insurance is to protect the State of Washington should there be any claims, suits, actions, costs, damages or expenses arising from any negligent or intentional act or omission of the Contractor or any subcontractor, or agents of either, while performing under the terms of this Contract.
- 17. Inspection; Maintenance of Records. During the term of this Contract and for one year following termination or expiration of this Contract, the Contractor shall give reasonable access to the Contractor's place of business and records to WSP and any other employee or agent of the State of Washington or the United States of America for the purpose of inspecting the Contractor's place of business and its records, and monitoring, auditing and evaluating the Contractor's performance and compliance with applicable laws, regulations, rules and this Contract.

During the term of this Contract and for six years following termination or expiration of this Contract, the Contractor shall maintain records sufficient to document (i) performance of all acts required by statute, regulation, rule, or this Contract; (ii) substantiate the Contractor's statement of its organization's structure, tax status, capabilities and performance; and (iii) demonstrate accounting procedures, practices and records that sufficiently and properly document the Contractor's invoices to WSP and all expenditures made by the Contractor to perform as required by this Contract.

**18. Order of Precedence.** In the event of any inconsistency in the terms of this Contract, or between its terms and any applicable statute or rule the inconsistency shall be resolved by giving precedence in the following order to:

Applicable federal and state law, regulations and rules; Exhibit A, Statement of Work; Any other provision of this Contract; and Any document incorporated by reference.

- 19. Overpayments to Vendors. Upon notice of an erroneous payment or overpayment to which the Contractor is not entitled pursuant to this Contract, the Contractor shall promptly refund to WSP the full amount of any such payment or overpayment.
- 20. Personnel. WSP employees performing work under the terms of this Contract (if any) shall be under the direct command and control of the Chief of WSP or designee, and shall perform duties required under this Contract in a manner consistent with WSP policy and regulations, and applicable federal, state and local laws. The assignment of WSP personnel under this Contract shall be at the discretion of the Chief of WSP or designee.

21. Rights in Data. Unless otherwise provided, data that originates from this Contract shall be "works for hire" as defined by the U.S. Copyright Act of 1976 and shall be owned by WSP. Data shall include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions. Ownership includes the right to copyrights, patent, register, and the ability to transfer these rights.

Material delivered by the Contractor under the terms of this Contract, but which does not originate therefrom, shall be transferred with a nonexclusive, royalty-free irrevocable license to publish, translate, reproduce, deliver, performs, dispose of, and to authorize others to do so, provided that such a license shall be limited to the extent which the Contractor has a right to grant such a license. The Contractor shall exert all reasonable efforts to advise WSP at the time of material delivery of all known or potential invasions of privacy contained therein and of any portion of such material which was not produce in performance of this Contract. WSP shall receive prompt written notice of each notice or claim of copyright infringement received by the Contractor with respect to any material delivered under this Contract. WSP shall have the right to modify or remove any restrictive markings placed upon the data by the Contractor.

- **22. Savings.** In the event that funds WSP relied upon to establish this Contract are withdrawn, reduced or limited, or if additional or modified conditions are placed on such funding, WSP may immediately terminate this Contract by providing written notice to the Contractor. This termination shall be effective on the date specified in the notice of termination.
- 23. Severability. If any provision of this Contract or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Contract which can be given effect without the invalid provision, if such remainder conforms to the requirements of applicable law and the fundamental purpose of this Contract, and to this end the provisions of this Contract are declared to be severable.
- **24. Site Security.** While on WSP's premises, the Contractor shall conform in all respects with physical, fire or other security regulations communicated to the Contractor by WSP.
- **25. Subcontracting.** Except as otherwise provided in this Contract, the Contractor may subcontract for any of the services provided under this Contract with the prior, written approval of WSP. The Contractor shall be responsible for the acts and omissions of any subcontractor.
- **26. Survivorship of Provisions.** Any terms, conditions and warranties contained in this Contract that by their sense and context are intended to survive performance by the parties to this Contract shall so survive the completion of the period of performance or termination of this Contract.
- 27. Taxes. WSP shall pay sales and use taxes imposed on services provided by the Contractor under this Contract if required by state law. The Contractor shall pay all other taxes, including, but not limited to, Washington State Business and Occupation Tax, taxes based on the Contractor's income, or personal property taxes levied or assessed on the Contractor's personal property to which WSP does not own title.
- 28. Termination for Convenience. Except as otherwise provided in this Contract, either party may terminate this Contract upon thirty (30) calendar days written notification. If this Contract is so terminated, the terminating party shall be liable only for performance in accordance with the terms of this Contract for performance rendered prior to the effective date of termination.

29. Termination for Default. WSP may terminate the Contract for default, in whole or in part, if WSP has a reasonable basis to believe that the Contractor failed to perform under any provision of this Contract; violated any applicable law, regulation, rule or ordinance; or otherwise breached any provision or condition of this Contract.

WSP shall notify the Contractor in writing of the need to take corrective action. If corrective action is not taken within five (5) calendar days, the Contract may be terminated. WSP reserves the right to suspend all or part of the Contract, withhold further payments, or prohibit the Contractor from incurring additional obligations of funds during investigation of the alleged breach and pending corrective action by the Contractor or a decision by WSP to terminate the Contract.

In the event of termination for default, the Contractor shall be liable for damages as authorized by law including, but not limited to, any cost difference between the original contract and the replacement or cover contract, and all administrative costs directly related to procuring the replacement contract. If it is determined that the Contractor was not in default the termination shall be deemed a termination for convenience. The rights and remedies of WSP provided under this Contract are not exclusive and are in addition to any other rights and remedies provided by law.

- **30. Termination Procedure.** The following provisions shall survive and be binding on the parties to this Contract in the event this Contract is terminated.
  - a. The Contractor shall stop work under this Contract on the date specified in the notice of termination, and shall comply with all instructions contained in the notice of termination.
  - b. The Contractor shall deliver to the WSP Project Manager identified on the Face Sheet of this Contract, all WSP property in the Contractor's possession and any WSP property produced under this Contract. The Contractor grants WSP the right to enter upon the Contractor's premises for the sole purpose of recovering any WSP property that the Contractor fails to return within ten (10) calendar days of termination of the Contract. Upon failure to return WSP property within ten (10) calendar days of the Contract termination, the Contractor shall be charged with all reasonable costs of recovery, including transportation and attorney's fees. The Contractor shall protect and preserve any property of WSP that is in the possession of the Contractor pending return to WSP. The Contractor shall provide written certification to WSP that the Contractor has returned all WSP property in the Contractor's possession.
  - c. WSP may direct assignment of the Contractor's rights to and interest in any subcontract or orders placed to WSP. WSP may terminate any subcontract or orders, and settle or pay any or all claims arising out of the termination of such orders and subcontracts.
  - d. WSP shall be liable for and shall pay for only those services authorized and provided through the date of termination. WSP may pay an amount agreed to by the parties for partially completed work and services, if work products are useful to WSP.
  - e. In the event of termination for default, WSP may withhold a sum from the final payment to the Contractor that WSP determines necessary to protect WSP against loss or additional liability.

- 31. Treatment of Assets. Title to all property furnished by WSP to the Contractor under the terms of this Contract shall remain with WSP. Any property furnished by WSP to the Contractor under the terms of this Contract shall be used only for the performance of this Contract. The Contractor shall be responsible for any loss or damage of property provided to the Contractor by WSP resulting from the failure on the part of the Contractor to maintain and administer that property in accordance with sound management practices. Upon the discovery of loss or damage of WSP property, the Contractor shall notify WSP and take all reasonable steps to prevent any further loss or damage. upon the termination or completion of this Contract the Contractor shall surrender all WSP property to the WSP Project Manager indicated on the Face Sheet of this Contract.
- **32. Waiver.** A failure by WSP to exercise its rights under this Contract shall not preclude WSP from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Contract unless stated to be such in writing and signed by an authorized representative of WSP and attached to the original Contract.

## CONTRACTOR EMPLOYEE NONDISCLOSURE AGREEMENT

I acknowledge that some of the material and information that may come into my possession or knowledge in connection with Washington State Patrol Contract Number (Contract) or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.56 RCW or other state or federal statutes ("Confidential Information").
Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information.
I agree to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without the Washington State Patrol's express written consent or as provided by law.
I also agree to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information.
Immediately upon expiration or termination of this Contract or my employment with the Contractor, I shall surrender any and all Confidential Information in my possession to the Vendor for its disposition according to the terms of the Contract.
I understand that I am subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.
Signature of Contractor Employee
Kathleena Almourst / Intelligence Analyst Printed Name and Title
15 Danvary 2009  Date

Exhibit F, Sample Contract WSP RFQQ No. \_\_\_\_\_

	CERTIFICATE OF RELEASE OR	DISCHARGE FRO	M ACTIVE DI	JTY		
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	SPECIAL ADDITIONAL INFORMAT	TION (For use by authoriz	ed agencies only)	·		
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NONE

(Initials) KMA



#### U.S. Department of Justice

## Federal Bureau of Investigation

1110 Third Avenue Seattle, Washington 98101

May 10, 2010

Lieutenant Randy Drake Director Washington State Fusion Center 1110 3rd Avenue Seattle, Washington 98101-2930

Dear Lieutenant Drake

On behalf of the Federal Bureau of Investigation, I would like to personally thank you for your support, and the support of the Washington State Fusion Center, prior to and during the recent 2010 Vancouver Winter Olympic Games.

In particular, the contributions of Kathleena Almquist and Bill Evans were instrumental in ensuring a safe and secure Games and Northwest Border Region.

Mr. Evans and Ms. Almquist were key members of the team that drafted the Joint Special Event Threat Assessment (JSETA) for the Games -- a product that set the standard for thorough interagency collaboration, rigorous analytical tradecraft, and complete intelligence sharing.

Throughout their interaction with the Seattle Division, Mr. Evans and Ms. Almquist proved to be consummate and committed professionals who brought great credit upon themselves, the Washington State Fusion Center, and the United States of America.

Sincerely,

Laura M. Laughlin

Special Agent-in-Charge

Shua m Laughlin

s-1A (Rev. 3/95)



#### STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	<del></del>	
AGENCY NO	LOCATION CODE	P.R. OR	AUTH, NO.
225	341009/34107	·	

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		tance Division
~ ~ ~ ~		•

PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

13405 159 <sup>th</sup> Street Court East Puyallup, Washington 98374  FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)												
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## **Washington State Patrol CONTRACTOR SERVICE HOURS**

Beginning Period: 3/1/2009 3/31/2009 mm/dd/yr mm/dd/yr

Name	₽:	Konth	eeno Almanist Location: 110 500 Ave Seattle, WA 98101
Mo.	Day		Description of Services Provided
Mar	1	0	Regular Day Off
Mar	2	9	Analyst, WSP, WSFC
Mar	3		Analyst, WSP, WSFC
Mar	4		Analyst, WSP, WSFC
Mar	5		Analyst, WSP, WSFC
Mar	6		Reserve Duty
Mar	7		Regular Day Off
Mar	8		Regular Day Off
Mar	9		Analyst, WSP, WSFC
Mar	10		Analyst, WSP, WSFC
Mar	11		Analyst, WSP, WSFC
Mar	12		Analyst, WSP, WSFC
Mar	13		Analyst, WSP, WSFC
Mar	14		Regular Day Off
Mar	15		Regular Day Off
Mar	16		Analyst, WSP, WSFC
Mar	17		Analyst, WSP, WSFC
Mar	18		Analyst, WSP, WSFC
Mar	19		Analyst, WSP, WSFC
Mar	20		Analyst, WSP, WSFC
Mar	21		Regular Day Off
Mar	22		Regular Day Off
Mar	23		Analyst, WSP, WSFC
Mar	24		Analyst, WSP, WSFC
Mar	25		Analyst, WSP, WSFC
Mar	26		Analyst, WSP, WSFC
Mar	27	0	Requested Personal Time Off
Mar	28	0	Regular Day Off
Mar	29	0	Regular Day Off
Mar	30		Analyst, WSP, WSFC
Mar	31	11	Analyst, WSP, WSFC
lotal	Hours:	165	

31 Mar 2009

Local Reviewer Name

## **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

**Beginning** Period:

3/1/2009 mm/dd/yr

**Ending** 3/31/2009 mm/dd/yr

lame:	Kathleeno	Almanet	Location:	1110	300	AVE	Seattle, WA	98101	
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Mo.	Day	Hrs.	Description of Services Provided
Mar	1	0	Regular Day Off
Mar	2	9	Analyst, WSP, WSFC
Mar	3		Analyst, WSP, WSFC
Mar	4	9.5	Analyst, WSP, WSFC
Mar	5	9	Analyst, WSP, WSFC
Mar	6	0	Reserve Duty ,
Mar	7	0	Regular Day Off
Mar	8	0	Regular Day Off
Mar	9	9.5	Analyst, WSP, WSFC
Mar	10		Analyst, WSP, WSFC
Mar	11		Analyst, WSP, WSFC
Mar	12		Analyst, WSP, WSFC
Mar	13	9	Analyst, WSP, WSFC
Mar	14		Regular Day Off
Mar	15		Regular Day Off
Mar	16		Analyst, WSP, WSFC
Mar	17		Analyst, WSP, WSFC
Mar	18		Analyst, WSP, WSFC
Mar	19	5	Analyst, WSP, WSFC
Mar	20		Analyst, WSP, WSFC
Mar	21		Regular Day Off
Mar	22		Regular Day Off
Mar	23		Analyst, WSP, WSFC
Mar	24		Analyst, WSP, WSFC
Mar	25		Analyst, WSP, WSFC
Mar	26		Analyst, WSP, WSFC
Mar	27		Requested Personal Time Off
Mar	28		Regular Day Off
Mar	29		Regular Day Off
Mar	30		Analyst, WSP, WSFC
Mar	31		Analyst, WSP, WSFC
Total	Hours:	165	

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

31 Mar 2009

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

FORM A19-1A (Rev. 3/95)

DATE

1-28 Feb09



## STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

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Inve	stigati	ive Ass	istance Division		
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Olyr	npia, \	<i>N</i> A 98	507-2347		
1.5	VEND	OR OR	CLAIMANT (Warrant	is to be paya	ble to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Analytical services for Feb 09 (Kath. Almquist)

Services performed under C090550PSC

DESCRIPTION

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

President Operational Applications Inc.
(DATE)

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UNIT PRICE

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DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-28 Feb 09

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FORM A19-1A (Rev. 3/95)



## STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

Washington State Patrol
Investigative Assistance Division
PO Box 2347
Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY (SIGN IN INK)

rational Applications Inc.
(TITLE)
(DATE)

1-31 Jan 09

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## INTEL OFFICE COMMUNICATION

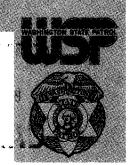
## Washington State Patrol

TO: Lieutenant Randy Drake, Investigative Assistance Division

FROM: Mr. Jeff Hugdahl, Budget and Fiscal Services

**SUBJECT:** Task Order 2 to WSP Contract No. C090433PSC & C09055QPSC

DATE: November 20, 2009



Attached are two fully executed copies of the above-listed task orders between the Washington State Patrol and Operational Applications Inc. Funding for these task orders have been encumbered under the budget code listed on the attached <u>Budget and Fiscal Services Contract Notification Forms</u>. Please take the following steps to ensure the correct payment of these task orders:

- If you feel the indicated budget code is incorrect, please contact me within fifteen days from the date of this IOC.
- Please ensure that the WSP employee preparing payment documents for these task orders has a copy of these task orders to ensure the payment documents are filled out correctly.
- The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above. Please ensure that all persons preparing payment documents for these contracts reference the WSP Contract Number and use the indicated budget code on all payment documents.
- The final payment document for the contract must be marked "Final Payment" so the Accounts Payable Section can liquidate the remaining encumbrance balance for this contract.
- If the contract period of performance crosses fiscal year boundaries, please work with your assigned budget analyst to address any fiscal year end balances.

Please contact Ms. Cindy Haider at Micro 12, ext. 11071 if you have any questions or concerns regarding these task orders.

JRH:clh

Attachment

cc: Captain Tim Braniff, Investigative Services Division

Ms. Tanya Pierce, Budget and Fiscal Services

Ms. Melissa Stricklett, Budget and Fiscal Services



## Date <u>11/2/09</u>

Washington State Patrol

Budget and Fiscal Services Contract Nourication Form LDS \_\_/\_

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Contractor Co						<u> </u>							
4227 South	Mer	idian	Suite C366	S. Puva	aulla	WA 98373							
	Contractor Contact Name Contractor Contact Phone Contractor EIN/SSN												
Doug Larm					253	3-226-9564			11		i		
Contractor E-l	ess		Cor	ntractor Cont	tact Fax			BFS Account	tant Nam	е			
doug.larm@operationalapplications.com TANYA PIERCE													
WSP Project Manager						P Section/D	ivision/Bur	eau		BFS,Budget		lame	
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Distribution: ☐ Project Manager 300-365-522 (R 6/03)

⊠Budget Analyst

## **WASHINGTON STATE PATROL** Task Order

WSP Contract Number:

C090550PSC

Task Order Number:

Contractor: Operational Applications Inc.

Period of Performance

October 1,

September 30,

for Task Order:

Start Date:

2009

End Date:

2010

Description of Service:

The Contractor's Employee (Kathleena Almquist) shall provide criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local worksite for the Contractor's Employee during this Task Order is

the WAJAC.

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$50.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C090550PSC.

Maximum Task Order Amount: \$109,000.00

WSP Contact Name and

Lieutenant Randy Drake, (360) 704-2393

Telephone Number:

Contractor Contact Name and

Mr. Doug Larm, (253) 226-9564

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

John R. Batiste, Chief Date

Washington State Patrol

Budger and Fiscal Services Contract Nonfication Form

Date	<u>11/2/09</u>
LDS	

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Operational.			(Doug	Larm)								
Contractor Co	ontact	Address										
	4227 South Meridian Suite C366, Puyallup WA 98373											
	Contractor Contact Name Contractor Contact Phone Contractor EIN/SSN											
Doug Larm Contractor E-l	Mail A	ddroee			-226-9564 tractor Cont	act Eav			BFS Account	ant Name		
doug.larm@o			ons.com	Com	iractor Cont	actiax			TANYA PIE			
WSP Project I				WSF	P Section/D	ivision/Bur	eau		BFS Budget		me	
LT RANDY [	LT RANDY DRAKE IAD Shales .											
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## **WASHINGTON STATE PATROL** Task Order

WSP Contract Number:

C090433PSC

Task Order Number:

2

Contractor: Operational Applications Inc.

Period of Performance

October 1,

September 30,

for Task Order:

Start Date:

2009

End Date:

2010

Description of Service:

The Contractor's Employee (Bill Evans) shall provide lead criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local worksite for the Contractor's Employee during this Task Order is

the WAJAC.

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$63.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C090433PSC.

Maximum Task Order Amount: \$138,000.00

WSP Contact Name and

Telephone Number:

Lieutenant Randy Drake, (360) 704-2393

Contractor Contact Name and

Mr. Doug Larm, (253) 226-9564

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

# INTERG FICE COMMUNICATI V WASHINGTON STATE PATROL

TO: Lieutenant Randy Drake, Investigative Assistance Division

FROM: Mr. Jeffrey Hugdahl, Budget and Fiscal Services

**SUBJECT:** Amendment 2 to WSP Contract No. C090433PSC

**DATE:** January 28, 2009

MSPIAT

194 29

Attached is a fully executed copy of the above-listed amendment between the Washington State Patrol and Operational Applications Inc, Lead Criminal Intelligence Analyst Bill Evans.

The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above; please use this number on all correspondence associated with this contract. If you need further assistance, please contact Ms. Cindy Haider, Budget and Fiscal Services, at Micro 12, ext. 11071.

JAH:clh

Attachment

cc: Ms. Sue Aschenbrenner, Budget and Fiscal Services

Ms. Tanya Pierce, Budget and Fiscal Services

Washington State Patrol

Budget and Fiscal Services Contract Notification Form

Date	1/22/0	9	
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WSP Contract Number Other Contract Number A/R Number C090433PSC (2)											
Contract Start Date Contract End Date AFRS End Date  January 20, 2009 September 30, 2012											
		9			September 3	0, 2012					
Contract Title									CFDA N	1	SR
Lead Crimin		ntellig	ence Analy	<u>/st Ser</u>	vices					\ <u>\</u>	′es □No
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	Operational Applications Inc.										
	Contractor Contact Address 227 South Meridian Suite C366, Puyallup WA 98373										
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Mr. Doug La											
	Contractor E-Mail Address Contractor Contact Fax BFS Accountant Name										
doug.larm@o	pera	ationa	lapplications	.com					Tanya Piero		
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Special	Kui	es:	∐Yes ∐t	40 <u> </u>							
Decreta I	Prorate Leave to Contract:										
			<u>=</u>	_	]No						
	Overtime Allowed: ☐Yes ☐No Overtime Only (On Day Off): ☐Yes ☐No Minimum Call Out Hours:										
•		-	COST	res L	]No	or Ora Cad	00:	IVIIIIII	num Call Out	. mours:	
Primary Org C	_					er Org Cod					
Type of Receip	ot:	∐R	evenue	<u> </u>	Interagency Re	imburseme	nt	∐ Reco	overy of Expe	nditure	

Distribution: Project Manager 300-365-522 (R 6/03)

⊠Budget Analyst

# WASHINGTON STATE PATROL CONTRACT AMENDMENT

The above-referenced Contract between the Washington State Patrol and Operational Applications Inc. is hereby amended as follows:

Paragraph 5. Fees is revised and replaced by the following:

WSP will reimburse the Contractor at the hourly rate identified below for services provided by the Contractor Employee(s) under this Contract.

 Contractor Employee Initial - 9/30/09
 10/1/09 - 9/30/10
 10/1/10 - 9/30/11
 10/1/11 - 9/30/12

 Bill Evans
 \$60.00
 \$63.00
 \$66.00
 \$69.00

When services are required by WSP at locations other than the local worksite, WSP will reimburse the Contractor for authorized lodging, subsistence and business vehicle mileage costs at current State of Washington approved reimbursement rates. These rates are published in the State Accounting and Administrative Manual (SAAM). This manual is available at the Office of Financial Management's SAAM website: http://www.ofm.wa.gov/policy/saamintro.htm

This Amendment takes effect on January 20, 2008.

All other terms and conditions of this Contract remain in full force and in effect.

THIS AMENDMENT is executed by the persons signing below, who warrant that they have the authority to execute this Amendment.

STATE OF WASHINGTON WASHINGTON STATE PATROL

OPERATIONAL APPLICATIONS INC.

1-23-09

John R. Batiste, Chief

Date

Date



## U.S. Department of Justice

## **Federal Bureau of Investigation**

1110 Third Avenue Seattle, Washington 98101

May 10, 2010

Lieutenant Randy Drake Director Washington State Fusion Center 1110 3rd Avenue Seattle, Washington 98101-2930

Dear Lieutenant Drake:

On behalf of the Federal Bureau of Investigation, I would like to personally thank you for your support, and the support of the Washington State Fusion Center, prior to and during the recent 2010 Vancouver Winter Olympic Games.

In particular, the contributions of Kathleena Almquist and Bill Evans were instrumental in ensuring a safe and secure Games and Northwest Border Region.

Mr. Evans and Ms. Almquist were key members of the team that drafted the Joint Special Event Threat Assessment (JSETA) for the Games -- a product that set the standard for thorough interagency collaboration, rigorous analytical tradecraft, and complete intelligence sharing.

Throughout their interaction with the Seattle Division, Mr. Evans and Ms. Almquist proved to be consummate and committed professionals who brought great credit upon themselves, the Washington State Fusion Center, and the United States of America.

Sincerely,

Laura M. Laughlin Special Agent-in-Charge

Dama In Daughlin

CERTIFICATE OF RELEAS	E OR D	ISCHARGE FR	ОМ АС	TIVE D	UTY	
1. NAME (Last, First, Middle)	2. DEPART	MENT, COMPONENT AN	BRANCH	3.	SOCIAL SEC	URITY NO.
EVANS, WILLIAM EUGENE	ARMY/RA/	MI		8		
4.a GRADE, RATE, OR HANK 4.b PAY GRADE		5. DATE OF BIRTH /YY	YYMMDD)	6. RESERVI	OBLIG. TER	M. DATE
CPT 03					Month 00	
7.a PLACE OF ENTRY INTO ACTIVE DUTY		7.b HOME OF RECORD address if known)	AT TIME OF	ENTRY (City	and state, or	complete
GREENVILLE, SC						
8.a LAST DUTY ASSIGNMENT AND MAJOR COMMAND		8.b STATION WHERE S				
W4VY TNG AND DOC SPT DET AS		FORT HUACHUCA, A	AZ 8561			<del>, , ,</del>
9. COMMAND TO WHICH TRANSFERRED				10. SGLI CO		None
368 MI CO A HUMINT TM BLDG 9537 FORT L				<u> </u>	\$200,00	
11. PRIMARY SPECIALTY (List number, title and years and a specialty. List additional specialty numbers and titles inv		12. RECORD OF SERVICE		Year(s)	Month(s)	Day(s)
periods of one or more years.		a. Date entered AD This		1985	10	05
35D 00 TACTICAL INTEL1 YRS-9 MOS//11 INFANTRY3 YRS-7 MOS//35E COUNTER INT	B LIGHT	b. Separation Date This		1998	03	01
(CI)7 YRS-0 MOS//NOTHING FOLLOWS		c. Net Active Service Th		0012	04	27
,,,		d. Total Prior Active Ser		0000	00	0.0
		e. Total Prior Inactive Se	ervice .	0000	04	18
		f. Foreign Service		0002	11	29
		g. Sea Service		0000	00	. 00
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND C		h. Effective Date of Pay		1990	05	01
//NOTHING FOLLOWS  14. MILITARY EDUCATION (Course title, number of weeks at COMBINED ARMS AND SERVICES STAFF SCHOOL COURSE, 2 WEEKS, 1991//COUNTERINTELLIG INTELLIGENCE OFFICER ADVANCE COURSE, 2 COURSE, 8 WEEKS, 1990//INFANTRY OFFICE	L, 8 WEE ENCE OFF 0 WEEKS.	KKS, 1991//INTELI FICER COURSE, 8 V 1991//MILITARY	WEEKS, 1: INTELLI	991//MIL: GENCE OF	ITARY FICER TRA	ANSITION
15.a MEMBER CONTRIBUTED TO POST-VIETNAM ERA Yes No.	15.b H(GH	SCHOOL GRADUATE OR	Yes No		CCRUED LE	
VETERAN'S EDUCATIONAL ASSISTANCE PROGRAM X		/ALENT	Х	13		
17. MEMBER WAS PROVIDED A COMPLETE DENTAL EXAM AND ALL APPROPR	RIATE DENTAL S	ERVICES AND TREATMENT WITH	IN 90 DAYS PRI	OR TO SEPARATION	ON	Yes X No
18. REMARKS DATA HEREIN SUBJECT TO COMPUTER MATCHI PURPOSES AND DETERMINING ELIGIBILITY O \$56610.00//MEMBER HAS COMPLETED FIRST INVOLUNTARY SEPARATION PAY//CONT FROM SEMINAR, 1 WEEK, 1997//STRATEGIC APPRO OPERATIONS SECURITY OFFICER COURSE, 1 OFFICERS ORIENTATION COURSE, 1 WEEK, 1 TACTICAL DECEPTION PLANNERS SEMINAR, 1 WEEK, 1996//JOINT COUNTERINTELLIGENCE COURSE, 2 WEEKS, 1992//GENERAL TRANSPO //SUPPLY MANAGEMENT COURSE, 2 WEEKS, 1 TRAINERS WORKSHOP, 1 WEEK, 1986//OPPOS //INTERVIEWING AND INTERROGATION TECHN 19.2 MAILING ADDRESS AFTER SEPARATION HOCKURE ZIP C/O WILLIAM SLEEP P O BOX 446 SHELTON, WA 98584 20. MEMBER REQUESTS COPY & BE SENT TO WA DRIOF VET AFFARS	R COMPLIFICATION FULL TER BLOCK 14 ACHES TO WEEK, 15 997//JOI WEEK, 1 STAFF OF RTATION 986//PLZ ING FORC IQUES 1 Cadel	ANCE FOR FEDERAL M OF SERVICE/MI //SPECIAL COUN //SPECIAL COUN DOUBLE OF SERVICE/MI 197/JOINT COMMAI NT MILITARY PLAN 1996/ARMY OPERA FICER COURSE 1 OF HAZARDOUS MA 1TOON TRAINERS W TES ACADEMY LEADI WEEK 1995/NO 195 NEAREST REL HARBARA ENNIS 408 PENARTH DI GREENVILLE SO NO 22 OFFICIAL AUTH	BENEFI'  BMBER IS  WITERINTER  SENCE, I  ND AND C  WHERS CO  FIONS SE  WEEK, I  FERIALS  ORKSHOP,  ERS COUR  HING FO  ATIVE /Wame  RIVE  29617  DRIZED TO S	FS//SEPAI ENTITLES LLIGENCE WEEK, 1: ONTROL WI IRSE, 1: TURITY OF 995//COMI COURSE, 1: WEEK, SE, 1: WES and address	PATION PARTITION	NY S G FAFE 36//ARMY DURSE, 1 MANDERS 1987 LATOON
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SPECIAL ADDITIONAL	INFORMATION (For use by authorized age	ncies only)
23. TYPE OF SEPARATION	24 CHARACTER OF SERVICE	(Include upgrades)
DISCHARGE	HONORABLE	
25. SEPARATION AUTHORITY	26. SEPARATION CODE	27. REENTRY CODE
AR 600-8-24; PARA 2-41	JGB	NA
28. NARRATIVE REASON FOR SEPARATION		
NON-SELECTION, PERMANENT PROMOTION		
29. DATES OF TIME LOST DURING THIS PERIOD		30. MEMBER REQUESTS COPY 4
NONE		initials



# CERTIFICATE OF COMPLETION

# William E. Evans

(Student Name)

has successfully completed the

# **User Overview**Computer-Based Training Course

Date Completed: 16 August 2012

Completion Time: 30 minutes



# CERTIFICATE OF COMPLETION

# William E. Evans

(Student Name)

has successfully completed the

# N-DEx Policy and Operating Computer-Based Training Course

Date Completed: 16 August 2012

Completion Time: 30 minutes



# CERTIFICATE OF COMPLETION

# William E. Evans

(Student Name)

has successfully completed the

# **Search**Computer-Based Training Course

Date Completed: 20 August 2012

Completion Time: 30 minutes

## SUSPICIOUS ACTIVITY REPORTING

THIS IS TO CERTIFY THAT

## William E. Evans

HAS SUCCESSFULLY COMPLETED EIGHT HOURS OF TRAINING IN

## THE NATIONWIDE SUSPICIOUS ACTIVITY REPORTING INITIATIVE: THE ANALYTIC ROLE

JULY 24, 2012

SEATTLE, WASHINGTON



The Honorable Denise E. O'Donnell Director, Bureau of Justice Assistance

Mr. David Sobczyk
Director, NSI Program Management Office





# Certificate of Training

This certificate is awarded to

## Bill Evans

for successful completion of

### Understanding Derivative Classification & Marking Course

January 18, 2012

This certification signifies that the above listed individual has successfully completed the necessary training and as such is authorized to perform derivative classification actions involving classified national security information. Recertification is required no later than 2 years from this date or your authorization to conduct derivative classification will be suspended.

This certification does not authorize the named individual to perform derivative classification actions involving Restricted Data (RD) or Formerly Restricted Data (FRD) classified pursuant to the Atomic Energy Act.

Darryl Wortman, Sr. Instructor

Training Branch, Office of Security

Jean Faulkner, Chief

Training Branch, Office of Security



# Certificate of Completion

This is to certify that WILLIAM EUGENE EVANS

Has successfully completed the following:

**DIOG 2011** 

On 12/23/2011

Thomas J. Browne
Assistant Director, Training Division

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(Rev.	3/9	15)



## STATE OF WASHINGTON INVOICE VOUCHER

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY (SIGN IN INK)

President Operational Applications Inc. (DATE)

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### **CONTRACTOR SERVICE HOURS**

Period: 8eginning

- 11/30/2009

**Ending** 

mm/dd/yr mm/dd/yr

Name: WILLIAM E. EVANS Location: 1110 3es Avenue Seattle, WA 98/01

Mo.   Day   Hrs.   Description of Services Provided		<u> </u>	-	
Nov   2   10.5   Lead Analyst, WSP, WSFC		Day		
Nov   3		1		
Nov   4   10   Lead Analyst, WSP, WSFC     Nov   5   11   Lead Analyst, WSP, WSFC     Nov   6   10   Lead Analyst, WSP, WSFC     Nov   7   0   Regular Day Off     Nov   8   0   Regular Day Off     Nov   9   10.5   Lead Analyst, WSP, WSFC     Nov   10   10.5   Lead Analyst, WSP, WSFC     Nov   11   10   Lead Analyst, WSP, WSFC     Nov   12   10.5   Lead Analyst, WSP, WSFC     Nov   13   0   Reserve Duty     Nov   14   0   Regular Day Off     Nov   15   0   Regular Day Off     Nov   16   10.5   Lead Analyst, WSP, WSFC     Nov   17   10.5   Lead Analyst, WSP, WSFC     Nov   18   4   Lead Analyst, WSP, WSFC     Nov   19   0   Reserve Duty     Nov   19   0   Reserve Duty     Nov   20   10.5   Lead Analyst, WSP, WSFC     Nov   21   0   Regular Day Off     Nov   22   0   Regular Day Off     Nov   23   10.5   Lead Analyst, WSP, WSFC     Nov   24   10.5   Lead Analyst, WSP, WSFC     Nov   25   9.5   Lead Analyst, WSP, WSFC     Nov   27   4.5   Lead Analyst, WSP, WSFC     Nov   28   0   Regular Day Off     Nov   29   0   Regular Day Off     Nov   28   0   Regular Day Off     Nov   29   0   Regular Day Off     Nov   20   10.5   Lead Analyst, WSP, WSPC     Nov   21   10.5   Lead Analyst, WSP, WSPC     Nov   22   10.5   Lead Analyst, WSP, WSPC     Nov   23   10.5   Lead Analyst, WSP, WSPC     Nov   24   10.5   Lead Analyst, WSP, WSPC     Nov   25   10.5   Lead Analyst, WSP, WSPC     Nov   26   10.5   Lea	<u> </u>			
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Total Hours: 173				
	Total	Hours:	173~	

William 30 NOV 09

Contractor Signature/Date

Local Reviewer Name

11-300087



STATL .= WASHINGTON

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)

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10/19/09 | Taxi (Airport to Hotel) **\$22.64** <u> 22.64</u> 10/19/09 Conference Registration Fee 1 \$135,00 135.00 10/22/09 Lodging Cost - Davenport Hotel 3 85.00 \$255.00 3 10/22/09 Lodging Taxes 11.10 \$33.30 10/22/09 Shuttle Express (Airport/Home) 49.00 \$49.00 10/19/09 Meal per diem (Trvl Day; 75% of MI&E) 46.00 ; 1 \$ 46,00 10/20/09 Meal per diem 61.00 \$61.00 1 7 10/21/09 \$61.00 Meal per diem 1 61.00 \$46.00 10/22/09 Meal per diem (Tryl Day; 75% of MI&E) 4600 7 Total \$987,54 0/11/11 PREPARED BY TELEPHONE NUMBER DATE 11/10/09 UDI NUMBER CURRENT DOC. NO. DOC DATE PMT DUE DATE REF. DOC. NO. VENDOR NUMBER UŜĒ 602 111 069 TRANS CODE ONU REP DOC SUP FUND 850230 210 001 011 1359 210 011 210 1001 011 27 210 011 271 MILEGE WARRANT NUMBER ACCOUNTING APPROVAL FOR PAYMEN DATE

My

Reservations **Deals** Day of Flight Mileage Plan™ **Destinations** More...

> Air Fares Hotel Rooms Car Rentals Vacation Packages Schedules Electronic Timetables Route M

#### **Purchased Reservation** Return to My Trips

Your reservation is complete.

Print this page for your check-in and airport use. A confirmation letter, including your itinerary, receipt and consumer notices, will be e-mailed to you.

You may make one change to this itinerary with no penalty until Friday, October 16, 2009.

Confirmation LAZNK

Enter Required Traveler Documentation Add Itinerary to a Calendar Forward Itinerary to a Friend

#### Itinerary, Traveler Information, and Reserved Seatso

Cancel or

Flight	Departs	Arrives	D€
Alaska Airlines 694	Seattle (SEA)	Spokane (GEG)	Co
	6:00 pm Mon, Oct 19	7:00 pm Mon, Oct 19	No
		•	Me
			22:
Alaska Airlines 691	Spokane (GEG)	Seattle (SEA)	Ca.
	1:45 pm Thu, Oct 22	2:50 pm Thu, Oct 22	Nυ
		• • • • • •	Me
			22'

U Flight available for Gold or Mileage upgrade. How do I upgrade?

#### Reserved Seats for Flights

Traveler Information	694	691	Additional Services Requested
Name: William Evans	26E	25A	Request additional services (Wheeld
MP#: Alaska 69450953	Cḥaṇ	ge seats	indiana and an indiana famour
E-ticket: 0272140574036			•

O Air Carrier Access Act requires us to make certain seats available to customers with disabilities. If you are assigned one of the qualified person requests it, you will be reaccommodated at the airport in another seat.

#### Thank you for your purchase at alaskaair.com

The VISA ending with \*\*\*\*\*\*\*4139 has been charged a total of USD\$236.20.

Total Fare

Base fare and surcharges: \$200.00 Applicable taxes, segment fees, airport facility charges and/or September

11th security fees: \$36.20

Total per person: \$236.20

Grand Total for 1 Traveler: USD\$236.20

☐ (Currency Converter)

FormID: 27C8A6FB0164045CE8EBC7908E7709A09

For additional assistance with your reservation call Alaska Airlines Reservations at 1-800-ALASKAAIR (1-800-252-7522) or Horizon Air Reservations at 1-800-547-9308.



Hotel Lusso PUDOUS SERVE Red Lion Hotel Spokane rooms Fairbridge Inn TATAL rooms \$

Car Rental!

Trip Protection by Access America

Purchase trip protection benefits and travel assistance services for your trip from Access America at 1-800-496-6593. Learn more

Add a car in \$

Web Check-Learn how to (

City Guides
Spokane
(sights, events

Flight Statu
Create a flight

Maps & Dire

#### Trip Reminders

TAND IT'TA LUV TANTARTATA

**Get Alerts for Your Flights** 

With the new Trip Alerts, powered by FlightStats, you can get flight status updates on all of the flights for this and future trips. If you have not yet signed up for Trip Alerts, you'll be receiving an e-mail shortly to register.

Learn more about Trip Alerts

Already registered for Trip Alerts? You can update your contact information in your Trip Alert Profile.

Getting Around the Airport Select an airport listed below to find your way around.

- Seattle
- Spokane

**Domestic Travel** The U.S. Department of Homeland Security requires commercial airlines to collect Secure Flight information (full name, gender, birth date) from travelers and transmit this information to the Transportation Security Administration for watch list matching purposes. Secure Flight information is required for all flights.

**Check-In Instructions** Use the confirmation code at Web Check-In at alaskaair.com or any Check-In Klosk. Check bags at a ticket counter Check-In Klosk. Then go directly to the gate with your government-issued photo I.D.

**Baggage** Each passenger is limited to one carry-on bag, that measures up to  $10 \times 17 \times 24$  inches (25 x 43 x 61 cm), plus one personal item like a purse, laptop, or small backpack. View our Carry-on Baggage Policy.

Checked Baggage In addition to the carry-on baggage restrictions outlined above, passengers traveling on Alaska Airlines or Horizon Air on or after July 7, 2009, will be charged \$15 for the first checked bag and \$25 for the second checked bag. For faster service, use your debit or credit card when checking in online or at an airport kiosk. See our Checked Baggage Policy for details and exceptions.

#### For On-Time Departures

- Arrive at airport 2 hours prior to scheduled departure.
- Check in and be available to board at the designated boarding gate at least 40 minutes
  prior to scheduled departure if checking bags on Alaska Airlines, and 30 minutes prior on
  Horizon Air. If not checking bags, you must be available for boarding at the designated
  boarding gate 30 minutes prior to departure on all flights. Failure may result in
  reservation cancellation.

Security Your security is extremely important to Alaska Airlines and Horizon Air.

- Never accept items from strangers to carry with you
- Keep your luggage with you at all times to prevent tampering
- Notify an Alaska Airlines Representative if your bags have been out of your immediate control or if anyone gives you something to take on your flight

#### Itinerary and Fare Rules

- This fare is nonrefundable.
- You may make one change to this itinerary with no fee within 24 hours of your purchase.
- Alaska Airlines assesses a \$100 (USD) per person change fee for changing a confirmed itinerary through an Alaska Airlines/Horizon Air Reservations Call Center or Airport Ticket Counter and a \$75 (USD) per person

change fee for changes made at alaskaair.com. Any applicable changes in fare or taxes also apply. Change fee is waived for MVP Gold members.

- Promotional discounts cannot be applied to already held or purchased reservations.
- View all fare rules

FormName: ViewPNR





"Highest in Customer Satisfaction Among Network Carriers in North America" EASYBIZ TRAVEL AGENTS CARGO AFFILIATI

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R20

1861 0.01

HOWARD

Licensed For Hide Independent Contractor

(509) 944-1120

Date 10-19-09

From Arts RORT

TO PAVENFORT

Amount \$ 22,64

Thank you for your business

Washington State Patro/

Northwest Criminal Intelligence Network

2009 Terrorism Conference

#### **RECEIPT OF PAYMENT**

**ATTENDEE:** 

**BILL EVANS** 

\$135.00

PAID BY CHECK #2402

Thank you for your payment. If you have questions, please call Beverly Wood at (360) 704-2402. For all other questions, please call Detective Jane Nowell (360) 772-0596 or Detective Chris Webb (206) 571-6491.

Page No. 1



Guest Name:

William Evans

William Evans

**U**\$A

Room #: 1216

Folio #: R5FC91 - 1

Group #: 19

19983 1

Guests: Clerk:

Washington State Patrol

CL #:

20/4000 14.40 PAA 4004044U14

- CC #:--XXXXXXXX\*\*\*\*

Arrive: 10/19/09

Time: 07:26 PM

Depart: 10/22/09

Timc: 02:24:32

Status: FOL

Date	Description	Reference	Comment	Charges Credits
10/19/2009	ROOM CHARGE	1216		\$85.00
10/19/2009	LODGING TAX	12161	LODGING TAX	\$1.70
10/19/2009	SALES TAX	1216t	SALES TAX	<b>\$7.40</b>
10/19/2009	TPA ASSESSMENT	1216t	TPA ASSESSMENT	\$2.00
10/20/2009	ROOM CHARGE	1216		\$85.00
10/20/2009	LODGING TAX	1216t	LODGING TAX	\$1.70
10/20/2009	SALES TAX	1216t	SALES TAX	\$7.40
10/20/2009	TPA ASSESSMENT	1216t	TPA ASSESSMENT	\$2.00
10/21/2009	ROOM CHARGE	1216		\$8 <i>5</i> .00
10/21/2009	LODGING TAX	1216t	LODGING TAX	\$1.70
10/21/2009	SALES TAX	1216t	SALES TAX	\$7.40
10/21/2009	TPA ASSESSMENT	1 <b>21</b> 6t	TPA ASSESSMENT	\$2.00
1				Folio Balance: \$1228 30

Guest Signature: \_

\_

TO/ FO/ COOK TRIES TWV CONCRETATION

---- Original Message -----

From: Shuttle Express <sales@shuttleexpress.net Date: Wednesday, October 21, 2009 21:39

Subject: Reservation number(s): SW5411251
To: William Evans < william.evans1@us.army.mil

Thank you for using Shuttle Express.

Get discounts and special offers each month! Sign up now for our online newsletter at www.shuttleexpress.com.

This email contains your reservation confirmation. Below is detail of your scheduled service. Please review it carefully and call us immediately at the number listed if there are any corrections that need to be made.

Service Detail:

We will be picking up William Evans, party of 1 on Thursday, October 22, 2009 at 3:05 PM.

The pickup will be from Seattle-Tacoma Int'l Airport for a trip

The requested service type is Shared Van.

Number of car seats requested:

The fare for this trip is \$49.00 and will be paid by Credit Card.

The reservation number for your trip is: SW5411251.

We have a 24-hour cancellation policy.

Call Us With Any Corrections

If you feel that there are any errors in the above reservation(s), please contact our reservation center immediately at (425) 981-7000.

Have a great trip, and thanks again for using Shuttle Express.

Shuttle Express Seattle-Portland Daily Service: First Class Comfort, Coach Price! www.ShuttleExpress.com

FORM A19-1A (Rev. 3/95)



## STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY
AGENCY NO LOCATION CODE P.R. OR AUTH. NO.
225 341009/34107

AGENCY NAME	
Washington State Patrol	
Investigative Assistance Division	•
PO Box 2347	
Olympia, WA 98507-2347	
VENDOR OR CLAIMANT (Warrant is to be payable to)	

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT:	Submit this form to claim
payment for materials, merchandise or services.	Show complete detail for
each item.	

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

(TITLE) ME GOODS/SERVICES RECEIVED FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) WSP/SGT 1-31 Oct 09 DATE **DESCRIPTION** QUANTITY UNIT UNIT PRICE FOR AGENCY USE ONLY 173 60.00 1-31 Oct 09 Analytical services for Oct 09 (Bill Evans) Hour Services performed under C090433PSC PREPARED BY TELEPHONE NUMBER 29 Oct 09 Doug Larm (253)226-9564 VENDOR NUMBER PMT DUE DATE CURRENT DOC. NO.. USE 602632122 COUNTY CITY/TOW TRANS INVOICE NUMBER PROJECT AMOUNT APPN PROGRAI INDEX UATS October Æ UD 001 ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT TOTAL WARRANT NUMBER

#### **CONTRACTOR SERVICE HOURS**

Period: 10/1/2009 mm/dd/yr

10/31/2009 mm/dd/yr

Name: Location: WILLIAM E. EVANS 1110 300 ANENUE SEATTLE, WA 98/01 Mo. Day Hrs. Description of Services Provided Lead Analyst, WSP, WSFC Oct 10 Lead Analyst, WSP, WSFC Oct 2 Oct Regular Day Off 3 0 Regular Day Off Oct 4 Lead Analyst, WSP, WSFC Oct 5 6 Lead Analyst, WSP, WSFC Oct Lead Analyst, WSP, WSFC Oct Lead Analyst, WSP, WSFC Oct 8 Lead Analyst, WSP, WSFC 9 Oct Regular Day Off 10 Oct Regular Day Off 11 Oct Lead Analyst, WSP, WSFC 12 Oct Lead Analyst, WSP, WSFC Oct 13 Oct 14 Lead Analyst, WSP, WSFC Lead Analyst, WSP, WSFC Oct 15 Reserve Duty Oct 16 Regular Day Off 17 Oct Regular Day Off 18 Oct 19 Lead Analyst, WSP, WSFC Oct Lead Analyst, WSP, WSFC Oct 20 Lead Analyst, WSP, WSFC 21 Oct Lead Analyst, WSP, WSFC 22 Oct Lead Analyst, WSP, WSFC Oct 23 24 Regular Day Off Oct Regular Day Off Oct 25 Lead Analyst, WSP, WSFC Oct 26 Lead Analyst, WSP, WSFC Oct 27 10 Lead Analyst, WSP, WSFC Oct 28 Lead Analyst, WSP, WSFC Oct 29 8.5 Lead Analyst, WSP, WSFC Oct 30 31 0 Regular Day Off Oct 173/ Total Hours:

Contractor Signature/Date

30 acres 2009

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

FORM
A19-1A
(Rev. 3/95)

DATE



## STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY		·.
AGENCY NO	LOCATION CODE	P.R. OR	AUTH. NO.
225	341009/34107		

		AGENCY	NAME
Vashington	State	Patrol	
nvestigative	Assis	stance Div	/ision

PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) | RECEIVED BY

DESCRIPTION

Services performed under C090433PSC

1-30 Sep 09 Analytical services for Sep 09 (Bill Evans)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, hapdicap, religion, or Vietnam era or disabled veterans status.

BY _	Ulline				
	(SIGN IN INK)			100x 201	a
	President Operational Applica	tion	s Inc.	19900	Z
	(TITLE)	7		(DATE)	

WSP/SGT Jarmon

UNIT

Hour

**UNIT PRICE** 

60.00

GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-30 Sep 09

EPARED BY OUG Lai C. DATE	m PMT DU	DATE	CURRENT DO	(2	EPHONE N 53)22		04 1 (D. VEN	OCT 09	15°	NCY APPROVA	TWU DOR MES	I. SAGE	DATE JOSE USE TAX	IMBER 602632122
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QUANTITY

173

## **CONTRACTOR SERVICE HOURS**

Period:

Beginning 9/1/2009 mm/dd/yr

**Ending** 9/30/2009 mm/dd/yr

Name: WILLIAM E. EVANS Location:

1110 3 PD AVENUE SEATTLE WA 98101

Mo.	Day	Hrs.	Description of Services Provided
Sep	1	11	Lead Analyst, WSP, WSFC
Sep	2	10.5	Lead Analyst, WSP, WSFC
Sep	3	9.5	Lead Analyst, WSP, WSFC
Sep	4	11	Lead Analyst, WSP, WSFC
Sep	5		Regular Day Off
Sep	6	0	Regular Day Off
Sep	7	. 11	Lead Analyst, WSP, WSFC
Sep	8	11	Lead Analyst, WSP, WSFC
Sep	9		Lead Analyst, WSP, WSFC
Sep	10		Lead Analyst, WSP, WSFC
Sep	11		Reserve Duty (Military School)
Sep	12	0	Regular Day Off
Sep	13	0	Regular Day Off
Sep	14	0	Reserve Duty (Military School)
Sep	15	0	Reserve Duty (Military School)
Sep	16		Lead Analyst, WSP, WSFC
Sep	17	7	Lead Analyst, WSP, WSFC
Sep	18	8	Lead Analyst, WSP, WSFC
Sep	19	0	Regular Day Off
Sep	20		Regular Day Off
Sep	21		Lead Analyst, WSP, WSFC
Sep	22		Lead Analyst, WSP, WSFC
Sep	23	6.5	Lead Analyst, WSP, WSFC
Sep	24	- 6	Lead Analyst, WSP, WSFC
Sep	25	8	Lead Analyst, WSP, WSFC
Sep	26		Regular Day Off
Sep	27	0	Regular Day Off
Sep	28	8	Lead Analyst, WSP, WSFC
Sep	29	8	Lead Analyst, WSP, WSFC
Sep	30	8	Lead Analyst, WSP, WSFC
	31	0	
Total I	lours:	173	
	11		

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Signature/Date

**FORM** A19-1A (Rev. 3/95)



#### STATE OF WASHINGTON

## **INVOICE VOUCHER**

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AGENCY NAME

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

WSP/SGT Jarmon

1 SEN 2001 President Operational Applications Inc (TITLE)

ATE GOODS/SERVICES RECEIVED

1-31 Aug 09

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#### Washington State Patrol

### **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 8/1/2009
 8/31/2009

 mm/dd/yr
 mm/dd/yr

Name	e:	<u>\</u>	DILLIAM E. EDANS	Location:	1110 3ª AVE	SEATTLE WA 981
Mo.	Day	Hrs.	Description of Services Provided			
Aug	1		Lead Analyst, WSP, WSFC			
Aug	2	12.5	Lead Analyst, WSP, WSFC		<del></del>	
Aug	3	10.5	Lead Analyst, WSP, WSFC			
Aug	4	10.5	Lead Analyst, WSP, WSFC			
Aug	5	10.5	Lead Analyst, WSP, WSFC			
Aug	6		Lead Analyst, WSP, WSFC		<del></del>	
Aug	7	8	Lead Analyst, WSP, WSFC		·	
Aug	8		Regular Day Off		<del></del>	
Aug	9	0	Regular Day Off			
Aug	10		Reserve Duty (Annual Training)			
Aug	71	0	Reserve Duty (Annual Training)		<del></del>	
Aug	12		Reserve Duty (Annual Training)	<del></del>		
Aug	13		Reserve Duty (Annual Training)			
Aug	14	0	Reserve Duty (Annual Training)	<del></del>		
Aug	15	0	Regular Day Off			
Aug	16	0	Regular Day Off			
Aug	17	11	Lead Analyst, WSP, WSFC			
Aug	18	11	Lead Analyst, WSP, WSFC			
Aug	19	11	Lead Analyst, WSP, WSFC			
Aug	20	6	Lead Analyst, WSP, WSFC			
Aug	21	0	Reserve Duty			
Aug	22	0	Regular Day Off			·
Aug	23	0	Regular Day Off	<del></del>	<del></del>	
Aug	24	10.5	Lead Analyst, WSP, WSFC		7	
Aug	25	10	Lead Analyst, WSP, WSFC			
Aug	26	10.5	Lead Analyst, WSP, WSFC			
Aug	27	9.5	Lead Analyst, WSP, WSFC			
Aug	28	10	Lead Analyst, WSP, WSFC			<del></del>
Aug	29	0	Regular Day Off			
Aug	30	0	Regular Day Off			
Aug	31	8.5	Lead Analyst, WSP, WSFC			
	Hours:	173		<u> </u>		
111	Me		F Turano 8/31/09		Sett	ARMON

Contractor Signature/Date

Local Reviewer Name

A)

Local Reviewer Signature/Date

! CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.
(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Minnatoria

FORM A19-1A (Rev. 3/95)



## STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

AG	EN	CY	NA	ME

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

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President Operational Applications Inc. (ITILE) (DATE)

WSP/SGT Jarmon

DATE GOODS/SERVICES RECEIVED

1-31 Jul 09

DATE	DESCRIPTION							QUANTITY UNIT UNIT PRICE									
1-31 Jul 09	Ai	nalytica	l servi	ces for J	uly 09			-	173	Но				710,30			
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#### **Washington State Patrol**

### **CONTRACTOR SERVICE HOURS**

Period: Beginning
7/1/2009
mm/dd/yr

7/31/2009 mm/dd/yr

Name: EVANS, WILLIAM E	Location:	1170 THIRD AVE	SEATTLE	1018P NW
------------------------	-----------	----------------	---------	----------

Mo.	Day		Description of Services Provided
July	1	10	Lead Analyst, WSP, WSFC
July	2	7	Lead Analyst, WSP, WSFC
July	3	8	Lead Analyst, WSP, WSFC
July	4		Regular Day Off
July	5	0	Regular Day Off
July	6	9	Lead Analyst, WSP, WSFC
July	7	10	Lead Analyst, WSP, WSFC
July	8	8	Lead Analyst, WSP, WSFC
July	9	9	Lead Analyst, WSP, WSFC
July	10	9	Lead Analyst, WSP, WSFC
July	11		Regular Day Off
July	12		Regular Day Off
July	13		Lead Analyst, WSP, WSFC
July	14		Lead Analyst, WSP, WSFC
July	15	8	Lead Analyst, WSP, WSFC
July	16	0	Lead Analyst, WSP, WSFC
July	17	0	Lead Analyst, WSP, WSFC
July	18		Regular Day Off
July	19		Regular Day Off
July	20	9	Lead Analyst, WSP, WSFC
July	21	8	Lead Analyst, WSP, WSFC
July	22	10	Lead Analyst, WSP, WSFC
July	23	8.5	Lead Analyst, WSP, WSFC
July	24	4.5	Lead Analyst, WSP, WSFC
July	25		Regular Day Off
July	26		Regular Day Off
July	27	9	Lead Analyst, WSP, WSFC
July	28	9	Lead Analyst, WSP, WSFC
July	29	8	Lead Analyst, WSP, WSFC
July	30	8	Lead Analyst, WSP, WSFC
July	31	4	Lead Analyst, WSP, WSFC
Total	Hours:	173	

William S. Now 31 Juy 2009

Contractor Signature/Date

LOCAL REVIEWSHIN

Local Reviewer Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimburgement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

#### **Washington State Patrol**

#### **CONTRACTOR SERVICE HOURS**

Period: Beginning 6/1/2009

6/1/2009 mm/dd/yr 6/30/2009 mm/dd/yr

Name: EVANS WILLIAM E.

Location: 1110 3RD AVENUE SEATTLE WA

No.   Day   Hrs.   Description of Services Provided				
Jun   2   9   Lead Analyst, WSP, WSFC   SAR Conference, Washington, D.C.		Day		
Jun   3   19   Lead Analyst, WSP, WSFC   SAR Conference, including return travel		1 1		
Jun   4   10   Lead Analyst, WSP, WSFC     Jun   5   5   Lead Analyst, WSP, WSFC     Jun   6   0   Regular Day Off     Jun   7   0   Regular Day Off     Jun   9   11.5   Lead Analyst, WSP, WSFC     Jun   10   10   Lead Analyst, WSP, WSFC     Jun   11   10   Lead Analyst, WSP, WSFC     Jun   12   11   Lead Analyst, WSP, WSFC     Jun   13   0   Regular Day Off     Jun   14   0   Regular Day Off     Jun   15   0   Reserve Duty     Jun   16   0   Reserve Duty     Jun   17   0   Reserve Duty     Jun   18   0   Reserve Duty     Jun   19   0   Reserve Duty     Jun   21   0   Regular Day Off     Jun   22   0   Regular Day Off     Jun   21   0   Regular Day Off     Jun   22   0   Regular Day Off     Jun   24   0   Reserve Duty     Jun   25   0   Reserve Duty     Jun   26   0   Reserve Duty     Jun   27   0   Regelar Day Off     Jun   27   0   Regular Day Off     Jun   28   0   Reserve Duty     Jun   29   0   Reserve Duty     Jun   27   0   Regular Day Off     Jun   28   0   Reserve Duty     Jun   30   11   Lead Analyst, WSP, WSFC     Jun   31   Total Hours:   120     Jun   32   120   Total Hours:   120     Jun   34   Total Hours:   120     Jun   35   Total Hours:   120     Jun   30   Total Hours:   120     Jun   30	Jun		9	Lead Analyst, WSP, WSFC SAR Conference, Washington, D.C.
Jun				
Jun   6	Jun			
Jun   7   0   Regular Day Off	Jun	5		
Jun   8	Jun	6		
Jun   9	Jun	•		
Jun   10   10   Lead Analyst, WSP, WSFC     Jun   11   10   Lead Analyst, WSP, WSFC     Jun   12   11   Lead Analyst, WSP, WSFC     Jun   13   0   Regular Day Off     Jun   14   0   Regular Day Off     Jun   15   0   Reserve Duty     Jun   16   0   Reserve Duty     Jun   17   0   Reserve Duty     Jun   18   0   Reserve Duty     Jun   19   0   Reserve Duty     Jun   20   0   Regular Day Off     Jun   21   0   Regular Day Off     Jun   22   0   Reserve Duty     Jun   23   0   Reserve Duty     Jun   24   0   Reserve Duty     Jun   25   0   Reserve Duty     Jun   26   0   Reserve Duty     Jun   27   0   Regular Day Off     Jun   28   0   Reserve Duty     Jun   29   0   Reserve Duty     Jun   29   0   Reserve Duty     Jun   30   11   Lead Analyst, WSP, WSFC     Total Hours:   120				
Jun   11   10   Lead Analyst, WSP, WSFC     Jun   12   11   Lead Analyst, WSP, WSFC     Jun   13   0   Regular Day Off     Jun   14   0   Regular Day Off     Jun   15   0   Reserve Duty     Jun   16   0   Reserve Duty     Jun   17   0   Reserve Duty     Jun   18   0   Reserve Duty     Jun   19   0   Reserve Duty     Jun   20   0   Regular Day Off     Jun   21   0   Regular Day Off     Jun   22   0   Reserve Duty     Jun   23   0   Reserve Duty     Jun   24   0   Reserve Duty     Jun   25   0   Reserve Duty     Jun   26   0   Reserve Duty     Jun   27   0   Regular Day Off     Jun   28   0   Regular Day Off     Jun   29   0   Reserve Duty     Jun   29   0   Reserve Duty     Jun   30   11   Lead Analyst, WSP, WSFC     Total Hours:   120	Jun			
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Jun   14   0   Regular Day Off     Jun   15   0   Reserve Duty     Jun   16   0   Reserve Duty     Jun   17   0   Reserve Duty     Jun   18   0   Reserve Duty     Jun   19   0   Reserve Duty     Jun   20   0   Regular Day Off     Jun   21   0   Regular Day Off     Jun   22   0   Reserve Duty     Jun   23   0   Reserve Duty     Jun   24   0   Reserve Duty     Jun   25   0   Reserve Duty     Jun   26   0   Reserve Duty     Jun   27   0   Regular Day Off     Jun   28   0   Regular Day Off     Jun   29   0   Reserve Duty     Jun   30   11   Lead Analyst, WSP, WSFC     Total Hours:   120	Jun			
Jun   15	Jun			
Jun         16         0         Reserve Duty           Jun         17         0         Reserve Duty           Jun         18         0         Reserve Duty           Jun         19         0         Reserve Duty           Jun         20         0         Regular Day Off           Jun         21         0         Reserve Duty           Jun         22         0         Reserve Duty           Jun         23         0         Reserve Duty           Jun         24         0         Reserve Duty           Jun         25         0         Reserve Duty           Jun         26         0         Reserve Duty           Jun         27         0         Regular Day Off           Jun         28         0         Regular Day Off           Jun         30         11         Lead Analyst, WSP, WSFC    Total Hours: 120	Jun			
Jun   17   0   Reserve Duty     Jun   18   0   Reserve Duty     Jun   19   0   Reserve Duty     Jun   20   0   Regular Day Off     Jun   21   0   Regular Day Off     Jun   22   0   Reserve Duty     Jun   23   0   Reserve Duty     Jun   24   0   Reserve Duty     Jun   25   0   Reserve Duty     Jun   26   0   Reserve Duty     Jun   27   0   Regular Day Off     Jun   28   0   Regular Day Off     Jun   29   0   Reserve Duty     Jun   30   11   Lead Analyst, WSP, WSFC     Total Hours:   120	Jun	15		
Jun         18         0         Reserve Duty           Jun         19         0         Reserve Duty           Jun         20         0         Regular Day Off           Jun         21         0         Regular Day Off           Jun         22         0         Reserve Duty           Jun         23         0         Reserve Duty           Jun         24         0         Reserve Duty           Jun         25         0         Reserve Duty           Jun         26         0         Reserve Duty           Jun         27         0         Regular Day Off           Jun         29         0         Reserve Duty           Jun         30         11         Lead Analyst, WSP, WSFC           Jun         31         Total Hours:         120	Jun	16	0	Reserve Duty
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Jun         21         0         Regular Day Off           Jun         22         0         Reserve Duty           Jun         23         0         Reserve Duty           Jun         24         0         Reserve Duty           Jun         25         0         Reserve Duty           Jun         26         0         Regular Day Off           Jun         28         0         Regular Day Off           Jun         29         0         Reserve Duty           Jun         30         11         Lead Analyst, WSP, WSFC           Total Hours:         120         120	Jun			
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Jun       23       0       Reserve Duty         Jun       24       0       Reserve Duty         Jun       25       0       Reserve Duty         Jun       26       0       Reserve Duty         Jun       27       0       Regular Day Off         Jun       28       0       Regular Day Off         Jun       29       0       Reserve Duty         Jun       30       11       Lead Analyst, WSP, WSFC         31       Total Hours:       120	Jun			
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Jun         25         0         Reserve Duty           Jun         26         0         Reserve Duty           Jun         27         0         Regular Day Off           Jun         28         0         Regular Day Off           Jun         29         0         Reserve Duty           Jun         30         11         Lead Analyst, WSP, WSFC           Total Hours:         120         1         C	Jun			
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Jun 30 11 Lead Analyst, WSP, WSFC  31 Total Hours: 120	Jun			
31 Total Hours: 120	Jun			
Total Hours: 120	Jun	30	11	Lead Analyst, WSP, WSFC
		31		
	Total	Hours:	120	

Within 5 Jun 09

Contractor Signature/Date

Local Reviewer Name

Local Reviewer Signature/Date

FORM
A19-1A
(Rev. 3/95)

DATE



### STATE OF WASHINGTON INVOICE VOUCHER

- A* 1 -	AGENCY USE ONLY	F F 3
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

· //www	AGENCY NAME
Washington S	State Patrol
Investigative A	Assistance Division
PO Box 2347	
Olympia, WA	98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

Status.

BY

(Wisign in Ink)

President Operational Applications Inc. (DATE)

BATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-30 Jun 09

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	Jun 09	Ar	nalytica	al servi	ices for .	June 0	9 (Bill E	vans)	i	120	i He	our	60.0	0	]	,

QUANTITY

UNIT

**UNIT PRICE** 

## **CONTRACTOR SERVICE HOURS**

Period: Beginning
6/1/2009
mm/dd/yr

6/30/2009 mm/dd/yr

lame:	EVANS WILLIAM E.	Location:	1110 3RD AVENUE	SEATTLE WA	

Jun 1 Jun 2 Jun 3 Jun 4 Jun 5 Jun 6 Jun 7 Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16		Description of Services Provided  Lead Analyst, WSP, WSFC SAR Conference, Washington, D.C.
Jun 2 Jun 3 Jun 4 Jun 5 Jun 6 Jun 7 Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16		Lead Analyst, WSP, WSFC SAR Conference, Washington, D.C.
Jun 3 Jun 4 Jun 5 Jun 6 Jun 7 Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16	0	
Jun 4  Jun 5  Jun 6  Jun 7  Jun 8  Jun 9  Jun 10  Jun 11  Jun 12  Jun 13  Jun 14  Jun 15  Jun 16	7	Lead Analyst, WSP, WSFC SAR Conference, Washington, D.C.
Jun 5 Jun 6 Jun 7 Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16	19	Lead Analyst, WSP, WSFC SAR Conference, including return travel
Jun 6 Jun 7 Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16	10	Lead Analyst, WSP, WSFC
Jun 7 Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16	5	Lead Analyst, WSP, WSFC
Jun 8 Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16		Regular Day Off
Jun 9 Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16		Regular Day Off
Jun 10 Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16		Lead Analyst, WSP, WSFC
Jun 11 Jun 12 Jun 13 Jun 14 Jun 15 Jun 16		Lead Analyst, WSP, WSFC
Jun 12 Jun 13 Jun 14 Jun 15 Jun 16	10	Lead Analyst, WSP, WSFC
Jun     13       Jun     14       Jun     15       Jun     16	10	Lead Analyst, WSP, WSFC
Jun 14 Jun 15 Jun 16	11	Lead Analyst, WSP, WSFC
Jun 15 Jun 16		Regular Day Off
Jun 16		Regular Day Off
		Reserve Duty
		Reserve Duty
Jun 17	0	Reserve Duty
Jun 18	0	Reserve Duty
Jun 19		Reserve Duty
Jun 20		Regular Day Off
Jun 21		Regular Day Off
Jun 22		Reserve Duty
Jun 23		Reserve Duty
Jun 24		Reserve Duty
Jun 25		Reserve Duty
Jun 26		Reserve Duty
Jun 27		Regular Day Off
Jun 28		Regular Day Off
Jun 29		Reserve Duty
Jun 30	11	L <sub>ead</sub> Analyst, WSP, WSFC
31		
Total Hours:	1207	

Within F Wans 30 Jun 09

Contractor Signaturer Date

Local Reviewer Name

Local Reviewer Signature/Date

FORM A19-1A (Rev. 3/95)

DATE



STATE	OF W	/ASHII	NGTON
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	225	341009/34107			

Washington State Patrol
Investigative Assistance Division
PO Box 2347
Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-31 May 09 Analytical services for May 09 (Bill Evans)

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, badicap, religion, or Vietnam era or disabled veterans status.

BY (SIGN IN INK)

President Operational Applications Inc. (DATE)

DATE GOODS/SERVICES RECEIVE

FOR AGENCY USE ONLY

1-31 May 09

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WSP/SGT

UNIT

Hour

QUANTITY

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Jármon

**UNIT PRICE** 

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## Washington State Patrol

### **CONTRACTOR SERVICE HOURS**

_	Beginning		Ending
Period:	5/1/2009	-	5/31/2009
_	mm/dd/yr	<b>-</b>	mm/dd/yr

Name:	EVANS, WILLIAM E.	Location: <u>USFC</u>	1110 Thise AVE SEATTLE	WA 98/
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Mo.	Day	Hrs.	Description of Services Provided
May	1		Lead Analyst, WSP, WSFC
May	2		Regular Day Off
May	3	0	Regular Day Off
May	4	0	Reserve Duty
May	5		Reserve Duty
May	6		Reserve Duty
May	7	0	Reserve Duty
<sub>II</sub> May	8	0	Reserve Duty
May	9		Regular Day Off
May	10		Regular Day Off
May	11	11	Lead Analyst, WSP, WSFC
May	12	10.5	Lead Analyst, WSP, WSFC
May	13	10	Lead Analyst, WSP, WSFC
May	14		Lead Analyst, WSP, WSFC
May	15		Reserve Duty
May	16		Regular Day Off
May	17		Regular Day Off
May	18		Lead Analyst, WSP, WSFC
May	19	10.5	Lead Analyst, WSP, WSFC
May	20	9	Lead Analyst, WSP, WSFC
May	21	9.5	Lead Analyst, WSP, WSFC
May	22	9.5	Lead Analyst, WSP, WSFC
May	23		Regular Day Off
May	24	0	Regular Day Off
May	25	9	Lead Analyst, WSP, WSFC
May	26	10	Lead Analyst, WSP, WSFC
May	27	9.5	Lead Analyst, WSP, WSFC
May	28	9.5	Lead Analyst, WSP, WSFC
May	29		Reserve Duty
May	30	0	Regular Day Off
May	31		Regular Day Off
Total	Hours:	143	
	10		

Contractor Signature/Date

Local Reviewer Name

Local Reviewer Signature/Date

G1000

(To ensure reimbursement, this

FO	RM
A19	-1A
(Rev.	3/95)



### STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY											
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.									
225	341009/34107										

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Washington State Patrol
Investigative Assistance Division
PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMAN	IT: Culturalit thin favors to status
INSTRUCTIONS TO VENDOR OR GEARNAN	77. Submittins form to claim
payment for materials, merchandise or service	es. Show complete detail for
pach item	

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

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	(SIGN IN INK)	14442009
F	resident Operational Applications Inc.	114/2001
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1-30 Apr 0	Ana	lytical	servic	es for /	April O	9 (Bill E	vans)		173	Hour		60.0	0			***************************************		
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## **CONTRACTOR SERVICE HOURS**

-	Beginning		Ending
Period:	4/1/2009	\ - \	4/30/2009
_	mm/dd/yr		mm/dd/yr

Name: N		WIL	LIAM E. EVANS	Location:	1110	3RA	AVE.	SEATTLE	WA	98101
Mo.	Day	Hrs.	Description of Services Provided		-					
Apr	1		Lead Analyst, WSP, WSFC						خصصت	
Apr	2		Lead Analyst, WSP, WSFC							
Apr	3		Lead Analyst, WSP, WSFC							
Apr	4		Regular Day Off							
Apr	5		Regular Day Off	· <u></u>				<del></del>		
Арг	6		Lead Analyst, WSP, WSFC							
Apr	7		Lead Analyst, WSP, WSFC							
Apr	8		Lead Analyst, WSP, WSFC	<del></del>				<del></del>		
Apr	9	9	Lead Analyst, WSP, WSFC							
Apr	10	9.5	Lead Analyst, WSP, WSFC	<del></del>						
Apr	11		Regular Day Off					<del></del>		
Apr	12		Regular Day Off	· · · · · · · · · · · · · · · · · · ·						
Apr	13		Lead Analyst, WSP, WSFC	<del></del>				<del></del>		
Арг	14		Lead Analyst, WSP, WSFC	<del></del>						
Apr	15	8.5	Lead Analyst, WSP, WSFC							
Apr	16	10	Lead Analyst, WSP, WSFC							
Apr	17	0	Reserve Duty							
Apr	18	0	Regular Day Off	· · · · · · · · · · · · · · · · · · ·						
Арг	19	0	Regular Day Off			·		<del></del>		
Apr	20	8	Lead Analyst, WSP, WSFC							
Apr	21	9	Lead Analyst, WSP, WSFC							
Apr	22	9	Lead Analyst, WSP, WSFC							
Apr	23	9	Lead Analyst, WSP, WSFC							
Арг	24	9	Lead Analyst, WSP, WSFC							
Apr	25	0	Regular Day Off							
Арг	26	0	Regular Day Off							
Apr	27	0	Reserve Duty							
Apr	28	0	Reserve Duty							
Apr	29	9.5	Lead Analyst, WSP, WSFC							
Apr	30	9	Lead Analyst, WSP, WSFC					<del></del>		
	31									
Total	Hours:	173								
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Contra	ictor Sig	nature	ruate .		Local R	eviewe	r Namı	9		
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FD-448 Revised 10-27-2004

## FEDERAL BUREAU OF INVESTIC :ON FACSIMILE COVER SHEET

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Altn: Bei	wood						Room:	Telephone Number:					
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Name of Office: $\omega$ S	FC						Number of Pag	es: (including cover)					
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immediately to arrange for proper disposition.

(Rev. 1/91)

(new online version 12/01)



STATF OF WASH ON

INVOICE VOUCHER

**AGENCY NAME** 

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9. Use the Tab key to advance from text field Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

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Washington State Patrol		INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.					
VENDOR OR CLAIMANT (Warrant is to be payable to) WILLIAM E. EVANS			Vendor's Certificate. I hereby certify under penalty of perjury that the items are totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or servic rendered have been provided without discrimination because of age, sex, marit status, race, creed, coror, national origin, handicap, religion, or Vietnam era or disabled veterans status.  BY  (SIGN IN INK)				
FEDERAL I.D. N	O. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contra	act Payments to I.I		SAVED BY	Lugaly Librar	DATE RECEIVED  5-6-09	
DATE	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT	FOR AGENCY USE	
4/19/09	Mileage round-trip: Home to Airport	78	mi	0.55	\$ 42.90		
4/19/09	Airfare (round trip) - Seattle / Las Vegas				\$ 230.40		
4/19/09	Taxi (Airport to Hotel)				\$15.00		
4/19/09	LEIU Registration Fee				\$ 425.00		
4/24/09	LEIU Conference: Lodging Cost				\$ 621.30		
4/24/09	Taxi (Hotel to Airport)				\$15.00		
4/19/09	Meal per diem (D)				\$29.00		
4/20/09	Meal per diem (B,L,D)				\$ 64.00		
4/21/09	Meal per diem (B,L,D)		ļ		\$ 64.00		
4/22/09	Meal per diem (B,L,D)				\$ 64.00		
4/23/09	Meal per diem (B,L)				\$ 35.00		
4/24/09	Meal per diem (B,L,D)				\$ 64.00		
				Total	\$1669.60		
	*		<u> </u>				
PREPARED BY WILLIAM DOC DATE	TELEPHONE NUMBER DAT 103-992-5892 4/2 PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO.	24/09 VENDOR NI	1120	APPROVAL VENDOR M	ESSAGE USE	DATE S 1 09	
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Seat maps are currently unavailable. Please try again later or reserve your seats at check-in.

#### This Document is for reference only.

Your electronic airline ticket is stored in our computer system. As with all airline tickets, your electronic ticket is not transferable.



#### Thank you for choosing United Airlines.

If you need to change your booking request, please visit united.com.

## Click here to print this document Print Itinerary

Issued: Mon, Mar 16, 2009 /CONXA

#### Flight information

C	A 40	2022	041-	18/6	(OEA)	4- 0		~ .	·050\
Sun.	ADT 19.	ZUU9 ·	- Seame.	VVA	(SEA)	to San	Francisco.	CA	(SEU)

United 701	Depart SEA 3:09 PM	Fare basis code	Flight status: Confirmed
	Arrive SFO 5:12 PM	Booking class Q	

<<< connecting >>>

United 457	Depart SFO 7:10 PM	Fare basis code	Flight status: Confirmed
	Arrive LAS 8:50 PM	Booking class Q	

Fri, Apr 24, 2009 - Las Vegas, NV (LAS) to San Francisco, CA (SFO)

United 525	Depart LAS 6:46 PM	Fare basis code	Flight status: Confirmed
	Arrive SFO 8:25 PM	Booking class L	\$

Economy

Economy

Economy

<<< connecting >>>

United 62	Depart SFO 10:45 PM	Fare basis code	Flight status: Confirmed
Arrives next day Apr 25	Arrive SEA 12:46 AM	Booking class L	
		Economy	÷ .

#### Additional information:

#### Payment details

MPVISA xxxxxxxxxxxx4139 USD 230.40

#### Billing / Delivery information

P	9	rtv	of	1

Traveler	Ticket number	Mileage Plus number	Base fare	Taxes & fees*	Total
EVANS/WILLIAM E MR	0162189313010	03135337659	USD 174.88	USD 55.52	USD 230.40

Fare FP VIXXXXXXXXXXXXX4139 EXP / 4753C FC 19APR SEA UA X/SFO UA LAS

details: 120.00QA14AN UA X/SFO UA SEA 54.88LA3PN3 USD174.88END ZPSEASFOLASSFO XT

14.40ZP 10.00AY 18.00XFSEA4.5SFO4.5LAS4.5SFO4.5

Penalty:



CI: AFRUEHAUF 4/19/09 9:44 PM CO: DROSA 4/24/09 10:29 AM

Arrival Date: 4/19/09 Departure Date: 4/24/09

Name:

**WILLIAM EVANS** 





3555 Las Vegas Blvd. South Las Vegas, NV 89109 FOR RESERVATIONS CALL 1-800-732-2111 702-733-3111

Group Code: IF08

Casino ID:

Room #: FL 28068

Resv ID: 398873487303

Folio ID: 399211522341

Page: 1

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Date	Reference	Description	Charges	Credits	Balance
04/19/09	FL28068	ROOM CHARGE FL 28068 TAX2	135.00 12.15		
04/19/09		APPLIED DEPOSIT	12.15	147.15	147.15
04/20/09	FL28068	ROOM CHARGE FL 28068 TAX2	115.00 10.35		
04/21/09	FL28068	ROOM CHARGE FL 28068 TAX2	115.00		125.35
04/22/09	FL28068	ROOM CHARGE FL 28068 TAX2	95.00		250.70
04/23/09	FL28068	ROOM CHARGE FL 28068 TAX2	8.55		354.25
04/24/09		VISA-LODGING *************	9.90	474.15	474.15
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## Registration Receipt

2	2009 LEIU/IALEL	A Annual Training	Seminar
Received	\$4 <b>25.00</b>	Pre-paid	V. Vijur
0n	3/16/2009		
From	William F	Evans	

From

Russell M. Arter	Sianfilmen
Russell Porter, Chairman	Lisa Palmieri, President
LEII	IALEIA

-			
Driver #		_ Cab #	
T.A. Permit #			
Fare from	\$15.00	LAS	VEGAS INTL AIRPIA
To Las	VEGAS - FLAM	MFO	HOTEL
_	9/2009		
x Will	MM E. E.	ANS	
	PRINT Client's	Name	

FORM A19-1A (Rev. 3/95)



STATE OF V	Nashington
INVOICE	VOUCHER

		<b>AGENCY</b>	NAME
Washingto	n State	Patrol	
Investigativ			ision
PO Box 23			
Ólympia V		17-2347	

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East

:#:	98.78, B		AGENCY USE ONLY	jār.	, . <del></del>
	AGENCY NO	_	LOCATION CODE	P.R.	OR AUTH. NO.
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INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, martial status, race, creed, color, national origin, handjeap, religion, or Vietnam era or disabled veterans status.

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WARRANT NUMBER

#### Beginning **Ending**

### **CONTRACTOR SERVICE HOURS**

Period: 3/1/2009 mm/dd/yr

3/31/2009 mm/dd/yr

EVANS, WILLIAM E. Name: Location: 1110 3RD AVENUE SEATTLE WA 98101

	'		MIO SEL FOUNDE SERVICE OUR 18101
Mo.	Day	Hrs.	Description of Services Provided
Mar	1		Regular Day Off
Mar	2	9.5	Lead Analyst, WSP, WSFC
Mar	3	9.5	Lead Analyst, WSP, WSFC
Mar	4	9.5	Lead Analyst, WSP, WSFC
Mar	5	9.5	Lead Analyst, WSP, WSFC
Mar	6	9.5	Lead Analyst, WSP, WSFC
Mar	7	0	Regular Day Off
Mar	8		Regular Day Off
Mar	9		Lead Analyst, WSP, WSFC
Mar	10		Lead Analyst, WSP, WSFC
Mar	11		Lead Analysi, WSP, WSFC
Mar	12	8	Lead Analyst, WSP, WSFC
Мат	13	8	Lead Analyst, WSP, WSFC
Mar	14		Regular Day Off
Mar	15		Regular Day Off
Mar	16		Lead Analyst, WSP, WSFC
Mar	17		Lead Analyst, WSP, WSFC
Mar	18		Lead Analyst, WSP, WSFC
Mar	19		Lead Analyst, WSP, WSFC
Mar	20		Reserve Duty
Mar	21		Regular Day Off
Mar	22		Regular Day Off
Vlar	23		Lead Analyst, WSP, WSFC
Mar	24		Lead Analyst, WSP, WSFC
Маг	25		Lead Analyst, WSP, WSFC
Mar	26		Lead Analyst, WSP, WSFC
Mar	27		Lead Analyst, WSP, WSFC
Mar	28		Regular Day Off
Mar	29		Regular Day Off
Mar	30		Regular Day Off
Mar	31		Lead Analyst, WSP, WSFC
Total	Hours:	173	
	777		

31 MAR 09 Contractor Signature/Date

Local Reviewer Name

04/01/2009 07:16 FAX 2062622014

MOT

FD-448 Revised 10-27-2004

# FEDERAL BUREAU OF INVESTIGATION FACSIMILE COVER SHEET

10-27-2004		FACSI	MILE COVE	RSHEET	
		PREG	EDENÇE		
C Immed	liate		Priority		Routine
			FICATION		
C. Top Secret	C Secret		dential	C Sensitive	<ul> <li>Unclassified</li> </ul>
			то		
Name of Office:	STATE PA	tro_		Facsimile Number:	Date: Z 04/01 / 2009
Attn: BEV	_ W00≥0			Room:	Telephone Number:
		F	ROM		
Name of Office:	EVANS	WA STATE		NTER	ages: (including cover)
Originator's Name:	•	Origi	phone Nu	originator's F	acsimile Number:
pproved:					
		D.F.	TAILS		
pecial Handling Instruction	nn <b>s:</b>				
·	NONE				
rief Description of Commi	unication Faxed;				
BEN,					
Surt	ASKED M	E TO FA	L ATTACHED	SHEETS TO ES FOR GREENT	YOU TO GO
SCOTT WANTED	NAM TO SCH	M AND EMARE	CONTRACTOR	TIMESNEETS TO	HIM TO REVIE
formation attached to the production, distribution,	<b>ES.</b> cover sheet is U.S. (	wak Sovernment Property	. If you are not the	Intended recipient of this	MIM TO REVE RWARD TO YOU information disclosure,
imediately to arrange for	proper disposition.		THANKS		

Brec

04/01/2009 WED 6:13 FAX

# Operational Applications Inc.

Attn: Doug Larm 13405 159<sup>th</sup> Street Court East

Puyallup WA 98374

## -Facsimile Cover Sheet--

Date Sent: 1 April 2009

TO: Ms Bev Wood

WSP

**OCIU** 

FROM: Doug Larm

Operational Applications Inc.

253-226-9564

Facsimile number: 360-704-2972

This is page 1 of 4 pages

Message:

A19-1A vouchers for approval.

#### **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 3/1/2009
 3/31/2009

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name:	EVANS, WILLIAM E.	Location:	1110 320 AVENUE	SEATTLE WA	9810
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Mar	Mo.	Day	Hrs.	Description of Services Provided
Mar	Mar	1		
Mar	Mar	2	9.5	Lead Analyst, WSP, WSFC
Mar   5   9.5   Lead Analyst, WSP, WSFC	Mar	3	9.5	Lead Analyst, WSP, WSFC
Mar	Mar	4	9.5	Lead Analyst, WSP, WSFC
Mar	Mar	5	9.5	
Mar         8         0         Regular Day Off           Mar         9         8.5         Lead Analyst, WSP, WSFC           Mar         10         8         Lead Analyst, WSP, WSFC           Mar         11         8         Lead Analyst, WSP, WSFC           Mar         12         8         Lead Analyst, WSP, WSFC           Mar         13         8         Lead Analyst, WSP, WSFC           Mar         14         0         Regular Day Off           Mar         15         0         Regular Day Off           Mar         16         9         Lead Analyst, WSP, WSFC           Mar         17         8.5         Lead Analyst, WSP, WSFC           Mar         19         8.5         Lead Analyst, WSP, WSFC           Mar         20         0         Resular Day Off           Mar         20         0         Resular Day Off           Mar         21         0         Regular Day Off           Mar         23         8.5         Lead Analyst, WSP, WSFC           Mar         24         8.5         Lead Analyst, WSP, WSFC           Mar         25         8.5         Lead Analyst, WSP, WSFC           Mar	Mar	6		
Mar	Mar	7	0	Regular Day Off
Mar         10         8         Lead Analyst, WSP, WSFC           Mar         11         8         Lead Analyst, WSP, WSFC           Mar         12         8         Lead Analyst, WSP, WSFC           Mar         13         8         Lead Analyst, WSP, WSFC           Mar         14         0         Regular Day Off           Mar         15         0         Regular Day Off           Mar         16         9         Lead Analyst, WSP, WSFC           Mar         17         8.5         Lead Analyst, WSP, WSFC           Mar         18         8.5         Lead Analyst, WSP, WSFC           Mar         19         8.5         Lead Analyst, WSP, WSFC           Mar         20         0         Reserve Duty           Mar         21         0         Regular Day Off           Mar         22         0         Regular Day Off           Mar         23         8.5         Lead Analyst, WSP, WSFC           Mar         24         8.5         Lead Analyst, WSP, WSFC           Mar         26         8.5         Lead Analyst, WSP, WSFC           Mar         27         8.5         Lead Analyst, WSP, WSFC           Mar	Mar	8	0	Regular Day Off
Mar         11         8         Lead Analyst, WSP, WSFC           Mar         12         8         Lead Analyst, WSP, WSFC           Mar         13         8         Lead Analyst, WSP, WSFC           Mar         14         0         Regular Day Off           Mar         15         0         Regular Day Off           Mar         16         9         Lead Analyst, WSP, WSFC           Mar         17         8.5         Lead Analyst, WSP, WSFC           Mar         19         8.5         Lead Analyst, WSP, WSFC           Mar         19         8.5         Lead Analyst, WSP, WSFC           Mar         20         0         Reserve Duty           Mar         21         0         Regular Day Off           Mar         21         0         Regular Day Off           Mar         23         8.5         Lead Analyst, WSP, WSFC           Mar         24         8.5         Lead Analyst, WSP, WSFC           Mar         26         8.5         Lead Analyst, WSP, WSFC           Mar         27         8.5         Lead Analyst, WSP, WSFC           Mar         28         0         Regular Day Off           Mar <th< td=""><td>Mar</td><td>9</td><td>8.5</td><td></td></th<>	Mar	9	8.5	
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Mar 30 0 Regular Day Off Mar 31 8 Lead Analyst, WSP, WSFC				
Mar 31 8 Lead Analyst, WSP, WSFC				
	Mar	30	0	Regular Day Off
Total Hours: 173				Lead Analyst, WSP, WSFC
	Total	Hours:	173	

Contractor Signature/Date

31 MAR 09

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer/Signature/Date

FORM
A19-1A
(Rev. 3/95)

DATE



#### STATE OF WASHINGTON **INVOICE VOUCHER**

		Collar 3	40
		AGENCY USE ONLY	1.1
).·	AGENCY NO	LOCATION CODE P.R. OR AU	TH. NO.
	225	341009/34107	

	136	AGENCY NAME		
Washing	ton St	ate Patrol		
Investiga	tive A	ssistance Division	•	
PO Box 2		:	•	
Olympia,	<b>WA 9</b>	8507-2347		
VEN	DOR O	R CLAIMANT (Warrant is to	be payable	e to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-28 Feb09 Analytical services for Feb 09 (Bill Evans)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

Lanne	
(SIGN IN INK) President Operational Applications Inc	21191.09
(TITLE)	(DATE)
ECEIVED BY	SERVICES RECEIVED

1-28 Feb 09

FOR AGENCY USE ONLY

WSP/SGT Jarmon

UNIT

Hour

UNIT PRICE

60.00

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QUANTITY

173

**FORM** A19-1A (Rev. 3/95)

DATE

1-31 Jan09

PREPARED BY

DOC. DATE

Doug Larm

TRANS

7/10

000

ACCOUNTING APPROVAL FOR PAYMENT

FUND



# INVOICE VOUCHER

STATE OF WASHINGTON

	AGENCY USE ONLY	14.1		- N. N
AGENCY NO	LOCATION CODE	P.R. OF	AUTH	NO.
225	341009/34107			

		AGENC	Y NAME
rton.	State	Dotroi	

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

**DESCRIPTION** 

TELEPHONE NUMBER (253)226-9564

SUB SUB OJECT

ALLOC

DATE

MEC.

Analytical services for Jan 09 (Bill Evans)

Services performed under C090433PSC

PMT DUE DATE | CURRENT DOC. NO.

PROGRAJ INDEX

APPN INDEX

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

Operational Applications Inc (TITLE) FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) DATE GOODS/SERVICES RECEIVED WSP/LT Drake 1-31 Jan 09 AMO QUANTITY UNIT **UNIT PRICE** FOR AGENCY USE ONLY 118 Hour 60.00 2 Feb 09 VENDOR MESSAGE VENDOR NUMBER 602632122 COUNTY CITY/TOW PROJECT BUDGET WAJT

WARRANT NUMBER

FOPM
A19-1A
(Rev. 3/95)



**OF WASHINGTON** INVUICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

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President, Operational Applications Inc

FEDE	RAL I.D. NO.	OR S	OCIAL	SECURITY	Y NO. (For F	Reporting	Personal S	Services Co	ontract Pay	yments to I.R.S	W	SF/S	BY/S	atrolog		DATE GOODS/SEF	mber 2010
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# **CONTRACTOR SERVICE HOURS**

**Beginning** Period:

12/1/2010 mm/dd/yr

**Ending** 12/31/2010 mm/dd/yr

Name: William E. Evans Location:

1110 3rd Avenue, Seattle, WA 98101

7			
Mo.	Day		Description of Services Provided
Dec	1	10.5	Lead Analyst, WSP, WSFC
Dec	2	10	Lead Analyst, WSP, WSFC
Dec	3	10.5	Lead Analyst, WSP, WSFC
Dec	4	0	Regular Day Off
Dec	5		Regular Day Off
Dec	6		Requested Time Off
Dec	7		Requested Time Off
Эес	8		Requested Time Off
Dec	9	0	Requested Time Off
Dec	10	0	Requested Time Off
Dec	11	Ó	Regular Day Off
Dec	12	3.5	Lead Analyst, WSP, WSFC
Dec	13	12	Lead Analyst, WSP, WSFC
Dec	14	10	Lead Analyst, WSP, WSFC
Dec	15	10	Lead Analyst, WSP, WSFC
Dec	16	10.5	Lead Analyst, WSP, WSFC
Dec	17	10	Lead Analyst, WSP, WSFC
Dec	18		Regular Day Off
Dec	19		Regular Day Off
Dec	20		Requested Time Off
Dec	21		Requested Time Off
Dec	22		Requested Time Off
Рес	23		Requested Time Off
, ec	24		Federal Holiday (Christmas)
Dec	25		Regular Day Off
Dec	26		Regular Day Off
Dec	27	0	Requested Time Off
Dec	28		Requested Time Off
Dec	29		Lead Analyst, WSP, WSFC
Dec	30	11	Lead Analyst, WSP, WSFC
Dec	31	11	Lead Analyst, WSP, WSFC
Total	Hours:	121	
	///	,	31-Dec-10 Soft ARMON
Will	Men	عمس	31-Dec-10

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Signature/Date

**FORM** A19-1A (Rev. 3/95)



#### STATE OF WASHINGTON **INVOICE VOUCHER**

AGENCY USE ONLY LOCATION CODE AGENCY NO P.R. OR AUTH. NO. 225 341009/34107

	•	
AGENCY NAME		
Washington State Patrol		INSTRUCTIONS TO VENDOR OR CLAIMANT: \$
Investigative Assistance Division		payment for materials, merchandise or services.
PO Box 2347	•	each item.
Ohmnia WA 98507-2347		No. of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state o

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

Submit this form to claim Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

20012010

DATE GOODS/SERVICES RECEIVED

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#### Washington State Patrol

## **CONTRACTOR SERVICE HOURS**

Beginning

Period:

11/1/2010 mm/dd/yr

**Ending** 11/30/2010

mm/dd/yr

Location: Name: William E. Evans 1110 3rd Avenue, Seattle, WA 98101

		<del></del>	
Mo.	Day		Description of Services Provided
Nov	1	14	Lead Analyst, WSP, WSFC
Nov	2	9	Lead Analyst, WSP, WSFC
Nov	3	8.5	Lead Analyst, WSP, WSFC
Nov	4		Lead Analyst, WSP, WSFC
Nov	5		Lead Analyst, WSP, WSFC
Nov	6		Regular Day Off
Nov	7		Regular Day Off
Nov	8		Lead Analyst, WSP, WSFC
Nov	9	9.5	Lead Analyst, WSP, WSFC
Nov	10	8	Lead Analyst, WSP, WSFC
Nov	11		Lead Analyst, WSP, WSFC
Nov	12	8	Lead Analyst, WSP, WSFC
Nov.	13		Regular Day Off
Nov	14		Regular Day Off
Nov	15	8.5	Lead Analyst, WSP, WSFC
Nov	16	8	Lead Analyst, WSP, WSFC
Nov	17		Lead Analyst, WSP, WSFC
Nov	18		Lead Analyst, WSP, WSFC
Nov	19		Requested Time Off
Nov	20		Regular Day Off
Nov	21		Regular Day Off
Nov	22		Lead Analyst, WSP, WSFC
Nov	23		Inclement Weather
Nov	24		Lead Analyst, WSP, WSFC
Nov	25		Federal Holiday (Thanksgiving)
Nov	26		Requested Time Off
Nov	27		Regular Day Off
Nov	28		Regular Day Off
Nov	29	9.5	Lead Analyst, WSP, WSFC
Nov	30	8.5	Lead Analyst, WSP, WSFC
Total	Hours:	173	

30-Nov-10

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

LANCE B LADINES
Local Reviewer Name

Local Reviewer Signature/Date

10-7-10



#### STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY AGENCY NO LOCATION CODE P.R. OR AUTH. NO. 225 341009/34107

AGENCY NAME
Washington State Patrol
Investigative Assistance Division
PO Box 2347
Olympia, WA 98507-2347
VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

Operational Applications In (TITLE)

1-31 October 2010

Ladines DATE DESCRIPTION QUANTITY UNIT **UNIT PRICE** FOR AGENCY USE ONLY 1-31 Oct 10 Analytical services for Oct 2010 (Bill Evans) 173 Hour 66.00 Services performed under C090433PSC PREPARED BY TELEPHONE NUMBER (253)226-9564 1 Nov 10 Doug Larm PMT DUE DATE REF. DOC. NO. VENDOR NUMBER USE 602632122 SUB SUB OJECT SUB CJEÇT PROJ PHAS TRANS CODE ORG SUB PROJ PROJECT FUND AMOUNT INVOICE NUMBER MOEX 8 11,418 210 271 Œ S7C1 October 001 012 ACCOUNTING APPROVAL FOR PAYMENT WARRANT NUMBER 000228

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#### **Washington State Patrol CONTRACTOR SERVICE HOURS**

Beginning Period:

10/1/2010 mm/dd/yr

**Ending** 10/31/2010 mm/dd/yr

Location: Name: William E. Evans 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hrs.	Description of Services Provided
Oct	1	8	Lead Analyst, WSP, WSFC
Oct	2		Regular Day Off
Oct	3		Regular Day Off
Oct	4	8.5	Lead Analyst, WSP, WSFC
Oct	5	8.5	Lead Analyst, WSP, WSFC
Oct	6	9	Lead Analyst, WSP, WSFC
Oct	7	8.5	Lead Analyst, WSP, WSFC
Oct	8	9	Lead Analyst, WSP, WSFC
Oct	9		Regular Day Off
Oct	10	0	Regular Day Off
Oct	11	9.5	Lead Analyst, WSP, WSFC
Oct	12	9	Lead Analyst, WSP, WSFC
Oct	13	9	Lead Analyst, WSP, WSFC
Oct	14	7.5	Lead Analyst, WSP, WSFC
Oct	15		Reserve Duty
Oct	16		Regular Day Off
Oct	17	0	Regular Day Off
Oct	18	9	Lead Analyst, WSP, WSFC
Oct	19	8.5	Lead Analyst, WSP, WSFC
Oct	20	8.5	Lead Analyst, WSP, WSFC
Oct	21	9	Lead Analyst, WSP, WSFC
Oct	22	8.5	Lead Analyst, WSP, WSFC
Oct	23		Regular Day Off
Oct	24		Regular Day Off
Oct	25	9	Lead Analyst, WSP, WSFC
Oct	26	9	Lead Analyst, WSP, WSFC
Oct	27	9	Lead Analyst, WSP, WSFC
Oct	28	9	Lead Analyst, WSP, WSFC
Oct	29	7	Lead Analyst, WSP, WSFC
Oct	30	0	Regular Day Off
Oct	31		Regular Day Off
Total	Hours:	173/	

29-Oct-10

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE. (To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A) ANCE B LADINES

Local Reviewer Name

Local Reviewer Signature/Date

000229

FORM A19-1A (Rev. 3/95)



## STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

AGENCY NAME	
Washington State Patrol	
Investigative Assistance Division	
PO Box 2347	
Olympia, WA 98507-2347	
VENDOR OR CLAIMANT Werendings to be	aushla tal

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handigap, religion, or Vietnam era or disabled veterans status.

(SIGN IN INK)

President Operational Applications Inc
(TITLE)

50672010

(DATE)

000230

RECEIVED BY WAT THE WASPINGT SGT FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) 1-30 September 2010 Ladines AMO QUANTITY UNIT PRICE DATE DESCRIPTION UNIT FOR AGENCY USE ONLY UNT 173 Hour 63.00 1-30 Sep10 Analytical services for Sep 2010 (Bill Evans) Services performed under C090433PSC Q 4 PREPARED BY TELEPHONE NUMBER AGENCY APPRO (253)226-9564 5 Oct 10 Doug Larm PMT DUE DATE VENDOR MESSAGE REF. DOC. NO. VENDOR NUMBER USE 602632122 OUNTY CITY/TOWN SUB SUB CUECT SUB OJECT SUB PROJ PROJ PHAS TRANS ORG NDEX PROJECT INVOICE NUMBER FUND AMOUNT BUDGET ALLOG 810,899 -Ü 210 271 012 001 ACCOUNTING APPROVAL FOR PAYMENT WARRANT TOTAL WARRANT NUMBER

#### **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 9/1/2010 9/30/2010 mm/dd/yr mm/dd/yr

Name:	William E. Evans	Location:	1110 3rd Avenue, Seattle, WA 98101

Description of Services Provided
Lead Analyst, WSP, WSFC
Lead Analyst, WSP, WSFC
Lead Analyst, WSP, WSFC
Regular Day Off
Regular Day Off
Lead Analyst, WSP, WSFC
Regular Day Off
Regular Day Off
Lead Analyst, WSP, WSFC
Lead Analyst, WSP, WSFC
Lead Analyst, WSP, WSFC
Reserve Duty
Reserve Duty
Regular Day Off
Regular Day Off
Lead Analyst, WSP, WSFC
Lead Analyst, WSP, WSFC
Lead Analyst, WSP, WSFC
Medical Appointment
Lead Analyst, WSP, WSFC
Regular Day Off
Regular Day Off
Lead Analyst, WSP, WSFC
1

Contractor Signature/Date

30-Sep-10

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

FORM A19-1A (Rev. 3/95)



#### STATE OF WASHINGTON **INVOICE VOUCHER**

		1.7	AGENCY USE ONLY	·
٠.	AGENCY NO		LOCATION CODE	P.R. OR AUTH. NO.
	225		341009/34107	

AGENCY NAME	
Washington State Patrol	
Investigative Assistance Division	
PO Box 2347	}
Olympia, WA 98507-2347	
VENDOR OR CLAIMANT Marret is to be	/ot aldeve

Services performed under C090433PSC

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT:	Submit this form to claim
payment for materials, merchandise or services.	Show complete detail for
each item.	

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handjeap, religion, or Vietnam era or disabled veterans

25GP2010 (TITLE) FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) E GOODS/SERVICES RECEIVED WSP/SC 1-31 August 2010 DATE QUANTITY UNIT **UNIT PRICE** FOR AGENCY USE ONLY DESCRIPTION UNT 173 Hour 63.00 1-31 Aug 10 Analytical services for Aug 2010 (Bill Evans)

PREPARED BY TELEPHONE NUMBER (253)226-9564 2 Sep 10 Doug Larm USE UBI NUMBER PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. VENDOR NUMBER VENDOR MESSAGE

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#### **Washington State Patrol**

# **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 8/1/2010
 8/31/2010

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name:	William E. Evans	Location:	1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Aug	1	0	Regular Day Off
Aug	2	7	Lead Analyst, WSP, WSFC
Aug	3		Lead Analyst, WSP, WSFC
Aug	4	9.5	Lead Analyst, WSP, WSFC
Aug	5		Reserve Duty
Aug	6		Reserve Duty
Aug	7		Regular Day Off
Aug	8		Regular Day Off
Aug	9	9.5	Lead Analyst, WSP, WSFC
Aug	10	9.5	Lead Analyst, WSP, WSFC
Aug	11	9.5	Lead Analyst, WSP, WSFC
Aug	12	9.5	Lead Analyst, WSP, WSFC
Aug	13	9.5	Lead Analyst, WSP, WSFC
Aug	14	0	Regular Day Off
Aug	15		Regular Day Off
Aug	16	10	Lead Analyst, WSP, WSFC
Aug	17	10	Lead Analyst, WSP, WSFC
Aug	18	10	Lead Analyst, WSP, WSFC
Aug	19	4	Lead Analyst, WSP, WSFC
Aug	20	0	Reserve Duty
Aug	21	0	Regular Day Off
Aug	22		Regular Day Off
Aug	23	10	Lead Analyst, WSP, WSFC
Aug	24	10	Lead Analyst, WSP, WSFC
Aug	25	10	Lead Analyst, WSP, WSFC
Aug	26	8.5	Lead Analyst, WSP, WSFC
Aug	27	9	Lead Analyst, WSP, WSFC
Aug	28		Regular Day Off
Aug	29	0	Regular Day Off
Aug	30	9	Lead Analyst, WSP, WSFC
Aug	31	9	Lead Analyst, WSP, WSFC
	Hours:	173	
•/	11		

Contractor Signature/Date

31-Aug-10

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

ocal Reviewer Name

Local Reviewer Signature/Date

000233





### **INVOICE VOUCHER**

STATE OF \*VASHINGTON

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AGENCY NAME
Washington State Patrol
Investigative Assistance Division
PO Box 2347
Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

13405 159	5 159 <sup>th</sup> Street Court East lup, Washington 98374										BY _		111411-								
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DATE	DESCRIPTION								QUAN	ITITY	Ladir		UNIT	PRICE	AMC	,				USE ONLY	
1-30 Jun 10	Analytical services for June 2010 (Bill Evans)								17	173				63.00							
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ACCOUNTING AF	PRC	VAL FOR	PAYME	NT	<u>l</u>		<u></u>		DATE						W	ARRANT 8/1	TOTAL		WA	RRANT NUMB	ER

# **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 6/1/2010
 6/30/2010

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name:	William E. Evans	Location:	1110 3rd Avenue, Seattle, WA 98101	

Jun         2         9         Lo           Jun         3         9         Lo           Jun         4         5.5         Lo           Jun         5         0         R           Jun         6         0         R           Jun         7         9         Lo           Jun         9         9         Lo           Jun         10         9         Lo           Jun         11         9         Lo           Jun         12         0         R           Jun         13         0         R           Jun         14         9         Lo           Jun         15         9         Lo           Jun         16         9         Lo           Jun         19         0         R           Jun         20         0         R           Jun         21         9         Lo           Jun         23         9         Lo           Jun         24         5         Lo           Jun         25         0         R           Jun         26         0	Hrs. Description of Services Provided
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[ Jun 30 9 14	
[ Juli	9 Lead Analyst, WSP, WSFC
Total Hours: 173	73 /

Contractor Signature/Date

30 JUNE 2010

Local Reviewer Name

Local Reviewer Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

m-3 000

000235

FORM A19-1A (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

AGENCY NO LOCATION CODE P.R. OR AUTH. NO. 225 341009/34107

AGENCY	NAME
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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT:	Submit this form to claim
payment for materials, merchandise or services.	Show complete detail for
each item.	-

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY Alle

(TITLE) FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) DATE GOODS/SERVICES RECEIVED 6-3-10 1-31 May 2010 QUANTITY DATE **DESCRIPTION** UNIT **UNIT PRICE** FOR AGENCY USE ONLY LINT 1-31 May 10 Analytical services for May 2010 (Bill Evans) 173 Hour 63.00 Services performed under C090433PSC CY APPROV PREPARED BY TELEPHONE NUMBER DATE 4110 (253)226-9564 3 Jun 10 Doug Larm UBI NUMBER VENDOR MESSAGE DOC. DATE PMT DUE DATE REF. DOC. NO. VENDOR NUMBER USE 602632122 COUNTY CITY/TOWN REF DOC SUF TRANS CODE SUB OJECT ORG INDEX SUB PROJ PROJ PHAS PROJECT APPN INDEX BUDGET INVOICE NUMBER FUND PROGRAM INDEX AMOUNT MOS 210 271 CE WAJB 011 001  $\varsigma$ 6 DATE WARRANT NUMBER ACCOUNTING APPROVAL FOR PAYMENT

#### **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

Period: 5/1/2010

mm/dd/yr

- 5/31/2010 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
May	1		Lead Analyst, WSP, WSFC
May	2		Lead Analyst, WSP, WSFC
May	3		Lead Analyst, WSP, WSFC
May	4		Lead Analyst, WSP, WSFC
May	5	10	Lead Analyst, WSP, WSFC
May	6		Lead Analyst, WSP, WSFC
May	7		Lead Analyst, WSP, WSFC
May	8		Regular Day Off
May	9		Regular Day Off
May	10		Reserve Duty
May	11		Reserve Duty
May	12	0	Reserve Duty
May	13	0	Reserve Duty
May	14	0	Reserve Duty
May	15		Regular Day Off
May	16		Regular Day Off
May	17		Lead Analyst, WSP, WSFC
May	18		Lead Analyst, WSP, WSFC
May	19	10.5	Lead Analyst, WSP, WSFC
May	20	9	Lead Analyst, WSP, WSFC
May	21	12	Lead Analyst, WSP, WSFC
May	22	0	Regular Day Off
May	23	0	Regular Day Off
May	24	11.5	Lead Analyst, WSP, WSFC
May	25	11.5	Lead Analyst, WSP, WSFC
May	26	12.5	Lead Analyst, WSP, WSFC
May	27	11.5	Lead Analyst, WSP, WSFC
May	28	8.5	Lead Analyst, WSP, WSFC
May	29		Regular Day Off
May	30	0	Regular Day Off
May	31	0	⊮oliday Day Off
Total	Hours:	173 -	
		_	

Contractor Signature/Date

28 NIAY 2010

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

<del>000237</del>

FORM a19-1a



STATE OF WASHINGTON

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)

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#### WUNITED

My itineraries > My itinerary details Itinerary details

**Premier Executive** Redeem miles! View my itine

Itinerary: Seattle, WA (SEA) to Orlando, FL (MCO)

Confirmation number: MVCKDT

> Change itinerary

> View E-receipt

Ticket price: USD 475.80

> Seats > Upgrade > Print Itinerary

**Travel Options** 

> Refund

**Email itinerary** 

Send

Flight info

- Hide details

Seattle, WA (SEA)

Orlando, FL (MCO)

Flight

Depart

Arrive

Cabin

Seats

₩ United 0262

**SEA 10:52 PM** Sat, May 1, 2010 IAD 06:55 AM Sun, May 2, 2010 Arrives next day

Economy (W)

Flight:

Confirmed Upgrade:

Pending 12F

Equipment: 320 | Duration: 5h 3m | Non-stop | Fare code: WA14QN

Traveled miles: 2306 | Award miles: 2,306 | Food for Purchase

Download to calendar

>>> connecting to >>>

**W** United 0379

Operated by:

IAD 08:15 AM Sun, May 2, 2010 MCO 10:30 AM Sun, May 2, 2010 Economy (W)

Flight: Confirmed

Upgrade:

Pending 12F

Equipment: 320 | Duration: 2h 15m | Non-stop | Fare code: WA14QN

Traveled miles: 756 | Award miles: 758 | No Meal Service Download to calendar

Orlando, FL (MCO)

**W** United 0199

Seattle, WA (SEA)

**Flight** 

Depart

Arrive

Cabin

Seats

MCO 01:44 PM ORD 03:40 PM Economy (S) Fri, May 7, 2010 Fri, May 7, 2010

Flight: Confirmed Upgrade: Pending 12F

Equipment: 320 | Duration: 2h 56m | Non-stop | Fare code: SA14CS Traveled miles: 1005 | Award miles: 1,005 | Food for Purchase Download to calendar

>>> connecting to >>>

(III) United 0905 Operated by:

ORD 05:51 PM Fri, May 7, 2010 SEA 08:15 PM Fri. May 7, 2010 Economy (S)

Flight: Confirmed

Upgrade: Pending 16F

Equipment: 752 | Duration: 4h 24m | Non-stop | Fare code: SA14CS Traveled miles: 1721 | Award miles: 1,720 | Food for Purchase

000239

Download to calendar

Check-in information

Please note that valid, government-issued photo identification must be presented at check-in.

View ticket price breakdown

**Passengers** 

Passenger

Mileage

WILLIAM E MR EVANS Phone:

Flight: 0262 - 12F Flight: 0379 - 12F

Mileage Plus: 03135337659

Email: william.evans1@us.army.mil Secure Flight data complete

Flight: 0199 - 12F Flight: 0905 - 16F

Review

Change seats

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USD475.80

Subject Fwd: Receipt for Your Payment to LEIU From

Date Friday, March 19, 2010 12:27

To "Bill Evans (work)" <william.evans1@us.army.mil> , Bill Evans <evans.bill@gmail.com>

-- Forwarded message --

From: service@paypal.com <service@paypal.com> Date: Fri, Mar 19, 2010 at 10:03 AM

Subject: Receipt for Your Payment to LEIU To: Cynthia Evans <evans.cindy@gmail.com>

Mar 19, 2010 10:03:01 PDT Transaction ID: 12D04927HA835515D

Hello Cynthia Evans,

You sent a payment of \$425.00 USD to LEIU (bob.morehouse@doj.ca.gov)

It may take a few moments for this transaction to appear in your account.

Merchant

LEIU

bob.morehouse@doj.ca.gov

Instructions to merchant

You haven't entered any instructions.

Shipping address - confirmed

Shipping details

The seller hasn't provided any shipping details yet.

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Description		

Description	Unit price Q	ty	Amount
IALEIA Registration Item# Evans, William E	\$425.00 USD	1	\$425.00 USD
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	Subtota	al	\$425.00 USD
	Tota	ıl	\$425.00 USD
•	Paymen	ıt	\$425.00 USD
	Payment cent to bob morehouse@dei.aa.aa		J 120.00 00D

Payment sent to bob.morehouse@doj.ca.gov

Issues with this transaction?

You have 45 days from the date of the transaction to open a dispute in the Resolution Center.

(?) Questions? Go to the Help Center at: www.paypal.com/help.

Please do not reply to this email. This mailbox is not monitored and you will not receive a response. For assistance, log in to your PayPal account and click Help in the top right corner of any PayPal page.

To receive email notifications in plain text instead of HTML, log in to your PayPal account, go to your Profile, and click Notifications.



in the WALT DISNEY WORLD' Resort

Post Office Box 22781
1751 Hotel Plaza Blvd. • Lake Buena Vista, FL 32830
Phone (407) 827-4000 • Fax (407) \$27-3890
Reservations
www.hilton-wdwv.com or 1 800 HILTONS

EVANS, WILLIAM

Name & Address

Room 1037/D2 Arrival Date 5/2/2010 Departure Date 5/7/2010

5/2/2010 5:21:00PM 5/7/2010 9:59:00AM I

Adult/Child Room Rate 1/0 169.00

RATE PLAN

C-LEI

HH# 359329938 GOLD AL: UA #03135337659

CAR:

CONFIRMATION NUMBER: 3380811399

5/7/2010

PAGE 1

REF. NO CHARGES CREDITS BALANCE DESCRIPTION DATE V\$ \*4139 SCHE01 5972947 \$190.13 3/19/2010 VAYLLON 6091001 \$169.00 5/2/2010 **GUEST ROOM** , i 6091001 VAYLLON. ·\$21:13 5/2/2010 **ROOM TAX (12.5%)** \$169.00 5/3/2010 VAYLLON 6093599 **GUEST ROOM** VAYLLON 6093599 \$21.13 5/3/2010 **ROOM TAX (12.5%)** VAYLLON 6095899 \$169.00 5/4/2010 **GUEST ROOM** 6095899 5/4/2010 **ROOM TAX (12.5%)** VAYLLON, \$21.13 <u>.</u> 11 5/5/2010 JMORA01 6098259 \$169.00 **GUEST ROOM** 5/5/2010 **ROOM TAX (12.5%)** JMORA01 6098259 \$21.13 JMORA01 6100631 \$169.00 5/6/2010 **GUEST ROOM** \$21.13; JMORA01 6100631 5/6/2010 **ROOM TAX (12.5%)** VLAURE: 6102257 \$760.52 5/7/2010 VS \*4139 \$0.00 BALANCE EXPENSE REPORT SUMMARY 145.55 05/05/10 05/02/10 05/03/10 .. 05/04/10 ROOM & TAX \$190.13 \$190.13 \$190.13 \$190.13 DAILY TOTAL \$190.13 \$190.13 \$190.13 \$190.13. 10.00 05/06/10 STAY TOTAL ROOM & TAX DAILY TOTAL \$950,65 \$190.13 \$950.65 \$190.13 ACCOUNT NO. DATE OF CHARGE FOLIO NO./CHECK NO. 05/02/10 5:21:00PM INITIAL CARD MEMBERS NAME 815213 A ESTABLISHMENT NO. & LOCATION EN INNERSON ACTION TO THANHART TO CARD HOLDER FOR PAYMENT PURCHASES & SERVICES 03657C **EVANS, WILLIAM** THANK YOU FOR STAYING WITH US. PLEASE, VISIT ... TIPS & MISC. WWW.HILTON-WDWV.COM TO MAKE YOUR NEXT RESERVATION WITH US. TOTAL AMOUNT WE HOPE YOU ENJOYED YOUR STAY AND WILL RETURN HOME RCHANGS A PRODUSERVICES PURCHASED ON THE CARD BHALL NOT BE RESOLU OR RETURNED FOR A CASH REFINE PAYMENT DUE UPON RECEIPT



















MASTERPARK LOT B 2907 S 170TH ST SEATAC, WA 98188 206-444-0500

05/07/201020:44:36 Ruby

CUSTOMER RECEIPT

Ticket: 086309

20:39 Arrival Date: 05/01/2010 20:44 Request Date: 05/07/2010

81.00 Park Charge:

0.00

Discount: 0.00 Services:

2.50 Tran Surchrg: 3.00 City Tax:

8.22 Sales Tax:

> 94.72 Total:

VISA

WILLIAM EVANS

Card Number: \*\*\*\*\*\*\*\*\*4139

94.72 Amount:

Approved: 00763C

#### MASTERPARK LOT B

Thank You For Using Our Valet Parking Services. For Any Questions Or Comments, Please Call MasterPark Airport Parking At 206-444-0500.

0000795028 Ticket/Tranact: 086309

0186 Lic/St/Park: 955RZF WA

Model/Make: FORD FORD GOLD

Garage Loc: LOT B Request Loc: VALET

Arrival Date: 05/01/2010 20:39 Request Date: 05/07/2010 20:32

Driver's Name: EVANS, WILLIAM Guest Type: 0009 GOV/MIL EMP

81.00Amt Tendered: Parking Charge: 94.72 0.00 Discounts:

0.00 Services:

2.50 Trans Surcharge:

3.00 City Tax: 8.22

Sales Tax:

CC: 4139 94.72 Amount Paid:

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FORM



# STATE OF WASHINGTON

AGENCY USE ONLY

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(Rev. 3/95)			<u> </u>					ـــا	- [		2	225		-   :	341	009/3	3410	7	
Washington Investigate PO Box 2 Olympia,	ive Ass 347 WA 98 DOR OR Larm Pal App 9th Street	e Patistan 507-2 CLAI	2347 MANT ons Incourt Ea	NAM vision (Warra	iE .					paymeach Vend Items or ser furnis discri	RUC: ent foitem. or's ( and i vices hed a minat	TIONS or mate	icate. listed to shed to service ecause nandica	I here hereico the cos re	OR Chand hand eby con are State nder nder ge, so	certify un proper o of Wasied have ex, marit	MANT ervices der pe charge hingtoi been i al stati	enalty s for r n, and provid us, ra ra or	omit this form to claim ow complete detail for of perjury that the material, merchandise if that all goods led without ce, creed, color, disabled veterans
											Pres	sident.		ional ( ITLE)	Applic 0	ations Inc	<del></del>	12	(DATE)
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DATE			DESC	RIPTI	ION			QUANTI	ITY	UN	π	UNIT	PRIC		MO	į	FOR A	GEN	CY USE ONLY
1-30 Apr 10	Analytic	al servi	ces for	April 2	010 (Bill	Evans	5)	173		Но	ur		63.0	0					
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DEE .	<u> </u>	I MAST	ER INDEX	<del>,                                     </del>	1 10		WORKCLA	SS COUNTY	Tenv	VITOVANI					<u>.                                    </u>		TAX		602632122
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CCC	UNTING A	PPR	OVAL FO	R PAYME	Νİ		L		·	DATE			·	<del>-</del> -	WARRANT TOTAL BUYER STORY	WARRANT NUMBER

# Washington State Patrol CONTRACTOR SERVICE HOURS

Beginning
iod: 4/1/2010

Ending 4/3/2010

Period: 4/1/2010 mm/dd/yr

4/3/2010 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

<del></del>			
Mo.	Day		Description of Services Provided
Apr	1		Vacation
Apr	2		Vacation
Apr	3		Regular Day Off
Apr	4		Regular Day Off
Apr	5		Lead Analyst, WSP, WSFC
Apr	6		Lead Analyst, WSP, WSFC
Apr	7	10.5	Lead Analyst, WSP, WSFC
Apr	8	10	Lead Analyst, WSP, WSFC
Apr	9		Lead Analyst, WSP, WSFC
Apr	10		Regular Day Off
Apr	11		Regular Day Off
Apr	12		Lead Analyst, WSP, WSFC
Apr	13		Lead Analyst, WSP, WSFC
Apr	14		Lead Analyst, WSP, WSFC
Apr	15	11.5	Lead Analyst, WSP, WSFC
Apr	16		Reserve Duty
Арг	17		Regular Day Off
Apr	18		Regular Day Off
Арг	19		Lead Analyst, WSP, WSFC
Apr	20		Lead Analyst, WSP, WSFC
Apr	21		Lead Analyst, WSP, WSFC
Арг	22		Reserve Duty
Apr	23		Reserve Duty
Арг	24		Regular Day Off
Apr	25		Regular Day Off
Apr	26		Lead Analyst, WSP, WSFC
Apr	27	10	Lead Analyst, WSP, WSFC
Apr	28	9	Lead Analyst, WSP, WSFC
Apr	29	9	Lead Analyst, WSP, WSFC
Apr	30	9	Lead Analyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date

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Syt. Debra Jelcick Local Reviewer Name

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.
(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Maclub 4/30/2010

000245

000246

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A19-1A
(Rev. 3/95)



#### STATE OF WASHINGTON INVOICE YOUCHER

<del></del>	A NCY USE ONLY	,
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AGENCY NAME
Washington State Patrol
nvestigative Assistance Division
PO Box 2347
Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, craed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

President Operational Applications In

(TITLE) FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Psymonts to I.R.S.) DATE GOODS/SERVICES RECEIVED 1-31 Mar 2010 **UNIT PRICE** DATE DESCRIPTION QUANTITY UNIT FOR AGENCY USE ONLY 173 1-31 Mar 10 Analytical services for March 2010 (Bill Evans) 63.00 Hour Services performed under C090433PSC AGENCY APPROVAL PREPARED BY TELEPHONE NUMBER DATE 6110 Doug Larm (253)226-9564 5 Apr 10 DOC. DATE CURRENT DOC. NO. VENDOR NUMBER PMT DUE DATE REF. DOC, NO. VENDOR MESSAGE UBI NUMBER USE 602632122 TAY I CITY/TOWN MASTI APPN INDEX SUB SUB SUB REF DOC SUF QUECT PROJ PHAS ORG FUND BUDGET PROJECT AMOUNT INVOICE NUMBER PROGRAM 210 CE 001 011 WAT 9) ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT NUMBER

#### **Washington State Patrol**

### **CONTRACTOR SERVICE HOURS**

Beginning
Period: 3/1/2010 -

mm/dd/yr

- 3/31/2010 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Mar	1	11	Lead Analyst, WSP, WSFC
Mar	2	11	Lead Analyst, WSP, WSFC
Mar	3	10	Lead Analyst, WSP, WSFC
Mar	4		Lead Analyst, WSP, WSFC
Маг	5		Reserve Duty
Mar	6	0	Regular Day Off
Mar	7	0	Regular Day Off
Mar	8	11.5	Lead Analyst, WSP, WSFC
Mar	9	11.5	Lead Analyst, WSP, WSFC
Mar	10	10.25	Lead Analyst, WSP, WSFC
Mar	11		Lead Analyst, WSP, WSFC
Mar	12		Lead Analyst, WSP, WSFC
Mar	13		Regular Day Off
Mar	14		Regular Day Off
Mar	15		Lead Analyst, WSP, WSFC
Mar	16		Lead Analyst, WSP, WSFC
Mar	17		Lead Analyst, WSP, WSFC
Mar	18		Lead Analyst, WSP, WSFC
Mar	19		Lead Analyst, WSP, WSFC
Mar	20		Regular Day Off
Mar	21		Regular Day Off
Mar	22		Reserve Duty
Mar	23		Lead Analyst, WSP, WSFC
Mar	24	0	Vacation
Mar	25	• 0	Vacation
Mar	26	0	Vacation
Mar	27	0	Vacation
Mar	28	0	Vacation
Mar	29	0	Vacation
Mar	30	0	Vacation
Mar	31	0 ,	Vacation
Total	Hours:	173√	

Millian Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Name

Local Reviewer Signature/Date

000247

FORM A19-1A (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENCY NO | LOCATION CODE | P.R. OR AUTH. NO.

225 | 341009/34107 |

· · · · ·		AGENCY NAME		15%.
Washing	ton State	Patrol		
Investiga	itive Assis	tance Division	•	
PO Box	2347	•		
Olympia,	, WA 9850	7-2347		
VEN	DOR OR C	LAIMANT (Warrar	nt is to be p	ayable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

Y (Spantin INK)

President Operational Applications Inc.

(TITLE)

WSP/SGT/Jarmon

(DATE)

DATE GOODS/SERVICES RECEIVED

1-28 Feb 2010

	ATE				DESC	RIPTIC	М			QUANTITY	UNIT	UNIT	PRICE	AMO UNT		FOR A	AGENCY	USE ONLY	
28	Feb 10	An	alytica	al servi	ces for F	ebrua	ry 2010	(Bill Eva	ns)	173	Hour		63.00				,	-	
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### **CONTRACTOR SERVICE HOURS**

Period:

2/1/2010 mm/dd/yr 2/28/2010 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.   Day   Hrs.   Description of Services Provided				
Feb   2   8   Lead Analyst, WSP, WSFC     Feb   3   8   Lead Analyst, WSP, WSFC     Feb   4   8   Lead Analyst, WSP, WSFC     Feb   5   0   Reserve Duty     Feb   6   0   Regular Day Off     Feb   7   0   Regular Day Off     Feb   8   8   Lead Analyst, WSP, WSFC     Feb   9   8   Lead Analyst, WSP, WSFC     Feb   10   8   Lead Analyst, WSP, WSFC     Feb   11   8   Lead Analyst, WSP, WSFC     Feb   12   12   Lead Analyst, WSP, WSFC     Feb   13   12   Lead Analyst, WSP, WSFC     Feb   14   0   Regular Day Off     Feb   15   0   Regular Day Off     Feb   16   0   Regular Day Off     Feb   17   13   Analyst, WSP, WSFC     Feb   18   12   Analyst, WSP, WSFC     Feb   19   0   Regular Day Off     Feb   20   0   Regular Day Off     Feb   21   0   Regular Day Off     Feb   22   0   Regular Day Off     Feb   23   12   Lead Analyst, WSP, WSFC     Feb   24   12   Lead Analyst, WSP, WSFC     Feb   25   12   Lead Analyst, WSP, WSFC     Feb   26   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0   Regular Day Off     Feb   28   12   Lead Analyst, WSP, WSFC     Feb   27   0 Regular Day Off     Feb   28   28   28   28   28   28	Mo.	Day	Hrs.	
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Feb   5	Feb	3	8	
Feb   6	Feb	4	-	
Feb         7         0         Regular Day Off           Feb         8         8         Lead Analyst, WSP, WSFC           Feb         9         8         Lead Analyst, WSP, WSFC           Feb         10         8         Lead Analyst, WSP, WSFC           Feb         11         8         Lead Analyst, WSP, WSFC           Feb         12         12         Lead Analyst, WSP, WSFC           Feb         13         12         Lead Analyst, WSP, WSFC           Feb         14         0         Regular Day Off           Feb         15         0         Regular Day Off           Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12				
Feb   8	Feb	6		
Feb   9	Feb	7	0	
Feb         10         8         Lead Analyst, WSP, WSFC           Feb         11         8         Lead Analyst, WSP, WSFC           Feb         12         12         Lead Analyst, WSP, WSFC           Feb         13         12         Lead Analyst, WSP, WSFC           Feb         14         0         Regular Day Off           Feb         15         0         Regular Day Off           Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         25         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27	Feb	8	8	
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Feb         12         12         Lead Analyst, WSP, WSFC           Feb         13         12         Lead Analyst, WSP, WSFC           Feb         14         0         Regular Day Off           Feb         15         0         Regular Day Off           Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         25         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27         0         Regular Day Off           Feb         28         12         Lead Analyst, WSP, WSFC	Feb	10		
Feb         13         12         Lead Analyst, WSP, WSFC           Feb         14         0         Regular Day Off           Feb         15         0         Regular Day Off           Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27         0         Regular Day Off           Feb         28         12         Lead Analyst, WSP, WSFC	Feb	11		
Feb         14         0         Regular Day Off           Feb         15         0         Regular Day Off           Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         25         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27         0         Regular Day Off           Feb         28         12         Lead Analyst, WSP, WSFC	Feb	12	12	Lead Analyst, WSP, WSFC
Feb         15         0         Regular Day Off           Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         25         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27         0         Regular Day Off           Feb         28         12         Lead Analyst, WSP, WSFC	Feb	13		
Feb         16         0         Regular Day Off           Feb         17         13         Analyst, WSP, WSFC           Feb         18         12         Analyst, WSP, WSFC           Feb         19         0         Regular Day Off           Feb         20         0         Regular Day Off           Feb         21         0         Regular Day Off           Feb         22         0         Regular Day Off           Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         25         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27         0         Regular Day Off           Feb         28         12         Lead Analyst, WSP, WSFC	Feb	14		
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Feb         23         12         Lead Analyst, WSP, WSFC           Feb         24         12         Lead Analyst, WSP, WSFC           Feb         25         12         Lead Analyst, WSP, WSFC           Feb         26         12         Lead Analyst, WSP, WSFC           Feb         27         0         Regular Day Off           Feb         28         12         Lead Analyst, WSP, WSFC	Feb	21		
Feb     24     12     Lead Analyst, WSP, WSFC       Feb     25     12     Lead Analyst, WSP, WSFC       Feb     26     12     Lead Analyst, WSP, WSFC       Feb     27     0     Regular Day Off       Feb     28     12     Lead Analyst, WSP, WSFC	Feb			
Feb     25     12     Lead Analyst, WSP, WSFC       Feb     26     12     Lead Analyst, WSP, WSFC       Feb     27     0     Regular Day Off       Feb     28     12     Lead Analyst, WSP, WSFC	Feb	23		
Feb     26     12     Lead Analyst, WSP, WSFC       Feb     27     0     Regular Day Off       Feb     28     12     Lead Analyst, WSP, WSFC	Feb	24		
Feb 27 0 Regular Day Off Feb 28 12 Lead Analyst, WSP, WSFC	Feb		12	
Feb 28 12 Lead Analyst, WSP, WSFC	Feb	26	12	Lead Analyst, WSP, WSFC
	Feb	27	0	Regular Day Off
	Feb	28	12	Lead Analyst, WSP, WSFC
Total Hours: 173				

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewef Signature/Date

FORM
A19-1A
(Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

: : : : : : : : : : : : : : : : : : :	AGENCY USE ONLY	61 (4)
AGENCY NO	LOCATION CODE	P.R. OR AUTH, NO.
225	341009/34107	

<b>AGENCY</b>	N	AME
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Washington State Patrol
Investigative Assistance Division
PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, hapdicap, religion, or Vietnam era or disabled veterans status.

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### **CONTRACTOR SERVICE HOURS**

Period: 1/1/2010 mm/dd/yr

1/31/2010 mm/dd/yr

Name: WILLIAM E. EVANS Location: 1110 BROANEME SEATTLE WA 98101

1			
Mo.	Day		Description of Services Provided
Jan			Lead Analyst, WSP, WSFC
Jan	2		Regular Day Off
Jan	3		Lead Analyst, WSP, WSFC
Jan	4		Lead Analyst, WSP, WSFC
Jan	5		Lead Analyst, WSP, WSFC
Jan	6		Lead Analyst, WSP, WSFC
Jan	7		Lead Analyst, WSP, WSFC
Jan	8		Reserve Duty
Jan	9		Regular Day Off
Jan	10		Regular Day Off
Jan	11		Lead Analyst, WSP, WSFC
Jan	12		Reserve Duty
Jan	13		Reserve Duty
Jan	14		Reserve Duty
Jan	15	10.5	Lead Analyst, WSP, WSFC
Jan	16		Regular Day Off
Jan	17		Regular Day Off
Jan	18		Lead Analyst, WSP, WSFC
Jan	19	10.5	Lead Analyst, WSP, WSFC
Jan	20		Lead Analyst, WSP, WSFC
Jan	21		Lead Analyst, WSP, WSFC
Jan	22	11	Lead Analyst, WSP, WSFC
Jan	23	0	Regular Day Off
an	24		Regular Day Off
Jan	25	13.5	Lead Analyst, WSP, WSFC
Jan	26	5.5	Lead Analyst, WSP, WSFC
Jan	27	10	Lead Analyst, WSP, WSFC
Jan	28	11	Lead Analyst, WSP, WSFC
Jan	29	10.5	Lead Analyst, WSP, WSFC
Jan	30		Regular Day Off
Jan	31		Regular Day Off
Total F		173	

Williams Jans 29 JAN 2010

Contractor Signature/Date

LANCE 13 LADANES

Local Reviewer Name

000251

Local Reviewer Signature/Date

FOF\*\* A19-1A (Rev. 3/95)



# TE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENC: NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, bandicap, religion, or Vietnam era or disabled veterans status.

BY MAGNINION

President, Operational Applications Inc. 30 NEC 2016
(TITLE) (DATE)

TE GOODS/SERVICES RECEIVED

-31 Dec 2011

DATE											<u>~~</u>		// //		<u> </u>	`	
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### **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

**Beginning** Period:

12/1/2011 mm/dd/yr

12/31/2011 mm/dd/yr

**Ending** 

Name: Location: 1110 3rd Avenue, Seattle, WA 98101 William E. Evans

		<del></del>	
Mo.	Day		Description of Services Provided
Dec	1		Lead Analyst, WSP, WSFC
Dec	2		Lead Analyst, WSP, WSFC
Dec	3		Regular Day Off
Dec	4		Regular Day Off
Dec	5		Reserve Duty
Dec	6		Reserve Duty
Dec	7		Reserve Duty
Dec	8		Reserve Duty
Dec	9		Reserve Duty
Dec	10		Regular Day Off
Dec	11		Regular Day Off
Dec	12		Lead Analyst, WSP, WSFC
Dec	13	11	Lead Analyst, WSP, WSFC
Dec	14	9	Lead Analyst, WSP, WSFC
Dec	15		Lead Analyst, WSP, WSFC
Dec	16		Reserve Duty
Dec	17		Regular Day Off
Dec	18		Regular Day Off
Dec	19		Lead Analyst, WSP, WSFC
Dec	20	11.5	Lead Analyst, WSP, WSFC
Dec	21	11	Lead Analyst, WSP, WSFC
Dec	22	11	Lead Analyst, WSP, WSFC
Dec	23	11	Lead Analyst, WSP, WSFC
Dec	24	2	Lead Analyst, WSP, WSFC
Dec	25	0	Regular Day Off
Dec	26	12	Lead Analyst, WSP, WSFC
Dec	27	11	Lead Analyst, WSP, WSFC
Dec	28	11	Lead Analyst, WSP, WSFC
Dec	29	11	Lead Analyst, WSP, WSFC
Dec	30	11	Lead Analyst, WSP, WSFC
Dec	31		Regular Day Off
	Hours:	173	
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Contractor Signature/Date

30-Dec-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

30-Dec-11

Local Reviewer Signature/Date

000253

FORM
A19-1A
(Rev. 3/95)



STATE C. /ASHINGTON **INVOICE VOUCHER** 

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

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President, Operational Applications Inc (TITLE)

FEDERAL I.D. NO	OR	SOCIAL	SECURIT	TY NO. (For	Reportin	g Personal	Services (	Contract Pa	yments to I.R.	.S.) R	EGEIVED	BY L	<b>A</b> din	In		1-30 Nov 20	
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### **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 11/1/2011
 11/30/2011

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name:	William E. Evans	Location	: 1110 3rd Avenue, Seattl	e, WA 98101
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Nov N	Day		Description of Services Provided  Lead Analyst, WSP, WSFC
Nov	2	8.5	Lead Analyst, WSP, WSFC
Nov	3		Lead Analyst, WSP, WSFC
Nov	4		Reserve Duty
Nov	5		Regular Day Off
Nov	6		Regular Day Off
Nov	7		Lead Analyst, WSP, WSFC
Nov	8		Lead Analyst, WSP, WSFC
Nov	9	9	Lead Analyst, WSP, WSFC
Nov	10		Lead Analyst, WSP, WSFC
Nov	11		Lead Analyst, WSP, WSFC
Nov	12		Regular Day Off
Nov	13		Regular Day Off
Nov	14		Lead Analyst, WSP, WSFC
Nov	15		Lead Analyst, WSP, WSFC
Nov	16		Lead Analyst, WSP, WSFC
	17		Requested Time Off
Nov	18		Requested Time Off
	19		
Nov			Regular Day Off
Nov	20		Regular Day Off
Nov	21		Lead Analyst, WSP, WSFC
Nov	22		Lead Analyst, WSP, WSFC
Nov	23	10	Lead Analyst, WSP, WSFC
Nov	24	0	National Holiday
Nov	25	3	Lead Analyst, WSP, WSFC
Nov	26	0	Regular Day Off
Nov	27		Regular Day Off
Nov	28	10	Lead Analyst, WSP, WSFC
Nov	29	10	Lead Analyst, WSP, WSFC
Nov	30	9	Lead Analyst, WSP, WSFC
		45-5	
	Hours:	173	

Contractor Signature/Date

30-Nov-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

LANCE B LADIUSS

Local Reviewer Nam

000255

### **FORM** A19-1A



### TE OF **WAJHINGTON**

Online Help:
This document is a protected form fo. I online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return involvyly format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

AGENCY USE ONLY LOCATION CODE JEPR OR AUTHONO

(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

ACCOUNTING APPROVAL FOR PAYMENT

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DATE

WARRANT NUMBER

WARRANT TOTAL 30



Thank you for choosing United

E-Ticket Receipt and Itinerary

Issued: Mon, Oct 17, 2011 /CONXA

W United

> Print reservation

Confirmation #: NG6WJH

**Email itinerary** 

Send

Flight info

Seattle, WA (SEA) Atlanta, GA (ATL)

Flight

Depart

Arrive

Cabin

Seats

United 262

**SEA 11:25 PM** Sun, Oct 30, 2011 IAD 07:11 AM Mon, Oct 31, 2011 First (NF)

03F Upgrade:

Flight: Confirmed

Arrives next day

Confirmed

Equipment: 320 | Duration: 4h 46m | Non-stop | Fare code: TA7MN Traveled miles: 2306 | Award miles: 2,306 | Snack

Download to calendar

>>> connecting to >>>

United 3491 Flight: Confirmed

IAD 08:28 AM Mon, Oct 31, 2011

Depart

ATL 10:24 AM Mon, Oct 31, 2011 Economy (T)

05F

Equipment: E70 | Duration: 1h 56m | Non-stop | Fare code: TA7MN Traveled miles: 533 | Award miles: 533 | No Meal Service

Download to calendar

Washington, DC (IAD)

Atlanta, GA (ATL)

**Arrive** 

Cabin

Seats

United 3491 Operated by:

IAD 08:28 AM

ATL 10:24 AM

First (NF)

N/A

United Express/shuttle

Flight

Mon, Oct 31, 2011

Mon, Oct 31, 2011

Upgrade: Waitlisted

America

Flight: Waitlisted

Equipment: E70 | Duration: 1h 56m | Non-stop | Fare code: LAP10CS Traveled miles: 533 | Award miles: 533 | No Meal Service

Download to calendar

Atlanta, GA (ATL)

Seattle, WA (SEA)

**Flight W** United 3800 Depart

Arrive

Cabin

Seats

Operated by: United

ATL 05:45 AM Thu, Nov 3, 2011 IAD 07:27 AM Thu, Nov 3, 2011 Economy (L)

12F

Upgrade: Pending

Express/mesa

Airlines

Flight: Confirmed

Equipment: CR7 | Duration: 1h 42m | Non-stop | Fare code: LAP10CS Traveled miles: 533 | Award miles: 533 | No Meal Service

Download to calendar

>>> connecting to >>>

United 282 Flight: Confirmed

IAD 08:15 AM Thu, Nov 3, 2011 **SEA 10:50 AM** Thu, Nov 3, 2011

Economy (L)

21D Upgrade:

Pending

Equipment: 320 | Duration: 5h 35m | Non-stop | Fare code:

Traveled miles: 2306 | Award miles: 2,306 | Food for Purchase Download to calendar

We have revised some of our first and second checked bag fees for international travel. For the latest checked baggage policies, please review all relevant baggage pages before you travel.

#### Check-in information

▶ Please note that valid, government-issued photo identification must be presented at the airport.

### Ticket purchases

Passenger information

Fare details

Fare summary

**EVANS/** WILLIAM E MR

Penalty: NONREF-0VALUAFTDPT-

CHGFEE

Base Fare: 388.00 USD Taxes & Fees: 42.80 USD Total: 430.80 USD

Mileage Plus: 03135337659 Ticket#: 0162133537973

Issued: Oct 17,2011

View baggage policies Updated



NAME & ADDRESS

CONFIRMATION NUMBER: 3442868342

PAGE

EVANS, WILLIAM

11/3/2011

255 COURTLAND ST NE ATLANTA, GA 30303

TELEPHONE (404) 659-2000 • FAX (404) 222-2967 RESERVATIONS www.hilton.com or 1 800 HILTONS

ROOM

2514/K1

ARRIVAL DATE **DEPARTURE DATE**  10/31/2011 11/3/2011

10:48:00AM 3:25:00PM

ADULT/CHILD **ROOM RATE** 

1/0

RATE PLAN

\$133.00 C-NFC

Hhonors #

35932993 DIAMOND

AL:

UA #03135337659

DATE DESCRIPTION ID REF NO CHARGES CREDITS BALANCE \$20.63 \*TOWER LOUNGE LINTR 7888232 10/31/2011 \$133.00 **GUEST ROOM** SVAIS 7889635 10/31/2011 \$10.64 10/31/2011 STATE ROOM TAX **SVAIS** 7889635 \$10.64 10/31/2011 OCCUPANCY TAX **SVAIS** 7889635 \$133.00 11/1/2011 **GUEST ROOM SVAIS** 7892530 \$10.64 7892530 **SVAIS** 11/1/2011 STATE ROOM TAX \$10.64 SVAIS. 7892530 11/1/2011 **OCCUPANCY TAX** \$133.00 **JOHNZ** 7895694 **GUEST ROOM** 11/2/2011 \$10.64 **JOHNZ** 7895694 STATE ROOM TAX 11/2/2011 JOHNZ \$10.64 OCCUPANCY TAX 7895694 11/2/2011 VHOWA 7897643 \$483.47 VS \*8086 11/3/2011 BALANCE \$0.00 FOLIO DATE OF CHARGE ACCOUNT NO 1336977 A 10/31/11 1:52:00AM VS \*8086 INITIAL AUTHORIZATION CARD MEMBER NAME 04838C EVANS, WILLIAM PURCHASES & SERVICES **ESTABLISHMENT AGREES TO ESTABLISHMENT NO &** TRANSMIT TO CARD HOLDER FOR LOCATION TAXES TIPS & MISC TOTAL AMOUNT

**FORM** A19-1A (Rev. 3/95)



## INVOICE VOUCHER

**OF WASHINGTON** 

AGE			

Washington State Patrol **Investigative Assistance Division** PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

	AGENCY USE ONLY	
AGENC\	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, bandicap, religion, or Vietnam era or disabled veterans

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# Washington State Patrol CONTRACTOR SERVICE HOURS

 Beginning
 Ending

 Period:
 10/1/2011
 10/31/201

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

	1 7	<del></del>	
Mo.	Day		Description of Services Provided
Oct	1		Regular Day Off
Oct	2		Regular Day Off
Oct	3	9	Lead Analyst, WSP, WSFC
Oct	4		Lead Analyst, WSP, WSFC
Oct	5	10	Lead Analyst, WSP, WSFC
Oct	6		Lead Analyst, WSP, WSFC
Oct	7		Lead Analyst, WSP, WSFC
Oct	8		Regular Day Off
Jct	9		Regular Day Off
Oct	10		Lead Analyst, WSP, WSFC
Oct	11		Lead Analyst, WSP, WSFC
Oct	12	10	Lead Analyst, WSP, WSFC
Oct	13	4	Lead Analyst, WSP, WSFC
Oct	14		Reserve Duty
Oct	15		Regular Day Off
Oct	16		Regular Day Off
Oct	17	10	Lead Analyst, WSP, WSFC
Oct	18	11	Lead Analyst, WSP, WSFC
Oct	19		Lead Analyst, WSP, WSFC
Oct	20	10	Lead Analyst, WSP, WSFC
Oct	21		Reserve Duty
Oct	22		Regular Day Off
Oct	23		Regular Day Off
→ct	24		Reserve Duty
_ ∕ct	25		Lead Analyst, WSP, WSFC
Oct	26		Lead Analyst, WSP, WSFC
Oct	27	8	Lead Analyst, WSP, WSFC
Oct	28	8	Lead Analyst, WSP, WSFC
Oct	29		Regular Day Off
Oct	30		Regular Day Off
Oct	31		Lead Analyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

31-Oct-11

Local Reviewer Name

**FORM** A19-1A (Rev. 3/95)



## STATE

**ASHINGTON** 

IIA A	CICE	A O C	CHE

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) | RECEIVED BY

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

**AGENCY NAME** 

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

30 SEP 201 erational Applications Inc (TITLE)

DATE GOODS/SERVICES RECEIVED

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## **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 9/1/2011 9/30/2011 mm/dd/yr mm/dd/yr

Name:	William E. Evans	Location: 1110 3rd Avenue, Seattle, WA 98101	

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Mo.	Day		Description of Services Provided
Sep	1	10	Lead Analyst, WSP, WSFC
Sep	2	10	Lead Analyst, WSP, WSFC
Sep	3	0	Regular Day Off
Sep	4	0	Regular Day Off
Sep	5	11	Lead Analyst, WSP, WSFC
Sep	6	10	Lead Analyst, WSP, WSFC
Sep	7		Lead Analyst, WSP, WSFC
Sep	8		Lead Analyst, WSP, WSFC
Sep	9		Requested Time Off
Sep	10	0	Regular Day Off
Sep	11	7	Lead Analyst, WSP, WSFC
Sep	12	10	Lead Analyst, WSP, WSFC
Sep	13	9	Lead Analyst, WSP, WSFC
Sep	14	10	Lead Analyst, WSP, WSFC
Sep	15	7	Lead Analyst, WSP, WSFC
Sep	16	8	Lead Analyst, WSP, WSFC
Sep	17	0	Regular Day Off
Sep	18		Regular Day Off
Sep	19	10	Lead Analyst, WSP, WSFC
Sep	20	8	Lead Analyst, WSP, WSFC
Sep	21	12	Lead Analyst, WSP, WSFC
Sep	22		Reserve Duty
Sep	23		Reserve Duty
Sep	24		Regular Day Off
Sep	25		Regular Day Off
Sep	26	10	Lead Analyst, WSP, WSFC
Sep	27	6	Lead Analyst, WSP, WSFC
Sep	28	8	Lead Analyst, WSP, WSFC
Sep	29	8	Lead Analyst, WSP, WSFC
Sep	30		Requested Time Off
Total I	Hours:	173	

Contractor Signature/Date

29-Sep-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

30-Sep-11

(DATE)

FORM
A19-1A
(Rev. 3/95)



### STATE OF WASHINGTON **INVOICE VOUCHER**

AGENCY USE ONLY P.R. OR AUTH. NO. AGENCY NO LOCATION CODE 225 341009/34107

AGENCY NAME								
Washington State Patrol								
Investigative Assistance Division								
PO Box 2347								
Olympia, WA 98507-2347								
VENDOR OR CLAIMANT (Warrant is to be payable to)								

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the Items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handleap, religion, or Vietnam era or disabled veterans status.

31 AUG 204 Operational Applications Inc (TITLE)

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# Washington State Patrol CONTRACTOR SERVICE HOURS

Period: 8/1/2011

8/1/2011 mm/dd/yr 8/31/2011

mm/dd/yr

**Ending** 

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Aug	1 .		Lead Analyst, WSP, WSFC
Aug	2		Lead Analyst, WSP, WSFC
Aug	3	8.5	Lead Analyst, WSP, WSFC
Aug	4		Reserve Duty
Aug	5		Reserve Duty
Aug	6		Regular Day Off
Aug	7	0	Regular Day Off
Aug	8	5	Lead Analyst, WSP, WSFC
A⊔g	9		Lead Analyst, WSP, WSFC
Aug	10		Lead Analyst, WSP, WSFC
Aug	11		Lead Analyst, WSP, WSFC
Aug	12		Lead Analyst, WSP, WSFC
Aug	13		Lead Analyst, WSP, WSFC
Aug	14		Regular Day Off
Aug	15		Lead Analyst, WSP, WSFC
Aug	16		Lead Analyst, WSP, WSFC
Aug	17		Lead Analyst, WSP, WSFC
Aug	18		Lead Analyst, WSP, WSFC
Aug	19		Reserve Duty
Aug	20		Regular Day Off
Aug	21		Regular Day Off
Aug	22		Reserve Duty
Aug	23		Lead Analyst, WSP, WSFC
Aug	24	6	Lead Analyst, WSP, WSFC
Aug	25		Reserve Duty
Aug	26		Reserve Duty
Aug	27		Regular Day Off
Aug	28		Regular Day Off
Aug	29		Lead Analyst, WSP, WSFC
Aug	30	9.5	Lead Analyst, WSP, WSFC
Aug	31	9.5	Lead Analyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date 31-Aug-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Name

-31=AUQ-11

FORM
A19-1A
(Rev. 3/95)



### STATE OF WASHINGTON INVOICE VOUCHER

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

President, Operational Applications Inc.

(TITLE)

(DATE)

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## **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 7/1/2011
 7/31/2011

 mm/dd/yr
 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

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Mo.	Day		Description of Services Provided ,
Jul	1 1	0	Requested Time Off
Jul	2		Regular Day Off
Jul	3	0	Regular Day Off
Jul	4	0	National Holiday (Independence Day)
Jul	5	0	Requested Time Off
Jul	6		Lead Analyst, WSP, WSFC
Jul	7	10.5	Lead Analyst, WSP, WSFC
Jul	8	6	Lead Analyst, WSP, WSFC
Jul	9	Ô	Regular Day Off
Jul	10	0	Regular Day Off
Jul	11	10	Lead Analyst, WSP, WSFC
Jul	12	9	Lead Analyst, WSP, WSFC
Jul	13	10.5	Lead Analyst, WSP, WSFC
Jul	14	10	Lead Analyst, WSP, WSFC
Jul	15	10	Lead Analyst, WSP, WSFC
Jul	16	0	Regular Day Off
Jul	17	0	Regular Day Off
Jul	18	11.5	Lead Analyst, WSP, WSFC
Jul	19	11.5	Lead Analyst, WSP, WSFC
Jul	20	10.5	Lead Analyst, WSP, WSFC
Jul	21	10	Lead Analyst, WSP, WSFC
Jul	22	9.5	Lead Analyst, WSP, WSFC
Jul	23	0	Regular Day Off
Jul	24	0	Regular Day Off
Jul	25	9	Lead Analyst, WSP, WSFC
Jul	26	9	Lead Analyst, WSP, WSFC
Jul	27	9	Lead Analyst, WSP, WSFC
Jul	28	9	Lead Analyst, WSP, WSFC
Jul	29	9	Lead Analyst, WSP, WSFC
Jul	30	0	Regular Day Off
Jul	31		Régular Day Off
Total	Hours:	173 /	
	11		

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

29-Jul-11

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

FORM	
A19-1A	
(Rev. 3/95)	)



## S'. - OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY

AGENC. LOCATION CODE P.R. OR AUTH. NO.

225 341009/34107

AGENCY NAM!
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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, hapdicap, religion, or Vietnam era or disabled veterans status.

BY _	Millu	
	(SIGN IN INK)	30 1 44 304
	President, Operational Applications Inc	305UN 2011
	(TITLE)	(DATE)

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### **CONTRACTOR SERVICE HOURS**

**Beginning** Period: 6/1/2011

**Ending** 6/30/2011 mm/dd/yr

38 JUN 204

Name:

William E. Evans

Location:

1110 3rd Avenue, Seattle, WA 98101

mm/dd/yr

Mo.	Day		Description of Services Provided
Jun	1		Lead Analyst, WSP, WSFC
Jun	2	11	Lead Analyst, WSP, WSFC
Jun	3	9.5	Lead Analyst, WSP, WSFC
Jun	4		Regular Day Off
Jun	5	3.5	Lead Analyst, WSP, WSFC
Jun	6		Lead Analyst, WSP, WSFC
Jun	7		Lead Analyst, WSP, WSFC
Jun	8		Lead Analyst, WSP, WSFC
ın	9	11.5	Lead Analyst, WSP, WSFC
Jun	10	11	Lead Analyst, WSP, WSFC
Jun	11		Regular Day Off
Jun	12		Regular Day Off
Jun	13	11.5	Lead Analyst, WSP, WSFC
Jun	14	8.5	Lead Analyst, WSP, WSFC
Jun	15	11	Lead Analyst, WSP, WSFC
Jun	16		Reserve Duty
Jun	17		Reserve Duty
Jun	18	,	Regular Day Off
Jun	19	0	Regular Day Off
Jun	20	11.5	Lead Analyst, WSP, WSFC
Jun	21	10	Lead Analyst, WSP, WSFC
Jun	22	11.5	Lead Analyst, WSP, WSFC
Jun	23	9	Lead Analyst, WSP, WSFC
Jun	24	7	Lead Analyst, WSP, WSFC
1	25		Regular Day Off
วนที	26		Regular Day Off
Jun	27		Requested Time Off
Jun	28		Requested Time Off
Jun	29		Requested Time Off
Jun	30		Requested Time Off
Total H	Hours:	173 /	

Contractor Signature/Date

25-Jun-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

FO	RM
A19	-1A
(Rev.	3/95)



### INVOICE VOUCHER

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) RECEIVED BY

## STATE OF WASHINGTON

1	an in the	AGENCY USE ONLY	1. 1. 1.	-
1	AGENCY NO	LOCATION CODE	P.R. OR AUTH	NO.
	225	341009/34107		

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Washington State Patrol Investigative Assistance Division PO Box.2347

Olympia, WA 98507-2347

**VENDOR OR CLAIMANT** 

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans

1JUNG 1 (TITLE)

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DATE				DESC	RIPTIC	NC			QUANTITY	UNIT	UNIT	PRICE	AMO	FOR AGE	NCY USE ONLY
-31 May 11	An	alytica	al servi	ces for N	May 20	)11 (Bill	Evans	)	173	Hour		66.00			
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## Washington State Patrol CONTRACTOR SERVICE HOURS

Period: 5/1/2011 mm/dd/yr

5/31/2011 mm/dd/yr

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hrs.	Description of Services Provided
May	1	8	Lead Analyst, WSP, WSFC
May	2	. 8	Lead Analyst, WSP, WSFC
May	3	8	Lead Analyst, WSP, WSFC
May	4	. 8	Lead Analyst, WSP, WSFC
May	5	8	Lead Analyst, WSP, WSFC
May	6	3	Lead Analyst, WSP, WSFC
May	., 7		Regular Day Off
May	8		Regular Day Off
May	9	10	Lead Analyst, WSP, WSFC
May	10		Lead Analyst, WSP, WSFC
May	11		Lead Analyst, WSP, WSFC
May	12		Lead Analyst, WSP, WSFC
May	13		Reserve Duty
May	14		Regular Day Off
May	15		Regular Day Off
May	16		Lead Analyst, WSP, WSFC
May	17		Lead Analyst, WSP, WSFC
May	18		Lead Analyst, WSP, WSFC
May	19		Lead Analyst, WSP, WSFC
May	20		Lead Analyst, WSP, WSFC
May	21		Regular Day Off
May	22		Regular Day Off
May	23		Lead Analyst, WSP, WSFC
May	24		Lead Analyst, WSP, WSFC
May	25	8	Lead Analyst, WSP, WSFC
May	26		Lead Analyst, WSP, WSFC
May	27		Lead Analyst, WSP, WSFC
May	28		Regular Day Off
May	29		Regular Day Off
May	30		Lead Analyst, WSP, WSFC
May	31		Requested Time Off
Total I	Hours:	173 /	

Contractor Signature/Date

31-May-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

4/01/11

000271

-	FORM	
	A19-1A	
(1	Rev. 3/95)	



## ST. /ASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	<del></del>
AGENCY	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

AG	EN	CY	N	A۱	ЛE
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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

( SIGN IN INK)

President, Operational Applications Inc (TITLE) ATE GOODS/SERVICES RECEIVED FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) 1-30 April 2011 **AMO QUANTITY UNIT PRICE** UNIT DATE DESCRIPTION FOR AGENCY USE ONLY UNT 173 Hour 66.00 1-30 Apr 11 Analytical services for Apr 2011 (Bill Evans) Services performed under C090433PSC FISAL PREPARED BY TELEPHONE NUMBER 3 May 11 Doug Larm (253)226-9564 UBI NUMBER PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. VENDOR NUMBER USE 602632122 COUNTY CITY/TOWN SUB PROJ PROJ PHAS PROJECT INVOICE NUMBER FUND PROGRAM BUDGET UNIT AMOUNT Œ 210 001 01\* 271 57C J WARRANT TOTAL ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT NUMBER

William E. Evans

Name:

## **CONTRACTOR SERVICE HOURS**

**Beginning** 

4/1/2011

**Ending** 4/30/2011 mm/dd/yr

Period:

mm/dd/yr

Location:

1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Apr	1		Lead Analyst, WSP, WSFC
Apr	2		Regular Day Off
Apr	3	0	Regular Day Off
Apr	4	0	Requested Time Off
Apr	5		Requested Time Off
Apr	6	1	Requested Time Off
Apr	7	0	Requested Time Off
Apr	8		Requested Time Off
Apr	9	8.5	Lead Analyst, WSP, WSFC
Apr	10	1	Lead Analyst, WSP, WSFC
Apr	11	10.5	Lead Analyst, WSP, WSFC
Apr	12	11	Lead Analyst, WSP, WSFC
Apr	13	10	Lead Analyst, WSP, WSFC
Apr	14	8	Lead Analyst, WSP, WSFC
Apr	15	11	Lead Analyst, WSP, WSFC
Apr	16	10	Lead Analyst, WSP, WSFC
Apr	17	2.5	Lead Analyst, WSP, WSFC
Apr	18		Lead Analyst, WSP, WSFC
Apr	19	11	Lead Analyst, WSP, WSFC
Apr	20	11.5	Lead Analyst, WSP, WSFC
Apr	21		Lead Analyst, WSP, WSFC
Apr	22		Lead Analyst, WSP, WSFC
Apr	23		Lead Analyst, WSP, WSFC
"Apr	24		Lead Analyst, WSP, WSFC
Apr	25	9.5	Lead Analyst, WSP, WSFC
Apr	26		Lead Analyst, WSP, WSFC
Apr	27	9.5	Lead Analyst, WSP, WSFC
Apr	28	0	Reserve Duty
Apr	29	0	Reserve Duty
Apr	30	0	Regular Day Off
	Hours:	173	
	1111		

Contractor Signature/Date

30-Apr-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

(Rev. 1/91)

(new online version 12/01)



## STATE OF WASHINGTON

INVOICE VOUCHER

On	line	Help

This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

ACENCY	IICE	v

AGENCY NO. LOCATION CODE P.R. OR AUTH. NO.

**AGENCY NAME** INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each Washington State Patrol VENDOR OR CLAIMANT (Warrant is to be payable to) Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services **WILLIAM E. EVANS** furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status. (SIGN IN INK) (Operational Applications, Inc. - Doug Larm) \_Owner / Sole Proprietor\_ Claimant 10 May 2011 (TITLE) (DATE) OR COCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S. RECEIVED BY DATE RECEIVED 5-17-11 DATE DESCRIPTION QUANTITY UNIT AMOUNT **FOR AGENCY** PRICE USE 5/1/11 Roundtrip Airfare to Nashville, TN 357.30 357.30 5/1/11 **LEIU Conference Fee** 1 425.00 425.00 5/2/11 MI&E (First Day of Travel – 75% of \$66) 1 49.50 49.50 5/2-5/5 MI&E 4 66.00 264.00 5/1-5/5 Lodging <u>110.00</u>° 5 550.00 5/2-5/5 **Lodging Taxes** 5 25.09 125.45 5/2-5/5 Misc Hotel Fee (Internet Service) 5 15.00 75.00 5/6/11 MI&E (Last Day of Travel - 75% of \$66) 1 49.50 49.50 Total 1895.75 PREPARED BY TELEPHONE NUMBER DATE 2014 DOC DATE PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. VENDOR MESSAGE USE UBI NUMBER 602 111 089 PROJECT 210 1113.45 27/ DO 1 01\* 67 S7C1 210 271 001 014  $\mathcal{S}\mathcal{H}\mathcal{I}$ E6 210 271 Ol# 001 S7C] ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT TOTAL WARRANT NUMBER

### UNITED

#### Thank you for choosing United

E-Ticket Receipt and Itinerary

Issued: Sun, Mar 27, 2011 /CONXA

**W** United

Confirmation #: X4VBB4 Continental

**Email itinerary** 

Send

> Print reservation

Confirmation #: BQVKLG

Flight info

Baltimore, MD (BWI) Newark, NJ (EWR)

Continental 2714 BWI 04:51 PM EWR 06:00 PM

Cabin

Seats

Operated by:

Sun May 1, 2011

Economy (T)

03A

Expressjet

Sun, May 1 2011

Airlines Inc Dba Co Express

Flight: Confirmed

Equipment: NA admin.ibe settings.lookup.aircraft.Short ERJ | Duration: 1h 9m | Non-stop | Fare code: TA21KN

Arrive

Traveled miles: 169 | Award miles: 169 | No Meal Service

Download to calendar

Newark, NJ (EWR)

Nashville, TN (BNA)

**Flight** 

Depart

Arrive

Cabin

Seats

Continental 2747

EWR 08:40 PM Sun, May 1 2011 BNA 10:07 PM Sun May 1, 2011 Economy (T)

03A

Operated by: Expressjet Airlines Inc Dba

Co Express

Flight: Confirmed

Equipment: NA admin.ibe settings.lookup.aircraft.Short ERJ | Duration: 2h 27m | Non-stop | Fare

code: TA21KN

Traveled miles: 748 | Award miles: 748 | Food for Purchase

Download to calendar

Nashville, TN (BNA)

Baltimore, MD (BWI)

**Flight** 

Depart

Arrive

Cabin

Seats

W United 6089

BNA 07:47 AM

ORD 09:38 AM

Economy (Q)

12A

Operated by:

United

Express/expressjet Flight: Confirmed Mon May 9 2011 Mon, May 9, 2011

Equipment: ER4 | Duration: 1h 51m | Non-stop | Fare code: QA21KN

Traveled miles: 409 | Award miles: 409 | No Meal Service Download to calendar

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**70** United 5999

**ORD 11:21 AM** 

BWI 02:09 PM

Economy (Q)

12A

Flight: Confirmed

Mon May 9 2011

Mon May 9, 2011

Equipment: ER4 | Duration: 1h 48m | Non-stop | Fare code: QA21KN Traveled miles: 621 | Award miles:621 | No Meal Service

Download to calendar

Check-in information

Please note that valid, government-issued photo identification must be presented at check-in.

### Ticket purchases

Passenger information

Fare details

Fare summary

EVANS/

Penalty: NONREF-0VALUAFTDPT-

Base Fare: 316.00 USD

WILLIAM EMR Mileage Plus: 03135337659 CHGFEEPLUSFAREDIF- CXL BY FLT

CHGFEE NONREF-

Taxes & Fees: 41.30 USD Total: 357.30 USD

Ticket#: 0162122692582

TIME OR NOVALUE

Issued: Mar 27,2011

View baggage policies Updated

<i>w</i> united		<i>WI</i> UNITED
ETKT PASSENGER F	RECEIPT	** ** ** ** ** ** ** **
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EVANS/WILLIAM E MR X4VBB4/UA MULTI	0	XEWRBNACO2747 T 1MAY
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""TRANSPORTATION""	000320	XORDBWIUA5999 Q 9MAY
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USD293.96	*******	*****
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USD357.30	1	

Subject

Your payment to LEIU

From

"service@paypal.com" <service@paypal.com>

Date

Wednesday, March 16, 2011 18:13

To

William Evans < william.evans1@us.army.mil>



Mar 16, 2011 18:13:25 PDT Receipt No: 1902-0579-3387-9378

Hello William Evans,

You sent a payment of \$425.00 USD to LEIU.

This charge will appear on your credit card statement as payment to PAYPAL \*LEIU.

**Merchant information** 

LEIU

bob.morehouse@doj.ca.gov http://www.leiu-homepage.org 916-227-7880

Instructions to merchant

None provided

**Shipping information** 

William Evans

Shipping method Not specified

**United States** 

Description			
•			
LEIU Registr	am E	•	

Amount

\$425.00 USD

\$425.00 USD

Insurance:

Total:

\$425.00 USD

Receipt No: 1902-0579-3387-9378

Please keep this receipt number for future reference. You'll need it if you contact customer service at LEIU or PayPal.

**Registration Receipt** 2011 LEIU/IALEIA Annual Training Seminar

\$425.00 Received

3/18/2011

William Evans

ints when you pay.

bay and get paid online.

il.com/help.

Ritchie A. Martinez, President **IALEIA** 

nitored and you will not receive a response.

check out with PayPal. Your financial information is

7an Godsey, General Chairman LEIU



RESORT & CONVENTION CENTER

Nashville

WILLIAM EVANS

ROOM MG M4119
ARRIVAL 5/01/11
DEPARTURE 5/06/11
NO. IN PARTY 1
GROUP I.D. A-IALE1
PAGE 1
STATEMENT DATE 5/06/11

000278

**RESV NUMBER** 406168367742 **FOLIO NUMBER** 406633636272

DATE	DESCRIPTION	COMMENTS	CHARGES	PAYMENTS
5/01/11	CITY TAX	CITY TAX	2.50	•
5/01/11	RESORT FEE		15.00	
	RESORT FEE TAX		1.39	
5/01/11	SELF PARKING	A-IALE1 SELF PARING 30% O	13.77	
5/01/11	ROOM CHARGE MGM4119		139.00	
	TAX		21.20	
5/01/11	APPLIED DEPOSIT	*********8086		-160.20
	CITY TAX	CITY TAX	2.50	
5/02/11	RESORT FEE		15.00	
	RESORT FEE TAX 119		1.39	
5/02/11	SELF PARKING	A-IALE1 SELF PARING 30% O	13.77	
5/02/11	ROOM CHARGE MGM4119		139.00	
	TAX		21.20	
5/03/11	CITY TAX	CITY TAX	2.50	
5/03/11	RESORT FEE		15.00	
	RESORT FEE TAX 119	-	1.39	
	SELF PARKING	A-IALE1 SELF PARING 30% O	13.77	
5/03/11	ROOM CHARGE MGM4119		139.00	
	TAX		21.20	
	CITY TAX	CITY TAX	2.50	
5/04/11	RESORT FEE		15.00	
	RESORT FEE TAX 119		1.39	
5/04/11	SELF PARKING	A-IALE1 SELF PARING 30% O	13.77	•
5/04/11	ROOM CHARGE MGM4119	,	139.00	
	TAX		21.20	



RESORT & CONVENTION CENTER

Nashville

WILLIAM EVANS

ROOM MG M4119
ARRIVAL 5/01/11
DEPARTURE 5/06/11
NO. IN PARTY 1
GROUP I.D. A-IALE1
PAGE 2
STATEMENT DATE 5/06/11

**RESV NUMBER** 406168367742 **FOLIO NUMBER** 406633636272

DATE	DESCRIPTION	COMMENTS	CHARGES	PAYMENTS
5/05/11	CITY TAX	CITY TAX	2.50	
5/05/11	RESORT FEE		15.00	
	RESORT FEE TAX 119		1.39	
5/05/11	SELF PARKING	A-IALE1 SELF PARING 30% O	13.77	
5/05/11	ROOM CHARGE MGM4119		139.00	
	TAX		21.20	
5/06/11	F/O VISA	0513 *********8086	•	-804.10

TOTALS

964.30

964.30

Thank you for staying with us

BALANCE DUE

.00

FORM	
A19-1A	
(Rev. 3/95)	



## STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	A
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

Washington State Patrol	
Investigative Assistance Division	
PO Box 2347	
Olympia, WA 98507-2347	

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

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Y (SIGN IN INK)

President Operational Applications Inc. (DATE)

DATE GOODS/SERVICES RECEIVED

1-31 March 2011

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F				APPN	PROGRAM INDEX	OJECT	SUB SUB SUB OUECT	ORG INDEX				570	` .	SUB	PROJ	AMOUNT	INVOICE NUMBER
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EP NC				APPN	PROGRAM INDEX	(E	SUB SUB SUECT	ORG				570	1	PROJ	PROJ	AMOUNT	INVOICE NUMBER
EF CONTRACT				APPN	PROGRAM INDEX	(E	SUB SUB OJECT	ORG				570	1	SUB	PROJ	AMOUNT	INVOICE NUMBER
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### **Washington State Patrol**

### **CONTRACTOR SERVICE HOURS**

Beginning **Ending** Period: 3/1/2011 3/31/2011 mm/dd/yr mm/dd/yr

Name: Location: William E. Evans 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day	Hre	Description of Services Provided
Mar	l day		Lead Analyst, WSP, WSFC
Mar	2		Lead Analyst, WSP, WSFC
Mar	3	11	Lead Analyst, WSP, WSFC
Mar	4	11	Lead Analyst, WSP, WSFC
Mar	5	6	Lead Analyst, WSP, WSFC
Mar	6		Regular Day Off
Mar	7		Reserve Duty
Mar	8	_	Reserve Duty
Mar	9		Reserve Duty
Mar	10		Reserve Duty
Mar	11		Reserve Duty
Mar	12		Regular Day Off
Mar	13		Regular Day Off
Mar	14		Reserve Duty
Mar	15		Reserve Duty
Mar	16		Reserve Duty
Mar	17		Reserve Duty
Mar	18		Reserve Duty
Mar	19	0	Regular Day Off
Mar	20		Regular Day Off
Mar	21		Reserve Duty
Mar	22	0	Reserve Duty
Mar	23	0	Reserve Duty
Mar	24	0	Reserve Duty
Mar	25	0	Reserve Duty
Mar	26	3	Lead Analyst, WSP, WSFC
Mar	27		Lead Analyst, WSP, WSFC
Mar	28		Lead Analyst, WSP, WSFC
Mar	29		Lead Analyst, WSP, WSFC
Mar	30	11.5	Lead Analyst, WSP, WSFC
Mar	31		Lead Analyst, WSP, WSFC
Total	Hours:	106	

Contractor Signature/Date

31-Mar-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

MICE

LADINES

000281

FORM	•
A19-1A	
(Rev. 3/95)	

DATE



### STATE O INVOIC

CUINCTON		AGENCY USE ONLY	<del></del>
SHINGTON	AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
E VOUCHER	225	341009/34107	

**UNIT PRICE** 

UNT

_	<b>AGENCY NAME</b>
Washington State	Patrol
Investigative Assi	stance Division
PO Box 2347	

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

Douglas Larm Operational Applications Inc. 13405 159th Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY ZUMCZELL President, Operational Applications Inc. (TITLE)

> DATE GOODS/SERVICES RECEIVED 1-28 February 2011

> > FOR AGENCY USE ONLY

-28	Feb 11	An	alytica	l ser	vices for F	eb 20	)11 (Bill	Evans	)	173	Но	ur	6	6.0	0	
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**QUANTITY** 

## **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 2/1/2011
 2/28/2011

 mm/dd/yr
 mm/dd/yr

lame:	William Evans	Location:	1110 3rd Avenue, Seattle, WA 98101
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Mo.	Day	Hrs.	Description of Services Provided
Feb	1	9	Lead Analyst, WSP, WSFC
Feb	2	10.5	Lead Analyst, WSP, WSFC
Feb	3	9	Lead Analyst, WSP, WSFC
Feb	4	0	Reserve Duty
Feb	5	0	Regular Day Off
Feb	6	0	Regular Day Off
d'	7	10.5	Lead Analyst, WSP, WSFC
ا ور	8	10	Lead Analyst, WSP, WSFC
Feb	9	10.5	Lead Analyst, WSP, WSFC
Feb	10	10	Lead Analyst, WSP, WSFC
Feb	11	8	Lead Analyst, WSP, WSFC
Feb	12		Regular Day Off
Feb	13		Regular Day Off
Feb	14		Lead Analyst, WSP, WSFC
Feb	15		Lead Analyst, WSP, WSFC
Feb	16		Lead Analyst, WSP, WSFC
Feb	17		Lead Analyst, WSP, WSFC
Feb	18		Lead Analyst, WSP, WSFC
Feb	19		Regular Day Off
Feb	20		Regular Day Off
Feb	21		Lead Analyst, WSP, WSFC
Feb	22	9	Lead Analyst, WSP, WSFC
5	23		Lead Analyst, WSP, WSFC
ı eb	24	8	Lead Analyst, WSP, WSFC
Feb	25	8	Lead Analyst, WSP, WSFC
Feb	26		Regular Day Off
Feb	27		Regular Day Off
Feb	28		Lead Analyst, WSP, WSFC
Total	Hours:	173	

Contractor Signature/Date

28-Feb-11

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Signature/Date

LADINES

FORM A19-1A (Rev. 3/95)

DATE



## STATE OF WASHINGTON INVOICE VOUCHER

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

	AGENCY	<u>NAME</u>
-	Detrol	

Washington State Patrol
Investigative Assistance Division
PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-31 Jan 11 Analytical services for Jan 2011 (Bill Evans)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

(SIGN IN INK)

President Operational Applications Inc.
(ITITLE)

(DATE)

ANIO

UNIT PRICE

66.00

DATE GOODS/SERVICES RECEIVED

1-31 January 2011

FOR AGENCY USE ONLY

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Hour

QUANTITY

173

### **Washington State Patrol** CONTRACTOR SERVICE HOURS

**Beginning** Period

1/1/2011 mm/dd/vr

Ending 1/31/2011 mm/dd/yr

1110 3rd Avenue, Seattle, WA 98101 Name: Location: William E. Evans Mo. Day Hrs. Description of Services Provided National Holiday Jan Regular Day Off Jan Lead Analyst, WSP, WSFC Jan Lead Analyst, WSP, WSFC Lead Analyst, WSP, WSFC Jan Lead Analyst, WSP, WSFC Jan Reserve Duty Jan Regular Day Off Jan Regular Day Off 9 0 Jan 10 Lead Analyst, WSP, WSFC Jan Lead Analyst, WSP, WSFC Jan 11 12 Lead Analyst, WSP, WSFC Jan Lead Analyst, WSP, WSFC Jan Lead Analyst, WSP, WSFC 14 Jan 15 Regular Day Off Regular Day Off 16 Jan Lead Analyst, WSP, WSFC Jan Lead Analyst, WSP, WSFC 18 Jan Lead Analyst, WSP, WSFC 19 Jan 20 Lead Analyst, WSP, WSFC Lead Analyst, WSP, WSFC 21 Jan 22 Regular Day Off Jan Regular Day Off 23 Jan Lead Analyst, WSP, WSFC 24 Jan Lead Analyst, WSP, WSFC 25 Jan Lead Analyst, WSP, WSFC 26 Jan Lead Analyst, WSP, WSFC 27 Jan Lead Analyst, WSP, WSFC 28 Jan Regular Day Off 29 Jan Regular Day Off 30 Jan Lead Analyst, WSP, WSFC 31

173 /

31-Jan-11

Contractor Signature/Date

Total Hours:

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE. (To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

FORM
A19-1A
(Rev. 3/95)

DATE



### STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY									
AGENCY NO LOCATION CODE P.R. OR AUTI-									
225	341009/34107								

	110=110: 1000
Washington State	Patrol
<b>Investigative Assis</b>	tance Division
PO Box 2347	
Olympia, WA 9850	7-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

AGENCY NAME

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handlcap, religion, or Vietnam era or disabled veterans status.

(SIGN'IN INK)

President Operational Applications Inc.

4 JPL 2012

MAYE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

200

-31 March 2012

(ÍlLF)

UNT

UNIT PŘICE

RECEIVED BY

UNIT

QUANTITY

1-31 Mar 12 Analytical services for Mar 2012 (Bill Evans) 173 Hour 69.00 Services performed under C090433PSC DATE 4/4/12 PREPARED BY TELEPHONE NUMBER DATE AGENCY APPROVAL la (253)226-9564 4 Apr 12 Doug Larm UBI NUMBER VENDOR MESSAGE VENDOR NUMBER DOC. DATE PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO. USE 602632122 COUNTY CITY/TOWN MASTER INDEX REF DOC SUF PROJ PHAS SUB PROJ INVOICE NUMBER FUND APPN PROGRAM INDEX BUDGET UNIT PROJECT AMOUNT 210 001 014 277 CE SFC 2 DATE WARRANT NUMBER ACCOUNTING APPROVAL FOR PAYMENT

### **Washington State Patrol**

### **CONTRACTOR SERVICE HOURS**

**Beginning** Period:

3/1/2012 mm/dd/yr 3/31/2012

**Ending** 

mm/dd/yr

Name: Location: William E. Evans 1110 3rd Avenue, Seattle, WA 98101

Mo.	Day		Description of Services Provided
Mar	1 ]		Lead Analyst, WSP, WSFC
Mar	2		Lead Analyst, WSP, WSFC
Mar	3		Regular Day Off
Mar	4		Regular Day Off
Mar	5		Lead Analyst, WSP, WSFC
Mar	6		Lead Analyst, WSP, WSFC
Mar	7		Lead Analyst, WSP, WSPC
Mar	8		Requested Time Off (Medical)
Mar	9	10.5	Lead Analyst, WSP, WSFC
Mar	10		Regular Day Off
Mar	11		Regular Day Off
Mar	12		Lead Analyst, WSP, WSFC
Mar	13		Lead Analyst, WSP, WSFC
Mar	14		Lead Analyst, WSP, WSFC
Mar	15		Lead Analyst, WSP, WSFC
Mar	16		Lead Analyst, WSP, WSFC
Mar	17		Regular Day Off
Mar	18		Regular Day Off
Mar	19		Requested Time Off
Mar	20		Requested Time Off
Mar	21		Requested Time Off
Mar	22		Lead Analyst, WSP, WSFC
Mar	23		Lead Analyst, WSP, WSFC
Mar	24		Regular Day Off
Mar	25		Regular Day Off
Mar	26		Lead Analyst, WSP, WSFC
Mar	27		Lead Analyst, WSP, WSFC
Mar	28		Lead Analyst, WSP, WSFC
Mar	29		Lead Analyst, WSP, WSFC
Mar	30		Lead Analyst, WSP, WSFC
Mar	31	0	Regular Day Off
Total	Hours:	173~	

Contractor Signature/Date

30-Mar-12

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

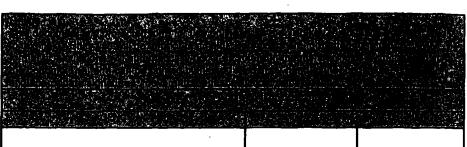
29-Mar-12

FORM A19-1A



STATE OF WASHINGTON

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)



			YEYENELE		N.										
Washington State Patrol							INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.								
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(Operat	tional Applic	ations.	inc. – D	oua La	arm)		(SIGN IN INK)								
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ACCOUNTING	APPROVAL FOR PAY	WENT				DATE		The Part Control of the State	WARRANT T	OTAL 81	WARR	LANT NUMBER			



a star alliance weimber

Thank you for choosing United

E-Ticket Receipt and Itinerary

Issued: Wed, Jan 25, 2012 /CONXA

W United

> Print reservation

Confirmation #: LBLWFI

Continental Confirmation #: A06K6B Email itinerary

Send

Flight info

Seattle, WA (SEA)

San Francisco, CA (SFO)

Flight

Depart

Cabin

Seats

🐙 United 274

**SEA 08:49 AM** 

SFO 11:05 AM

Economy (S)

Flight: Confirmed

Mon, Feb 27, 2012

Mon, Feb 27, 2012

21F

Equipment: 752 | Duration: 2h 16m | Non-stop | Fare code: SA14KN Traveled miles: 678 | Award miles: 678 | Food for Purchase

Download to calendar

Seattle, WA (SEA) San Francisco, CA (SFO)

Flight W United 274 Depart

Arrive

Cabin

Seats

Flight: Waitlisted

SEA 08:49 AM Mon, Feb 27, 2012 SFO 11:05 AM Mon, Feb 27, 2012

First (NF)

N/A Upgrade: Waitlisted

Equipment: 752 | Duration: 2h 16m | Non-stop | Fare code: SA14KN Traveled miles: 678 | Award miles:678 | Refreshments Download to calendar

San Francisco, CA (SFO) ... Salt Lake City, UT (SLC)

Flight

Depart SFO 02:54 PM Arrive

Cabin

Seats

**W** United 6393 Operated by:

Mon, Feb 27, 2012

SLC 05:46 PM Mon, Feb 27, 2012 Economy (S)

**08D** 

United Express/skywest

**Aklines** 

Flight: Confirmed

Equipment: CRJ | Duration: 1h 52m | Non-stop | Fare code: LA21KS Traveled miles: 599 | Award miles: 599 | No Meal Service Download to calendar

Salt Lake City, UT (SLC) ... Seattle, WA (SEA)

Flight

Depart

Arrive

Cabin

Seats

SLC 06:16 PM Wed, Feb 29, 2012 SFO 07:30 PM

Economy (L)

8D

United 5253

Operated by:

Skywest Dba United Express Flight: Confirmed Wed, Feb 29, 2012

Equipment: CRJ | Duration: 2h 14m | Non-stop | Fare code: LA21KS Traveled miles: 599 | Award miles: 599 | No Meal Service Download to calendar

>>> connecting to >>>

# United 715 Flight: Confirmed

SFO 08:43 PM Wed, Feb 29, 2012 SEA 10:43 PM Wed, Feb 29, 2012 Economy (L)

21F **Upgrade:** 

Pending

Equipment: 320 | Duration: 2h | Non-stop | Fare code: Traveled miles: 678 | Award miles: 678 | No Meal Service Download to calendar

#### Baggage allowances and fees

United accepts one carry-on item of no more than 45 linear inches or 114 linear centimeters in the aircraft cabin, along with one personal item (such as a shoulder or laptop bag).

In general, checked baggage fees are charged at any point in the itinerary where bags are checked. For itineraries operated exclusively by United, United Express, Continental, Continental Express and/or Continental Connection, standard fees will apply to checked baggage with a maximum weight of 50 pounds (23 kg) per bag and a maximum outside linear dimension of 62 inches (157 cm) as follows:

 Within the U.S. (including Hawaii, Puerto Rico and the U.S. Virgin Islands) and between the U.S. and Canada: First checked bag \$25, second checked bag \$35

Between the U.S./Canada and the Caribbean: First checked bag \$25, second checked bag \$40

Between the U.S. and Mexico/Central America: First checked bag \$0, second checked bag \$40

 Between the U.S. and Asia/Australia/New Zealand/Micronesia/Europe/Middle East/South America (except Brazil and Venezuela): First checked bag \$0, second checked bag \$70

Between the U.S. and Africa: First checked bag \$0, second checked bag \$70 (Fee applies
only to/from Cameroon/Egypt/Malawi/Morocco/Zambig; all other African countries have a \$0
second bag fee.)

Between the U.S. (except Hawaii) and Japan: First checked bag \$0, second checked bag \$0

Between Hawaii, Micronesia and Japan: First checked bag \$0, second checked bag \$40

First and second checked bag fees do not apply to active-duty members of the U.S. military and their accompanying dependents, customers confirmed in United First®, United Business®, Continental First, Continental BusinessFirst® or Continental International Business, or to United Global Services®. MileagePlus® 1K® or Premier Executive®, OnePass® Presidential Ptatinum, Platinum or Gold Elite or Star Alliance® Gold members, or Continental Airlines Presidential Ptus® primary cardmembers. First checked bag fee does not apply to MileagePlus Premier, OnePass Silver Elite or Star Alliance Silver members, MileagePlus Explorer cardmembers or OnePass Chase primary credit cardmembers.

For additional information regarding checked baggage fees, allowances, weight/size restrictions, exceptions, embargoes, or overweight, oversized, odd-sized and sporting equipment charges, go to <u>united.com/baggage</u> and select your special items and restrictions category.

For travel itineraries that include flights operated by our alliance partners or other airlines, different baggage fees may apply. Learn more at united.com/baggageservices

Check-in information:

▶ Please note that valid, government-issued photo identification must be presented at the airport.

Your itinerary includes a code-share flight. Please remember to check in with the operating carrier for your flight(s).

#### Ticket purchases

Passenger information

Fare details

Fare summary

EVANS/ WILLIAM E MR Penalty: NONREF-0VALUAFTDPT-CHGFEE

Base Fare: 295.00 USD Taxes & Fees: 43.20 USD

Mileage Plus: 03135337659 Ticket#: 0162138274345 Issued: Jan 25,2012 Total: 338.20 USD

SEASFOUA 214 S27FEB

XSFOSLCUA6313 S27FEB

SLCSFOUA5213 L29FEB

XSFOSEAUA 715 L29FEB

<del>~~~~~~~~~~~~~</del>

FURITED

PASSENGER RECEIPT EIKT

2134274345 DUPLICATE

2138274341 EVANS/WILLIAM E NR £ 43711-3

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EVANS/UILLIAM E HR LBLWFI/UA MULTI THIS IS YOUR RECEIPT 'MOT VALID FOR

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TRANSPORTATION

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MASTERPARK LOT B 2907 S 170TH ST SEATAC, WA 98188 206-444-0500 03/01/201209:52:45 Kiara

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CUSTOMER RECEIPT

Ticket: 146470 Arrival Date: 02/27/2012 06:28 09:52 Request Date: 03/01/2012

Park Charge: 48.50 Discount: 0.00

Services: 0.00 Tran Surchrg: 2.50

3.00 City Tax: Sales Tax: 5.13

Total: 59.13

AMERICAN EXPRESS

WE EVANS

Card Number: \*\*\*\*\*\*\*\*\*1000

59.13 Amount: Approved: 549032

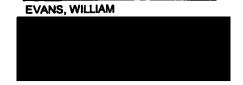
> THANK YOU FOR PARKING WITH MASTERPARK AIRPORT PARKING. PLEASE COME AGAIN.



255 S. West Temple • Salt Lake City, UT 84101 Phone (801) 328-2000 • Fax (801) 238-4888 Reservations

www.hilton.com or 1 800 HILTONS

Name & Address



Room Arrival Date Departure Date 1621/K1 2/27/2012 2/29/2012

8:13:00PM 7:23:00AM |

Adult/Child Room Rate

96.00

RATE PLAN

L-GV

HH# 359329938 DIAMOND

AL: UA #03135337659 BONUS AL: CAR:

**CONFIRMATION NUMBER: 3457311503** 

2/29/2012 PAGE 1

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#### **AIRPORT SHUTTLE**

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Shared Shuttle • Private Sedan • 4x4 Suburban www.xpressshuttleutsh.com

1-800-397-0773

801-596-1600

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EXPRESS SHUTTLE 477 W 888 H SALT LAKE CITY UT 84188 (281) 584-1449

TERRIHAL I.D.: MERCHANT DI 79418328 494154444

AMEX MINIMUM SALE

SALE Batch: 000159 RRN: 205902000598

INU:000021 # AUTH:544452

FEB 27, 12

19:36

TOTAL

**\$10.00** 

LE EVANS

CUSTOMER COPY

### HAROON TRANSPORTATION

DANEL SIRAL



www.myutahlimo.com haroontransportation@yahoo.com

RESERVATIONS WELCONE S
ALL MAJOR CREDIT CARDS ACCEPTED

SALT LAKE CITY PIC (801) 652-9956

PARK CITY Ptc (435) 649-6888

Date: 2/29/2012

From: SALT LAKE CITY (HILTON)

TO: SALT LANE CITY AIRPERT

Gratuity: \$5.00

Amonut: # 30.00

#### **FORM** A19-1A

(Rev. 1/91)

ACCOUNTING APPROVAL FOR PAYMENT



#### E OF WASHINGTON

**INVOICE VOUCHER** (new online version 12/01)

Online Help

This document is a protected form for us. unline. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

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DATE



#### Thank you for choosing United

#### E-Ticket Receipt and Itinerary

Issued: Wed, Jan 25, 2012 /CONXA

**W** United

> Print reservation

Confirmation #: LBLWFI

**Email itinerary** 

Send

Continental Confirmation #: A06K6B

Flight info

San Francisco, CA (SFO) Seattle, WA (SEA)

Flight United 274

**Arrive** Depart

Cabin

Seats

Flight: Confirmed

SEA 08:49 AM Mon. Feb 27, 2012 SFO 11:05 AM Mon, Feb 27, 2012 Economy (S)

21F

Equipment: 752 | Duration: 2h 16m | Non-stop | Fare code: SA14KN Traveled miles: 678 | Award miles: 678 | Food for Purchase

Download to calendar

Seattle, WA (SEA)

San Francisco, CA (SFO)

Flight United 274 Depart

Arrive SFO 11:05 AM Cabin

First (NF)

Seats

N/A Upgrade:

Flight: Waitlisted

SEA 08:49 AM Mon, Feb 27, 2012

Mon, Feb 27, 2012

Waitlisted

Equipment: 752 | Duration: 2h 16m | Non-stop | Fare code: SA14KN Traveled miles: 678 | Award miles: 678 | Refreshments Download to calendar

San Francisco, CA (SFO) Salt Lake City, UT (SLC)

**Flight** 

Depart

Cabin

**Seats** 

**W** United 6393 Operated by:

SFO 02:54 PM Mon, Feb 27, 2012 SLC 05:46 PM Mon, Feb 27, 2012 Economy (S)

08D

United Express/skywest

Flight: Confirmed

Equipment: CRJ | Duration: 1h 52m | Non-stop | Fare code: LA21KS Traveled miles: 599 | Award miles: 599 | No Meal Service

Download to calendar

Salt Lake City, UT (SLC) Seattle, WA (SEA)

**Flight** 

Depart

Arrive

Cabin

Economy (L)

Seats

SLC 06:16 PM Wed, Feb 29, 2012 SFO 07:30 PM

Wed, Feb 29, 2012

8D

United 5253 Operated by:

Skywest Dba United Express Flight: Confirmed

Equipment: CRJ | Duration: 2h 14m | Non-stop | Fare code: LA21KS Traveled miles: 599 | Award miles: 599 | No Meal Service

Download to calendar

>>> connecting to >>>

//// United 715 Flight: Confirmed SFO 08:43 PM Wed, Feb 29, 2012 SEA 10:43 PM Wed, Feb 29, 2012 Economy (L)

21F

Upgrade:

Pending

Equipment: 320 | Duration: 2h | Non-stop | Fare code: Traveled miles: 678 | Award miles: 678 | No Meal Service

Download to calendar

#### Baggage allowances and fees

United accepts one carry-on item of no more than 45 linear inches or 114 linear centimeters in the aircraft cabin, along with one personal item (such as a shoulder or laptop bag).

In general, checked baggage fees are charged at any point in the itinerary where bags are checked. For itineraries operated exclusively by United, United Express, Continental, Continental Express and/or Continental Connection, standard fees will apply to checked baggage with a maximum weight of 50 pounds (23 kg) per bag and a maximum outside linear dimension of 62 inches (157 cm) as follows:

- Within the U.S. (including Hawaii, Puerto Rico and the U.S. Virgin Islands) and between the U.S. and Canada: First checked bag \$25, second checked bag \$35
- Between the U.S./Canada and the Caribbean: First checked bag \$25, second checked bag \$40
- Between the U.S. and Mexico/Central America: First checked bag \$0, second checked bag \$40
- Between the U.S. and Asia/Australia/New Zealand/Micronesia/Europe/Middle East/South America (except Brazil and Venezuela): First checked bag \$0, second checked bag \$70
- Between the U.S. and Africa: First checked bag \$0, second checked bag \$70 (Fee applies only to/from Cameroon/Egypt/Malawi/Morocco/Zambia; all other African countries have a \$0 second bag fee.)
- Between the U.S. (except Hawaii) and Japan: First checked bag \$0, second checked bag \$0
- Between Hawaii, Micronesia and Japan: First checked bag \$0, second checked bag \$40

First and second checked bag fees do not apply to active-duty members of the U.S. military and their accompanying dependents, customers confirmed in United First®, United Business®, Continental First, Continental BusinessFirst® or Continental International Business, or to United Global Services SM, MileagePlus® 1K® or Premier Executive®, OnePass® Presidential Platinum, Platinum or Gold Elite or Star Alliance® Gold members, or Continental Airlines Presidential Plus SM primary cardmembers. First checked bag fee does not apply to MileagePlus Premier, OnePass Silver Elite or Star Alliance Silver members, MileagePlus Explorer cardmembers or OnePass Chase primary credit cardmembers.

For additional information regarding checked baggage fees, allowances, weight/size restrictions, exceptions, embargoes, or overweight, oversized, odd-sized and sporting equipment charges, go to <u>united.com/baggage</u> and select your special items and restrictions category.

For travel itineraries that include flights operated by our alliance partners or other airlines, different baggage fees may apply. <u>Learn more at united.com/baggageservices</u>

Check-in information:

Please note that valid, government-issued photo identification must be presented at the airport.

Your itinerary includes a code-share flight. Please remember to check in with the operating carrier for your flight(s).

#### Ticket purchases

Passenger information Fare details

Fare summary

EVANS/ WILLIAM E MR Penalty: NONREF-0VALUAFTDPT-CHGFEE

Base Fare: 295.00 USD Taxes & Fees: 43.20 USD

Mileage Plus: 03135337659 Ticket#: 0162138274345 Issued: Jan 25,2012

Total: 338.20 USD

Do not expose to excessive heat or direct sunlight

BF UHITED

"'NOT VALID FOR

"TRANSPORTATION

MOREF-DWALLIAFTDPT-CHGFEE

SFK.5SLC4.5SFD4.5

PASSENGER RECEIPT **DUPLICATE** 

2138274345 C 43711-3 EVANS/WILLIAM E MR

2138274345

CONXA US25JAN12

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THIS IS YOUR RECEIPT

000307

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USD274.42 US20.58 XT43.20

USD338.20

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MASTERPARK LOT B 2907 S 1707H ST SEATAC, WA 98188 206-444-0500

63/01/201209:52:45 Kiara CUSTOMER RECEIPT

/SID UA SEA 112.56LA21KS USD274.42END IPSEASFDSLCSFD XT 15.20ZP 10.00RY B.00NFSEA4.5

Ticket: 146470

val Data. 02/27/2012 06:28 est Date: 03/01/2012 09:52

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2.50 ity Tax: 3.00 les lax: 5.13

> Total: 59.13

....AN EXPRESS

WE EVANS

Card Number: \*\*\*\*\*\*\*\*\*\*1000

Amount: 59.13 Approved: 549032

THANK YOU FOR PARKING WITH MASTERPARK AIRPORT PARKING. PLEASE COME AGAIN.



255 S. West Temple • Salt Lake City, UT 84101 Phone (801) 328-2000 • Fax (801) 238-4888 Reservations www.hilton.com or 1 800 HILTONS

Name & Address EVANS, WILLIAM

CONFIRMATION NUMBER: 3457311503

1621/K1 Room Arrival Date

2/27/2012 2/29/2012 8:13:00PM 7:23:00AM I

Adult/Child Room Rate

Departure Date

1/0 96.00

RATE PLAN

HH# 359329938 DIAMOND

L-GV

AL: UA #03135337659

BONUS AL:

CAR:

Fosio

CARD MEMBER NAME

EVANS, WILLIAM

ESTABLISHMENT NO. & LOCATION WHEN USING A DEBIT CARD:

OF PAYMENT, PLEASE LET US KNOW.

2/29/2012 **PAGE** 1 REF. NO CHARGES **CREDITS** BALANCE DESCRIPTION ID DATE **KELSON** 4096298 \$96.00 2/27/2012 GUEST ROOM **KELSON** 4096298 \$6.58 2/27/2012 RM SALES TAX 6.85% 4096298 2/27/2012 RM OCCUPANCY TAX 5.75% **KELSON** \$5.52 2/28/2012 GUEST ROOM **KELSON** 4097499 \$96.00 **KELSON** 4097499 \$6.58 2/28/2012 RM SALES TAX 6.85% 2/28/2012 RM OCCUPANCY TAX 5.75% **KELSON** 4097499 \$5.52 2/29/2012 VS \*8086 TORI 4097929 \$216.20 **BALANCE** \$0.00 You have earned approximately 5880 Hilton HHonors points and approximately 192 Miles with United Airlines for this stay. Visit HHonors.com to check your point balance from stays at any of the 3,700 ho Thank you for choosing Hilton! Book your next stay at hilton.com and take advantage of our internet-only Advance Purchase Rates and limited-time special offers! DATE OF CHARGE FOLIO NO./CHECK NO. ACCOUNT NO. 2/27/2012 730644 A VS \*8086

AUTHORIZATION INITIAL 07800C PURCHASES & SERVICES TAXES TIPS & MISC. TOTAL AMOUNT PAYMENT DUE UPON RECEIPT

The Hilton Family



















Official Sponsor

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

BANK WILL REMOVE FROM YOUR ACCOUNT THE ESTIMATED

CHARGES FOR YOUR STAY; IT MAY BE LONGER DEPENDING ON YOUR BANK'S PRACTICES. IF YOU PREFER ANOTHER FORM

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT



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801-596-1600

Please call 24 hours in advance for best service

EXPRESS SHUTTLE 427 W 380 N SALT LAKE CITY UT 84103 (801) 596-1600

AL I.D.:

7041832 00001588444

. X \*\*\*\*\*\*1000

090159 INU:000023 05902000598 AUTH:544457

27, 12

19:36

AL

\$10.00

WE EVANS

### HAROON TRANSPORTATION

DANIEL SIRAJ



www.myutahlimo.com haroontransportation@yahoo.com

RESERVATIONS WELCOME

SALT LAKE CITY PH: (801) 652-9956

ALL MAJOR CREDIT CARDS ACCEPTED

PARK CITY PH: (435) 649-6888

Date: 2/29/2012

From: SALT LAKE CITY (HILTOST)

TO: SALT LAKE CITY AIRPERT

Gratuity: \$5.00

Amonut: \$ 30.00



S1. OF WASHINGTON

(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

**AGENCY NAME** 

Online Help

This document is a protected form for use online. Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

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AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim

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Check-In >

Issue Date: March 06, 2	2012						
Traveler	e <sup>-</sup>	Ticket N	lumber	Frequent Flyer		Seats	
EVANS/WILLIAME	MR 0:	1623202	69652	UA-DC66XXXX Pren	nier Platinum / *G	21F/12D/4A/2	21F
FLIGHT INFORM	MOITAN						
<b>Day, Date</b> Fri, 27APR12	<b>Flight</b> UA842 <sup>1</sup>	<b>Class</b> L	Departure SEATTLE, \((SEA) 11:5		Arrival City and Time SAN FRANCISCO, CA (SFO) 1:54 PM	<b>Aircraft</b> 757-200	Meal
Fri, 27APR12	UA6390 <sup>2</sup>	L	SAN FRANC (SFO) 3:25	•	SAN DIEGO, CA (SAN) <b>4:59 PM</b>	CRJ-700	
Wed, 02MAY12	UA6414 <sup>3</sup>	Т	SAN DIEGO (SAN) 6:09	•	SAN FRANCISCO, CA (SFO) <b>7:40 PM</b>	CRJ-700	
Wed, 02MAY12	UA798⁴	Т	SAN FRANC (SFO) 8:30		SEATTLE, WA (SEA) <b>10:31 PM</b>	A-320	

<sup>&</sup>lt;sup>1</sup> Flight operated by UNITED AIRLINES.

#### **FARE INFORMATION**

Fare Breakdown		Form of Payment:
Airfare:	274.42USD	VISA
U.S. Federal Transportation Tax:	20.58	Last Four Digits 8086
U.S. Flight Segment Tax:	15.20	_
September 11th Security Fee:	10.00	
U.S. Passenger Facility Charge:	18.00	
Per Person Total:	338.20USD	
eTicket Total:	338.20USD	

The airfare you paid on this itinerary totals: 274.42 USD

#### The taxes, fees, and surcharges paid total: 63.78 USD

Fare Rules:

Additional charges may apply for changes in addition to any fare rules listed.

NONREF/0VALUAFTDPT/CHGFEE

Cancel reservations before the scheduled departure time or TICKET HAS NO VALUE.

#### eTicket Reminders

• Check-in Requirement - Bags must be checked and boarding passes obtained at least 30 minutes prior to scheduled departure. Baggage will not be accepted and advance seat assignments may be cancelled if this condition is not met.

**EXCEPTION**: when departing from Atlanta, Chicago, Cleveland, Denver, Houston, Kona, Las Vegas, Los Angeles, Newark, Orlando, Philadelphia, Reno, San Francisco, Seattle or Tampa, the check in requirement time for Passengers and Bags is 45 minutes

- **Boarding Requirement** Passengers must be prepared to board at the departure gate with their boarding pass at least 15 minutes prior to scheduled departure.
- Failure to meet the Boarding Requirements may result in cancellation of reservations, denied boarding, removal of checked baggage from the aircraft and loss of eligibility for denied boarding compensation.
- Bring your boarding pass or this eTicket Receipt along with photo identification to the airport.
- The FAA now restricts carry-on baggage to one bag plus one personal item (purse, briefcase, laptop computer, etc.) per passenger.
- For up to the minute flight information, sign-up for your Flight Status E-mail at <u>united.com</u> or call 1-800-784-4444; in Spanish 1-800-579-3938.
- If flight segments are not flown in order, your reservation will be cancelled. Rebooking will be subject to the fare rules governing your ticket.
- For the most current status of your reservation, flights and other important policies, go to united.com.

<sup>&</sup>lt;sup>2</sup> Flight operated by SKYWEST AIRLINES doing business as UNITED EXPRESS. If this is an originating flight on your itinerary, please check in at the UNITED AIRLINES ticket counter.

<sup>&</sup>lt;sup>3</sup> Flight operated by SKYWEST AIRLINES doing business as UNITED EXPRESS. If this is an originating flight on your itinerary, please check in at the UNITED AIRLINES TERMINAL 1 ticket counter.

Flight operated by UNITED AIRLINES.

• Your eTicket is non transferable and valid for 1 year from the issue date unless otherwise noted in the fare rules above.

#### **Customer Care Contact Information**

We welcome your compliments, comments or complaints regarding United or a United travel experience. You may contact us using our Customer Care contact form at united.com

#### Baggage allowances and fees

United accepts one carry-on item of no more than 45 linear inches or 114 linear centimeters in the aircraft cabin, along with one personal item (such as a shoulder or laptop bag).

In general, checked baggage fees are charged at any point in the itinerary where bags are checked. For itineraries operated exclusively by United or United Express, standard fees will apply to check baggage with a maximum weight of 50 pounds (23 kg) per bag and a maximum outside linear dimension of 62 inches (157 cm) as follows:

- Within the U.S. (including Hawaii, Puerto Rico and the U.S. Virgin Islands) and between the U.S. and Canada: First checked bag \$25, second checked bag \$35
- Between the U.S./Canada and the Caribbean: First checked bag \$25, second checked bag \$40
- Between the U.S. and Mexico/Central America: First checked bag \$0, second checked bag \$40
- Between the U.S. and Asia/Australia/New Zealand/Micronesia/Europe/Middle East/South America (except Brazil and Venezuela): First checked bag \$0, second checked bag \$70
- Between the U.S. and Africa: First checked bag \$0, second checked bag \$70 (Fee applies only to/from Cameroon/Egypt/Malawi/Morocco/Zambia; all other African countries have a \$0 second bag fee.)
- Between the U.S. (except Hawaii) and Japan: First checked bag \$0, second checked bag \$0
- Between Hawaii, Micronesia and Japan: First checked bag \$0, second checked bag \$40 First and second checked bag fees do not apply to active-duty members of the U.S. military and their accompanying dependents, customers confirmed in United Global First(SM), United First®, United BusinessFirst® or United Business®, or to United Global Services(SM), MileagePlus® Premier® 1K®, Premier Platinum, Premier Gold or Star Alliance® Gold members, or Presidential Plus(SM) primary credit cardholders. First checked bag fee does not apply to MileagePlus Premier Silver or Star Alliance Silver members, or MileagePlus Explorer or OnePass(SM)Plus primary credit cardholders. For additional information regarding checked baggage fees, allowances, weight/size restrictions, exceptions, embargoes, or overweight, oversized, odd-sized and sporting equipment charges, go to united.com. and select your special items and restrictions category. For travel itineraries that include flights operated by our alliance partners or other airlines, different baggage fees

may apply.

Learn more at united.com.

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1100 destinations worldwide. Go to www.staralliance.com to find out more. You've earned it.

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Satisfy your cravings with something tasty from our new In-Flight Menu. Snacks or freshly prepared selections are available for purchase on most flights between two and a half and six and a half hours.

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- Your travel is subject to United's Contract of Carriage terms. The Contract is available at any CO ticketing facility, united.com or by calling 1-800-UNITED-1 (1-800-864-8331). The Contract terms include rules about limits on liability for personal injury or death and for loss, damage, or delay of goods and baggage, check-in times, overbooking, security issues, reservations, denial of carriage, refunds, claims limits and restrictions, including time limitations for filing a claim or lawsuit, and schedule changes and irregularities.
- On domestic flights, United's maximum liability limit for checked baggage is \$3300 USD per passenger, and United excludes liability for all unchecked baggage. United excludes liability for fragile, valuable or perishable items carried in all baggage including jewelry, computers, cash, camera equipment and similar valuables. If any of these items are lost, damaged or delayed, you will not be entitled to any reimbursement. On international flights governed by the Warsaw Convention (including the domestic portions of the trip), maximum liability for checked baggage is approximately \$640 USD per bag, and \$400 USD per passenger for unchecked baggage. On international flights governed by the Montreal Convention (including domestic portions of the trip) maximum liability for baggage is 1,131 SDRs per passenger for checked and unchecked baggage. You can declare excess valuation on certain baggage at the airport, additional fees will apply.
- For international flights, a treaty known as the Warsaw or the Montreal Convention may apply to the entire journey. When applicable, it governs, amongst other things, the liability of the carrier for baggage and death of or injury to passengers.
- The <u>Contract of Carriage</u> contains further detail of these terms.
- Personal Health For important health tips before your flight, including information on a serious condition called Deep Vein Thrombosis, please go to united.com or call 1800WECARE2. This information is also in the United magazine on board your flight.

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#### Evans, Bill

From:

Bill.Evans@wsp.wa.gov

Sent:

Friday, February 17, 2012 11:08 AM

To:

Evans, Bill

Subject:

FW: Registration for LEIU/IALEIA 2012 Annual Training Seminar - Completed

Attachments:

registration\_confirmation\_letter.pdf

From: LEIU Registration

Sent: Friday, February 17, 2012 11:07:04 AM (UTC-08:00) Pacific Time (US & Canada)

To: Evans, Bill (WSP)

Subject: Registration for LEIU/IALEIA 2012 Annual Training Seminar - Completed

Attention: Registration for LEIU/IALEIA 2012 Annual Training Seminar The following

registration was submitted on-line:

Name: Evans, William E

Rank/Title: Lead Intelligence Analyst

Email: bill.evans@wsp.wa.gov

Agency: Washington State Fusion Center (WSFC) Phone Number: (425) 350-9673 LEIU zone: 12841

Address: 4513 115th Place SE

City: Everett Zip: 98208 State: WA Country: US

Time Base: Full Time Trainee Status: Analyst

Roster: Y IALEIA Member

[end of information]

Please see the attached registration letter for additional information. If you did not receive the attachment or have problems opening it, you can also find the letter at: http://leiu-homepage.org/events/conference/registration confirmation letter.pdf

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## **LOEWS**

CORONADO BAY

William Evans

Room Number:

5306

Arrival Date:

04-27-12

Departure Date:
Confirmation Number:

05-02-12 7430971

Merchant Ref#:

Page No:

1 of 2

Guest Name:

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#### CORONADO BAY

William Evans

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5306

Arrival Date:

04-27-12

Departure Date:
Confirmation Number:

05-02-12 7430971

Merchant Ref#:

Page No:

2 of 2

Guest Name:

INVOICE A/R No:

Folio No: 238640

05-02-12

Date	Description		Charges	Credits
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		Balance	0,00	

### Association of Law Enforcement Intelligence Units (LEIU)

The Association of Law Enforcement Intelligence (Inits (LEIU) is an organization whose mission is to provide leadership and promote professionalism in the criminal intelligence community. LEIU was founded in 1956 and subsequently established criminal intelligence standards that are recognized by both law enforcement and civil libertarians as creating a proper balance between the needs of law enforcement and the constitutional privacy rights of individuals.

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Although LEIU is primarily an agency-based membership, it recently changed its bylaws to allow for individual members. If you would like additional information on joining, please visit the LEIU website @ www.leiu.org or for informational material and an application contact LEIU at 916-227-7881.

Let LEIU be "Your voice at the national level!"



### International Association of Law Enforcement Intelligence Analysts (IALEIA)

The purpose of IALEIA is to advance high standards of professionalism in law enforcement intelligence analysis at the local, state/provincial, national, and international levels. Its aim is to enhance general understanding of the role of intelligence analysis, encourage the recognition of intelligence analysis as a professional endeavor, develop international qualification and competence standards, reinforce professional concepts, devise training standards and curricula, furnish advisory and related services on intelligence analysis matters, conduct analytic-related research studies and provide the ability to disseminate information regarding analytical techniques and methods.

IALEIA is an individual-based membership. If you are not a member and would like to join or receive information on joining please visit the IALEIA website @ www.ialeia.org.



For more information on the conference please visit our website at: <a href="www.leiu.org">www.leiu.org</a>

Continue to visit this site for conference update information.

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IALEIA Mer	mber:	(	) \$425.00 USD
Guest/Spouse	e:	(	) \$175.00 USD
Sponsor/Exh	ibitor:	(	) \$425.00 USD **
		(	) \$175.00 USD **
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LEIU T	ation fee enclosed – Mak raining nount Enclosed: \$	e chec	k payable to:
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<u> </u>	line at: www.leiu.org		
Mail to:	California DOJ/LEIU 4949 Broadway, Sacra		o, CA 95820
Fax to:	LEIU Attn: Bob Morel (916) 227-1228	ouse	
E-mail to:	leiu@doj.ca.gov		<u> </u>

Rosters will be provided to Conference Sponsors/Exhibitors.

Do you want to be listed on the Conference Roster?

( ) YES ( ) NO

Roster:

#### Theme and Speakers

The theme of the May 2012 training conference in San Diego, California will be **Criminal Intelligence: Catch the Wave.** Internationally recognized speakers and those who are leaders in the intelligence community will be on hand to provide up-to date information. Private security personnel are invited to attend non-law enforcement sensitive training at the non-member rate.

#### Speakers and workshops will involve training related to:

- criminal intelligence
- transnational organized crime and gangs
- international terrorism
- legal issues in criminal intelligence
- organized crime and gangs
- information sharing among law enforcement

See the LEIU website  $\underline{www.leiu.org}$  for updated confirmed speaker information.

#### Training Conference-related Activities

- Hosted Banquet May 3, 2012
- Additional Activities TBA at www.leiu.org

#### Non-IALEIA/LEIU members who are not employed by a law enforcement agency will need IALEIA/LEIU Board approval.

The Department of Homeland Security (DHS) har approved the use of DHS Homeland Security Gr. Program funds to pay for attendance at the LEIU/IALEIA conferences in Vancouver in 2007, Boston in 2008, Las Vegas in 2009, Florida in 2010, and Nashville in 2011. Once again, the LEIU/IALEIA conference will have a strong nexus to Homeland Security and therefore qualify for DHS grant funds. However, as always, grant expenditures must be cleared with your DHS State Administrative Agency to make sure this applies in your region.

#### **Contact Information**

Michele Panages (916) 227-7881 - LEIU Bob Morehouse (916) 704-4949 - LEIU Jenny Johnstone (604) 561-3311 - IALEIA Steve Pokotylo (250) 818-2075030ALEIA



#### Training Conference Location and Reservations

Loews Coronado Bay 4000 Coronado Bay Road, Coronado, CA 92118 Tel: (619) 424-4500

> Go online to reserve your room and learn more about the hotel at:

#### Loews Coronado Bay Hotel

http://www.loewshotels.com/en/Coronado-Bay-Resort/GroupPages/leiu

Type this link into your web browser.

~ ROOM RATES ~

#### Federal Per Diem Single/Double:

\$133.00 (USD) / Night Applicable Taxes/Fees (Currently 18.25%)

- Sea Spa featuring 15 treatment areas for massages, steam, sauna, relaxation lounge; and complete fitness center and aerobic studio with group and private classes
- Self or Valet Parking
  - o Self Parking is \$10 a day (Reduced Group Rate)
  - o Valet Parking is \$28 a day (Reduced Group
- 65,000 square feet of indoor and outdoor meeting
- 3 outdoor swimming pools (including an adult section), whirlpools, and expansive deck areas
- 3 lighted, bayside tennis courts
- Onsite Coronado Surfing Academy for surfing and stand up paddle lessons
- 24-hour in-room dining
- Wireless Internet Access
- Fitness Center Access
- Automated Business Center available 24 hours
- Complimentary scheduled shuttle to attractions (Downtown Gaslamp Quarter and/or Downtown Coronado)

#### **Cut-Off Date**

The "cut-off date" for room reservations at this rate is April 6, 2012.

Address Correction Required

4949 Broadway Ca

**Enforcement Intelligence Units** 





LEIU/IALEIA

San Diego, California April 30 - May 4, 2012

Criminal Intelligence: Catch the Wave



Loews Coronado Bay San Diego, California

000308

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Let LEIU be "Your voice at the national level!"

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For more information on the conference please visit our website at: <a href="https://www.leiu.org">www.leiu.org</a>

Continue to visit this site for conference update information.

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Rank/Title:			
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LEIU Mem	ber:	(	) \$425.00 USD
IALEIA M	ember:	(	) \$425.00 USD
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Mail to:	California DOJ/LEI 4949 Broadway, S		o, CA 95820
Fax to:	LEIU Attn: Bob Mo (916) 227-1228	orehouse	
E-mail to:	leiu@doi.ca.gov		

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Michele Panages (916) 227-7881 - LEIU Bob Morehouse (916) 704-4949 - LEIU Jenny Johnstone (604) 561-3311 - IALEIA Steve Pokotylo (250) 818-2075 - IALEIA FORM A19-1A (Rev. 3/95)



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Olympia, WA 98507-2347	
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QUANTITY UNIT

### **CONTRACTOR SERVICE HOURS**

Period: Beginning

1/1/2012 ...
mm/dd/yr

Ending	
1/31/2012	
mm/dd/yr	

Name: William E. Evans Location: 1110 3rd Avenue, Seattle, WA 98101

	<del></del>	<del></del>	
Mo.	Day		Description of Services Provided
Jan	1		Regular Day Off
Jan	2	9.5	Lead Analyst, WSP, WSFC
Jan	3	9.5	Lead Analyst, WSP, WSFC
Jan	4	9.5	Lead Analyst, WSP, WSFC
Jan	5	9.5	Lead Analyst, WSP, WSFC
Jan	6	5.5	Lead Analyst, WSP, WSFC
Jan	7		Regular Day Off
Jan	8		Regular Day Off
Jan	9	9.5	Lead Analyst, WSP, WSFC
Jan	10	9.5	Lead Analyst, WSP, WSFC
Jan	11	9	Lead Analyst, WSP, WSFC
Jan	12	9	Lead Analyst, WSP, WSFC
Jan	_13	9	Lead Analyst, WSP, WSFC
Jan	14		Regular Day Off
Jan	15		Regular Day Off
Jan	16	7	Lead Analyst, WSP, WSFC
Jan	17	8	Lead Analyst, WSP, WSFC
Jan	18	6	Lead Analyst, WSP, WSFC
Jan	19	7.5	Lead Analyst, WSP, WSFC
Jan	20	0	Reserve Duty
Jan	21		Regular Day Off
Jan	22	0	Regular Day Off
Jan	23	9	Lead Analyst, WSP, WSFC
Jan	24	9	Lead Analyst, WSP, WSFC
Jan	25	9	Lead Analyst, WSP, WSFC
Jan	26	9	Lead Analyst, WSP, WSFC
Jan	27	5	Lead Analyst, WSP, WSFC
Jan	28		Regular Day Off
Jan	29	0	Regular Day Off
Jan	30	5	Lead Analyst, WSP, WSFC
Jan	31	8	Lead Analyst, WSP, WSFC
Total	Hours:	1737	
	, 11		

Walle To Come

31-Jan-12

Contractor Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

31-Jan-12

Local Reviewer Signature/Date

#### ICE COMMUNICATION

### Washington State Patrol

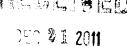
TO: Lieutenant Randy Drake, Investigative Assistance Division

FROM: Ms. Cindy Haider, Budget and Fiscal Services

Amendment 1 to WSP Contract No. C090551PSC

**SUBJECT:** 

DATE: December 21, 2011





Attached is a fully executed copy of the above-listed amendment between the Washington State Patrol and Operational Applications, Inc.

The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above; please use this number on all correspondence associated with this contract. If you need further assistance, please contact me at Budget and Fiscal Services, Micro 12, ext. 11071.



#### Attachment

Ms. Tanya Pierce, Budget and Fiscal Services cc:

Ms. Melissa Stricklett, Budget and Fiscal Services

Captain Steve Sutton, Investigative Assistance Division



Washington State Patrol Budget and iscal Services Contract Notification Form

☐ Billable over \$10,000 ☐ Billable under \$10,000 ☐ Payable ☐ Other:												
WSP Contract				Other Contract	er Contract Number				A/R Number			
Contract Start					tract End Date CFDA No. QFSR					· ·		
10/1/2011				9/30/2012				_ <del></del>		]Yes  □No		
Contract Title CRIMINAL INTELLIGENCE ANALYST SERVICES												
Contractor Name Contractor EIN/SSN												
OPERATION	IAL AF		S INC.		·							
Contractor Contact Address												
4227 SOUTH MERIDIAN SUITE C366, PUYALLUP WA 98373												
Contractor Co		ame	*	Contractor Co				FS Contract	•	t Name		
DOUG LARM				253-226-956				INDY HAI				
Contractor E-N			ļ	Contractor Co	ontact Fax			FS Fiscal A	•	e		
doug.larm@or								ANYA PIE				
WSP Project N	•		I	WSP Section	/Division/Bur	eau		FS Budget /	•			
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## WSP Contract No. C090551PSC Amendment 1

OPERATIONAL APPLICATIONS INC

### WASHINGTON STATE PATROL CONTRACT AMENDMENT

The above-referenced Contract between the Washington State Patrol and Operational Applications Inc. is hereby amended as follows:

a. The maximum contract amount, listed on the first page of the contract, is revised from \$335,000.00 to \$416,000.00.

All other terms and conditions of this Contract remain in full force and in effect.

STATE OF WASHINGTON

THIS AMENDMENT is executed by the persons signing below, who warrant that they have the authority to execute this Amendment.

John R. Batiste, Chief
David J. Karnitz, Deputy Chief

3 DEC 2011

#### INTE. OFFICE COMMUNICATION

### **WASHINGTON STATE PATROL**

TO: Lieutenant Randy Drake, Investigative Assistance Division

**FROM:** Mr. Jeff Hugdahl, Budget and Fiscal Services

RECEIVED

SUBJECT: Task Order 2 to WSP Contract No. C90551PSC

DEC 0 9 2009

**DATE:** December 7, 2009

WSP IAD



Attached is a fully executed copy of the above-listed contract between the Washington State Patrol and Operational Applications, Inc. Funding for this contract has been encumbered under the budget code listed on the attached <u>Budget and Fiscal Services Contract Notification Form</u>. Please take the following steps to ensure the correct payment of this contract:

- If you feel the indicated budget code is incorrect, please contact me within fifteen days from the date of this IOC.
- Please ensure that the WSP employee preparing payment documents for this contract has a copy of this contract to ensure the payment documents are filled out correctly.
- The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above. Please ensure that all persons preparing payment documents for this contract reference this WSP Contract Number and use the indicated budget code on all payment documents.
- The final payment document for the contract must be marked "Final Payment" so the Accounts Payable Section can liquidate the remaining encumbrance balance for this contract.
- If the contract period of performance crosses fiscal year boundaries, please work with your assigned budget analyst to address any fiscal year end balances.

Please contact Ms. Cindy Haider at Micro 12, ext. 11071 if you have any questions or concerns regarding this contract.

JRH:clh
Attachment

cc:

Captain Tim Braniff, Investigative Services Division

Ms. Tanya Pierce, Budget and Fiscal Services

Ms. Melissa Stricklett, Budget and Fiscal Services



Washington State Patrol
Budget and Fiscal Services Contract Notification Form

Date	<u>11/2/09</u>	
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Operational A				Doug L	.arm)								
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#### **WASHINGTON STATE PATROL** Task Order

WSP Contract Number:

C090551PSC

Task Order Number:

Contractor: Operational Applications Inc.

Period of Performance

October 1,

September 30,

for Task Order:

Start Date:

2009

End Date:

2010

Description of Service:

The Contractor's Employee (Kia Graham) shall provide criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local

worksite for the Contractor's Employee during this Task Order is

the WAJAC.

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$50.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C090551PSC.

Maximum Task Order Amount: \$109,000.00

WSP Contact Name and

Telephone Number:

Lieutenant Randy Drake, (360) 704-2393

Contractor Contact Name and

Mr. Doug Larm, (253) 226-9564

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

Printed Name and Title

CERTIFICATE OF REL	LEASE	OR DI	SCHARGE FR	OM AC	TIVE D	JTY		
1. NAME (Lost, First, Middle)	2.	DEPARTM	ENT, COMPONENT AND	BRANCH	c.	SOCIALESEO	BIRIER/MATER	
GRAHAM, KIA MARIE		MY/USAF						
4.a GRADE, RATE, OR RANK 4.b PAY GRA	.DE		5. DATE OF BIRTH (YY)	YYMMDD)		E OBLIG. TERI		
PV2 E2						Month 01		
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		1	tation in intering					
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8.a LAST DUTY ASSIGNMENT AND MAJOR COMM	1	8.b STATION WHERE SEPARATED						
USAICFH CO D (TR) 309T TC	F	FORT HUACHUCA, A	AZ 8561					
9. COMMAND TO WHICH TRANSFERRED					10. SGLI C	ı	None	
368TH MI BN (WZP2W2), 921 S 4TH A						t: \$250,00		
11. PRIMARY SPECIALTY (List number, title and year specialty: List additional specialty numbers and		rina 🛏	12. RECORD OF SERVICE		Year(s)	Month(s)	Day(s)	
periods of one or more years.)			a. Date entered AD This		2003	02	10	
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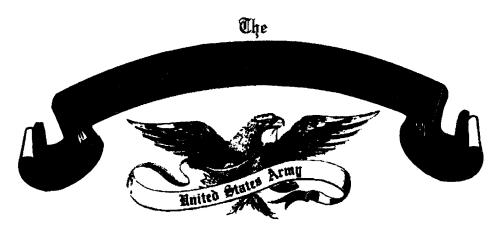
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AR 635-200, CHAP 4	MBK	NA
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29, DATES OF TIME LOST DURING THIS PERIOD		30. MEMBER REQUESTS COPY 4
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To all who shall see these presents greeting

Be it known that\_

PVT Kia M. Graham,

having successfully fulfilled

the requirements of instruction prescribed for the INTELLIGENCE ANALYST COURSE (243-96B10)
19 May 2003 - 15 September 2003
is hereby declared a

% Graduate %

In testimony Whereof, and by authority vested in us, We do confer upon the individual this

%Biploma%

Given :	at Fort Huachuca, Arizona this.	15 <sup>TH</sup> day of SEPTEMBER 20 03
	Sucart Prowning	James A Marks
S	Chief of Staff	Commandant

# INTERC FICE COMMUNICATION WASHINGTON STATE PATROL

TO: Lieutenant Randy Drake, Investigative Assistance Division

FROM: Mr. Jeff Hugdahl, Budget and Fiscal Services

SUBJECT: WSP Contract No. C090551PSC and Task Order No. 1

**DATE:** January 27, 2009

Attached is a fully executed copy of the above-listed contract and task order between the Washington State Patrol and Operational Applications, Inc. for Criminal Intelligence Analyst Ms. Kia Graham. Funding for this contract will be encumbered under separate task orders.

Please ensure that the WSP employee preparing payment documents for this contract has a copy of this contract to ensure the payment documents are filled out correctly.

The Budget and Fiscal Services contract tracking number is the WSP Contract Number noted above; please use this number on all correspondence and payment documents associated with this contract. If you need further assistance, please contact Ms. Cindy Haider, Budget and Fiscal Services, at Micro 12, ext. 11071.

for.

JRH:clh Attachment

cc: Ms. Sue Aschenbrenner, Budget Section

Captain Tim Braniff, Investigative Assistance Division

Ms. Tanya Pierce, Accounts Payable Section



#### Washington State Patrol

Date <u>1/8/09</u>

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Contractor Contact Address											
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Doug Larm				253-226-9564					<u></u>		
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□Revenue

Type of Receipt:

□ Accountant

⊠Budget Analyst

☐ Interagency Reimbursement

☑ Other: Captain Braniff

☐ Recovery of Expenditure

000322

#### **WASHINGTON STATE PATROL** Task Order

WSP Contract Number:

C090551PSC

Task Order Number:

Contractor: Operational Applications Inc.

Period of Performance

January 15,

September 30,

for Task Order:

Start Date:

2009

End Date:

2009

Description of Service:

The Contractor's Employee (Kia Graham) shall provide criminal intelligence analyst services during the time of the period of performance indicated above for this Task Order. The local worksite for the Contractor's Employee during this Task Order is

the WAJAC.

Fees:

Service Cost:

WSP shall reimburse the Contractor at the hourly

rate of \$48.00.

Other Costs:

WSP shall reimburse the Contractor for

Contractor Employee travel costs approved in advance by WSP according to the terms of WSP

Contract No. C090551PSC.

Maximum Task Order Amount: \$79,000.00

WSP Contact Name and

Lieutenant Randy Drake, (360) 704-2393

Telephone Number:

Contractor Contact Name and

Mr. Doug Larm, (253) 226-9564

Telephone Number:

FOR THE WASHINGTON STATE PATROL:

FOR THE CONTRACTOR:

John R. Batiste, Chief

Date

Printed Name and Title

### Washington State Patrol

Date 1/8/09

Budget and Fiscal Services Contract Notification Form

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LDS	

☐ Billable over \$10,000 ☐ Billable under \$10,000 ☒ Payable ☐ Other:											
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Contractor Contact Address											
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WASHINGTON STATE PATROL PERSONAL SERVICE CONTRACT Criminal Intelligence Analyst Services  WSP Contract No. C090551PSC Other Contract No.					
PERSONAL SERVICE CONTRACT Other Contract No.					
Criminal Intelligence Analyst Services					
This Contract is between the State of Washington, Washington State Patrol and the Contractor identified below	and is				
governed by chapter 39.29 RCW.	•				
CONTRACTOR NAME Contractor Doing Business As (DBA)					
Operational Applications Inc.					
Contractor Address Contractor Federal Employer Identification Number					
4227 South Meridian Suite C366					
Puyallup WA 98373					
Contact Name Contact Telephone					
Mr. Doug Larm 253-226-9564					
Contact Fax Contact E-mail Address					
doug.larm@operationalapplications.com					
WSP Contact Information					
WSP Project Manager Name and Title  WSP Project Manager Address					
	WSP Investigative Assistance Division				
PO Box 2347, Olympia VVA 98507-2347	PO Box 2347, Olympia WA 98507-2347				
(360) 704-2393 (360) 704-2973 randy.drake@wsp.wa.gov WSP Administrative Contact Name and Title WSP Administrative Contact Address	_				
	PO Box 42602				
	Olympia WA 98504-2602				
Telephone Fax E-mail Address					
(360) 596-4052 (360) 596-4077 jeff.hugdahl@wsp.wa.gov					
(300) 390-4032   (300) 330-4011					
Contract Start Date Contract End Date Maximum Contract Amount					
January 15, 2009 September 30, 2012 \$335,000					
ATTACHMENTS. When the boxes below are marked with an X, the following Exhibits are attached to and incorp	orated				
into this Contract by reference:					
⊠ Exhibit A, Statement of Work.					
Exhibit B, General Terms and Conditions					
☑ Additional Exhibits as specified: Exhibit C, Contractor Employee Nondisclosure Agreement					
This Contract, including the attached Terms and Conditions and any other documents incorporated by re	ference,				
contains all of the terms and conditions agreed upon by the parties. No other understandings or representations	s, oral or				
otherwise, regarding the subject matter of this Contract shall be deemed to exist or bind the parties. The parties	signing				
below warrant that they have read and understand this Contract and have the authority to enter into this Contract.					
FOR THE WASHINGTON STATE PATROL:  WSP Signature  Date  Contractor Signature  Date					
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John R. Batiste, Chief Deputy Chief DOUG LARM, PRESIDENT					
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#### STATEMENT OF WORK

#### 1. Statement of Work.

- a. <u>General</u>. As assigned by WSP, the Contractor Employee(s) identified below shall provide criminal intelligence analyst services at the Location of Work in order to provide the following products:
  - Raw intelligence classification and analysis
  - Daily intelligence briefings
  - Weekly and monthly written intelligence bulletins
  - Periodic intelligence assessments
  - Information dissemination to local law enforcement agencies
  - Effective communication to help others learn, understand and apply specific criminal intelligence analysis principles, techniques or information.
  - Effective identification, collection, organization and documentation of criminal intelligence data and information in ways that make the information most useful for subsequent assessment, analysis and investigation.

Contractor Employee	Location of Work
Kia Graham	WAJAC

- b. <u>Task Orders</u>. Work shall be assigned by a negotiated Task Order and must be signed by both parties. Each Task Order must identify the Contractor's Employee assigned to do the work ("Contractor Employees"), the Local Worksite to which the Contractor's Employee will be assigned and a start and end date for work at that location.
- 2. Contractor Qualifications. During the period of performance of this Contract, the Contractor Employee must maintain a federal Top Secret level security clearance.
- **3. Rules of Conduct.** During the period of performance of this Agreement, the Contractor must follow these basic rules of conduct while providing instruction:
  - a. Alcohol and Drug Use. The Contractor shall not consume any alcohol or intoxicating beverage while providing services under this Contract, and will not appear for work while under the influence of alcohol or while having alcohol in their system. The Contractor shall not possess, use, or store alcoholic beverages while at any WSP facility or local worksite. Contractor employees shall not use or possess any narcotic, dangerous drug, or controlled substance except at the direction of a physician, dentist, or other medical authority for medical purposes. If the Contractor is directed by competent medical authority to use a narcotic, dangerous drug, or controlled substance, he/she shall not use such medication to the extent that their performance is affected while at any WSP facility or local worksite.

#### STATEMENT OF WORK (Continued)

- Courtesy. The Contractor shall be courteous to WSP staff, other law enforcement partners, and the public. The Contractor shall be tactful in the performance of their duties, shall control their tempers and exercise the utmost patience and discretion, and shall not engage in argumentative discussions. In the performance of their duties, the Contractor shall not use coarse, violent, profane, or insolent language or gestures, and shall not express any prejudice concerning race, religion, sex, politics, national origin, lifestyle, or similar personal characteristics.
- c. <u>Appearance</u>. WSP expects the Contractor to present a professional image when providing services under this Contract. Clothing shall be neat, clean, and in good condition.
- 4. Confidential Information. The Contractor acknowledges that some of the material and information that may come into its possession or knowledge in connection with this Contract or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.17 RCW or other state or federal statutes ("Confidential Information"). Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information. The Contractor agrees to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without WSP's express written consent or as provided by law.

The Contractor agrees to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information. Immediately upon expiration or termination of this Contract, the Contractor shall, at WSP's option: (i) certify to WSP that the Contractor has destroyed all Confidential Information; or (ii) return all Confidential Information to WSP; or (iii) take whatever other steps WSP requires of the Contractor to protect Confidential Information. WSP reserves the right to monitor, audit, or investigate the use of Confidential Information collected, used, or acquired by the Contractor through this Contract.

Contractor Employees working under this Contract shall complete and sign Exhibit C, Contractor Employee Nondisclosure Agreement, attached hereto and incorporated into the Contract herein. Violation of this section by the Contractor may result in termination of this Contract and demand for return of all Confidential Information, monetary damages, or penalties. Furthermore, the Contractor is subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.

**5. Fees.** WSP will reimburse the Contractor at the hourly rate identified below for services provided by the Contractor Employee(s) under this Contract.

Contractor Employee	Initial - 9/30/09	10/1/09 - 9/30/10	10/1/10 - 9/30/11	10/1/11 - 9/30/12
Kia Graham	\$48.00	\$50.00	\$52.00	\$54.00

#### STATEMENT OF WORK (Continued)

When services are required by WSP at locations other than the local worksite, WSP will reimburse the Contractor for authorized lodging, subsistence and business vehicle mileage costs at current State of Washington approved reimbursement rates. These rates are published in the State Accounting and Administrative Manual (SAAM). This manual is available at the Office of Financial Management's SAAM website: <a href="http://www.ofm.wa.gov/policy/saamintro.htm">http://www.ofm.wa.gov/policy/saamintro.htm</a>

#### 6. Insurance Requirements.

- a. <u>Worker's Compensation Coverage</u>. The Contractor will at all times comply with all applicable workers' compensation, occupational disease, and occupational health and safety laws, statutes, and regulations to the full extent applicable. WSP will not be held responsive in any way for claims filed by the Contractor or their employees for services performed under the terms of this contract.
- b. <u>Business Auto Policy</u>. As applicable, the Contractor shall maintain business auto liability and, if necessary, commercial umbrella liability insurance with a limit not less than \$500,000 per accident. Such insurance shall cover liability arising out of "Any Auto." Business auto coverage shall be written on ISO form CA 00 01, 1990 or later edition, or substitute liability form providing equivalent coverage. The Contractor shall furnish evidence of Business Auto Policy insurance meeting contract requirements at the request of WSP.

#### **GENERAL TERMS AND CONDITIONS**

#### 1. Definitions.

"Contract" means this Personal Service Contract, including all documents attached or incorporated by reference.

"Contractor" means the entity performing services to this Contract and includes the Contractor's owners, members, officers, director, partners, employees and/or agents unless otherwise stated in this Contract. For purposes of any permitted Subcontract, "Contractor" includes any Subcontractor and its owners, members, officers, director, partners, employees and/or agents.

"General Terms and Conditions" means this Exhibit B.

"Statement of Work" means the Special Terms and Conditions of this Contract, which is attached hereto and incorporated herein as Exhibit A.

"Subcontract" means a separate contract between the Contractor and an individual or entity ("Subcontractor") to perform all or a portion of the duties and obligations that the Contractor is obligated to perform pursuant to this Contract.

"RCW" means the Revised Code of Washington. All references in the Contract to RCW chapters or sections shall include any successor, amended or replacement statutes.

"USC" means United States Code. All references in the Contract to USC chapters or sections shall include any successor, amended or replacement statutes.

"WSP" means the State of Washington, Washington State Patrol, and its officers, directors, trustees, employees and/or agents.

- 2. Payment. WSP shall reimburse the Contractor an amount not to exceed the Maximum Contract Amount specified on the Face Sheet of this Contract.
- 3. Billing Procedure. WSP shall reimburse the Contractor according to Exhibit A, Statement of Work, for work performed to the satisfaction of the WSP Project Manager. Compensation for services rendered shall be payable upon receipt of properly completed invoices, which shall be submitted not more often than monthly to the WSP Project Manager. The invoices shall describe and document to WSP's satisfaction a description of the work performed, activities accomplished, the progress of the project, fees and expenses, and WSP's contract number.
- **4. Advance Payments Prohibited.** WSP shall not make any payments in advance or anticipation of the delivery of goods or services provided by the Contractor pursuant to this Contract.
- 5. **Assignment.** The work to be provided under this Contract, and any claim arising thereunder, is not assignable or delegable by the Contractor in whole or in part, without the express written consent of WSP.
- 6. Attorneys' Fees and Costs. If any litigation is brought to enforce any term, clause, provision or section of this Contract or as a result of this Contract in any way, the prevailing party shall be awarded

its reasonable attorney's fees together with expenses and costs incurred with such litigation, including necessary fees, costs and expenses for services rendered at both trial and appellate levels as well as subsequent to judgement in obtaining execution thereof. In the event that parties to this Contract engage in arbitration, mediation or any other alternative dispute resolution forum to resolve a dispute in lieu of litigation, both parties shall share equally in the cost of the alternative dispute resolution, including the cost of mediation or arbitration services. Each party shall be responsible for their own attorney's fees incurred as a result of the alternative dispute resolution method.

- 7. Compliance with Civil Rights Laws. During the period of performance for this Contract, the Contractor shall comply with all federal and state nondiscrimination laws, including, but not limited to, Title VII of the Civil Rights Act, 42 USC 12101 et seq.; the Americans with Disabilities Act (ADA); and Chapter 49.60 RCW.
- 8. Confidentiality. The Contractor shall not use or disclose any information concerning WSP, or information that may be classified as confidential, to any third party without the written permission of WSP. The Contractor shall destroy or return all such information to the WSP Program Manager at the end of this Contract.
- 9. Contract Execution and Amendments. This Contract shall be binding on WSP only upon signature by the Chief of WSP or designee. WSP and the Contractor may mutually amend this Contract. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind WSP and the Contractor.
- 10. Contractor Certification Regarding Ethics. The Contractor certifies that the Contractor is in compliance with Chapter 42.52 RCW, Ethics in Public Service, and will comply with Chapter 42.52 RCW throughout the term of the Contract.
- 11. Disputes. In the event that a dispute arises under this Contract, it shall be resolved by a Dispute Board in the following manner: The Chief of WSP shall appoint a member to the Dispute Board. The Contractor shall appoint a member to the Dispute Board. The Chief of WSP and the Contractor shall jointly appoint a member to the Dispute Board. The Dispute Board shall evaluate the dispute and make a determination of the dispute. The determination of the Dispute Board shall be final and binding to all parties to this Contract.
- 12. Governing Law. This Contract shall be governed in all respects by the laws of the State of Washington. The jurisdiction for any action hereunder shall be the Superior Court for the State of Washington. The venue of any action hereunder shall be in the Superior Court for Thurston County, State of Washington.
- 13. Indemnification. The Contractor shall indemnify, defend and hold harmless WSP from and against all claims arising out of or resulting from the performance of this Contract. The Contractor expressly agrees to indemnify, defend and hold harmless WSP for any claim arising out of or incident to the Contractor's performance or failure to perform this Contract. The Contractor shall be required to indemnify, defend and hold WSP harmless to the extent claim is caused in whole or in part by negligent acts or omissions of the Contractor.
- 14. Independent Capacity. The Contractor acknowledges that the Contractor is an independent contractor, and not an officer, employee or agent of WSP or the State of Washington. The Contractor shall not hold itself out as, nor claim status as, and officer, employee or agent of WSP or the State of Washington. The Contractor shall indemnify and hold WSP harmless from all obligations to pay or withhold federal or state taxes or contributions on behalf of the Contractor or the Contractor's employees unless otherwise specified in this Contract.

- 15. Industrial Insurance Coverage. Prior to performing work under this Contract, the Contractor shall provide or purchase industrial insurance coverage for its employees, as may be required of an "employer" as defined in Title 51 RCW, and shall maintain full compliance with Title 51 RCW during the period of performance for this Contract. WSP shall not be responsible for payment of industrial insurance premiums or for any other claim or benefit for the Contractor, or any subcontractor or employee of the Contractor, which might arise under the industrial insurance laws during the performance of duties and services under this Agreement.
- 16. Insurance. The Contractor shall provide insurance coverage as set out in Exhibit A, Statement of Work. The intent of the required insurance is to protect the State of Washington should there be any claims, suits, actions, costs, damages or expenses arising from any negligent or intentional act or omission of the Contractor or any subcontractor, or agents of either, while performing under the terms of this Contract.
- 17. Inspection; Maintenance of Records. During the term of this Contract and for one year following termination or expiration of this Contract, the Contractor shall give reasonable access to the Contractor's place of business and records to WSP and any other employee or agent of the State of Washington or the United States of America for the purpose of inspecting the Contractor's place of business and its records, and monitoring, auditing and evaluating the Contractor's performance and compliance with applicable laws, regulations, rules and this Contract.

During the term of this Contract and for six years following termination or expiration of this Contract, the Contractor shall maintain records sufficient to document (i) performance of all acts required by statute, regulation, rule, or this Contract; (ii) substantiate the Contractor's statement of its organization's structure, tax status, capabilities and performance; and (iii) demonstrate accounting procedures, practices and records that sufficiently and properly document the Contractor's invoices to WSP and all expenditures made by the Contractor to perform as required by this Contract.

**18. Order of Precedence.** In the event of any inconsistency in the terms of this Contract, or between its terms and any applicable statute or rule the inconsistency shall be resolved by giving precedence in the following order to:

Applicable federal and state law, regulations and rules; Exhibit A, Statement of Work; Any other provision of this Contract; and Any document incorporated by reference.

- 19. Overpayments to Vendors. Upon notice of an erroneous payment or overpayment to which the Contractor is not entitled pursuant to this Contract, the Contractor shall promptly refund to WSP the full amount of any such payment or overpayment.
- 20. Personnel. WSP employees performing work under the terms of this Contract (if any) shall be under the direct command and control of the Chief of WSP or designee, and shall perform duties required under this Contract in a manner consistent with WSP policy and regulations, and applicable federal, state and local laws. The assignment of WSP personnel under this Contract shall be at the discretion of the Chief of WSP or designee.

21. Rights in Data. Unless otherwise provided, data that originates from this Contract shall be "works for hire" as defined by the U.S. Copyright Act of 1976 and shall be owned by WSP. Data shall include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions. Ownership includes the right to copyrights, patent, register, and the ability to transfer these rights.

Material delivered by the Contractor under the terms of this Contract, but which does not originate therefrom, shall be transferred with a nonexclusive, royalty-free irrevocable license to publish, translate, reproduce, deliver, performs, dispose of, and to authorize others to do so, provided that such a license shall be limited to the extent which the Contractor has a right to grant such a license. The Contractor shall exert all reasonable efforts to advise WSP at the time of material delivery of all known or potential invasions of privacy contained therein and of any portion of such material which was not produce in performance of this Contract. WSP shall receive prompt written notice of each notice or claim of copyright infringement received by the Contractor with respect to any material delivered under this Contract. WSP shall have the right to modify or remove any restrictive markings placed upon the data by the Contractor.

- 22. Savings. In the event that funds WSP relied upon to establish this Contract are withdrawn, reduced or limited, or if additional or modified conditions are placed on such funding, WSP may immediately terminate this Contract by providing written notice to the Contractor. This termination shall be effective on the date specified in the notice of termination.
- 23. Severability. If any provision of this Contract or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Contract which can be given effect without the invalid provision, if such remainder conforms to the requirements of applicable law and the fundamental purpose of this Contract, and to this end the provisions of this Contract are declared to be severable.
- **24. Site Security.** While on WSP's premises, the Contractor shall conform in all respects with physical, fire or other security regulations communicated to the Contractor by WSP.
- **25. Subcontracting.** Except as otherwise provided in this Contract, the Contractor may subcontract for any of the services provided under this Contract with the prior, written approval of WSP. The Contractor shall be responsible for the acts and omissions of any subcontractor.
- 26. Survivorship of Provisions. Any terms, conditions and warranties contained in this Contract that by their sense and context are intended to survive performance by the parties to this Contract shall so survive the completion of the period of performance or termination of this Contract.
- 27. Taxes. WSP shall pay sales and use taxes imposed on services provided by the Contractor under this Contract if required by state law. The Contractor shall pay all other taxes, including, but not limited to, Washington State Business and Occupation Tax, taxes based on the Contractor's income, or personal property taxes levied or assessed on the Contractor's personal property to which WSP does not own title.
- 28. Termination for Convenience. Except as otherwise provided in this Contract, either party may terminate this Contract upon thirty (30) calendar days written notification. If this Contract is so terminated, the terminating party shall be liable only for performance in accordance with the terms of this Contract for performance rendered prior to the effective date of termination.

29. Termination for Default. WSP may terminate the Contract for default, in whole or in part, if WSP has a reasonable basis to believe that the Contractor failed to perform under any provision of this Contract; violated any applicable law, regulation, rule or ordinance; or otherwise breached any provision or condition of this Contract.

WSP shall notify the Contractor in writing of the need to take corrective action. If corrective action is not taken within five (5) calendar days, the Contract may be terminated. WSP reserves the right to suspend all or part of the Contract, withhold further payments, or prohibit the Contractor from incurring additional obligations of funds during investigation of the alleged breach and pending corrective action by the Contractor or a decision by WSP to terminate the Contract.

In the event of termination for default, the Contractor shall be liable for damages as authorized by law including, but not limited to, any cost difference between the original contract and the replacement or cover contract, and all administrative costs directly related to procuring the replacement contract. If it is determined that the Contractor was not in default the termination shall be deemed a termination for convenience. The rights and remedies of WSP provided under this Contract are not exclusive and are in addition to any other rights and remedies provided by law.

- **30. Termination Procedure.** The following provisions shall survive and be binding on the parties to this Contract in the event this Contract is terminated.
  - a. The Contractor shall stop work under this Contract on the date specified in the notice of termination, and shall comply with all instructions contained in the notice of termination.
  - b. The Contractor shall deliver to the WSP Project Manager identified on the Face Sheet of this Contract, all WSP property in the Contractor's possession and any WSP property produced under this Contract. The Contractor grants WSP the right to enter upon the Contractor's premises for the sole purpose of recovering any WSP property that the Contractor fails to return within ten (10) calendar days of termination of the Contract. Upon failure to return WSP property within ten (10) calendar days of the Contract termination, the Contractor shall be charged with all reasonable costs of recovery, including transportation and attorney's fees. The Contractor shall protect and preserve any property of WSP that is in the possession of the Contractor pending return to WSP. The Contractor shall provide written certification to WSP that the Contractor has returned all WSP property in the Contractor's possession.
  - c. WSP may direct assignment of the Contractor's rights to and interest in any subcontract or orders placed to WSP. WSP may terminate any subcontract or orders, and settle or pay any or all claims arising out of the termination of such orders and subcontracts.
  - d. WSP shall be liable for and shall pay for only those services authorized and provided through the date of termination. WSP may pay an amount agreed to by the parties for partially completed work and services, if work products are useful to WSP.
  - e. In the event of termination for default, WSP may withhold a sum from the final payment to the Contractor that WSP determines necessary to protect WSP against loss or additional liability.

- 31. Treatment of Assets. Title to all property furnished by WSP to the Contractor under the terms of this Contract shall remain with WSP. Any property furnished by WSP to the Contractor under the terms of this Contract shall be used only for the performance of this Contract. The Contractor shall be responsible for any loss or damage of property provided to the Contractor by WSP resulting from the failure on the part of the Contractor to maintain and administer that property in accordance with sound management practices. Upon the discovery of loss or damage of WSP property, the Contractor shall notify WSP and take all reasonable steps to prevent any further loss or damage. upon the termination or completion of this Contract the Contractor shall surrender all WSP property to the WSP Project Manager indicated on the Face Sheet of this Contract.
- **32. Waiver.** A failure by WSP to exercise its rights under this Contract shall not preclude WSP from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Contract unless stated to be such in writing and signed by an authorized representative of WSP and attached to the original Contract.

#### CONTRACTOR EMPLOYEE NONDISCLOSURE AGREEMENT

I acknowledge that some of the material and information that may come into my possession or knowledge in connection with Washington State Patrol Contract Number (Contract) or its performance may consist of information that is exempt from disclosure to the public or other unauthorized persons under either chapter 42.56 RCW or other state or federal statutes ("Confidential Information").
Confidential Information includes, but is not limited to, names, addresses, Social Security numbers, e-mail addresses, telephone numbers, financial profiles, credit card information, driver's license numbers, medical data, law enforcement records, agency source code or object code, agency security data, or information identifiable to an individual that relates to any of these types of information.
I agree to hold Confidential Information in strictest confidence and not to make use of Confidential Information for any purpose other than the performance of this Contract, and not to release, divulge, publish, transfer, sell, disclose, or otherwise make it known to any other party without the Washington State Patrol's express written consent or as provided by law.
I also agree to implement physical, electronic, and managerial safeguards to prevent unauthorized access to Confidential Information.
Immediately upon expiration or termination of this Contract or my employment with the Contractor, I shall surrender any and all Confidential Information in my possession to the Vendor for its disposition according to the terms of the Contract.
I understand that I am subject to all applicable state and federal laws, rules, and regulations, including RCW 10.97, violation of which may result in criminal prosecution.
Signature of Contractor Employee
Kia M. Graham / Intelligence Analyst Printed Name and Title
15 JAN091 Date

Exhibit F, Sample Contract	
WSP RFQQ No	

zoint Military Intelligence Training Center



# Certificate of Training

This is to certify that

Kia Graham

has successfully completed the Advanced Critical Thinking

during the period

6-9 December 2011



Brian D. Nicholson, CAPT, USN

Director 000336

Joint Military Intelligence Training Center



This is to certify that

WO1 Kia M. Graham

has successfully completed the

**USCENTCOM Critical Thinking and Structured Analysis Course** (80 Hours)

(DIA DISAP I)

**Analytic Writing (16 Hours)** 

11 – 22 July 2011

Presented by the
Directorate of Intelligence
United States Central Command

**\** 

OHN M. WARD JI

Chief, Resources and Requirements Division

# Emergency Management Institute



# **FEMA**

This Certificate of Achievement is to acknowledge that

### KIA M GRAHAM

has reaffirmed a dedication to serve in times of crisis through continued professional development and completion of the independent study course:

IS-00907 Active Shooter: What You Can Do

Issued this 24th Day of September, 2012



Superintendent

Emergency Management Institute



Joint Intelligence Training Academy Pacific

# W01 KIA M. GRAHAM

has satisfactorily completed

# Intelligence, Surveillance, Reconnaissance, and Collection Management

[40.0] Credit Hours

Completed on 27 JAN 2012

Commander, USN

Chief, JITAP



# Certificate of Training

This certificate is awarded to

# Kia Graham

for successful completion of

## Understanding Derivative Classification & Marking Webinar

January 19, 2012

This certification signifies that the above listed individual has successfully completed the necessary training and as such is authorized to perform derivative classification actions involving classified national security information. Recertification is required no later than 2 years from this date or your authorization to conduct derivative classification will be suspended.

This certification does not authorize the named individual to perform derivative classification actions involving Restricted Data (RD) or Formerly Restricted Data (FRD) classified pursuant to the Atomic Energy Act.

Darryl Wortman, Sr. Instructor

Training Branch, Office of Security

Jean E. Taulkner

Jean Faulkner, Chiet

Training Branch, Office of Security



# Federal Bureau of Investigation Certificate of Completion

This is to certify that KIA MARIE GRAHAM

Has successfully completed the following:

Active Shooter Awareness

On

12/1/2011

Assistant Director, Training Division

Print Close Window



Federal Bureau of Investigation

# Certificate of Completion

This is to certify that KIA MARIE GRAHAM

Has successfully completed the following:

DIOG 2011

On

12/26/2011

Thomas J. Browne

Assistant Director, Training Division



# Certificate of Training

This certificate is awarded to

# Kia Graham

for successful completion of

Understanding Derivative Classification & Marking Webinar

January 19, 2012

This certification signifies that the above listed individual has successfully completed the necessary training and as such is authorized to perform derivative classification actions involving classified national security information. Recertification is required no later than 2 years from this date or your authorization to conduct derivative classification will be suspended.

This certification does not authorize the named individual to perform derivative classification actions involving Restricted Data (RD) or Formerly Restricted Data (FRD) classified pursuant to the Atomic Energy Act.

Darryl Wortman, Sr. Instructor

Training Branch, Office of Security

Jean Faulkner, Chief

Training Branch, Office of Security

Jean E. Faulkner

**FORM** A19-1A (Rev. 3/95)

PO Box 2347

DATE



#### STATE OF WASHINGTON **INVOICE VOUCHER**

#### AGENCY NAME 1.50 Washington State Patrol Investigative Assistance Division Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-31 Dec 09 Analytical services for Dec 09 (Kia Graham)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

1998	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, halldicap, religion, or Vietnam era or disabled veterans status.

(SIGN IN INK) President, Operational Applications Inc (TITLE)

UNIT PRICE

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FOR AGENCY USE ONLY

1-31 Dec 09

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#### **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

Beginning Period:

11/1/2009 mm/dd/yr

11/30/2009 mm/dd/yr

**Ending** 

Graham Name:

Location:

1110 3rd Ave, Scattle, INA 98101

Mo.	Day		Description of Services Provided
Nov	1		Regular Day Off
Nov	2		Analyst, WSP, WSFC
Nov	3		Analyst, WSP, WSFC
Νον	4		Analyst, WSP, WSFC
Nov	5	10.5	Analyst, WSP, WSFC
Nov	6		Analyst, WSP, WSFC
Nov	7		Regular Day Off
Nov	8		Regular Day Off
Nov	9		Reserve Duty (Military School)
Nov	10		Reserve Duty (Military School)
Nov	11		Reserve Duty (Military School)
Nov	12		Reserve Duty (Military School)
Nov	13		Reserve Duty (Military School)
Nov	14		Regular Day Off
Nov	15	0	Regular Day Off
Nov	16	0	Reserve Duty (Military School)
Nov	17	0	Reserve Duty (Military School)
Nov	18		Reserve Duty (Military School)
Nov	19		Reserve Duty (Military School)
Nov	20		Reserve Duty (Military School)
Nov	21		Regular Day Off
Nov	22		Regular Day Off
Νον	23		Analyst, WSP, WSFC
Nov	24		Analyst, WSP, WSFC
Nov	25		Reserve Duty
Nov	26		National Holiday - Thanksgiving
Nov	27		Analyst, WSP, WSFC
Nov	28		Regular Day Off
Nov	29		Regular Day Off
Nov	30	12	Analyst, WSP, WSFC
	31		
Total	Hours:	99	
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Local Reviewer Signature/Date

FORM A19-1A (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

AGENCY NAME

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handidap, religion, or Vietnam era or disabled veterans

national origin, hapdidap, religion, or Vietnam era or disabled veterans status.

BY

(SIGN IN INK)

President Operational Applications Inc. (DATE)

WSP/SGT Jarmon

DATE GOODS/SERVICES RECEIVED

1-30 Nov 09

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12/1/2009 mm/dd/yr 12/31/2009 mm/dd/yr

Name:

Kiu Graham

**CONTRACTOR SERVICE HOURS** 

1110 3rd Ave Seattle, WA 98101 Location:

Mo.	Day	Hrs.	Description of Services Provided
Dec	1	10	Analyst, WSP, WSFC
Dec	2		Analyst, WSP, WSFC
Dec	3	11	Analyst, WSP, WSFC
Dec	4		Analyst, WSP, WSFC
Dec	5 ·		Regular Day Off
Dec	6	0	Regular Day Off
Dec	7		Analyst, WSP, WSFC
Dec	8	10.5	Analyst, WSP, WSFC
Dec	9	6	Analyst, WSP, WSFC
Dec	10	10	Analyst, WSP, WSFC
Dec	11 (		Analyst, WSP, WSFC
Dec	12		Regular Day Off
Dec	13		Regular Day Off
Dec	14	8	Analyst, WSP, WSFC
Dec	15	11.5	Analyst, WSP, WSFC
Dec	16		Analyst, WSP, WSFC
Dec	17		Analyst, WSP, WSFC
Dec	18		Analyst, WSP, WSFC
Dec	19		Regular Day Off
Dec	20		Regular Day Off
Dec	21		Analyst, WSP, WSFC
Dec	22		Analyst, WSP, WSFC
Dec	23		Analyst, WSP, WSFC
Dec	24		Requested Time Off
Dec	25		National Holiday - Christmas
Dec	26	0	Regular Day Off
Dec	27		Regular Day Off
Dec	28		Analyst, WSP, WSFC
Dec	29	9.5	Analyst, WSP, WSFC
Dec	30		Analyst, WSP, WSFC
Dec	31		Analyst, WSP, WSFC
Total I	Hours:	173⁄	

31 DIC 09

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

ANCE

Local Reviewer Name

Local Reviewer Signature/Date

12-500307

FORM A19-1A (Rev. 3/95)



# STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY
LOCATION CODE AGENCY NO P.R. OR AUTH. NO. 341009/34107 225

• • •	AGENCY NAME				<del></del> -
	State Patrol Assistance Division 7				INSTRUCTIONS TO VENDOR OR CLAIM, payment for materials, merchandise or serve each item.
Olympia, W	A 98507-2347				Vendor's Certificate. I hereby certify under
VENDO	R OR CLAIMANT (Warrant i	s to be p	ayable to	)	items and totals listed herein are proper ch

Douglas Larm Operational Applications Inc.

INSTRUCTIONS TO VENDOR OR CLAIMANT: payment for materials, merchandise or services. each item.	Submit this form to claim Show complete detail for
Each work.	

vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

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ACCO	UNTING A	PRO	OVAL FO	R PAYM	ENT		<del> </del>	<u>.                                    </u>		DATE						WARRANT TO	TAL O		WARRANT NUMBER

## **CONTRACTOR SERVICE HOURS**

Beginning Period:

10/1/2009 mm/dd/yr

10/31/2009 mm/dd/yr

**Ending** 

Kia Graham Name:

Location:

1110 3rd Ave. Scattle

WA-98101

F***			
Mo.	Day		Description of Services Provided
Oct	1		Analyst, WSP, WSFC
Oct	2		Analyst, WSP, WSFC
Oct	3		Regular Day Off
Oct	4		Regular Day Off
Oct	5		Analyst, WSP, WSFC
Oct	6		Analyst, WSP, WSFC
Oct	7		Analyst, WSP, WSFC
Oct	8		Analyst, WSP, WSFC
Oct	9		Analyst, WSP, WSFC
Oct	10		Regular Day Off
Oct	11		Regular Day Off
Oct	12		Analyst, WSP, WSFC
Oct	13		Reserve Duty
Oct	14	11	Analyst, WSP, WSFC
Oct	15		Analyst, WSP, WSFC
Oct	16		Reserve Duty
Oct	17		Regular Day Off
Oct	18		Regular Day Off
Oct	19		Reserve Duty
Oct	20		Reserve Duty
Oct	21		Reserve Duty
Oct	22		Reserve Duty
Oct	23		Reserve Duty
Oct	24		Regular Day Off
Oct	25		Regular Day Off
Oct	26		Reserve Duty
Oct	27	6	Analyst, WSP, WSFC
Oct	28	8	Analyst, WSP, WSFC
Oct	29		Analyst, WSP, WSFC
Oct	30		Analyst, WSP, WSFC
Oct	31		Regular Day Off
Total	Hours:	129	
<u> </u>			

20091030

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE. (To ensure reimbursement, this form must be accompanied by a State of Washington Vouchar Distribution Form A19-2A) FORM A19-1A (Rev. 3/95)

DATE



STATE OF WASHINGTON INVOICE VOUCHER

<u> </u>	10.	AGENCY USE ONLY		
AGENCY NO		LOCATION CODE	P.R. OR AUTH. NO.	_
225		341009/34107		

· ·	AG	ENC	YN	AME

Washington State Patrol
Investigative Assistance Division
PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-30 Sep 09 Analytical services for Sep 09 (Kia Graham)

Services performed under C090551PSC

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, hapdicap, religion, or Vietnam era or disabled veterans status.

BY MINIS

Jarmon

48.00

**UNIT PRICE** 

President Operational Applications Inc. (TITLE) (DATE)

DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-30 Sep 09

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		1							DATE					WARRANT TOTAL	WARRANT NUMBER

QUANTITY

155

UNIT

Hour

#### **Washington State Patrol**

## **CONTRACTOR SERVICE HOURS**

Beginning Period:

9/1/2009 mm/dd/yr

**Ending** 9/30/2009 mm/dd/yr

KIA Graham Name:

Location:

1110 3rd Ave, scattle WA 98101

100	Day	Li-e	Description of Condess Descrided
Mo.	Day		Description of Services Provided
Sep			Analyst, WSP, WSFC
Sep	2		Analyst, WSP, WSFC
Sep	3	10	Analyst, WSP, WSFC
Sep	4		Requested Time Off
Sep	5		Regular Day Off
Sep	6		Regular Day Off
Sep	7		National Holiday - Labor Day
Sep	8		Analyst, WSP, WSFC
Sep	9		Analyst, WSP, WSFC
Sep	10		Analyst, WSP, WSFC
Sep	11		Analyst, WSP, WSFC
Sep	12		Regular Day Off
Sep	13		Regular Day Off
Sep	14		Analyst, WSP, WSFC
Sep	15		Analyst, WSP, WSFC
Sep	16		Analyst, WSP, WSFC
Sep	17		Analyst, WSP, WSFC
Sep	18		Analyst, WSP, WSFC
Sep	19		Regular Day Off
Sep	20		Regular Day Off
Sep	21	9	Analyst, WSP, WSFC
Sep	22	0	Sick
Sep	23	0	Sick
Sep	24	0	Sick
Sep	25	0	Sick
Sep	26	0	Regular Day Off
Sep	27		Regular Day Off
Sep	28		Analyst, WSP, WSFC
Sep	29		Analyst, WSP, WSFC
Sep	30		Analyst, WSP, WSFC
	31		
Total	Hours:	155 ′	

OF OCTOP

[To ensure reimbursement, this

FREMON

Local Reviewer Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE. feeln must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

**FORM** A19-1A (Rev. 3/95)

DATE



#### STATE OF WASHINGTON INVOICE VOUCHER

#### AGENCY USE ONLY AGENCY NO P.R. OR AUTH. NO. LOCATION CODE 225 341009/34107

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Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-3I Aug 09 Analytical services for Aug 09 (Kia Graham)

Douglas Lam Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handjøgp, religion, or Vietnam era or disabled veterans

DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-31 Aug 09

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RECEIVED BY

UNIT

Hour

QUANTITY

90

WSP/SGT Jarmon

UNIT PRICE

48.00

### **Washington State Patrol CONTRACTOR SERVICE HOURS**

Beginning Period:

8/1/2009

8/31/2009

mm/dd/yr

mm/dd/yr

**Ending** 

Klá Graham Name: Location: 3rd Ave, Scotty, WA 98107

Mo.	Day		Description of Services Provided
Aug	_1		Regular Day Off
Aug	2		Regular Day Off
Aug	3		Reserve Duty (Annual Training)
Aug	4		Reserve Duty (Annual Training)
Aug	5		Reserve Duty (Annual Training)
Aug	6		Reserve Duty (Annual Training)
Aug	7		Reserve Duty (Annual Training)
Aug	8		Regular Day Off
Aug	9		Regular Day Off
Aug	10		Reserve Duty (Annual Training)
Aug	11		Reserve Duty (Annual Training)
Aug	12		Reserve Duty (Annual Training)
Aug	13		Reserve Duty (Annual Training)
Aug	14		Reserve Duty (Annual Training)
Aug	15		Regular Day Off
Aug	16		Regular Day Off
Aug	17		Requested Time Off
Aug	18		Analyst, WSP, WSFC
Aug	19		Analyst, WSP, WSFC
Aug	20		Analyst, WSP, WSFC
Aug	21		Analyst, WSP, WSFC
Aug	22		Regular Day Off
Aug	23		Regular Day Off
Aug	24		Requested Time Off
Aug	25		Analyst, WSP, WSFC
Aug	26		Analyst, WSP, WSFC
Aug	27		Analyst, WSP, WSFC
Aug	28		Analyst, WSP, WSFC
Aug	29		Regular Day Off
Aug	30		Regular Day Off
Aug	31		Analyst, WSP, WSFC
Total	lours:	90 /	

31AUG09

Contractor Signature/Date

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewer Name

Local Reviewer Sig/fature/Date

JARMON

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.



**FORM** A19-1A (Rev. 3/95)



#### STATE OF WASHINGTON INVOICE VOUCHER

i		AGENCY USE ONLY		
	AGENCY NO	LOCATION CODE	P.R. OF	RAUTH. NO.
1	225	341009/34107		

AGENCI NAME			
Washington State Patrol			_
Investigative Assistance Division			
PO Box 2347			•
Olympia, WA 98507-2347			
VENDOR OR CLAIMANT (Warrant I	s to be	payable to	<u>,</u>

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, happicap, religion, or Vietnam era or disabled veterans status.

I3405 159 <sup>ຫ</sup> Street Court East Puyallup, Washington 98374							yallup, Washington 98374											2 <u>AUG 2009</u> (DATE)
FEDERAL I.D. NO.	OR	SOCIAL S	SECURIT	Y NO. (For R	eporting	Personal S	ervices Cor	ntract Pays	ments to J.R.	· 1	RECEIVE WSF	12	WZ ST.	<i>yly</i> Jam	<i>Lila</i> ion	1-31 Jul		ES RECEIVED
DATE		<del></del>		DESC	RIPTK	ON .	10.4.00		QUANTI	ΤΥ	UNIT	· U	INIT	PRICE	AMO	FOR	AGEN	ICY USE ONLY
1-31 Jul 09	Ar	alytica	i serv	ices for J	uly 09	(Kia G	raham)		161		Hou	ır	. 4	18.00	7728	42		
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PREPARED BY Doug Lar	m		· · · · · · ·		(2	EPHONE N 53)22	6-9 <u>5</u> 6		Aug 09	9	AGENCY 2T		Z	با	- Ca	DATE	4.	<u>89</u>
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WARRANT NUMBER

WARRANT TOTAL

\$ 772800

## **CONTRACTOR SERVICE HOURS**

Beginning

Period:

7/1/2009 mm/dd/yr **Ending** 

7/31/2009 mm/dd/yr

Kia Graham Name:

Location:

	<del></del>		
Mo.	Day		Description of Services Provided
July	1		Requested Personal Time Off
July	2		Requested Personal Time Off
July	3	0	Requested Personal Time Off
July	4		Regular Day Off
July	5		Regular Day Off
July	6		Requested Personal Time Off
July	7		Analyst, WSP, WSFC
July	8	10	Analyst, WSP, WSFC
July	9	10	Analyst, WSP, WSFC
July	10		Analyst, WSP, WSFC
July	11		Regular Day Off
July	12		Regular Day Off
July	13		Analyst, WSP, WSFC
July	14		Analysi, WSP, WSFC
July	15		Analyst, WSP, WSFC
July	16		Analyst, WSP, WSFC
July	17		Analysi, WSP, WSFC
July	18		Regular Day Off
July	19		Regular Day Off
July	20		Reserve Duty
July	21		Reserve Duty
July	22	12	Analyst, WSP, WSFC
July	23	9	Analyst, WSP, WSFC
July	24		Analyst, WSP, WSFC
July	25		Regular Day Off
July	26		Regular Day Off
July	27	10.5	Analyst, WSP, WSFC
July	28	11	Analyst, WSP, WSFC
July	29	9.5	Analyst, WSP, WSFC
July	30		Analyst, WSP, WSFC
July	31		Reserve Duty
lota	Hours:	161′	

30JUL09

(To ensure reimbursement, this

Local Review

Demon

Local Reviewer Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TAKE AND COMPLETE. from must be accomparied by a Stale of Washington Voucher Distribution Form A19-2A)

#### **Washington State Patrol**

Name:

### **CONTRACTOR SERVICE HOURS**

**Beginning** 

6/1/2009

6/30/2009

**Ending** 

Period:

Location:

mm/dd/yr mm/dd/yr

1110 3RD AVENUE SEATTLE WA 98101 GRAHAM KIA Mo. Day Hrs. Description of Services Provided Analyst, WSP, WSFC Jun 2 8 Analyst, WSP, WSFC Jun Analyst, WSP, WSFC 3 Jun Analyst, WSP, WSFC 4 Jun Analyst, WSP, WSFC 5 Jun 6 Regular Day Off Jun Regular Day Off 0 Jun Analyst, WSP, WSFC 8 Jun 9.5 9 9.5 Analyst, WSP, WSFC Jun Analyst, WSP, WSFC 10 Jun 9.5 Analyst, WSP, WSFC Jun 11 12 Analyst, WSP, WSFC Jun Regular Day Off 13 Jun 14 Regular Day Off Jun 15 Analyst, WSP, WSFC Jun Analyst, WSP, WSFC 16 Jun Analyst, WSP, WSFC 17 Jun 18 Analyst, WSP, WSFC Jun 19 Analyst, WSP, WSFC Jun Regular Day Off 20 Jun 21 Regular Day Off Jun Requested Time Off 22 Jun 23 9.5 Analyst, WSP, WSFC Jun 24 Analyst, WSP, WSFC Jun 25 Analyst, WSP, WSFC Jun Analyst, WSP, WSFC 26 Jun Regular Day Off Jun 27 Regular Day Off 28 Jun Analyst, WSP, WSFC 29 Jun Analyst, WSP, WSFC Jun 30

Contractor Signature/Date

173

31

Total Hours:

30 TUNU9

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

RRMUN Local Reviewer Mame

Local Reviewer Signature/Date

, FORM	
A19-1A	
(Rev. 3/95)	



# STATE OF WASHINGTON

# INVOICE VOUCHER

	AGENCY NAME	
Washington S	State Patrol	
Investigative A	Assistance Division	

PO Box 2347 Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court **Fast** Puyallup, Washington 98 74



	AGENCY USE ONLY	
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.
225	341009/34107	

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veteran:

status.	im era or disabled veterans
BY DAMM	• .•
(SIGN IN INK)	20 1. 1. 1. 100
President Operational Applications Inc.	30/20 2009
(TITLE)	(DATE)

DER	VAL 1.D. NO.	NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Paymer							ments to I.R.S.)	1			_		DATE GOODS/SERVICES RECEIVED				
							_		- 		WSP/SGT Jarmon					1-30 Jun 09			
D	ATE				DESC	RIPTI	ON			QUANTITY	UNI	Т	UNIT	PRICE	AMO UNT	FOR AGE	NCY USE ONLY		
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## **CONTRACTOR SERVICE HOURS**

Period: 6/1/2009

6/1/2009 mm/dd/yr 6/30/2009 mm/dd/yr

Name: GRAHAM KIA Location: 1110 352 AVENUE SEATTLE WA 98101

Mo.	Day		Description of Services Provided
Jun			Analyst, WSP, WSFC
Jun	2	8	Analyst, WSP, WSFC
Jun	3		Analyst, WSP, WSFC
Jun	4		Analyst, WSP, WSFC
Jun	5		Analyst, WSP, WSFC
Jun	6		Regular Day Off
Jun	7		Regular Day Off
Jun	8		Analyst, WSP, WSFC
Jun	9		Analyst, WSP, WSFC
Jun	10		Analyst, WSP, WSFC
Jun	11		Analyst, WSP, WSFC
Jun	12	8	Analyst, WSP, WSFC
Jun	13		Regular Day Off
Jun	14		Regular Day Off
Jun	15		Analyst, WSP, WSFC
Jun	16		Analyst, WSP, WSFC
Jun	17		Analyst, WSP, WSFC
Jun	18		Analyst, WSP, WSFC
Jun	19		Analyst, WSP, WSFC
Jun	20		Regular Day Off
Jun	21		Regular Day Off
Jun	22		Requested Time Off
Jun	23		Analyst, WSP, WSFC
Jun	24	9	Analyst, WSP, WSFC
Jun	25		Analyst, WSP, WSFC
Jun	26		Analyst, WSP, WSFC
Jun	27		Regular Day Off
Jun	28		Regular Day Off
Jun	29		Analyst, WSP, WSFC
Jun	30	1.5	Analyst, WSP, WSFC
	31		
Total	Hours:	173	
		1	

Sallelle / 20TUNO9

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this turn must be accompanied by a State of Washington Voucher Distribution Form A19-2A)

Local Reviewed Mame

Local Reviewer Signature/Date

# **Operational Applications Inc.**

= it's where we're at

Attn: Doug Larm

13405 159th Street Court East

Puyallup WA 98374

## -Facsimile Cover Sheet-

Date Sent: 30 June 2009

TO: Ms Bev Wood

WSP OCIU FROM: Doug Larm

Operational Applications Inc.

253-226-9564

Facsimile number: 360-704-2972

This is page 1 of 4 pages

Message:

A19-1A vouchers for approval.

**FORM** A19-1A





(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

AGENCY NAME

VENDOR OR CLAIMANT (Warrant is to be payable to)

Washington State Patrol

Online Help

This document is a protected form for use or Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text field. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

AGENCY LISE ONLY

SELECTION NOCINOTION		
AGENCY NO.	LOCATION CODE	P.R. OR AUTH. NO.

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each

KIA M.	GRAHAM			Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.  BY (SigN-N INK)									
	·					oprieto		Ava L	jst	2JUNU9 (DATE)			
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DATE	DES	CRIPTION	9	UANTITY	UN	iT :	UNIT PRICE	A	AOUNT .	FOR AGENCY USE			
5/28/09	Maritime Summit R	Registration Fee						\$ 37	5.00				
5/28/09	Taxi Fare								0.00				
5/28/09	Taxi Fare								0.00				
5/29/09	Taxi Fare								0.00				
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PREPARED BY		TELEPHONE NUMBI	R DATE		AGE	Ney A	PPROVAL 7-			6-2-09			
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May 28 & 29, 2009

Bell Harber Conference Center

Seattle, WA

#### Receipt

Print

Email

Receipt Reference # 17953774

Registration Date:

May 07, 2009

Receipt Date:

May 07, 2009

Issued By:

Philips Publishing Group

Event:

Maritime & Port Security Summit 2009

Date/Time:

Thursday, May 28, 2009 - 8:00 am - 5:00 pm

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

Reference #

Name

Company/Organization

Type

17953774

Kia Graham

Washington State Fusion Center

Government 2 Day

Billed To:

Kia Marie Graham 1548 Woodside Ct Fircrest , WA 98466 United States

#### Personal Information:

Kia Graham Washington State Fusion Center 1110 3rd Ave Seattle, WA 98101 206-262-2519 kia.graham@wsp.wa.goy

Fees	Quantity	Unit Price	Amount
Government 2 Day Event Fee	1	\$375.00	\$375.00
		Subtotal:	\$375.00
		Total:	\$375.00

Summary of Transactions	Date	Amount	Balance
Transaction Amount	7-May-2009	\$375.00	\$375.00
Online Credit Card Payment(**********3043) (Details)	7-May-2009	\$-375.00	\$0.00
	Curr	ent Balance:	\$0.00

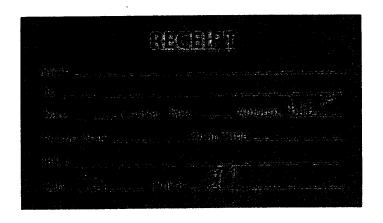
#### Payment Information

Payment Method: Credit Card (Mastercard)

The online credit card payment for this event will be listed on your credit card statement with the name Philips Publishing.

OWNER DRIV	/ERS	Date: 5/28/09					
THE SUM OF:	\$/0	00¢	YOUR RECEIPT PAID				
From:							
To:	<u> </u>	Pop	<del></del> .				
Cab No. <u>68</u> , 2450 - 6th AVE. So		//	JSINESS 292-0569				

FARWEST
CAB #356
01/08/00 TR 5442
START END MILES
01:29 02:12 0.0
FARE: \$ 10.00
EXTRA: \$ 0.00
TOTAL: \$ 10.00
THANKS MAY WE
SERVE YOU AGAIN
TEL 206 622-1717



DATE



### STATE OF WASHINGTON INVOICE VOUCHER

SHINGTON AGENCY USE ONLY LOCATION CODE P.R. OR AUTH: NO. 225 341009/34107

AGENCY NAME

Washington State Patrol
Investigative Assistance Division
PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

1-31 May 09 Analytical services for May 09 (Kia Graham)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals fisted herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, hardicap, religion, or Vietnam era or disabled veterans status.

BY DULLE

WSP/SGT Jarmon

UNIT

Hour

UNIT PRICE

48.00

President Operational Applications Inc.
(NTLE)

31 MAY 2109

DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-31 May 09

Services performed under C090551PSC PREPARED BY (253)226-9564 CURRENT DOC. NO. | IRFE PAGE TELEPHONE NUMBER 12109 1 Jun 09 Doug Larm PMT DUE DATE VENDOR NUMBER 602632122 COUNTY CITY/TOWN REF DOC SUF TRANS CODE APPN PROJECT AMOUNT INVOICE NUMBER \$ 8304 WAT 8 210 001 012 271 .... WARRANT TOTAL DATE WARRANT NUMBER ACCOUNTING APPROVAL FOR PAYMENT

QUANTITY

173

### **Washington State Patrol**

### **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 5/1/2009
 5/31/2009

 mm/dd/yr
 mm/dd/yr

Name: Kia Graham Location: IIIO 300 AVE Seattle, WA 98101

Mo.	Day	Hrs.	Description of Services Provided
May	1		Analyst, WSP, WSFC
May	2	0	Regular Day Off
May	3	0	Regular Day Off
May	4	10	Analyst, WSP, WSFC
May	5		Analyst, WSP, WSFC
May	6	0	Requested Personal Time Off
May	7		Analyst, WSP, WSFC
May	8		Analyst, WSP, WSFC
May	9	0	Regular Day Off
May	10		Regular Day Off
May	11		Analyst, WSP, WSFC
May	12		Analyst, WSP, WSFC
May	13		Analyst, WSP, WSFC
May	14		Analyst, WSP, WSFC
May	15		Reserve Duty
May	16		Regular Day Off
May	17		Regular Day Off
May	18		Analyst, WSP, WSFC
May	19		Analyst, WSP, WSFC
May	20		Analyst, WSP, WSFC
May	21		Analyst, WSP, WSFC
May	22	10	Analyst, WSP, WSFC
May			Regular Day Off
May	24		Regular Day Off
May	25		National Holdiay
May	26		Analyst, WSP, WSFC
May	27		Analyst, WSP, WSFC
May	28		Analyst, WSP, WSFC
May	29		Analyst, WSP, WSFC
May	30	0	Regular Day Off
May	31	0_	Regular Day Off
Tota	Hours:	173	
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Contractor Signature/Date

29 MAY 09

(To ensure reimbursement, this

. / (/

Local Reviewed Name

5-1-<del>00</del>6<del>3</del>64

Local Reviewer Signature/Date





STA F WASHINGTON

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)

AGENCY NAME

Washington State Patrol

VENDOR OR CLAIMANT (Warrant is to be

KIA M. GRAHAM

MAY 12 BUDGET 8

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Service

			50	T SARN	UN WSP	5-6-09
DATE	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT	FOR AGENCY. USE
4/19/09	Mileage round-trip: Home to Parking	80	_mi	0.55	\$ 44.00	
4/19/09	Shuttle to Airport				\$11.00	
4/19/09	Airfare (round trip) - Seattle / Las Vegas				\$ 254.20	
4/19/09	Baggage Fee (round trip)				\$ 100.00 d	a NOT lay see empi
4/19/09	LEIU Conference: Hotel Cost				\$ 654.00	perdiem K. David
4/19/09	LEIU Registration Fee				\$ 425.00	
4/19/09	Meal per diem (D)				\$29.00	
4/20/09	Meal per diem (B,L,D)		<u> </u>		\$ 64.00	
4/21/09	Meal per diem (B,L,D)				\$ 64.00	
4/22/09	Meal per diem (B,L,D)	<u> </u>	<u> </u>		\$ 64.00	
4/23/09	Meal per diem (B,L)				\$ 35.00	
4/24/09	Meal per diem (B,L)				\$ 35.00	
4/24/09	Shuttle from Hotel to Airport				\$6.00	
4/24/09	Taxi to parking garage	<u> </u>	Laction		\$45.00	0.75
KIA GA		1/24/09	(20)	APPROVAL	Tuel	DATE
DOC DATE	PMT DUE DATE CURRENT DOC NO. 1 RES BOC NO.	2 VENDOR NU	7.00	VENDOR M	ESSAGE USE	UBI NUMBER
REF TRANS	M PROPERTY OF THE PROGRAM NOEX SUB ORG NOEX NOEX OBJECT	WORKCLASS CO.	JOGET MOS	PROJECT PR	B PROJ AMOUNT	CO 90551 PSC
SUF 210	001 012 27/ GC			WADS	\$44-	mileage
210	001 012 271 GA			WATB	£945-9.	21 comests - ladging
210	001 012 27/ EG			WATE	\$425	conf. fee
210	001 012 271 GD			WAT8	9440.20	2.00 hable taxi
ACCOUNTING	APPROVAL FOR PAYMENT &C	DATE		UA38	WARRANT TOTAL 254	20 DARING TOWNSER

do not apply to contractors



ST. OF WASHINGTON

(Rev. 1/91) INVOICE VOUCHER (new online version 12/01)

AGENCY NAME

Washington State Patrol

VENDOR OR CLAIMANT (Warrant is to be

WILLIAM E. EVANS

RECEI

MAY 122

BUDGET & F

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Serv 5-6-09 OAKMON 257 \_ DATE DESCRIPTION QUANTITY UNIT UNIT AMOUNT FOR AGENCY PRICE 4/19/09 Mileage round-trip: Home to Airport 78 mi 0.55 \$ 42.90 4/19/09 Airfare (round trip) - Seattle / Las Vegas \$ 230.40 4/19/09 Taxi (Airport to Hotel) \$15.00 4/19/09 LEIU Registration Fee \$ 425.00 / 4/24/09 LEIU Conference: Lodging Cost \$ 621.30 4/24/09 Taxi (Hotel to Airport) \$15.00 4/19/09 Meal per diem (D) \$29.00 4/20/09 Meal per diem (B,L,D) \$64.00 4/21/09 Meal per diem (B,L,D) \$64.00 4/22/09 Meal per diem (B,L,D) \$64.00 4/23/09 Meal per diem (B,L) \$35.00 4/24/09 Meal per diem (B.L.D) \$64.00 Total \$1669.60 DATES/109 AGENCY APPROVAL PREPARED BY TELEPHONE NUMBER EVANS WILLIAM VENDOR NUMBER PMT DUE DATE VENDOR MESSAGE UBI NUMBER C090433FSC DOC DATE USE TRANS APPN INDEX FUND PROJECT 210 801 012 271 BC WATS 9 94130 WAT8 012 271 GA 210 001 meals-lodging E6 WAT8 20 271 001 012 56 airfal, fix WAJ 8 210 001 271 012 ACCOUNTING APPROVAL FOR PAYMENT DATE WARRANT NUMBER

5.20.09

out of state travel substines

FO	RM
A19	-1A
(Rev.	3/95)



#### STATE OF WASHINGTON INVOICE VOUCHER

AGENCY USE ONLY							
AGENCY NO	LOCATION CODE	P.R. OR AUTH. NO.					
225	341009/34107						

Washington	State	Patrol	
Investigative	Assis	tance	Division

PO Box 2347

Olympia, WA 98507-2347

VENDOR OR CLAIMANT (Warrant is to be payable to)

**AGENCY NAME** 

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

SY MILLIAM		
President Operational Applica	tions to 1444210	7
(TITLE)	(DATE)	

										VV.	SP/SC	ST Ja	rm	on ,	1-30 April (	100 1/1/09 5/1/09
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### Washington State Patrol

## **CONTRACTOR SERVICE HOURS**

 Beginning
 Ending

 Period:
 4/1/2009
 4/30/2009

 mm/dd/yr
 mm/dd/yr
 mm/dd/yr

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Nam	9:	GRI	HHAM KIA	Locatio	n: <u> </u>	110	3 ao Ave	SEATTLE	WA	98161	_
Mo.	Day	Hrs.	Description of Services Provided								
Apr	1	9	Analyst, WSP, WSFC								
Apr	2		Analyst, WSP, WSFC								
Apr	3		Analyst, WSP, WSFC								
Apr	4	0	Regular Day Off								
Apr	5	0	Regular Day Off	<del></del>							
Apr	6	9	Analyst, WSP, WSFC								
Apr	7	8	Analyst, WSP, WSFC	<del></del>							П
Арг	8	9	Analyst, WSP, WSFC		***************************************	_					
Apr	9	9	Analyst, WSP, WSFC								
Apr	10	8.5	Analyst, WSP, WSFC	<del></del>							
Apr	11		Regular Day Off								$\neg$
Арг	12	0	Regular Day Off								٦
Apr	13	8	Analyst, WSP, WSFC								٦
Apr	14	8	Analyst, WSP, WSFC								
Apr	15		Analyst, WSP, WSFC								
Apr	16		Analyst, WSP, WSFC	·· <del>························</del>							
Арг	17	0	Regular Day Off	_							
Apr	18	0	Regular Day Off								
Apr	19	7	Travel Day to LEIU Conference								
Apr	20	4	Analyst, WSP, WSFC								
Apr	21	9	Analyst, WSP, WSFC								_
Apr	22	9	Analyst, WSP, WSFC								
Apr	23	9	Analyst, WSP, WSFC								
Apr	24	9	Analyst, WSP, WSFC								
Apr	25		Regular Day Off								
Apr	26	0	Regular Day Off								П
Apr	27	0	Day Off - Sick	<del></del>							$\neg$
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Apr	29	8	Reserve Duty		-						
Apr	30	8	Reserve Duly								$\neg$
	31				-						
Total	Hours:	173									
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I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND DOMPLETE. form must be accompared by a State of Washington Voucher Distribution Form A19-2A)

(To ensure reimbursement, this

000368







**AGENCY NAME** 

(Rev. 1/91) **INVOICE VOUCHER** (new online version 12/01)

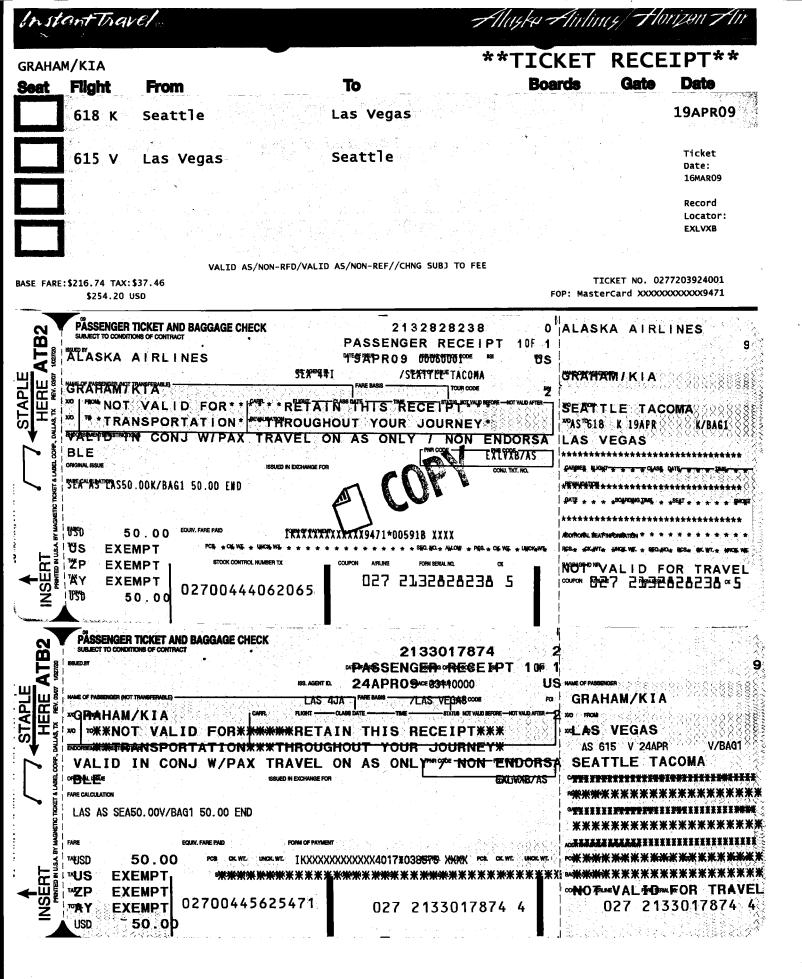
Online Help This document is a protected form for use Use the Tab key to advance from text field to text field. Shift-Tab will go to prior text file. Date fields are formatted to return m/d/yyyy format. Calculations will automatically occur as you fill in the number fields, with the total at the bottom. The form can be printed blank and filled in by hand as needed. After completion and appropriate signatures, forward to the Fiscal Office for payment.

AGENCY	USE ON	LY
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AGENCY NO.			LOCATION CODE		P.R. OR AUTH. NO.
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INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each

vvasnin	gion State Patrol	item.						
VEN	DOR OR CLAIMANT (Warrant is to be payal							
KIA M.	SRAHAM  COPY  NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Control	Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.  BY  (SIGN IN INK)  Owner / Sole  Proprietor  (TITLE)  (CDATE)  DATE RECEIVED						
DATE	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT.	5-6-09 FOR AGENCY		
4/19/09	Mileage round-trip: Home to Parking	80	mi	0.55	\$ 44.00	USE		
4/19/09	Shuttle to Airport				\$11.00			
4/19/09	Airfare (round trip) - Seattle / Las Vegas				\$ 254.20	,5/2		
4/19/09	Baggage Fee (round trip)				\$ 100.00	NOT reinhursed		
4/19/09	LEIU Conference: Hotel Cost				\$ 654.00	e-wait attacked		
4/19/09	LEIU Registration Fee				\$ 425.00			
4/19/09	Meal per diem (D)				\$29.00			
4/20/09	Meal per diem (B,L,D)		···.,		_			
4/21/09	Meal per diem (B,L,D)							
4/22/09	Meal per diem (B,L,D)		\$ 64.00 \$ 35.00					
4/23/09	Meal per diem (B,L)							
4/24/09	Meal per diem (B,L)	ļ			\$ 35.00			
4/24/09	Shuttle from Hotel to Airport	<u> </u>			\$6.00	-		
4/24/09 PREPARED BY	Taxi to parking garage  TELEPHONE NUMBER  DATE  APPLICATION  TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE TO BE	1/24/06	AGENCY	APPROVAL	\$45.00	DATE		
DOC DATE	PMT DUE DATE CURRENT DOC. NO. REF. DOC. NO.	VENDOR NUI	MBER	VENDOR ME	SSAGE US	E UBI NUMBER		
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	APPROVAL FOR PAYMENT	DATE		<u>positores jorden presentirio</u>	WARRANT TOTAL 20	WARRANT NUMBER		
					1 1000			



CI: AZEPEDA 4/19/09 8:03 PMCO: BURDIALES 4/24/09 9:26 AM

Arrival Date: 4/19/09 Departure Date: 4/24/09

Name:

**KIA GRAHAM** 





3555 Las Vegas Blvd. South Las Vegas, NV 89109 FOR RESERVATIONS CALL 1-800-732-2111 702-733-3111

Group Code:

PFSTI..

Casino ID:

Room #: GO 25007

Resv ID: 398873487118

Folio ID: 399211514098

Page: 1

	.5001		Page: I			
Date	Reference	Description		Charges	Credits	Balance
04/19/09		UPSELL ROOMS GO UPSELL (\$25+TX)	P/NIGH	27.25		27.25
04/19/09		APPLIED DEPOSIT	•		517.75	490.50
04/19/09		STEALTH PKG	999999	475.00 42.75		27.25
04/20/09		UPSELL ROOMS GO UPSELL (\$25+TX)	P/NTGH	27.25		27.25 54.50
04/21/09		UPSELL ROOMS GO UPSELL (\$25+TX)	·	27.25		81.75
04/22/09		UPSELL ROOMS GO UPSELL (\$25+TX)		27.25		109.00
04/23/09		UPSELL ROOMS GO UPSELL (\$25+TX)		27.25		136.25
04/24/09		MASTERCARD-LODGING	P/NIGH		136.25	
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						.00
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### Registration Receipt

## 2009 LEIU/IALEIA Annual Training Seminar

Received	
_	\$425.00
On	3/16/2009
From	Kia Graham

Russell M. Arter	AwaleRliner		
Russell Porter, Chairman	Lisa Palmieri, President		
LEIU	TALEIA		

On Demand Sedan & Limousine Service Reservations: (702) 876-2222 (800) 245-9956

Pick up at: Famingo
Drop off at: Atroort
Amount: \$ 6.00
Chauffeured by
Chauffeured by

Thank you for the opportunity to serve you!



---- Original Message ----- From: Graham, Kia (WSP)

To: Jarmon, Scott (WSP)

Sent: Wed May 20 16:34:11 2009

Subject: RE: A-19

Yep. I put excess baggage fee on the paperwork.

V/R
Kia M. Graham
Intelligence Analyst
Washington State Fusion Center (WSFC)
206-262-2519
kia.graham@wsp.wa.gov

----Original Message---From: Jarmon, Scott (WSP)

Sent: Wednesday, May 20, 2009 2:49 PM

To: Graham, Kia (WSP)
Cc: Wood, Beverly (WSP)

Subject: A-19

Kia,

What is the charge for on your LEIU A-19 for \$100. Was that for over weight bags, or extra bags?

Detective Sergeant Scott Jarmon Washington State Fusion Center

\*\*\* Sent from my Blackberry.

#### Wood, Beverly (WSP)

From:

Davis, Kathy (WSP)

Sent:

Thursday, May 21, 2009 8:11 AM

To:

Wood, Beverly (WSP) Tucker, Rhonda (WSP)

Cc: Subject:

RE: Kia GrahamA-19

Thank you for your help. You are correct, the excess baggage fee will not be reimbursed.

Kathy Davis
Washington State Patrol
Budget and Fiscal Services
A/P Supervisor
360.596.4068
Micro 12 ext 11068
Fax 360.596.4077
kathy.davis@wsp.wa.gov

----Original Message-----From: Wood, Beverly (WSP)

Sent: Wednesday, May 20, 2009 4:45 PM

To: Davis, Kathy (WSP)
Cc: Tucker, Rhonda (WSP)
Subject: FW: Kia GrahamA-19

Hi Kathy,

Reference the e-mail chain below, Kia's \$100 charge was for excess baggage. I have informed Sgt. Jarmon that this charge will not be reimbursed. Please correct me if I misunderstood that.

Beverly Wood Washington State Patrol IAD - OCIU 360-704-2402 desk 360-704-2972 fax "A calm sea never made a good Seaman"

----Original Message-----From: Jarmon, Scott (WSP)

Sent: Wednesday, May 20, 2009 4:30 PM

To: Wood, Beverly (WSP)

Subject: Fw: A-19

Detective Sergeant Scott Jarmon Washington State Fusion Center

\*\*\* Sent from my Blackberry.

DATE

1-31 Mar 09



### STATE OF WASHINGTON INVOICE VOUCHER

# SHINGTON AGENCY NO LOCATION CODE P.R. OR AUTH. NO. 225 341009/34107

RECEIVED BY

UNIT

Hour

QUANTITY

173

WSP/SGT Jarmon

UNIT PRICE

48.00

AGENCY NAME	
Washington State Patrol	
Investigative Assistance Division	
PO Box 2347	
Olympia, WA 98507-2347	

VENDOR OR CLAIMANT (Warrant is to be payable to):

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

Analytical services for March 09 (Kia Graham)

Services performed under C090551PSC

Douglas Larm
Operational Applications Inc.
13405 159<sup>th</sup> Street Court East
Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

BY (SIGN IN INK)

President Operational Applications Inc. (DATE)

AMO

DATE GOODS/SERVICES RECEIVED

FOR AGENCY USE ONLY

1-31 Mar 09

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Washington State Patrol	
<b>CONTRACTOR SERVICE</b>	HOUR!

Beginning Period:

3/1/2009 mm/dd/yr

Ending 3/31/2009 mm/dd/yr

Name: Kia M. Graham Location: 1110 3rd ANK, Scattle, WA 98100

Mo.	Day		Description of Services Provided
Mar	1		Regular Day Off
Mar	2		Analyst, WSP, WSFC
Mar	3		Analyst, WSP, WSFC
Mar	4		Analyst, WSP, WSFC
Mar	5		Analyst, WSP, WSFC
Mar	6	10	Analyst, WSP, WSFC
Mar	7		Regular Day Off
Mar	8		Regular Day Off
Mar	9		Analyst, WSP, WSFC
Mar	10		Analyst, WSP, WSFC
Mar	11		Requested Personal Time Off
Mar	12		Requested Personal Time Off
Mar	13		Requested Personal Time Off
Mar	14		Regular Day Off
Mar	15		Regular Day Off
Mar	16.		Analyst, WSP, WSFC
Mar	17		Sick Day
Mar	18		Analyst, WSP, WSFC
Mar	19		Analyst, WSP, WSFC
Mar	20		Analyst, WSP, WSFC
Mar	21		Regular Day Off
Mar	22		Regular Day Off
lar	23		Analyst, WSP, WSFC
Mar	24	10	Analyst, WSP, WSFC
Mar	25		Analyst, WSP, WSFC
Mar	26		Analyst, WSP, WSFC
Mar	27		Analyst, WSP, WSFC
Mar	28		Regular Day Off
Mar	29		Regular Day Off
Mar	30		Analyst, WSP, WSFC
Mar	31		Analyst, WSP, WSFC
Total	Hours:	173 4	

Contractor Signature/Date

SIMARDS

Local Reviewer Name

#### **Washington State Patrol**

### **CONTRACTOR SERVICE HOURS**

Period: Beginning
3/1/2009

3/1/2009 mm/dd/yr 3/31/2009

**Ending** 

mm/dd/yr

Name: Kia M. Graham

Location:

1110 3rd AVY, Scattle, WA 98109

Mo.	Day		Description of Services Provided
Mar	1		Regular Day Off
Mar	2		Analyst, WSP, WSFC
Mar	3		Analyst, WSP, WSFC
Mar	4		Analyst, WSP, WSFC
Mar	5		Analyst, WSP, WSFC
Mar	6		Analyst, WSP, WSFC
Mar	7		Regular Day Off
Mar	8		Regular Day Off
Mar	9	9	Analyst, WSP, WSFC
Mar	10		Analyst, WSP, WSFC
Mar	11		Requested Personal Time Off
Mar	12		Requested Personal Time Off
Mar	13		Requested Personal Time Off
Mar	14		Regular Day Off
Mar	15		Regular Day Off
Mar	16		Analyst, WSP, WSFC
Mar	17		Sick Day
Mar	18	11	Analyst, WSP, WSFC
Mar	19	9	Analyst, WSP, WSFC
Mar	20	8.5	Analyst, WSP, WSFC
Mar	21		Regular Day Off
Mar	22		Regular Day Off
Mar	23	9	Analyst, WSP, WSFC
Mar	24	10	Analyst, WSP, WSFC
Mar	25	10	Analyst, WSP, WSFC
Mar	26	10	Analyst, WSP, WSFC
Mar	27	9	Analyst, WSP, WSFC
Mar	28		Regular Day Off
Mar	29		Regular Day Off
Mar	30	9	Analyst, WSP, WSFC
Mar	31		Analyst, WSP, WSFC
	Hours:	173	

Contractor Signature/Date

SIMARUG

Local Reviewer Name

Local Reviewer Signature/Date

I CERTIFY THAT THE INFORMATION REPORTED IS TRUE AND COMPLETE.

(To ensure reimbursement, this form must be accompanied by a State of Washington Voucher Distribution Form A19-2A)



DATE

1-28 Feb09



#### STATE OF WASHINGTON **INVOICE VOUCHER**

L		1,1997	AGENCY USE	ONLY		<i>15</i>	1.0
	AGENCY NO		LOCATION	CODE	P.R.	OR AL	JTH. NO.
	225		341009/	34107		•	
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AGENCY NAME Washington State Patrol Investigative Assistance Division PO Box 2347 Olympia, WA 98507-2347 VENDOR OR CLAIMANT (Warrant is to be payable to)

FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.)

DESCRIPTION

Analytical services for Feb 09 (Kia Graham)

Services performed under C090551PSC

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374

INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for material, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination because of age, sex, marital status, race, creed, color, national origin, handicap, religion, or Vietnam era or disabled veterans status.

2 MAR 89
(DATE)
SERVICES RECEIVED

1-28 Feb 09

FOR AGENCY USE ONLY

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BY

UNIT

Hour

QUANTITY

157

WSP/SGT Jarmon

UNIT PRICE

48.00





### STATE OF WASHINGTON INVOICE VOUCHER

## AGENCY USE ONLY ICHER AGENCY NO LOCATION CODE P.R. OR AUTH. NO. 225 341009/34107

		AGENCY NAME									
Washington State Patrol											
Inv	estigative As	sistance Division									
ΡŌ	Box 2347	•									
Olv	mpia, WA 98	8507-2347									

VENDOR OR CLAIMANT (Warrant is to be payable to)

Douglas Larm Operational Applications Inc. 13405 159<sup>th</sup> Street Court East Puyallup, Washington 98374 INSTRUCTIONS TO VENDOR OR CLAIMANT: Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

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FEDERAL I.D. NO. OR SOCIAL SECURITY NO. (For Reporting Personal Services Contract Payments to I.R.S.) 1-31 Jan 09 WSP/LT AMO DATE DESCRIPTION QUANTITY UNIT **UNIT PRICE** FOR AGENCY USE ONLY 1-31 Jan09 Analytical services for Jan 09 (Kia Graham) 75 Hour 48.00 Services performed under C090551PSC PREPARED BY TELEPHONE NUMBER (253)226-9564 2 Feb 09 Doug Larm REF. DOC. NO. DOC. DATE PMT DUE DATE VENDOR NUMBER USE 602632122 REF DOC SUF SUB SUB CUECT TRANS ORG SUB PRO. RO HA FUND PROJECT APPN INDEX BUDGET ALLOC 210