

1. Form Typed or Written in Ink  
 2. All receipts must be attached

# COUNTY OF LAKE

## TRAVEL EXPENSE CLAIM

Claimant Sara Vierra Employee No. 841  
 Mailing Address 326 15th St, Lakeport, CA Department No. 2307210  
 Leave Date: 7/30/23 Time: 13:00 Return Date: 8/2/23 Time: 19:00  
 Destination 3536 Butte campus Dr, Oroville, CA  
 Purpose 832 pc - Firearms Training

TRANSPORTATION \_\_\_\_\_ x \$0. \_\_\_\_\_ = \$ \_\_\_\_\_ Fares \$ \_\_\_\_\_  
 (Priv Car/Air Miles) (Rate) (Amount) (Public Trans)

Other/Identify \$ \_\_\_\_\_ 1) \_\_\_\_\_  
 (Amount) (Received)

2) \_\_\_\_\_  
 (Received)

Other/Identify \$ \_\_\_\_\_ 1) \_\_\_\_\_  
 (Amount) (Allowable Unreceived)

MEALS - PER DIEM \$ 39.00 3 \$ 45.00 3 \$ 104.00 4  
 (Travel Policy - Sec 2.1) (Breakfast) (No) (Lunch) (No) (Dinner) (No)  
13.00 15.00 26.00

MEALS - ACTUAL \$ \_\_\_\_\_ (Breakfast) (No) \$ \_\_\_\_\_ (Lunch) (No) \$ \_\_\_\_\_ (Dinner) (No)

LODGING - ACTUAL \$ \_\_\_\_\_ (Amount) \_\_\_\_\_ (No. of Days)

\*If an advance was received, the travel expense form is due within 10 working days of your return. Failure to comply with this requirement will result in the ineligibility for future advances.

Total Reimbursement Claimed \$ 188.00  
 Less Travel Advance\*                       
 Total Reimbursement Due \$ 188.00 (Date of Advance) 29.50

I certify under the penalty of perjury that the within claim and the items as therein set out are true and correct, that no part thereof has heretofore been paid and that the amount therein is justly due me and that the same is presented within 60 days of the date on which expenses were incurred inclusive of required receipts, unless an advance was received (see above\*).

I further certify the above meets all provisions of the County of Lake Travel Policy and that there are sufficient funds and budget appropriations to support this claim. Claim is hereby approved for the above total.

Claimant's Signature [Signature] Date 10/27/23  
 Authorized and Approved by Department Head [Signature] Date 12.22.23

Vendor No. (7)	Invoice # (15)	Description (25)		
Fund (000)	Dept (0000)	Account (000.00-00)	Amount \$	Project # (6)

\*\*\*\*\*

Verified/Approved for Payment:  
 Jenavive Herrington, Auditor-Controller By [Signature] 01/05/2024  
 (Deputy Auditor) (Date)

# COURTYARD®

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Sara Vierra  
 1220 Martin Street  
 P.o. Box 489  
 Lakeport CA 95453

Room: 103  
 Room Type: GENR  
 Number of Guests: 1  
 Rate: \$96.00  
 Clerk: JEC

Arrive: 30Jul23      Time: 06:13PM      Depart: 02Aug23      Time: 07:19AM      Folio Number: 78732

DATE	DESCRIPTION	CHARGES	CREDITS
30Jul23	Room Charge	96.00	
30Jul23	Room Tax	9.60	
30Jul23	Ca Tourism Assessment	0.19	
30Jul23	Bctbid Assessment Fee	1.92	
31Jul23	Room Charge	96.00	
31Jul23	Room Tax	9.60	
31Jul23	Ca Tourism Assessment	0.19	
31Jul23	Bctbid Assessment Fee	1.92	
01Aug23	Room Charge	96.00	
01Aug23	Room Tax	9.60	
01Aug23	Ca Tourism Assessment	0.19	
01Aug23	Bctbid Assessment Fee	1.92	
02Aug23	Visa		323.13

Card #: VXXXXXXXXXXXX6283XXXX  
 Card Type: VISA Card Entry: MANUAL Approval Code: 078667

**BALANCE: 0.00**

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**LAKE COUNTY SHERIFF'S OFFICE**  
 1220 Martin Street • P.O. Box 489 • Lakeport, California 95453

**Rob Howe**  
 Sheriff -Coroner

## TRAINING NOTICE

DATE OF NOTICE: 07/13/2023

EMPLOYEE: SARA VIERRA

COURSE TITLE: 832 Firearms (STC 264-38818)

PROVIDER: Butte College

DATES OF ATTENDANCE: 7/31 - 8/2/23

LOCATION: 3536 Campus Drive, Oroville, CA 95965

REGISTRATION FEE: 98.00

PAYABLE TO: Butte College  
 3536 Butte Campus Drive, Oroville  
 (Fiscal to be billed - see attached letter)

CONFIRMATION: sent via email

PAYMENT METHOD:  CREDIT CARD

CHECK  MAILED DIRECT  EMPLOYEE TO PICK UP FROM FISCAL

LODGING DATES: 7/30-8/2/23

PAYABLE TO: Courtyard Chico  
 2481 Carmichael Drive, Chico  
 (CC authorization sent 7/12/23)

CONFIRMATION: 95201222

RATE/TOTAL: 96.00 / 328.88

TOT EXEMPTION FORM ATTACHED

PAYMENT METHOD:  CREDIT CARD

CHECK  MAILED DIRECT  EMPLOYEE TO PICK UP FROM FISCAL

TRANSPORTATION: IF YOU NEED A VEHICLE, REQUEST ONE WITH MARY BETH STRONG

### \*\*\* EMPLOYEE RESPONSIBILITIES \*\*\*

- ✓ If you cannot attend training, contact your Division Commander IMMEDIATELY.
- ✓ Contact Course Provider and Hotel to confirm payment/reservation at least 7 days prior to departure.
- ✓ Travel Expenditure form must be turned in to Mary Beth/Fiscal within 10 calendar days of returning from assigned training.
- ✓ Obtain receipts for all expenditures (i.e., fuel, hotel, parking, etc.) and attach to the Travel Expenditure form.
- ✓ All incidentals go on your personal credit card. Nothing is to be charged to your room.
- ✓ When checking out, get the final folio and assure there are no charges pending. If there is any credit for the hotel cost, it is to go back on the LCSO card, not your personal credit card.
- ✓ If meals are provided at the training or as part of your hotel cost, you cannot claim them. Only meals not provided during the time of the training may be claimed (you must provide receipts to be reimbursed).
- ✓ Certification of Completion, if provided, must be copied to Jan Bosse, Admin. Secretary.

#### FINAL ROUTING

Fiscal     Admin. Secretary     Employee     Sheriff Assistant



**LAKE COUNTY SHERIFF'S OFFICE  
EMPLOYEE REQUEST  
FOR TRAINING**

(Employee Use)

Sara Vierra  
Employee

Sgt. Lance  
Assignment & Supervisor's name

4/24/23  
Date

Course subject/title: 832 Arrest and Control / Firearms

Dates & hours: 7/24/23 to 8/2/23 0800 to 1700 hours

Sponsor/Provider: Butte College

Location: 3536 Butte Campus Dr Orville

Reason for requests: Mandatory 832 training

STC Approved:  Yes  No

Notification Attached:  Yes  No

Training Only:  Yes  No STC Credit:  Yes  No

Hours of Training: 56 (80 hours max. each fiscal year July 1 – June 30)

Funding Source (i.e., SAFE, DEA, Cal Mett, OES): N/A Certificates Requested/Received:  Yes  No

Scheduled vacation dates: N/A Vehicle Required:  Yes  No

Employee Signature

Date

(Supervisor/Manager/Finance Use)

Immediate Supervisor Signature

Date

Approved: \_\_\_ Yes \_\_\_ No

[Signature]  
Training Manager Signature

4/24/23  
Date

Approved: X Yes \_\_\_ No

Command Staff Signature

Date

Approved: \_\_\_ Yes \_\_\_ No

Funding Source: 2210

Reimbursable: \_\_\_ Yes \_\_\_ No Requested \_\_\_ Yes \_\_\_ No





## BUTTE COLLEGE

Public Safety Education & Training Center

# P.C. 832 Training (Firearms Module) For Individuals Requiring Limited Peace Officer Powers

**Date:** July 31, 2023 – August 2, 2023 (Monday - Wednesday)

**Time:** 8:00 a.m. – 5:00 p.m.

**Location:** Butte-Glenn Community College  
Allied Health/Public Services Building, Room 113  
3536 Campus Drive, Oroville, CA 95965  
Call (530) 895-2402 for enrollment information

**Course Description:** This is a 24-hour course certified by the California Commission on Peace Officer Standards and Training. This course is designed for individuals whose employment requires limited peace officer powers, including the carrying of firearms. The course consists of classroom instruction in safety guidelines, current law, cleaning of firearms, drawing and holstering, etc., as well as actual live fire of handguns (supplied by the college).

*\*\*\*This course is both POST and STC Certified.*

**Fees & Materials:** \$98.00 per student, non-reimbursable (this is an estimate and subject to change). Fee for attending both the Arrest & Firearms Modules is \$196.50 (this is an estimated fee and subject to change). Additionally, each student is required to purchase 400 rounds of new factory ammunition for agency sponsored and approved weapons or 9 mm caliber ammunition if a college weapon is used.

1. **Registration Information:** The course number for the PC 832 Firearms Module is **AJLE-151B-M2995**, Summer 2023. Registration will begin May 16, 2023. Students have seven days from the time of registration to pay fees or make payment arrangements or be dropped from one or more classes. Visit <http://www.butte.edu/7days> for more information.

**Additional:** In order to participate in firearms training, students are required to obtain and present to class a criminal history clearance letter from the California Department of Justice verifying that they have no felony convictions. In order to obtain this clearance, students can schedule a Live Scan fingerprint appointment with any participating law enforcement agency. The clearance letter takes several weeks to be received from D.O.J. If students receive their D.O.J. clearance letter via mail, please send an email with a copy of the D.O.J. clearance letter to Mai Chang at [changmai@butte.edu](mailto:changmai@butte.edu).

**NOTE:** DO NOT bring firearms and/or live ammunition to class at the college. The instructor will advise you on when and where to report with your firearms and live ammunition.



U.S. General Services Administration

# FY 2023 Per Diem Rates for ZIP Code 95928

## Daily lodging rates (excluding taxes) | October 2022 - September 2023

Cities not appearing below may be located within a county for which rates are listed. To determine the county a destination is located in, visit the [Census Geocoder](#).

Primary Destination ⓘ	County ⓘ	2022 Oct	Nov	Dec	2023 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Standard Rate	Applies for all locations without specified rates	\$98	\$98	\$98	\$98	\$98	\$98	\$98	\$98	\$98	\$98	\$98	\$98

## Meals & Incidentals (M&IE) rates and breakdown ⓘ

Use this table to find the following information for federal employee travel:

**M&IE Total** - the full daily amount received for a single calendar day of travel when that day is neither the first nor last day of travel.

**Breakfast, lunch, dinner, incidentals** - Separate amounts for meals and incidentals. M&IE Total = Breakfast + Lunch + Dinner + Incidentals. Sometimes meal amounts must be deducted from trip voucher. See More Information

**First & last day of travel** - amount received on the first and last day of travel and equals 75% of total M&IE.

Primary Destination ⓘ	County ⓘ	M&IE Total	Continental Breakfast/Breakfast	Lunch	Dinner	Incidental Expenses	First & Last Day of Travel ⓘ
Standard Rate	Applies for all locations without specified rates	\$59	\$13	\$15	\$26	\$5	\$44.25

[Additional Per Diem Topics](#)

[Need more information?](#)

[Related topics](#)

# COUNTY OF LAKE

## TRAVEL & REIMBURSEMENT PRE-AUTHORIZATION REQUEST

Date: 9/12/2023

Department/Budget Unit: Jail / 2301

Employee: Sara Vierra

Dates of Travel: 7/31/23 to 8/2/23

Purpose of Travel: Mandatory PC 832 Firearms training

Location: Oroville

Overnight Stay? Y/N

Host Hotel? Y/N

Lodging Informaton:

*Please include pricing*

Name: \_\_\_\_\_

Address: \_\_\_\_\_


Travel (click checkbox):  Air  Vehicle  Other

**Notes:**

*Please use this section to explain any extenuating circumstances or references to policy.*

Estimated Overall Cost of Travel: \$

*Deviations to this travel plan may be sent to the Department Head for additional approval(s)*

Approval:  12-17-23  
Department Head or designee approval Date