

Dear City Clerk,

Please find enclosed a formal Notice of Claim submitted pursuant to Wisconsin Statute § 893.80(1d) regarding unresolved or disputed travel reimbursements associated with official business conducted on behalf of the City of Milwaukee Health Department.

While this claim consolidates five separate travel occurrences for administrative efficiency, each trip is documented as an independently authorized event with its own Travel Request Form, funding source, and documentation. The combined submission is not intended to imply any offset between trips; each reimbursement item stands on its own authorization and justification.

The claimant respectfully requests review and resolution consistent with Milwaukee Health Department travel policy, Comptroller standards, and federal cost principles.

Thank you for your time and attention.

Sincerely,  
Violet Kryshak  
1812 E Lafayette Pl. Unit 204 Milwaukee WI 53202

### Itemized Summary of Outstanding Balances

Trip	Dates	Location	Issue	Amount Outstanding
New Arrivals Process Visit	Oct 22 2024	Chicago	Incorrect FY per diem rate applied.	\$13.00
APHA Conference	Oct 25-31 2024	Minneapolis	Parking and tips underpaid; membership reclassified in error.	\$53.78
MERRTT Train-the-Trainer	Nov 19-20 2024	Madison	Dinner on return day & cash tips removed contrary to policy.	\$33.89
NACCHO Preparedness Summit Conference	Apr 28-May 2 2025	San Antonio	Lunch on April 29th removed despite three items submitted as proof	\$14.77
Utah Public Health and Disasters Conference	Oct 14 - 17 2025	Salt Lake City	Flight home removed contrary to policy	\$318.48
<b>Total</b>				<b>\$433.92</b>

CITY OF MILWAUKEE  
2025 FEB - 5 P 4: 21  
CITY CLERK'S OFFICE

## **Trip #1 – Chicago Health Department New Arrivals Process Visit (Chicago, IL)**

**Date:** October 22, 2024

**Purpose:** Official visit to the Chicago Department of Public Health's New Arrivals Processing Location to observe migrant-response coordination and inform Milwaukee's emergency planning.

**Issue:** All expenses were approved and allowable. The Comptroller applied the FY 2024 GSA per-diem rate instead of the FY 2025 rate (effective October 1 2024), causing a \$13.00 underpayment. This has been acknowledged by Finance as valid but remains unpaid.

**Amount Outstanding: \$13.00**

### **Supporting Exhibits:**

- **A** – Signed Travel Request Form (Chicago)
- **F** – Signed Statement of Expenses (Chicago)
- **R** – Bank statement showing reduced payment
- **K** – MHD Travel Policy
- **P** – Finance Correspondence Detailing Denial

## **Trip #2 – APHA Annual Conference (Minneapolis, MN)**

**Dates:** October 25 – 31, 2024

**Purpose:** Attendance at the American Public Health Association (APHA) Annual Conference to present and learn public-health preparedness best practices.

**Issue:** Finance acknowledged the \$70.77 parking expense but disallowed cash tips (\$4.32) despite a signed affidavit option under City and DOA rules. The Finance Director also retroactively classified the required \$70 student membership (necessary for the discounted registration rate) as an "error," claiming it was only of personal benefit. Supervisory emails (Exhibit H) show that MHD management directed the claimant to register using the student rate, saving the City \$295. This reclassification created a false offset and the unfounded claim that the claimant owed \$7.24 to the City.

**Amount Outstanding: \$53.78**

### **Supporting Exhibits:**

- **B** – Signed Travel Request Form (Minneapolis)
- **G** – Expense Report and Receipts (Minneapolis)
- **K** – MHD Travel Policy
- **L** – Email Chain Approving Use of Student Rate
- **M** – DOA Travel Policy Guidance

## **Trip #5 – Public Health and Disasters Conference (Salt Lake City, UT)**

**Dates:** October 14 – 17, 2025

**Purpose:** Attendance at the Public Health & Disasters Conference for professional training related to public health emergency preparedness, disaster response coordination, and emergency operations planning.

**Issue:** The claimant combined official travel with approved personal leave and returned via an alternate itinerary. Although the total airfare exceeded the cost of a standard business-only return flight, the claimant submitted for reimbursement **only up to the allowable business portion**, consistent with MHD travel policy.

**Amount Outstanding: \$318.48**

### **Supporting Exhibits:**

- **E** – Signed Travel Request Form (Salt Lake City)
- **J** – Expense Report and Receipts (Salt Lake City)
- **K** – MHD Travel Policy
- **Q** – Finance correspondence disputing return flight eligibility

- P – Finance Correspondence Detailing Denial

### **Trip #3 – MERRTT Train-the-Trainer (Madison, WI)**

**Dates:** November 19 – 20, 2024

**Purpose:** FEMA/DHS Modular Emergency Radiological Response Transportation Training (MERRTT) "Train-the-Trainer" course for PHEP/CRI staff.

**Issue:** A \$33.00 dinner purchased on the return travel day was denied as "too close to home," though City and DOA policies do not stipulate this rule. Cash tips were denied despite an offer of a sworn affidavit (permitted by DOA policy and MHD Travel FAQ). A \$0.30 clerical discrepancy was also noted.

**Amount Outstanding: \$33.89**

#### **Supporting Exhibits:**

- C – Signed Travel Request Form (Madison)
- H – Expense Report and Receipts (Madison)
- M – DOA Travel Policy Guidance
- N – MHD Travel FAQ
- P – Finance Correspondence Detailing Denial

### **Trip #4 – NACCHO Preparedness Summit Conference (San Antonio, TX)**

**Dates:** April 28 – May 2, 2025

**Purpose:** Attendance at the National Association of County and City Health Officials (NACCHO) Preparedness Summit to support PHEP/CRI program objectives.

**Issue:** Part of a meal expense on April 29 (\$14.77) was disallowed because the Comptroller assumed lunch was provided. NACCHO's official FAQ, the full conference agenda, and a direct email from organizers confirm that **no lunch was provided** that day. Documentation was submitted to Finance, but no corrective action has been issued. The item remains unresolved.


**Amount Outstanding: \$14.77**


#### **Supporting Exhibits:**


- D – Signed Travel Request Form (San Antonio)
- I – Expense Report and Receipts (San Antonio)
- O – NACCHO FAQ and Organizer Email Confirming Lunch Not Provided

## Event Invite and Agenda:

### Chicago LZ Visit

 Tue 10/22/2024 8:00 AM - 4:00 PM

 Chicago LZ

 CHI LZ Team

I recommend Amtrak to Union Station (arrange your own travel), just a few blocks away and 15-ish minute walk to the LZ. See visual below.

- **Text me if you are running late!** (Christine 414-345-7191 primary cell, 414-336-8039 secondary cell)

#### Locations/Times:


1. **Landing Zone**, 800 S Desplaines St, Chicago, Illinois
  - 10:00am Group A (City of MKE),
  - 10:30 am Group B (State)
2. **DHS Building**, 401 S Clinton, 7<sup>th</sup> Floor, Chicago, IL 60607
  - 11:15am-12pm Groups A & B, Q&A Session


## Train to and from Chicago

### Trip Summary



 \$68.00 

#### Round Trip

MKE → CHI   
6:15a Tue, Oct 22      7:57a Tue, Oct 22

CHI → MKE   
8:15p Tue, Oct 22      4:44p Tue, Oct 22

### Price Summary

 Non Changeable Fare Selected 

Fare per Traveler \$68.00

Total Fare \$68.00

Balance Due **\$68.00**

## Meals Per Diem:

### Meals & Incidental Expenses (M&IE) rates and breakdown

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE Breakdowns](#) for information related to the individual meal amounts.

Primary Destination	County	M&IE Total	Breakfast	Lunch	Dinner	Incidental Expenses	First & Last Day of Travel
Chicago	Cook / Lake	\$79	\$18	\$20	\$36	\$5	\$59.25

Filter Results...



# Request for Travel on Behalf of the City of Milwaukee

B

Kryshak, Violet  
 Last Name, First Name, MI

Health - (PS currently however not at time of travel)  
 Department

APHA 2024, Minneapolis, MN  
 Destination

Emergency Preparedness Environmental Health Coordinator  
 Title

October 26-30, 2024  
 Conference/Event Dates

**Purpose of the Trip and/or Anticipated Benefit**  
 Learn about the most pressing public health topics, hear from the biggest names in public health, engage with colleagues old and new and connect with vendors and partners in the expo hall.

Anticipated Funding Source:	Amount	Expense (If Specified)
Department (O&M)		
Grant (Specify Below)		
<u>PHEP CRI BP1 (no grant code avail yet)</u>	\$2,030	
Other (Specify Below)		
<u>[Sponsor-paid travel]</u>		
Tuition Reimbursement		

**Travel Advance**  
 Requested?      No       Yes       Amount           -

**Employee Certification Statement**  
 I hereby certify that:

(1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.

(2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.

(3) I have been made aware of and agree to abide by the rules related to travel as established in the City ordinance and by my department.

(4) I will be prepared to explain any unanticipated expenses or significant discrepancies in anticipated and actual expenses incurred.

(5) I agree to complete and submit a Statement of Expenses Incurred for the City of Milwaukee (CBP-211) no later than 15 days following my return from the requested travel. I understand that failure to do so may result in the forfeiture of any reimbursements due to me.

Signed by:  
Violet Kryshak      9/4/2024  
 Employee Signature      Date

Anticipated Expenses		
Registration Fees		350.00
Lodging		
Nightly Rate	\$	148.00
Number of Nights		7
Total Lodging	\$	1,036.00
Transportation		
*Personal Vehicle		
Air		
Rail		70.00
Baggage		
Other (Specify Below)		
a. Ubers in MN		48.00
b. Ubers in MKE		26.00
c.		
Total Transportation	\$	144.00
Max Meal Allowance		
	Federal Amount for Destination	**Number of Meals
Breakfast	18.00	X 6 = \$ 108.00
Lunch	20.00	X 7 = \$ 140.00
Dinner	36.00	X 7 = \$ 252.00
Total Max Meal Allowance		\$ 500.00
Other Anticipated Expenses (Itemize Below)		
a.		
b.		
c.		
Total Other Expenses	\$	-
<b>Total Anticipated Expenses</b>		<b>\$ 2,030.00</b>

**Department Approval** (To be completed by the authorizing entity or designee)

Approval Granted      Yes       No

If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Amount Approved: 2030      # of Days Approved: 7

Signed by:  
Tyler Weber      9/9/2024  
 Approver Signature      Date

Signed by:  
[Signature]      9/9/2024  
 Approver Signature      Date

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate OR the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.



AMERICAN PUBLIC HEALTH ASSOCIATION  
For science. For action. For health.

[APHA](#) > [Events & Meetings](#) > [Annual Meeting](#) > [Program](#) > [Schedule at a Glance](#)

## Schedule at a Glance

Below is an outline of the Annual Meeting schedule.

A more detailed listing of all the Annual Meeting sessions, business meetings and social hours will be available in the online program on June 4.

This schedule is accurate as of April 2024 and is subject to change. All events are in-person in Minneapolis unless otherwise noted. You can also view the Digital Meeting schedule for virtual events.

[Register](#) >

[Book Housing](#) >

[View Program](#) >

[Contact Us](#) >

### Saturday, Oct. 26

8 a.m.-6:30 p.m.	Registration
9 a.m.-2:30 p.m.	Women's Leadership Institute
9 a.m.-4 p.m.	Affiliate Day
9 a.m.-6 p.m.	Learning Institutes
12-8 p.m.	Business Meetings/Social Hours/Workshops
3-6 p.m.	Governing Council Meeting

### Sunday, Oct. 27

7 a.m.-6 p.m.	Registration
8-10:30 a.m.	Business Meetings/Social Hours/ Sponsored Breakfasts
8 a.m.-5 p.m.	Learning Institutes
9-9:45 a.m.	Coffee Talks
11 a.m.-12:30 p.m.	Opening Session
12:30-2 p.m.	Sponsored Lunches/Business Meetings/Social Hours/Ticketed Sessions
12:30-6 p.m.	Public Health Expo
1-2 p.m.	Emerging Scholars Theater Poster Sessions
1-2:30 p.m.	Wellness Lounge Activities
2:30-4 p.m.	Champion Conversation Scientific Sessions
3-4 p.m.	Poster Sessions
4:30-6 p.m.	Champion Conversation: America Dissected Podcast Scientific Sessions

5-6 p.m.	Poster Sessions
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**Monday, Oct. 28**

7-8 a.m.	Business Meetings/Social Hours/Sponsored Breakfasts Coffee Talks
7:30 a.m.-5 p.m.	Registration
8:30-10 a.m.	Scientific Sessions
9 a.m.-4 p.m.	Public Health Expo
10-11 a.m.	Poster Sessions
10:30-11:30 a.m.	Poster Sessions
10:30 a.m.-12 p.m.	Champion Conversation Scientific Sessions
12-12:30 p.m.	Awards Luncheon Networking pre-reception for students
12-1 p.m.	Poster Sessions
12:30-2 p.m.	APHA Awards Ceremony and Luncheon Emerging Scholars Theater Sponsored Lunches/Business Meetings/Social Hours/Ticketed Luncheons Wellness Lounge Activities
2-3 p.m.	Poster Sessions
2:30-4 p.m.	Champion Conversation Scientific Sessions
3-3:45 p.m.	Leadership Lab
4:30-6 p.m.	General Session
6-8:30 p.m.	Business Meetings/Social Hours

**Tuesday, Oct. 29**

7-8 a.m.	Business Meetings/Social Hours/ Sponsored Breakfasts Coffee Talks
7:30 a.m.-4 p.m.	Registration
8:30-10 a.m.	Scientific Sessions
8:30 a.m.-1:30 p.m.	Governing Council
9 a.m.-4 p.m.	Public Health Expo
10-11 a.m.	Poster Sessions
10:30 a.m.-12 p.m.	Champion Conversation Scientific Sessions

12-1 p.m.	Poster Sessions
12:30-2 p.m.	Emerging Scholars Theater Sponsored Lunches/Business Meetings/Social Hours/Ticketed Luncheons Wellness Lounge Activities
2-3 p.m.	Poster Sessions
2:30-4 p.m.	Champion Conversation Scientific Sessions
4:30-6 p.m.	Champion Conversation Scientific Sessions
6:30-9 p.m.	Business Meetings/Social Hours

**Wednesday, Oct. 30**

7-8 a.m.	Business Meetings/Social Hours/Sponsored Breakfasts
7:30 a.m.-12 p.m.	Registration
8:30-10 a.m.	Champion Conversation Scientific Sessions
10:30 a.m.-12 p.m.	Champion Conversation Scientific Sessions
12:30-2 p.m.	Scientific Sessions
2:30-4 p.m.	Closing Session

Flights:

Passenger Info

Name: VIOLET KRYSHAK  
 SkyMiles #6495126044

FLIGHT	SEAT
DELTA 1173	Seat Assigned After Check-In
DELTA 1508	Seat Assigned After Check-In
DELTA 1465	Seat Assigned After Check-In
DELTA 1268	Seat Assigned After Check-In

Visit [delta.com](http://delta.com) or download the Fly Delta app to view, select or change your seat. If you purchased a Delta Comfort+™ seat or a Trip Extra, please visit My Trips to access a receipt of your purchase.

Sun, 27APR	DEPART	ARRIVE
DELTA 1173 Basic Economy (E)	MILWAUKEE, WI 6:45pm	ATLANTA 9:50pm
DELTA 1508 Basic Economy (E)	ATLANTA 10:59pm	SAN ANTONIO, TX 12:30am **Mon 28APR

Fri, 02MAY	DEPART	ARRIVE
DELTA 1465 Basic Economy (E)	SAN ANTONIO, TX 6:25pm	ATLANTA 9:50pm
DELTA 1268 Basic Economy (E)	ATLANTA 10:55pm	MILWAUKEE, WI 11:54pm

\*\*Arrival date is different than departure date.

MANAGE MY TRIP

Flight Receipt

Ticket #: 0062309823122  
 Place of Issue:  
 Issue Date: 27FEB25  
 Expiration Date: 27FEB26

METHOD OF PAYMENT	
AX*****1000	\$236.36 USD

CHARGES	
<b>Air Transportation Charges</b>	
Base Fare	\$173.36 USD
<b>Taxes, Fees and Charges</b>	
United States - September 11th Security Fee (Passenger Civil Aviation Security Service Fee) (AY)	\$11.20 USD
United States - Transportation Tax (US)	\$13.00 USD
United States - Passenger Facility Charge (XF)	\$18.00 USD
United States - Flight Segment Tax (ZP)	\$20.80 USD
<b>TICKET AMOUNT</b>	<b>\$236.36 USD</b>

Rideshare to MKE:

**Trip**  
Apr 27, 2025, 4:42 PM • 13 miles • 17 min

1812 E Lafayette Pl  
San Antonio, TX 78207

Alaska  
San Antonio, TX 78207

**Payment**

Lyft Standard fare (13 mi, 17m) \$21.99  
Tip \$3.30

Visa \*3500  
Total charge **\$25.29**

Personal  
\*Your payment method may be used at other Lyft rides unless you opt out of the option.

Rideshare to Hotel:

**Trip**  
Apr 28, 2025, 12:45 AM • 9.4 miles • 22 min

Rideshare Zone 1  
San Antonio, TX 78215

209 Riverwalk St  
San Antonio, TX 78205

**Payment**

Lyft Standard fare (9.4 mi, 22m) \$26.13  
Texas Surcharge \$0.69  
Tip \$1.02

♥ Gonzalo says "thanks for the tip!"

Visa \*3428  
Total charge **\$30.84**

Rideshare to SAT:

**Trip**  
May 2, 2025, 3:04 PM • 8.6 miles • 19 min

Embassy Suites San Antonio Riverwalk  
San Antonio, TX 78225

9559 South Terminal Drive  
San Antonio, TX 78215

**Payment**

Lyft Standard fare (8.6 mi, 19m) \$24.19  
Texas Surcharge \$0.63  
Tip \$3.72

AMERICAN EXPRESS \*1000  
Total charge **\$28.54**

Personal  
American Express \*1000

Rideshare to Home:

<b>Total</b>	<b>\$25.75</b>
Trip fare	\$22.24
Subtotal	\$22.24
Booking Fee	\$2.75
Tip	\$3.36
MKE Airport Pickup Surcharge	\$3.00
Promotion	-\$5.60
<b>Payments</b>	
Apple Pay Visa ****4594 5/4/25 9:28 AM	\$22.39
Apple Pay Mastercard ****9777 5/9/25 5:59 PM	\$3.36



THE EMILY MORGAN HOTEL A DOUBLETREE BY HILTON  
 705 EAST HOUSTON ST.  
 SAN ANTONIO, TX 78205  
 United States of America  
 TELEPHONE 210-225-5100 • FAX 210-225-7227  
 Reservations  
 www.hilton.com or 1 800 HILTONS

Kryshak, Violet  
 326 W SADDLEWORTH CT  
 MEQUON WI 53092  
 UNITED STATES OF AMERICA

Room No: 1014/BKRC  
 Arrival Date: 4/30/2025 12:00:00 PM  
 Departure Date: 5/2/2025 7:05:00 PM  
 Adult/Child: 2/0  
 Cashier ID: SAVANAHC1003  
 Room Rate: 137.00  
 AL:  
 HH #: 1757006323 GOLD  
 VAT #  
 Foto No/Che: 405644 A

Confirmation Number: 90015179

THE EMILY MORGAN HOTEL A DOUBLETREE BY HILTON 5/2/2025 7:05:00 PM

DATE	REF NO	DESCRIPTION	CHARGES
4/30/2025	1984443	GUEST ROOM	\$152.00 Breakfast
4/30/2025	1984443	TOURISM PUBLIC IMPROVEMENT DEV	\$1.90 Included
4/30/2025	1984443	STATE TAX	\$9.23 \$15 more
4/30/2025	1984443	CITY TAX	\$13.85
4/30/2025	1984443	COUNTY TAX	\$2.69
4/30/2025	1984443	STATE COST RECOVERY FEE	\$0.01
5/1/2025	1985393	GUEST ROOM	\$137.00
5/1/2025	1985393	TOURISM PUBLIC IMPROVEMENT DEV	\$1.71
5/1/2025	1985393	STATE TAX	\$8.32
5/1/2025	1985393	CITY TAX	\$12.48
5/1/2025	1985393	COUNTY TAX	\$2.43
5/1/2025	1985393	STATE COST RECOVERY FEE	\$0.01
5/2/2025	1986022	AX *1000	(\$400.81) 341.63
**BALANCE**			\$0.00

Night 1: \$15 dollars higher room rate because breakfast included (adjustment noted under meals)

Night 2: Their continental breakfast was not good so I removed from room rate and purchased breakfast a la carte.



CANOPY BY HILTON SAN ANTONIO RIVERWALK  
 123 N SAINT MARYS ST.  
 SAN ANTONIO, TX 78205  
 United States of America  
 TELEPHONE 210-404-7516 • FAX 210-404-7517  
 Reservations  
 www.hilton.com or 1 800 HILTONS

Kryshak, Violet  
 326 W SADDLEWORTH CT  
 MEQUON WI 53092  
 UNITED STATES OF AMERICA

Room No: 1908/K1  
 Arrival Date: 4/27/2025 1:08:00 AM  
 Departure Date: 4/30/2025 1:27:00 PM  
 Adult/Child: 1/0  
 Cashier ID: LMUELLER8  
 Room Rate: 137.00  
 AL:  
 HH # 1757006323 GOLD  
 VAT #  
 Folio No/Che 190690 A

Confirmation Number: 3242051767

CANOPY BY HILTON SAN ANTONIO RIVERWALK 4/30/2025 1:26:00 PM

DATE	DESCRIPTION	ID	REF NO	CHARGES	CREDIT	BALANCE
4/27/2025	GUEST ROOM	AMORUM	1943275	\$137.00		
4/27/2025	TEXAS RECOVERY FEE	AMORUM	1943275	\$0.72		
4/27/2025	TPID ASSESSMENT	AMORUM	1943275	\$1.72		
4/27/2025	STATE OCCUPANCY TAX	AMORUM	1943275	\$8.36		
4/27/2025	CITY OCCPANCY TAX	AMORUM	1943275	\$12.54		
4/27/2025	COUNTY OCCUPANCY TAX	AMORUM	1943275	\$2.44		
4/28/2025	GUEST ROOM	AMORUM	1944821	\$137.00		
4/28/2025	TEXAS RECOVERY FEE	AMORUM	1944821	\$0.72		
4/28/2025	TPID ASSESSMENT	AMORUM	1944821	\$1.72		
4/28/2025	STATE OCCUPANCY TAX	AMORUM	1944821	\$8.36		
4/28/2025	CITY OCCPANCY TAX	AMORUM	1944821	\$12.54		
4/28/2025	COUNTY OCCUPANCY TAX	AMORUM	1944821	\$2.44		
4/29/2025	GUEST ROOM	ICRETHES1	1946190	\$137.00		
4/29/2025	TEXAS RECOVERY FEE	ICRETHES1	1946190	\$0.72		
4/29/2025	TPID ASSESSMENT	ICRETHES1	1946190	\$1.72		
4/29/2025	STATE OCCUPANCY TAX	ICRETHES1	1946190	\$8.36		
4/29/2025	CITY OCCPANCY TAX	ICRETHES1	1946190	\$12.54		
4/29/2025	COUNTY OCCUPANCY TAX	ICRETHES1	1946190	\$2.44		

Kryshak, Violet  
 326 W SADDLEWORTH CT  
 MEQUON WI 53092  
 UNITED STATES OF AMERICA

Room No: 1908/K1  
 Arrival Date: 4/27/2025 1:08:00 AM  
 Departure Date: 4/30/2025 1:27:00 PM  
 Adult/Child: 1/0  
 Cashier ID: LMUELLER8  
 Room Rate: 137.00  
 AL:  
 HH # 1757006323 GOLD  
 VAT #  
 Folio No/Che 190690 A

Confirmation Number: 3242051767

CANOPY BY HILTON SAN ANTONIO RIVERWALK 4/30/2025 1:26:00 PM

DATE	DESCRIPTION	ID	REF NO	CHARGES	CREDIT	BALANCE
4/30/2025	AX *3037	LMUELLE R8	1946522		(\$594.34)	
**BALANCE**						\$0.00

Hotel 2: \$341.63

Registration: \$400

This message is to confirm the receipt of your recent payment to NACCHO.

Customer's Name: Ms. Violet N Kryshak  
Date: 1/10/2025  
Confirmation #: 33755Z  
Transaction Date: 1/10/2025 4:30:17 PM  
Payment Method: MasterCard  
Payment Amount: \$ 400.00  
Current Balance: \$ 0.00

**BBI To:**

Ms. Violet N Kryshak  
Milwaukee City Health Department  
324 W Saddleworth Ct  
Mequon, WI 53092-3564  
UNITED STATES

Qty	Item	Sub-Total	Discount	Paid	Balance
1	2025 Preparedness Summit Registration: Student "Early" - Ms. Violet N Kryshak	\$400.00	\$0.00	\$400.00	\$0.00

[Click here](#) to view a printer-friendly version of your invoice.

Hotel:

**Daily lodging rates (excluding taxes) | October 2024 - September 2025**

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](#).

Filter results...

Primary destination	County	2024 Oct	Nov	Dec	2025 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
San Antonio	Bexar	\$137	\$137	\$137	\$137	\$161	\$161	\$137	\$137	\$137	\$137	\$137	\$137

Showing 1 to 1 of 1 entries

Hotel 1: \$488.34

# Statement of Expenses

## Schedule:

PREPAREDNESS SUMMIT		Pathways to Recovery in the Aftermath of Disasters			
		April 29-May 2, 2025   San Antonio, TX			
Time	4/28	4/29	4/30	5/1	5/2
	Monday	Tuesday	Wednesday	Thursday	Friday
8:30 AM					
7:00 AM					
7:30 AM					
8:00 AM		Sessions/ Demos/Case Study	Sessions/ Demos/Case Study	Sessions/ Demos/Case Study/ Workshops	Sessions/ Demos/Case Study
8:30 AM					
9:00 AM					
9:30 AM					
10:00 AM					
10:30 AM		Plenary 1	Plenary 2	Sessions/ Demos/Case Study/ Workshops	Plenary 3
11:00 AM					
11:30 AM					
12:00 PM		Sponsored Lunch in Exh Hall	Lunch in Exh Hall	Lunch in Exh Hall	
12:30 PM					
1:00 PM	Pre-Conference Workshops	Sessions/ Demos/Case Study/ Workshops	Town Hall 1	Town Hall 2	
1:30 PM					
2:00 PM					
2:30 PM					
3:00 PM					
3:30 PM					
4:00 PM		Quick Hits/ Workshops/ Case Study	Quick Hits/ Case Study	Quick Hits/ Case Study	
4:30 PM					
5:00 PM					
5:30 PM		Exhibit Hall Reception			
6:00 PM					
6:30 PM					
7:00 PM					
7:30 PM					
8:00 PM					
8:30 PM					

## Welcome to NACCHO's 2025 Preparedness Summit!

Registration | Level 2/Park View Common Area

Hours of operation:

- Sunday, 4/27: 3:00 pm - 6:00 pm
- Monday, 4/28: 7:00 am - 5:00 pm
- Tuesday, 4/29: 7:30 am-5:00 pm
- Wednesday, 4/30: 7:30 am-5:00 pm
- Thursday, 5/1: 7:30 am -3:00 pm
- Friday, 5/2: 8:00 am - 11:00 am

Wi-Fi Information

SSID: 2025 Prep Summit

Password: Prep2025

Exhibit Hall 4A | Level 2/Meeting Level

Hours of operation:

- Tuesday, 4/29: 12:00 pm - 6:30 pm
- Wednesday, 4/30: 9:30 am - 3:30 pm
- Thursday, 5/1: 9:30 am - 1:30 pm

Poster Session- Exhibit Hall 4A/Meeting Level

Hours of operation

- Wednesday, 4/30-12:00 pm -1:30 pm
- Thursday, 5/1-12:00 pm -1:30 pm

Meals

Lunch will be served in the Exhibit Hall on Wednesday, April 30 and Thursday, May 1<sup>st</sup> from 11:30-1:30 pm

Monday and Tuesday lunch is on your own. See appendix for food options

I participated in a Pre-Conference Workshop on 4/28:

**NACCHO**  
National Association of County and City Health Officials  
The National Organization for Local Public Health

**Radiation Full Day Workshop**  
Recovery in the Aftermath of Radiation Incidents  
Monday, April 28, 2025 | 8:00 am - 5:00 pm (CST)  
Hwy 7 E, Convention Center, Level 2, Room 2025  
Event # 2025-1

TIME (CST)	TOPIC
7:30 - 8:00	Registration
8:00 - 8:30	Presentations
8:30 - 10:00	NACCHO's Welcome • Jerry Zurek, Director of Preparedness, National Association of County and City Health Officials • Lisa Abbate, Senior Program Analyst - Preparedness, National Association of County and City Health Officials
10:00 - 10:30	What is Recovery in the Aftermath of Radiation Incidents • Robert Gold, Emergency Preparedness Director, Southeast Region, Tennessee Department of Health, TN
10:30 - 11:00	Workshop's Summary, Discussion Topics, Assumptions & Considerations • Lisa Abbate, Senior Program Analyst - Preparedness, National Association of County and City Health Officials
11:00 - 11:30	Mid-Morning Break
11:30 - 11:45	Group Discussion-Topic 1: Early & Intermediate Phases
11:45 - 12:00	Group Discussion-Topic 2: Considerations for Public Health Recovery Early & Intermediate Phases for Radiation Incidents
12:00 - 12:30	Debrief Report Out
12:30 - 01:00	Leach-On your Own

TIME	TOPIC
1:00 - 2:00	Presentations Disability Inclusion in Preparedness • Adriana Evans, Director, Preparedness and Disability Integration, Association of State and Territorial Health Officials (ASTHO) • Tiffany Allen-ASTHO Disability and Preparedness Specialist, Ohio Department of Health
2:00 - 2:30	Partners' Tools and Resources • Joe Albrick, Radiation Injury Treatment Network (RITN) Program Manager • Adriana Evans, Director, Preparedness and Disability Integration, Association of State and Territorial Health Officials (ASTHO)
2:30 - 3:00	Refreshment Break
3:00 - 3:15	Group Discussion-Topic 3: Late Recovery Phases
3:00 - 4:00	Group Discussion-Topic 2: Considerations for Public Health Late Recovery Planning for Radiation Incidents
4:00 - 04:30	Debrief Report Out
4:30 - 05:00	Evaluation/ Closing Comments

# Request for Travel on Behalf of the City of Milwaukee

Kryshak, Violet, N

Last Name, First Name, MI

Emergency Response Planning Coordinator

Title

HEALTH

Department

San Antonio, TX

Destination

04/28/25 - 05/02/25

Conference/Event Dates

**Purpose of the Trip and/or Anticipated Benefit**

Attending the Preparedness Summit is an exceptional opportunity for me to advance my expertise in emergency preparedness. I will gain valuable insights, practical skills, and opportunities to network with industry leaders. This experience will enhance my department's capabilities and help ensure Milwaukee's safety through the latest strategies.

**Anticipated Funding**

Source:	Amount	Expense (If Specified)
Department (O&M)		
Grant (Specify Below)	\$2,179	All
GR3801824100		
Other (Specify Below)		
Tuition Reimbursement		

**Anticipated Expenses**

Registration Fees	400.00
<b>Lodging</b>	
Nightly Rate	\$ 166.00
Number of Nights	5
Total Lodging	\$ 830.00

**Travel Advance**

Requested? No  Yes  Amount -

**Transportation**

*Personal Vehicle	
Air	521.37
Rail	
Baggage	
Other (Specify Below)	
a. Rideshare - MKE	41.74
b. Rideshare - Dest.	29.98
c.	
Total Transportation	\$ 593.09

**Employee Certification Statement**

I hereby certify that:

- (1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.
- (2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.
- (3) I have been made aware of and agree to abide by the rules related to travel as established in the City ordinance and by my department.
- (4) I will be prepared to explain any unanticipated expenses or significant discrepancies in anticipated and actual expenses incurred.
- (5) I agree to complete and submit a Statement of Expenses Incurred for the City of Milwaukee (CBP-211) no later than 15 days following my return from the requested travel. I understand that failure to do so may result in the forfeiture of any reimbursements due to me.

**Max Meal Allowance**

	Federal Amount for Destination	**Number of Meals	
Breakfast	18.00	X 5	= \$ 90.00
Lunch	20.00	X 4	= \$ 80.00
Dinner	31.00	X 6	= \$ 186.00
<b>Total Max Meal Allowance</b>			<b>\$ 356.00</b>

Signed by:

*Violet Kryshak*

2/13/2025

4BBDAB7022409E

Date

**Other Anticipated Expenses (Itemize Below)**

a.	
b.	
c.	
<b>Total Other Expenses</b>	\$ -
<b>Total Anticipated Expenses</b>	<b>\$ 2,179.09</b>

**Department Approval** (To be completed by the authorizing entity or designee)

Approval Granted Yes  No

If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Signed by/Approved: 2179.09

# of Days Approved: 5

*Tyler Weber*

2/18/2025

BE70E9F17C144A3

Date

*Aur Spink*

2/18/2025

BE70E9F17C144A3

Date

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate **OR** the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.

# Statement of Expenses Incurred for the City of Milwaukee

\*\*\*Please read the instructions carefully before completing.

Voucher Number	Group Number
----------------	--------------

Last Name Kryshak	First Name Violet	MI N	Title Emergency Response Planning Coordinator	Employee ID 038338	Employee's Address (Street, City, ZIP) 1812 E Lafayette Pl Unit 204, Milwaukee WI 53202
Organization		Authority		Authorized Amount	Travel Advance Amount \$ -
Destination San Antonio, TX		THE EXPENSES INCLUDED ON THIS FORM ARE FOR THE FOLLOWING ADDITIONAL PERSONS (LIST NAME AND TITLE):		PURPOSE OF THE TRIP Attending the Preparedness Summit is an exceptional opportunity for me to advance my expertise in emergency preparedness. I will gain valuable insights, practical skills, and opportunities to network with industry leaders. This experience will enhance my department's capabilities and help ensure Milwaukee's safety through the latest strategies.	
Dates of Travel 4/27/2025 - 05/02/2025	# of Approved Days 6				

Account (6 digit code) 636501	Fund (4 digit code)	Dept ID (4 digit code)	Program (4 digit code)	Class (4 digit code)	Budget Ref (4 digit code)	Project Grant (12 digit code)
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**\*\*EXPENSES ELIGIBLE FOR REIMBURSEMENT\*\***

Under § 350-181 of the code of ordinances providing rules for the reimbursement of expenses for attendance at seminars and conventions and other city travel, generally the City shall pay for the actual expense for registration, transportation (up to coach fare), hotel (up to single rate for the number of days in attendance but not to exceed five days), and other necessary expenses accompanied by the appropriate form of documentation. Exceptions may be made on a case by case basis at the discretion of the Department Head or supervisor. See §350-181 for the complete travel regulations and procedures.

**ACTUAL TRAVEL EXPENSES (Pre-Paid and During Travel)**

<u>Meal Allowance</u>		
1. Actual Meals (NOT PROVIDED BY EVENT)		\$377.00
2. Max Meal Allowance (FOR MEALS NOT PROVIDED)		
	Federal Amount	Number of Meals
Breakfast	\$18	7
Lunch	\$20	4
Dinner	\$31	6
	\$	392.00
3. Meal Reimbursement (Lesser of 1 and 2)		\$377.00

Transportation Expenses

Current Mileage Rate:		\$0.70
4. Personal Vehicle		
	Miles Driven:	
a. Mileage Total	\$	-
b. Flat Rate Amount		
5. Air	\$	236.36
6. Rail		
7. Baggage		
8. Other (List Below)		
a. Ride Shares	\$	110.42
b.		
c.		
9. Total Transportation	\$	346.78

Lodging

10. Total	\$	829.97
-----------	----	--------

Registration Fees

11. Total	\$	400.00
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Other Reimbursable Expenses

12. Total Other (Itemize on Additional Info sheet)		
--	--	--

<b>TOTAL REIMBURSABLE EXPENSES</b>		<b>\$1,953.75</b>
------------------------------------	--	-------------------

**DEDUCTIONS - NOT PAID BY TRAVELLER**

Prepaid Expenses	Voucher Number	Amount
13. Registration		
14. Transportation		
15. Lodging		
16. Other (Specify)		
17. Other (Specify)		
Total		\$ -

Advances	Voucher Number	Amount
18. Travel Advance		\$ -

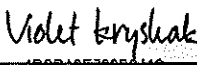
  

Tuition Reimbursement	Voucher Number	Amount
19. Tuition Reimbursement		
<b>TOTAL DEDUCTIONS</b>		<b>\$ -</b>

**Total Amount Due From (To) City \$ 1,953.75**

**EMPLOYEE CERTIFICATION**

I hereby certify that the expenses listed on this statement represent actual expenses incurred by me in conjunction with my duties and responsibilities. I further warrant these expenses have not been reimbursed to me by any other person or organization and request reimbursement in accordance with ordinance §350-181.

Signed by:  
  
 Employee Signature  
 7/7/2025  
 Date

Signed by:  
  
 Supervisor Signature  
 7/7/2025  
 Date



Lodging: **\$98**

Daily lodging rates (excluding taxes) | October 2024 - September 2025

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	2024 Oct	Nov	Dec	2025 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Madison	Dane	\$138	\$110	\$110	\$110	\$110	\$110	\$110	\$138	\$138	\$138	\$138	\$138



**EMBASSY  
SUITES**  
by Hilton

EMBASSY SUITES BY HILTON MADISON  
DOWNTOWN  
231 S. PINCKNEY STREET  
MADISON, WI 53703  
United States of America  
TELEPHONE 608-740-6870 • FAX  
Reservations  
www.hilton.com or 1 800 HILTONS

Kryshak, Violet  
  
1812 E LAFAYETTE PL  
UNIT 204  
MILWAUKEE WI 53202  
UNITED STATES OF AMERICA

Room No: 829/NKS  
Arrival Date: 11/19/2024 5:28:00 PM  
Departure Date: 11/20/2024 8:36:00 AM  
Adult/Child: 1/0  
Cashier ID: WKOVALL  
Room Rate: 98.00  
AL:  
HH # 1757006323 GOLD  
VAT #  
Folio No/Che 53534 A

Confirmation Number: 52283203

EMBASSY SUITES BY HILTON MADISON DOWNTOWN 11/20/2024 8:35:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
11/20/2024	117185	GUEST ROOM EXEMPT	\$98.00
11/20/2024	117188	VS *3900	(\$98.00)
**BALANCE**			\$0.00

11/20/24 Lunch: 22.14; Max Per Diem = ~~\$22~~



Banzo  
2105 Sherman Ave  
Madison, WI 53704  
(608)441-2002  
www.banzomadison.com

Pick Up Information

\*\* When you arrive at your scheduled time, please come on in the front entrance. Check the pickup shelf on the front counter \*\*

Pick Up (Online)

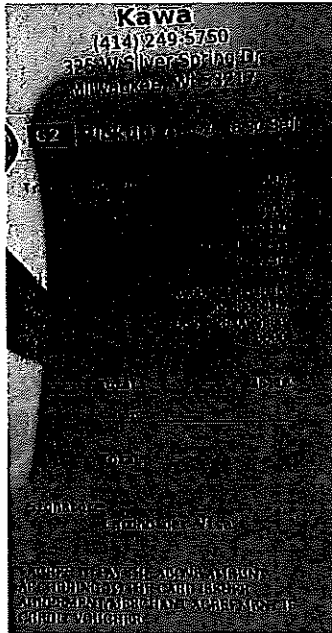
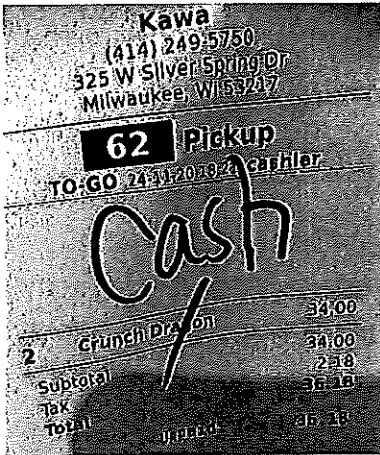
Violet Kryshak 414-704-839  
Q  
vkryshak@gmail.com

Check #19 Violet Kryshak  
Ordered: 11/20/24 11:42 AM  
Due: 11/20/24 12:02 PM

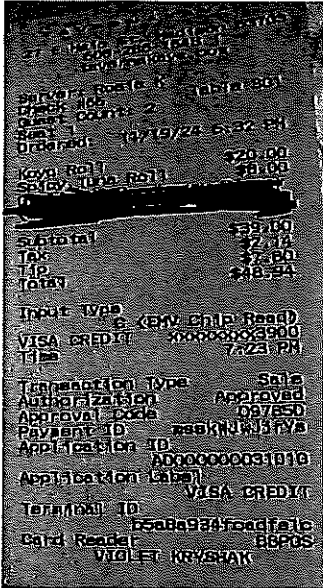
Chick Salad Bowl \$16.50  
SPECIAL: Maple Dijon  
Brussels Sprouts \$4.50  
(vegan, gf)  
Subtotal \$21.00  
Tax \$1.14  
Total \$22.14

Mastercard xxxxxxxx9777  
Transaction Type Sale  
Authorization Approved  
Approval Code  
Payment ID J7MC7YsgJwf

11/20/24 Dinner: 36.18; Max Per Diem = ~~\$33~~



11/19/24 Dinner:  $20 + 8 = 28$ ;  $28 \times 1.055 = 29.54$ ;  $29.54 \times 1.15 = 33.97$ ; Max Per Diem = **\$33**



11/20/24 Breakfast:  $9.97 + 4.69 + 7.12 = 21.78$ ; Max Per Diem = **\$20**

**\$9.97**

Rockin Beet	\$8.50
-----	
Purchase Subtotal	\$8.50
Dane Sales Tax (5.5%)	\$0.47
Tip	\$1.00
-----	
<b>Total</b>	<b>\$9.97</b>

Pure Green Capitol Square  
(629) 462-2765

Shop Online



Visa 4594 (Contactless) Nov 20 2024 at 8:36 AM  
VISA #7V17  
Auth code: 08899D

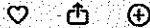
**Receipt**

Mobile order ⓘ  
Total \$4.69 · 8.9★ earned  
Nov 20, 2024, 8:53 AM Receipt #65561896



**Perfect Bar® Dark Chocolate Mint** \$4.45

1 Piece 65 g  
320 Calories



Subtotal.....\$4.45  
Tax.....\$0.24  
**Total.....\$4.69**

My Card (5938) Earns 2★ per \$1  
Auth code: 452731

East Washington & Continental  
4202 E. Washington Ave.  
Madison, WI 53704



**Receipt**

Mobile order ⓘ  
Total \$7.12 · 13.5★ earned  
Nov 20, 2024, 8:50 AM Receipt #65561896



**Sugar Cookie Almondmilk Latte** \$6.75

Venti 20 fl oz  
230 Calories  
3 Pump(s) Sugar Cookie Syrup



Subtotal.....\$6.75  
Tax.....\$0.37  
**Total.....\$7.12**

My Card (5938) Earns 2★ per \$1  
Auth code: 128720

East Washington & Continental  
4202 E. Washington Ave.  
Madison, WI 53704





Mileage:  $12.2 + 154.2 = 166.4$  mile;  $166.4 \times .67 = 111.49$  dollars



## IRS issues standard mileage rates for 2024; mileage rate increases to 67 cents a mile, up 1.5 cents from 2023

X2 Home to Training:  $77.1 \times 2 = 154.2$  miles

Best 1h 12m 6h 49m 1 day 7hr

1812 E Lafayette Pl, Milwaukee, WI 53202

2400 Wright St, Madison, WI 53704

Add destination

Leave now Options

Send directions to your phone Copy link

via I-94 W 1 hr 12 min  
Fastest route, the usual traffic 77.1 miles

Details

Search along the route Gas EV charging Things

1 hr 12 min 77.1 miles

X2 Training to hotel:  $6.1 \times 2 = 12.2$  Miles

Best 16 min 42 min 1h 57m 31 min

Embassy Suites by Hilton Madison Downtown

2400 Wright St, Madison, WI 53704

Add destination

Leave now Options

Send directions to your phone Copy link

via E Johnson St and WI-113 N 16 min  
Best route, lighter traffic than usual 6.1 miles

Details

via E Johnson St, WI-113 N and Anderson St 15 min  
6.1 miles

Search along the route Gas EV charging Things

15 min 6.1 miles

16 min 6.1 miles

17 min 6.1 miles



U.S. DOE Transportation Emergency Preparedness Program



**FREE Modular Emergency Response  
Radiological Transportation  
Training (MERRTT)  
Train-the-Trainer Course**

Designed to take the complex topic of a radiological accident response and break it down into easily understood modules. Hands-on practical exercises verify student's understanding and knowledge. Students will receive a certificate of completion from the Department of Energy's Transportation Emergency Preparedness Program and up to 9 hours of continuing education hours (CEH) for medical response personnel through the Commission on Accreditation for Prehospital Continuing Education (CAPCE).

**COST:** FREE! No fee for the course. Food, lodging, transportation are the responsibility of the participant.

**WHO SHOULD ATTEND?**  
Fire, HAZMAT, EMS, and all who will support activities at a radiological transportation accident.

**PREREQUISITES:** None

**FOUR COURSE MODULES:**

- Radiological Basics
- Biological Effects
- Radioactive Material Shipping Packages
- Hazard Recognition
- Initial Response Actions
- Patient Handling
- Rad Survey, Instruments & Dosimetry Devices
- Decontamination, Disposal and Documentation
- DOE Shipments and Resources
- Waste Isolation Pilot Plant
- Pre-Hospital Practices
- Transportation of Safeguards Material
- Transportation by Rail
- Case Histories

**UP TO 6 PRACTICAL EXERCISES:**

- Radiological Instrument Use
- Assessing Radioactive Package Integrity
- Personnel Contamination Surveys
- Contaminated Patient Handling
- Radioactive Decon Corridor Operations
- Radiological Response Picture Card Practical

**Location:**  
Joint Force Headquarters  
2400 Wright St.  
Madison, WI 53704

**Dates:** November 19-20, 2024

**Time:** 9:00 am - 5:00 pm, both days

**Registration:**  
Travis Wadke  
WCEM Rep Program Manager  
Wisconsin Emergency Management  
travis.wadke@wdfm.gov  
608-509-8451

**REGISTRATION DEADLINE:**  
November 1, 2024

**For More Information:**

[enr.doe.gov/otem](http://enr.doe.gov/otem)

# Statement of Expenses Incurred for the City of Milwaukee

\*\*\*Please read the instructions carefully before completing.

Voucher Number	Group Number
----------------	--------------

Last Name	First Name	MI	Title	Employee ID	Employee's Address
Kryshak	Violet	H	Emergency Response Planning Coordinator	038338	1812 E Lafayette Pl, Unit 204, Milwaukee WI 53202
Organization		Authority		Authorized Amount	Travel Advance Amount
Destination		THE EXPENSES INCLUDED ON THIS FORM ARE FOR THE FOLLOWING ADDITIONAL PERSONS (LIST NAME AND TITLE):		PURPOSE OF THE TRIP	
Madison, WI				Designed to take the complex topic of a radiological accident response and break it down into easily understood modules in: Radiological Basics; Biological Effects; Radioactive Material Shipping Packages; Hazard Recognition; Initial Response Actions; Patient Handling; Rad Survey Instruments & Dosimetry Devices; Decontamination; Disposal and Documentation; DOE Shipments and Resources; Waste Isolation Pilot Plant.	
Dates of Travel	# of Approved Days				
11/19/2024-11/20/24	2				

Account (6 digit code)	Fund (4 digit code)	Dept ID (4 digit code)	Program (4 digit code)	Class (4 digit code)	Budget Ref (4 digit code)	Project Grant (12 digit code)
63601						

**\*\*EXPENSES ELIGIBLE FOR REIMBURSEMENT\*\***

Under § 350-181 of the code of ordinances providing rules for the reimbursement of expenses for attendance at seminars and conventions and other city travel, generally the City shall pay for the actual expense for registration, transportation (up to coach fare), hotel (up to single rate for the number of days in attendance but not to exceed five days), and other necessary expenses accompanied by the appropriate form of documentation. Exceptions may be made on a case by case basis at the discretion of the Department Head or supervisor. See §350-181 for the complete travel regulations and procedures.

**REIMBURSABLE EXPENSES**

**Meal Allowance**

1. Actual Meals (NOT PROVIDED BY EVENT) \$150.00

2. Max Meal Allowance (FOR MEALS NOT PROVIDED)

	Federal Amount	Number of Meals
Breakfast	\$20	2
Lunch	\$22	2
Dinner	\$33	2
		\$ 150.00

3. Meal Reimbursement (lesser of 1 and 2) \$150.00

**Transportation Expenses**

Current Mileage Rate: \$0.67

4. Personal Vehicle

	Miles Driven:	
a. Mileage Total	166.4	\$ 111.49
b. Flat Rate Amount		

5. Air

6. Rail

7. Baggage

8. Other (List Below)

a. \$

b. \$

c. \$

9. Total Transportation \$ 111.49

**Lodging**

10. Total \$ 98.00

**Registration Fees**

11. Total \$

**Other Reimbursable Expenses**

12. Total Other (Itemize on Additional Info sheet) \$

**TOTAL REIMBURSABLE EXPENSES** **\$359.49**

**DEDUCTIONS**

Prepaid Expenses	Voucher Number
13. Registration	\$
14. Transportation	\$
15. Lodging	\$
16. Other (Specify)	\$
16. Other (Specify)	\$
<b>Total</b>	<b>\$</b>

Advances	Voucher Number
17. Travel Advance	\$

Tuition Reimbursement	Voucher Number
18. Tuition Reimbursement	\$

**TOTAL DEDUCTIONS** **\$**

**Total Amount Due From (To) City** **\$ 359.49**

**EMPLOYEE CERTIFICATION**

I hereby certify that the expenses listed on this statement represent actual expenses incurred by me in conjunction with my duties and responsibilities. I further warrant these expenses have not been reimbursed to me by any other person or organization and request reimbursement in accordance with ordinance §350-181.

Signed by: Violet Kryshak 12/19/2024

7487E49AF-8B437- Employee Signature Date

Signed by: Christine Westrich 12/20/2024

D2BF4A0F-C840AE- Supervisor Signature Date

Parking – \$70.77



Happy Parking!

### Reservation Confirmed



Rental ID: 88611791

#### 701 W St. Paul Ave. - Intermodal Lot

Fri Oct 25, 12:30 PM - Thu Oct 31, 6:30 PM  
Change

Subaru Crosstrek AWA4150 Change

(414) 704-8390  
Change

[View Parking Pass](#)

### Payment

Subtotal	\$71.65
Promo Code	-\$5.00
Service Fee	\$4.12
Total	\$70.77

(Card ending \*3900)

### Mileage:

Best 11 min 27 min 57 min 16 min

1812 E Lafayette Pl, Milwaukee, WI 53202

Milwaukee Intermodal Station, 433 W St. F

Add destination

Leave now Options

Send directions to your phone Copy link

via N Lincoln Memorial Dr 11 min  
Best route, despite the usual traffic 2.8 miles  
Details

via N Lincoln Memorial Dr and E Clybourn St 10 min  
2.8 miles  
Some traffic, as usual



Lyft to Hotel:

OCTOBER 25, 2024 AT 6:53 PM

Thanks for riding with Abdulahi Hussein!

100% of tips go to drivers. [Add a tip](#)

Lyft fare (10.73mi, 15m 38s) \$12.99

Apple Pay (MasterCard) \$12.99

- **Pickup** 6:53 PM  
315 Wall St, St Paul, MN
- **Drop-off** 7:09 PM  
71 S 11th St, Minneapolis, MN

Lyft to Train Station:

OCTOBER 31, 2024 AT 10:58 AM

Thanks for riding with Eric!

100% of tips go to drivers. [Add a tip](#)

Lyft fare (10.93mi, 17m) \$14.78

Apple Pay (Visa) \$14.78

- **Pickup** 10:58 AM  
71 S 11th St, Minneapolis, MN
- **Drop-off** 11:15 AM  
315 Wall St, St Paul, MN

Train Roundtrip Milwaukee to Minneapolis - \$97



Purchased: 09/11/2024 10:35 AM PT Thank you for your purchase.

1. Retain this receipt for your records.
2. Show the QR code on the attached eTicket to the conductor or use the Amtrak app.

Merchant ID 006401 Massachusetts Ave NW Washington, DC 20001800-USA-RAILAmtrak.com

Reservation Number - 776421 Milwaukee-Downtown, WI - Intermodal Station to St. Paul-Minneapolis, MN - Union Depot (Round-Trip) SEPTEMBER 11, 2024

Billing Information

Mastercard ending in 6232 (Purchase) Authorization Code 91564Z

Total \$97.00

Purchase Summary - Ticket Number 2550640094035

TRAIN 1333: Milwaukee-Downtown, WI - Intermodal Station to St. Paul-Minneapolis, MN - Union Depot (Round-Trip) Depart 12:39 PM, Friday, October 25, 2024

1 COACH SEAT

\$54.00

Ticket Terms & Conditions VLD DATE TRAIN TICKETED; NO SHOW: FORFEIT VALUE COACH: NO CHANGES, 25% CANCEL FEE ADULT FULL FARE ID REQUIRED

Subtotal

\$54.00

TRAIN 1340: St. Paul-Minneapolis, MN - Union Depot to Milwaukee-Downtown, WI - Intermodal Station (Round-Trip) Depart 11:50 AM, Thursday, October 31, 2024

1 COACH SEAT

\$43.00

Ticket Terms & Conditions VLD DATE TRAIN TICKETED; NO SHOW: FORFEIT VALUE COACH: NO CHANGES, 25% CANCEL FEE ADULT FULL FARE ID REQUIRED

Subtotal

\$43.00

Total Charged by Amtrak

\$97.00

Passengers

Violet Kryshak

10/31/24 Dinner: Max \$38

Amtrak

Amtrak's Railroad  
1-800-USA-RAIL  
www.amtrak.com  
Welcome Aboard

Account No.: 011801910781  
Card No.: 1111  
Exp. Date: 06/25  
Cardholder Name: 66667  
Merchant: 66667  
Date: 10/31/2024  
Time: 10:07  
Order Ref: 66667

ITEM	QTY	PRICE	TOTAL
Large Muffin	1	\$7.25	\$7.25
Medium Muffin	1	\$7.25	\$7.25
Pistachio Nut 2.5oz	1	\$5.00	\$5.00
Assorted Candy Bars	1	\$6.25	\$6.25
Large Diet Urtn	1	\$7.50	\$7.50
Favorite Whl Oatb 1.8oz	1	\$2.00	\$2.00
Small Peanut Butter	1	\$3.00	\$3.00

Subtotal: \$33.75  
 Total: \$33.75  
 Credit Card: \$38.75  
 Tip: \$5.00

CARD TYPE : CREDIT CARD  
 MERCHANT : 5416  
 DATE/TIME : 10/31/2024 6:02:15 PM  
 CREDIT ID : 00014567  
 CARD TYPE : Visa  
 CARD NUMBER : 2128  
 EXPIRATION : 01/2025-12/2026  
 BIN : 601101  
 TRACK 1 : 461541282  
 TRACK 2 : 096216  
 TRACK 3 : 229  
 TRACK 4 : 4624810  
 Merchant Club : 00  
 AID : A000000031010  
 APP LABEL : VISA GIBIT  
 IC : 000C  
 Cryptogram : A806 7401006F560405F6  
 ENTRY MODE : Contactless  
 TIP AMOUNT : \$5.00  
 MERCHANT ID : 451038034992  
 AMOUNT : \$33.75  
 STATUS : Approved



10/31/24 Breakfast: \$17+\$1.53+\$2.76 = \$21.31



DOUBLETREE SUITES BY HILTON MINNEAPOLIS  
 EIGHTH/THIRD  
 DOUBLETREE SUITES BY HILTON 1701 LA SALLE  
 AVE  
 MINNEAPOLIS, MN 55402  
 United States of America  
 TELEPHONE 612 332-9900 FAX 612 332-9144  
 Please visit us at  
 www.doubletree.com or 1-800-222-3389

ANYTIME VOUCHER

Room No. 8270171  
 Arrival Date 10/31/24 8:34:02 PM  
 Departure Date 11/01/24 11:00:00 AM  
 ALLEGORIE 807  
 Customer ID 666666666666  
 Room Rate 148.00  
 AC  
 TYP 8  
 SUCT 8  
 Public Area 8427-4 L

Confirmation Number: 8041717

DOUBLETREE SUITES BY HILTON MINNEAPOLIS (EIGHTH/THIRD) TRAVELER  
 10/31/24 PM

DATE	ROOM NO.	DESCRIPTION	CHARGES
10/31/24	8270171	8PM-11PM	\$17.00
10/31/24	8270171	TAXES	\$1.53
10/31/24	8270171	TIPS	\$2.76

10/31/24 Lunch: Max \$26

## Receipt



Picked Up

## Order Summary



Southwest Salad with Chili Lime Chicken

Qty: 1 \$9.99



Blueberry Chia Overnight Oats

Qty: 1 \$5.49



White Cheddar Cheese

Qty: 2 \$2.79



Sweet Street Toffee Crunch Blondie

Qty: 1 \$3.49

**Total**

**\$26.48**

### Order Location



Union Depot



214 4th St. E, Saint Paul, MN 55101

Located on the main floor near the vending bank by elevator 6

### Order Total

Subtotal (4 items) \$24.55

Tax 1.93

♡ FAVORITE THIS LOCATION

10/30/24 Breakfast: \$17+\$1.53+\$2.76 + \$9.29= Max \$23

**EXACTLY**

REGISTRATION NUMBER: 10/30/24  
 REGISTRATION DATE: 10/30/24  
 REGISTRATION TIME: 10:30 AM  
 REGISTRATION LOCATION: 10/30/24

REGISTRATION NUMBER: 10/30/24  
 REGISTRATION DATE: 10/30/24  
 REGISTRATION TIME: 10:30 AM  
 REGISTRATION LOCATION: 10/30/24

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REGISTRATION NUMBER: 10/30/24  
 REGISTRATION DATE: 10/30/24  
 REGISTRATION TIME: 10:30 AM  
 REGISTRATION LOCATION: 10/30/24

10/30/24 Lunch: \$26  
 Dancing Ganesha  
 1100 Harmon Pl  
 Minneapolis, MN 55403

Take Out (Online)

Violet Kryshak 414-704-8390  
 vkryshak@gmail.com

Check #63 Violet Kryshak  
 Ordered: 10/30/24 4:47 PM  
 Due: 10/30/24 5:07 PM

1 Garlic Naan \$4.00  
 1 mint and tamarind sauce \$1.50  
 1 paneer makhani \$16.00  
 Medium

Subtotal \$21.50  
 Tax \$2.68  
 Tip \$1.92  
 Total \$26.00

Visa XXXXXXXX4594

Transaction Type Sale  
 Authorization Approved

10/30/24 Dinner: MAX \$38

Order Receipt

Thanks for your order. Violet Kryshak Your order has been submitted to Red's Pub - Minneapolis. You'll receive a second email letting you know when it will be ready for pickup.

ORDER RECEIPT

1 Shepherd's Pie \$14.00  
 1 Maddy Paws Mares Bar Chowder \$11.00

Subtotal \$25.00  
 Tax \$1.00  
 Tip/gratuity \$5.25  
 Total \$31.25

Credit Card Date Total  
 American Express ending in 2025 October 30, 2024 \$31.25

Questions about your order?  
 Email: info@pub-minneapolis.com | 612.222.2008







10/27/24 Breakfast: \$17+\$1.53+\$2.76 = \$21.31



DOUBLE TREE SUITES BY HILTON MINNEAPOLIS  
 (DOWNTOWN)  
 DOUBLE TREE SUITES BY HILTON 151 LASKILLE  
 AVE  
 MINNEAPOLIS MN 55415  
 United States of America  
 TELEPHONE 612 333 4800 • FAX 612 333 8246  
 Reservations  
 www.doubletree.com or 1 800 333 3333

XXXXXX, VIOLET

Room for:  
 Arrival Date: 10/27/24 5:31 PM  
 Departure Date: 10/28/24 11:20 AM  
 Adult Code: 10  
 Cashier ID: 14830  
 Room Rate: 148.00  
 AL: 1014  
 VST: 2  
 Folio No/Ch: 84274 A

Confirmation Number: 8081797

DOUBLE TREE SUITES BY HILTON MINNEAPOLIS (DOWNTOWN) 11/4/2014  
 12:32:30 AM

DATE	REF NO	DESCRIPTION	CHARGE
10/27/2024	0710258	BREAKFAST	\$12.00
10/27/2024	0710258	SALES TAX 8.02%	\$1.53
10/27/2024	0710258	TIPS	\$2.76

10/27/24 Lunch: \$7.67 + \$19.65 = \$27.32, Max Per Diem=\$26

2:52

Receipt

In-store order

Total \$7.67 • 13.7★ earned

Oct 27, 2024, 1:04 PM

Receipt # 4501137501570247



Apple Crisp  
 Oatmilk Macchiato

\$6.85

Venti 20 fl oz  
 390 Calories

Subtotal \$6.85

Total \$7.67

My Card (5938)

Earns 2★ per \$1

Target Minneapolis 1375  
 900 Nicollet Mall  
 Minneapolis, MN 55403

Store number 72669-48339

Call store



900 Nicollet Mall • 612-339-0005  
 900 Nicollet Mall  
 Minneapolis, Minnesota 55403-2930  
 10/27/2024 01:04 PM

FROM THE STORE: APPLE CRISP OATMILK MACCHIATO

ITEMS:

ITEM	QTY	PRICE
21800101 OAT MILK	1	\$7.99
23160153 OAT BLEND	1	\$1.99
21800101 OAT BLEND	1	\$1.99
21800101 OAT BLEND	1	\$1.99
00500000 SMART SWEETS	1	\$1.99

SUBTOTAL \$19.65  
 MERCH \$0.00  
 TAX \$19.65  
 1475 AMEX CHARGE \$19.65  
 AMEX: 00000002-010801  
 AMEX CREDIT  
 AUTH CODE: 024510

WHEN YOU RETURN ANY ITEM, YOUR  
 RETURN CREDIT WILL NOT EXCEED ANY  
 FLOORPLAN DISCOUNT OR POLICY  
 APPLIED TO THE ORIGINAL PURCHASE.

SAVING WITH TARGET CIRCLE GO! EASIER!  
 Over the Target App or Website  
 target.com/circle-go! See terms, conditions  
 and find more details!

800-440-4410 (441-4410)  
 Help make your Target app better.  
 Take a 2-minute survey about today's trip.

Informational.com  
 Offer ID: 7500 8502 5002  
 Powered by: 423 010

© 2024 TARGET BRAND. ALL RIGHTS RESERVED.

10/27/24 Dinner: \$36.97 + \$1.03 cash tip = \$38

← Order #E4EF1 Help

View store

**Barrio**  
 Order completed • Oct 27, 2024 at 7:49 PM

Rate this store  
 How did you like Barrio?

Your order

- Made to Order Guacamole Plate (Small)
- Ahi Taco

Total: \$36.97

Here's your receipt for Barrio - Nicollet.

Total \$36.97

1	Made to Order Guacamole Plate (Small)	\$12.00
3	Ahi Taco	\$21.00

Subtotal \$33.00  
 Tax \$3.97

Payments

Violet Amex --1000	\$36.97
10/27/24 5:18 AM	

Navigation icons: Home, Store, Items, Deals, Account

10/26/24 Breakfast: \$17+\$1.53+\$2.76 = \$21.31

**EXCLUSIVE TREE**  
by **WOODS**

DOUBLE TREE SUITES BY HILTON MINNEAPOLIS  
100 WOODLAND  
MINNEAPOLIS, MN 55402  
United States of America  
TELEPHONE 612 332 6800 • FAX 612 332 4008  
Reservations  
www.doubletree.com or 1-800-322-1500

ARRIVAL: VIOLET  
[REDACTED]

Room No: 2109K18  
Arrival Date: 10/26/2024 5:34:58 PM  
Departure Date: 10/31/2024 11:28:00 AM  
Adult/Child: 2/0  
CustID: 101010018  
Room Rate: 146.00  
AL: [REDACTED]  
MFI: 075000021 GOLD  
VAT #: [REDACTED]  
Folio Ref: 042211 A

Confirmation Number: 9581737

DOUBLE TREE SUITES BY HILTON MINNEAPOLIS (DOWNTOWN) 11/6/2024  
10:27:02 AM

DATE	REF NO	DESCRIPTION	CHARGE
10/26/2024	0711988	BRKFAST	\$17.00
10/26/2024	0711988	SALES TAX 8.00%	\$1.53
10/26/2024	0711978	TIPS	\$2.76

10/26/24 Lunch: (3+4+3.5+6.25+8.5)\*1.08375=27.36 Max Per Diem=\$26

**\$18.17**      **\$39.50**

**Split \$3**      **Split \$6.25**

Fresh Apple Cider Donuts \$6.00  
1/2 Dozen  
Cider Cup X2 \$4  
(\$2.00 ea.)  
Hot  
Slice of Pumpkin Bread \$3.50

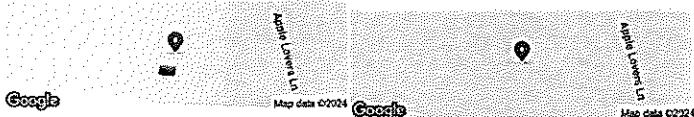
Purchase Subtotal \$17.50  
MN tax 8% (8.375%) \$0.67

**Total \$18.17**

Honeycrisp - Ferguson's Orchard \$12.50  
1/2 a peck of our delicious Honeycrisp delivered right to your car for curbside pickup. Available for pickup at our Eau Claire and...  
Fresh Baked Apple Pie \$17.00  
Fresh baked apple pie is available for curbside pickup at The Pepin Heights Store in Lake City, MN only.

**Split \$8.50**

**Total \$39.50**



**Ferguson's Minnesota Harvest**  
8251 Old Hwy 169 Blvd  
Jordan, MN 55352  
(952) 492-2785

[Shop Online](#)

**Ferguson's Minnesota Harvest**  
8251 Old Hwy 169 Blvd  
Jordan, MN 55352  
(952) 492-2785

[Shop Online](#)

Visa 3900 (Chip) Oct 26 2024 at 2:38 PM  
VISA #9shz  
VIOLET KRYSHAK Auth code: 04358D  
A/D: A0000000031010

Visa 3900 (Chip) Oct 26 2024 at 3:59 PM  
VISA #5apd  
VIOLET KRYSHAK Auth code: 08319D  
A/D: A0000000031010

10/26/24 Dinner: 16.79 + 23.77 = \$40.56 Max Per Diem = \$38

**JIMS APPLE FARM**

DATE 10/26/2024 SAT TIME 17:19

2.99 T1 \$2.99  
2.99 T1 \$2.99  
3.99 T1 \$3.99  
Curds \$5.99  
Tax 1 \$0.83  
TOTAL \$18.78  
CASH \$20.00  
CHANGE \$1.22  
CLERK 1 No. 049394 00001

Order Placed: Sat, Oct 26 at 6:40 PM  
Order Number: 119565074  
Payment Method: Credit

Delivery Information  
Violet Kryshak  
(414) 704-8390  
6608 Grand Ave S  
Minneapolis, MN 55419

1 Large Double Peppercorn Pizza	\$15.98
Social + This Drink	
1 Fresh Garden Salad	\$3.60
Side + Bleu Cheese Dressing	
Subtotal (Before taxes and delivery fee)	\$19.58
Estimated Tax	\$1.72
Tip Amount (20%)	\$2.94
Support Local Fee	\$1.49
Delivery Fee	FEE
10% Discount	-\$1.16
<b>Total</b>	<b>\$23.77</b>

Meal Receipts:

10/25/24 Lunch: \$22.71 +\$3.29 cash tip = \$26

3:12 LTE

<

### Receipt

Mobile order

Total \$22.71 - 41.9★ earned  
Oct 25, 2024, 12:21 PM Receipt #72273396

---

**Turkey, Provolone & Pesto on Ciabatta** \$7.75  
1 Piece 200 g  
520 Calories

---

**Cheese & Fruit Protein Box** \$6.45  
1 Piece 192 g  
470 Calories

---

**Apple Crisp Oatmilk Macchiato** \$6.75  
Venti 20 fl oz  
390 Calories  
Almond

Home

3:12 LTE

<

### Receipt

1 Piece 192 g  
470 Calories

---

**Apple Crisp Oatmilk Macchiato** \$6.75  
Venti 20 fl oz  
390 Calories  
Almond

---

Subtotal..... \$20.95  
Tax..... \$1.76  
**Total..... \$22.71**

My Card (5938) Earns 2★ per \$1  
Auth code: 221435

East Ogden & North Jefferson  
544 East Ogden Avenue  
East Pointe Commons  
Milwaukee, WI 53202  
To go  
Store number 2524-29615

[Call store](#)

Home

10/25/24 Dinner: \$8.95+\$20.40+\$6.35=\$35.70+\$2.30 tip = MAX \$38

**IPHO BY SAIGON**  
704 UNIVERSITY AVE W  
ST. PAUL, MN 55104  
6122258751

Cashier: Hoa N.  
25-Oct-2024 7:10:43P  
Transaction 245699

1 A9. Cream Cheese Wontons	\$8.95
3 B9. Chicken	\$20.40
1 A1. Fresh Spring Rolls	\$6.35
1 Merchant Processing Fee	\$1.94
<b>Subtotal</b>	<b>\$62.69</b>
Sales Tax 9.875%	\$6.00
<b>Total</b>	<b>\$68.69</b>
Tip	\$10.30
<b>CREDIT CARD SALE</b>	<b>\$78.99</b>
VISA 3900	

Retain this copy for statement validation

25-Oct-2024 7:11:30P  
\$78.99 | Method: CONTACTLESS  
VISA CREDIT XXXXXXXXXXXX3900  
VISA CARDHOLDER  
Reference ID: 430000608036  
Auth ID: 039020  
MID: \*\*\*\*\*0885  
AID: A0000000031010  
AuthWkNm: VISA

Online: <https://clover.com/p/YNNVZ9PB0BR4P>

Clover ID: XRMCCX4502G02  
Payment YNNVZ9PB0BR4P

Clover Privacy Policy  
<http://clover.com/privacy>

Lodging Per Diem:

Primary Destination <input type="checkbox"/>	County <input type="checkbox"/>	2023	2024	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
		Oct	Nov	Dec	Jan						
Minneapolis / St. Paul	Hennepin / Ramsey	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148

Lodging Receipt: (out of state – unable to remove taxes) (148+22.24)\*6 = \$1,021.44



DOUBLETREE SUITES BY HILTON MINNEAPOLIS (DOWNTOWN)  
 DOUBLETREE SUITES BY HILTON 1101 MARquette AVE  
 MINNEAPOLIS, MN 55403  
 United States of America  
 TEL: PHONE 612-332-6800 • FAX 612-337-3265  
 Reservations  
 www.doubletree.com or 1-800-322-TREE

KRYSHAK, VIOLET

Room No: 8104K19  
 Arrival Date: 10/25/2024 5:24:00 PM  
 Departure Date: 10/31/2024 11:20:00 AM  
 Adult Count: 2/0  
 Cashier ID: hennepin18  
 Room Rate: 148.00  
 AL:  
 HH# 1757000323 GOLD  
 VAT #  
 Folio No/Cha: 042214 A

Confirmation Number: 96451751

DOUBLETREE SUITES BY HILTON MINNEAPOLIS (DOWNTOWN) 11/4/2024 10:22:00 AM

DATE	REF NO	DESCRIPTION	CHARGE
10/25/2024	4711442	GUEST ROOM	\$148.00
10/25/2024	4711442	TAXES	\$22.24
10/25/2024	4711474	GUEST ROOM	\$148.00
10/25/2024	4711474	TAXES	\$22.24
10/27/2024	4712266	GUEST ROOM	\$148.00
10/27/2024	4712266	TAXES	\$22.24
10/28/2024	4712287	GUEST ROOM	\$148.00
10/28/2024	4712487	TAXES	\$22.24
10/29/2024	4712516	GUEST ROOM	\$148.00
10/29/2024	4712516	TAXES	\$22.24
10/30/2024	4712522	GUEST ROOM	\$148.00
10/30/2024	4712522	TAXES	\$22.24



Each year, APHA selects a local organization to support. The APHA 2024 host city charity is the **Dream of Wild Health**, one of the longest continually operating Native American organizations in the Twin Cities. When you donate to Dream of Wild Health, you support their mission to restore health and well-being in the Native community by recovering knowledge of and access to healthy Indigenous foods, medicines and lifeways. Your gift supports Native youth leadership, healthy and traditional food access, and Indigenous seed stewardship. Attendees are encouraged to join in the effort to make an impact by making a gift through the registration process.

## Frequently Asked Questions

[Does APHA have scholarships or financial support for attendees?](#)

[How do I register for APHA's Annual Meeting?](#)

[How do I pay by check?](#)

[I am presenting. Do I need to register?](#)

[Do APHA members receive discounts on registration?](#)

[What if I become a member of APHA after I have registered as non-member?](#)

[Does the media need to register to cover the meeting?](#)

[Why have I not received a registration confirmation?](#)

[How do I make a correction or change on my registration?](#)

[How do I change the email address associated with my registration?](#)

[How do I cancel or transfer my registration?](#)

[How do I request a letter of invitation for a visa?](#)

[Are meals included in the cost of registration?](#)

No meals are included in the Annual Meeting registration. You may purchase tickets for several ticketed lunch events at an additional cost.

[Can I participate in the business meetings even if I'm not in Minneapolis?](#)

[Can I register for the Public Health Expo only?](#)

[If I attend the Annual Meeting in Minneapolis, do I need a separate registration to watch the digital version of the meeting?](#)

[How do I get my name badge?](#)

[Can my family attend the Annual Meeting and Expo?](#)

[Can I register a guest?](#)

[How do I select the sessions I want to attend?](#)

[How do I register for one day only?](#)



Total Registration Cost: \$350 (compared to MHD Member Rate of \$645)

\*Note Registration for Pre-Conference Workshop

Student Membership: \$70

Dear Violet,

Thank you for your order! Here are your order details. Please retain this email for your records.

Order Date: Jun 14, 2024 3:53 PM

Bill To: Violet Kryshak

Order Total: 70.00

Payment Method: Master Card \*\*\*\*\*6232

Name on Card: Violet Kryshak

Item	Price	Qty	Total
Invoice: Renewal Fees - Violet Kryshak	70.00	1	70.00
	<b>Item Total</b>		0.00
	<b>Shipping</b>		0.00
	<b>Handling</b>		0.00
	<b>Item Grand Total</b>		0.00
	<b>Invoice Total</b>		70.00
	<b>Transaction Grand Total</b>		70.00

Thank you again for your support!

Student Conference Registration: \$280

APHA Registration Confirmation and Receipt - 601931

Thank you for registering for the American Public Health Association's 2024 Annual Meeting and Expo in Minneapolis

For additional information, please email [annualmeeting@apha.org](mailto:annualmeeting@apha.org)

If you paid for APHA membership through the Annual Meeting registration process, you will receive a separate confirmation for your membership dues payment.

Your registration number is: 601931  
Your registration was completed on: 06/14/2024

Name: Violet Kryshak  
Company: City of Milwaukee Health Department  
Address: 241 N Broadway  
Address 2: 3rd Floor  
City/State/Zip: Milwaukee, WI 53202  
Country: USA  
Phone: 414-208-7600  
Email: [vkrysh@milwaukee.gov](mailto:vkrysh@milwaukee.gov)  
Badge Name:  
Badge City:  
Badge State:

Registration Information  
Champion of Change Cohort: Empower to Educate: A Sustainable Approach to Addressing ACEs, Overdose, and Suicide Through Trainer Development  
Date: 10/26/24 Time: 10:00AM-12:00PM  
\$0.00

Full Conference - Student Member  
\$280.00

Payment Information  
Payment Type: CCD Payment  
Reference: Master Card  
Score: 6232 Exp: 09/28  
Payment Amount: \$280.00

Amount Due: \$280.00  
Amount Paid: \$280.00  
Balance Due \$0.00

12-1 p.m.	Poster Sessions
12:30-2 p.m.	Emerging Scholars Theater Sponsored Lunches/Business Meetings/Social Hours/Ticketed Luncheons Wellness Lounge Activities
2-3 p.m.	Poster Sessions
2:30-4 p.m.	Champion Conversation Scientific Sessions
4:30-6 p.m.	Champion Conversation Scientific Sessions
6:30-9 p.m.	Business Meetings/Social Hours

Wednesday, Oct. 30

7-8 a.m.	Business Meetings/Social Hours/Sponsored Breakfasts
7:30 a.m.-12 p.m.	Registration
8:30-10 a.m.	Champion Conversation Scientific Sessions
10:30 a.m.-12 p.m.	Champion Conversation Scientific Sessions
12:30-2 p.m.	Scientific Sessions
2:30-4 p.m.	Closing Session

---

5-6 p.m.	Poster Sessions
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Monday, Oct. 28

7-8 a.m.	Business Meetings/Social Hours/Sponsored Breakfasts Coffee Talks
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---

7:30 a.m.-5 p.m.	Registration
------------------	--------------

---

8:30-10 a.m.	Scientific Sessions
--------------	---------------------

---

9 a.m.-4 p.m.	Public Health Expo
---------------	--------------------

---

10-11 a.m.	Poster Sessions
------------	-----------------

---

10:30-11:30 a.m.	Poster Sessions
------------------	-----------------

---

10:30 a.m.-12 p.m.	Champion Conversation Scientific Sessions
--------------------	--

---

12-12:30 p.m.	Awards Luncheon Networking pre-reception for students
---------------	---

---

12-1 p.m.	Poster Sessions
-----------	-----------------

---

12:30-2 p.m.	APHA Awards Ceremony and Luncheon Emerging Scholars Theater Sponsored Lunches/Business Meetings/Social Hours/Ticketed Luncheons Wellness Lounge Activities
--------------	---

---

2-3 p.m.	Poster Sessions
----------	-----------------

---

2:30-4 p.m.	Champion Conversation Scientific Sessions
-------------	--

---

3-3:45 p.m.	Leadership Lab
-------------	----------------

---

4:30-6 p.m.	General Session
-------------	-----------------

---

6-8:30 p.m.	Business Meetings/Social Hours
-------------	--------------------------------

---

Tuesday, Oct. 29

7-8 a.m.	Business Meetings/Social Hours/ Sponsored Breakfasts Coffee Talks
----------	--

---

7:30 a.m.-4 p.m.	Registration
------------------	--------------

---

8:30-10 a.m.	Scientific Sessions
--------------	---------------------

---

8:30 a.m.-1:30 p.m.	Governing Council
---------------------	-------------------

---

9 a.m.-4 p.m.	Public Health Expo
---------------	--------------------

---

10-11 a.m.	Poster Sessions
------------	-----------------

---

10:30 a.m.-12 p.m.	Champion Conversation Scientific Sessions
--------------------	--



AMERICAN PUBLIC HEALTH ASSOCIATION  
For science. For action. For health.

[APHA](#) > [Events & Meetings](#) > [Annual Meeting](#) > [Program](#) > [Schedule at a Glance](#)

## Schedule at a Glance

Below is an outline of the Annual Meeting schedule.

A more detailed listing of all the Annual Meeting sessions, business meetings and social hours will be available in the online program on June 4.

This schedule is accurate as of April 2024 and is subject to change. All events are in-person in Minneapolis unless otherwise noted. You can also view the Digital Meeting schedule for virtual events.

[Register](#) >

[Book Housing](#) >

[View Program](#) >

[Contact Us](#) >

### Saturday, Oct. 26

8 a.m.-6:30 p.m.	Registration
9 a.m.-2:30 p.m.	Women's Leadership Institute
9 a.m.-4 p.m.	Affiliate Day
9 a.m.-6 p.m.	Learning Institutes
12-8 p.m.	Business Meetings/Social Hours/Workshops
3-6 p.m.	Governing Council Meeting

### Sunday, Oct. 27

7 a.m.-6 p.m.	Registration
8-10:30 a.m.	Business Meetings/Social Hours/ Sponsored Breakfasts
8 a.m.-5 p.m.	Learning Institutes
9-9:45 a.m.	Coffee Talks
11 a.m.-12:30 p.m.	Opening Session
12:30-2 p.m.	Sponsored Lunches/Business Meetings/Social Hours/Ticketed Sessions
12:30-6 p.m.	Public Health Expo
1-2 p.m.	Emerging Scholars Theater Poster Sessions
1-2:30 p.m.	Wellness Lounge Activities
2:30-4 p.m.	Champion Conversation Scientific Sessions
3-4 p.m.	Poster Sessions
4:30-6 p.m.	Champion Conversation: America Dissected Podcast Scientific Sessions

# Statement of Expenses Incurred for the City of Milwaukee

\*\*\*Please read the instructions carefully before completing.

Voucher Number	Group Number
----------------	--------------

Last Name Kryshak	First Name Violet	MI N	Title Emergency Response Planning Coordinator	Employee ID 038338	Employee's Address 1812 E Lafayette Pl, Unit 204, Milwaukee WI 53202
Organization		Authority		Authorized Amount	Travel Advance Amount
Destination Minneapolis, Minnesota		THE EXPENSES INCLUDED ON THIS FORM ARE FOR THE FOLLOWING ADDITIONAL PERSONS (LIST NAME AND TITLE):		PURPOSE OF THE TRIP Learn about the most pressing public health topics, hear from the biggest names in public health, engage with colleagues old and new and connect with vendors and partners in the expo hall.	
Dates of Travel 10/25/2024-10/31/24	# of Approved Days 7				

Account (6 digit code) 636501	Fund (4 digit code)	Dept ID (4 digit code)	Program (4 digit code)	Class (4 digit code)	Budget Ref (4 digit code)	Project Grant (12 digit code)
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**\*\*EXPENSES ELIGIBLE FOR REIMBURSEMENT\*\***

Under § 350-181 of the code of ordinances providing rules for the reimbursement City shall pay for the actual expense for registration, transportation (up to 50 days), and other necessary expenses accompanied by the appropriate form of Department Head or supervisor. See §350-181 for the complete travel regula

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ences for attendance at seminars and conventions and other city travel, generally the hotel (up to single rate for the number of days in attendance but not to exceed five days). Exceptions may be made on a case by case basis at the discretion of the Department Head or supervisor.

REIMBURSABLE EXPENSES

Meal Allowance

1. Actual Meals (NOT PROVIDED BY EVENT)	\$577.05
2. Max Meal Allowance (FOR MEALS NOT PROVIDED)	
Federal Amount	Number of Meals
Breakfast \$23	6
Lunch \$26	7
Dinner \$38	7
	\$ 586.00
3. Meal Reimbursement (Lesser of 1 and 2)	\$577.05

Transportation Expenses

Current Mileage Rate:	\$0.67
4. Personal Vehicle	
Miles Driven:	5.6
a. Mileage Total	\$ 3.75
b. Flat Rate Amount	
5. Air	
6. Rail	\$ 97.00
7. Baggage	
8. Other (List Below)	
a. Lyft to Hotel	\$ 12.99
b. Lyft to Train Station	\$ 14.78
c.	
9. Total Transportation	\$ 128.52

Lodging

10. Total	\$ 1,021.44
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Registration Fees

11. Total	\$ 350.00
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Other Reimbursable Expenses

12. Total Other (Itemize on Additional Info sheet)	\$ 70.77
<b>TOTAL REIMBURSABLE EXPENSES</b>	<b>\$2,147.78</b>

DEDUCTIONS

<u>Prepaid Expenses</u>	<u>Voucher Number</u>	
13. Registration		\$ -
14. Transportation		\$ -
15. Lodging		\$ -
16. Other (Specify)		\$ -
16. Other (Specify)		\$ -
Total		\$ -
<u>Advances</u>	<u>Voucher Number</u>	
17. Travel Advance		\$ -
<u>Tuition Reimbursement</u>		
18. Tuition Reimbursement		\$ -
<b>TOTAL DEDUCTIONS</b>		<b>\$ -</b>

**Total Amount Due From (To) City \$ 2,147.78**

EMPLOYEE CERTIFICATION

I hereby certify that the expenses listed on this statement represent actual expenses incurred by me in conjunction with my duties and responsibilities. I further warrant these expenses have not been reimbursed to me by any other person or organization and request reimbursement in accordance with ordinance §350-181.

Signed by:  
Violet Kryshak  
Date: 12/19/2024

Signed by:  
Christine Westrich  
Date: 12/20/2024

Employee Signature Date Supervisor Signature Date



**Meals Per Diem:**

**Meals and incidental expenses (M&IE) rates and breakdown**

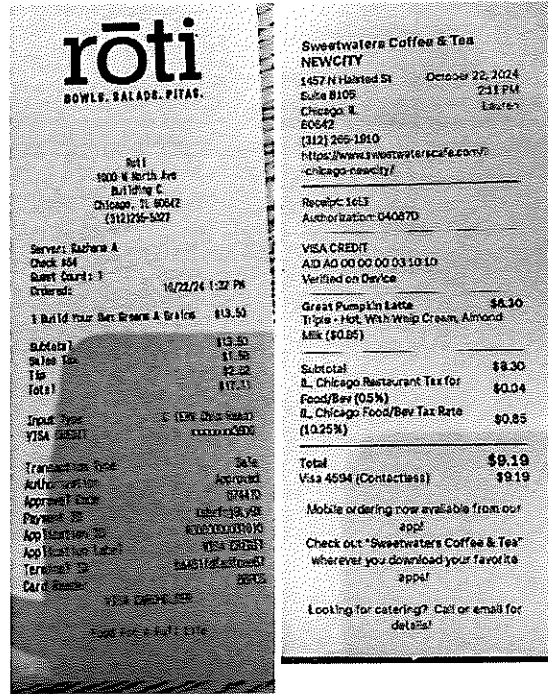
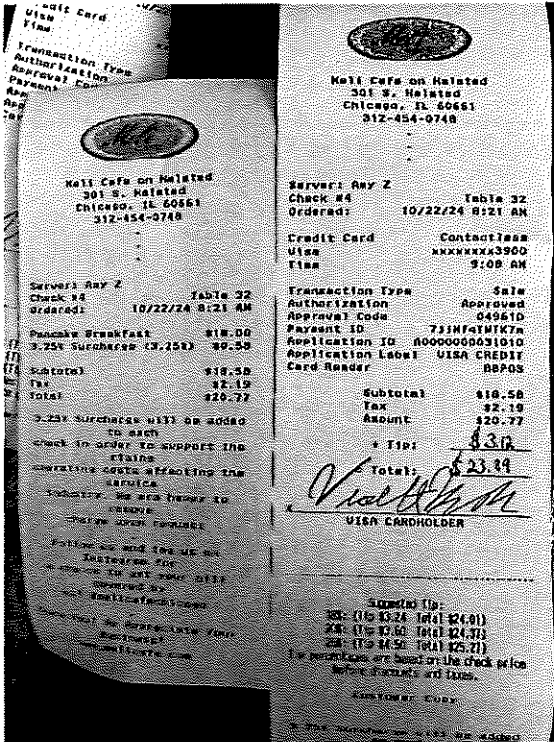
The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner	Incidental expenses
Chicago	Cook / Lake	\$92	\$23	\$26	\$38	\$5

**Meal Receipts:**

Breakfast: MAX \$23 (15% tip)

Lunch: MAX \$26 (\$17.11 w/ 15% tip + \$9.19 w/o tip = \$26.30)



Dinner: MAX \$38 (34.98 + tax + 15% tip > \$38)



# Event Invite and Agenda: \$0

📍 Chicago LZ Visit

🕒 Tue 10/22/2024 8:00 AM - 4:00 PM

📍 Chicago LZ

☰ CHI LZ Team!

I recommend Amtrak to Union Station (arrange your own travel), just a few blocks away and 15-ish minute walk to the LZ. See visual below.

- Text me if you are running late! (Christine 414-345-7191 primary cell, 414-336-8039 secondary cell)

**Locations/Times:**

1. Landing Zone, 800 S Desplains St, Chicago, Illinois
  - 10:00am Group A (City of MKE),
  - 10:30 am Group B (State)
2. DHS Building, 401 S Clinton, 7<sup>th</sup> Floor, Chicago, IL 60607
  - 11:15am-12pm Groups A & B, Q&A Session

## Train to and from Chicago based on Events:

## Receipt for Train to and from Chicago (I decided to stay later for personal time): \$53

### Trip Summary

🛒 \$68.00 ✕

#### Round Trip

MKE → CHI  
6:15a Tue, Oct 22 7:57a Tue, Oct 22

CHI → MKE  
3:15p Tue, Oct 22 4:44p Tue, Oct 22

### Price Summary

⊙ Non Changeable Fare Selected ⊙

Fare per Traveler	\$68.00
Total Fare	\$68.00
Balance Due	\$68.00

Reservation Number - 987209Milwaukee-Downtown, WI - Intermodal Station to Chicago, IL - Union Station (Round-Trip)OCTOBER 8, 2024

**Billing Information**

Mastercard ending in 6232 (Purchase)Authorization Code 61751Z

Total \$53.00

Purchase Summary - Ticket Number 2820624096961

TRAIN 330: Milwaukee-Downtown, WI - Intermodal Station to Chicago, IL - Union Station (Round-Trip)Depart 6:15 AM, Tuesday, October 22, 2024

1 COACH SEAT

\$34.00

Ticket Terms & ConditionsVLD DATE TRAIN TICKETED; NO SHOW: FORFEIT VALUECOACH: NO CHANGES, 25% CANCEL FEEADULT FULL FARE ID REQUIRED

Subtotal

\$34.00

TRAIN 341: Chicago, IL - Union Station to Milwaukee-Downtown, WI - Intermodal Station (Round-Trip)Depart 8:05 PM, Tuesday, October 22, 2024

1 COACH SEAT

\$19.00

Ticket Terms & ConditionsVLD DATE TRAIN TICKETED; NO SHOW: FORFEIT VALUECOACH: NO CHANGES, 25% CANCEL FEEADULT FULL FARE ID REQUIRED

Subtotal

\$19.00

Total Charged by Amtrak

\$53.00

Passengers

Violet Kryshak

## Uber: \$13.56

Total \$13.56

Trip Fee \$12.28

Station Booking Fee \$1.28

**Payments**



Violet Amex \*\*\*\*1000  
102424 247 AM



\$13.56



Visit our help page for more information, including invoices (where available)

Your ride with Amtrak

Cancel 2:51 min | 18

10:06 PM | 1271 W Bank Paul Ave, Milwaukee, WI 53203, US

10:14 PM | 1812 E Lafayette Pl, Milwaukee, WI 53202-1161, US

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.

# Additional Information for CBP-211

Please provide additional information for:

- Expenses for items and/or services that are otherwise unallowable
- Expenses that are significantly higher than anticipated on the Request for Travel form
- Car rental
- Alternative transportation
- "Other" expenses

Please note that this form is only intended to provide additional information and is not a replacement for an itemized receipt. Receipts are still required for expenses listed here.

Expense(s): \_\_\_\_\_

\*Reason:

Amount Incurred: \_\_\_\_\_

Amount to be Reimbursed: \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Supervisor Signature

\*Information provided in the "Reason" section must establish the necessity of the expense or explain why the expense incurred was significantly higher than the anticipated expense.

\*\*Reimbursement Amount should match the amount entered on the Statement of Expenses for that expense. This amount may be different than the Amount Incurred.




### Meals & Incidental Expenses (M&IE) rates and breakdown


The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.


Filter Results:							First & Last Day of Travel
Primary Destination	County	M&IE Total	Breakfast	Lunch	Dinner	Incidental Expenses	
Chicago	Cook/Lake	\$179	\$18	\$20	\$36	\$5	\$59.25

## Event Invite and Agenda:

### Chicago LZ Visit

 Tue 10/22/2024 8:00 AM - 4:00 PM

 Chicago LZ

 CHI LZ Team

I recommend Amtrak to Union Station (arrange your own travel), just a few blocks away and 15-ish minute walk to the LZ. See visual below.



- Text me if you are running late! (Christine 414-345-7191 primary cell, 414-336-8039 secondary cell)

#### Locations/Times:

1. Landing Zone, 800 S Desplains St, Chicago, Illinois
  - 10:00am Group A (City of MKE),
  - 10:30 am Group B (State)
2. DHS Building, 401 S Clinton, 7<sup>th</sup> Floor, Chicago, IL 60607
  - 11:15am-12pm Groups A & B, Q&A Session

## Train to and from Chicago

### Trip Summary

 \$68<sup>00</sup> 

### Round Trip

MKE	→	CHI	▼
<small>6:15a Tue, Oct 22</small>		<small>7:57a Tue, Oct 22</small>	
CHI	→	MKE	▼
<small>3:15p Tue, Oct 22</small>		<small>4:44p Tue, Oct 22</small>	

### Price Summary

© Non Changeable Fare Selected ⓘ

Fare per Traveler	\$68 <sup>00</sup>
Total Fare	\$68 <sup>00</sup>
Balance Due	\$68 <sup>00</sup>

## Meals Per Diem:

# Request for Travel on Behalf of the City of Milwaukee

Kryshak, Violet, N	Emergency Response Planning Coordinator
<b>Last Name, First Name, MI</b>	<b>Title</b>
Milwaukee Health Department - Emergency Preparedness Environmental Health	
<b>Department</b>	
Chicago, IL	Oct 22nd
<b>Destination</b>	<b>Conference/Event Dates</b>

**Purpose of the Trip and/or Anticipated Benefit**  
 Attending the Chicago Health Department's New Arrivals Processing Location will enhance my professional skills, provide networking opportunities, and improve service delivery in Milwaukee. This trip will directly benefit our department by incorporating best practices and new strategies for managing new arrivals.

<p><b>Anticipated Funding</b></p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;"><b>Source:</b></td> <td style="width:20%;"><b>Amount</b></td> <td style="width:20%;"><b>Expense (if Specified)</b></td> </tr> <tr> <td>Department (O&amp;M)</td> <td></td> <td></td> </tr> <tr> <td>Grant (Specify Below)</td> <td style="text-align: right;"><b>\$142</b></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">GR3801824100</td> <td></td> <td></td> </tr> <tr> <td>Other (Specify Below)</td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">[Sponsor-paid travel]</td> <td></td> <td></td> </tr> <tr> <td>Tuition Reimbursement</td> <td></td> <td></td> </tr> </table> <p><b>Travel Advance</b>                  Requested?    No <input checked="" type="checkbox"/>    Yes <input type="checkbox"/>    Amount <input type="text" value="-"/></p> <p><b>Employee Certification Statement</b>                  I hereby certify that:                  (1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.                  (2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.                  (3) I have been made aware of and agree to abide by the rules related to travel as established in the City ordinance and by my department.                  (4) I will be prepared to explain any unanticipated expenses or significant discrepancies in anticipated and actual expenses incurred.                  (5) I agree to complete and submit a Statement of Expenses Incurred for the City of Milwaukee (CBP-211) no later than 15 days following my return from the requested travel. I understand that failure to do so may result in the forfeiture of any reimbursements due to me.</p>	<b>Source:</b>	<b>Amount</b>	<b>Expense (if Specified)</b>	Department (O&M)			Grant (Specify Below)	<b>\$142</b>		GR3801824100			Other (Specify Below)			[Sponsor-paid travel]			Tuition Reimbursement			<p><b>Anticipated Expenses</b></p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;">Registration Fees</td> <td style="width:20%; text-align: right;">0.00</td> </tr> <tr> <td colspan="2"><b>Lodging</b></td> </tr> <tr> <td>Nightly Rate</td> <td style="text-align: right;">\$ -</td> </tr> <tr> <td>Number of Nights</td> <td style="text-align: right;">0</td> </tr> <tr> <td><b>Total Lodging</b></td> <td style="text-align: right;">\$ -</td> </tr> <tr> <td colspan="2"><b>Transportation</b></td> </tr> <tr> <td>*Personal Vehicle</td> <td></td> </tr> <tr> <td>Air</td> <td></td> </tr> <tr> <td>Rail</td> <td style="text-align: right;">68.00</td> </tr> <tr> <td>Baggage</td> <td></td> </tr> <tr> <td>Other (Specify Below)</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">a.</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">b.</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">c.</td> <td></td> </tr> <tr> <td><b>Total Transportation</b></td> <td style="text-align: right;">\$ 68.00</td> </tr> <tr> <td colspan="2"><b>Max Meal Allowance</b></td> </tr> <tr> <td></td> <td style="text-align: right;">Federal Amount for Destination    **Number of Meals</td> </tr> <tr> <td>Breakfast 18.00</td> <td style="text-align: right;">X    1 = \$ 18.00</td> </tr> <tr> <td>Lunch 20.00</td> <td style="text-align: right;">X    1 = \$ 20.00</td> </tr> <tr> <td>Dinner 36.00</td> <td style="text-align: right;">X    1 = \$ 36.00</td> </tr> <tr> <td><b>Total Max Meal Allowance</b></td> <td style="text-align: right;"><b>\$ 74.00</b></td> </tr> <tr> <td colspan="2"><b>Other Anticipated Expenses (Itemize Below)</b></td> </tr> <tr> <td>a.</td> <td></td> </tr> <tr> <td>b.</td> <td></td> </tr> <tr> <td>c.</td> <td></td> </tr> <tr> <td><b>Total Other Expenses</b></td> <td style="text-align: right;">\$ -</td> </tr> <tr> <td><b>Total Anticipated Expenses</b></td> <td style="text-align: right;"><b>\$ 142.00</b></td> </tr> </table>	Registration Fees	0.00	<b>Lodging</b>		Nightly Rate	\$ -	Number of Nights	0	<b>Total Lodging</b>	\$ -	<b>Transportation</b>		*Personal Vehicle		Air		Rail	68.00	Baggage		Other (Specify Below)		a.		b.		c.		<b>Total Transportation</b>	\$ 68.00	<b>Max Meal Allowance</b>			Federal Amount for Destination    **Number of Meals	Breakfast 18.00	X    1 = \$ 18.00	Lunch 20.00	X    1 = \$ 20.00	Dinner 36.00	X    1 = \$ 36.00	<b>Total Max Meal Allowance</b>	<b>\$ 74.00</b>	<b>Other Anticipated Expenses (Itemize Below)</b>		a.		b.		c.		<b>Total Other Expenses</b>	\$ -	<b>Total Anticipated Expenses</b>	<b>\$ 142.00</b>
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Signed by: Violet Kryshak      10/3/2024  
 7487E40A...      Employee Signature      Date

**Department Approval** (To be completed by the authorizing entity or designee)

Approval Granted    Yes     No

If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Signed by: Tyler Weber      Amount Approved: 142      # of Days Approved: 1  
 436F49B...      Approver Signature      Date

DocuSigned by: Alexander...      10/4/2024  
 BE7028P17C144A3...      Approver Signature      Date

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate **OR** the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.

Flights:

Flight
Modify

	<p><b>Tue 10/14</b></p>	<p># 2314 / 2976 <b>MKE</b> → <b>SLC</b></p> <p>6:55 PM      10:55 PM</p>	<p>5 hr 0 min</p>	<p>1 stop </p>	<p><u>Wanna Get Away Plus</u></p>	<p><b>Base fare</b> 1 Passenger(s)      <b>\$378.94</b></p> <hr/> <p><b>Taxes and fees</b>      <b>\$78.42</b></p> <hr/> <p><b>Flight total</b>      <b>\$457.36</b></p>
	<p><b>Fri 10/17</b></p>	<p># 1810 / 972 <b>SLC</b> → <b>MKE</b></p> <p>3:50 PM      10:10 PM</p>	<p>5 hr 20 min</p>	<p>1 stop </p>	<p><u>Wanna Get Away Plus</u></p>	<p>or from \$45/mo* with  <a href="#">Learn more</a></p>

Meals: FY 2026 not yet released

**Meals and incidental expenses (M&IE) rates and breakdown**

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

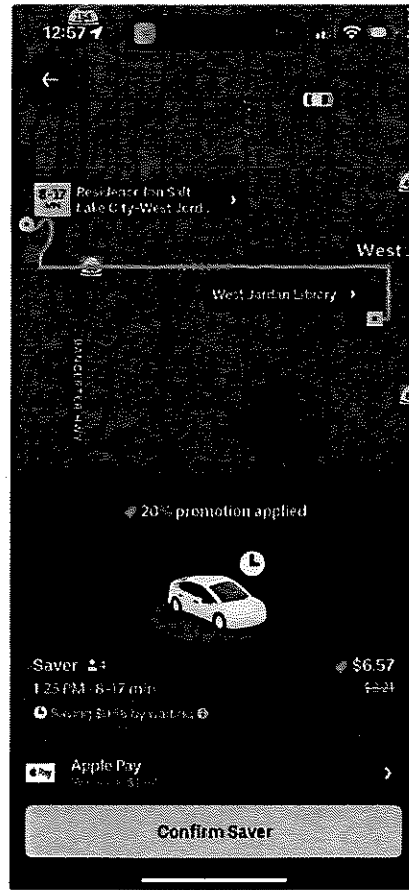
Primary destination	County	M&IE total	Breakfast	Lunch	Dinner	Incidental expenses	First and last day of travel
Standard Rate	Applies for all locations without specified rates	\$68	\$16	\$19	\$28	\$5	\$51.00
Moab	Grand	\$86	\$22	\$23	\$36	\$5	\$64.50
Park City	Summit	\$92	\$23	\$26	\$38	\$5	\$69.00
Provo	Utah	\$74	\$18	\$20	\$31	\$5	\$55.50
Salt Lake City	Salt Lake / Tooele	\$80	\$20	\$22	\$33	\$5	\$60.00

The registration fee includes admission to the full conference (2.5 days) and all sessions. Complimentary breakfast, lunch, and snacks will also be provided.

Uber in SLC:

X2 to/from airport

To/from conference center to hotel (no hotels within walking distance) x 6



# Summary of Charges



## 1 room for 3 night(s)

Tuesday, Oct 14, 2025	142.00 USD
Wednesday, Oct 15, 2025	142.00 USD
Thursday, Oct 16, 2025	142.00 USD

---

<b>Total Cash Rate</b>	<b>426.00 USD</b>
Estimated Government Taxes and Fees	56.75 USD

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**Total for Stay** **482.75 USD**

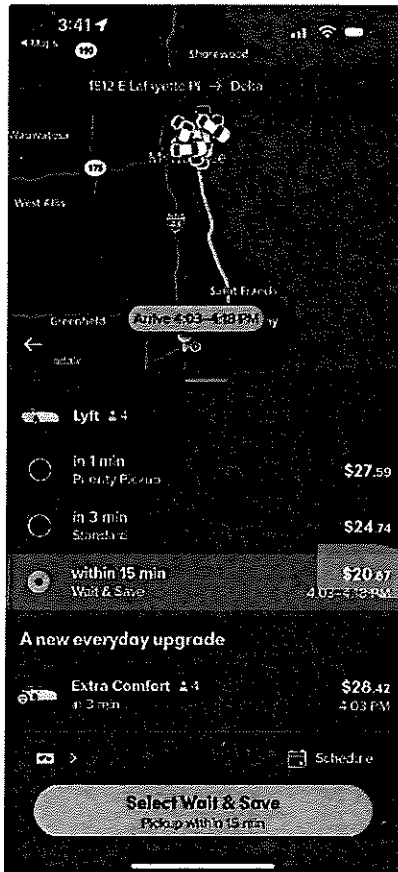
### Additional Charges

Complimentary on-site parking

Changes to taxes or fees implemented after booking will affect the total room price

Uber in Milwaukee:

X2







## Public Health & Disasters 2025

Event Time: 10/15/2025 8:00:00 AM Location: Viridian Event Center, West Jordan, Utah

### Summary

Public Health and Disasters is an annual, multidisciplinary national conference that brings together professionals from public health, health care, emergency management and other disciplines involved in preparing for, responding to, and recovering from public health emergencies. The conference includes sessions that will be of interest for PHEP Coordinators; emergency planners, epidemiologists, environmental health specialists, and healthcare emergency managers. This year's conference is co-sponsored by the University of Utah Division of Public Health, in collaboration with the Salt Lake County Health Department and the Utah Department of Health.

Start Time: 10/15/2025 8:00:00 AM

End Time: 10/17/2025 2:00:00 PM

### Location Information

Viridian Event Center, West Jordan, Utah <https://www.slcolibrary.org/locations/pdfs/brochure-viridian-event-center.pdf>

### Upcoming Events

There are no upcoming events

### Most Popular Trainings

1 ([www/lms/training-info.aspx?trainingID=212](http://www/lms/training-info.aspx?trainingID=212)) Public Health and Disasters Conference 2025 ([www/lms/training-info.aspx?trainingID=212](http://www/lms/training-info.aspx?trainingID=212))

# Request for Travel on Behalf of the City of Milwaukee

E

Kryshak, Violet, N Last Name, First Name, MI	Emergency Response Planning Coordinator Title
HEALTH Department	
Salt Lake City/West Jordan, UT Destination	10/14/25-10/17/2025 Conference/Event Dates

**Purpose of the Trip and/or Anticipated Benefit**  
 Attending this conference would be valuable because it offers key insights into disaster preparedness, opportunities to collaborate with experts across disciplines, and continuing education credits to support my professional growth. It will help me strengthen emergency response strategies and build connections with key stakeholders in the field.

<p><b>Anticipated Funding</b></p> <table style="width: 100%;"> <tr> <td style="width: 30%;">Source:</td> <td style="width: 20%;"><b>Amount</b></td> <td style="width: 20%;"><b>Expenses (If Specified)</b></td> </tr> <tr> <td>Department (O&amp;M or CS#)</td> <td></td> <td></td> </tr> <tr> <td>Grant (Specify Project Below - GR#, RG#, or CD#)</td> <td style="text-align: right;"><b>\$1,258.92</b></td> <td style="text-align: center;"><b>All</b></td> </tr> <tr> <td>Other (Specify Below)</td> <td></td> <td></td> </tr> <tr> <td>Tuition Reimbursement</td> <td></td> <td></td> </tr> </table> <p><b>Travel Advance</b></p> <p>Requested?      No <input checked="" type="checkbox"/>      Yes <input type="checkbox"/>      Amount <input type="text" value="-"/></p> <p><b>Employee Certification Statement</b></p> <p>I hereby certify that:</p> <p>(1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.</p> <p>(2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.</p> <p>(3) I have been made aware of and agree to abide by the rules related to travel as established in the City ordinance and by my department.</p> <p>(4) I will be prepared to explain any unanticipated expenses or significant discrepancies in anticipated and actual expenses incurred.</p> <p>(5) I agree to complete and submit a Statement of Expenses Incurred for the City of Milwaukee (CBP-211) no later than 15 days following my return from the requested travel. I understand that failure to do so may result in the forfeiture of any reimbursements due to me.</p> <p>Signed by: <u>Violet Kryshak</u>      Date: <u>7/11/2025</u></p>	Source:	<b>Amount</b>	<b>Expenses (If Specified)</b>	Department (O&M or CS#)			Grant (Specify Project Below - GR#, RG#, or CD#)	<b>\$1,258.92</b>	<b>All</b>	Other (Specify Below)			Tuition Reimbursement			<p><b>Anticipated Expenses</b></p> <table style="width: 100%;"> <tr> <td style="width: 80%;">Registration Fees</td> <td style="width: 20%; text-align: right;">100.00</td> </tr> <tr> <td colspan="2"><b>Lodging</b></td> </tr> <tr> <td>Nightly Rate</td> <td style="text-align: right;">142.00</td> </tr> <tr> <td>Number of Nights</td> <td style="text-align: right;">3.00</td> </tr> <tr> <td><b>Total Lodging</b></td> <td style="text-align: right;"><b>\$ 426.00</b></td> </tr> <tr> <td colspan="2"><b>Transportation</b></td> </tr> <tr> <td>*Personal Vehicle</td> <td style="text-align: right;">-</td> </tr> <tr> <td>Air</td> <td style="text-align: right;">457.36</td> </tr> <tr> <td>Rail</td> <td></td> </tr> <tr> <td>Baggage</td> <td></td> </tr> <tr> <td>Other (Specify Below)</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">a. Ride Shares</td> <td style="text-align: right;">121.56</td> </tr> <tr> <td style="padding-left: 20px;">b.</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">c.</td> <td></td> </tr> <tr> <td><b>Total Transportation</b></td> <td style="text-align: right;"><b>\$ 578.92</b></td> </tr> <tr> <td colspan="2"><b>Max Meal Allowance</b></td> </tr> <tr> <td></td> <td style="text-align: right;">Federal Amount for Destination      **Number of Meals</td> </tr> <tr> <td>Breakfast</td> <td style="text-align: right;">\$ 20.00 X 0 = \$ -</td> </tr> <tr> <td>Lunch</td> <td style="text-align: right;">\$ 22.00 X 1 = \$ 22.00</td> </tr> <tr> <td>Dinner</td> <td style="text-align: right;">\$ 33.00 X 4 = \$ 132.00</td> </tr> <tr> <td><b>Total Meal Allowance</b></td> <td style="text-align: right;"><b>\$ 154.00</b></td> </tr> <tr> <td colspan="2"><b>PER DIEMS TO BE UPDATED w Ffy26 for EXPENSE REPORT</b></td> </tr> <tr> <td colspan="2"><b>Other Anticipated Expenses (Itemize Below)</b></td> </tr> <tr> <td style="padding-left: 20px;">a.</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">b.</td> <td></td> </tr> <tr> <td style="padding-left: 20px;">c.</td> <td></td> </tr> <tr> <td><b>Total Other Expenses</b></td> <td style="text-align: right;"><b>\$ -</b></td> </tr> <tr> <td><b>Total Anticipated Expenses</b></td> <td style="text-align: right;"><b>\$ 1,258.92</b></td> </tr> </table>	Registration Fees	100.00	<b>Lodging</b>		Nightly Rate	142.00	Number of Nights	3.00	<b>Total Lodging</b>	<b>\$ 426.00</b>	<b>Transportation</b>		*Personal Vehicle	-	Air	457.36	Rail		Baggage		Other (Specify Below)		a. Ride Shares	121.56	b.		c.		<b>Total Transportation</b>	<b>\$ 578.92</b>	<b>Max Meal Allowance</b>			Federal Amount for Destination      **Number of Meals	Breakfast	\$ 20.00 X 0 = \$ -	Lunch	\$ 22.00 X 1 = \$ 22.00	Dinner	\$ 33.00 X 4 = \$ 132.00	<b>Total Meal Allowance</b>	<b>\$ 154.00</b>	<b>PER DIEMS TO BE UPDATED w Ffy26 for EXPENSE REPORT</b>		<b>Other Anticipated Expenses (Itemize Below)</b>		a.		b.		c.		<b>Total Other Expenses</b>	<b>\$ -</b>	<b>Total Anticipated Expenses</b>	<b>\$ 1,258.92</b>
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**Department Approval** (To be completed by the authorizing entity or designee)

Approval Granted      Yes       No

If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Signed by: Tyler Weber      Amount Approved: \$1,258.92      # of Days Approved: 4

Date: 7/14/2025

Signed by: Alex Kryshak      Date: 7/14/2025

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate OR the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.



Flights:

View Details by Session

Start Over Trip Summary Review & Pay Confirmation

## Trip Summary

<b>Outbound</b>	DL2048, DL2675			1 stop, 5h 16m	
	MKE · SAT	Sun, Apr 27	12:00pm - 5:16pm	Main	
<b>Return</b>	DL1465, DL1268			1 stop, 5h 32m	
	SAT · MKE	Fri, May 02	6:23pm - 11:55pm	Main	

Changeable / Nonrefundable

## Trip Total

Currency Calculator

1 Passenger	
Flights	\$364.06
Upgrades	\$74.42
Taxes, Fees & Charges	\$82.89
<b>Amount Due</b>	<b>\$521.37 USD</b>

4 left at this price

Meals:

### Meals and incidental expenses (M&IE) rates and breakdown

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner
San Antonio	Bexar	\$74	\$18	\$20	\$31

### Full In-Person Registration Fee Includes:

Admission to all conference sessions

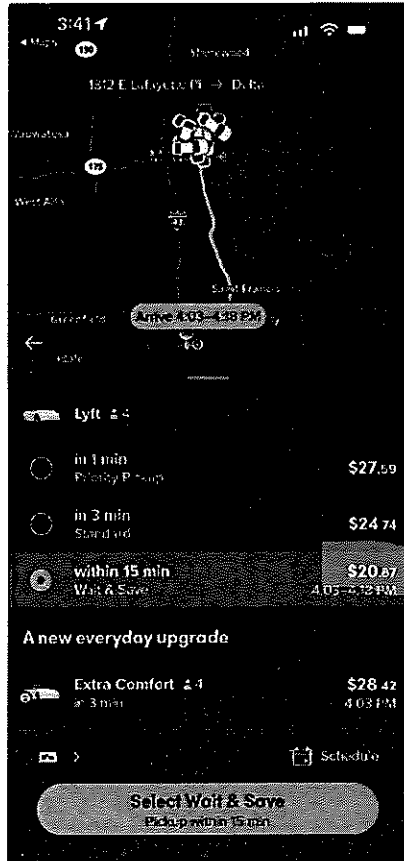
Admission to the Exhibit Hall

Lunch will be provided for at least two days during the conference

Access to recorded content

Uber in Milwaukee:

X2



Uber in San Antonio:

X2



Registration:

In-Person Registrant Type	Early-Bird Rate (Ends December 31, 2024)	Advance Rate (Ends February 28, 2025)	Regular Rate (Ends April 28, 2025)	On-Site Rate
Individual, Non-Profit/Government	\$850	\$950	\$1,050	\$1,150
Group, Non-Profit/Government **	\$800	\$900	\$1,000	\$1,100
Individual, For-Profit	\$1,075	\$1,175	\$1,275	\$1,375
Speaker or Poster Presenter **	\$750	\$850	\$950	\$1,050
Student **	\$400	\$450	\$500	\$550
Single Day	\$575	\$675	\$775	\$875

Hotel:

**Daily lodging rates (excluding taxes) | October 2024 - September 2025**

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](#).

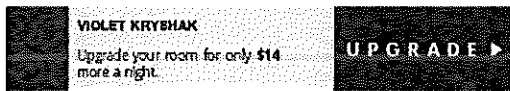
Filter results...

Primary destination	County	2024 Oct	Nov	Dec	2025 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
San Antonio	Bexar	\$137	\$137	\$137	\$137	\$161	\$161	\$137	\$137	\$137	\$137	\$137	\$137

Showing 1 to 1 of 1 entries


Hotel reservation is for \$137 + 15 dollars for breakfast (which will be deducted from the per diem cost)

**Guest Name:** Violet Kryshak  
**Guests:** 1 Adult  
**Rooms:** 1  
**Room Plan:** 1 KING BED NONSMOKING



Your Rate Information	GVT with Breakfast
<b>Rate per night</b> 27-Apr-2025 - 02-May-2025	152.00 USD
<b>Total for Stay per Room Rate</b>	<b>760.00 USD</b>
<b>Taxes</b>	129.91 USD
<b>Mandatory Charge</b>	15.58 USD
<b>Total price for Stay</b>	<b>905.49 USD</b>

Schedule:

		<b>Pathways to Recovery in the Aftermath of Disasters</b> April 29-May 2, 2025   San Antonio, TX				
		4/28	4/29	4/30	5/1	5/2
Main Meeting		Monday	Tuesday	Wednesday	Thursday	Friday
6:30 AM	Pre-Conference Workshops					
7:00 AM						
7:30 AM						
8:00 AM			Sessions/ Demos/Case Study	Sessions/ Demos/Case Study	Sessions/ Demos/Case Study/ Workshops	Sessions/ Demos/Case Study
8:30 AM						
9:00 AM						
9:30 AM						
10:00 AM			Plenary 1	Plenary 2	Sessions/ Demos/Case Study/ Workshops	Plenary 3
10:30 AM						
11:00 AM						
11:30 AM						
12:00 PM			Sponsored Lunch in Exh Hall	Lunch in Exh Hall	Lunch in Exh Hall	
12:30 PM						
1:00 PM						
1:30 PM			Sessions/ Demos/Case Study/ Workshops	Town Hall 1	Town Hall 2	
2:00 PM						
2:30 PM						
3:00 PM						
3:30 PM			Quick Hits/ Workshops/ Case Study	Quick Hits/ Case Study	Quick Hits/ Case Study	
4:00 PM						
4:30 PM						
5:00 PM						
5:30 PM			Exhibit Hall Reception			
6:00 PM						
6:30 PM						
7:00 PM						
7:30 PM						
8:00 PM						
8:30 PM						

I am participating in a Pre-Conference Workshop on 4/28:

From: Lean Abdelaziz <LAbdelaziz@naccho.org>  
 Sent: Friday, January 17, 2025 1:02 PM  
 To: Kryshak, Violet <vkrysh@milwaukee.gov>  
 Subject: 2025 Pre-Summit-Radiation Workshop Notification  
 Good afternoon Violet,

I hope all is well. Your name has been added to the list, I will send you more information in the coming months. We look forward to having you.  
 All the best and Happy New Year!

**Lean Abdelaziz**  
 Sr. Program Analyst - Preparedness  
 National Association of County & City Health Officials  
 1201 I Street NW Fourth Floor | Washington, DC 20005  
 Main: 202-783-5550 | Direct: 202.640.4925  
 E-mail: [LAbdelaziz@naccho.org](mailto:LAbdelaziz@naccho.org)  
[www.naccho.org](http://www.naccho.org)

**Request for Travel on Behalf of the City of Milwaukee**

D

Kryshak, Violet, N

Last Name, First Name, MI

Emergency Response Planning Coordinator

Title

HEALTH

Department

San Antonio, TX

Destination

04/28/25 - 05/02/25

Conference/Event Dates

**Purpose of the Trip and/or Anticipated Benefit**

Attending the Preparedness Summit is an exceptional opportunity for me to advance my expertise in emergency preparedness. I will gain valuable insights, practical skills, and opportunities to network with industry leaders. This experience will enhance my department's capabilities and help ensure Milwaukee's safety through the latest strategies.

**Anticipated Funding**

Source:	Amount	Expense (If Specified)
Department (O&M)		
Grant (Specify Below)	\$2,179	All
Other (Specify Below)		
Tuition Reimbursement		

**Anticipated Expenses**

Registration Fees	400.00
<b>Lodging</b>	
Nightly Rate	\$ 166.00
Number of Nights	5
<b>Total Lodging</b>	\$ 830.00

**Travel Advance**

Requested? No  Yes  Amount -

**Transportation**

*Personal Vehicle	
Air	521.37
Rail	
Baggage	
Other (Specify Below)	
a. Rideshare - MKE	41.74
b. Rideshare - Dest.	29.98
c.	
<b>Total Transportation</b>	\$ 593.09

**Employee Certification Statement**

I hereby certify that:

- (1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.
- (2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.
- (3) I have been made aware of and agree to abide by the rules related to travel as established in the City ordinance and by my department.
- (4) I will be prepared to explain any unanticipated expenses or significant discrepancies in anticipated and actual expenses incurred.
- (5) I agree to complete and submit a Statement of Expenses Incurred for the City of Milwaukee (CBP-211) no later than 15 days following my return from the requested travel. I understand that failure to do so may result in the forfeiture of any reimbursements due to me.

**Max Meal Allowance**

	Federal Amount for Destination	**Number of Meals	
Breakfast	18.00	X 5	= \$ 90.00
Lunch	20.00	X 4	= \$ 80.00
Dinner	31.00	X 6	= \$ 186.00
<b>Total Max Meal Allowance</b>			\$ 356.00

Signed by:

*Violet Kryshak*

2/13/2025

4BE2A8792824100

Date

**Other Anticipated Expenses (Itemize Below)**

a.	
b.	
c.	
<b>Total Other Expenses</b>	\$ -
<b>Total Anticipated Expenses</b>	\$ 2,179.09

**Department Approval** (To be completed by the authorizing entity or designee)

Approval Granted Yes  No   
 If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Signed/Approved: 2179.09

# of Days Approved: 5

*Tyler Weber*

2/18/2025

Date

*Alex Spinks*

2/18/2025

Date

BE70E9F17C144A3...  
Approver Signature

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate OR the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.

**Meals:**

**Meals & Incidental Expenses (M&IE) rates and breakdown**

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

Primary Destination	County	M&IE Total	Breakfast	Lunch	Dinner	Incidental Expenses	First & Last Day of Travel
Madison	Dane	\$80	\$20	\$22	\$33	\$5	\$60.00

**Lodging:**

**Daily lodging rates (excluding taxes) | October 2024 - September 2025**

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	2024 Oct	2024 Nov	2024 Dec	2025 Jan	2025 Feb	2025 Mar	2025 Apr	2025 May	2025 Jun	2025 Jul	2025 Aug	2025 Sep
Madison	Dane	\$138	\$110	\$110	\$110	\$110	\$110	\$110	\$138	\$138	\$138	\$138	\$138

**Payment and Guest Details**

**Total for stay** **\$226.38**

[Hide price details](#)

Price in USD

1 King Bed	
State Government Official Trvl	
18 Nov 2024	\$98.00
19 Nov 2024	\$98.00
<b>Total room charge</b>	<b>\$196.00</b>
10.00 % per room, per night	
5.00 % per room, per night	
0.50 % per room, per night	
<b>Total taxes</b>	<b>\$30.38</b>

**Total for stay: \$226.38**



**DoubleTree by Hilton Madison East**  
 4402 E. Washington Ave  
 Madison, Wisconsin 53704 USA

- 1 King Bed
- Change Room
- State Government Official Trvl
- Change Rate
- **Payment and Guest Details**

Mileage:



## IRS issues standard mileage rates for 2024; mileage rate increases to 67 cents a mile, up 1.5 cents from 2023

IR-2023-239, Dec. 14, 2023

WASHINGTON — The Internal Revenue Service today issued the 2024 optional standard mileage rates used to calculate the deductible costs of operating an automobile for business, charitable, medical or moving purposes.

Beginning on Jan. 1, 2024, the standard mileage rates for the use of a car (also vans, pickups or panel trucks) will be:

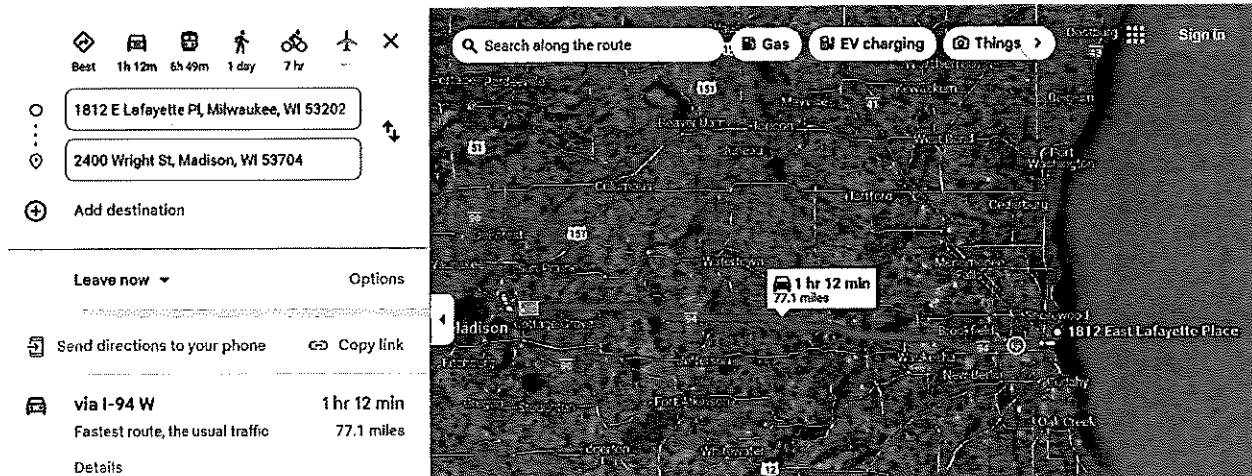
- 67 cents per mile driven for business use, up 1.5 cents from 2023.
- 21 cents per mile driven for medical or moving purposes for qualified active-duty members of the Armed Forces, a decrease of 1 cent from 2023.
- 14 cents per mile driven in service of charitable organizations; the rate is set by statute and remains unchanged from 2023.

These rates apply to electric and hybrid-electric automobiles as well as gasoline and diesel-powered vehicles.

The standard mileage rate for business use is based on an annual study of the fixed and variable costs of operating an automobile. The rate for medical and moving purposes is based on the variable costs.

It is important to note that under the Tax Cuts and Jobs Act, taxpayers cannot claim a miscellaneous itemized deduction for unreimbursed employee travel expenses. Taxpayers also cannot claim a deduction for moving expenses, unless they are members of the Armed Forces on active duty moving under orders to a permanent change of station. For more details see Moving expenses for members of the armed forces.

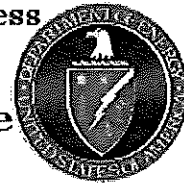
Taxpayers always have the option of calculating the actual costs of using their vehicle rather than using the standard mileage rates.



Training:



**U.S. DOE Transportation Emergency Preparedness Program**



**FREE Modular Emergency Response Radiological Transportation Training (MERRTT) Train-the-Trainer Course**

Designed to take the complex topic of a radiological accident response and breaks it down into easily understood modules. Hands-on practical exercises verify student's understanding and knowledge. Students will receive a certificate of completion from the Department of Energy's Transportation Emergency Preparedness Program and up to 9 hours of continuing education hours (CEH) for medical response personnel through the Commission on Accreditation for Prehospital Continuing Education (CAPCE).

**COST: FREE!** No fee for the course. Food, lodging, transportation are the responsibility of the participant.

**WHO SHOULD ATTEND?**

Fire, HAZMAT, EMS, and LE who would support activities at a radiological transportation accident.

**PREREQUISITES:** None

**FULL COURSE MODULES:**

- Radiological Basics
- Biological Effects
- Radioactive Material Shipping Packages
- Hazard Recognition
- Initial Response Actions
- Patient Handling
- Rad Survey Instruments & Dosimetry Devices
- Decontamination, Disposal and Documentation
- DOE Shipments and Resources
- Waste Isolation Pilot Plant
- Pre-Hospital Practices
- Transportation of Safeguards Material
- Transportation by Rail
- Case Histories

**UP TO 6 PRACTICAL EXERCISES:**

- Radiological Instrument Use
- Assessing Radioactive Package Integrity
- Personnel Contamination Surveys
- Contaminated Patient Handling
- Radioactive Decon Corridor Operations
- Radiological Response Picture Card Practical

**Location:**

Joint Force Headquarters  
2400 Wright St.  
Madison, WI 53704

**Dates:** November 19-20, 2024

**Time:** 9:00 am - 5:00 pm, both days

**Registration:**

Travis Waack,  
WCEM Rep Program Manager  
Wisconsin Emergency Management  
travis.waack@widma.gov  
608-509-8451

**REGISTRATION DEADLINE:**

November 1, 2024

[For More Information](#)

[em.doe.gov/otem](http://em.doe.gov/otem)

# Request for Travel on Behalf of the City of Milwaukee

Kryshak, Violet, N	Emergency Response Planning Coordinator
Last Name, First Name, MI	Title
Milwaukee Health Department - Emergency Preparedness Environmental Health Department	
Madison, WI	Nov 19th - Nov 20th
Destination	Conference/Event Dates

**Purpose of the Trip and/or Anticipated Benefit**  
 Designed to take the complex topic of a radiological accident response and breaks it down into easily understood modules in: Radiological Basics; Biological Effects; Radioactive Material Shipping Packages; Hazard Recognition; Initial Response Actions; Patient Handling; Rad Survey Instruments & Dosimetry Devices; Decontamination, Disposal and Documentation; DOE Shipments and Resources; Waste Isolation Pilot Plant; Pre-Hospital Practices; Transportation of Safeguards Material; Transportation by Rail; Case Histories. Hands-on practical exercises in: Radiological Instrument Use; Assessing Radioactive Package Integrity; Personnel Contamination Surveys; Contaminated Patient Handling; Radioactive Decon Corridor Operations; Radiological Response Picture Card Practical.

<u>Anticipated Funding</u>	Amount	Expense (If Specified)	<u>Anticipated Expenses</u>
Source:			Registration Fees
Department (O&M)			0.00
Grant (Specify Below)	\$524		Lodging
GR3801824100			Nightly Rate
Other (Specify Below)			\$ 110.00
[Sponsor-paid travel]			Number of Nights
Tuition Reimbursement			2
			<b>Total Lodging</b>
			\$ 220.00

**Travel Advance**  
 Requested? No  Yes  Amount -

**Employee Certification Statement**  
 I hereby certify that:  
 (1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.  
 (2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.  
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Signed by:  
  
 7487E492P05837  
 Employee Signature

11/15/2024  
 Date

<u>Transportation</u>		
*Personal Vehicle	0.67	154.20
Air		
Rail		
Baggage		
Other (Specify Below)		
a.		
b.		
c.		
<b>Total Transportation</b>		\$ 154.20

**Max Meal Allowance**

	Federal Amount for Destination	X	**Number of Meals		
Breakfast	20.00	X	2	=	\$ 40.00
Lunch	22.00	X	2	=	\$ 44.00
Dinner	33.00	X	2	=	\$ 66.00
<b>Total Max Meal Allowance</b>					\$ 150.00

**Other Anticipated Expenses (Itemize Below)**

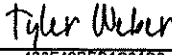
a.		
b.		
c.		
<b>Total Other Expenses</b>		\$ -
<b>Total Anticipated Expenses</b>		\$ 524.20

**Department Approval** (To be completed by the authorizing entity or designee)

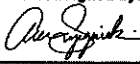
Approval Granted Yes  No

If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Signature Approved: 524.2 # of Days Approved: 2

  
 438F49BE81C4M09  
 Approver Signature

12/19/2024  
 Date

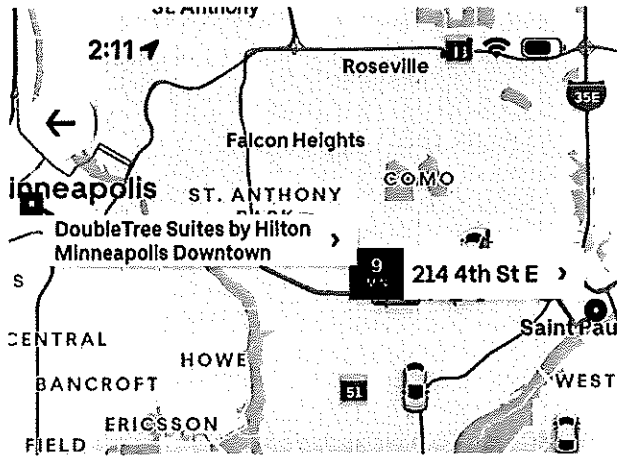
DocuSigned by:  
  
 BE70E9F17C144A3...  
 Approver Signature

12/19/2024  
 Date

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate **OR** the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.

Ubers in Minneapolis: x2



Fares are slightly higher due to increased demand



**Comfort**  
2:43 PM • 7 min away

\$28.30



**UberX** 24  
2:45 PM • 9 min away

\$23.98



**UberXL**  
2:38 PM • 3 min away  
⚡ Faster

\$35.26



**Black SUV**

\$56.70



American Express \*\*\*\*3037





Choose UberX







Ubers in Milwaukee: x2




Choose a ride

 **UberX**  **\$12.99**  
2:33 PM • 7 min away

  **Comfort** **\$15.17**  
2:36 PM • 10 min away

 **UberXL** **\$16.81**  
2:31 PM • 5 min away  


 **UberX Priority** **\$14.96**  
2:32 PM • 6 min away

 **American Express** ••••3037 >

**Choose UberX**



Primary Destination ⓘ	County ⓘ	M&IE Total	Continental Breakfast/Breakfast	Lunch	Dinner	Incidental Expenses	First & Last Day of Travel ⓘ
Minneapolis / St. Paul	Hennepin / Ramsey	\$79	\$18	\$20	\$36	\$5	\$59.25

#### Additional per diem topics

- [Meals & Incidental Expenses breakdown \(M&IE\)](#)
- [FAQs](#)
- [State tax exemption forms](#)
- [Factors influencing lodging rates](#)
- [Per diem highlights](#)
- [Fire safe hotels](#)
- [Have a per diem question?](#)
- [Downloadable per diem files](#)

#### Need more information?

- [Rates for Alaska, Hawaii, U.S. territories and possessions \(set by DoD\)](#)
- [Rates in foreign countries \(set by State Dept.\)](#)
- [Federal travel regulations](#)

#### Related topics

- [Travel resources](#)
- [E-Gov Travel](#)
- [FedRooms](#)
- [POV mileage reimbursement rates](#)

Last reviewed: 2023-12-23



# FY 2024 Per Diem Rates for Minneapolis, Minnesota

Change fiscal year: or [New Search](#)

## Daily lodging rates (excluding taxes) | October 2023 - September 2024

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 ⓘ	2023 Oct	Nov	Dec	2024 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Minneapolis / St. Paul	Hennepin / Ramsey	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148	\$148

## 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.

[Top](#)



Each year, APHA selects a local organization to support. The APHA 2024 host city charity is the **Dream of Wild Health**, one of the longest continually operating Native American organizations in the Twin Cities. When you donate to Dream of Wild Health, you support their mission to restore health and well-being in the Native community by recovering knowledge of and access to healthy Indigenous foods, medicines and lifeways. Your gift supports Native youth leadership, healthy and traditional food access, and Indigenous seed stewardship. Attendees are encouraged to join in the effort to make an impact by making a gift through the registration process.

## Frequently Asked Questions

[Does APHA have scholarships or financial support for attendees?](#)

[How do I register for APHA's Annual Meeting?](#)

[How do I pay by check?](#)

[I am presenting. Do I need to register?](#)

[Do APHA members receive discounts on registration?](#)

[What if I become a member of APHA after I have registered as non-member?](#)

[Does the media need to register to cover the meeting?](#)

[Why have I not received a registration confirmation?](#)

[How do I make a correction or change on my registration?](#)

[How do I change the email address associated with my registration?](#)

[How do I cancel or transfer my registration?](#)

[How do I request a letter of invitation for a visa?](#)

[Are meals included in the cost of registration?](#)

No meals are included in the Annual Meeting registration. You may purchase tickets for several ticketed lunch events at an additional cost.

[Can I participate in the business meetings even if I'm not in Minneapolis?](#)

[Can I register for the Public Health Expo only?](#)

[If I attend the Annual Meeting in Minneapolis, do I need a separate registration to watch the digital version of the meeting?](#)

[How do I get my name badge?](#)

[Can my family attend the Annual Meeting and Expo?](#)

[Can I register a guest?](#)

[How do I select the sessions I want to attend?](#)

[How do I register for one day only?](#)

Total Registration Cost: \$250 (compared to MHD Member Rate of \$645)

\*Note Registration for Pre-Conference Workshop

Student Membership: \$70

Dear Violet,

Thank you for your order! Here are your order details. Please retain this email for your records.

Order Date: Jun 14, 2024 3:53 PM

Bill To: Violet Kryshak

Order Total: 70.00

Payment Method: Master Card \*\*\*\*\*6232

Name on Card: Violet Kryshak

Item	Price	Qty	Total
Invoice: Renewal Fees - Violet Kryshak	70.00	1	70.00
	<b>Item Total</b>		0.00
	<b>Shipping</b>		0.00
	<b>Handling</b>		0.00
	<b>Item Grand Total</b>		0.00
	<b>Invoice Total</b>		70.00
	<b>Transaction Grand Total</b>		70.00

Thank you again for your support!

Student Conference Registration: \$280

APHA Registration Confirmation and Receipt - 601931

Thank you for registering for the American Public Health Association's 2024 Annual Meeting and Expo in Minneapolis.

For additional information, please email [annualmeeting@apha.org](mailto:annualmeeting@apha.org)

If you paid for APHA membership through the Annual Meeting registration process, you will receive a separate confirmation for your membership dues payment.

Your registration number is: 601931

Your registration was completed on: 06/14/2024

Name: Violet Kryshak  
Company: City of Milwaukee Health Department  
Address: 241 N Broadway  
Address 2: 3rd Floor  
City/State/Zip: Milwaukee, WI 53202  
Country: USA  
Phone: 414-208-7600  
Email: [vkrysh@milwaukee.gov](mailto:vkrysh@milwaukee.gov)  
Badge Name:  
Badge City:  
Badge State:

Registration Information

Champion of Change Cohort: Empower to Educate: A Sustainable Approach to Addressing ACEs, Overdose, and Suicide Through Trainer Development  
Date: 10/28/24 Time: 10:00AM-12:00PM  
\$0.00

Full Conference - Student Member  
\$280.00

Payment Information

Payment Type: CCD Payment  
Reference: MasterCard  
5006232 Exp: 09/28  
Payment Amount: \$280.00

Amount Due: \$280.00  
Amount Paid: \$280.00  
Balance Due: \$0.00

Meals:

## Meals and incidental expenses (M&IE) rates and breakdown

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner
San Antonio	Bexar	\$74	\$18	\$20	\$31

04/27/2025 Dinner: \$19.30 + \$10.49 + \$2.16 = \$31.95 MAX PER DIEM = \$31

The image shows four receipts from HMsHost and Perlick Kilmer Airport. The receipts are for a dinner on 04/27/2025. The receipts show meal details, amounts, taxes, and gratuities. The total amount for the dinner is \$31.95, which is the maximum per diem amount for that day.

**Receipt 1 (Left):** Terminal ID: 3693, Card Number: XXXXXXXXXX1000(C), Date: 4/27/2025 5:30:14 PM, Total: USD 16.78. Includes a tip of \$2.52 and a total of \$19.30.

**Receipt 2 (Middle-Left):** HMsHost logo, PERLICK KILMER AIRPORT, 396382 JESL6, CHK 799 TBL 142/1 GST 1, 4/27/2025 5:17 PM. For Here: 1 APP PUB PRETZEL 16.29, 1 CLUB AVIATA SW 5.00 X. Subtotal: \$15.48, Tax: \$1.30, Total Due: \$16.78.

**Receipt 3 (Middle-Right):** HMsHost logo, PERLICK KILMER AIRPORT, 396382 JESL6, CHK 799 TBL 142/1 GST 1, 4/27/2025 5:17 PM. For Here: 1 APP PUB PRETZEL 16.29. Subtotal: \$16.29, Tax: \$1.37, Total Due: \$17.65.

**Receipt 4 (Right):** Perlick Kilmer - AT, 31111 23301, 04/27/2025 04:08 PM, 396382 JESL6, Total USD 2.16. Includes a tip of \$2.16 and a total of \$4.32.

04/28/2025 Breakfast: \$11.90 + \$6.44 = \$18.34 MAX PER DIEM = \$18

**IHOP Order Received**



IHOP E. COMMERCE ST., STE 657 RIVERWALK  
849 E. Commerce St. San Antonio, TX 78205

Order # 34572764926292

Customer Name: Void Profile  
Customer Email: jryanuk@gmail.com  
Customer Contact Number: 13142245320  
Payment Method: Apple Pay Visa x-320

**ORDER FOR PICKUP**  
Order ready at 10:12 AM TODAY (WEDNESDAY 4/28/2025)

1 x One-A-Stack® Pancakes	(1 x \$10.99)	\$10.99
1 x No Condiments		
1 x Syllabac		
<b>SUBTOTAL</b>		\$10.99
<b>TAX</b>		\$0.45
<b>TOTAL</b>		\$11.90

**Receipt**

Mobile order ⓘ  
Total \$6.44 • 11.9★ earned  
May 1, 2025, 1:05 PM  
Receipt #71029196



**Iced Hazelnut Oatmilk Shaken Espresso** \$5.95

Grande 16 fl oz  
150 Calories  
Almond



Subtotal ..... \$5.95  
Tax ..... \$0.49  
**Total ..... \$6.44**

My Card (5938) Earns 2★ per \$1  
Auth code: 774402

Rivercenter Mall  
849 East commerce  
San Antonio, TX 78205  
To go  
Store number 6306-221904

04/28/2025 Lunch: \$20

< **Order Receipt**

**Confirmation #34877724921675776**  
4/28/2025 at 2:34 PM  
In-Shop Pickup

**Pickup from:**  
Rivercenter

**ORDER AGAIN**

**2 Items**

- 1 Pick Your Pair Skinny Sandwich + Salad \$12.88**  
Mediterranean, Multigrain, Grilled Chicken, Artichoke Hearts, Cucumber, Hummus, Roasted Red Peppers, Feta, Tomato, Powerhouse Salad, F...  
View More ▾
- 1 Chips + Drink \$3.99**  
Zapp's Salt & Vinegar Chips, Fountain, Coke Zero Sugar

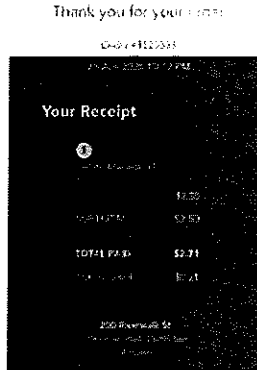
**Order Summary**

Subtotal	\$16.87
Tip	\$1.74
Tax	\$1.39
<b>TOTAL PAID</b>	<b>\$20.00</b>

4/28/2025 Dinner: \$25.95 + \$3.90 (15% tip) + \$2.71 = \$32.59 MAX PER DIEM = \$31



Otro  
 123 N St Marys St  
 San Antonio Texas 78215  
 30063 Sherry 1  
 -----  
 CHK 22719 1908  
 4/28/2025 6:44 PM  
 -----  
**DINE-IN**  
 1 SPICY AHI TUNA 15.00  
 1 GUACAMOLE TRADITIONAL 5.00  
 1 EL MILAGRO TORTILLA CHIPS 4.00  
 -----  
 Food \$24.00  
 Service Charge \$4.02  
 Tax \$1.98  
**Total Paid \$30.00**  
**Change Due \$0.00**



4/29/2025 Breakfast: \$12 + \$6.75 = \$18.75 MAX PER DIEM = \$18

Henry B. Gonzales Convention Center  
 RK Culinary Group  
 900 E. Market St  
 San Antonio TX 78205  
 PH: 210-225-4535  
 -----  
**Check 180014**  
 Market 18  
 TUE 4/29/25 9:56  
 -----  
 1 Breakfast Sand 8.50  
 1 Chobani Yogurt 3.50  
 -----  
 Sub/Ttl 12.00  
**Dine In MK 12.00**  
 -----  
 AmEx 12.00  
 Acct: 370382\*\*\*\*1473  
 Auth: 805241  
 Trans ID: 14  
 -----  
 Sales tax is included in the price of  
 of your purchase.  
 Thank you for dining with us!!

Henry B. Gonzales Convention Center  
 RK Culinary Group  
 900 E. Market St  
 San Antonio TX 78205  
 PH: 210-225-4535  
 -----  
**Check 180012**  
 Market 18  
 TUE 4/29/25 9:51  
 -----  
 1 Latte 6.75  
 Grande  
 Gingerbread  
 -----  
 Sub/Ttl 6.75  
**Dine In MK 6.75**  
 -----  
 AmEx 6.75  
 Acct: 370382\*\*\*\*1473  
 Auth: 801940  
 Trans ID: 12  
 -----  
 Sales tax is included in the price of  
 of your purchase.  
 Thank you for dining with us!!

4/29/2025 Lunch: \$7.28 + \$14.77 = \$22.05 MAX PER DIEM = \$20

Order Details  
 Date Ordered Tue Apr 29th, 12:13pm  
 Pickup Estimate Tue Apr 29th, 12:43pm



Agua de Sandia  
 Quantity 1 Price \$5.85

Payment method  
 Credit Card - 1473 Amex  
 Charged \$7.28

Business Address  
 Plantaqueria  
 124 Broadway, San Antonio, TX 78205  
 San Antonio, TX 78205

Subtotal \$5.85  
 Taxes \$0.48  
 Tip \$0.95  
 Total \$7.28



The County Line Riverwalk  
 111 W Crockett St #104  
 San Antonio, TX 78205  
 (210) 229-1941

Check #74  
 Ordered: 4/29/25 2:45 PM

SKEETERS CAESAR \$11.99  
 Subtotal \$11.99  
 Tax \$0.99  
 Tip \$1.79  
 Total \$14.77

Input Type C (EMV Chip Read)  
 AMERICAN EXPRESS xxxxxxxxxxxx  
 Time 3:10 PM

Transaction Type Sale  
 Authorization Approved  
 Approval Code 847161  
 Payment ID yHbmgXKWFbMC  
 Application ID A00000025010801  
 Application Label AMERICAN EXPRESS  
 Terminal ID bb226c4a812e746e  
 Merchant ID 324000000021  
 Card Reader BBPOS

VIOLET N KRYSHAK

4/29/2025 Dinner: \$31

Domingo Restaurante  
 123 N St Marys St  
 San Antonio Texas 78215

10121 IRD PM 1  
 -----  
 CHK 81830 GST 1  
 violet1908  
 4/29/2025 9:54 PM

DINE-IN  
 1 ENCHILADAS 26.00  
 Food \$26.00  
 Service Charge \$2.85  
 Tax \$2.15  
 Total Paid \$31.00  
 Change Due \$0.00

4/30/2025 Breakfast: \$25.98 + \$3.90 (\$15% Tip) = 29.88 MAX PER DIEM = \$18

Domingo Restaurante  
 123 N St Marys St  
 San Antonio Texas 78215

10120 IRD AM 1  
 -----  
 CHK 81839 TBL 1/2  
 GST 1  
 4/30/2025 7:31 AM

DINE-IN  
 1 CHEESE WAFFLE 17.00  
 1 CRISPY BACON 7.00  
 Food \$24.00  
 Service Charge \$4.02  
 Tax \$1.98  
 Total Paid \$30.00  
 Change Due \$0.00

4/30/2025 Dinner: \$32.05 MAX PER DIEM = \$31

Casa Cabrina  
515 Villa St.  
San Antonio, TX 78212

Server: Melissa B  
Check #138 Table 208  
Guest Count: 20  
Ordered: 4/30/25 8:24 PM

How was your visit?

☆☆☆☆

1 Esquite \$6.00  
1 Rita Acustico \$19.00

Subtotal \$25.00  
Credit Card  
Surcharge \$0.75  
(3.00%)  
Tax \$2.12  
Tip \$4.18  
Total \$32.05

Credit Card Contactless  
Amex xxxxxxxx1000  
Time 8:24 PM

Transaction Type Sale  
Authorization Approved  
Approval Code 887854  
Payment ID dqMTxjyJqz2R  
Application ID A00000025010801  
Application Label AMERICAN EXPRESS  
Merchant ID 324000000020  
Card Reader BBPOS

VALUED CUSTOMER

Powered by Toast

05/01/2025 Breakfast: INCLUDED IN ROOM RATE \$15 (PAID AS ROOM RATE) + \$1.89(TAX) + \$2.53 (15% Tip) = \$19.42 MAX PER DIEM = \$18, \$18 - \$15 = \$3 (TAX AND TIP SEPARATE)

The Emily-Morgan Hotel  
705 E. Houston Street  
San Antonio, TX 78205  
(210) 244-0146  
Dro Restaurant

1003 Eltana 1

CHK 35312 TBL 33/1 GST 1  
5/1/2025

**DINE-IN**

1 \*Adult Buffet 22.95  
\$ Charge Tip \$3.16  
Room Charge \$28.00  
1014

Food \$22.95  
Service Charge \$3.16  
Tax \$1.89  
Total Paid \$28.00  
Change Due \$0.00

----- Check Closed -----  
5/1/2025 8:30 AM

05/01/2025 Dinner: \$12.99 + \$1.95 (15% Tip) + \$12.98 + \$1.95 (15% Tip) + \$2.71 = \$32.58 MAX PER DIEM = \$31

The Emily Morgan Hotel  
705 E. Houston Street  
San Antonio, TX 78205  
(210) 244-0146  
Oro Restaurant

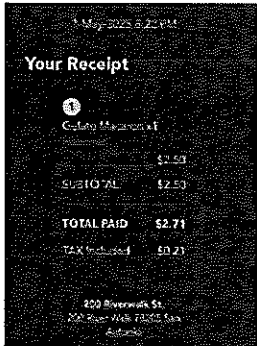
1002 Kay 1  
-----  
CHK 41550 violet GST 1  
5/1/2025  
-----  
TO-GO  
1 Chips & Queso 12.00  
\$ Charge Tip \$2.01  
Room Charge \$15.00  
1014  
  
Food \$12.00  
Service Charge \$2.01  
Tax \$0.99  
Total Paid \$15.00  
Change Due \$0.00  
  
----- Check Closed -----  
5/1/2025 6:55 PM

The County Line Riverwalk  
111 W Crockett St #104  
San Antonio, TX 78205  
(210) 228-1941

Check #189  
Seat 4  
Ordered: 5/1/25 8:05 PM

GARDEN \$11.99  
-----  
Subtotal \$11.99  
18% Gratuity (18.00%) \$2.34  
Tax \$0.99  
Total \$15.32  
-----  
Credit Card Contactless  
Authorization XXXXXXXXXXXX  
Amex 804380  
Time 8:12 PM  
-----  
Transaction Type Safe  
Authorization Approved  
Approval Code 804380  
Payment ID H77pRPtWghpw  
Application ID A00000025010801  
Application Label AMERICAN EXPRESS  
Merchant ID 324000000021  
Card Reader BBPOS

VALUED CUSTOMER



05/02/2025 Breakfast: \$15.16 + \$2.27 (15% Tip) + \$8.66 = 26.09 MAX PER DIEM = \$18

The Emily Morgan Hotel  
705 E. Houston Street  
San Antonio, TX 78205  
(210) 244-0146  
Oro Restaurant

1002 Kay 1  
-----  
CHK 35343 Violet to go GST 1  
5/2/2025  
-----  
TO-GO  
1 Burrito 14.00  
\$ Charge Tip \$2.84  
Room Charge \$18.00  
1014  
  
Food \$14.00  
Service Charge \$2.84  
Tax \$1.16  
Total Paid \$18.00  
Change Due \$0.00  
  
----- Check Closed -----  
5/2/2025 8:09 AM

The Emily Morgan Hotel  
705 E. Houston Street  
San Antonio, TX 78205  
(210) 244-0146  
Oro Restaurant

1004 Zehra 1  
-----  
CHK 20576 1014 GST 1  
5/2/2025  
-----  
TO-GO  
1 Granola Parfait 8.00  
\$ Charge Tip \$3.34  
Room Charge \$12.00  
1014  
  
Food \$8.00  
Service Charge \$3.34  
Tax \$0.55  
Total Paid \$12.00  
Change Due \$0.00  
  
----- Check Closed -----  
5/2/2025 2:11 PM

05/02/2025 Lunch: \$20.32 MAX PER DIEM = \$20

WHATABURGER  
Restaurant 661  
6481 N. U.S. 281 North  
San Antonio, TX 78216  
(210) 979-7369  
Operating Partner - Lisa Castillo

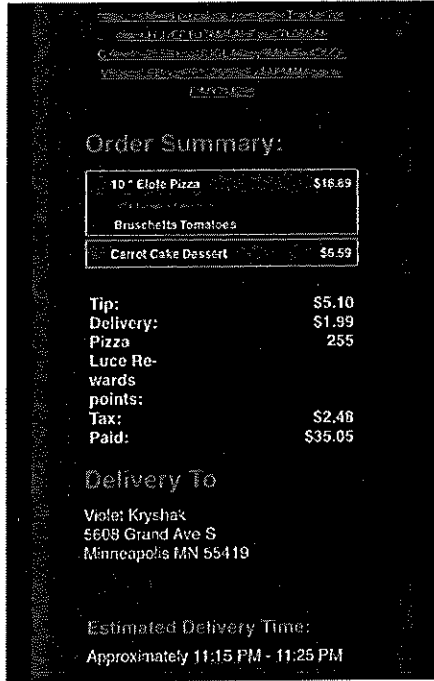
Thank you for visiting!  
www.whataburger.com/contact-us

Order: 856297 Date: 5/2/2025  
Type: 3 Drive Thru Time: 03:59PM  
Cashier: Alexis G


Customer #  
1 WHATABURGER BUF 9 PC HL 12.79  
1 WHATABURGER BUF 9 PC 0.00  
HONEY MUSTARD DIP SAUCE 0.00  
LG FRIES 0.00  
LG DIET COKE 0.00  
1 KETCHUP PC 2.99  
1 CINNAMON ROLL 0.00  
1 \*\*LANE Bxx 2.99  
1 LG TEA

SubTotal 18.77  
Tax 1.55  
Total 20.32  
American Express 20.32  
Acot:XXXXXXXX1000  
Approval:845199

05/02/2025 Dinner: \$29.95 + \$4.49 (15% Tip) = \$34.44 Max Per Diem = \$31



05/03/2025 Breakfast: Subtotal \$21 MAX PER DIEM \$18

  
 Hope Breakfast Bar - St. Louis Park  
 5377 W 18th St  
 St. Louis Park, MN 55416

Check #334  
 Guest Count: 2  
 Ordered: 5/3/25 11:02 PM

1 Sea Salt Caramel Latte	\$7.00
Cold/Iced	
Whole	
<div style="background-color: black; height: 15px; width: 100%;"></div>	
1 Wild Blueberry Cakes	\$14.00
<div style="background-color: black; height: 15px; width: 100%;"></div>	

Subtotal	\$21.00
Tax	\$5.71
Tip	\$14.54
Total	\$41.25


Input Type: C (EMV Chip Read)  
 AMERICAN EXPRESS  
 Time: 3:08 PM

Transaction Type: Sale  
 Authorization: Approved  
 Approval Code: 866514  
 Payment ID: zFpkXdPvrhxm  
 Application ID: A00000025010801  
 Application Label: AMERICAN EXPRESS  
 Terminal ID: 332cb476ed0dc3e1  
 Merchant ID: 324000000024  
 Card Reader: BBPOS

VIOLET N KRYSHAK

# Travel Request Form

Schedule:

		<b>Pathways to Recovery in the Aftermath of Disasters</b> April 29-May 2, 2025   San Antonio, TX			
Main Meeting					
	4/28	4/29	4/30	5/1	5/2
	Monday	Tuesday	Wednesday	Thursday	Friday
6:30 AM					
7:00 AM					
7:30 AM					
8:00 AM		Sessions/ Demos/Case Study	Sessions/ Demos/Case Study	Sessions/ Demos/Case Study/ Workshops	Sessions/ Demos/Case Study
8:30 AM					
9:00 AM					
9:30 AM					
10:00 AM				Sessions/ Demos/Case Study/ Workshops	
10:30 AM		Plenary 1	Plenary 2		Plenary 3
11:00 AM					
11:30 AM					
12:00 PM					
12:30 PM		Sponsored Lunch in Exh Hall	Lunch in Exh Hall	Lunch in Exh Hall	
1:00 PM	Pre-Conference Workshops				
1:30 PM		Sessions/ Demos/Case Study/ Workshops	Town Hall 1	Town Hall 2	
2:00 PM					
2:30 PM					
3:00 PM					
3:30 PM					
4:00 PM		Quick Hits/ Workshops/ Case Study	Quick Hits/ Case Study	Quick Hits/ Case Study	
4:30 PM					
5:00 PM					
5:30 PM		Exhibit Hall Reception			
6:00 PM					
6:30 PM					
7:00 PM					
7:30 PM					
8:00 PM					
8:30 PM					

I am participating in a Pre-Conference Workshop on 4/28:

**From:** Lean Abdelaziz <LAbdelaziz@naccho.org>  
**Sent:** Friday, January 17, 2025 1:02 PM  
**To:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Subject:** 2025 Pre-Summit-Radiation Workshop Notification  
 Good afternoon Violet,

I hope all is well. Your name has been added to the list, I will send you more information in the coming months. We look forward to having you.

All the best and Happy New Year!

**Lean Abdelaziz**  
 Sr. Program Analyst - Preparedness  
 National Association of County & City Health Officials  
 1201 I Street NW Fourth Floor | Washington, DC 20005  
**Main:** 202-783-5550 | **Direct:** 202.640.4925  
**E-mail:** [LAbdelaziz@naccho.org](mailto:LAbdelaziz@naccho.org)  
[www.naccho.org](http://www.naccho.org)

Registration:

In-Person Registrant Type	Early-Bird Rate (Ends December 31, 2024)	Advance Rate (Ends February 28, 2025)	Regular Rate (Ends April 28, 2025)	On-Site Rate
Individual, Non-Profit/Government	\$850	\$950	\$1,050	\$1,150
Group, Non-Profit/Government **	\$800	\$900	\$1,000	\$1,100
Individual, For-Profit	\$1,075	\$1,175	\$1,275	\$1,375
Speaker or Poster Presenter **	\$750	\$850	\$950	\$1,050
Student **	\$400	\$450	\$500	\$550
Single Day	\$575	\$675	\$775	\$875

Hotel:

Daily lodging rates (excluding taxes) | October 2024 - September 2025

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](#) or.

Filter results...

Primary destination	County	2024 Oct	Nov	Dec	2025 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
San Antonio	Bexar	\$137	\$137	\$137	\$137	\$161	\$161	\$137	\$137	\$137	\$137	\$137	\$137

Showing 1 to 1 of 1 entries

Hotel reservation is for \$137 + 15 dollars for breakfast (which will be deducted from the per diem cost)

**Guest Name:** Violet Kryshak  
**Guests:** 1 Adult  
**Rooms:** 1  
**Room Plan:** 1 KING BED NONSMOKING

**VIOLET KRYSHAK**  
 Upgrade your room for only \$14 more a night.

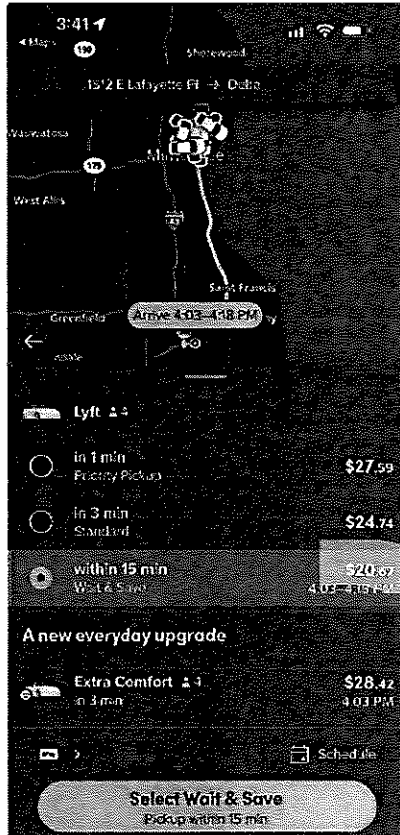
**UPGRADE ▶**

**Your Rate Information** GVT with Breakfast

<b>Rate per night</b> 27-Apr-2025 - 02-May-2025	152.00 USD
<b>Total for Stay per Room Rate</b>	<b>760.00 USD</b>
<b>Taxes</b>	129.91 USD
<b>Mandatory Charge</b>	15.58 USD
<b>Total price for Stay</b>	<b>905.49 USD</b>

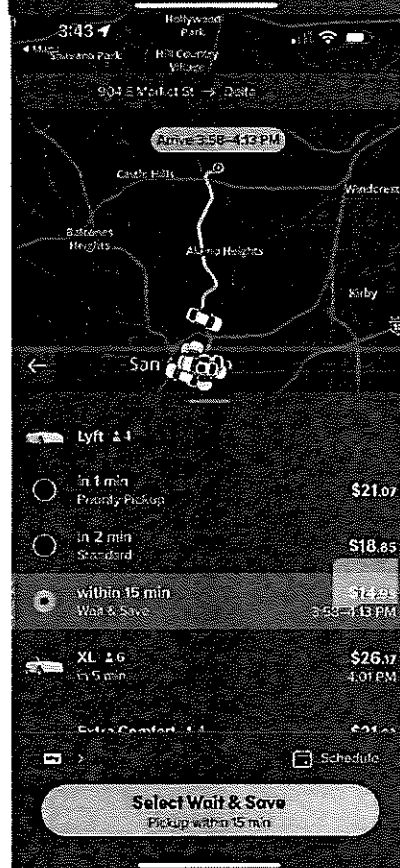
Uber in Milwaukee:

X2



Uber in San Antonio:

X2



Flights:

BOOK RETURN BY DATE

Start Over Trip Summary Review & Pay Confirmation

## Trip Summary

<b>Outbound</b>	DL2048, DL2675			1 stop, 5h 16m	
	MKE · SAT	Sun, Apr 27	12:00pm - 5:16pm	Main	
<b>Return</b>	DL1465, DL1268			1 stop, 5h 32m	
	SAT · MKE	Fri, May 02	6:23pm - 11:55pm	Main	

Changeable / Nonrefundable

## Trip Total

Currency Calculator

1 Passenger	
Flights	\$364.06
Upgrades	\$74.42
Taxes, Fees & Charges	\$82.89

Amount Due

\$521.37 USD

4 left at this price

Meals:

### Meals and incidental expenses (M&IE) rates and breakdown

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner
San Antonio	Bexar	\$74	\$18	\$20	\$31

### Full In-Person Registration Fee Includes:

Admission to all conference sessions

Admission to the Exhibit Hall

Lunch will be provided for at least two days during the conference

Access to recorded content



# Statement of Expenses Incurred for the City of Milwaukee

\*\*\*Please read the instructions carefully before completing.

Voucher Number	Group Number
----------------	--------------

Last Name Kryshak	First Name Violet	MI N	Title Emergency Response Planning Coordinator	Employee ID 038338	Employee's Address (Street, City, ZIP) 1812 E Lafayette Pl Unit 204, Milwaukee WI 53202
Organization		Authority		Authorized Amount	Travel Advance Amount \$
Destination Salt Lake City, UT		THE EXPENSES INCLUDED ON THIS FORM ARE FOR THE FOLLOWING ADDITIONAL PERSONS (LIST NAME AND TITLE):		PURPOSE OF THE TRIP Attending this conference would be valuable because it offers key insights into disaster preparedness, opportunities to collaborate with experts across disciplines, and continuing education credits to support my professional growth. It will help me strengthen emergency response strategies and build connections with key stakeholders in the field.	
Dates of Travel 10/14/25-10/17/2025	# of Approved Days 4				

Account (6 digit code) 636501	Fund (4 digit code)	Dept ID (4 digit code)	Program (4 digit code)	Class (4 digit code)	Budget Ref (4 digit code)	Project Grant (12 digit code)
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**\*\*EXPENSES ELIGIBLE FOR REIMBURSEMENT\*\***

Under § 350-181 of the code of ordinances providing rules for the reimbursement of expenses for attendance at seminars and conventions and other city travel, generally the City shall pay for the actual expense for registration, transportation (up to coach fare), hotel (up to single rate for the number of days in attendance but not to exceed five days) and other necessary expenses accompanied by the appropriate form of documentation. Exceptions may be made on a case by case basis at the discretion of the Department Head or supervisor. See §350-181 for the complete travel regulations and procedures.

**ACTUAL TRAVEL EXPENSES (Pre-Paid and During Travel)**

<u>Meal Allowance</u>		
1. Actual Meals (NOT PROVIDED BY EVENT)		\$195.24
2. Max Meal Allowance (FOR MEALS NOT PROVIDED)		
	Federal Amount	Number of Meals
Breakfast	\$20	1
Lunch	\$22	2
Dinner	\$33	4
		\$ 196.00
3. Meal Reimbursement (Lesser of 1 and 2)		\$195.24

<u>Transportation Expenses</u>		
Current Mileage Rate:		\$0.70
4. Personal Vehicle		
	Miles Driven:	
a. Mileage Total		\$
b. Flat Rate Amount		
5. Air		\$ 318.48
6. Rail		
7. Baggage		
8. Other (List Below)		
a. Ride Shares	\$	49.69
b. Rental Car		\$63.38
c. Gas	\$	4.82
9. Total Transportation	\$	436.37

<u>Lodging</u>	
10. Total	\$ 305.26

<u>Registration Fees</u>	
11. Total	\$ 100.00

<u>Other Reimbursable Expenses</u>	
12. Total Other (Itemize on Additional Info sheet)	
<b>TOTAL REIMBURSABLE EXPENSES</b>	<b>\$1,036.87</b>

**DEDUCTIONS - NOT PAID BY TRAVELLER**

Prepaid Expenses	Voucher Number	Amount
13. Registration		
14. Transportation		
15. Lodging		
16. Other (Specify)		
17. Other (Specify)		
Total		\$
<u>Advances</u>		
18. Travel Advance		\$
<u>Tuition Reimbursement</u>		
19. Tuition Reimbursement		\$
<b>TOTAL DEDUCTIONS</b>		<b>\$</b>

**Total Amount Due From (To) City \$ 1,036.87**

**EMPLOYEE CERTIFICATION**

I hereby certify that the expenses listed on this statement represent actual expenses incurred by me in conjunction with my duties and responsibilities. I further warrant these expenses have not been reimbursed to me by any other person or organization and request reimbursement in accordance with ordinance §350-181.

Employee Signature	Date	Supervisor Signature	Date
--------------------	------	----------------------	------

[Home](#) > [Family Practice Medicine](#) > [Division of Public Health](#) > [Research](#) > [Research Groups](#) > [Center for Emergency Public Health](#) > [Disasters Conference](#)

# CONFERENCE AGENDA

## PUBLIC HEALTH & DISASTERS CONFERENCE 2025

### AGENDA

Wednesday, October 15, 2025

**7:30am - 4:00pm**

**REGISTRATION**

**7:30am - 9:00am**

**BREAKFAST**

**8:30am - 9:00am**

**Welcome**

**Kimberley Shoaf, DrPH**, Professor, Director of the Rocky Mountains and High Plains Center for Emergency Public Health, Division of Public Health, University of Utah

**9:00am - 10:00am**

**Keynote Address**

*Finding that Mission Moment: Staying Inspired in an Ever-Changing Public Health Landscape*

**Jack Hermann, MEd**, Senior Director, Client Services, American Red Cross

**10:00am - 10:30am**

**BREAK**

- 10:30am - 12:00pm**      **Plenary Session**  
*Working with Tribal Partners for Public Health Emergency Preparedness and Response*  
**Tammy Matt BSN RN**, Public Health Nurse, Public Health Emergency Preparedness Coordinator, Confederated Salish & Kootenai Tribes, Tribal Health Department  
**Cassie Meredith**, Emergency Manager, The Paiute Indian Tribe of Utah  
**Robert DesRosier**, Retired Director of Emergency Management, Blackfeet Nation
- 12:00pm - 1:30pm**      **LUNCH**
- 1:30pm - 3:00pm**      **Breakout Session – A**  
*Countering Harmful Rumors that Undermine Public Health Emergency Preparedness and Response (Part 1)*  
**Aishwarya Nagar**, Senior Analyst at Johns Hopkins Center for Health Security and Research Associate in the Department of Environmental Health And Engineering at the Johns Hopkins Bloomberg School of Public Health
- 1:30pm - 3:00pm**      **Breakout Session – B**  
*Become a Disaster Doula: How to Improve Outcomes by Letting Go of Recovery*  
**Mitch Stripling**, Director, NYC Preparedness and Recovery Institute, Columbia University
- 3:00pm - 3:30pm**      **BREAK**
- 3:30pm - 5:00pm**      **Breakout Session – C**  
*Developing a strategic plan to counter public health rumors (Part 2)*  
**Aishwarya Nagar**, Senior Analyst at Johns Hopkins Center for Health Security and Research Associate in the Department of Environmental Health And Engineering at the Johns Hopkins Bloomberg School of Public Health

**3:30pm - 5:00pm**

**Breakout Session – D**

*Communicable Disease Workforce Surge Strategy*

**Karen Horn, MBA, MPH**, Center for Global Strategic Information and Public Health Practice, Institute for Global Health Sciences, University of California San Francisco

**Jess Celentano, MPH**, Deputy Director, Center for Global Health Diplomacy, Delivery and Economics, University of California San Francisco

Thursday, October 16, 2025

**7:30am - 4:00pm**

**REGISTRATION**

**7:30am - 9:00am**

**BREAKFAST**

**9:00am - 9:45am**

**Plenary Session**

*Community-engaged disaster recovery after Helene: practical experiences from the North Carolina Inclusive Disaster Recovery Network*

**John Wallace**, UNC Gillings School of Global Public Health, Region 4 Center for Public Health Preparedness and Response

**9:45am - 10:30am**

**Plenary Session**

*Leading Through Disasters: Lessons from Public Health Response and Recovery*

**Umair Shah, MD, MPH**, Founder & Principal, Rickshaw Health, Former Secretary of Health, Washington State

**10:30am - 11:00am**

**BREAK**

**11:00am - 12:00pm**      **Plenary Session**  
*Impact of Federal Changes on Local Public Health Preparedness and Response*  
**Linda Degutis, DrPH, MSN**, Professor, Yale University  
**Leremy Colf, PhD**, Associate Professor and Donna L. Wong Professorship in Pediatric Nursing, University of Oklahoma Health Sciences Center

**12:00pm - 1:00pm**      **LUNCH**

**1:00pm - 2:30pm**      **Breakout Session – E**  
*Collaborative by Design: A New Capability for Preparedness Powered by Networked Conversational AI*  
**Justin Snair, MPA**, CEO/Founder, Prepr.ai

**1:00pm - 2:30pm**      **Breakout Session – F**  
*H2azards Tool (Jurisdictional Risk Assessments)*  
**Nicole Errett, PhD**, Center for Disaster Resilient Communities, Environmental and Occupational Health Sciences

**2:30pm - 3:00pm**      **BREAK**

**3:00pm - 4:30pm**      **Breakout Session – G**  
*Extended ICS Activation in a Medium-Sized Health Department*  
**Julia Goar, MPH, EMT, CHES**, Missoula Public Health

**3:00pm - 4:30pm**      **Breakout Session – H**  
*Crisis Leadership*  
**Resham Patel, MPH, DrPH(c)**, Director of Practitioner Engagement, Center for Disaster Resilient Communities, University of Washington

Friday, October 17, 2025

**7:30am - 4:00pm**      **REGISTRATION**

<b>7:30am - 9:00am</b>	<b>BREAKFAST</b>
<b>9:00am - 10:30am</b>	<p><b>Plenary Session</b>  <i>2025 Measles Outbreak Response</i>  <b>Katherine Wells, DrPH</b>, Health Officer, Lubbock County, TX  <b>Leisha Nolen, MD PhD</b>, State Epidemiologist, Utah Department of Health and Human Services</p>
<b>10:30am - 11:00am</b>	<b>BREAK</b>
<b>11:00am - 12:00pm</b>	<p><b>Keynote Session</b>  <i>Public Health Philanthropy and Public Health Emergency Preparedness and Response</i>  <b>Alonzo Plough, PhD, MPH</b>, Vice President, Research-Evaluation-Learning and Chief Science Officer, Robert Wood Johnson Foundation</p>
<b>12:00pm - 12:30pm</b>	<p><b>Closing Remarks</b>  <b>Kimberley Shoaf, DrPH</b>, Professor, Director of the Rocky Mountains and High Plains Center for Emergency Public Health, Division of Public Health, University of Utah</p>

## SPEAKERS AND SESSIONS

Aishwarya Nagar - Countering Harmful Rumors that Undermine PHEPR /  
Developing a Strategic Plan to Counter Public Health Rumors

Registration: \$100

Subject: Order receipt from Public Health.

Public Health

Hello Violet Kryshak,  
Thanks for buying from Public Health. Below is the summary of the order.

Order Number: 5989  
Order Details: <https://publichealth-uofunbsstore.net/orderdetails/5989>  
Date Ordered: Tuesday, September 2, 2025

Billing Address  
Violet Kryshak  
1812 E Lafayette Pl  
Unit 204  
Milwaukee 53202  
Wisconsin United States of America

Name	Price	Quantity	Total
Student Registration - Public Health and Disasters Conference University: University of Minnesota - Twin Cities Student ID: 5293832	\$100.00	1	\$100.00
		<b>Sub-Total:</b>	<b>\$100.00</b>
		<b>Tax:</b>	<b>\$0.00</b>
		<b>Order Total:</b>	<b>\$100.00</b>

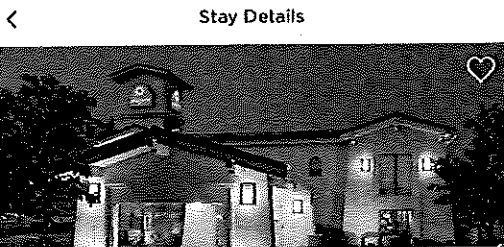
Hotel: \$305.26

Daily lodging rates (excluding taxes) | October 2025 - September 2026

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](#).

Filter results...

Primary destination	County	2025 Oct	Nov	Dec	2026 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Salt Lake City	Salt Lake / Tooele	\$142	\$142	\$142	\$142	\$142	\$142	\$142	\$142	\$142	\$142	\$142	\$142



3 Nights | Confirmation #89322EE056585  
La Quinta Inn by Wyndham Salt Lake City Midvale  
7231 South Catalpa Street, Midvale, UT, 84047  
Tue, Oct 14 → Fri, Oct 17

Room & Rate Details

1 King Bed, Suite, Non-Smoking  
2 Adults, 0 Children

Wyndham Rewards Rate **\$266.56 USD**  
Taxes & Fees **\$38.70 USD**

**Total for Stay \$305.26 USD**

Travel - Lodging  
**LA QUINTA INNS SUITES SALT LAKE CITY**  
**\$305.26**  
Oct 15, 2025  
City of Salt Lake City LA QUINTA MIDVALE LAN DWLE UT


Split

Transaction Details

LA QUINTA INNS SUITES SALT LAKE CITY  
7231 CATALPA ST  
MIDVALE  
UT  
84047  
UNITED STATES  
(801) 508-3291  
<http://www.lq.com/>

**Lyft in Milwaukee to/from the airport: \$49.69**

Oct 14, 2025, 5:53 AM • 10.2 miles • 19 min



1812 E Lafayette Pl  
Milwaukee, WI 53202

Pickup 5:53 AM

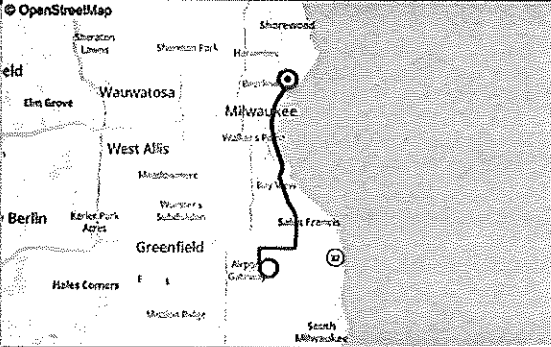
Delta  
Milwaukee, WI 53207

Drop-off 6:13 AM

**Payment**

Lyft Standard fare (10.2 mi, 19m)	\$17.99
Wait time fee - 1 min 20 sec, Prime Time 3%	\$0.30
Tip	\$2.74
<p>♥ Qadirshah says "thanks for the tip!"</p>	
MasterCard '9777	
<b>Total charge</b>	<b>\$21.03</b>

Oct 22, 2025, 9:24 PM • 9.8 miles • 17 min



Blue Zone 2  
Milwaukee, WI 53207

Pickup 9:24 PM

1812 E Lafayette Pl  
Milwaukee, WI 53202

Drop-off 9:42 PM

**Payment**

Lyft Standard fare (9.8 mi, 17m)	\$24.92
Increase Tip	\$3.74
American Express '1000	\$24.92
American Express '1000	\$3.74
<b>Total charge</b>	<b>\$28.66</b>



Welcome to our store  
PETROLEUM WHOLESALE  
#978  
1881 CALIFORNIA AVE.  
SALT LAKE CITY, UT  
84104

10/17/2025 11:45:11  
Unleaded  
PUMP No. 03  
GALLONS 1.531  
PRICE/GAL \$3.149  
TOTAL FUEL \$4.82  
TOTAL AMOUNT \$4.82

AMERICAN EXPRESS  
USD \$4.82  
XXXX XXXXXX X1000  
Chip Read  
APPROVED  
AUTH # 802411  
INV # 967653  
Mode: Issuer  
AID: A00000002501080  
TVR: 0000008000  
IAD: 06640103A0A002  
TSI: E800  
ARC: 00

Thanks  
For Your Business

Nissan Altima – City MPG = 27 (source  
www.fueleconomy.gov)

$43.3 / 27 = 1.604$  Gallons

$1.531 < 1.604$

See TRF for Uber prices = \$79.82 total cost meaning the  
rental car was the most cost-effective option.

- 1h 31m 15 hr 4h 10m
- Eastrent Car Rental Salt Lake City Airpor
- La Quinta Inn by Wyndham Salt Lake Cit
- Viridian Event Center, 8030 S 1825 W, W
- La Quinta Inn by Wyndham Salt Lake Cit
- Viridian Event Center, 8030 S 1825 W, W
- La Quinta Inn by Wyndham Salt Lake Cit
- Viridian Event Center, 8030 S 1825 W, W
- La Quinta Inn by Wyndham Salt Lake Cit
- Eastrent Car Rental Salt Lake City Airpor

Options

Send directions to your phone Copy link

via I-215 S 1 hr 32 min  
Fastest route now due to traffic  
conditions 43.3 miles



Tuesday Dinner: MAX \$33

**Sukiya Sushi & Japanese Buffet**  
 198 W 7200 S  
 Midvale UT 84047  
 Tel: (385)395-4046  
 sukiyaoutslc.net

**UNPAID CHECK**

**AI 67**

Date: 10-14-2025      Time: 09:15 pm  
 Server: mikayla      Station: S4

Dinner Adult	34.99
Firecracker	0.00
Tokyo Love	0.00
Subtotal:	34.99
Tax:	2.89
<b>Total:</b>	<b>37.88</b>

**Tips Suggestion**  
*These tip amounts are provided for your convenience.*

18 %	\$ 6.30	(\$ 44.18)
20 %	\$ 7.00	(\$ 44.88)
22 %	\$ 7.70	(\$ 45.58)

(10% off when you bring this receipt with your next visit)  
 Expire 12/31/2025  
 cashier print @ 09:54:14

**Sukiya Sushi & Japanese Buffet**

198 W 7200 S  
 Midvale UT 84047  
 Tel: (385)395-4046  
 sukiyaoutslc.net

**SALE**

09:55 PM      Oct 14, 2025  
 Entry      Contactless  
 Terminal      # 9 @ SI  
 Card      AmEx 1000  
 Auth Code      868349  
 Ticket      (# 67 ) DINE IN  
 Server      mikayla  
 Table      AI

**Amount: \$ 37.88**  
**Tips \$ 7.12**  
**Total: \$ 45.00**

I AGREE TO PAY ABOVE TOTAL AMOUNT  
 ACCORDING TO CARD ISSUER AGREEMENT

X *[Signature]*

**71**      VALUED CUSTOMER  
 STORE COPY

Wednesday Dinner: MAX \$33

**Smith's** FRESH FOR EVERYONE.

665 West 5300 South  
 (801) 269-0056  
 Your cashier was CHEC 504

SC	SPYLT STRAWBERRY FV	3.00 B
	YOU SAVED	0.79
SC	SPLYT CFFN PB CHC FV	3.00 B
	YOU SAVED	0.79
	QUEST CHIPS	10.99 B
SC	THATSIT FRUIT BAR FV	5.99 B
	YOU SAVED	2.00
SC	CLVD SAUSAGE FV	11.49 B
SC	YOU SAVED	2.50
SC	UNC Tix 20 Msg	0.01-B
	FRESH VALUE CUSTOMER *****6792	
	TAX	1.03
	**** BALANCE	35.49

Salt Lake City, UT 84123  
 AMERICAN EXPRESS Purchase  
 \*\*\*\*\*1000 - C  
 REF#: 869930 TOTAL: 35.49  
 AID: A000000025010801  
 TC: FC565DA0D7E598D4

AMEX      35.49  
 CHANGE      0.00  
 TOTAL NUMBER OF ITEMS SOLD = 5

FreshValues Savings      \$ 6.09  
 Total Savings (15 Percent)      \$ 6.09  
 10/15/25 11:57pm 83 504 241 999999504

Meals:

**Meals and incidental expenses (M&I) rates and breakdown**



The M&I total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&I total. See [M&I Breakdowns](#) for information related to the individual meal amounts.

Primary destination	County	M&I total	Breakfast	Lunch	Dinner	Incidental expenses	First and last day of travel
Salt Lake City	Salt Lake / Tooele	\$80	\$20	\$22	\$33	\$5	\$60.00

The registration fee includes admission to the full conference (2.5 days) and all sessions. Complimentary breakfast, lunch, and snacks will also be provided.

Meal Chart:

	Tuesday	Wednesday	Thursday	Friday
Breakfast	\$20	X	X	X
Lunch	\$22	X	X	\$22
Dinner	\$33	\$33	\$33	\$33

Tuesday Breakfast: MAX \$20

**Welcome to Protein Bar & Kitchen**  
Salt Lake International Airport!

Violet

10/14/25, 10:23 AM Ticket: 152  
Server: Janeth Counter Violet  
Invoice: 251014-04-152

Credit Sale Status: 000000 - Approved

Card Type: AMEX  
Card Number: XXXXXXXXXXXX1000  
Card Owner: KRYSHAK/VIOLET N  
Entry Method: Chip  
Auth Code: 828647  
APPLAB: AMERICAN EXPRESS  
AID: A000000025010001  
TC:

1 Triple Berry Acai	11.79
1 Beauty Brew Latte	7.69
<b>Subtotal</b>	<b>19.48</b>
Sales Tax	1.84
<b>Total</b>	<b>21.32</b>
AMEX - xxxx1000	21.32
<b>AMOUNT</b>	<b>21.32</b>
TIP	3.00
<b>TOTAL</b>	<b>24.32</b>

Tuesday Lunch: MAX \$22

COTTONWOOD HEIGHTS C  
7146 S HIGHLAND DR  
SALT LAKE CITY, UT, 84121-3704  
801-947-0160

Server ID: 1

**Sale**

XXXXXXXXXX1000  
AMEX Entry Method: Chip

Amount: \$ 20.05  
Tip: 13.95  
**Total: \$ 24.00**

Gratuity Guidelines:  
15% = 3.01  
20% = 4.01  
25% = 5.01

10/14/25 18:49:52  
Inv #: 000000018 Appr Code: 880495  
Approved: Online

AMERICAN EXPRESS  
AID: A000000025010001  
TVR: 00 00 00 00 00  
TST: F8 00

I agree to pay above total amount according to card issuer agreement (Merchant agreement if credit voucher)

*[Signature]*  
KRYSHAK/VIOLET N  
Merchant Code

**Guest Check**

TABLE	GUESTS	SEAT #	TABLE #
		82 <sup>A</sup>	1085-34
			+13.99
			Avoc Tlayut Swiss
			S. Fruit + 4.49
			(Tolo)
			\$ 20.05

Flights: \$636.96

\$318.48 + \$183.10 + \$210.98 = \$712.56

Tuesday, 14Oct	DEPART	ARRIVE
DELTA 2716 Delta Main Classic (X)	MILWAUKEE 07:30AM	SALT LAKE CITY 09:58AM

Passenger Name: VIOLET  
KRYSHAK  
SkyMiles #\*\*\*\*\*044

FLIGHT	SEAT
DELTA 2716	18C

**Flight Receipt**

Ticket #: 0062361649012  
Place of Issue:  
Issue Date: 02SEP25  
Expiration Date: 02SEP26

METHOD OF PAYMENT	
AX*****1000	\$318.48 USD
CHARGES	
Air Transportation Charges	
Base Fare	\$282.03 USD
Taxes, Fees and Charges	
United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)	\$5.60 USD
United States - Transportation Tax (US)	\$21.15 USD
United States - Passenger Facility Charge (XF)	\$4.50 USD
United States - Flight Segment Tax (ZP)	\$5.20 USD
<b>TICKET AMOUNT</b>	<b>\$318.48 USD</b>

**Passenger Info**

Name: VIOLET KRYSHAK  
SkyMiles #6495126044

FLIGHT	SEAT
DELTA 4321	Select Seat

Visit [delta.com](http://delta.com) or download the Fly Delta app to view and/or print your receipt. If you purchased an award ticket, you may also view your receipt in My Trips on the website.

Fri, 17OCT	DEPART	ARRIVE
DELTA 4321* Delta Main Classic (O)	SALT LAKE CITY 01:30PM	ST GEORGE 02:41PM

\*DL4321 is operated by SkyWest DBA Delta Connection

**Flight Receipt**

Ticket #: 0062361500392  
Place of Issue:  
Issue Date: 03SEP25  
Expiration Date: 03SEP26

METHOD OF PAYMENT	
AX*****1000	\$183.10 USD
CHARGES	
Air Transportation Charges	
Base Fare	\$160.93 USD
Taxes, Fees and Charges	
United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY)	\$5.60 USD
United States - Transportation Tax (US)	\$12.07 USD
United States - Passenger Facility Charge (XF)	\$4.50 USD
<b>TICKET AMOUNT</b>	<b>\$183.10 USD</b>

Flight 1 of 2 (UA6126) Class: United Economy (Y)

Wed, Oct 22, 2025 Wed, Oct 22, 2025

**01:48 PM** **03:45 PM**

St. George, UT, US (SGU) Denver, CO, US (DEN)

Flight Operated by SKYWEST DBA UNITED EXPRESS

Flight 2 of 2 (UA121) Class: United Economy (Y)

Wed, Oct 22, 2025 Wed, Oct 22, 2025

**05:45 PM** **09:08 PM**

Denver, CO, US (DEN) Milwaukee, WI, US (MKE)

**Traveler Details**

KRYSHAKVIOLET  
 eTicket number: 0162328790806 Seats: SGU-DEN 09D  
 Frequent Flyer: UA-XXXXG319 Member DEN-MKE 30F

**Purchase Summary**

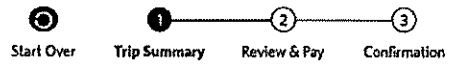
Method of payment: **Master Card ending in 6232**  
 Date of purchase: **Thu, Sep 04, 2025**

Airfare:	177.84
U.S. Transportation Tax:	13.34
Passenger Civil Aviation Security Service Fee:	5.60
U.S. Flight Segment Tax:	5.20
U.S. Passenger Facility Charge:	9.00
<b>Total Per Passenger:</b>	<b>210.98 USD</b>
<b>Total:</b>	<b>210.98 USD</b>

Additional charges may apply for changes in addition to any fare rules listed.

**Comparison:**

Book Better. Fly Better.



**Trip Summary**

<b>Outbound</b>	DL2716			Nonstop, 3h 28m	▼
	MKE · SLC	Tue, Oct 14	7:30am - 9:58am	Main Classic	
<b>Return</b>	DL2619			Nonstop, 2h 55m	▼
	SLC · MKE	Fri, Oct 17	5:35pm - 9:30pm	Main Classic	

Changeable / Nonrefundable



**Trip Total** Currency Calculator

1 Passenger	
<b>Flights</b>	<b>\$564.06</b>
<b>Taxes, Fees &amp; Charges</b>	<b>\$72.90</b>
<b>Amount Due</b>	<b>\$636.96 USD</b>



I chose to take a vacation while in Utah – If I had flown directly home the flight costs would have been \$636.96. I did not charge the city for the difference in cost of \$75.60.

Thursday Dinner: \$32.24

Friday Lunch: MAX \$22

Greek Souvlaki  
1087 S Jordan Pkwy  
South Jordan, UT 84095

Check #109  
Guest Count: 2  
Ordered:

10/16/25 7:18 PM

~~██████████~~  
1 Sm. Pellegrino \$3.95  
~~██████████~~  
1 Lg Village Greek Salad \$14.95  
Chicken Kalamaki \$6.85  
No Onions

Subtotal \$25.85  
Tax \$2.18  
Tip 15% Tip: \$4.21  
Total 32.24 \$51.24

Credit Card Contactless  
Amex xxxxxxxxxxxx  
Time 7:18 PM

Transaction Type Sale  
Authorization Approved  
Approval Code 807325  
Payment ID zdwJFmWphmMH  
Application ID A000000025010901  
Application Label AMEX CREDIT  
Merchant ID 324000000019  
Card Reader BBPOS

VALUED CUSTOMER

# Gourmandise

Gourmandise Euro Diner and Bakery  
SLC Concourse B, N 4000 W  
Salt Lake City, UT 84116

10/17/2025, 12:12 PM  
Server:  
Invoice: 251017-11-253

CHECK: 253

Credit Sale Status: 000000

Card Type: AMEX  
Card Number: XXXXXXXXXXXXX1000  
Card Owner: KRYSHAK/VIOLET N  
Entry Method: Chip  
Auth Code: 354964  
APPLAB: AMERICAN EXPRESS  
AID:  
TC:

1 Mediterranean Nicoise Salad (GF) \$14.90  
Apricot Vinaigrette  
1 Soup (Cup)  
Roasted Carrot Coconut Curry (GFV)

Subtotal \$19.90  
Sales Tax \$1.88  
Tip \$4.22  
Total \$26.00

Friday Dinner: MAX \$33

Benja Thai & Sushi  
2 W St George Blvd  
St George, UT 84770  
ph 435-628-9538

BENJA THAI & SUSHI  
2 West St. George Blvd.

9:4 - TABLE: 9 - 1 Guest  
Your Server was Bailey Schow  
10/17/2025 8:34:43 PM - ID #: 0423254  
Subtotal \$26.90  
Total Taxes \$2.08  
Grand Total \$28.98

Credit Purchase  
Name :KRYSHAK/VIOLET N  
CC Type :Amex  
CC Num :XXXX XXXX XXXX 1000  
Entry Method :CHIP READ/CONTACT  
AID :A000000025010801  
TVR :0000008000  
IAD :06640103A02002  
TSI :E800  
Reference :529102800211  
Approval :827937  
Server :Bailey Schow  
Ticket Name :9:4

Payment Amount: \$28.98

Tip: 6.02

Total: \$35.00

X  
15% \$4.35    20% \$5.80    25% \$7.25  
I agree to pay the amount shown above.

www.BenjaThai.com  
435-628-9538

### Appetizers

#### Benja's Spring Rolls

Fried rolls, vermicelli noodles, chicken, shrimp, pork, celery and cabbage served with sweet chilli sauce.

\$9.95 +

#### Chicken Satay

4 chicken skewers, marinated in yellow curry served with cucumber sauce and peanut sauce.

\$12.95 +

#### Potstickers

Ground pork dumplings served with soy ginger sauce either deep fried, pan fried, or steamed.

\$10.95 +

#### Bonsai Roll

Spicy tuna, cream cheese, cucumber with avocado and tuna.

\$15.95 +

#### Mountain Top Roll

Tuna, crabstick, mayo and avocado with eel sauce and tobiko.

\$14.95 +

#### Caterpillar Roll

Eel, cucumber topped with avocado, eel sauce, and tobiko.

\$14.95 +

This is the digital menu for online ordering – I believe the dollar difference is that the Chicken Satay appetizer was 1 dollar less at the restaurant.

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Jan 31, 2025

City of Milwaukee CCD+ 182380581849 CCD  
ID: H396005532

\$38,685.12

\$140.56





**Cc:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Subject:** Travel Follow-up

Aaron,

The attached email string shows the history of the APHA student membership:

1. I asked Lindsey and Tyler about any policies prohibited Violet from signing up for the membership.
2. Lindsey replied (no reply from Tyler) asking if she was a student (yes); no policies were noted.
  - Lindsey's note is asking if she is eligible for the student rate because she is not a full-time student – thus, contact the conference to determine eligibility.
3. The conference allowed part-time students, thus the approval.

This being said, and seeing the approval in writing, with no policy prohibiting it, I do ask on behalf of Violet for reconsideration.

In addition, Violet does have two remaining questions for you below.

Thanks so much for your continued attention to this!  
Christine

**From:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Sent:** Tuesday, September 30, 2025 2:53 PM  
**To:** Westrich, Christine <chwest@milwaukee.gov>  
**Subject:** Travel Follow-up

Hi Christine,

Just wanted to follow up with a couple of updates from the meeting yesterday. Can you share with Aaron?

1. I believe the staff member I spoke with at the Comptroller's Office was named Candace King.
2. I've also attached the email with Lindsey O.'s response regarding the APHA student membership purchase.

When he has a chance, I'd appreciate Aaron's help with:


1. A contact at the Comptroller's Office for direct follow-up
2. Clarification on the appeal process — I believe he mentioned the Clerk's Office?

Best,  
Violet Kryshak, NREMT, CHES  
*Emergency Preparedness Environmental Health Coordinator*  
Pronouns: She • Her • Hers  
City of Milwaukee Health Department  
Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#)

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**CITY OF MILWAUKEE**  
**HEALTH DEPARTMENT**

 Outlook

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**RE: Travel Follow-up**

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**From** Szopinski, Aaron <aszopin@milwaukee.gov>  
**Date** Wed 10/1/2025 5:04 PM  
**To** Westrich, Christine <chwest@milwaukee.gov>  
**Cc** Kryshak, Violet <vkrysh@milwaukee.gov>

 1 attachment (436 KB)

MHD Travel Policy Feb 12 2024.pdf;

There is a difference between approval/authority and allowability/eligibility. The personal membership to APHA is not an eligible travel cost or appropriate expense for City payment, no matter who approves it, even the Commissioner.

MHD determines eligibility of all expenses. The Comptroller establishes the City's payables policies and standards, and MHD abides by those. We do not apply different standards and there is no picking or choosing between policies. No policy supersedes another.

All policies are in place to assure transparency and accountability for spending of public funds. They assure that City expenditures comply with government accounting standards as well as basic financial controls required of any corporation, government, or non-profit.

After our discussion this week and given the considerable amount of time and energy diverted to reviewing and re-reviewing this already, I have decided I will not spend more time on this. It will not be reimbursed, and as we discussed, the \$7.24 owed to the City on balance for the 3 trips will also not be recouped from Violet. These are done, and we are moving on.

Travelling for City business is a privilege, it is not guaranteed nor required for anyone at MHD or any City employee or elected official. Exercising that privilege and spending public funds for travel comes with responsibility, which is laid out in our Travel Policy, the DOA and Comptroller forms and guidance, and the City Code of Ordinances.

There is not a fairness requirement for reimbursement, and there is no guarantee or requirement anywhere that expenses are reimbursed in full for any employee travelling on City business. The standards for documentation and allowable expenses are not negotiable, nor is the City required to reimburse employees for any and all travel expenses the employee thinks should be reimbursed.

There is no appeal process for travel reimbursement. Violet is welcome to take this up with anyone she chooses to.

**Aaron Szopinski**  
**Budget & Administration Manager**  
City of Milwaukee Health Department  
414.286.3384p  
414.708.0394c

**From:** Westrich, Christine <chwest@milwaukee.gov>  
**Sent:** Tuesday, September 30, 2025 15:49 PM  
**To:** Szopinski, Aaron <aszopin@milwaukee.gov>



Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Before Crisis, Build Community: Stronger Public Health Communications Through Community Engagement**  
Room 206 A

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Behind the Scenes of Healthcare Preparedness for the DNC: Lessons for Any Large-Scale Event**  
Room 214 C

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Building Resiliency Through the Pickaway Overdose Response Team (PORT): A Community-Centered Approach to Overdose Preparedness and Recovery.**  
Room 215

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Collaborative Collaborators: How National Non-Profit Member Organizations Work Together in Support of Public Health Preparedness and Response**  
Room 216 A

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Democratizing AI Planning with Large**

Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**International Nuclear Emergency Exercise 6 Overview and Lessons Learned**  
Room 207 A

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Overview Of Bomb-Making Materials Awareness Program (BMAP) / Operation Flashpoint**  
Room 210 A

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Reducing Health Disparities In Emergency Preparedness: Lessons from COVID-19 Vaccination in Massachusetts**  
Room 214 A

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Stories from the Panhandle: Taking Care of the Public Health during a Rural Wildfire**  
Room 211

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Tribal and State Collaboration on Public Health Emergency Preparedness in Utah**  
Room 207 B

Tuesday, Apr 29th @ 5:30 pm - 6:30 pm

Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Democratizing AI Planning with Large Language Models**  
Room 217 B

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Enhancing Confidence in the Public Health Emergency Workforce: Strategies for Training and Leadership**  
Room 217 D

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Exercising Response Readiness for Jurisdictional Emergency Preparedness**  
Room 006 C (River Level)

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**IMATS: It Makes Asset Tracking Simple**  
Room 209

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
**Incorporating Maternal and Child Health Considerations in Emergency Preparedness and Response Practices: Building Local Health Department Capacity Through Cross-Training**  
Room 217 A

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm

Results (64)

**TUESDAY - APRIL 29, 2025**

Tuesday, Apr 29th @ 1:30 pm - 3:00 pm  
From Chaos to Care: How a Rural Public Health Agency Used Grief Recovery in Response to a Deadly Tornado  
Room 211

Tuesday, Apr 29th @ 1:30 pm - 3:00 pm  
Preparing with the Whole Community: Integrating People with Disabilities into Planning, Response, and Recovery  
Room 216 A

Tuesday, Apr 29th @ 3:00 pm - 3:30 pm  
Afternoon Break  
Exhibit Hall A

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
A PRUSSIAN BLUEprint for Success - Engaging Partners in Radiological Incident Tabletop Exercises  
Room 206 A

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
An Impact Evaluation of the Disability and Preparedness Specialist Program  
Room 214 B

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm

Results (64)

**TUESDAY - APRIL 29, 2025**

Tuesday, Apr 29th @ 3:30 pm - 5:00 pm  
CDC and ASPR-Session on Preparedness, Readiness, and Response (option 1)  
Room 212 A

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Creating DIY JITT Videos: A Local Health Department's Emergency Response Media Project  
Room 217 B

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Developing a Mobility Impaired Community Reception Center for Evacuating During a Radiological Emergency  
Room 207 A

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Educating the Public and Policymakers: Strategically Planning Communications to Serve Dual Purposes  
Room 217 D

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Expanding the Framework: Reinforcing Resilience in All Healthcare Facilities  
Room 209

Results (64)

**TUESDAY - APRIL 29, 2025**

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Arizona Behavioral Health Hospital Evacuation - Story From the Field  
Room 214 D

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Become a Disaster Doula: How to Improve Outcomes By Letting Go of Recovery  
Room 214 C

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Blazing the Trail: Burn Disaster Readiness in the Midwest  
Room 210 A

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Building Community Resilience with Resilience Hubs in Minneapolis  
Room 215

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Building a Community Resilience Program: Reducing Health Disparities and Incorporating Non-Medical Drivers of Health into Public Health Preparedness  
Room 205

Tuesday, Apr 29th @ 3:30 pm - 5:00 pm

Results (64)

**TUESDAY - APRIL 29, 2025**

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
One Size Fits None: Flexible Tools for Disaster Preparedness  
Room 217 C

Tuesday, Apr 29th @ 3:30 pm - 4:15 pm  
Rabies and Tuberculosis: Leveraging Community Partnerships to Respond to Near-Simultaneous Public Health Emergencies in Omaha, Nebraska  
Room 211

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
Addressing Extreme Heat Through Regional Collaboration: Lessons from the Pacific Northwest Applicable to YOUR Region  
Room 214 D

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
Addressing Health Disparities During a Public Health Emergency Response  
Room 206 B

Tuesday, Apr 29th @ 4:30 pm - 5:15 pm  
Addressing Rural Mental Health Through RAPID Psychological First Aid  
Room 006 A (River Level)

Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**Bidirectional Data Sharing: Communicating with State, Local, and Federal Partners for Data Readiness**  
Room 209

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**Bridging the Gap Between the FBI and Disaster Preparedness and Response Community: What is Your Plan?**  
Room 207 A

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**Clean Water Access During Emergencies**  
Room 210 A

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**Disaster Epidemiology's Road from Response to Recovery: Partnerships, Data Sharing, and Rapid Analytics to Improve Effectiveness and Efficiency of Public Health Emergency Preparedness and Response**  
Room 205

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**Enhancing BioSense with the Power of AI to Better Address Current and Future Emergency Challenges**

Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 9:30 am - 10:00 am  
**Morning Break**  
HemisFair Function Area

Tuesday, Apr 29th @ 10:00 am - 12:00 pm  
**Opening Session-Operating in the Gray: Exploring the Evolving Public Health Preparedness System**  
HemisFair Ballroom

Tuesday, Apr 29th @ 12:00 pm - 6:30 pm  
**Exhibit Hall**  
Exhibit Hall A

Tuesday, Apr 29th @ 12:00 pm - 6:30 pm  
**Game Pavillion**  
Exhibit Hall A

Tuesday, Apr 29th @ 12:00 pm - 6:30 pm  
**NACCHO Booth**  
Exhibit Hall A

Tuesday, Apr 29th @ 12:00 pm - 2:00 pm  
**Pet Therapy**  
Exhibit Hall A

Tuesday, Apr 29th @ 12:00 pm - 2:00 pm  
**Wellness Area**

Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**From Ad-Hoc to Action: Integrating Resilience to Extreme Weather Events into Public Health**  
Room 214 D

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**It's the Heat That Will Get You: Building Capacity for Public Health in Preventing Heat-Related Illness.**  
Room 214 B

Tuesday, Apr 29th @ 8:00 am - 6:00 pm  
**MAPP-Mobilizing for Action through Planning and Partnerships 2.0 Training**  
Room 006 B (River Level)

Tuesday, Apr 29th @ 8:00 am - 9:30 am  
**MMR...You Ready?**  
Room 214 C

Tuesday, Apr 29th @ 8:00 am - 5:00 pm  
**Nursing Mother's Room**  
Nursing Mother's Room 2137

Tuesday, Apr 29th @ 8:00 am - 5:00 pm  
**Quiet Room**  
Room 008 A/B (River Level)-Quiet Room

Results (64)

TUESDAY - APRIL 29, 2025

Tuesday, Apr 29th @ 1:30 pm - 3:00 pm  
**Building Beyond the Table in TTXs**  
Room 210 A

Tuesday, Apr 29th @ 1:30 pm - 3:00 pm  
**Building Local Health Department Capacity in Disease Forecasting and Outbreak Analytics-Lessons Learned from NACCHO's 2023-2024 Demonstration Site Project**  
Room 214 D

Tuesday, Apr 29th @ 1:30 pm - 3:00 pm  
**Building Resilience to Weather-Related Events through Technology and Community Engagement**  
Room 205

Tuesday, Apr 29th @ 1:30 pm - 3:00 pm  
**Connecting People and Systems for Recovery: Hoopa Valley Tribe's Epidemiological Approach to Advance Health and Social Services Recovery**  
Room 214 C

Tuesday, Apr 29th @ 1:30 pm - 2:30 pm  
**Emergency Readiness and Response: Engaging Communities and Integrating Health Equity**

Best,  
Violet Kryshak, NREMT, CHES  
Emergency Preparedness Environmental Health Coordinator  
Pronouns: She · Her · Hers  
City of Milwaukee Health Department  
Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#)

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# CITY OF MILWAUKEE HEALTH DEPARTMENT

EVERYDAY PREPARED. EVERYONE HEALTHY.

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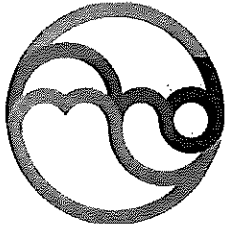
**From:** Smith, Toni <[tonismith1@milwaukee.gov](mailto:tonismith1@milwaukee.gov)>  
**Sent:** Thursday, July 24, 2025 10:50 AM  
**To:** Kryshak, Violet <[vkrysh@milwaukee.gov](mailto:vkrysh@milwaukee.gov)>  
**Subject:** NACCHO Prep Summit Statement of Expense

The comptroller sent back your reimbursement for the NACCHO Summit. Was your return flight delayed and/or rerouted to MN. You have receipts for breakfast on 5/3 but your return flight was scheduled to be back the night of 5/2

Thank You,

**Toni Smith, MBA**  
Management Accountant, SR | Budget & Administration  
Pronouns: *She/Her/Hers*  
City of Milwaukee Health Department IZMB  
841 N. Broadway, 3<sup>rd</sup> | Milwaukee, WI 53202 | o: (414) 286-2952 | m: (414) 331-3078  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#) | [Instagram](#)

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## CITY OF MILWAUKEE HEALTH DEPARTMENT

EVERYDAY PREPARED. EVERYONE HEALTHY.

---

**From:** Kryshak, Violet <[vkrysh@milwaukee.gov](mailto:vkrysh@milwaukee.gov)>  
**Sent:** Friday, July 25, 2025 11:27 AM  
**To:** Smith, Toni <[tonismith1@milwaukee.gov](mailto:tonismith1@milwaukee.gov)>  
**Subject:** Re: NACCHO Prep Summit Statement of Expense

See attached.

Thank you,  
 Violet Kryshak, NREMT, CHES  
*Emergency Preparedness Environmental Health Coordinator*  
 Pronouns: She • Her • Hers  
 City of Milwaukee Health Department  
 Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#)

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## CITY OF MILWAUKEE HEALTH DEPARTMENT

EVERYDAY PREPARED. EVERYONE HEALTHY.

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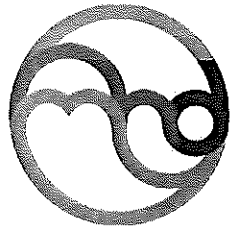
**From:** Smith, Toni <[tonismith1@milwaukee.gov](mailto:tonismith1@milwaukee.gov)>  
**Sent:** Friday, July 25, 2025 11:17 AM  
**To:** Kryshak, Violet <[vkrysh@milwaukee.gov](mailto:vkrysh@milwaukee.gov)>  
**Subject:** RE: NACCHO Prep Summit Statement of Expense

Thanks for the quick response. I do remember you asking about this. I just need the email from the airline stating the delay

Thank You,

**Toni Smith, MBA**  
**Management Accountant, SR | Budget & Administration**  
 Pronouns: *She/Her/Hers*  
 City of Milwaukee Health Department | ZMB  
 841 N. Broadway, 3<sup>rd</sup> | Milwaukee, WI 53202 | o: (414) 286-2952 | m: (414) 331-3078  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#) | [Instagram](#)

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**From:** Kryshak, Violet <[vkrysh@milwaukee.gov](mailto:vkrysh@milwaukee.gov)>  
**Sent:** Thursday, July 24, 2025 11:27 AM  
**To:** Smith, Toni <[tonismith1@milwaukee.gov](mailto:tonismith1@milwaukee.gov)>  
**Subject:** Re: NACCHO Prep Summit Statement of Expense

Hi Toni -

Thank you for reaching out! I previously sent an email requesting guidance regarding my travel situation, which was impacted by an unexpected overnight delay in Minneapolis (see attachment).

However, according to the MHD Travel policy, my breakfast on May 3rd should be eligible for reimbursement regardless. Even with the original flight itinerary, I would have remained in travel status past midnight (arriving at MKE airport at 11:54 p.m).

If any further documentation or clarification would be helpful, I'm happy to provide it.

EVERYDAY PREPARED. EVERYONE HEALTHY.

From: Smith, Toni <tonismith1@milwaukee.gov>  
Sent: Friday, August 29, 2025 10:40 AM  
To: Kryshak, Violet <vkrysh@milwaukee.gov>  
Subject: RE: NACCHO Prep Summit Statement of Expense

Good Morning,

A check was sent out 8/11/25

*Remit to	038338	Gross Amount	1,938.98	USD	Scheduled Due	07/09/2025
Location	000001	Discount	0.00	USD	Net Due	05/02/2025
*Address	1				Discount Due	
					Accounting Date	08/11/2025

VIOLET KRYSHAK  
1812 E LAFAYETTE PL UNIT 204  
MILWAUKEE, WI 53202-1193

it Options

*Bank	USB	Pay Group		*Netting	Not Applicable
*Account	APCK	*Handling	Auto Clearing House	L/C ID	
*Method	ACH	Hold Reason		▼ Actions	
Message					

age will appear on remittance advice.

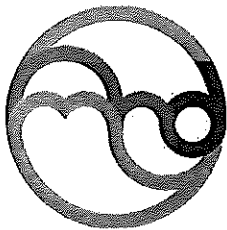
le Payment

*Action	Schedule Payment	Payment Date	08/11/2025
Pay		Reference	00069249

Thank You,

Toni Smith, MBA  
Management Accountant, SR | Budget & Administration  
Pronouns: She/Her/Hers  
City of Milwaukee Health Department IZMB  
841 N. Broadway, 3<sup>rd</sup> | Milwaukee, WI 53202 | o: (414) 286-2952 | m: (414) 331-3078  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#) | [Instagram](#)

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From: Kryshak, Violet <vkrysh@milwaukee.gov>  
Sent: Friday, August 29, 2025 8:38 AM  
To: Smith, Toni <tonismith1@milwaukee.gov>  
Subject: Re: NACCHO Prep Summit Statement of Expense

Hello Toni -

Can you provide an update on my reimbursement for the April NACCHO Preparedness Summit? I checked the 2025 Travel Log, and it indicates it was vouchered on July 9th, but I have not yet received the reimbursement.

Best,  
Violet Kryshak, NREMT, CHES  
Emergency Preparedness Environmental Health Coordinator  
Pronouns: She · Her · Hers  
City of Milwaukee Health Department  
Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)

Hi Toni -

I have attached the full agenda for Tuesday. As you can see, there is nothing marked as lunch or indicating a lunch would be provided to all attendees. Could you please reprocess this ASAP for the remaining balance of \$14.77? If the comptroller has similar concerns in the future, please contact me before processing the payment.

Thank you,  
Violet Kryshak, NREMT, CHES  
Emergency Preparedness Environmental Health Coordinator  
Pronouns: She • Her • Hers  
City of Milwaukee Health Department  
Cell: (414) 208-7800  
violet.kryshak@milwaukee.gov  
www.milwaukee.gov/health | Facebook | Twitter

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# CITY OF MILWAUKEE HEALTH DEPARTMENT

EVERYDAY PREPARED. EVERYONE HEALTHY.

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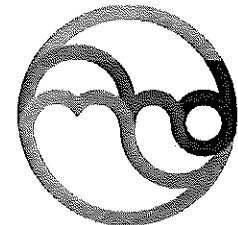
**From:** Smith, Toni <tonismith1@milwaukee.gov>  
**Sent:** Friday, August 29, 2025 11:53 AM  
**To:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Subject:** RE: NACCHO Prep Summit Statement of Expense

No mistake \$1,938.98 is correct. On the agenda it states lunch was provided on 4/29 so the comptroller disallowed this expense. I know you added a note about this but per the comptroller they have to go with what is on the agenda. If you have an updated agenda I can create an adjusting entry but without proper documentation the comptroller will not reimburse this expense

Thank You,

**Toni Smith, MBA**  
Management Accountant, SR | Budget & Administration  
Pronouns: She/Her/Hers  
City of Milwaukee Health Department IZMB  
841 N. Broadway, 3<sup>rd</sup> | Milwaukee, WI 53202 | o: (414) 286-2952 | m: (414) 331-3078  
www.milwaukee.gov/health | Facebook | Twitter | Instagram

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**From:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Sent:** Friday, August 29, 2025 11:00 AM  
**To:** Smith, Toni <tonismith1@milwaukee.gov>  
**Subject:** Re: NACCHO Prep Summit Statement of Expense

Hi Toni -

My apologies, I had somehow missed the email regarding the digital transfer! However, the amount is off by \$14.77. Could you investigate how this error occurred?

Best,  
Violet Kryshak, NREMT, CHES  
Emergency Preparedness Environmental Health Coordinator  
Pronouns: She • Her • Hers  
City of Milwaukee Health Department  
Cell: (414) 208-7800  
violet.kryshak@milwaukee.gov  
www.milwaukee.gov/health | Facebook | Twitter

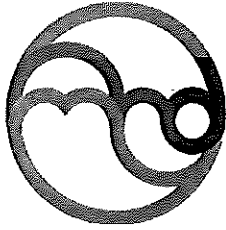
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# CITY OF MILWAUKEE HEALTH DEPARTMENT

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**From:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Sent:** Tuesday, September 2, 2025 9:59 AM  
**To:** Smith, Toni <tonismith1@milwaukee.gov>  
**Subject:** Re: NACCHO Prep Summit Statement of Expense

Here is additional confirmation:

### Sponsored Lunch



Preparedness Summit Registration <prepsummitreg@naccho.org>



To: Kryshak, Violet

Tue 9/2/2025 9:57 AM

Hi Violet,

I did some checking with my colleagues and it has been confirmed that lunch for all attendees was only provided on Wednesday and Thursday.

Kindly,

**Daniel Shaffer**  
Registration Coordinator  
National Association of County and City Health Officials  
1201 I Street NW Fourth Floor | Washington, DC | 20005  
**Main: 202-783-5550 | Direct: 202-938-3139**  
**E-mail: [dshaffer@naccho.org](mailto:dshaffer@naccho.org)**  
**[www.naccho.org](http://www.naccho.org)**

Violet Kryshak, NREMT, CHES  
*Emergency Preparedness Environmental Health Coordinator*  
Pronouns: She • Her • Hers  
City of Milwaukee Health Department  
Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)  
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**From:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Sent:** Friday, August 29, 2025 3:04 PM  
**To:** Smith, Toni <tonismith1@milwaukee.gov>  
**Subject:** Re: NACCHO Prep Summit Statement of Expense



0

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**Re: NACCHO Prep Summit Statement of Expense**


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**From** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Date** Mon 10/6/2025 4:00 PM  
**To** Smith, Toni <tonismith1@milwaukee.gov>

Hi Toni -

Can you provide an update?

Best,  
 Violet Kryshak, NREMT, CHES  
*Emergency Preparedness Environmental Health Coordinator*  
 Pronouns: She • Her • Hers  
 City of Milwaukee Health Department  
 Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)  
[www.milwaukee.gov/health](http://www.milwaukee.gov/health) | [Facebook](#) | [Twitter](#)

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**From:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Sent:** Tuesday, September 2, 2025 1:41 PM  
**To:** Smith, Toni <tonismith1@milwaukee.gov>  
**Subject:** Re: NACCHO Prep Summit Statement of Expense

Hi Toni -

I understand that the "Schedule at a Glance" did not differentiate between "Sponsored Lunch in Exh Hall" and "Lunch in the Exh Hall." I have already informed the planners that this should be clarified in the future. I have also provided three additional sources that confirm lunch was not provided to all attendees on Tuesday. Thank you for rectifying this with the Comptroller's Office.

Best,  
 Violet Kryshak, NREMT, CHES  
*Emergency Preparedness Environmental Health Coordinator*  
 Pronouns: She • Her • Hers  
 City of Milwaukee Health Department  
 Cell: (414) 208-7800  
[violet.kryshak@milwaukee.gov](mailto:violet.kryshak@milwaukee.gov)  
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**From:** Smith, Toni <tonismith1@milwaukee.gov>  
**Sent:** Tuesday, September 2, 2025 10:32 AM  
**To:** Kryshak, Violet <vkrysh@milwaukee.gov>  
**Subject:** RE: NACCHO Prep Summit Statement of Expense

Please see page 3. The agenda states 4/29 lunch will be provided. I need to check with the comptrollers office to see if they will allow the additional expense. In the future I will notify you if any expenses are disallowed

Thank You,

**Toni Smith, MBA**  
**Management Accountant, SR | Budget & Administration**  
 Pronouns: She/Her/Hers  
 City of Milwaukee Health Department IZMB  
 841 N. Broadway, 3<sup>rd</sup> | Milwaukee, WI 53202 | o: (414) 286-2952 | m: (414) 331-3078

**!BON VOYAGE!**

? QUESTIONS ?



CITY OF MILWAUKEE  
**HEALTH DEPARTMENT**



# HELP US HELP YOU

- **MHD Finance's role**

- Administer and authorize travel within City Code & policies
- Provide tools to make travel easy for you
- Validate and route travel documents
- Calculate and process reimbursements & invoices

- **Not MHD Finance's role**

- Interpreting and evaluating receipts
- Compiling or organizing receipts
- Traveler support
- Booking or re-booking
- Managing documents



CITY OF MILWAUKEE  
HEALTH DEPARTMENT

# REIMBURSEMENT

- **All submissions** will be made through Microsoft Forms
  - Upload Excel and ALL receipts/docs as single PDF
  - Submission is logged, reviewed, and finalized by Finance
- Final documents routed by DocuSign for approval
- **Once your signed docs are received, payment in <30 days!**

# RECEIPTS & OTHER DOCS

## OTHER FORMS ACCEPTED

- Don't need paper receipts, but need receipts on paper
- Email showing: detail/items, cost, *and* proof of payment
- Hotel check out statements: show charges, payment, & zero balance
- Mileage: Google map showing one-way & mileage
- Bus/rail tickets w/ price and date of purchase
- Airline baggage/ticket stubs with pricing & proof of payment
- Bank statement/banking screenshot not acceptable
- Photos of receipts - OK ***if legible***
- App or website that generates/manages receipts & meets criteria – acceptable – you must still produce receipts and documentation yourself.

# STATEMENT OF EXPENSES

- The companion to your Travel Request Form
  - TRF = budget
  - Statement of Expenses = actual
- Submit w/ receipts and docs <15 days after return
- Includes ALL expenses, even those you didn't pay
- Complete top portion w/ Name, Address, EIN, trip info
- One trip = one submission
- **Finance will do the rest!**

CBP-211 (REV. 02/2021)  
**Statement of Expenses Incurred for the City of Milwaukee**  
 Please read the instructions carefully before completing.

Voucher Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Title: \_\_\_\_\_ Employee ID: \_\_\_\_\_ Employee's Address: \_\_\_\_\_

Organization: \_\_\_\_\_ Authority: \_\_\_\_\_ Authorized Amount: \_\_\_\_\_ Travel Advance Amount: \_\_\_\_\_

Destination: \_\_\_\_\_ THE EXPENSES INCLUDED ON THIS FORM ARE FOR THE FOLLOWING ADDITIONAL PERSONS (LIST NAME AND TITLE): \_\_\_\_\_ PURPOSE OF THE TRIP: \_\_\_\_\_

Dates of Travel: \_\_\_\_\_ # of Approved Days: \_\_\_\_\_

Account (4 digit code): \_\_\_\_\_ Fund (4 digit code): \_\_\_\_\_ Dept ID (4 digit code): \_\_\_\_\_ Program (4 digit code): \_\_\_\_\_ Class (4 digit code): \_\_\_\_\_ Department (4 digit code): \_\_\_\_\_ Project (from 112 digit code): \_\_\_\_\_

**\*\*EXPENSES ELIGIBLE FOR REIMBURSEMENT\*\***

Under § 350-182 of the code of ordinances providing rules for reimbursement of expenses for attendance at seminars and conventions and other city travel, generally the City shall pay for the actual expense for transportation (up to cost of a single rate for the number of days in attendance but not to exceed five days), and other necessary expenses. Exceptions may be made on a case by case basis at the discretion of the Department Head or supervisor.

**REIMBURSABLE EXPENSES**

**Meal Allowance:** \_\_\_\_\_ Voucher Number: \_\_\_\_\_

1. Actual Meals (NOT PROVIDED BY EVENT) \_\_\_\_\_

2. Max Meal Allowance (FOR MEALS NOT PROVIDED) \_\_\_\_\_

Breakfast \_\_\_\_\_

Lunch \_\_\_\_\_

Dinner \_\_\_\_\_

3. Meal Reimbursement: (Lesser of 1 and 2) \_\_\_\_\_

**Transportation Expenses**

Current Mileage Rate: \_\_\_\_\_ Voucher Number: \_\_\_\_\_

Statement of Expenses (CBP-211) | Additional Information

# RECEIPTS

- Receipts should be kept for EVERY expense, yours and City's
- Travelers have sole responsibility for receipts
- Meal receipts are required by MHD policy
- Pictures – acceptable, IF legible
- ProTip: Mark/label expenses
  - "Breakfast Mon. Feb. 5"
  - "Baggage fee – MKE-ATL"



*Lunch*

**HAROLDS CHICKEN**  
1361 N MILWAUKEE AVE  
CHICAGO, IL 60622  
7732522424

**ORDER: 12**  
Takeout

Cashier: Ms. C  
29-Apr-2022 12:48:34P  
Transaction 028098

1 G WINGS	\$13.99
Hot Honey	\$0.00
sauce on the side	\$0.00

Subtotal \$13.99  
Sales tax 10.5% \$1.47  
Service Charge (5.0%) \$0.70

**Total \$16.16**

DEBIT CARD SALE \$16.16

29-Apr-2022 12:49:12P  
\$16.16 | Method: EMV

Reference ID: 211900650766 | Auth ID: 216690  
MID: \*\*\*\*\*1886  
AID: A000000980840  
AuthNtwkNm: VISA  
RInid: CREDIT  
SIGNATURE VERIFIED

Due to rising costs on credit card processing we have added a non-cash service fee to all non-cash transactions at 5%

.....  
How are we doing?  
Text "x6setb" to 73752  
to send us your feedback  
.....

Online: <https://clover.com/p/PEHNGE15XQ60Y>

Order MB9J149JJV93M  
Payment PEHNGE15XQ60Y

Clover Privacy Policy  
<https://milwaukee.gov>

**HYATT REGENCY OHARE**  
9300 BRYN MAWR AVE, KELLY  
TODDJA  
ROSEMONT, IL 60018  
8476961234

Cashier: Angela  
27-Apr-2022 12:01:41P  
Transaction 007926

1 Beverages	\$3.00
1 Peccoli Cheddar Soup	\$6.00
1 Grilled Cheese Burger	\$10.00

**Total \$19.00**

CREDIT CARD AUTH \$19.00  
VISA 1123

27-Apr-2022 12:02:01P  
\$19.00 | Method: EMV

Reference ID: 211700639820  
Auth ID: Q27406  
MID: \*\*\*\*\*2882  
AID: A000000031010  
AuthNtwkNm: VISA

Prices include Local and State Taxes

Online: <https://clover.com/p/Q6XFFKG2SVG4W>

Order CC0F814B5FS1Y  
Payment Q6XFFKG2SVG4W

Clover Privacy Policy  
<https://clover.com/privacy>

**Proof of payment**

# TRAVEL FORTH!

- **Keep your receipts for all expenses**
  - Not just what you paid for
  - City paid expenses
  - Sponsor-paid costs (estimates acceptable)
- **All receipts need to include:**
  - Location
  - Date & time
  - Itemized summary
  - Total purchase amount
  - Payment confirmation – *MC #####-9999, VISA -1234, "CASH", etc.*
- Submit **Statement of Expenses** within 15 days of return

# ONLINE BOOKING

## SAP CONCUR-AZUMANO TRAVEL

# BOOKING

YOU HAVE CHOICES!

- **1** Book on your own for airfare, hotel, etc.
  - Pre-pay, use your accounts, non-refundable fares
  - Keep cancelled fares for future use
  - Reimbursed +30 days from SOE submission
- **2** Use MHD's travel vendor CI Azumano
  - SAP Concur travel booking platform
  - Refundable airfare only - points to your accounts!
  - Call to book w/ an agent (best for hotel) 1-888-461-0022
  - Paid on MHD ProCard
  - Traveler support included



# TRAVEL REQUEST

- NEW online/digital-only submission reduces errors and re-work, closes loop for accountability!
- Use Microsoft Forms to submit Travel Request Form & other documents
  - No signatures needed!
- Submission is logged, reviewed, and finalized by Finance
- Final documents routed by DocuSign for approval
- **Once your signed docs are received, proceed to booking!**



CITY OF MILWAUKEE  
HEALTH DEPARTMENT

# TRAVEL REQUEST

## COVERED OR NOT?

Expense	Covered?
Event Rate Lodging (even if above GSA Per Diem)	YES!
Taxi/Rideshare To-From Destination Airport	YES!
Taxi/Rideshare To-From MKE	YES!
Private Vehicle Parking @ MKE	YES!
Taxi/Rideshare @ Destination	NO-ish
"Bookend" Meals (one each arrival/departure day)	YES!
Incidental Expenses (Per Diem)	NO
Alcohol (In Flight or With Meals) or Liquor Tax	NO
Bus/mileage to ORD/MDW (if appropriate)	YES!
Seating upgrade/hotel upgrade	NO (...but <u>you</u> can pay for it!)
Room, airfare, and meal taxes <u>you</u> pay	YES!

# MEALS & PER DIEMS

- An example:

- You are travelling Sunday afternoon for a Monday-Wednesday conference in Philadelphia
- Conference provides lunch each day, and an *optional* hosted dinner on Monday
- Conference ends Wednesday at 2pm, your flight arrives MKE at 8pm
- GSA Per Diems for Philly:

Destination	County	Breakfast	Lunch	Dinner
Philadelphia	Philadelphia	\$18	\$20	\$36

- Per diem is based on “Travel Status” (not at home)

- Dinner Sunday (“bookend”) night on arrival (\$36)
- Breakfast Monday, Tuesday, Wednesday ( $\$18 \times 3 = \$54$ )
- Dinner Tuesday *and* Wednesday (“bookend”) ( $\$36 \times 2 = \$72$ )
- Total meal allowance for trip: **\$162**



# MEALS & PER DIEMS

- Meals **not** provided by the event are reimbursable
- Maximum reimbursable amount is the GSA Per Diem amount for the location
- Maximum is per meal
- Itemized receipts **are** required by MHD

The screenshot displays the GSA Per Diem Rates website. At the top, there is a navigation menu with options like 'Buying & Selling', 'Real Estate', 'Policy & Regulations', 'Small Business', 'Travel', 'Shared Services', 'Technology', and 'About Us'. The main content area is titled 'Per Diem Rates' and includes a search form with fields for 'For Fiscal Year' (2022), 'Select a State', 'City (optional)', and 'Zip'. Below the search form is a map of the United States. The page also features a 'Questions' section with a 'Find COVID-19 Vaccines Near You' button and a 'Download All the PER DIEM RATES' link.

# Request for Travel on Behalf of the City of Milwaukee

Kryshak, Violet, N  
**Last Name, First Name, MI**

---

HEALTH  
**Department**

---

Salt Lake City/West Jordan, UT  
**Destination**

Emergency Response Planning Coordinator  
**Title**

---

10/14/25-10/17/2025  
**Conference/Event Dates**

**Purpose of the Trip and/or Anticipated Benefit**  
 Attending this conference would be valuable because it offers key insights into disaster preparedness, opportunities to collaborate with experts across disciplines, and continuing education credits to support my professional growth. It will help me strengthen emergency response strategies and build connections with key stakeholders in the field.

**Anticipated Funding**

Source:	Amount	Expenses (If Specified)
Department (O&M or CS#)		
Grant (Specify Project Below - GR#, RG#, or CD#)	<u>\$1,258.92</u>	<u>All</u>
<u>2025-26 PHEP GR3801825000</u>		
Other (Specify Below)		
Tuition Reimbursement		

**Anticipated Expenses**

Registration Fees	100.00
<b>Lodging</b>	
Nightly Rate	142.00
Number of Nights	3.00
<b>Total Lodging</b>	<u>\$ 426.00</u>

**Travel Advance**

Requested? No  Yes  Amount -

**Transportation**

	Total Miles
*Personal Vehicle	-
Air	457.36
Rail	
Baggage	
Other (Specify Below)	
a. Ride Shares	121.56
b.	
c.	
<b>Total Transportation</b>	<u>\$ 578.92</u>

**Employee Certification Statement**  
 I hereby certify that:

(1) Attending the event will provide a benefit not offered through other means (online, teleconferencing, etc.) that may be more economical.

(2) The expense estimations listed here were made responsibly and prudence will be exercised in making final travel arrangements and incurring expenses during travel.

(3) I have been made aware of and agree to abide by the rules related to travel as established in the City ordinance and by my department.

(4) I will be prepared to explain any unanticipated expenses or significant discrepancies in anticipated and actual expenses incurred.

(5) I agree to complete and submit a Statement of Expenses Incurred for the City of Milwaukee (CBP-211) no later than 15 days following my return from the requested travel. I understand that failure to do so may result in the forfeiture of any reimbursements due to me.

**Max Meal Allowance**

	Federal Amount for Destination	X	**Number of Meals	=	\$
Breakfast	20.00	X	0	=	-
Lunch	22.00	X	1	=	22.00
Dinner	33.00	X	4	=	132.00
<b>Total Meal Allowance</b>					<u>\$ 154.00</u>

Signed by: Violet Kryshak  
 4B2D4370254 Signature 7/11/2025  
 Date

**PER DIEMS TO BE UPDATED W FFY26 for EXPENSE REPORT**

**Other Anticipated Expenses (Itemize Below)**

a.	
b.	
c.	
<b>Total Other Expenses</b>	<u>\$ -</u>
<b>Total Anticipated Expenses</b>	<u>\$ 1,258.92</u>

**Department Approval** (To be completed by the authorizing entity or designee)

Approval Granted Yes  No

If no, explain here: Provide an explanation for not approving travel (not job related, budget constraints, etc.)

Signed by: Tyler Weber # of Days Approved: 4  
 430E49BEB10A10 Deputy Commissioner 7/14/2025  
 Date

Signed by: Chris Spink  
 Budget & Administration Mgr. 7/14/2025  
 Date

\*Enter in either your anticipated mileage expenses using the appropriate mileage rate OR the current fixed reimbursement amount for Chicago.

\*\*This is equal to the number of meals YOU will be incurring an expense for. Please do not count meals that will be provided as they will not be reimbursed.



## Public Health & Disasters 2025

Event Time: 10/15/2025 8:00:00 AM Location: Viridian Event Center, West Jordan, Utah

### Summary

Public Health and Disasters is an annual, multidisciplinary national conference that brings together professionals from public health, health care, emergency management and other disciplines involved in preparing for, responding to, and recovering from public health emergencies. The conference includes sessions that will be of interest for PHEP Coordinators; emergency planners, epidemiologists, environmental health specialists, and healthcare emergency managers. This year's conference is co-sponsored by the University of Utah Division of Public Health, in collaboration with the Salt Lake County Health Department and the Utah Department of Health.

Start Time: 10/15/2025 8:00:00 AM

End Time: 10/17/2025 2:00:00 PM

### Location Information

Viridian Event Center, West Jordan, Utah <https://www.slcolibrary.org/locations/pdfs/brochure-viridian-event-center.pdf>

### Upcoming Events

There are no upcoming events

### Most Popular Trainings

1 (</www/lms/training-info.aspx?trainingID=212>) Public Health and Disasters Conference 2025 (</www/lms/training-info.aspx?trainingID=212>)



## Summary of Charges

X

### 1 room for 3 night(s)

Tuesday, Oct 14, 2025	142.00 USD
Wednesday, Oct 15, 2025	142.00 USD
Thursday, Oct 16, 2025	142.00 USD

<b>Total Cash Rate</b>	<b>426.00 USD</b>
Estimated Government Taxes and Fees	56.75 USD

**Total for Stay** **482.75 USD**

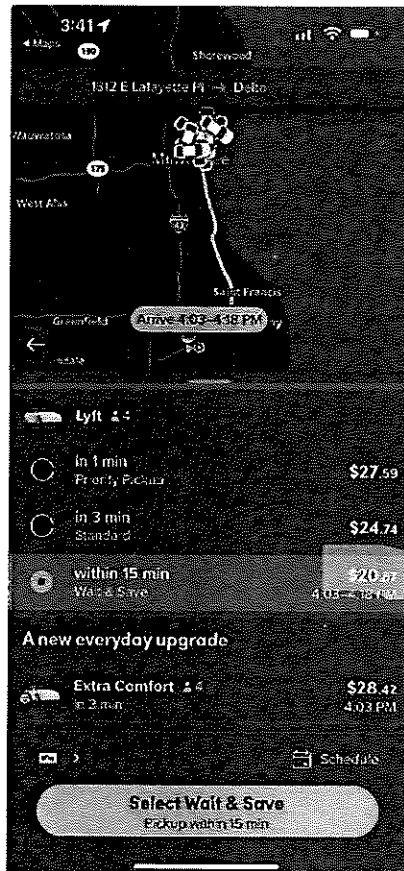
### Additional Charges

Complimentary on-site parking

Changes to taxes or fees implemented after booking will affect the total room price

Uber in Milwaukee:

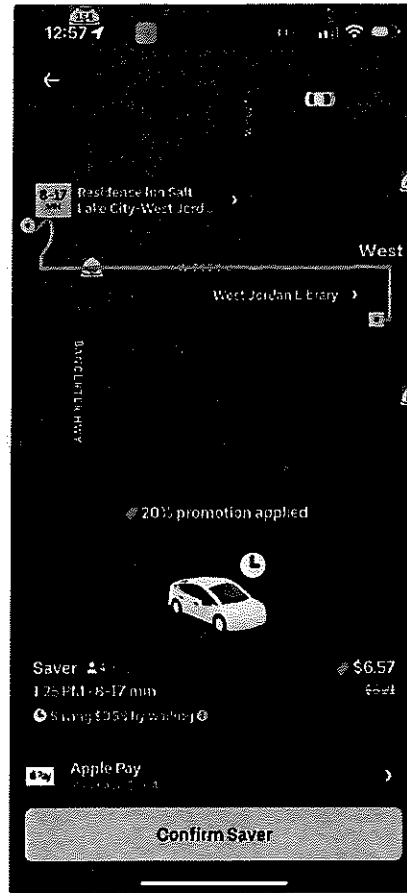
X2



Uber in SLC:

X2 to/from airport

To/from conference center to hotel (no hotels within walking distance) x 6



Flights:

Flight
Modify

	Tue 10/14	# 2314 / 2976 <b>MKE</b> → <b>SLC</b>	5 hr 0 min	1 stop	<u>Wanna Get Away Plus</u>	
		6:55 PM                      10:55 PM				Base fare 1 Passenger(s)      \$378.94
						Taxes and fees      \$78.42
						Flight total            \$457.36
						or from \$45/mo* with  Flexpay Learn more
	Fri 10/17	# 1810 / 972 <b>SLC</b> → <b>MKE</b>	5 hr 20 min	1 stop	<u>Wanna Get Away Plus</u>	
		3:50 PM                      10:10 PM				

Meals: FY 2026 not yet released

**Meals and incidental expenses (M&IE) rates and breakdown**

The M&IE total is the full daily amount for a single calendar day when that day is neither the first nor last day of travel. The amount received on the first and last day of travel equals 75% of the M&IE total. See [M&IE breakdowns](#) for information related to the individual meal amounts.

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner	Incidental expenses	First and last day of travel
Standard Rate	Applies for all locations without specified rates	\$68	\$16	\$19	\$28	\$5	\$51.00
Moab	Grand	\$86	\$22	\$23	\$36	\$5	\$64.50
Park City	Summit	\$92	\$23	\$26	\$38	\$5	\$69.00
Provo	Utah	\$74	\$18	\$20	\$31	\$5	\$55.50
Salt Lake City	Salt Lake / Tooele	\$80	\$20	\$20	\$33	\$5	\$60.00

The registration fee includes admission to the full conference (2.5 days) and all sessions. Complimentary breakfast, lunch, and snacks will also be provided.

# TRAVEL REQUEST

## WHO AND WHAT

- Enter estimates for **all** costs, regardless of who pays:
  - Registration
  - Estimated airfare
  - Hotel
  - Bag and other fees
  - Local transportation
  - **Non-provided** meals
  - GSA per diems
- Be *reasonable & rational* in estimating expenses
- One trip = one submission

TRF-001 (REV. 03/2015)									
Request for Travel on Behalf of the City of Milwaukee									
Szopinski, Aaron B					Health Budget & Admin Mgr				
Last Name, First Name, MI					Title				
HEALTH									
Department									
Baltimore, MD					Super Important Conference 2024 / March 4-8, 2024				
Destination					Conference/Event Dates				
<b>Purpose of the Trip and/or Anticipated Benefit</b>									
Annual Super Important Conference, providing the latest insights and technical instruction on doing Super Important things. Attendees will gain insights into Super Important ideas and tools that will enhance the ability of the Health Department to be the best at Super Important activities.									
<b>Anticipated Funding</b>									
Source:		Amount	Expenses (If Specified)	<b>Anticipated Expenses</b>					
Department (O&M or CS#)		0240	\$130.00	Registration Fees	450.00				
Grant (Specify Project Below - GR#, RG#, or CD#)		GRS89924000		Baggage, Airport Tax					
Other (Specify Below)		\$1,488.00	All Other Exp.	Lodging					
Sponsor (Super Impmt Assn.)				Nightly Rate	149.99				
Tuition Reimbursement		\$450.00	Registration	Number of Nights	4.00				
				Total Lodging	\$ 599.96				
<b>Travel Advance</b>									
Requested?	No	X	Yes	Amount	Transportation	Total Miles			



# TRAVEL REQUEST

## YOUR TRAVEL APPROVAL & BUDGET

- The Travel Request establishes three key things:
  - Appropriateness of travel for City business
  - Estimated cost/budget for the trip
  - Source of funds
- The Travel Request is for **ALL** expenses, including paid by the City, yourself, or a sponsor
- For sponsored travel, keep in mind **MCO 303-5.3** – Code of Ethics →

**3. OFFER, SOLICITATION, OR ACCEPTANCE OF ANYTHING OF VALUE.** No person may offer or give to an official or other city employee, directly or indirectly, and no official or other city employee may solicit or accept from any person, directly or indirectly, anything of value if it could reasonably be expected to influence the official's vote, the official's or other city employee's official actions or judgment, or could reasonably be considered as a reward for any official action or inaction on the part of the official or other city employee. This subsection does not prohibit an official or other city employee from engaging in outside employment.



CITY OF MILWAUKEE  
HEALTH DEPARTMENT

# TRAVEL PROCESS

## Travel Request

*(50+ miles one way or overnight required)*

- Location & Dates
- Costs & Funding
- Before Booking
- >15 Days Before Travel
- **Only** via Microsoft Forms



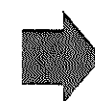
## Booking

- On Your Own **OR**
- Via **SAP Concur**
- You Pay **OR**
- MHD Pays



## Travel

- **Bon Voyage!**
- Keep All Receipts!



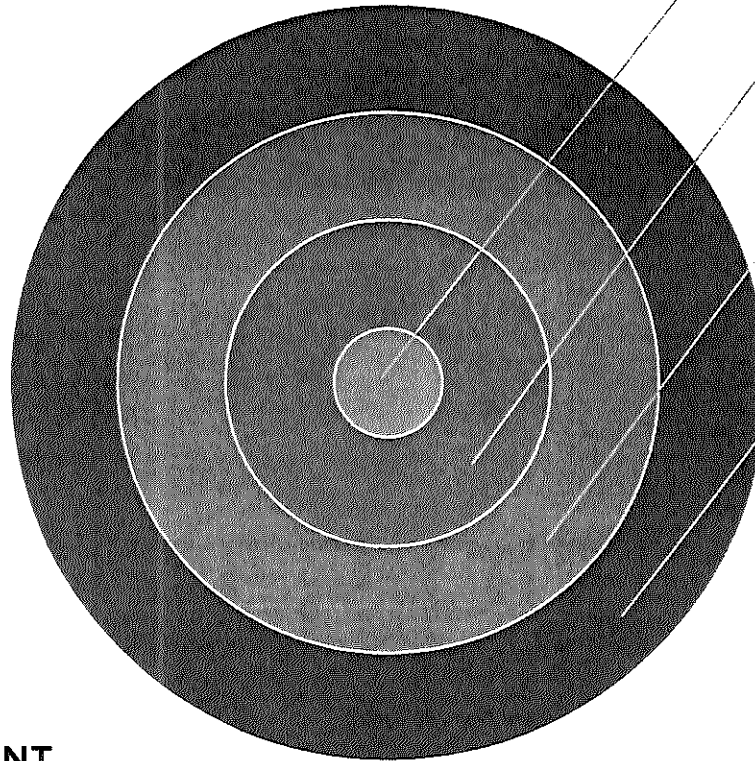
## Expense Report

- Report All Costs
- Submit All Receipts
- After Return <15 Days
- **Only** via Microsoft Forms



# TRAVEL

## ROLES & RESPONSIBILITIES



### **YOU - THE MHD TRAVELLER**

Secure Travel Pre-Approval  
Know Cost & Fund Source  
Book & Manage Travel  
**Document & Report All Expenses**

### **CI AZUMANO**

Booking & Travel Arrangement  
*SAP Concur*  
Traveler Support 24/7

### **MHD PROCARD HOLDERS**

1 per MHD Division  
Airfare, Hotel, & Registration  
Payments

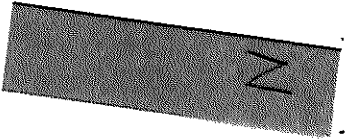
### **MHD FINANCE**

Policy  
*SAP Concur* & Payment Admin.  
Pre-Travel Approval  
Post-Travel Payment  
Travel Administration

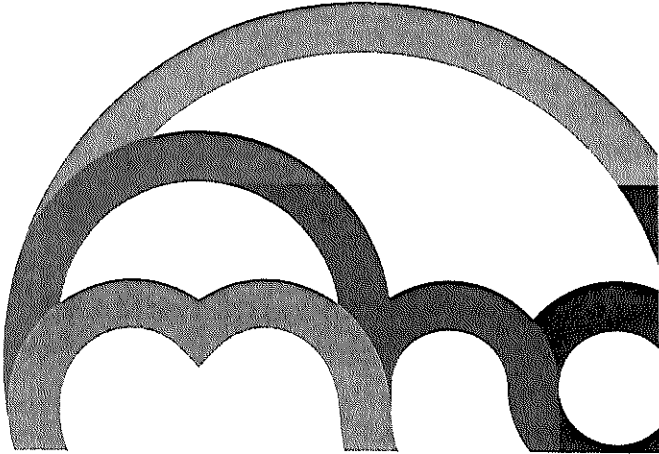


# MHD TRAVEL

PROCESS & POLICY TRAINING



TEAMS – FEBRUARY 2024



# TRAVEL

## HOW & WHY

- Travel for Health Dept. employees is governed by:
  - Sec. 350-181 to 187 of the Code of Ordinances
  - City of Milwaukee travel policies
  - Health Department travel policy
- Admin policies and reimbursement criteria are the **same** **for all City travel** regardless of fund source or sponsorship.

Transportation to Chicago will be reimbursed up to the cost of a roundtrip rail (Amtrak) ticket. The full mileage rate will not be reimbursed unless the employee is being required to drive.

### **Expenses greater than anticipated/approved amounts**

Employees must provide documentation proving the necessity of any excess charges. It is the employee's responsibility to make careful estimations prior to incurring expenses during travel as reimbursement for expenses significantly greater than the anticipated and/or approved amount is not guaranteed. With proper documentation, however, employees will not be expected to cover mandatory, unanticipated expenses related to conducting City business.

### **Foreign currency translation**

All amounts should be converted to US dollars and appropriate documentation should be submitted with the Statement of Expenses form.

### **Alcoholic beverage policy**

Employees will not be reimbursed for any alcoholic beverage expenses and are encouraged to refrain from consuming alcoholic beverages while representing the City during travel. If an employee does decide to consume alcoholic beverages with a meal, after his or her duties are completed for the day, the employee should ensure that those charges are deducted from the bill's total and not included in the amount reported on the Statement of Expenses. Employees of departments requiring meal receipts should consider having those items placed on a separate bill if there are concerns about submitting receipts containing charges for alcohol.

Exceptions may be made for City-sponsored events related to legislative advocacy.

### **Valet parking**

Valet parking is not an allowable expense unless more economical options for parking are unavailable. Employees should take advantage of free parking lots and any parking that has been included with the registration fees.

### **Receipts**

Employees must submit an itemized receipt for each expense listed on the Statement Expenses form **except meals** unless required by their department. Credit card receipts will not be accepted as sufficient documentation. The receipt should include the total amount, the number of guests, and that full payment was received by the vendor.

In some cases, an itemized receipt may not be available. In such a case, there are other forms of documentation that are acceptable. Examples of sufficient documentation when receipts are not available are listed below. Employees should consult the Comptroller's Office and/or the appropriate staff in their department with questions about the appropriateness of other forms of documentation not listed here.

### **Examples of acceptable documentation:**

- Payment confirmation page
  - As with purchasing flights online
- Proof of course completion
  - Specifically for courses in which the completion card cannot be obtained without payment
- Sworn, signed affidavit
  - This should be used as a last resort when receipts and other forms of documentation are not available. Staff from the Comptroller's Office must provide this.

\*Itemized receipts are the preferred form of documentation and make the processing of expense forms and reimbursements more efficient. Employees should make every effort to avoid submitting alternatives when possible.

### **Enforcement of the use of CityTime for mileage only reimbursement**

Employees with mileage allowance traveling on behalf of the City of Milwaukee that do not incur any expense other than mileage must use CityTime to claim that mileage for reimbursement. A Statement of Expenses form should only be used if other expenses are incurred. Employees cannot claim mileage for the same trip using both methods.

### **Single-day travel for conferences, meetings, and training**

Employees will receive reimbursement for meals, mileage, and other related travel expenses when traveling to destinations 50 miles or further from Milwaukee one way (100 miles roundtrip). Meals and mileage are not reimbursable expenses for single-day travel to destinations closer than 50 miles from Milwaukee.

\*If an employee must report to work before reporting to the location of the conference or training event, mileage will be reimbursed from the employee's work location to the location of the event.

### **Car Rental**

Employees that have been authorized to rent a car should take care to avoid incurring any additional fees as some may not be considered standard charges and will not be reimbursed. For example, in the case of refueling, the employee should refuel before returning the vehicle to avoid being charged for the fuel *and* the additional refueling fees often charged by rental agencies.

Employees should also be prepared to provide proof that mileage incurred was business related as mileage for personal use of the rental vehicle will not be reimbursed.

### **Submission Deadlines and Extensions**

The deadline for submitting the Statement of Expenses form and all supporting documentation is 15 days after the employee returns from travel. Extensions may be granted in some cases. For example, employees experiencing a hardship such as illness or the death or illness of a family member may be granted an extension. Employees should contact their supervisor or appropriate staff in their department and the Comptroller's Office to notify them of their need for an extension as soon as possible. Employees should be prepared to provide an explanation or some form of documentation if requested.

### **Transportation in the Destination Area**

While parking and transportation in the destination area are considered to be allowable and reimbursable expenses, employees are strongly encouraged to find and utilize the most economical modes of transportation when appropriate. For example, employees should take advantage of airport shuttles or transportation provided by the event and/or use local transportation (subway, bus, metro, etc.) when it is safe and practical to do so. Employees are also encouraged to avoid taking taxis, especially in major cities where public transportation is abundant, unless other modes of transportation are unsafe, impractical, or unavailable.

### **Approval Signatures**

Travelers should **NOT** approve the voucher control group register for their own expense report or travel advance. If the employee that typically provides the approval signature is the traveler, an alternate employee must be designated to approve.

### Luggage fees

The City will reimburse employees for up to one, standard checked bag. Fees for excess weight charges and additional checked bags are the responsibility of the employee. In the event that an employee will need to take extra bags along for some work-related purpose (materials to be exhibited at a conference, for example) or due to some physical need, the City will reimburse employees for the additional baggage fees incurred.

Employees returning from a conference or event with a significant amount of materials (literature, samples, etc.) should consider shipping the excess materials rather than incurring additional baggage fees.

### Meal Allowance/Per Diem

*\*Employees will be reimbursed for up to the federal meal per diem assigned to the destination they will be traveling to instead of the previous \$50 per diem. Expenses that were previously "per diem" expenses will still be reimbursable provided they are approved and accompanied by the proper documentation. These expenses are to be itemized on the Statement of Expenses form.*

Employees traveling to destinations 50 miles or further one way (100 miles roundtrip) from the City are eligible to receive reimbursement for meals not provided by the conference or training event (including tips up to 15%) up to the federal meal per diem rate assigned to the travel destination. Travelers and other staff can visit the GSA website to determine the appropriate meal per diem amount for a specific travel destination. The GSA takes into account various factors such as geographic location, cost of living, and inflation in setting these amounts. The use of the federal rates provided by GSA allows the City to more fairly reimburse employees. **Employees will not be required by ordinance to submit receipts for meals. However, individual departments may require receipts at their discretion.**

The total daily per diem rate varies by location. In addition, the total daily amount is broken out into different amounts for each meal. For example, a traveler going to Washington, D.C. would receive a total amount of \$66 for each day (\$12 for breakfast, \$18 for lunch, and \$36 for dinner). This amount should be adjusted based on the number of meals provided by the event the employee is attending. For example, on day one of the conference, a continental breakfast is provided. For that day, the employee's meal per diem would be \$54 (\$66 - \$12 for the breakfast provided by the event). **Prudent travelers will make an attempt to stay within the amounts specified and will not request reimbursement in excess of the amount actually and reasonably spent despite not being required to submit receipts.**

Per the ordinance, employees will not be reimbursed for expenses that have already been prepaid by the City or some other entity. Most registration and conference fees include at least some of the employee's meals. For this reason, employees will need to look at the conference or event agenda prior to and during travel to accurately determine the amount they can expect to be reimbursed each day for meals as the amount associated with each provided meal will be subtracted from the meal per diem amount allowed for that day. Exceptions may be made for employees that need to leave an event and miss a provided meal due to another business commitment.

Employees choosing to purchase food from a grocery store should be sure to subtract any unrelated expenses from the total on the receipt.

### Mileage rate

*\*Employees are encouraged to use the City pool cars available to them instead of personal vehicles when possible.*

Reimbursement will be **up to** the IRS mileage rate when use of personal vehicle is the most economical or practical transportation option or when otherwise approved. Consult your department's individual guidelines for the exact reimbursement rate you can expect receive.

Example:

An employee is granted approval to travel for an unanticipated, last minute event. At the time the arrangements are made, roundtrip airfare is not the most economical method of transportation. The employee chooses to drive a personal vehicle and use the Lake Express Car Ferry.

In order to receive full reimbursement for the trip, the employee must show that approval was granted prior to making the arrangements and that the cost of roundtrip airfare would have been more expensive at the time. The employee should print the page showing the airline ticket prices with the date and all of the required documentation verifying the expenses incurred. The TOTAL cost of the ferry plus ALL expenses related to the employee's use of his/her personal vehicle should be less than airfare at the time travel arrangements were made.

### **Travel Advances**

The travel advance form should be completed and signed by both the employee and supervisor or appropriate designee. Advances will not be issued without a signature from a supervisor. The deadline for settling any issued advances is 15 days from the employee's return.

Employees are allowed to request an advance early to allow for earlier airfare booking, which often results in cheaper fares. Since **only one advance will be allowed per trip**, employees may request funds exceeding the amount of the airfare to cover other trip expenses. Employees should keep in mind that they will not be able to settle the advance (including the amount for airfare) until after returning from the trip if the advance will be covering expenses other than airfare. Advances for airfare only can be settled at any point before the 15 day deadline.

### **Enforcement of repayment of travel advances**

ALL documentation and repayment of any unused funds must be submitted to the Comptroller's Office NO LATER THAN 15 DAYS AFTER THE EMPLOYEE RETURNS to the City. Failure to comply with this policy may result in the withholding of funds from the employee's paycheck until the full amount of unused funds is recovered and/or the employee's inability to receive advances for future travel.

Employees are encouraged to keep all required documentation and receipts organized during travel. One suggestion for doing so is to place all receipts into an envelope as they are received so the information will be readily available when the time comes to complete and submit the Statement of Expenses.

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### **Communication Expenses**

Employees will be reimbursed for communication expenses related to conducting business on behalf of the City of Milwaukee.

### **Group and meeting travel**

Multiple employees traveling together should do their best to separate expenses and indicate clearly which expenses were their own as each employee must submit an individual Statement of Expenses form. Multiple employees will not be reimbursed for the full amount of any shared expense incurred during travel. No employee will be reimbursed for expenses prepaid by the City or other entity.

Example:

If two employees traveling together decide to share one hotel room, one employee will be reimbursed for the cost of the room unless the employees are able to clearly indicate the split charge on the receipt. In that case, each employee will be reimbursed for their portion of the room cost.

## **Guidelines for City Employee Travel Expenditures and Reimbursements**

\*These guidelines should be used as a supplementary document, providing further clarification for the Milwaukee Code of Ordinances Chapter 350 – Employee Regulations and Benefits, Subchapter 8 – Transportation and Travel. The ordinance should always be consulted first followed by your department’s individual regulations related to travel and reimbursements. More restrictive, departmental policies supersede the City ordinance. Be sure to consult with the appropriate staff in your department and/or the Comptroller’s Office with further questions regarding allowable and unallowable expenses and reimbursements.

### **Travel Arrangement**

Employees should exercise prudence in making travel arrangements to ensure that the most economical options appropriate for the situation are chosen. This may require some research. Employees should keep in mind that reimbursements will not be issued for arrangements found to be unreasonable in purpose or amount. Approval should be obtained before any final arrangements are made.

### **Transportation Reimbursement**

The City will reimburse for up to the cost of roundtrip, coach fare (air, rail, etc.) and one standard checked bag plus other **mandatory** transportation expenses. Expenses incurred for seat upgrades, seat preferences, and any other fees for additional items are the responsibility of the employee. Costs for each checked bag after the first and any additional fees for excess weight in relation to baggage will not be reimbursed unless the employee is required to pack additional materials for a business related purpose or physical need.

There are a number of price checking sites available that may be helpful in finding the best rates. When choosing a flight or other mode of transportation, employees should do their best to factor in other charges that may be added to the initial fare.

### **City Pool Cars**

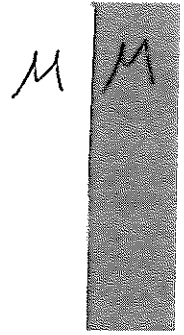
Available for employee use is “a diverse fleet of light and heavy duty vehicles and equipment that are suitable to the needs of the users, available when users need them, reliable when being operated, safe to operate, and economical to own, operate and maintain” (Fleet Vehicle Usage and Safety Manual). Employees are encouraged to use these pool cars when traveling by vehicle on behalf of the City. The cost of using a City vehicle is currently \$9.04/day of use, which is often a more economical option than driving a personal vehicle depending on the distance the employee will be traveling.

Employees can request a pool car from Upper Parking of the Zeidler Municipal Building by sending an email to “Carpool” or contacting the custodian in charge of pool cars. It is best to reserve the vehicle ahead of time, especially if the vehicle will be used to travel out of the City.

DPW – Fleet Services Section has developed a set of guidelines, “Fleet Vehicle Usage and Safety Manual”, which should be reviewed before operating all City vehicles, including pool cars.

### **Other Transportation**

Other transportation methods, such as Lake Express Car Ferry, are reimbursable expenses when prior approval is given and documentation is provided demonstrating that the method chosen was the most practical and/or economical method at the time. Employees should make an effort to avoid using unconventional/ less common methods of transportation when possible.



# Guidelines for City Employee Travel Expenditures and Reimbursements

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Department of Administration

1/25/2016



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**FW: Travel to APHA**

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From Westrich, Christine <chwest@milwaukee.gov>  
Date Mon 6/10/2024 4:36 PM  
To Kryshak, Violet <vkrysh@milwaukee.gov>

Violet,  
Lindsey asks us to contact APHA. Since its on their website, sign up as a student.

Christine

From: O'Connor, Lindsey <loconnor@milwaukee.gov>  
Sent: Monday, June 10, 2024 4:27 PM  
To: Westrich, Christine <chwest@milwaukee.gov>; Weber, Tyler <tyweber@milwaukee.gov>  
Subject: RE: Travel to APHA

Hi Christine,

I think it depends on the rules of the organization. She is working full-time but is a student, correct? She may want to contact the conference.

Lindsey

From: Westrich, Christine <chwest@milwaukee.gov>  
Sent: Monday, June 10, 2024 11:31 AM  
To: O'Connor, Lindsey <loconnor@milwaukee.gov>; Weber, Tyler <tyweber@milwaukee.gov>  
Subject: Travel to APHA

Lindsey, Tyler,

Could either of you answer this question for travel to the APHA Conference for Violet:

***Should she sign up for the student rate of \$370 (includes membership and conference), or the MHD member rate which is \$645?***

I believe she should sign up for the student rate, saving \$275, but I am not familiar if any policies exist that prohibit this.

Thank you,  
Christine





CITY OF MILWAUKEE  
**HEALTH DEPARTMENT**

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This policy covers City Business Travel that may be arranged and paid by MHD, within City policies, non-City employees. Arrangement and payment of travel for non-City employees must be authorized in writing by the Commissioner and Budget & Administration Manager prior to any arrangements or booking being made.

Non-city employees employed by a staffing agency *may* be allowed to travel for City business on consensus of the Budget & Administration Manager and Human Resources Administrator.

Non-City employees traveling for MHD must follow this policy and City policies for travel, including obtaining written pre-approval. Reimbursements for temporary or contracted employees will be submitted to MHD Finance per this policy. . Approved reimbursements will be paid to the temporary employee by their employer, and invoiced to MHD by the employer only after payment. No reimbursements will be paid directly to third parties or to individuals employed by a third party under contract

Sponsored travel, or travel funded, arranged, or paid directly by a third party is subject to this policy and all applicable City, State, or Federal policies and rules. Travel costs paid by sponsoring organizations, honoraria, and other paid costs for MHD staff on City business must be reported per the City's Ethics policies and the Code of Ordinances.

City Business Travel by MHD staff or other individuals requires approval by both a Deputy Commissioner, or the Commissioner; and the Budget & Administration Manager. Approval is only given in the form of a signed and dated Travel Request Form (TRF). All costs for travel, including those paid by a sponsor or through City Tuition Reimbursement, must be estimated and included on the TRF. The TRF must be submitted with all relevant documentation **up to 90 days and not less than 15 days prior to travel.**

The Budget & Administration Manager may grant exceptions to this policy in writing when there is insufficient notice to approve prior to the requested travel, including emergencies.

Any MHD employees or staff, including temporary or contracted staff, on City Business Travel will be mindful that they represent MHD and the City of Milwaukee in all modes of travel, and conduct themselves appropriately in professional and personal dealings in all phases of travel.

Travelers and MHD staff arranging travel who are found to be missing significant or entire scheduled events without excuse, abusing travel privileges, or fraudulently paying or claiming expenses for reimbursement will be referred for appropriate disciplinary action on the City's progressive disciplinary spectrum, up to and including referral for prosecution.

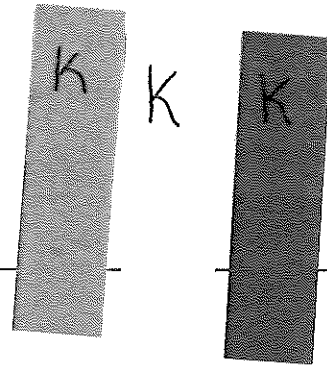
***Access & Equity***

MHD managers, supervisors, and leadership will ensure that all MHD employees have equitable opportunity to travel as needed for City business, including for training and credentials, professional development, presentation of MHD work, or other purposes. Travel Requests and travel activity will be logged and travel activity will be reviewed periodically by MHD management to ensure these opportunities are available, offered, and utilized equitably by all staff. Documented favoritism, use of travel opportunities as an incentive or punishment, or other inequitable practices around travel opportunities will not be tolerated.

MHD will seek all ways within applicable laws and City policies to assure costs for travel are not a barrier to participation by any MHD employee, and will find ways including those in this policy to assure that all employees can comfortably take advantage of travel for City business to advance their knowledge, skills, credentials, and achievement in support of MHD's mission and vision for Milwaukee.



CITY OF MILWAUKEE  
HEALTH DEPARTMENT



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## MHD Travel Policy

Effective Date: *February 12, 2024*

### Program area:

This policy applies to all employees, temporary staff, and contracted staff of the City of Milwaukee Health Department (MHD).

### Policy:

This policy applies to all **City Business Travel**, which is different than Routine Day Travel.

**Routine Day Travel is travel for City business that meets all four of the following criteria:**

1. Less than 50 miles to the destination; and
2. Done by the employee as part of routine duties.); and
3. Done by employees approved to receive mileage reimbursement in the Positions Ordinance; and
4. No other expenses are incurred for the travel such as event registration, meals, or lodging expenses.

Routine Day Travel is covered by the relevant MHD and City of Milwaukee policies for employee vehicle allowance and mileage. **Any travel outside of all four criteria above is considered City Business Travel and covered by this policy.**

For this policy “City paid” or “City funded” include funds from any grant or grantor, as well as donated funds.

Two key concepts define travel for City business.

1. **Overnight Travel** is any travel where practicality or schedule requires a stay at a destination for at least the night prior to or following the meeting, event, or other City business.
2. **Day Travel Status** is used to determine costs and eligible expenses A traveler on City business is in Day Travel Status when they are:
  - away from home during regular non-working hours, or
  - away from their regular work assignment during regular working hours

An employee in Day Travel Status may take allowances for non-provided meals based on time of day in Day Travel Status:

- **Breakfast:** In Day Travel Status between midnight and 11am
- **Lunch:** In Day Travel Status between 11am and 4pm
- **Dinner:** In Day Travel Status between 4pm and midnight

The starting and ending locations of City Business Travel are the workplace or the residence at the time of departure and arrival. Transportation between a person’s home and regularly assigned workplace is not reimbursable.

City Business Travel by MHD staff or paid by MHD for other individuals may include travel for trainings, seminars, conferences, site visits, continuing education, presentations of MHD or City work, or other City of Milwaukee business connected to the duties and work of the employee. Eligible and allowed costs for City Business Travel may include any expenses for event registration; air, bus, or rail fares; meal or lodging expenses; or other non-mileage expenses, regardless of destination or the funder/payor of travel and related expenses.



CITY OF MILWAUKEE  
**HEALTH DEPARTMENT**

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- Travelers may elect to upgrade fares or accommodations at their own upfront expense. Employees may accept non-charged/no-cost upgrades if offered for no consideration or trade. The cost of traveler selected upgrades charged to City funds or paid on a City ProCard will be accounted for within 10 business days of return from travel.
- Illegible, insufficient, or missing receipts will not be reimbursed.
- The traveler is responsible for excess costs and additional travel expenses resulting from taking an indirect route or a delayed return trip for personal preference or convenience.
- MHD offers staff a full-service travel booking service, which includes pre-payment for airfare and hotel and traveler support, in lieu of Travel Advances.
- Employees should pursue Tuition Reimbursement through the city when eligible. The Tuition Reimbursement Program generally allows a yearly maximum reimbursement annually per employee for training and related book/materiel fees, conferences, and other skill-building opportunities.

### **Transportation Costs**

The City shall pay the actual and necessary costs of transportation in the course of conducting official City business as follows:

- Travel shall be by the method of transportation and route most cost-effective for the City, considering the cost of transportation, other travel expenses and salary.
- The excess cost of first class or business class fare over coach class fare for a given mode of travel shall not be reimbursed when less expensive fares are available.
- Any non-cash promotional benefits or awards received from an airline, hotel, vehicle rental company or with purchase of any other travel accommodation may be retained for personal use by the Traveler (e.g. customer reward points / miles).
- Employees may pay their own fares, hotel, or lodging as non-refundable, and may keep any credits in addition to points or promotional value offered if they so choose. MHD will not reimburse non-refundable fares or costs paid by staff directly.
- When automobile transportation is necessary, a City vehicle or public transportation shall be used where practical.
  - The use of rented motor vehicles must be for the advantage of the City and not solely for the personal convenience of the Traveler. Rental Car requests must be reviewed and approved by the Budget Administration Manager. If rental vehicles are approved, optional vehicle insurance, pre-payment of fuel costs, or other optional services offered by vehicle rental agencies shall not be reimbursable.
- When the use of a private automobile is authorized, reimbursement for mileage shall be at the current published Internal Revenue Service (IRS) rate per mile for business-related travel and reimbursement for parking shall be the actual cost.

### **Lodging Costs**

- Lodging rates should be reasonably close to lodging rates published and updated by the U.S. General Services Administration (GSA) for the destination market. Exceptions for emergency travel or large national events without dedicated lodging may be approved on the TRF on an individual basis by the Budget & Administration Manager.
- Lodging costs in the host city may be claimed from the night before the authorized event starts through the night before it ends, unless reasonably priced and timely return transportation is not available or practical. Additional allowed nights beyond the end of the event must be included and approved on the TRF.
- Short-term rentals, including rental of rooms or entire apartments or homes, may be allowed and reimbursed if they are cost effective and all costs, including fees and taxes, are documented and approved on the TRF by the



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***Expenses & Reimbursement***

Allowable and reimbursable travel expenses are limited to those allowed by this policy, the City's current travel policy and any other applicable rules and regulations, including grantor terms and conditions. Staff are expected to be prudent in choosing airfares, lodging, and other travel choices to ensure value and efficiency in their travel, within reason.

Expenses incurred or paid by employees prior to approval of the TRF may or may not be reimbursed, and employees pre-pay travel costs for the City business at their own risk. Reservations, registrations, booking, or other expenses will not be paid or reimbursed by the City or MHD prior to full approval of a completed TRF.

Paying travel expenses with City funds, including funds granted to the City, prior to approval of a TRF; or any dishonest, unethical, or fraudulent payment or claim of expenses for City Business Travel may be the subject of disciplinary action on the City's progressive disciplinary spectrum and referral for prosecution as warranted.

**All expenses** for City Business Travel must be reported by the traveler within 15 days of return and include receipts and documentation of actual costs. All final, actual City and sponsor paid expenses must be reported regardless of the traveler's request for any reimbursement or traveler paid costs. Sponsor-paid expenses for lodging, airfare, and provided meals may be estimated where the traveler is unable to get precise amounts from the sponsor.

Reimbursements for expenses paid by MHD staff for travel shall be made in accordance with the City of Milwaukee reimbursement policies and any cost eligibility requirements for grant-funded costs. Expenses for meals will only be reimbursed if travel of more than 50 miles one way is required. Gratuities and tips for food service, up to 15% of gross cost, may be included as part of allowable meal expenses up to the per diem amount, as long as the amount is itemized on the receipt. **Itemized receipts must be provided to claim reimbursement of any and all staff-paid expenses, regardless of the method of payment.**

***General Guidelines***

- Employee must have a valid State of Wisconsin driver's license upon and during travel.
- Travel funded by the City's tax levy or General Fund budget may require Common Council approval per City Ordinance. MHD Finance will coordinate annual travel planning and approvals for travel requiring Council approval.
  - Government rates shall be requested in for any booking of airfare, hotel, or other accommodations, though MHD travelers are only bound to find the lowest reasonable rates for travel.
- Travelers should bring their City employee ID and a copy of the City's tax exemption certificate, and request a tax exemption for their room on check-in. Lodging in Wisconsin should always be tax-exempt for City employees. Taxes may or may not be waived for lodging outside of Wisconsin, at the operator's discretion.
- Travelers and their supervisors are responsible for assuring that funding is available and sufficient for travel, and that travel is an allowed expense of the funding source proposed to cover the travel and related costs.
- No travel or meal expense that would not be a reimbursable expense under this policy may be the object of a direct expenditure of City funds.
- The traveler is solely responsible for keeping and appropriately documenting the costs of their travel, and failure to submit all receipts may jeopardize reimbursement to travelers.



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Budget & Administration Manager. Short-term rentals shall only be arranged through a reputable and legal platform, and will only be paid by reimbursement.

- Payments or other considerations provided to friends or family for hosting travelers on City Business Travel will not be paid by the City nor reimbursed.
- The traveler shall be reimbursed for actual lodging costs incurred for single occupancy, and taxes will be reimbursed for traveler-paid room charges. Travelers are responsible for the full cost of lodging and all additional charges or rates paid for non-City staff, at the higher of the actual single occupancy rate or maximum GSA rate per night for the destination. Any City paid costs for non-City staff will be reimbursed to the City by travelers prior to issuance of any reimbursement, as outlined above.
- If the lodging receipt indicates a charge for double occupancy and two persons are authorized to travel on behalf of the City, costs may be reimbursed.

#### ***Per Diem Meal Reimbursements***

- Expenses eligible for reimbursement shall be for individuals based on their Day Travel Status, as outlined above. Meal expenses shall be reimbursed at actual cost, including taxes and gratuities up to 15%, up to the established per diem rates for the destination as published by GSA.
- Meal costs will be reimbursed on a per meal basis, up to the GSA maximum. The GSA-allowed amount includes any gratuities or tips documented and paid by the traveler, up to 15% of gross cost.
- Meal allowances may be claimed for combined costs of all meals not provided in transport or by the event/host while in Day Travel Status at the following times:
  - Midnight to 11:00 a.m. for Breakfast
  - 11:00am to 4:00pm for Lunch
  - 4:00 pm to midnight for Dinner
- No incidental expenses will be reimbursed.
- Purchases of groceries or retail food items for the duration of any trip will only be reimbursed at the discretion of the Budget & Administration Manager. Travelers are strongly encouraged to arrange food purchases in ways that align with the per diem guidance and criteria in this policy.

#### **Other Reimbursable Expenses**

- Reimbursable expenses for any other costs shall be essential and related to official City business travel, which include those incurred for:
  - Registration fee for seminars, conferences, conventions, or similarly organized programs.
  - Parking; ferry and bridge tolls; taxi, subway and bus fares; airport shuttle service and rental vehicles for official City business.
  - Tips up to 15% of gross amount for food, non-alcoholic beverages, or meals
  - Baggage handling service, when necessitated by physical limitations or when carrying excessive baggage or equipment required for official City business.
  - Bag or luggage fees not paid with airfare, charged at boarding or check in, and not related to bags heavier than allowed, or excess baggage not needed for official City business.

#### **Non-reimbursable expenses**

Miscellaneous expenses not directly related to conducting official City business and excessive or unnecessary expenses are not reimbursable, except with the explicit and written pre-authorization of the Budget & Administration Manager. Certain expenses are considered personal and therefore non-reimbursable including, but not limited to:



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- Laundry expenses or dry cleaning
- Entertainment, clothing, personal sundries and services
- Transportation to places of entertainment, restaurants, or similar personal activities
- Valet service, except when necessitated by physical limitations
- Personal trip insurance
- Medications, medical, dental or hospital services
- Alcoholic beverages
- Tobacco products
- Tips and gratuities, except as provided by this policy, and cash transactions without acceptable receipts
- Fines and penalties
- Dependent care, except as provided through the City employee benefits program.

**Statement of Expenses & Expense Documentation**

- All paid expenses will be accounted for and reported via the Statement of Expenses (SOE) and documentation of paid costs, including receipts, within 15 days of return from travel.
- Sponsor-paid expenses, including waivers of fees and direct paid expenses, must be included on the Statement of Expenses.
- Traveler paid expenses not included or documented on the Statement of Expenses will not be reimbursed.
- All required documentation and receipts must be submitted as a single package with the Statement of Expenses, including the original, signed TRF, final conference agenda, and receipts for the actual paid airfare, lodging, baggage, transportation, and other costs. **Duplicating documents already submitted with the TRF is not necessary.**
- Itemized and complete receipts as defined above are required for all reimbursable and City paid expenses. Expenses claimed without detailed and itemized receipts will not be reimbursed.

**Purpose:**

The purpose of this policy is to establish consistent procedures for authorization and conduct of City Business Travel. It also assures MHD staff can travel for conferences, seminars, speaking engagements, trainings, and other events that support MHD's work and serve the City of Milwaukee's goals and mission. The policy identifies the overall responsibility governing travel on City business and outlines procedures to ensure appropriate approval of all expenditures by the MHD Finance prior to the City incurring any expense. The policy/procedure provides internal controls related to compensating employees for travel related expenses.

**Procedures:**

***Travel Approval & Authorization***

No authorization is required for Routine Day Travel. All City Business Travel requires a Travel Request Form (TRF) completed and signed indicating both the appropriate Deputy Commissioner (or Commissioner) and Budget & Administration Manager's approval.

Travelers seeking authorization should submit via Forms up to 90 days before travel, and not less than 15 business days before travel. Travelers are responsible for the quality and completeness of all documents and forms submitted, and ensuring they are clear, legible, and include all required information.



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MHD Finance has converted the Travel Request and Statement of Expenses submission processes to digital via this linked [Microsoft Form](#), which improves transparency and accountability and reduces processing time for both requests and reimbursements. **MHD Finance will not accept TRF or Statement of Expenses (SOE) on paper, by email, by fax, or through DocuSign as of February 12, 2024.**

Travelers should complete the current Microsoft Excel version of the Travel Request Form (accompanying this policy, and on the MINT/SharePoint via MHD Finance) to upload. Links to cloud-stored documents are not acceptable. Excel documents should be saved as *TRF\_LAST NAME\_FIRST INITIAL\_DESTINATION\_DATE.xlsx*.

Travelers should compile, in a **single, 8.5 x 11 PDF document**, the following documentation for upload with their Travel Request Form:

- 1) GSA Per Diem rates for the destination, from GSA.gov (PDF or screenshot are acceptable)
- 2) Conference or seminar agenda, or another summary showing:
  - o Dates, times, locations, and registration fee
  - o Meals provided by the event, including optional meals

*If a detailed itinerary is not yet available, the conference details are acceptable, but a final itinerary must be provided with the Statement of Expenses. No meals will be reimbursed without a detailed itinerary provided.*
- 3) Google or other printed maps showing calculate mileage to be driven, with the appropriate location as the start point for auto travel based on travel plans
- 4) Estimated or offered hotel lodging rates (if included with the event itinerary as a block rate, this is not necessary, but the block rate must be specified with the hotel or conference organizer).
- 5) Estimated airfare options via MHD's travel partner, CI Azumano and the MHD SAP Concur site: Other estimates via travel sites or airlines are acceptable
- 6) Documentation of additional estimated costs, including:
  - o Separate baggage or luggage fees
  - o Local transportation at the destination to/from the airport, train station, or other allowed local travel
  - o Any other allowable costs

For prompt and accurate review of approvals, staff should mark or highlight key information such as rates, schedules, meals, and other required information. The PDF should have the same titling as the TRF: *LAST NAME\_FIRST INITIAL\_DESTINATION\_DATE.pdf*

Once those 2 documents are compiled, the traveler should provide the information for Travel Request in Microsoft Forms. Travelers will need to know and provide the following information:

- 1) Their Employee ID (approved temporary or contract staff will be provided an alternate ID)
- 2) Program Code and Grant Project Code, or other funding details
- 3) Dates of travel
- 4) Destination
- 5) Approximate/estimated costs for all elements of their trip, and the fund source for each
- 6) How each cost will be paid, and by whom



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Microsoft Forms will guide the user through submission, including upload of the Excel TRF and the single PDF of required documents. Submissions will be confirmed and saved, and logged, including the time/date of submission. Travelers have the option to save their submission. Submissions can be made by another individual for the traveler, if desired.

Once submitted, MHD Finance will review, request corrections, or complete the TRF **within 10 business days**. MHD Finance will generate a single digital version of the TRF and route it for signature via DocuSign, with copies to each signatory and the traveler. Travel is approved on completion and signature of the TRF by all individuals. Changes or updates to documents required on review will be coordinated through MHD Finance.

Travelers or travel arrangers should keep a copy of the signed, completed TRF for their records. The completed and signed TRF will be submitted as part of the Statement of Expenses/reimbursement process.

***Travel and Accommodation Booking***

Once the TRF has been signed and delivered, travelers may make their reservations, including conference registration, hotel reservations, and air or rail bookings as needed.

Travelers may:

- 1) Use their own funds and accounts to make reservations and pay registration and other costs, saving all receipts to be reimbursed after travel; and/or
- 2) Use MHD's travel vendor, CI Azumano, to assist in booking, arranging, and managing travel for MHD staff and MHD-authorized travelers. Airfares and hotel bookings arranged this way will be pre-paid with a City ProCard. **Be aware that travelers may still need to provide a form of payment upon check-in for hotels, and pre-payment should be verified with CI Azumano.** CI Azumano's services are available through both:
  - MHD's dedicated SAP Concur site, which requires an account and approval of registration for MHD employees. Registration can be completed online via [this link](#).
  - By phone or email, using the contacts below:
    - 1-888-461-0022 or [CORPAGENTS@CIAZUMANO.COM](mailto:CORPAGENTS@CIAZUMANO.COM)
    - SAP Concur/account support: [concur@ciazumano.com](mailto:concur@ciazumano.com)

**The traveler is solely responsible for obtaining, keeping, and submitting all receipts required for reimbursement and documentation of City expenses for approved travel.** CI Azumano may provide the traveler and MHD ProCard holder whose card is being used with copies of receipts. The traveler is expected to submit receipts for all costs along with their reimbursement.

For candidates, speakers, and invitees of MHD on City business, as outlined in the policy above, arrangements for air and/or lodging for those individuals should be made through CI Azumano by MHD staff who have travel arranging access and privileges in SAP Concur.

***Travelling***

Travelers on MHD business should assure they make flights and connections, arrive timely, and participate fully in the event they are attending. Travelers should be mindful that they represent MHD and the City of Milwaukee in all modes of travel, and conduct themselves appropriately in professional and personal dealings.

Travelers experiencing flight delays, cancellations, illness during travel, or other circumstance should make their best effort to attend and participate if their health and the health of others is not impacted. Delays, cancellations, or other



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circumstances disrupting travel should be documented and reported to the traveler's supervisor immediately, and travelers are encouraged to use any and all support services available to continue their trip or cancel and return.

CI Azumano will have their Traveler Support services available for all trips booked with them, and can be used to arrange alternative flights, lodging, or other needs mid-trip in the event of unforeseen circumstances.

***Expense Reporting & Reimbursement***

On return, travelers must compile all receipts for all costs paid by the City and submit them as a single package within 15 days of returning from their trip. Expenses must be reported for each traveler, and one report is to be made per traveler, per trip. Costs to be documented include any and all costs paid or claimed through Tuition Reimbursement, grant funds, or third-party funds managed by the City, and sponsor costs. Sponsor costs should be exact if possible, but estimates based on the TRF are acceptable.

Any actual expenses or costs paid by the City for upgrades to airfare, accommodations, services, or other ineligible or unapproved expenses **must be reimbursed to the City** either directly or through the net reimbursement on the Statement of Expenses, within 10 days of return from City Business Travel. The Traveler may pay those costs directly prior to submitting the Statement of Expenses, or submit receipts for the Statement of Expenses accounting for those costs against their net reimbursement. Any net negative Statement of Expenses will require a payment by check or cash from the traveler to the City to balance the Statement at \$0.00 within 10 business days of the Statement's completion. The City Comptroller and MHD may use payroll deductions or invoices to recover amounts due from employees for travel. Travelers are responsible for obtaining and submitting receipts for any and all costs for City Business Travel paid by a City ProCard, including ineligible or non-reimbursable expenses. Costs for upgrades to airfare or accommodation, or other ineligible expenses charged to a City ProCard or paid by the City must be documented and included on the Statement of Expenses.

**All receipts submitted as documentation of City-paid costs must include all of the following elements:**

- the name and address of the establishment from which the purchase was made; and
- an itemized description of the purchase/items purchased; and
- confirmation of payment and payment method (ex. "Cash", "MC ending in -9999", etc.) ; and
- the date and time the transaction occurred.

Per the City's Purchasing Division, City of Milwaukee ProCards may be used for prepayment conference fees. Other travel expenses may be paid by ProCard if the ProCard holder is authorized for travel purchasing privileges.

***Payments by mobile app, or online purchases made without a receipt email or payment receipt generated may or may not be reimbursable, based on the criteria above.*** Staff are strongly encouraged to assure paper and electronic receipts have the required elements for reimbursement. Email receipts showing the items listed above, including method of payment, are acceptable. Bank or credit card statements or screenshots of statements are not generally acceptable.

The original, signed TRF should represent most of the required documentation, and only actual receipts for costs need to be added if the TRF included all appropriate documentation. Any conference agendas not included in the TRF should be added to receipts submitted with the Statement of Expenses.

All receipts and expense documentation required should be scanned to a **single, 8.5x11 PDF document**. Required itemized receipts or cost documentation includes any and all of:



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- Meal receipts, summarized and organized by day and meal
- Baggage fee receipts
- Hotel payment or lodging receipts
- Airfare receipts
- Rideshare, taxi, or transit receipts
- Registration fee payments
- Receipts for ineligible or unallowed expenses paid by the City (ProCard or otherwise)
- Tuition Reimbursement claims, if included, or indication which receipts are to be claimed
- Documentation of sponsor-paid costs for any part of the trip
- For speakers, presenters, or non-MHD staff, an IRS W-9, signed, for the current year

There is a receipt submission template accompanying this policy, or employees may arrange and scan their receipts as they like, assuring they are all legible and organized, and amounts are clearly highlighted and calculated. Employees should deduct the costs of alcohol, alcohol taxes, tips over 15%, and other ineligible costs from their receipt totals. Employees may include a summary of their calculations if they like, or use the summary sheet provided by MHD Finance for calculating totals, in addition to their receipts.

Once all receipts and invoices are compiled, and each cost item on the TRF is accounted for, the employee should scan the entire package, including the original, signed TRF and TRF documentation, into a single PDF document, and title it *SOE\_LAST NAME\_FIRST INITIAL\_DESTINATION\_DATE.pdf*.

The employee should also enter their name, title, address and ZIP, as well as other trip information, in the top section of the Excel Statement of Expenses (SOE) form. They may fill out any expense explanations on page 2 of the form if needed. Once complete, they should save the Excel sheet and title it *SOE\_LAST NAME\_FIRST INITIAL\_DESTINATION\_DATE.xlsx*.

The PDF and Excel documents will be submitted through Microsoft Forms, the same as Travel Requests. The traveler should supply the requested information in the form, and will be prompted to upload the PDF and Excel documents.

MHD Finance will review submissions and process complete submissions within 10 business days. The 10-business day processing period begins once all documentation is received and adequate for MHD Finance.

MHD Finance will complete the Statement of Expenses sheet, calculate the total of paid costs, and deduct ineligible costs from the traveler's reimbursement. The final Statement of Expenses and all receipts and cost documents will be compiled and routed via DocuSign for the employee and their supervisor to review and sign. Any concerns, disagreements, or issues with the calculated reimbursement should be raised to MHD Finance prior to signature. The traveler must provide documentation, calculations, or other information to prove eligibility of expenses. The Budget & Administration Manager has final discretion on any disputed reimbursement amounts.

The reimbursement is the difference between actual, eligible trip costs and costs paid in advance by sponsors and the City, and is paid to the employee. **Any negative balances on the Statement of Expenses must be paid by cash or check within 10 days of signature on the Statement of Expenses.**

Once signed and complete, MHD Finance will generate a payment voucher and submit the TRF and SOE to the City Comptroller for payment of any reimbursement amount.

Payment for City employees will be issued by check via the City Treasurer, and mailed to the employee's address provided on the Statement of Expenses. For MHD staff working via contract or a temporary staffing service travelling on City business, the reimbursement document and final approved amount will be referred to that individual's employer to be paid



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and then invoiced to MHD for payment. For sponsored travelers such as job candidates, speakers, or presenters, payment will be made to the address specified on their W-9.

Checks by mail take up to 14 calendar days for delivery once issued. In the event a check is delayed or destroyed in the mail, employees should contact MHD Finance and allow 21 days from the issue of payment before requesting a re-issue of payment.

**Definitions:**

<b>City Business Travel</b>	Travel undertaken for official City business, during or outside of regular scheduled work hours, that is not Routine Day Travel and has been requested and pre-approved by the appropriate MHD officials.
<b>Day Travel Status</b>	Day Travel Status starts at initial departure for City travel and ends on return, or completion of City business, regardless of destination or location. Expenses paid or reimbursed for City travel are for time in Day Travel Status.
<b>Employee</b>	Any person who is employed in a career service, term-limited or an exempt position, except persons serving the City without compensation and members of boards and commissions. "Employee" includes all City elected officials.
<b>MHD Staff</b>	Staff of the Health Department, including contracted or temporary staff not employed by the City but supervised by and/or working for MHD programs.
<b>Government rates</b>	Discounted rates offered to government employees, in the course of conducting official business, by lodging establishments, rental car agencies and other providers of services to government employees.
<b>Official City business</b>	Business that relates directly to a person's work function and benefits the City or fills a purpose carried out by the City.
<b>Overnight Travel</b>	Travel outside of the City over 50 miles one way, that exceeds twelve hours total duration and includes an overnight stay.
<b>Per Diem</b>	Amount allowed on a daily ( <i>per diem</i> ) basis, maximum allowed expense. Meal per diems for MHD travel are calculated cumulatively per meal, when travelers are in Day Travel Status.
<b>Routine Day Travel</b>	Travel outside of the City that does not include both an overnight stay and one-way travel over 50 miles.

**Responsibilities:**

**Employees**

- Employees are responsible for arranging, conducting, and documenting travel and travel costs as authorized in this policy and other applicable policies, for City and MHD business.
- Employees are responsible for ensuring that all travel is obtained at an economical and reasonable price.



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- Employees are responsible for any expenses incurred for personal preference or convenience, or undocumented travel expenses, regardless of eligibility of those expenses.
- Employees may be responsible for payment of the cost of any travel commitments made in advance of the travel authorization.
- Employees shall be responsible for repayment of inappropriately reimbursed expenses whenever an audit or subsequent review of the travel expense reimbursement documentation finds that such expenses were reimbursed contrary to the provisions of City policies or other policies or laws.
- Employees are responsible for prudent judgment and their personal conduct while traveling on City business, and in arranging and funding travel for City business

***Supervisors & Program Managers***

- Department directors and managers are responsible for ensuring that all travel is obtained at an economical price, is consistent with policies outlined herein.
- Supervisors are responsible for assuring funding and verifying eligibility of funding to be used for travel by Employees on City business
- Supervisors may review and validate staff expenses prior to reimbursement

***Business & Administration Manager***

- Serves as the policy owner and is responsible for maintaining the travel policy consistent with City policies and procedures
- Reviews and provides final approval on all travel requests and fund sources for travel
- Acts as administrator along with MHD Finance staff for contracted travel providers, and site administrator for SAP Concur and online travel booking
- Manages MHD ProCard account authorizations and privileges
- Exercises discretion within the policy to assure City policies are met and MHD staff are adequately and equitably able to travel for City business

***MHD Finance Staff***

- Receive, review, and process Travel Request Forms and Reimbursement Requests
- Route final TRF and Statement of Expenses documents for signatures
- Create and process payment vouchers for travel expenses
- Administer CI Azumano/SAP Concur site and privileges for MHD staff travel

***Deputy Commissioners & Commissioner***

- Review travel requests to verify funding, alignment with City travel reimbursement policies and procedures, and City of Milwaukee Health Department mission and goals
- Commissioner provides written approval of exceptions as requested and deemed appropriate

**Legal Authority:**

Milwaukee Code of Ordinances 350-181 - *Transportation & Travel*

**References:**

City Comptroller – Travel Reimbursement Guidance and Overview (January, 2016)

Department of Administration – Travel Guidance (January, 2016)

Travel Request and Statement of Expenses forms, published & updated by City Comptroller

Sample TRF, SOE, and receipt documents



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MHD Finance receipt submission and meal/per diem calculators  
Internal Revenue Service – Mileage Reimbursement Rates  
U.S. General Services Administration – Travel Per Diem by Location

**Approved by:**

<hr/> <i>Commissioner of Health</i> <hr/> <i>Date</i>	<hr/> <i>Deputy Commissioner</i> <hr/> <i>Date</i>
<hr/> <i>Program Manager/Policy Owner</i> <hr/> <i>Date</i>	
<b>Original Effective Date:</b>	<b>Review Periodicity: 24 months</b>

**Reviewed/Updated:**

Date	Changes Made	Reviewed By

