



INTEROFFICE MEMO

Gary Grief, Executive Director

Alfonso D. Royal III, Charitable Bingo Operations Director

To: Susan Pogue
Travel Coordinator

From: Gary Grief

Date: July 14, 2016

Re: Travel Request

TRAVELER: Gary Grief
 DESTINATION: Singapore
 DATES OF TRAVEL: November 3-10, 2016
 MODE OF TRAVEL: Commercial Airlines

PURPOSE OF TRAVEL & EXPECTED BENEFITS: To attend the World Lottery Association (WLA) Summit for the purpose of participating in lottery industry discussions and serving as a panelist. Mr. Grief will be representing both the Texas Lottery Commission (TLC) and the Multistate Lottery Association (MUSL), as the MUSL President at this conference. Travel expenses are reimbursable via the TLC's WLA membership dues. Any travel expenses not reimbursed by the WLA will be personally paid by Mr. Grief.

ESTIMATED COSTS:

Registration	\$1341.36	
Airfare	\$1369.46	(NON refundable)
Processing Fee	\$19.99	
Lodging	\$1540.08	(\$256.68 room rate subject to prevailing taxes and service charge; using .744 conversion @ 6 nts - *Nov. 4-10)
Meals	\$1072	(\$134.00 @ 8 days - Nov. 3-10)
Mileage	20.00	
Incidentals	200.00	(Taxi/shuttle; airport parking)

TOTAL:

\$5,562.53
89

*Mr. Grief's flight departs Nov. 3, but does not arrive Singapore until the early morning hours of Nov. 5. He is securing lodging for Nov. 4 so that he will be permitted to check into the hotel room before the standard check-in time on Nov. 5.

EMPLOYEE: _____

DATE: 7/14/16

MANAGER: _____

DATE: _____

DIRECTOR: _____

DATE: _____

CONTROLLER: Kathy Ryan
(signature required for out-of-state travel only)

DATE: 7/14/16

EXECUTIVE DIRECTOR: _____
(signature required for out-of-state travel only)

DATE: 7-14-16



HEADQUARTERS
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Fax +41 61 284 1350
info@world-lotteries.org
VAT No. 502108

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lynn.roiter@loto-quebec.com

WLS Expense Claim Form

Purpose/event: World Lottery Summit 2016, November 6-9, Singapore

Date(s): November 3-10, 2016

Name GARY GRIEF

Expense reimbursement, according to the WLA reimbursement policy (please attach receipts):

Airfare From: Austin, TX (USA) To: Singapore USD/EUR/CHF/SGD (specify currency if other): **\$1,548.90 USD***

From: Singapore To: Austin, TX (USA)

*includes Travel Agent fee-\$19.99 USD

Other expenses (requires prior approval - see guidelines)

Please list here and attach receipts

TOTAL EXPENSES

USD/EUR/CHF/SGD(specify currency if other): **\$1,548.90 USD**

Please transfer the amount to the bank and account below

Bank name:

Bank address:

Account name (beneficiary): Gary Grief

Account no:

Beneficiary address:

IBAN (if not applicable see below): NA (No IBAN in US)

BIC/Swift address: _____ (for USDollars); _____ (for foreign currency)

I hereby confirm to have incurred the above expenses on WLA business

Claimant's signature

Authorization:



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 c/o Loterie 6882
 P.O. Box
 CH-4002 Basel
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 Telephone +41 61 284 1500
 Fax +41 61 244 1355
 info@wla-internet.org
 wla@wla-internet.org

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 Loterie-Quebec
 500 rue Sherbrooke Ouest
 Bureau 2000
 Montreal, Quebec H3A 2G6
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 Telephone +1 514 383 0278
 Fax +1 514 872 8099
 wla@loterie@info-quebec.com

WLS Expense Claim Form

Purpose/event: World Lottery Summit 2016, November 6-9, Singapore

Date(s): November 3-10, 2016

Name: GARY GRIEF

Expense reimbursement, according to the WLA reimbursement policy (please attach receipts)

Airfare

Other expenses (requires prior approval – see guidelines)

Please list here and attach receipts

11/3/16-American Airlines Internet Access (see attached credit card statement)- **\$19.00 USD**

11/3/16-Breakfast (see attached credit card statement)- **\$4.32 USD**

11/5/16-Taxi from Singapore Changi Airport to Marina Sands Hotel (see attached receipt/exchange rate for this date - .7229)- **\$21.69 USD**

11/10/16-American Airlines Internet Access (see attached credit card statement)- **\$19.00 USD**

11/10/16-Taxi from Marina Sands Hotel to Singapore Changi Airport (see attached receipt/exchange rate for this date - .7086)- **\$21.26 USD**

11/10/16-Lunch (see attached credit card statement)- **\$29.52 USD**

TOTAL EXPENSES: \$114.79 USD

Please transfer the amount to the bank and account below:

Bank name:

Bank address:

Account name (beneficiary): Gary Grief

Account no:

Beneficiary address:

IBAN (if not applicable see below): NA (No IBAN in US)

BIC/Swift address: (for USDollars) (for foreign currency)

I hereby confirm to have incurred the above expenses on WLA business

Claimant's signature:

Gary Grief 11-21-16

Authorization: