

Ikhide Roland Ikheloa



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX [REDACTED]

Account Number
XXXX-XX [REDACTED]

Closing Date
01/28/14

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
0.00	99.00	0.00	0.00	0.00	99.00	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX [REDACTED]		
01/24/14 APPLE ONLINEUSA APPL CUPERTINO CA [REDACTED] 20850 01/24/14 COM*PUTER/SOFTWARE [REDACTED] ROC NUMBER [REDACTED]	27128699790	99.00
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	99.00 0.00

Do not staple or use paper clips

Payment Coupon

Account Number [REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



Apple Inc.

Please remit to:
FOR YOUR RECORDS ONLY

This Is Your



INVOICE RECEIPT

Page 1	Customer Number [REDACTED]	Invoice Number [REDACTED]
-----------	-------------------------------	------------------------------

Invoice Date 01/23/14	Amount Due .00
--------------------------	-------------------



Ikhide Ikheloa
850 Hungerford dr
room 123
ROCKVILLE MD 20850-1718



S
H
I
P
T
O

Ikhide Ikheloa
850 Hungerford dr
room 123
ROCKVILLE MD 20850-1718
USA

Customer Number [REDACTED]	Customer P.O. Number [REDACTED]	Sales Order Number [REDACTED]	Invoice Number [REDACTED]	Invoice Date 01/23/14	Terms Credit Card
-------------------------------	------------------------------------	----------------------------------	------------------------------	--------------------------	----------------------

Item	Product Number	Product Description	Total Ordered	Total Shipped	Unit Price	Extended Price
001	S4577LL/A	APPLECARE+ FOR IPHONE - CC	1	1	99.00	99.00

Web Order Number: [REDACTED]

Your American Express xxx [REDACTED] has been charged \$ 99.00
 For a total of \$ 99.00

DO NOT PAY

Questions? Call (800) 275-2273 Mon-Fri, 8:00 am - 8:00 pm CT

Salesperson [REDACTED]	Contact ZS	Entry Date 01/23/14	Ship Date	Routing Best Way	Waybill Number IN	Subtotal 99.00
---------------------------	---------------	------------------------	-----------	---------------------	----------------------	-------------------

After Remitting Payment Retain This Portion Of Invoice For Your Records.

Please See Reverse Side For Terms And Conditions Pertaining To This Order.

Shipped From:
F/G Distribution Center
Elk Grove, Ca 95758

Special Instructions:

Tax 0.00

Shipping Charges

Apple Inc.

TOTAL USD 99.00



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Roland Ikheloa
 School/office name Board of Education Work location CESC, Room 123
 For the period: From January 29, 2014 To February 28, 2014

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
02/25/2014	02/27/2014	\$700.00	Southwest Airlines, Online (04/03/2014 - 04/07/2014)	Round-trip airfare to attend NSBA conf in New Orleans	02/28/2014	██████████
Total		\$700.00				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

 Signature, Card Member

4/23/14

 Date

 Signature, Approving Official

5/2/14

 Date



Corporate Purchasing Cardmember Report

Sign-up For Online Statements

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
02/28/14

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$ Do Not Pay
99.00	700.00	0.00	99.00	0.00	700.00

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
02/11/14	CORPORATE REMITTANCE RECEIVED 02/11	-99.00
02/27/14	SOUTHWEST AIRLINES (DALLAS TX TKT# AIRLINE/AIR C 02/25/14 PASSENGER TICKET IKHELOA/IKHIDE ROLAND SOUTHWEST AIRLINES (MAS SOUTHWEST AIRLINES (DALLAS TX FROM BALTIMORE MD TO CARRIER CLASS NEW ORLEANS LA WN H TO BALTIMORE MD WN Y TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00	700.00

Total for ROLAND IKHELOA

New Charges/Other Debits 700.00
Payments/Other Credits -99.00

Do not staple or use paper clips

Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.





Thank you for your purchase!

Baltimore/Washington, MD - BWI to New Orleans, LA - MSY



Air

Confirmation #

Baltimore/Washington, MD - BWI to New Orleans, LA - MSY
 Thursday, April 3, 2014 - Monday, April 7, 2014

Air Total: \$700.00

Amount Paid
\$700.00

Trip Total
\$700.00

THU 04/03/14 - New Orleans



AIR

Baltimore/Washington, MD - BWI to New Orleans, LA - MSY
 04/03/2014 - 04/07/2014

Confirmation #

Adult Passenger(s)

IKHIDE IKHELOA
 Subscribe to Flight Status Messaging

Rapid Rewards #

Add Rapid Rewards Number

DEPART	05:40 PM	Depart Baltimore/Washington, MD (BWI) on Southwest Airlines	Flight #182 southwest	Thursday, April 3, 2014
THU	07:30 PM	Arrive in New Orleans, LA (MSY)		Travel Time 2 h 50 m (Nonstop) Wanna Get Away
RETURN	01:25 PM	Depart New Orleans, LA (MSY) on Southwest Airlines	Flight #2157 southwest	Monday, April 7, 2014
MON	04:50 PM	Arrive in Baltimore/Washington, MD (BWI)	WiFi available	Travel Time 2 h 25 m (Nonstop) Anytime

What you need to know to travel:

- Don't forget to check in for your flight(s) 24 hours before your trip on southwest.com or your mobile device.
- Southwest Airlines does not have assigned seats, so you can choose your seat when you board the plane. You will be assigned a boarding position based on your checkin time. The earlier you check in, within 24 hours of your flight, the earlier you get to board.

PRICE: ADULT

Trip	Routing	Fare Type View Fare Rules	Fare Details	Quantity	Total
Depart	BWI-MSY	Wanna Get Away Excellent Value	<ul style="list-style-type: none"> No Change Fees Inter-city fee difference applies Flexible Fare (not refundable - no name changes allowed) Non-refundable unless purchased with Points 	1	\$232.00
Return	MSY-BWI	Anytime Great Flexibility	<ul style="list-style-type: none"> Fully Refundable Same-Day Changes No Change Fees 	1	\$468.00

Enroll in Rapid Rewards and earn at least 5484 Points per person for this trip. Already a Member? Log in to ensure you are getting the points you deserve.

Subtotal **\$700.00**
 Fare Breakdown

Carry-on Items: 1 bag + 1 small personal item are free, see full details.

AIR

Checked Items: First and second bags are free, size and weight limits apply.

Bag Charge \$0.00

Air Total:
\$700.00

Gov't taxes & fees now included

Purchaser Name Roland Ikheboa

Billing Address 850 Hungerford Drive
Rockville, MDUS20850

Form of Payment

Amount Applied

American Express - XXXXXX

\$700.00

Amount Paid
\$700.00

Trip Total
\$700.00



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Roland Ikheloa Board of Education Work location CESC, Room 123
 School/office name _____ To March 30, 2014
 For the period: From February 28, 2014

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - CB	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - MD	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - PK	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - JK	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - PO	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - RS	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - IRI	03/30/2014	██████████
03/19/2014	03/19/2014	\$261.19	Hilton Hotels, New Orleans, LA	Lodging, one night deposit - JPS	03/30/2014	██████████
Total		\$2,089.52				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

Signature, Card Member [Signature]
Signature, Approving Official [Signature]

Date 3/29/14
Date 3/2/14



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
03/30/14

Page 1 of 3

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
700.00	2,089.52	0.00	700.00	0.00	2,089.52	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
03/11/14 CORPORATE REMITTANCE RECEIVED	03/11	700.00
03/19/14 HILTON HOTELS 56929 NEW ORLEANS LA	00051871850	261.19
FOL# [REDACTED] LODGING	03/19/14	
ARRIVAL DATE DEPARTURE DATE		
03/18/14 03/19/14 00		
ROC NUMBER [REDACTED]		
03/19/14 HILTON HOTELS 56929 NEW ORLEANS LA	00051875520	261.19
FOL# [REDACTED] LODGING	03/19/14	
ARRIVAL DATE DEPARTURE DATE		
03/18/14 03/19/14 00		
ROC NUMBER [REDACTED]		
03/19/14 HILTON HOTELS 56929 NEW ORLEANS LA	00051878080	261.19
FOL# [REDACTED] LODGING	03/19/14	
ARRIVAL DATE DEPARTURE DATE		
03/18/14 03/19/14 00		
ROC NUMBER [REDACTED]		
03/19/14 HILTON HOTELS 56929 NEW ORLEANS LA	00051878570	261.19
FOL# [REDACTED] LODGING	03/19/14	
ARRIVAL DATE DEPARTURE DATE		
03/18/14 03/19/14 00		
ROC NUMBER [REDACTED]		

Continued on Page 3

Do not staple or use paper clips

Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

AMERICAN EXPRESS (3000)



Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXX

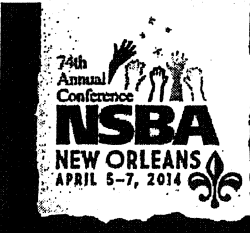
Closing Date
03/30/14

Page 3 of 3

Activity Continued				Reference Code	Amount \$
03/20/14	HILTON HOTELS 56929 NEW ORLEANS FOL# [REDACTED] LODGING ARRIVAL DATE DEPARTURE DATE 03/19/14 03/20/14 00 ROC NUMBER [REDACTED]	LA 03/20/14		00051890590	261.19
03/20/14	HILTON HOTELS 56929 NEW ORLEANS FOL# [REDACTED] LODGING ARRIVAL DATE DEPARTURE DATE 03/19/14 03/20/14 00 ROC NUMBER [REDACTED]	LA 03/20/14		00051890670	261.19
03/20/14	HILTON HOTELS 56929 NEW ORLEANS FOL# [REDACTED] LODGING ARRIVAL DATE DEPARTURE DATE 03/19/14 03/20/14 00 ROC NUMBER [REDACTED]	LA 03/20/14		00051893310	261.19
03/20/14	HILTON HOTELS 56929 NEW ORLEANS FOL# [REDACTED] LODGING ARRIVAL DATE DEPARTURE DATE 03/19/14 03/20/14 00 ROC NUMBER [REDACTED]	LA 03/20/14		00051893350	261.19 *
Total for ROLAND IKHELOA				New Charges/Other Debits Payments/Other Credits	2,089.52 -700.00

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:28 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Christopher Barclay Hotel Reservation Change for NSBA's 74th Annual Convention

	<p>ADVANCING THE EDUCATION OF AMERICA'S CHILDREN</p> <p>TRANSFORMING LEADERSHIP</p>
<p>HOUSING CONFIRMATION NOTICE</p>	
<p>NSBA's 74th Annual Convention, New Orleans, LA, US NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013 Changed 3/20/2014.</p>	
<p>PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):</p>	
<p>Embassy Suites Hampton Inn Convention Center Hyatt Place Convention Center Renaissance Arts Hotel Hilton Garden Inn Springhill Suites Convention Center Marriott Convention Center Courtyard Convention Center Residence Inn Convention Center</p>	
<p>NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.</p>	
<p>CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.</p>	
<p>The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.</p>	
<p>SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.</p>	
<p>Check your reservation details below for accuracy.</p>	
<p>GUEST INFORMATION:</p>	
Guest Name:	Christopher Barclay
Email:	Rebecca_Gibson@mcpsmd.org
Company:	Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Friday, 4/4/2014
Departure Date: Monday, 4/7/2014
of Nights: 3
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

* Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 783.56

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to
Convention Management Resources

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.

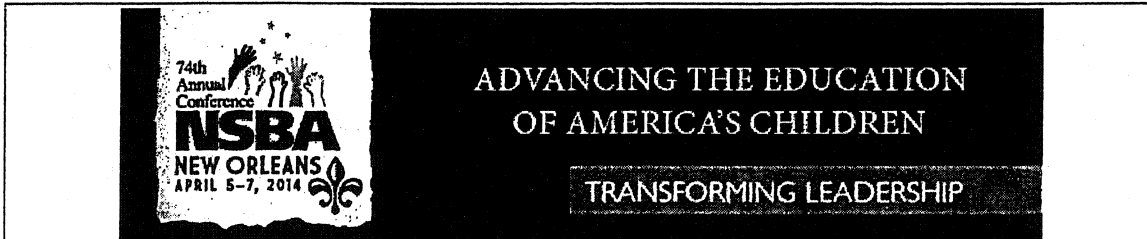
To ensure proper delivery of future emails, take a moment now and add our email address
NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com
US and Canada Toll-Free: 800-616-8210
International: 415-979-2264
Fax: 415-216-2535

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:28 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Michael Durso Hotel Reservation Change for NSBA's 74th Annual Convention



HOUSING CONFIRMATION NOTICE

NSBA's 74th Annual Convention, New Orleans, LA, US
NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013
Changed 3/20/2014.

PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):

- Embassy Suites
- Hampton Inn Convention Center
- Hyatt Place Convention Center
- Renaissance Arts Hotel
- Hilton Garden Inn
- Springhill Suites Convention Center
- Marriott Convention Center
- Courtyard Convention Center
- Residence Inn Convention Center

NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.

CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.

The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.

SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.

Check your reservation details below for accuracy.

GUEST INFORMATION:

Guest Name: Michael Durso
Email: Rebecca_Gibson@mcpsmd.org
Company: Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Friday, 4/4/2014
Departure Date: Monday, 4/7/2014
of Nights: 3
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

* Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 783.56

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to **Convention Management Resources**

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.

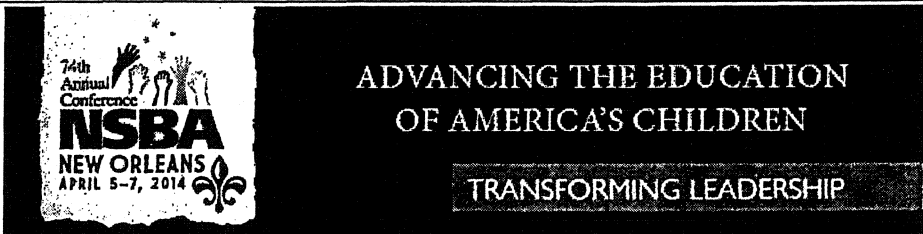
To ensure proper delivery of future emails, take a moment now and add our email address NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com
US and Canada Toll-Free: 800-616-8210
International: 415-979-2264
Fax: 415-216-2535

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:28 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Philip Kauffman Hotel Reservation Change for NSBA's 74th Annual Convention



HOUSING CONFIRMATION NOTICE

NSBA's 74th Annual Convention, New Orleans, LA, US
NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013
Changed 3/20/2014.

PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):

- Embassy Suites
- Hampton Inn Convention Center
- Hyatt Place Convention Center
- Renaissance Arts Hotel
- Hilton Garden Inn
- Springhill Suites Convention Center
- Marriott Convention Center
- Courtyard Convention Center
- Residence Inn Convention Center

NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.

CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.

The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.

SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.

Check your reservation details below for accuracy.

GUEST INFORMATION:

Guest Name: Philip Kauffman
Email: Rebecca.Gibson@mcpsmd.org
Company: Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Thursday, 4/3/2014
Departure Date: Monday, 4/7/2014
of Nights: 4
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

* Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 1,044.75

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to
Convention Management Resources

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.

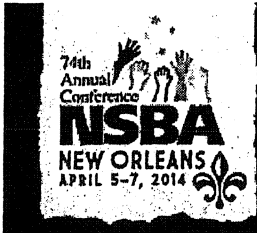
To ensure proper delivery of future emails, take a moment now and add our email address
NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com
US and Canada Toll-Free: 800-616-8210
International: 415-979-2264
Fax: 415-216-2535

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:27 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Justin Kim Hotel Reservation Change for NSBA's 74th Annual Convention

	<p>ADVANCING THE EDUCATION OF AMERICA'S CHILDREN</p> <p>TRANSFORMING LEADERSHIP</p>
<p>HOUSING CONFIRMATION NOTICE</p>	
<p>NSBA's 74th Annual Convention, New Orleans, LA, US NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013 Changed 3/20/2014.</p>	
<p>PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):</p>	
<p>Embassy Suites Hampton Inn Convention Center Hyatt Place Convention Center Renaissance Arts Hotel Hilton Garden Inn Springhill Suites Convention Center Marriott Convention Center Courtyard Convention Center Residence Inn Convention Center</p>	
<p>NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.</p>	
<p>CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.</p>	
<p>The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.</p>	
<p>SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.</p>	
<p>Check your reservation details below for accuracy.</p>	

GUEST INFORMATION:

Guest Name: Justin Kim
Email: Rebecca_Gibson@mcpsmd.org
Company: Montgomery County BoE/Carver Educ Svcs
Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Thursday, 4/3/2014
Departure Date: Monday, 4/7/2014
of Nights: 4
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00
Applicable Hotel Tax: 14.75%

** Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.*

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 1,044.75

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014


If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to **Convention Management Resources**

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:27 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Patricia O'Neill Hotel Reservation Change for NSBA's 74th Annual Convention

	<p>ADVANCING THE EDUCATION OF AMERICA'S CHILDREN</p> <p>TRANSFORMING LEADERSHIP</p>
<p>HOUSING CONFIRMATION NOTICE</p>	
<p>NSBA's 74th Annual Convention, New Orleans, LA, US NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013 Changed 3/20/2014.</p>	
<p>PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):</p>	
<p>Embassy Suites Hampton Inn Convention Center Hyatt Place Convention Center Renaissance Arts Hotel Hilton Garden Inn Springhill Suites Convention Center Marriott Convention Center Courtyard Convention Center Residence Inn Convention Center</p>	
<p>NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.</p>	
<p>CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.</p>	
<p>The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.</p>	
<p>SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.</p>	
<p>Check your reservation details below for accuracy.</p>	
<p>GUEST INFORMATION:</p>	
Guest Name:	Patricia O'Neill
Email:	Rebecca_Gibson@mcpsmd.org
Company:	Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

Sharewiths: Rick O'Neil (4/3/2014-4/7/2014)

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*

Hotel Address: Two Poydras Street
New Orleans, LA 70140

Arrival Date: Thursday, 4/3/2014

Departure Date: Monday, 4/7/2014

of Nights: 4

Hotel Early Departure Fee: No early departure fee for NSBA attendees.

Room Type: ROOM

Occupancy: Double - 2 persons

Special Requests: Request King Bed

** All special requests are subject to hotel availability and cannot be guaranteed.*

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

** Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.*

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 1,044.75

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.

Guaranteed By: American Express (Exp. 10/2014)

Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to **Convention Management Resources**

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.


To ensure proper delivery of future emails, take a moment now and add our email address NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:26 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Rebecca Smondrowski Hotel Reservation Change for NSBA's 74th Annual Convention

	<p>ADVANCING THE EDUCATION OF AMERICA'S CHILDREN</p> <p>TRANSFORMING LEADERSHIP</p>
<p>HOUSING CONFIRMATION NOTICE</p>	
<p>NSBA's 74th Annual Convention, New Orleans, LA, US NSBA 2014 Confirmation: [REDACTED] made on 10/25/2013 Changed 3/20/2014.</p>	
<p>PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):</p> <ul style="list-style-type: none">Embassy SuitesHampton Inn Convention CenterHyatt Place Convention CenterRenaissance Arts HotelHilton Garden InnSpringhill Suites Convention CenterMarriott Convention CenterCourtyard Convention CenterResidence Inn Convention Center	
<p>NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.</p>	
<p>CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.</p>	
<p>The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.</p>	
<p>SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.</p>	
<p>Check your reservation details below for accuracy.</p>	
<p>GUEST INFORMATION:</p>	
Guest Name:	Rebecca Smondrowski
Email:	Rebecca_Gibson@mcpsmd.org
Company:	Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Thursday, 4/3/2014
Departure Date: Monday, 4/7/2014
of Nights: 4
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

** Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.*

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 1,044.75

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to
Convention Management Resources

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.

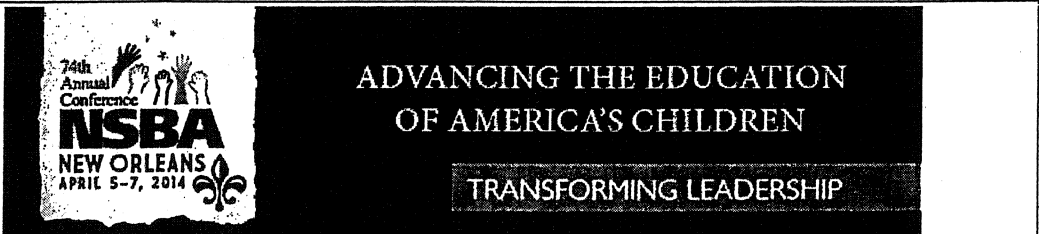
To ensure proper delivery of future emails, take a moment now and add our email address
NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com
US and Canada Toll-Free: 800-616-8210
International: 415-979-2264
Fax: 415-216-2535

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:28 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Roland Ikheloa Hotel Reservation Change for NSBA's 74th Annual Convention



HOUSING CONFIRMATION NOTICE

NSBA's 74th Annual Convention, New Orleans, LA, US
NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013
Changed 3/20/2014.

PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):

- Embassy Suites
- Hampton Inn Convention Center
- Hyatt Place Convention Center
- Renaissance Arts Hotel
- Hilton Garden Inn
- Springhill Suites Convention Center
- Marriott Convention Center
- Courtyard Convention Center
- Residence Inn Convention Center

NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.

CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.

The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.

SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.

Check your reservation details below for accuracy.

GUEST INFORMATION:

Guest Name: Roland Ikheloa
Email: Rebecca.Gibson@mcpsmd.org
Company: Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Thursday, 4/3/2014
Departure Date: Monday, 4/7/2014
of Nights: 4
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

** Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.*

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 1,044.75

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to **Convention Management Resources**

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.

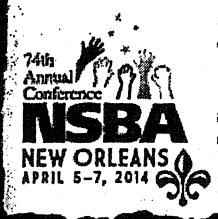
To ensure proper delivery of future emails, take a moment now and add our email address NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com
US and Canada Toll-Free: 800-616-8210
International: 415-979-2264
Fax: 415-216-2535

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Thursday, March 20, 2014 12:26 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Joshua Starr Hotel Reservation Change for NSBA's 74th Annual Convention

	<p>ADVANCING THE EDUCATION OF AMERICA'S CHILDREN</p> <p>TRANSFORMING LEADERSHIP</p>
<p>HOUSING CONFIRMATION NOTICE</p>	
<p>NSBA's 74th Annual Convention, New Orleans, LA, US NSBA 2014 Confirmation # [REDACTED] made on 10/25/2013 Changed 3/20/2014.</p>	
<p>PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service to/from the convention center will be provided for most NSBA Housing hotels with the exception of the following (All are within an easy walk of Halls D & E):</p> <ul style="list-style-type: none">Embassy SuitesHampton Inn Convention CenterHyatt Place Convention CenterRenaissance Arts HotelHilton Garden InnSpringhill Suites Convention CenterMarriott Convention CenterCourtyard Convention CenterResidence Inn Convention Center	
<p>NOTE: Special arrangements can be made for those needing ADA assistance at all NSBA hotels, not just those on the shuttle route.</p>	
<p>CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge a deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 14, 2014, depending on the hotel's policy.</p>	
<p>The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.</p>	
<p>SMOKING POLICIES: The majority of hotels are 100% smoke-free. You are permitted to smoke only in designated areas outside the hotels.</p>	
<p>Check your reservation details below for accuracy.</p>	
<p>GUEST INFORMATION:</p>	
Guest Name:	Joshua Starr
Email:	Rebecca_Gibson@mcpsmd.org
Company:	Montgomery County BoE/Carver Educ Svcs

Address: 850 Hungerford Drive, #123
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Hilton New Orleans Riverside*
Hotel Address: Two Poydras Street
New Orleans, LA 70140
Arrival Date: Saturday, 4/5/2014
Departure Date: Monday, 4/7/2014
of Nights: 2
Hotel Early Departure Fee: No early departure fee for NSBA attendees.
Room Type: ROOM
Occupancy: Single - 1 person

Rate: US\$ 225.00

Applicable Hotel Tax: 14.75%

** Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.*

There is an additional \$3.00 per night occupancy tax in addition to city tax.

Estimated Room+Tax Total: US\$ 522.38

IMPORTANT HOTEL POLICIES:

Deposit Policy: CC Guarantee or \$200/room and \$400/suite payable by check to CMR.
Guaranteed By: American Express (Exp. 10/2014)
Cancellation Policy: Penalty of one night's room and tax applies after Friday, March 7, 2014

If you are sending a check to NSBA Housing to prepay for your stay, please make check payable to **Convention Management Resources**

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 74th Annual Convention.

To ensure proper delivery of future emails, take a moment now and add our email address NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com
US and Canada Toll-Free: 800-616-8210
International: 415-979-2264
Fax: 415-216-2535



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**
www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
01/28/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
29.00	79.00	0.00	29.00	0.00	79.00	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
01/10/13 CORPORATE REMITTANCE RECEIVED	01/10	29.00
01/23/13 BOMBAY BISTRO 650000 ROCKVILLE MD	10156320130	22.00
REF# [REDACTED] 01/22/13		
01/18/13 GB-ROCKVILLE 4513 00 ROCKVILLE MD	12300000000	30.00
REF# [REDACTED] 01/17/13		
FOOD/BEVERAGE		
ROC NUMBER [REDACTED]		
01/26/13 TARA THAI ASIA 41700 ROCKVILLE MD	27200000800	27.00
REF# [REDACTED] 01/25/13		
Total for ROLAND IKHELOA	New Charges/Other Debits	79.00
	Payments/Other Credits	-29.00

Do not staple or use paper clips

Payment Coupon

Account Number
[REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RMT23
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

01/17/2013 - Lunch meeting with Dr. LaVerne Kimball

BOMBAY BISTRO
MONTGOMERY AVE
MD. 20850

01/22/13 000000
#1588 1:44PM SERV.U010001

TABLE#00000004

GUEST 2
***PBAL \$0.00
BUFFET WEEKDAY \$17.90
BAL FWD \$17.90
MOSE ST \$17.90
TTL \$18.97

Try to
Mon-Friday
Sat&Sunday 20.95

Also ask for SPECIALS
Mon Thursday

BOMBAY BISTRO
98 W MONTGOMERY AVE
ROCKVILLE MD 20850
301-762-0798

Terminal #: 00000002
JAN 22, 13 1:43 PM

AM EXPRESS
SALE
BATCH #: 001
RRN: 302234399869

REF#:011
AUTH #:

A
T
TOTAL 20.95

APPROVED

GORDON BIERSCHE
Rockville 4513
0123 Table 1 #Party 2
KATE L SvrCk: 1 12:17p 01/17/13

2 Water 0.00
1 Cobb Salad 13.50
1 Gorgonzola Burgr 10.00

0123
Server: KATE L Rec: 20
01/17/13 12:53, Swiped T: 1 Term: 1

GORDON BIERSCHE-ROCKVILLE
200 F MIDDLE LN

CARD TYPE ACCOUNT NUMBER
AMERICAN EXPRESS XXXXXXXX
Name: R IKHELOA
CO TRANSACTION APPROVED
AUTHORIZATION #:
Reference: 117010000123
TRANS TYPE: Credit Card SALE

CHECK : 25.44
TAX : 4.56
TOTAL : 30.00

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
ASK ABOUT OUR BANQUET ROOM
duplicate copy -> customer

Tara Asia
199-D E. Montgomery Ave.
Rockville, MD 20850
(301) 315-8008

Date/Time: 2013-01-25 01:12 PM
Order Number: 266704
Account Type: FPGT
Entry Mode: Swiped
Card Number: XXXXXXXX
Expire: XX/XX
Cardholder Name: American Express
R IKHELOA
Card Number: [REDACTED]
Cardholder Address: [REDACTED]
Cardholder Phone Number: 272

**PURCHASE
APPROVAL**

Entry Mode: Swiped
Card Number: XXXXXXXX
Expire: XX/XX
Cardholder Name: American Express
R IKHELOA
Card Number: [REDACTED]
Cardholder Address: [REDACTED]
Cardholder Phone Number: 272

Subtotal: \$22.26
Tax: 4.79
Total: \$27.05

Cardmember acknowledges receipt of goods and/or the amount of the total and agrees to perform the obligations set forth by cardmember's agreement with issuer

Signature: _____

R. Ikhele



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
03/30/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
0.00	0.00	0.00	0.00	600.00	600.00	CR

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
03/22/13 NSBA 0115 ALEXANDRIA VA REF# 03/21/13 CONTRIBUTIONS/DONAT ROC NUMBER	88027090850	-600.00 Credit
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	0.00 -600.00

Do not staple or use paper clips
Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RMT23
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

Gibson, Becky

From: NSBA Registration <registration@nsba.org>
Sent: Thursday, March 21, 2013 11:22 AM
To: Gibson, Becky
Cc: Gray, MaryFran
Subject: RE: Changes to Registrations
Attachments: image001.jpg; image002.png; image003.png; image004.png; image005.png; image006.jpg; NSBA 2013 AC Registration Form.pdf

Good Morning,

We are sorry to hear that she will not be able to attend the conference. We will cancel the registration.

You will need to contact the NSBA Housing Bureau directly to cancel the hotel reservations. The contact information for the housing bureau is:

**NSBA Housing Bureau
c/o Convention Management Resources
33 New Montgomery Street, Suite 1420
San Francisco, CA 94105
(800) 616-8210 (USA/Canada)
(415) 979-2264 (International)
(Service is available Monday through Friday, 9:00 AM - 9:00 PM, ET.)
Fax (415) 979-2260**

For the substitute, please provide a letter to NSBA (a copy of this email will suffice) stating that one person will not be going but another will be going in their place. Along with the letter we will need a new registration form completed for the new individual. Please fax the letter and registration form to 703-519-6497. We have attached a copy of the registration form for your convenience.

**If you have any other questions you can contact us at the phone or email listed below.
Thank you and have a great day!**

**Registration Team
National School Boards Association
1680 Duke Street
Alexandria, VA 22314
direct: 1-800-950-6722
fax: 703-519-6497
www.nsba.org**



From: Gibson, Becky [mailto:Rebecca_Gibson@mcpsmd.org]
Sent: Thursday, March 21, 2013 9:41 AM
To: NSBA Registration
Subject: Changes to Registrations

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland 20850

March 21, 2013

To: NSBA Conference Registration

From: Becky Gibson, Fiscal Assistant

Re: 73rd Annual NSBA Conference and Exposition, April 13-15, 2013 Registration

I have three Montgomery County members who will no longer be able to participate in the 73rd Annual National School Boards Association conference from April 13 – 15, 2013.

Patricia O'Neill, Registration No. [REDACTED]

Judith Docca, Registration No. [REDACTED]

Suzann King, Registration No. [REDACTED]

I have one registration where I will need to change the name of the participant. That information is below.
Laura Berthiaume, Registration No. [REDACTED] need to change to Rebecca Smondrowski.

Thank you for your assistance in this matter. If you have any questions, please give me a call at 301-279-3617.

*Becky Gibson
Administrative Secretary Board Finance
Office of the Board of Education
Room 123, CESE
Phone: 301-279-3617*



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From April 1, 2013 To April 29, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
04/12/2013	04/12/2013	\$7.50	Gogo Air, Online	Mobile service while flying for NSBA	04/29/2013	██████
04/12/2013	04/13/2013	\$28.00	Gordon Biersch, Reagan Airport	Meal while attending NSBA Conf -	04/29/2013	██████
				IRI, PK, JM, RS		
04/12/2013	04/13/2013	\$8.29	Inflight US Airways	Meal while attending NSBA Conf - IRI,	04/29/2013	██████
04/12/2013	04/13/2013	\$6.29	Inflight US Airways	Beverage while attending NSBA Conf	04/29/2013	██████
04/12/2013	04/13/2013	\$7.00	Inflight US Airways	MCPS Reimbursed	04/29/2013	██████
04/16/2013	04/16/2013	\$20.00	Melkamu Wasse Melkam, Taxi	Transportation while attending NSBA	04/29/2013	██████
04/12/2013	04/13/2013	\$65.00	Marriott San Diego Hotel & Marina	Meal while attending NSBA Conference	04/29/2013	██████
				Ikheloa, Kauffman, Smondrowski		
04/13/2013	04/14/2013	\$10.00	Marriott San Diego Hotel & Marina	Meal while attending NSBA Conference	04/29/2013	██████
		Total				
		\$152.08				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

[Signature]

Signature, Card Member

6/26/13

Date

[Signature]

Signature, Approving Official

7/15/13

Date



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From April 1, 2013 To April 29, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
04/14/2013	04/15/2013	\$11.00	Marriott San Diego Hotel & Marina	Meal while attending NSBA Conf. - RI	04/29/2013	██████████
04/12/2013	04/17/2013	\$1,089.27	Marriott San Diego Hotel & Marina	Lodging while attending NSBA Conf. (04/12/2013 - 04/16/2013)	04/29/2013	██████████
04/14/2013	04/15/2013	\$6.50	MS Fields Cookies, San Diego	Meal while attending NSBA Conf. - RI	04/29/2013	██████████
04/12/2013	04/13/2013	\$16.60	Niguse Berhan, San Diego, Taxi	Transportation while attending NSBA	04/29/2013	██████████
04/14/2013	04/15/2013	\$62.00	Royal Thai Cuisine, San Diego	Meal while attending NSBA Conference	04/29/2013	██████████
			(Lost receipt)	- Ikheloa,		
04/15/2013	04/16/2013	\$100.00	US Airways	Excess Baggage (Lost receipt)	04/29/2013	██████████
04/16/2013	04/17/2013	\$8.00	US Airways	Excess Baggage (Lost receipt)	04/29/2013	██████████
		Total				
		\$1,293.37				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

[Signature]
Signature, Card Member

6/24/13
Date

[Signature]
Signature, Approving Official

1
Date



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**
www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX [REDACTED]

Account Number
XXXX-XXXX [REDACTED]

Closing Date
04/29/13

Page 1 of 4

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$ Do Not Pay
600.00 CR	2,138.91	600.00	0.00	0.00	2,138.91

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX [REDACTED]		
04/14/13 BLARNEY STONE BLARNE SAN DIEGO CA REF# [REDACTED] 04/13/13	08926044200	61.00 ✓
04/13/13 BLUE-POINT-BLUE-POIN-SAN-DIEGO-CA REF# [REDACTED] 656 FIFTH AVE S 04/12/13	10915090000	493.83 ✓
04/17/13 C P K SAN 083208 SAN DIEGO CA REF# [REDACTED] 04/16/13	02147483600	60.07
04/16/13 CHOPAHN RESTAURANT 0 SAN DIEGO CA REF# [REDACTED] 04/15/13 FOOD/BEVERAGE ROC NUMBER [REDACTED]	19076000000	42.00 ✓
04/27/13 GIANT FOOD INC #127 OLNEY MD REF# [REDACTED] GROCERY STORE 04/27/13	56144200000	36.56
04/12/13 GOGOAIR.COM [REDACTED] IL REF# [REDACTED] INTERNET ACC 04/12/13		7.50 ✓
04/13/13 GORDON BIRSCH570265 WASHINGTON DC REF# [REDACTED] 04/12/13	02147483600	28.00 ✓
04/13/13 INFLIGHT US AIRWAYS PHOENIX AZ REF# [REDACTED] INFLIGHT US AIRW 04/12/13 ORD ;REQ REQUESTER NAME IT1 PURCHASE ;UPI 8.2900;QTY1 IT2 ;UPI 0.0000;QTY FRT 0.00;HDL 0.00;ITM1 ROC NUMBER [REDACTED]	13041210205	8.29 ✓

Continued on Page 3

Do not staple or use paper clips

Payment Coupon

Account Number [REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
 XXXX-XXX

Closing Date
04/29/13

Activity Continued		Reference Code	Amount \$
04/13/13	INFLIGHT US AIRWAYS PHOENIX AZ REF# [REDACTED] INFLIGHT US AIRW 04/12/13 ORD ;REQ REQUESTER NAME IT1 PURCHASE ;UPI 6.2900;QTY1 IT2 ;UPI 0.0000;QTY FRT 0.00;HDL 0.00;ITM1 ROC NUMBER [REDACTED]	13041210202	6.29 ✓
04/13/13	INFLIGHT US AIRWAYS PHOENIX AZ REF# [REDACTED] INFLIGHT US AIRW 04/12/13 ORD ;REQ REQUESTER NAME IT1 PURCHASE ;UPI 7.0000;QTY1 IT2 ;UPI 0.0000;QTY FRT 0.00;HDL 0.00;ITM1 ROC NUMBER [REDACTED]	13041213253	7.00
04/16/13	Melkamu Wasse Melkam San Diego CA REF# [REDACTED] 04/16/13		20.00 ✓
04/13/13	MARRIOTT [REDACTED] SAN DIEGO CA LODGING 04/12/13 ARRIVAL DATE DEPARTURE DATE 04/12/13 04/12/13 00	40400170000	65.00 ✓
04/14/13	MARRIOTT [REDACTED] SAN DIEGO CA LODGING 04/13/13 ARRIVAL DATE DEPARTURE DATE 04/13/13 04/13/13 00	41300082000	10.00 ✓
04/15/13	MARRIOTT [REDACTED] SAN DIEGO CA LODGING 04/14/13 ARRIVAL DATE DEPARTURE DATE 04/14/13 04/14/13 00	41300080000	11.00 ✓
04/17/13	MARRIOTT [REDACTED] SAN DIEGO CA FOL# 4300 LODGING 04/17/13 ARRIVAL DATE DEPARTURE DATE 04/12/13 04/16/13 00 ROC NUMBER [REDACTED]	43000000000	1,089.27 ✓
04/15/13	MS FIELDS COOKIES SAN DIEGO CA REF# [REDACTED] 619-818-4469 04/14/13 CANDY/GIFTS ROC NUMBER [REDACTED]	20890018000	6.50 ✓
04/13/13	NT CAB/NIGUSE BERHAN SAN DIEGO CA REF# 0 TAXICAB & LIMOUS 04/12/13		16.60 ✓
04/15/13	ROYAL THAI CUISINE- SAN DIEGO CA REF# [REDACTED] 04/14/13	05800001800	62.00
04/16/13	US AIRWAYS [REDACTED] AZ TKT# [REDACTED] AIRLINE/AIR C 04/15/13 EXCESS BAGGAGE IKHELOA/IKHIDE US AIRWAYS US AIRWAYS 800-428-4322 AZ FROM UNAVAILABLE TO CARRIER CLASS UNAVAILABLE YY 00 TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00	03723101400	100.00

Activity Continued

Reference Code

Amount \$

04/17/13	US AIRWAYS	SAN DIEGO	CA	03723102101	8:00
	TKT#	AIRLINE/AIR C 04/16/13			
	EXCESS BAGGAGE				
	IKHELOA/IKHIDEROLAND	US AIRWAYS			
	US AIRWAYS	SAN DIEGO	CA		
	FROM				
	UNAVAILABLE				
	TO	CARRIER CLASS			
	UNAVAILABLE	YY 00			
	TO				
	UNAVAILABLE	YY 00			
	TO				
	UNAVAILABLE	YY 00			
	TO				
	UNAVAILABLE	YY 00			

04/11/13	CORPORATE DEDUCTION OF CREDIT BAL.04/11				600.00
----------	---	--	--	--	--------

Total for ROLAND IKHELOA				New Charges/Other Debits	2,738.91
				Payments/Other Credits	0.00



04/16/2013 - CPK, San Diego -
 Meal while attending NSBA Conference
 - Ikheloa, Kauffman, Somdrowski

04/15/2013 - Chopahn Restaurant, San Diego -
 Meal while attending NSBA Conference - Ikheloa

 * Customer Copy *

Chopahn Authentic Afghan Cuisine
 750 6th Ave
 San Diego, CA 92101
 619-236-9236

Date: 04/15/13
 Time: 7:16 PM
 Server: 1. Haider
 Order: 19076
 Description: Table 11:2

Card Type: Credit Card
 Card No: *****
 Expires: 1013
 Appr Code: [REDACTED]

04/12/2013 - Gogo Air, Online -
 Mobile service while flying for NSBA Conf.

Purchases: \$ 36.62

Tip: \$ 5.25

Total: \$ 41.87
 ikheloa/r

Free to pay the above total amount
 according to the card issuer agreement

5/13
 Table 11:2 Cust 1
 Server 1 Haider

Saffron Shrimp 25.95
 BAJENJAN 7.95

Taxable: 33.90

Sub-total: 33.90
 Sales Tax: 2.72

Total Due: 36.62

View in web browser | View on mobile device



FLY CLASSY WITH GOGO.

U.S. AIRWAYS

PURCHASE DETAILS

ikhide ikheloa	Date:	04/12/2013
Username: [REDACTED]	Payment Method:	AMEX: XXXX [REDACTED]
Flight#: AWE65	Gogo 1-Hour Pass	\$7.5
	Total	\$7.50

DOWNLOAD THE PERFECT CARRY-ON
 GET THE FREE GOGO APP FOR EASY ONE-STEP SIGN IN.
 DOWNLOAD NOW →



gogo STAY CONNECTED - EVEN WITH YOUR HEAD IN THE CLOUDS
 VIEW ALL PASSES →

Contact Us
 Gogo Customer Care

TERMS & CONDITIONS
 Use of Gogo service requires registration. [Terms of Use](#)

PRIVACY
[Privacy Policy](#)

©2012 Gogo LLC. All trademarks are the property of their respective owners. 1250 N Arlington Heights Rd, Itasca, IL 60143

04/12/2013 - Gordon Biersch, Reagan National Airport -
Meal while attending NSBA conference
- IkheLoa, Kauffman, Mannes, Smondrowski

04/12/2013 - Inflight US Airways -
Meal while attending NSBA conference

HMSHOST
GORDON BIERSCH
REAGAN NATIONAL AIRPORT
CHECK: 7847
TABLE: 128/1
SERVER: 56139 Menen
DATE: APR12'13 7:19AM
CARD TYPE: AMEX
ACCT #: XXXXXXXXXX
AUTH CODE: [REDACTED]
R IKHELOA

TOTAL: 23.74

4.26

TIP: -----

\$ 28.00

TOTAL: -----

X
I AGREE TO PAY THE ABOVE AMOUNT
IN ACCORDANCE WITH THE CARD
ISSUER'S AGREEMENT.

**** SEAT 1 ***
EE BAR 2.09
FIRST RND HOTBEV
1 COFFEE BAR 2.09
FIRST RND HOTBEV
1 FRNCH TST STRWB 9.00
FRENCH TOAST WITH
STRAWBERRY
BACON
1 BRK SND BLT 8.60
TAX 1.96 AMOUNT D 23.74

SUBTOTAL 21.78
TAX 1.96
AMOUNT DUE \$23.74

THANK YOU FOR YOUR BUSINESS!

TELL US ABOUT YOUR EXPERIENCE

KEVIN HAYDEN
703-572-4610
KEVIN.HAYDEN@HMSHOST.COM

U.S AIRWAYS

04/12/2013
US0065 DCA-SAN
204520
Device ID GLX00085034

Receipt #: 0032
Transaction: [REDACTED]

Sale

Product	Price	Qty	Amt
Sandwich- Brea	8.29	1	8.29
Total	USD		8.29

04/12/2013 - Inflight US Airways -
Beverage while attending NSBA conference

U.S AIRWAYS

04/12/2013
US0065 DCA-SAN
204520
Device ID [REDACTED]

Receipt #: 0031
Transaction: [REDACTED]

Sale

Product	Price	Qty	Amt.
Cafe Plus Box	6.29	1	6.29
Total	USD		6.29

04/12/2013 - Marriott San Diego Hotel & Marina
Meal while attending NSBA conf. - IRI, PK, RS

04/13/2013 - Marriott San Diego Hotel & Marina
Meal while attending NSBA conference

***** EXCHANGE *****
4126 TERRIONA

CHK 3010 13APR'13 8:56AM

CHECK

1 BF SAND EGG/CHZ 5.00
1 COFFEE 2.70
Sub-Total: 7.70
Tax 0.62
Total: 10.00
CHARGE TIP \$ 1.68
XXXXXXXXXX [REDACTED] XX/XX
AMERICAN EXPRESS 10.00
---4126 CLOSED 13APR 8:58AM---

& & & 404 & & &
***** CREDIT CARD VOUCHER *****

SAN DIEGO MARRIOTT
SAN DIEGO, CA
MARINA KITCHEN
CHECK: 8294
TABLE: 121/1
SERVER: 103 ANABEL
DATE: 12APR'13 2:11PM
CARD TYPE: AMERICAN EXPRESS
ACCT #: XXXXXXXXX [REDACTED]
EXP DATE: XX/XX
AUTH CODE: [REDACTED]
R IKHELOA

SUBTOTAL: 55.08
GRATUITY \$ 9.92
TOTAL \$ 65.00
SIGNATURE *[Signature]*

PLEASE LEAVE SIGNED COPY WITH
YOUR SERVER
THANK YOU HAVE A NICE DAY

12APR'13 1:36PM

2 BURGER 27.00
1 STEAK SALAD 18.00*
2 SOFT DRINK 6.00
Sub-Total: 51.00
Tax 4.08
2:10 TOTAL DUE: \$55.08
PLEASE COMPLETE FOR ROOM CHARGES
GRATUITY 9.92
TOTAL 65.00

04/14/2013 - Marriott San Diego Hotel & Marina
Meal while attending NSBA conference

& & & 413 & & &
***** CREDIT CARD VOUCHER *****

SAN DIEGO MARINA MARRIOTT
SAN DIEGO, CALIFORNIA
EXCHANGE

CHECK: 3334
SERVER: 4113 SHANI
DATE: 14APR'13 8:44AM
CARD TYPE: AMERICAN EXPRESS
#: XXXXXXXXX [REDACTED]
DATE: XX/XX
AUTH CODE: [REDACTED]
R IKHELOA

SUBTOTAL: 9.40
GRATUITY \$ 1.60
TOTAL \$ 11.00
SIGNATURE *[Signature]*

04/12 - 16/2013 - Marriott San Diego Hotel & Marina
Lodging while attending NSBA conference



GUEST FOLIO

333 West Harbor Drive, San Diego, CA 92101 • 619.234.1500 • Marriott.com/SANDT

IKHELOA/ROLAND 239.00 04/16/13 12:00
Room Name Rate Depart Time ACCT# GROUP
VK 04/12/13 15:19
Type Arrive Time
195

MRW#:

Room Clerk	Address	Payment			
DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE	
04/12	ROOM	802, 1 239.00			
04/12	TOT TX	802, 1 25.10			
04/12	CA FEE	802, 1 .20			
04/12	TMD FEE	802, 1 4.78			
04/13	ROOM	802, 1 239.00			
04/13	TOT TX	802, 1 25.10			
04/13	CA FEE	802, 1 .20			
04/13	TMD FEE	802, 1 4.78			
04/13	TELECOMM	WFB 12.95			
04/14	ROOM	802, 1 239.00			
04/14	TOT TX	802, 1 25.10			
04/14	CA FEE	802, 1 .20			
04/14	TMD FEE	802, 1 4.78			
04/15	ROOM	802, 1 239.00			
04/15	TOT TX	802, 1 25.10			
04/15	CA FEE	802, 1 .20			
04/15	TMD FEE	802, 1 4.78			
04/16	AX CARD				\$1089.27

TO BE SETTLED TO: AMERICAN EXPRESS CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT, PLEASE DIAL 71996 FOR VOICE MAIL CHECK-OUT; OR UTILIZE VIDEO CHECK-OUT FOR AN UPDATED STATEMENT AT THE BELLSTAND.

WANT YOUR FINAL HOTEL BILL BY EMAIL? JUST ASK THE FRONT DESK!
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X _____

04/14/2013 - MS Fields Cookies, San Diego -
Meal while attending NSBA conference

MS FIELDS COOKIES.
PACIFIC HARBOR DRIVE.
SAN DIEGO, CA 92101
04/14/2013 10:15:55
Merchant ID: 00000002169817
Terminal ID: 04098206
1048215289

AMEX SALE

XXXXX: [REDACTED]
390
000
Code: [REDACTED]
Mod: [REDACTED]
Swip
Onli #

SALE AMOUNT \$6.50

CUSTOMER COPY

04/16/2013 - Melkamu Wasse Melkam, San Diego - Taxi -
Ground Transportation while attending NSBA conf.

Fare Receipt

Date _____

Passenger: _____

The sum of \$ 20⁰⁰

From _____

To _____

Cab No. _____ Driver _____

7/1/12 REV

04/13/2013 - Niguse Berham, San Diego - Taxi -
Ground Transportation while attending NSBA conf.

.....
NT Cab Niguse Berhane
10184 Embassy Way
SAN DIEGO CA 92126
1619 549 9774

C O P Y

04/12/2013 12:08:40

Sale:

Transaction # 8
Card Type: AmericanExp
Acc: ***** [REDACTED]
Exp. Date: **/**
Entry: Swiped
Invoice # 1855
Amount: 16.60

Auth. Code: [REDACTED]
Response: AP

CUSTOMER COPY



Division of Controller Office
 850 Hungerford Drive, Room 154
 Rockville, Maryland, 20850
 Billing@mcpsmd.org

DEPOSIT SLIP

Print Form

Reset Form

Requestor: Becky Gibson
Department: Board of Education
School:
Contact Name: Becky Gibson
E-Mail: Becky_Gibson@mcpsmd.org
Phone: 301-279-3617
Fax: 301-279-3860
Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 2013/06/06

Customer Signature

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Roland Ikhehoa, Reimburse AMEX, Giant Food, Inflight	\$43.56

Bank of America Advantage[®]

IKHIDE R IKHELOA 03-98
 FLORENCE O IKHELOA

5-20-13
 Date

2824
 7-163/520 MD
 2387

Pay to the order of

MCPS
 Forty three 56

\$43.56
 Dollars

Bank of America

ACH R/T 052001633

Memorandum Reimbursement

2824

Total \$43.56

Receipts Confirmation for Customer Only

Received By:

[Signature]

In the amount of

\$43.56

Received Date

6/6/13



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From April 30, 2013 To May 29, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
05/10/2013	05/11/2013	\$40.00	La Tasca, Rockville	Business dinner meeting with Board member Rebecca Smondrowski	05/29/2013	[REDACTED]
05/10/2013	05/10/2013	\$30.00	Minerva of Maryland, Gaithersburg	Business luncheon with Council President Nancy Navarro	05/29/2013	[REDACTED]
05/17/2013	05/17/2013	\$32.00	Minerva of Maryland, Gaithersburg	Business luncheon with Board President	05/29/2013	[REDACTED]
05/02/2013	05/03/2013	\$34.11	Woodside Deli, Rockville	Barclay Business luncheon with Smondrowski and Steinberg	05/29/2013	[REDACTED]
		Total				
		\$136.11				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

[Signature]
Signature, Card Member

6/27/13
Date

[Signature]
Signature, Approving Official

7/5/13
Date



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
05/29/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
2,138.91	136.11	0.00	2,138.91	0.00	136.11	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
05/10/13 CORPORATE REMITTANCE RECEIVED 05/10		-2,138.91
05/11/13 LA TASC ROCKVILLE MD 10156320130 REF# 05/10/13		40.00
05/10/13 MINERVA OF MD GAITHERSBURG MD 83560099000 REF# 05/10/13 FOOD/BEVERAGE ROC NUMBER		30.00
05/17/13 MINERVA OF MD GAITHERSBURG MD 35440078000 REF# 05/17/13 FOOD/BEVERAGE ROC NUMBER		32.00
05/03/13 WOODSIDE DELI ROCKVI ROCKVILLE MD 85101653123 USEC20850 05/02/13 ROC NUMBER		34.11
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	136.11 -2,138.91

Do not staple or use paper clips
Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



05/10/2013 - La Tasca, Rockville -
Business dinner with Smondrowski

05/10/2013 - Minerva of Maryland, Gaithersburg -
Business luncheon w/ Council President Nancy Navarro

19
21

La Tasca
Rockville
141 Gibbs St
Rockville, MD 20850
79-7011

Name: Kevin PM
DOB: 05/10/2012, 2000
104858

XXXXXXXXXXXXXXXXXXXX
Magnetic card present: Yes
Card #: [REDACTED]

Amount: 23.92
+ Tip: 6.8
= Total: 30.72

X _____
[Signature]

Minerva Indian Cuisine
16240 S Frederick Ave
Gaithersburg, MD 20877
(301) 946-9898

Servers: Oscar Station: [REDACTED]

Order #: [REDACTED] Line 1:
Table: 6 6

Weekday Lunch 23.92
TAX TOTAL: 23.92
TAX: 1.43
TOTAL: 25.35

AMOUNT DUE: \$25.33

>> Ticket #: 50 <<
5/10/2013 1:08:12 PM

05/17/2013 - Minerva of Maryland, Gaithersburg -
Business luncheon w/ Board President Barclay

05/02/2013 - Woodside Deli, Rockville -
Business luncheon w/ Smondrowski & Steinberg

MINERVA OF MD
16240 FREDERICK RD
GAITHERSBURG, MD 20877
05/17/2013 13:00:38
Merchant ID: 00000002915005
Terminal ID: 04335354
2190775346

WOODSIDE DELI ROCKVILLE
4 N. WASHINGTON STREET
ROCKVILLE, MD 20850
301-444-4478
Merchant ID: 8501870613
Term ID: 7062
Server ID: 10

CREDIT CARD

AMEX SALE

XXXXXXXX [REDACTED]
E [REDACTED]
t: 0002/14
il Code: [REDACTED]
ethod: Swiped
On

P AMT

\$28.

5.00

34.00

TOTAL AMOUNT

CUSTOMER COPY

Sale

Method: Swiped

12:26:2

10000039 Appr Code: [REDACTED]

\$ 29.11
\$ 5.00
\$ 34.11

CUSTOMER COPY

THANK YOU



Corporate Purchasing Cardmember Report

Sign-up For Online Statements
www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XX

Closing Date
06/28/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$ Do Not Pay
136.11	581.87	0.00	136.11	0.00	581.87

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
06/07/13	CORPORATE REMITTANCE RECEIVED 06/07	-136.11
05/31/13	MR. TIRE 007740 ROCKVILLE MD 02698674200	581.87
	REF# -05/30/13	
Total for ROLAND IKHELOA		
	New Charges/Other Debits	581.87
	Payments/Other Credits	-136.11

Do not staple or use paper clips

Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
 MCPS MDTAX
 850 HUNGERFORD RM123
 ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

DEPOSIT SLIP



Division of Controller Office
 850 Hungerford Drive, Room 154
 Rockville, Maryland, 20850
 Billing@mcpsmd.org

Requestor: Becky Gibson
Department: Board of Education
School:
Contact Name: Becky Gibson
E-Mail: Becky_Gibson@mcpsmd.org
Phone: 301-279-3617
Fax: 301-279-3860
Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 2013/08/09

Customer Signature

Becky Gibson

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Roland Ikheola, Reimburse AMEX	\$581.87
<i>Bank of America Advantage</i>			
<p>IKHIDE R IKHELOA 03-98 2732 FLORENCE O IKHELOA [REDACTED] 8-5-13 Date 7-163/520 MD 2387 Pay to the order of <i>mcps</i> \$581.87 Five hundred & eighty one 87/100 Dollars Bank of America ACH R/T 052001633 Memo [REDACTED] 2732 [Signature]</p>			
Total			\$581.87

Receipts Confirmation for Customer Only

Received By: *[Signature]*

In the amount of \$581.87

Received Date: 8/9/13

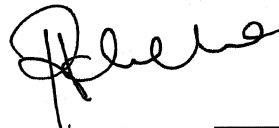
MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland


May 22, 2013

5/25/13
PAID

MEMORANDUM

To: Mrs. Susan Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to Ikhide Roland Ikheloa, ID 

Please issue a check in the amount of \$37.81 in reimbursement of the attached receipts for parking and replacement parts and deposit check.

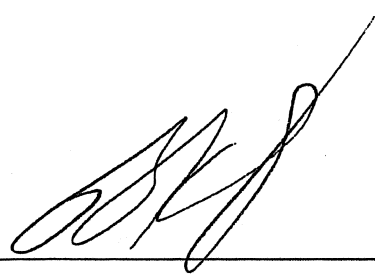
Please charge the account number indicated.

Mr. Ikhide Roland Ikheloa 

Thank you.

IRI:rlg

Attachment

Approved  _____

03/04/2013 - Parking, Rockville Library,
Attending Board of Education Retreat

03/10/2013 - Replacement Charger

WR

WIRELESS ZONE
3229 SPARTAN RD
OLNEY, MD 20832

2013 15:07
Merchant ID: 000000001958
Terminal ID: 03954
8409887

CREDIT CARD
MC SALE

XXXX.XXXXXX
ICE
Auth #: 01
Approval Code: 00
Auth Method: S1
Auth #: C
NET AMOUNT \$27.81

WELCOME TO
ROCKVILLE TOWN SQUARE

PLEASE KEEP THIS TICKET
WITH YOU

Entered/Arrived:
2013/03/04 08:32

Ticket/Billet#: 72496386
Dur/Duree: 8:47:26
Paid On/Paye Le:
2013/03/04 17:19

Paid/Paye: \$ 10.00
Original Fee: \$ 10.00
GST: \$ 0.00
PST: \$ 0.00

Change: \$ 0.00
MASTERCARD
SC: \$ 0.00

Merchant ID:

MASTERCARD

Seq# 805963

Purchase 10/03/04 17:22:43

Auth#



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

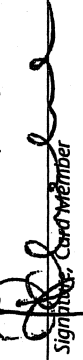
For the period: From June 29, 2013 To July 28, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
07/22/2013	07/23/2013	\$43.00	Ted's 355 Diner, Rockville	Lunch mtg. w/ Smondrowski & O'Neill	07/28/2013	██████████
Total		\$43.00				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.


 Signature, Card Member

8/22/13
 Date


 Signature, Approving Official

8/27/13
 Date



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXX

Closing Date
07/28/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
581.87	43.00	0.00	581.87	0.00	43.00	

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
07/03/13 CORPORATE REMITTANCE RECEIVED 07/03		-581.87
07/23/13 TED'S 355 DINER 5429 ROCKVILLE MD 00079084400		43.00
REF# 07/22/13		
Total for ROLAND IKHELOA	New Charges/Other Debits	43.00
	Payments/Other Credits	-581.87

Do not staple or use paper clips
Payment Coupon

Account Number

Please enter account number on all correspondence.



ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

07/22/2013 - Ted's 355 Diner, Rockville -
Lunch mtg. with Smondrowski and O'Neill

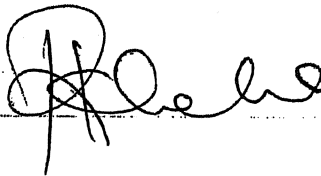
0055

Server: MEI W (#321) Rec: 27
07/22/13 12:41, Swiped T: 5 Term: 4

TED'S 355
895 ROCKVILLE PIKE
ROCKVILLE, MD 20852
() -
MERCHANT #:

CARD TYPE ACCOUNT NUMBER
AMERICAN EXPRES XXXXXXXX [REDACTED]
Name: R IKHELOA
OO TRANSACTION APPROVED
AUTHORIZATION #: [REDACTED]
Reference: [REDACTED]
MS TYPE: Credit Card SALE

CHECK : 35.45
P : 7.57
TOTAL : \$ 43.02



PHONE: () -
CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
SIGNED COPY -- MERCHANT
Suggested Gratuity
GRAT 18% 6.03
GRAT 20% 6.70
GRAT 25% 8.37



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From July 29, 2013 To August 28, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
08/01/2013	08/01/2013	\$25.00	Barnes & Noble, Online	Automatic Membership Renewal (Canceled - Will be refunded by B&N)	08/28/2013	[REDACTED]
Total		\$25.00				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

[Signature]
Signature: Christophe...
Card Member

10/11/13
Date

[Signature]
Signature: Christophe...
Approving Official

10/16/13
Date



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**
www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
08/28/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
43.00	25.00	0.00	43.00	0.00	25.00	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
08/12/13 CORPORATE REMITTANCE RECEIVED	08/12	-43.00
08/01/13 BARNES&NOBLE MEMBER NEW YORK	NY	25.00 ✓
REF#	08/01/13	
B Membership Renewal		
ROC NUMBER		
Total for ROLAND IKHELOA	New Charges/Other Debits	25.00
	Payments/Other Credits	-43.00

Do not staple or use paper clips
Payment Coupon

Account Number
[Redacted]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa
 School/office name Board of Education Work location CESC, Room 123
 For the period: From August 29, 2013 To September 28, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
09/26/2013	09/26/2013	-\$25.00	Barnes & Noble, Online	Auto. Membership Renewal - Refund	09/28/2013	[REDACTED]
Total		-\$25.00				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

Signature, Card Member: *[Signature]* Date: 11/6/13
 Signature, Approving Official: *[Signature]* Date: 11/18/13



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX [REDACTED]

Account Number
XXXX-XX [REDACTED]

Closing Date
09/28/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
25.00	0.00	0.00	25.00	25.00	25.00	CR

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX [REDACTED]		
09/05/13 CORPORATE REMITTANCE RECEIVED 09/05		-25.00
09/26/13 BARNES&NOBLE MEMBER NEW YORK NY REF# [REDACTED] 09/26/13 B&N Membership: Rene. ROC NUMBER [REDACTED]	00034956473	-25.00 Credit
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	0.00 -50.00

Do not staple or use paper clips
Payment Coupon

Account Number
[REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.





PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From September 29, 2013 To October 28, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
10/02/2013	10/02/2013	\$509.00	Fagers Island	Dinner during MABE Conference	10/28/2013	[REDACTED]
10/01/2013	10/02/2013	\$50.00	Sargent Cleaners, Olney	- CB, SB, PK, JK, PO, RS, RI, LS, JS	10/28/2013	[REDACTED]
10/06/2013	10/06/2013	\$67.09	Target, Silver Spring	Mistakenly Used (MU) - Items returned	10/28/2013	[REDACTED]
				to store for credit		
10/06/2013	10/06/2013	-\$49.08	Target, Silver Spring	MU - Items credited	10/28/2013	[REDACTED]
10/06/2013	10/06/2013	-\$18.01	Target, Silver Spring	MU - Items credited	10/28/2013	[REDACTED]
		Total				
		\$559.00				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchasing card privilege and/or disciplinary action.

Christophe S. Barclay
Signature, Approving Official

12/17/13
Date

[Signature]
Signature, Card Member

12/11/13
Date



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa
 School/office name Board of Education Work location CESC, Room 123

For the period: From September 29, 2013 To October 28, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
10/02/2013	10/02/2013	\$32.00	Clarion - Breakers Pub, Ocean City	Lunch during MABE Conf. - RI, LS	10/28/2013	██████████
10/03/2013	10/04/2013	\$95.00	Clarion - Horizons, Ocean City	Lunch during MABE Conference	10/28/2013	██████████
				- PK, RS, PO, RO, RI, LS		
10/03/2013	10/04/2013	\$19.28	Clarion - Horizons, Ocean City	Lunch during MABE Conference - JK	10/28/2013	██████████
10/04/2013	10/04/2013	\$151.53	Clarion Fontainebleau, Ocean City	Lodging, MABE Annual Conference	10/28/2013	██████████
			(10/02/13 - 10/04/13)	Balance after deposit - Ikheloa		
10/05/2013	10/05/2013	\$151.53	Clarion Fontainebleau, Ocean City	Lodging, MABE Annual Conference	10/28/2013	██████████
			(10/02/13 - 10/04/13)	Balance after deposit - Steinberg		
10/09/2013	10/10/2013	\$160.00	Fix My Phone, Gaithersburg	iPad repair	10/28/2013	██████████
	Total	\$609.34				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

Signature, Card Member: [Signature] Date: 10/11/13
 Signature, Approving Official: [Signature] Date: 12/11/13



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
10/28/13

Page 1 of 7

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$ Do Not Pay	For important information regarding your account refer to page 2.
25.00 CR	1,235.43	25.00	0.00	67.09	1,168.34	

See Page 5 For A Notice Of Changes To Your Agreement

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
10/03/13 CLARION RESORT FONTA OCEAN CITY MD REF# 10/02/13		32.00
10/04/13 CLARION RESORT FONTA OCEAN CITY MD REF# 10/03/13		95.00
10/04/13 CLARION RESORT FONTA OCEAN CITY MD REF# 10/03/13		19.28
10/04/13 CLARION RESORT HOTEL OCEAN CITY MD FOL# LODGING 10/04/13 ARRIVAL DATE DEPARTURE DATE 10/02/13 10/03/13 00 ROOM RATE \$145.00 ROC NUMBER		151.53
10/05/13 CLARION RESORT HOTEL OCEAN CITY MD FOL# LODGING 10/05/13 ARRIVAL DATE DEPARTURE DATE 10/02/13 10/04/13 00 ROOM RATE \$145.00 ROC NUMBER		151.53
10/09/13 Fix My Phone Fix My Gaithersburg MD REF# 10/10/13		160.00

Continued on Page 3

Do not staple or use paper clips

Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



Prepared For
ROLAND IKHELOA
 MCPS MDTAX [REDACTED]

Account Number
 XXXX-XX [REDACTED]

Closing Date
 10/28/13

Activity Continued				Reference Code	Amount \$
10/03/13	FAGERS ISLAND REF# [REDACTED]	OCEAN CITY RESTAURANT	MD 10/02/13	50880460000	509.00
10/02/13	SARGENT CLEANERS REF# [REDACTED] ROC NUMBER [REDACTED]	OLNEY 301-774-6728	MD 10/01/13	85101653275	50.00
10/06/13	TARGET T1138 1138 REF# [REDACTED]	SILVER SPRING DISCOUNT STORE	MD 10/06/13	00740275000	67.09
10/06/13	TARGET T1138 1138 REF# [REDACTED]	SILVER SPRING DISCOUNT STORE	MD 10/06/13	00740277000	-49.08 Credit
10/06/13	TARGET T1138 1138 REF# [REDACTED]	SILVER SPRING DISCOUNT STORE	MD 10/06/13	00740282000	-18.01 Credit
10/07/13	CORPORATE DEDUCTION OF CREDIT BAL. 10/07				25.00
Total for ROLAND IKHELOA				New Charges/Other Debits Payments/Other Credits	1,260.43 -67.09

Clarion Fontainbleau Hotel
Breakers Pub

2029 DeLauder 3

CHK 1955 TBL FISH GST 1
OCT02'13 2:22PM

Bar Order

2 Soda 5.20
1 Fish & Chips 11.00
1 Chix Sand 10.00

Food 26.20
Other: 4.09
0.5% City Tax 0.13
6.0% Food Tax 1.58
Payment: 32.00
Charged Tip 4.09
XXXXXXXXXX XX/XX
78739/POS AMERICAN
American Express 32.00

---2029 CLOSED OCT02 3:02PM---

Clarion Fontainbleau Hotel
Breakers Pub

CHECK: 1955
GST CHKID: TBL FISH
SERVER: 2029 DeLauder
DATE: OCT02'13 2:53PM
CARD TYPE: American Express
ACCT #: XXXXXXXX
EXP DATE: XX/XX
AUTH CODE: R IKHELOA

SUBTOTAL: 27.91

Gratuity: 4.09

Total: \$ 35.00

X. Blala
I agree to pay the above amount
in accordance with card holder
agreement.

10/02/2013 - Clarion Fontainebleau - Breakers Pub
Lunch while attending MABE conf. - RI, LS

10/03/2013 - Clarion Fontainebleau - Horizons
Lunch during MABE conf. - RI, LS, PK, RS, PO, RO

Clarion Fontainebleau Hotel
Horizons Restaurant

1098 Kelly

CHK 153 24 GST 6
OCT03'13 11:51AM

Dining

1 Crab Ck Sand	16.00
1 Hot Dog	.00
1 Chef Salad	1.00
2 Lunch special	11.90
2 Soup Of Day	12.00
1 Soda	
1 Iced Tea	

Full Service Revenue Center

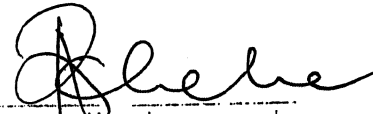
CHECK: 153
GST CHKID: 24
SERVER: 1098 Kelly
DATE: OCT03 13 12:45PM
CARD TYPE: American Express
ACCT #: XXXXXXXX [REDACTED]
EXP DATE: XX/XX
AUTH CODE: [REDACTED]

R IKHELOA

UBTOTAL: 80.33

GRATUITY: 14.67

TOTAL: \$95.00



I agree to pay the above amount
in accordance with card holder
agreement.

Full Service Revenue Center
 CHECK: 156
 GST CHKID: 36
 SERVER: 1107 Natalia
 DATE: OCT03'13 1:03PM
 CARD TYPE: American Express
 ACCT #: XXXXXXXX [REDACTED]
 EXP DATE: XX/XX
 AUTH CODE: [REDACTED]
 R IKHELOA

SUBTOTAL: 16.78
 Gratuity \$ 2.50
 Total: 19.28

X. [Signature]
 I agree to pay the above amount
 in accordance with card holder
 agreement.

Clarion Fontainebleau Hotel
 Horizons Restaurant
 1107 Natalia 1

 CHK 156 36 GST 1
 OCT03'13 12:06PM

Dining

1 Cheezburg	9.75
no mushrooms	
no bacon	
1 Potato Skins	8.00
Food	15.75
Other:	2.50
0.5% City Tax	0.08
6.0% Food Tax	0.95
Payment:	19.28
Charged Tip	2.50
XXXXXXXX [REDACTED]	XX/XX
78739/POS AMERICAN	
American Express	19.28
---1107 CLOSED OCT03 1:06PM---	

10/03/2013 - Clarion Fontainebleau - Horizons
 Lunch during MABE conf. - JK

Clarion Fontainebleau Hotel
 10100 Coastal Highway
 Ocean City, MD 21842
 United States
 Tel: 410-524-3535 Fax: 410-524-3834

Roland Ikheloa	Page Number : 1	
Montgomery County Bd Of Ed	Guest Number: [REDACTED]	Arrive Date: 10-02-13 13:39
850 Hungerford Drive	Folio ID : A	Depart Date: 10-04-13
Rockville, MD 20850	No. Of Guest: 1	
United States	Room Number : 919	
	Room Rate : 145.00	
Email: becky_gibson@mcpsmd.org	Club Account:	
BE0930 - Mabe		

Tax Invoice

Fontainebleau Hotel 10-03-13 23:13 CHADB

Date	Reference	Description	Charges	Credits
10-02-13	DEPOSIT	Deposit Applied		-151.53
10-02-13	[REDACTED]	Room	145.00	
10-02-13	[REDACTED]	4.5% Occupancy Tax	6.53	
10-03-13	AX	American Express		-151.53
10-03-13	[REDACTED]	Room	145.00	
10-03-13	[REDACTED]	4.5% Occupancy Tax	6.53	
		** Total	303.06	-303.06
		*** Balance	-0.00	

EXPENSE SUMMARY REPORT

Date	Room&Tax	Telephone	Food&Bev	Other	Total	Payment
10-02-13	151.53	0.00	0.00	-151.53	0.00	0.00
10-03-13	151.53	0.00	0.00	0.00	151.53	-151.53
Total	303.06	0.00	0.00	-151.53	151.53	-151.53

Clarion Fontainebleau Hotel
10100 Coastal Highway
Ocean City, MD 21842
United States
Tel: 410-524-3535 Fax: 410-524-3834

Roland Ikheloa
Montgomery County Bd Of Ed
850 Hungerford Drive
Rockville, MD 20850
United States

Email: becky_gibson@mcpsmd.org
BE0930 - Mabe

Page Number : 2
Guest Number: [REDACTED] Arrive Date: 10-02-13 13:39
Folio ID : A Depart Date: 10-04-13
No. Of Guest: 1
Room Number : 919
Room Rate : 145.00
Club Account:

Signature _____



I agree to remain personally liable for the payment of this account. For your convenience, we have prepared this zero-balance folio. Please be advised that any charges not reflected on this folio will be charged to the credit card on file. You are ultimately responsible for paying all of your folio charges in full.

Clarion Fontainebleau Hotel
 10100 Coastal Highway
 Ocean City, MD 21842
 United States
 Tel: 410-524-3535 Fax: 410-524-3834

Laura Steinberg
 Montgomery County Bd Of Ed
 850 Hungerford Drive
 Rockville, MD 20850
 United States

Page Number : 1
 Guest Number: [REDACTED] Arrive Date: 10-02-13 13:39
 Folio ID : A Depart Date: 10-04-13 11:03
 No. Of Guest: 1
 Room Number : 1107
 Room Rate : 145.00
 Club Account:

Email: becky_gibson@mcpsmd.org
 BE0930 - Mabe

Copy Invoice

Fontainebleau Hotel 10-04-13 11:03 KATYS

Date	Reference	Description	Charges	Credits
10-02-13	DEPOSIT	Deposit Applied		-151.53
10-02-13	[REDACTED]	Room	145.00	
10-02-13	[REDACTED]	4.5% Occupancy Tax	6.53	
10-03-13	[REDACTED]	Room	145.00	
10-03-13	[REDACTED]	4.5% Occupancy Tax	6.53	
10-04-13	AX	American Express		-151.53
** Total			303.06	-303.06
*** Balance			-0.00	

EXPENSE SUMMARY REPORT

Date	Room&Tax	Telephone	Food&Bev	Other	Total	Payment
10-02-13	151.53	0.00	0.00	-151.53	0.00	0.00
10-03-13	151.53	0.00	0.00	0.00	151.53	0.00
10-04-13	0.00	0.00	0.00	0.00	0.00	-151.53

Total	303.06	0.00	0.00	-151.53	151.53	-151.53

Clarion Fontainebleau Hotel
10100 Coastal Highway
Ocean City, MD 21842
United States
Tel: 410-524-3535 Fax: 410-524-3834

Laura Steinberg
Montgomery County Bd Of Ed
850 Hungerford Drive
Rockville, MD 20850
United States

Page Number : 2
Guest Number: [REDACTED]
Folio ID : A
No. Of Guest: 1
Room Number : 1107
Room Rate : 145.00
Club Account:

Arrive Date: 10-02-13 13:39
Depart Date: 10-04-13 11:03

Email: becky_gibson@mcpsmd.org
BE0930 - Mabe

Signature

I agree to remain personally liable for the payment of this account. For your convenience, we have prepared this zero-balance folio. Please be advised that any charges not reflected on this folio will be charged to the credit card on file. You are ultimately responsible for paying all of your folio charges in full.

Ikheloa, Roland

From: Square <noreply@messaging.squareup.com>
Sent: Wednesday, October 09, 2013 8:48 PM
To: Ikheloa, Roland
Subject: Receipt from Fix My Phone for \$160.00

[Trouble viewing this email?](#)



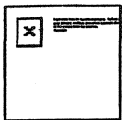
Oct 9, 2013 at 8:45pm

Receipt #VJBG


Roland ipad 2 **\$160.00**

Total \$160.00

 2005 **\$160.00**



Next time, leave your wallet at home.

You never have to swipe your card again. The Square Wallet app is the fastest and more personal way to pay. Download the free app for iPhone or Android .



Check Detail

Check #	Check Opened	Minutes	Grat	Return	Local	Employee
30	333	10/2/2013 7:17 PM	154.97	10		Fagers Dolores Gabriel
		7:17 PM	1 Soda	2.75	Fine Dining	Dolores Gabriel
		7:17 PM	1 Iced Tea	2.75	Fine Dining	Dolores Gabriel
		7:33 PM	1 Tuna	15.50	Fine Dining	Dolores Gabriel
		7:33 PM	1 Calamar	11.00	Fine Dining	Dolores Gabriel
		7:33 PM	1 BBQ Shp	11.50	Fine Dining	Dolores Gabriel
		7:33 PM	1 Smoked Fish	12.50	Fine Dining	Dolores Gabriel
		7:33 PM	1 *w/ Cur Course		Fine Dining	Dolores Gabriel
		7:33 PM	1 Share w/All		Fine Dining	Dolores Gabriel
		7:39 PM	1 FD Caesar Salad	9.00	Fine Dining	Dolores Gabriel
		7:39 PM	1 *As Sal Course		Fine Dining	Dolores Gabriel
		7:39 PM	1 FD Caesar Salad	9.00	Fine Dining	Dolores Gabriel
		7:39 PM	1 *As Sal Course		Fine Dining	Dolores Gabriel
		7:39 PM	1 FD Hse Sal BC	8.00	Fine Dining	Dolores Gabriel
		7:39 PM	1 *As Sal Course		Fine Dining	Dolores Gabriel
		7:39 PM	1 Specd Prep		Fine Dining	Dolores Gabriel
		7:39 PM	DRESS SIDE		Fine Dining	Dolores Gabriel
		7:40 PM	1 NY Bleu	38.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Med		Fine Dining	Dolores Gabriel
		7:40 PM	1 Prime Rib	39.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Med Rare		Fine Dining	Dolores Gabriel
		7:40 PM	1 Surf & Turf	42.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Med		Fine Dining	Dolores Gabriel
		7:40 PM	1 Prime Rib	39.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Medium		Fine Dining	Dolores Gabriel
		7:40 PM	1 The Vegetarian	18.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Catch	28.50	Fine Dining	Dolores Gabriel
		7:40 PM	1 \$Btk/Stuff	6.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Lobster Tail	39.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Sea Bass	33.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 NY Bleu	38.00	Fine Dining	Dolores Gabriel
		7:40 PM	1 Med Rare		Fine Dining	Dolores Gabriel
		9:52 PM	Charge Tip \$	80.34	Fine Dining	ServiceBarUp ServiceBarUp
		9:52 PM	Amex	509.00	Fine Dining	ServiceBarUp ServiceBarUp
		9:52 PM	xxxx		Fine Dining	ServiceBarUp ServiceBarUp
			Sub Total	402.50		
			Tax	28.18		
			Service Charge	80.34		
			Check Total	509.00		

10/02/2013 - Fagers Island, Ocean City -
 Dinner during MABE conf.
 - CB, SB, PK, JK, PO, RS, RI, JS, JPS

10/06/2013 - Target, Silver Spring - Mistakenly Used
Items returned and credited to AMEX card



SILVER SPRING - 301-586-0724
10/06/2013 02:21 PM



RETURN

RCPT ID#			
10265	MINI CUBE	T	\$16.49
021130	MEDIUM CART	T	\$11.99
040730	GOODY COMBS	T	\$1.68
122789	WALL DECAL	T	\$12.99
030097	SWEET MINT	N	\$3.34
		SUBTOTAL	\$46.49-
T = MD TAX	6.0000%	on \$43.15-	\$2.59-
		TOTAL REFUND	\$49.08-
		AMEX CREDIT	\$49.08-

RECEIPT #



SILVER SPRING - 301-586-0724
10/06/2013 02:26 PM



RETURN

RCPT ID#			
120272	WALL DECAL	T	\$16.99-
		SUBTOTAL	\$16.99-
= MD TAX	6.0000%	on \$16.99-	\$1.02-
		TOTAL REFUND	\$18.01-
		AMEX CREDIT	\$18.01-

RECEIPT ID#



DEPOSIT SLIP

Division of Controller Office
850 Hungerford Drive, Room 154
Rockville, Maryland, 20850
Billing@mcpsmd.org

Print Form

Reset Form

Requestor: Becky Gibson

Department: Board of Education

School:

Contact Name: Becky Gibson

E-Mail: Becky_Gibson@mcpsmd.org

Phone: 301-279-3617

Fax: 301-279-3860

Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 2013/12/11

Customer Signature

Becky Gibson

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Roland Ikheloa, Reimburse AMEX	\$50.00
<i>Bank of America Advantage</i>			
<p>IKHIDE R IKHELOA 03-98 2737 FLORENCE O IKHELOA [REDACTED] <u>11-7-13</u> 7-163/520 MD Date 2387</p> <p>Pay <u>MCPS</u> \$ <u>50.00</u> to the order of <u>Fifty 00</u> Dollars</p> <p>Bank of America ACH R/T 052001633 Memo <u>Mistaken use of</u> <u>credit card</u> [REDACTED] 2737</p>			

Total \$50.00

Receipts Confirmation for Customer Only

Received By:

[REDACTED]

In the amount of

\$50.00

Received Date

[REDACTED]

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

November 7, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff



Subject: Check Request Payable to **Ikhide Roland Ikheloa, ID #** [REDACTED]

Please issue a check in the amount of **\$32.00** in reimbursement of the attached receipt for a business meeting and deposit check.

Please charge the account number indicated.

Mr. Ikhide Roland Ikheloa [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved



10/23/2013 - Cuban Corner Restaurant, Rockville
Business meeting with Council President Navarro

Transaction ID:
10/23/2013 10:00 AM

Date

10/23/2013

Method: Online

10/23

Batch: 10

10/23

Account: [REDACTED]

Form Code: [REDACTED]

Amount: \$ 28.00

Tax: .394

Total: \$ 32.60

Signature

10/23/2013



DEPOSIT SLIP

Division of Controller Office
850 Hungerford Drive, Room 154
Rockville, Maryland, 20850
Billing@mcpsmd.org

Print Form

Reset Form

Requestor: Becky Gibson

Department: Board of Education

School:

Contact Name: Becky Gibson

E-Mail: Becky_Gibson@mcpsmd.org

Phone: 301-279-3617

Fax: 301-279-3860

Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 2013/12/11

Customer Signature

Becky Gibson

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Roland Ikheola, Reimburse AMEX	\$50.00

Total \$50.00

Receipts Confirmation for Customer Only

Received By *Jedy Schmidt*

In the amount of \$50.00

Received Date 12-17-13



PURCHASING CARD

Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From October 29, 2013 To November 28, 2013

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
11/12/2013	11/12/2013	\$750.00	Community Foundation, Online	Tickets, Mont County Executive's Arts	11/28/2013	██████████
				Ball - CB, PK, RS, PO and 2 spouses		
				(spouse tickets reimbursed)		
11/12/2013	11/12/2013	\$155.74	Eventbrite, Committee for Mont.	Tickets, Committee for Montgomery	11/28/2013	██████████
				Annual Legislative Breakfast - RI, LS		
11/21/2013	11/22/2013	\$45.00	Eventbrite, Women's Legislative	Tickets, Women's Legislative Briefing	11/28/2013	██████████
				Brandman, O'Neill, Smondrowski		
11/11/2013	11/12/2013	\$51.90	Slice of Rockville	Dinner, Facilities and Boundaries	11/28/2013	██████████
				Hearing		
		Total				
		\$1,002.64				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

Ikhide Roland Ikheloa
Signature, Card Member

12/12/13
Date

Christopher J. Barclay
Signature, Approving Official

12/12/13
Date



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXX

Closing Date
11/28/13

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
1,168.34	1,002.64	0.00	1,168.34	0.00	1,002.64	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
11/12/13 CORPORATE REMITTANCE RECEIVED 11/12		-1,168.34
11/12/13 COMMUNITY FOUNDATION DC REF# 11/12/13		750.00
11/13/13 EB *COMMITTEE FOR MO SAN FRANCISCO CA REF# 11/12/13	51141178700	155.74
11/22/13 EB *2014 WOMENS LEGI SAN FRANCISCO CA REF# 11/21/13	56344520900	45.00
11/12/13 SLICE OF ROCKVILLE ROCKVILLE MD ROC NUMBER 20850 11/11/13	85101653316	51.90
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	1,002.64 -1,168.34

Do not staple or use paper clips

Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RMT23
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

Gibson, Becky

From: Donor Services <onlinegifts@cfncr.org>
Sent: Tuesday, November 12, 2013 10:11 AM
To: Gibson, Becky
Subject: Community Foundation for the National Capital Region Customer Receipt/Purchase Confirmation

Thank you for your order!

Order Information

Merchant: Community Foundation for the National Capital Region
Description: Montgomery County Executive's Ball
Invoice Number: [REDACTED]

Billing Information

Roland Ikheloa
850 Hungerford Drive
Rockville, Maryland 20850
US
Becky_Gibson@mcpsmd.org

Shipping Information

Item	Description	Qty	Taxable	Unit Price	Item Total
#1	Select the number of Executive 6 Ball Tickets - \$750	1	N	US \$750.00	US \$750.00

Total: US \$750.00

American Express

Date/Time: 12-Nov-2013 7:11:01 PST
Transaction ID: [REDACTED]



DEPOSIT SLIP

Division of Controller Office
 850 Hungerford Drive, Room 154
 Rockville, Maryland, 20850
 Billing@mcpsmd.org

Requestor: _____
Department: Board of Education
School: _____
Contact Name: Becky Gibson
E-Mail: Becky_Gibson@mcpsmd.org
Phone: 301-279-3617
Fax: 301-279-3860
Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 12/11/2013

Customer Signature

Becky Gibson

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Patricia O'Neill Reimbursement to AMEX, Executive Arts Ball for spouse ticket	\$125.00

JAMES RICHARD O' NEILL
PATRICIA BAIER O' NEILL

6718

15-3/540
498

Nov 25, 2013 Date

Pay to the Order of *MCPS*

\$ 125.00

One hundred twenty five dollars and 00/100

PNC BANK

PNC Bank, N.A. 040

For *Arts Ball*

Patricia Baier O'Neill MP

6718

\$125.00

Receipts Confirmation for Customer Only

Received By: _____

In the amount of

\$125.00

Received Date _____

DEPOSIT SLIP



Division of Controller Office
850 Hungerford Drive, Room 154
Rockville, Maryland, 20850
Billing@mcpsmd.org

Print Form

Reset Form

Requestor: _____

Department: Board of Education

School: _____

Contact Name: Becky Gibson

E-Mail: Becky_Gibson@mcpsmd.org

Phone: 301-279-3617

Fax: 301-279-3860

Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 12/11/2013

Customer Signature

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Patricia O'Neill Reimbursement to AMEX, Executive Arts Ball for spouse ticket	\$125.00

Total \$125.00

Receipts Confirmation for Customer Only

Received By:

In the amount of \$125.00

Received Date: 12/11/13



DEPOSIT SLIP

Division of Controller Office
 850 Hungerford Drive, Room 154
 Rockville, Maryland, 20850
 Billing@mcpsmd.org

Requestor: _____
Department: Board of Education
School: _____
Contact Name: Becky Gibson
E-Mail: Becky_Gibson@mcpsmd.org
Phone: 301-279-3617
Fax: 301-279-3860
Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: June 2, 2014

Customer Signature Becky Gibson

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Philip Kauffman Reimbursement to AMEX, Executive Arts Ball for spouse ticket	\$125.00

Total \$125.00

Receipts Confirmation for Customer Only

Received By [Signature]

In the amount of **\$125.00**

Received Date 6/2/14

Deposit Slip Form Instruction

1. Deposit needs to be dropped off by **2:00pm** daily.
2. Limit \$2,000 in cash for each deposit slip, or no more than 200 individual checks for each deposit slip.
3. List cash, money order and checks separately on Deposit Slip form.
4. Multiple deposit slips Must be verified upon submitting. Cashier will sign off on the section of receipt confirmation for customer on Deposit Slip form after verifying Deposit Slip forms.
5. Run the tapes for multiple checks, money order or cash. Group check, money order or cash in the sequence of amounts.
6. Stamps of deposit only on the back of checks.
7. Customer contact information is required on Deposit Slip form. E-mail address is strongly recommended. **PLEASE PRINT LEGIBLY.**
8. Submit 2 copies of Deposit Slip if you want a signed copy for the record.

PHILIP S. KAUFFMAN
BETH L. KAUFFMAN
[REDACTED]

7995
65-7198/2550

6/2/14
Date

Pay to the Order of: MCPS \$ 125.00

One hundred twenty five Dollars

Capital One Bank
Capital One, N.A. (EXECUTIVE TRUL 2013)
For: [REDACTED] [REDACTED] MP

[Signature]
07995

Security Features Details on Back.

Bluefield™

[Create an event](#) [Find events](#)

[Email](#) [Share](#) [Tweet](#)

[Questions?](#) [Contact the organizer](#)

[Back to Committee for Montgomery Annual Legislative Breakfast](#)

You're going to Committee for Montgomery Annual Legislative Breakfast!

[Add to calendar](#)

Your order has been saved to My Tickets

- ✓ Order # [REDACTED] tickets for \$155.74
- ✓ Tickets have been sent to Becky_Gibson@mcpsmd.org and each attendee



Hi Roland,

See you at the event!

Thanks,

Barbara Henry,

Managing Director 301

-960-5263

[Questions about this event?](#)

[Contact Us](#)

[View organizer profile](#)



You can use Eventbrite to organize events of all kinds!

From a local performance to a charity gala, or even a 5K run, Eventbrite makes it easy for anyone to create an event page and manage who's coming.

[Learn more](#)

Gibson, Becky

From: Eventbrite <orders@eventbrite.com>
Sent: Thursday, November 21, 2013 9:42 AM
To: Gibson, Becky
Subject: Your Tickets for 2014 Women's Legislative Briefing
Attachments: [REDACTED]ticket.pdf

Eventbrite

Find events My Tickets

Hi Roland, this is your order confirmation for 2014
Women's Legislative Briefing

Organized by Montgomery County Commission for Women

Here are your tickets

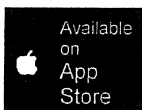


Mobile Tickets



Paper Tickets

Open the email attachment
or download here



Questions about this event?

Contact the organizer at judith.vaughan-prather@montgomerycountymd.gov

Order Summary

November 21, 2013

Order #: [REDACTED]

Name	Type	Quantity	Price
Shirley Brandman	General Admission	1	\$15.00
Patricia O'Neill	General Admission	1	\$15.00
Rebecca Smondrowski	General Admission	1	\$15.00

TOTAL \$45.00

Charged to: American Express - XXXX-XXXX [REDACTED]

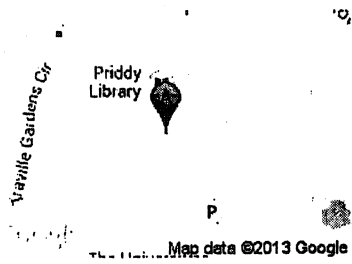
This charge will appear on your credit card statement as EB *2014
Womens Legisl

This order is subject to Eventbrite Terms of Service, Privacy Policy, and
Cookie Policy

About this event

Sunday, January 26, 2014
from 11:30 AM to 6:00 PM
(EST)

The Universities at Shady
Grove Campus, Building II
9630 Gudelsky Drive
Rockville, MD 20850



Add to my calendar:
Google · Outlook · iCal ·
Yahoo

Your Account

Log in to access tickets, manage your orders, and
check out event recommendations just for you.

11/11/2013 - Slice of Rockville -
Dinner, Facilities and Boundaries Hearing

ROCKVILLE MD 20850
301-424-0107

Merchant ID: 510165800105131
Term ID: 5123
N: 1

Phone Order

XXX [REDACTED]

Method: Manual

Online Batch#: 0001

19:33

0000017 Appr Code: [REDACTED]

Amount: \$ 51

1:

Customer Copy

THANK YOU
FOR YOUR BUSINESS



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**
www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX [REDACTED]

Account Number
XXXX-X [REDACTED]

Closing Date
01/28/12

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
36.91	30.90	29.00	0.00	0.00	96.81	For important information regarding your account refer to page 2.

Your account is past due, please contact your program administrator.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
01/05/12 CBI*MALWAREBYTES COR [REDACTED] IL REF# [REDACTED] SOFTWARE 01/05/12	28876762000	30.90
01/28/12 DELINQUENCY CHARGE ON [REDACTED]	36.91	29.00
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	59.90 0.00

Do not staple or use paper clips
Payment Coupon

Account Number
[REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

February 7, 2012

Henry
2/8
PAID

MEMORANDUM

To: Mr. Robert Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff



Subject: Check Request Payable to Ikhide Roland Ikheloa, ID # [REDACTED]

Please issue a check in the amount of \$22.00 in reimbursement of the attached receipt for a business meeting and deposit check.

Please charge the account number indicated.

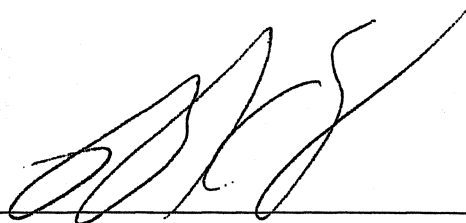
Mr. Ikhide Roland Ikheloa [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved _____



12/16/2011 - Roland Ikhelea meeting with Sean Gallagher

BOMBAY BISTRO
98 W MONTGOMERY AVE
ROCKVILLE MD 20850
301-762-8798

Terminal #: 00000002
DEC 16, 11 1:24 PM

VISA

SALE
BATCH #: 401
RRN: 135034216334

REF#: 011
AUTH #: [REDACTED]

AMOUNT \$18.97
TIP \$ 3.23
TOTAL \$ 22.20

APPROVED
CUSTOMER COPY

BOMBAY BISTRO
98 W. MONTGOMERY AVE
ROCKVILLE, MD. 20850

12/16/11 000000
#0179 1:22PM SERV.0010001

TABLE#00000009

GUEST 2
***PBAL \$0.00
2 @ \$8.95
BUFFET WEEKDAY \$17.90
BAL FWD \$17.90
MDSE ST \$17.90
TTL TAX \$1.07 ***TOTAL \$18.97

Try our Lunch Buffet
Mon-Friday 1130-0230 \$8.95
Sat&Sunday 1200-0300 \$10.95

Also ask for weekday SPECIALS
Mon Thursday [dinner only]

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

Handwritten: 2/17/12

February 17, 2012

MEMORANDUM

To: Mr. Robert J. Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff *[Signature]*

Subject: Check Request Payable to **Roland Ikheloa, ID #** [REDACTED]

Please issue a check in the amount of **\$30.00** in reimbursement of one ticket purchased to support the Asian American Education Association's scholarship and deposit check.

Please charge the account number for the Board Member/Staff Person indicated.

Mr. Ikhide Ikheloa [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved *[Signature]* _____

Asian American Education Association

Invites you to a

Lunar New Year Banquet

Keynote Speaker

Dr. Frieda Lacey

*Deputy Superintendent,
Montgomery County Public Schools*



Year of the Dragon

Date: Wednesday, February 15, 2012
(Snow date is Wednesday, February 22, 2012)
Location: New Fortune Restaurant
16515 Frederick Avenue, Gaithersburg, MD 20877
Time: Registration 5:30 p.m., dinner 6:00 p.m.
Ticket Price: \$300.00 per table (\$30 per person)

Gold Sponsor: \$500.00 per table
Silver Sponsor: \$400.00 per table

Tickets must be purchased in advance and will not be sold at the door. If you are unable to attend, donations are accepted. *Tickets are non-refundable*

The Lunar New Year banquet is a scholarship fundraiser for Asian American high school students interested in pursuing a postsecondary degree in education

For ticket information, please e-mail:
Molly_Hong@mcpsmd.org
Checks written to AAEA can be mailed to:
Molly Hong, CESC, Room #50, 850 Hungerford Dr., Rockville, MD 20850



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XX

Closing Date
03/29/12

Page 1 of 3

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
0.00	319.20	0.00	0.00	29.00	290.20	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date


Card Number	Reference Code	Amount \$
03/27/12		159.60
AIRTRAN AIRWAYS, INC ATLANTA GA TKT# [REDACTED] AIRLINE/AIR C 03/26/12 PASSENGER TICKET IKHELOA/IKHIDE AIRTRAN AIRWAYS, INC. AIRTRAN AIRWAYS, INC ATLANTA GA FROM BALTIMORE MD TO CARRIER CLASS BOSTON MA FL L TO BALTIMORE MD FL V TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00		

Do not staple or use paper clips
Payment Coupon

Account Number
[REDACTED]

Continued on Page 3

Please enter account number on all correspondence.

 ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
 XXXX-X

Closing Date
 03/29/12

Page 3 of 3

Activity Continued		Reference Code	Amount \$
03/27/12	AIRTRAN AIRWAYS, INC ATLANTA GA TKT# AIRLINE/AIR C 03/26/12 PASSENGER TICKET XIE/ALAN AIRTRAN AIRWAYS, INC. AIRTRAN AIRWAYS, INC ATLANTA GA FROM BALTIMORE MD TO BOSTON MA CARRIER CLASS FL L TO BALTIMORE MD FL V TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00	0334090000	159.60
03/16/12	ADJUSTMENT FOR DELINQUENCY FEE DATE OF ABOVE 03/16		-29.00 Credit
Total for ROLAND IKHELOA		New Charges/Other Debits Payments/Other Credits	319.20 -29.00

Boston, MA (2)



Booked items

Flight: Baltimore to Boston [back to top ↑](#)

Expedia itinerary number: [REDACTED] Airline ticket number(s): [REDACTED] AirTran Airways confirmation code: [REDACTED]	Main contact: Ikhide Ikheloa E-mail: becky_gibson@mcpsmd.org Preferred phone: [REDACTED]
---	--

Traveler and cost summary

Ikhide Ikheloa	Adult	Add Frequent Flyer number(s)	\$128.37
Alan Xie	Adult	Add Frequent Flyer number(s)	\$128.37
			Taxes & Fees \$62.46
Total (American Express)			\$319.20

[Change this flight](#)
 [Print a receipt](#)
 [View cancellation information](#)

Flight summary

Seat assignments, meal preferences, and special requests must be confirmed with the airline; we cannot guarantee that they will be honored. Free and special meals are not available on many flights.

Thu 19-Apr-12

Baltimore (BWI) Depart 8:20 am Terminal E	to	Boston (BOS) Arrive 9:41 am Terminal E	369 mi (594 km) Duration: 1hr 21mn	Flight: 1053
--	----	---	--	---------------------

Economy/Coach Class ([Seat assignments upon check-in](#) | [More Information](#)), Boeing 717, 90% on time

Total distance: 369 mi (594 km) Total duration: 1hr 21mn

Mon 23-Apr-12

Boston (BOS) Depart 8:40 pm Terminal E	to	Baltimore (BWI) Arrive 10:09 pm	369 mi (594 km) Duration: 1hr 29mn	Flight: 863
---	----	---	--	--------------------

Economy/Coach Class ([Seat assignments upon check-in](#) | [More Information](#)), Boeing 737-700

Total distance: 369 mi (594 km) Total duration: 1hr 29mn

Airline rules & regulations

- Please note that the most restrictive set of rules applies to your entire itinerary.
- **Baltimore, MD (BWI-Baltimore Washington Intl. Thurgood Marshall) to Boston, MA (BOS-All Airports)**
 Tickets are nonrefundable. A fee of \$75.00 per ticket will be charged for itinerary changes after the tickets are issued, provided that the booking rules were followed.
- **Boston, MA (BOS-All Airports) to Baltimore, MD (BWI-Baltimore Washington Intl. Thurgood Marshall)**
 Tickets are nonrefundable. A fee of \$75.00 per ticket will be charged for itinerary changes after the tickets are issued, provided that the booking rules were followed.
- Tickets are nontransferable and name changes are not allowed.
- Please read important information regarding [airline liability limitations](#).
- Prices do not include [baggage fees](#) or [other fees](#) charged directly by the airline.
- Other penalties may apply.
- See an overview of all the [rules and restrictions](#) applicable for this fare.
- View the complete [penalty rules for changes and cancellations](#) associated with this fare.

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

April 12, 2012

PAID

Amey
4/13

MEMORANDUM

To: Mr. Robert J. Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff

Subject: Check Request Payable to **Roland Ikheloa, ID # [REDACTED]**

Please issue a check in the amount of \$32.00 in reimbursement of the attached receipts for parking and replacement of County Council Identification Badge and deposit check.

Please charge the account number for the Board Member/Staff Person indicated.

Mr. Ikhide Ikheloa [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved _____

[Handwritten signature]

04/10/2012 - Parking while attending County Council Mtg



Thank you for parking with Colonial

GAR 100

Date 4/10/12

Amount Received \$ 7.00

Location H97

Ticket # _____

Employee [Signature]

02/29/2012 - Fee to obtain replacement County Council ID

RECEIPT

DATE	<u>2/29/12</u>	No.	<u>318525</u>
RECEIVED FROM	<u>Ikhi de Roland Ekheva</u>		<u>\$25.00</u>
	<u>Twenty five</u>		DOLLARS
	<u>lost ID</u>		
<input type="radio"/> FOR RENT			
<input checked="" type="radio"/> FOR			
ACCOUNT		<input type="radio"/> CASH	FROM _____ TO _____
PAYMENT		<input type="radio"/> MONEY ORDER	
BAL. DUE		<input checked="" type="radio"/> CHECK	
		<input type="radio"/> CREDIT CARD	
		BY	<u>[Signature]</u>

1182



PURCHASING CARD Card Member Transaction Log

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikhehoa

School/office name Board of Education

Work location CESC, Room 123

For the period: From April 1, 2012 To April 30, 2012

USE SEPARATE LOG FOR EACH ACCOUNT

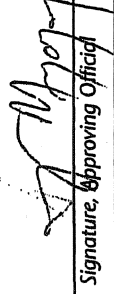
Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
04/19/2012	04/20/2012	\$20.00	AirTran Airways	Luggage, NSBA Conference	04/28/2012	[REDACTED]
04/19/2012	04/20/2012	\$20.00	AirTran Airways	Luggage, NSBA Conference	04/28/2012	[REDACTED]
04/19/2012	04/20/2012	\$28.00	Silver Diner, BWI Airport	Break., NSBA Conference - Ikhehoa Xie	04/28/2012	[REDACTED]
04/20/2012	04/22/2012	\$120.00	Durgin Park Restaurant, Boston	Dinner, NSBA Conference - Ikhehoa,	04/28/2012	[REDACTED]
				Barclay, Berthiaume, Brandman		
				Kauffman, Starr		
04/22/2012	04/23/2012	\$27.00	Renaissance Waterfront, Capiz	Lunch, NSBA Conference - Berthiaume	04/28/2012	[REDACTED]
04/22/2012	04/23/2012	\$34.96	Renaissance Waterfront Hotel, Boston	Lunch, NSBA Conference - Ikhehoa Xie	04/28/2012	[REDACTED]
04/23/2012	04/23/2012	\$6.75	Levy Restaurant, Boston Conv. Center	Meal, NSBA Conference	04/28/2012	[REDACTED]
		Total				
		\$256.71				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.


Signature, Card Member

5/18/12
Date


Signature, Approving Official

5/29/12
Date



PURCHASING CARD Card Member Transaction Log

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

MCPS Form 234-21
June 2009

Card member name: Ikhide Roland Ikheloa

School/office name: Board of Education

Work location: CESC, Room 123

For the period: From April 1, 2012 To April 30, 2012

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
04/23/2012	04/24/2012	\$40.00	AirTran Airways	Luggage, NSBA Conference	04/28/2012	[REDACTED]
04/23/2012	04/24/2012	\$38.00	Renaissance Waterfront, 606 Congress	Lunch, NSBA Conference - Ikheloa Xie	04/28/2012	[REDACTED]
04/23/2012	04/24/2012	\$94.00	Renaissance Waterfront, Capiz	Lunch. NSBA Conference - Ikheloa	04/28/2012	[REDACTED]
				Xie, Barclay, Berthiaume		
04/24/2012	04/24/2012	\$60.00	Parking, BWI Airport	Airport Parking, NSBA Conference	04/28/2012	[REDACTED]
04/24/2012	04/24/2012	\$1,202.12	Renaissance Waterfront Hotel, Boston	Lodging, NSBA Conference - Ikheloa	04/28/2012	[REDACTED]
04/23/2012	04/24/2012	\$1,057.60	Renaissance Waterfront Hotel, Boston	Lodging, NSBA Conference - Xie	04/28/2012	[REDACTED]
		Total				
		\$2,491.72				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privileges and/or disciplinary action.

[Signature]
Signature, Card Member

5/27/12
Date

[Signature]
Signature, Approving Official

5/29/12
Date



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX [REDACTED]

Account Number
XXXX-XXXX [REDACTED]

Closing Date
04/28/12

Page 1 of 3

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
290.20	2,748.43	0.00	290.20	0.00	2,748.43	

For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXX [REDACTED]		
04/16/12	CORPORATE REMITTANCE RECEIVED 04/16	-290.20
04/20/12	AIRTRAN ATLANTA GA	20.00
	TKT# [REDACTED] AIRLINE/AIR- C- 04/19/12	
	MISCELLANEOUS TAX(ES)/FEE(S)	
	IKHIDE IKHELOA AIRTRAN	
	AIRTRAN ATLANTA GA	
	FROM	
	BALTIMORE MD	
	TO	
	BOSTON MA CARRIER CLASS	
	FL L	
	TO	
	BALTIMORE MD FL V	
	TO	
	UNAVAILABLE YY 00	
	TO	
	UNAVAILABLE YY 00	

Continued on Page 3

Do not staple or use paper clips

Payment Coupon

Account Number [REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.





Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-X

Closing Date
04/28/12

Activity Continued		Reference Code	Amount \$
04/20/12	AIRTRAN ATLANTA GA TKT# [REDACTED] AIRLINE/AIR C 04/19/12 MISCELLANEOUS TAX(ES)/FEE(S) IKHIDE IKHELOA AIRTRAN AIRTRAN ATLANTA GA FROM BALTIMORE MD TO CARRIER CLASS BOSTON MA FL L TO BALTIMORE MD FL V TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00		20.00
04/24/12	AIRTRAN ATLANTA GA TKT# [REDACTED] AIRLINE/AIR C 04/23/12 MISCELLANEOUS TAX(ES)/FEE(S) IKHIDE IKHELOA AIRTRAN AIRTRAN ATLANTA GA FROM BALTIMORE MD TO CARRIER CLASS BOSTON MA FL L TO BALTIMORE MD FL V TO UNAVAILABLE YY 00 TO UNAVAILABLE YY 00		40.00
04/23/12	BSTN XPCTR CNC [REDACTED] MA REF# [REDACTED] 04/22/12		6.75
04/22/12	DURGIN PARK 350 5429 NEW YORK NY REF# [REDACTED] 04/20/12	00056221400	120.00
04/23/12	MARRIOTT MARRIOTT MA BOSTON LODGING 04/22/12 ARRIVAL DATE DEPARTURE DATE 04/22/12 04/22/12 00	40400033000	27.00
04/23/12	MARRIOTT MARRIOTT MA BOSTON LODGING 04/22/12 ARRIVAL DATE DEPARTURE DATE 04/22/12 04/22/12 00	40400034000	34.96
04/24/12	MARRIOTT MARRIOTT MA BOSTON LODGING 04/23/12 ARRIVAL DATE DEPARTURE DATE 04/23/12 04/23/12 00	40100036000	38.00
04/24/12	MARRIOTT MARRIOTT MA BOSTON LODGING 04/23/12 ARRIVAL DATE DEPARTURE DATE 04/23/12 04/23/12 00	40400019000	94.00
04/24/12	MARRIOTT MARRIOTT MA BOSTON FOL# [REDACTED] LODGING 04/24/12 ARRIVAL DATE DEPARTURE DATE 04/19/12 04/23/12 00 ROC NUMBER [REDACTED]	83320000000	1,202.12
04/24/12	MARRIOTT MARRIOTT MA BOSTON FOL# [REDACTED] LODGING 04/24/12 ARRIVAL DATE DEPARTURE DATE 04/19/12 04/23/12 00 ROC NUMBER [REDACTED]	16820000000	1,057.60
04/24/12	PMI BWI AIRPORT PARK WASHINGTON DC REF# [REDACTED] PARKING LOT & GA 04/23/12	00018700000	60.00
04/20/12	SILVER DINER BWI 001 ROCKVILLE MD REF# 0 [REDACTED] 04/19/12 REST ROC NUMBER 0		28.00
Total for ROLAND IKHELOA			
New Charges/Other Debits			2,748.43
Payments/Other Credits			-290.20

**Airtran Airways
Payment Receipt**

19Apr12
ation Number : [REDACTED]
c/Auth # [REDACTED]

Received : American Express 20.00

20.00 USD
\$20.00
\$20.00 USD

Remarks : XXXXXX [REDACTED]

Received by Agent : 212861

Signature: _____

**Airtran Airways
Payment Receipt**

Date : 19Apr12
Information Number : [REDACTED]
Receipt/Auth # [REDACTED]

Received : American Express 20.00

20.00 USD
\$20.00
\$20.00 USD

Remarks : XXXXXX [REDACTED]

Received by Agent : 212861

Signature: _____

**Airtran Airways
Payment Receipt**

Date : 19Apr12
Information Number : [REDACTED]
c/Auth # [REDACTED]

Received : American Express 40.00

40.00 USD
\$40.00
\$40.00 USD

Remarks : XXXXXX [REDACTED]

Received by Agent : [REDACTED]

Signature: _____

04/20/2012 - Meal, NSBA Conference - Ikhehoa.
Kauffman, Berthiaume, Brandman, Starr, Barclay

Durgin Park Restaurant
40 Faneuil Hall Market
(617) 227-2038

Server: Danielle 04/20/2012
Table: 9:10 PM
Guest: 100046

Tea	2.50
Lemonade (2 @3.75)	7.50
Lam Chowd	9.00
ot Pie	14.95
ot Pie	
Seafood Platter (Broiled)	23.95
Knockwurst	10.95
Fish & Chips	17.95
Subtotal	95.25
Tax	6.67

Durgin Park Restaurant
340 Faneuil Hall Market
(617) 227-2038

Server: Danielle DOB: 04/20/2012
09:12 PM 04/20/2012
Table 51/1 10/100046

SALE

Amex 11534377
Card #XXXXXXXXXXXXXXXXXXXX
Magnetic card present: IKHELOA R
Card Entry Method: S

val: [REDACTED]

Amount: \$ 100.00
Tip: 18.08
Total: 118.08

I agree to pay the above
amount according to the
receipt.

[Signature]

X

<<CUSTOMER COPY>>

04/22/2012 - Lunch, NSBA Conference - Berthiaume

& & & 404 & & &
***** CAPIZ *****
406 HOLL

1/2 7417
22APR'12 12:07PM

STEAK FRITES	19.00
Sub-Total:	19.00
State & Local Tax	1.33
1:21 TOTAL DUE:	\$20.33

& & & 404 & & &
***** CREDIT CARD VOUCHER *****

RENAISSANCE HOTEL WATERFRONT
BOSTON, MA
LOUNGE
CHECK: 7417
TABLE: 1/2
SERVER: 406 HOLL
DATE: 22APR'12 12:24PM
CARD TYPE: AMERICAN EXPRESS
ACCT #: XXXXXXXX [REDACTED]
EXP DATE: XX/XX
AUTH CODE: [REDACTED]
R IKHELOA

TOTAL: 20.33

GRATUITY \$ 6.67
TOTAL \$ 27.00

SIGNATURE *[Signature]*

please leave signed copy
with your server

04/22/2012 - Lunch. NSBA Conference - Ikheloa. Xie

& & & 404 & & &
***** CREDIT CARD VOUCHER *****

RENAISSANCE HOTEL WATERFRONT
BOSTON, MA
LOUNGE
CHECK: 7418
TABLE: 15/1
SERVER: 406 HOLLY
DATE: 22APR'12 1:38PM
CARD TYPE: AMERICAN EXPRESS
ACCT #: XXXXXXXXXXXX
EXP DATE: XX/XX
AUTH CODE:
R IKHELOA

SUBTOTAL: 29.96

GRATUITY \$ 5.04

TOTAL \$ 35.00

SIGNATURE *Ikheloa*

Please leave signed copy with your server

04/23/2012 - Lunch. NSBA Conference - Ikheloa. Xie

& & & 401 & & &
***** 606 CONGRESS *****
55 KARIM

TBL 63/1 3101 GST 2
23APR'12 12:02PM

2 *VELOCITY* 30
2 ORGANIC GREENS 0.0
1 SHRIMP TACOS 0.00
1 SOFT SHELL CRAB 0.00
Sub-Total 30.00
Stat 2.10
12:36 TO 10

RENAISSANCE HOTEL WATERFRONT
BOSTON, MA
CONGRESS
<: 3101
=: 63/1
ER: 55 KARIM
: 23APR 12 12:37PM
TYPE: AMERICAN EXPRESS
#: XXXXXXXXXXXX
DATE: XX/XX
CODE:
R IKHELOA

SUBTOTAL: 32.10

GRATUITY \$ 5.90

TOTAL \$ 38.00

SIGNATURE *Ikheloa*

Please leave signed copy with your server

04/23/2012 - Meal, NSBA Conference
Ikheloa, Xie, Barclay, Berthiaume

& & & 404 & & &
***** CAPIZ *****

403 SEAN

TBL 1/10 7552
TABLE 4/2
23APR'12 2:12PM

1 CAPIZ SQUID 10.00
2 STEAK FRITES 38.00
1 LOBSTER ROLL 24.00
Sub-Total: 72.00
State
5:11 TOTA

& & & 404 & & &
***** CR CARD VOUCHER *****

RENAISSANCE HOTEL WATERFRONT
BOSTON
LOU
CHECK # 7552
TABLE # 110
TABLE ID: TABLE 4/2
403 SEAN
23APR'12 5:11PM
CARD TYPE: AMERICAN EXPRESS
#: XXXXXXXX
DATE: XX/XX
CODE:
R IKHELOA

SUBTOTAL: 77.04
 16.96
GRATUITY \$ \$ 94.00
TOTAL \$ \$ 94.00
SIGNATURE *[Signature]*

please leave signed copy
with your server

04/19/2012 - Meal, NSBA Conference
Ikheloa, Xie

BWI Airport

Chk 3183 Gst
21.76
1.31
23.07

SILVER DINER
BWI Airport

Date: Apr19'12 07:29AM
Card Type: Amex
Trans Type: PURCHASE
Auth Code:
Check: 3183
Table: 8/1
Server: 104 Kenia

Subtotal: 23.07
 4.93
 28.00
[Signature]

Please pay above total
according to my card issuer

Room # 1416 IKHLELOA/IKHIDEROLAN Rate 04/23/12 12:00
 Type GD MCPSMD 04/19/12 10:14

ACCT# GROUP

42

Room Clerk Address

Payment

MRN#:

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
04/19	606	25681151		45.00
04/19	TELECOMM	LOWBAND		12.95
04/19	WFB TAX	LOWBAND		.81
04/19	GP ROOM	1151, 1	225.00	
04/19	STATETAX	1151, 1	12.83	
04/19	CITY TAX	1151, 1	13.50	
04/19	CCF TAX	1151, 1	6.19	
04/20	606	26351151		21.00
04/20	LOUNGE	71011151		25.00
04/20	TELECOMM	LOWBAND		12.95
04/20	WFB TAX	LOWBAND		.81
04/20	GP ROOM	1151, 1	225.00	
04/20	STATETAX	1151, 1	12.83	
04/20	CITY TAX	1151, 1	13.50	
04/20	CCF TAX	1151, 1	6.19	
04/21	606	28161151		26.00
04/21	TELECOMM	LOWBAND		12.95
04/21	WFB TAX	LOWBAND		.81
04/21	GP ROOM	1416, 1	225.00	
04/21	STATETAX	1416, 1	12.83	
04/21	CITY TAX	1416, 1	13.50	
04/21	CCF TAX	1416, 1	6.19	
04/22	TELECOMM	LOWBAND		12.95
04/22	WFB TAX	LOWBAND		.81
04/22	GP ROOM	1416, 1	225.00	
04/22	STATETAX	1416, 1	12.83	
04/22	CITY TAX	1416, 1	13.50	
04/22	CCF TAX	1416, 1	6.19	
04/23	AX CARD			\$1202.12

TO BE SETTLED TO: AMERICAN EXPRESS CURRENT BALANCE .00

THANK YOU FOR CHOOSING RENAISSANCE! TO EXPEDITE YOUR CHECK-OUT, PLEASE CALL THE FRONT DESK, OR PRESS "MENU" ON YOUR TV REMOTE CONTROL TO ACCESS VIDEO CHECK-OUT.

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:
 REBECCA GIBSON@MCPSMD.ORG
 SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM



Gibson, Becky

From: Thanks for staying! <efolio@renaissancehotels.com>
Sent: Saturday, May 12, 2012 5:23 AM
To: Gibson, Becky
Subject: Your Apr 19, 2012 - Apr 23, 2012 stay at the Renaissance Boston Waterfront Hotel

Thank you for choosing the Renaissance Boston Waterfront Hotel for your recent stay.

As requested, below is a billing summary or adjustment for your stay. **If you have questions about your bill**, please contact us at (617) 338-4111 or customer.service@renaissanceboston.com.

Make another reservation on RenaissanceHotels.com >>



Marriott Rewards members may receive this email automatically after every stay.

Join Marriott Rewards today >>

Summary of Your Stay

Hotel: Renaissance Boston Waterfront Hotel
606 Congress Street
Boston, Massachusetts 02210
USA
(617) 338-4111

Guest: IKHELOA/IKHIDEROLAND
MCPSMD
850 HUNGERFORD DRIVE
ROCKVILLE, MD 20850
USA

Dates of stay: Apr 19, 2012 - Apr 23, 2012

Room number: 1151
Group number: [REDACTED]

Guest number: [REDACTED]

Marriott Rewards number: None

Date	Description	Reference	Charges	Credits
04/19/12	606	2568	45.00	
04/19/12	TELECOMM	LOWBAND	12.95	
04/19/12	WFB TAX	LOWBAND	0.81	
04/19/12	GP ROOM	1151, 1	225.00	
04/19/12	STATETAX	1151, 1	12.83	
04/19/12	CITY TAX	1151, 1	13.50	
04/19/12	CCF TAX	1151, 1	6.19	
04/20/12	606	2635	21.00	
04/20/12	LOUNGE	7101	25.00	
04/20/12	TELECOMM	LOWBAND	12.95	
04/20/12	WFB TAX	LOWBAND	0.81	
04/20/12	GP ROOM	1151, 1	225.00	
04/20/12	STATETAX	1151, 1	12.83	
04/20/12	CITY TAX	1151, 1	13.50	

04/20/12	CCF TAX	1151, 1	6.19	
04/21/12	606	2816	26.00	
04/21/12	TELECOMM	LOWBAND	12.95	
04/21/12	WFB TAX	LOWBAND	0.81	
04/21/12	GP ROOM	1416, 1	225.00	
04/21/12	STATETAX	1416, 1	12.83	
04/21/12	CITY TAX	1416, 1	13.50	
04/21/12	CCF TAX	1416, 1	6.19	
04/22/12	TELECOMM	LOWBAND	12.95	
04/22/12	WFB TAX	LOWBAND	0.81	
04/22/12	GP ROOM	1416, 1	225.00	
04/22/12	STATETAX	1416, 1	12.83	
04/22/12	CITY TAX	1416, 1	13.50	
04/22/12	CCF TAX	1416, 1	6.19	
04/23/12	Payment - American Express XXXXXXXXXX [REDACTED]			1,202.12

Total balance **0.00 USD**

Was that the best night's sleep you've ever had? How about a repeat performance at your place!

COLLECT.RENAISSANCE.COM

Important Information

Do Not Reply to this Email

This email is an auto-generated message. Replies to automated messages are not monitored. If you have any questions please contact the hotel directly at (617) 338-4111.

Why Have I Received this Email?

You have received this email because you requested during your stay to receive an electronic version of your bill by email.

Availability

Electronic versions of your hotel bill, available by email from our over 2,300 participating properties in the Marriott family of hotels in the USA and Canada, are emailed to you within 72 hours of check-out. These email messages reflect changes made to your bill up to 11pm on your day of departure. Any adjustments after that time may not be shown.

If you have received this email in error, please notify us.

Learn more about eFolio, receiving your hotel bills by email.

Authenticity of Bills

Marriott retains official records of all charges and credits to your account and will honor only those records.

Privacy

Your privacy is important to Marriott. For full details of our privacy policy, please visit our Internet Privacy Statement.

Credit of Marriott Rewards Points

Gibson, Becky

From: NSBAHousing@cmrus.com
Sent: Friday, March 09, 2012 2:02 PM
To: Gibson, Becky
Subject: Reservation # [REDACTED] Alan Xie Hotel Confirmation for National School Boards Association NSBA's 72nd Annual Conference



HOUSING CONFIRMATION NOTICE

NSBA's 72nd Annual Conference, Boston, MA, US
NSBA Confirmation # [REDACTED] made on 2/8/2012

PLEASE CAREFULLY READ THE FOLLOWING POLICIES: SHUTTLE SERVICE: Shuttle Service will be provided for all NSBA Housing hotels with the exception of the Westin Boston Waterfront, Seaport, and Renaissance Waterfront; as they are with-in easy walking distance.

CREDIT CARD POLICIES: If your reservation is guaranteed by credit card, NSBA Housing will not charge any deposit. However, your designated hotel may charge a deposit of one night's stay plus tax after March 30, 2012, depending on the hotel's policy.

The credit card provided in the reservation is for guarantee only. It cannot be used for actual hotel charges upon checkout unless written permission from the card holder is provided to the hotel. Otherwise a major credit card will be required upon check-in at your designated hotel.

SMOKING POLICIES: All hotels are 100% non-smoking. Requests for smoking rooms can not be honored.

Check your reservation details below for accuracy.

GUEST INFORMATION:

Guest Name: Alan Xie
Email: Rebecca_Gibson@mcpsmd.org
Company: MCPSMD
Address: 850 Hungerford Drive
Rockville MD 20850 United States

HOTEL INFORMATION:

Hotel Name: Renaissance Boston Waterfront **
Hotel Address: 606 Congress Street
Boston, MA 02210
Arrival Date: Thursday, 4/19/2012

Departure Date: Monday, 4/23/2012
of Nights: 4
Hotel Early Departure Fee: No Early Departure Penalty
Room Type: NON-SMOKING ROOM
Occupancy: Single - 1 person

Rate: \$ 225.00
Applicable Hotel Tax: 14.45%

** Hotel tax subject to change and room rate does not include applicable hotel taxes or surcharges.*

Estimated Room+Tax Total: \$ 1,030.05

IMPORTANT HOTEL POLICIES:

Deposit Policy:

Guaranteed By: American Express (Exp. 10/2013)

Cancellation Policy: Last day to cancel without penalty is 3/23/2012

TO CHANGE OR CANCEL YOUR RESERVATION:

Online: Visit http://www3.cmrhousing.com/NSBA_2N and enter your confirmation number, email address, and zip or postal code in the form provided.

Phone: Please call NSBA Housing toll-free at (800) 616.8210 or at (415) 979-2264, Monday through Friday, 9:00 a.m. to 9:00 p.m. Eastern Time.

Email or Fax: You may also contact us by email at NSBAHousing@cmrus.com or fax at (415) 216-2535.

DO NOT CALL THE HOTEL DIRECTLY FOR CHANGES OR CANCELLATIONS UNTIL 4/10/2012.

Failure to check in on your scheduled date of arrival or failure to abide the stated cancellation policy may result in the loss of your entire reservation and may be subject to a cancellation, no show penalty, or loss of your room deposit.

The guest acknowledges that after the cancellation deadline, NSBA Housing shall have no obligation to recover or seek recovery of any deposit monies on the guest's behalf.

Thank you for using NSBA Housing for the NSBA's 72nd Annual Conference.

To ensure proper delivery of our future emails, take a moment now and add our email address NSBAHousing@cmrus.com - to your Address Book, Trusted Sender List, or Company White List.

NSBA Housing

Email: NSBAHousing@cmrus.com

US and Canada Toll-Free: (800) 616.8210

International: (415) 979-2264

Fax: (415) 216-2535

powered by
CMR.ez

Please consider the environment before printing this email. 

Gibson, Becky

From: Thanks for staying! <efolio@renaissancehotels.com>
Sent: Saturday, May 12, 2012 5:24 AM
To: Gibson, Becky
Subject: Your Apr 19, 2012 - Apr 22, 2012 stay at the Renaissance Boston Waterfront Hotel

Thank you for choosing the Renaissance Boston Waterfront Hotel for your recent stay.

As requested, below is a billing summary or adjustment for your stay. **If you have questions about your bill**, please contact us at (617) 338-4111 or customer.service@renaissanceboston.com.

Make another reservation on RenaissanceHotels.com >>



Marriott Rewards members may receive this email automatically after every stay.

Join Marriott Rewards today >>

Summary of Your Stay

Hotel: Renaissance Boston Waterfront Hotel
606 Congress Street
Boston, Massachusetts 02210
USA
(617) 338-4111

Guest: XIE/ALAN
MCPSMD
850 HUNGERFORD
DRIVE
ROCKVILLE, MD 20850
USA

Dates of stay: Apr 19, 2012 - Apr 22, 2012

Room number: 608

Guest number: [REDACTED]

Group number: [REDACTED]

Marriott Rewards number: None.

Date	Description	Reference	Charges	Credits
04/22/12	Payment - American Express XXXXXXXXXX [REDACTED]			0.00
Total balance				0.00 USD

Was that the best night's sleep you've ever had? How about a repeat performance at your place!



Important Information

Do Not Reply to this Email

This email is an auto-generated message. Replies to automated messages are not monitored. If you have any questions please contact the hotel directly at (617) 338-4111.

Why Have I Received this Email?

You have received this email because you requested during your stay to

receive an electronic version of your bill by email.

Availability

Electronic versions of your hotel bill, available by email from our over 2,300 participating properties in the Marriott family of hotels in the USA and Canada, are emailed to you within 72 hours of check-out. These email messages reflect changes made to your bill up to 11pm on your day of departure. Any adjustments after that time may not be shown.

If you have received this email in error, please notify us.

Learn more about eFolio, receiving your hotel bills by email.

Authenticity of Bills

Marriott retains official records of all charges and credits to your account and will honor only those records.

Privacy

Your privacy is important to Marriott. For full details of our privacy policy, please visit our Internet Privacy Statement.

Credit of Marriott Rewards Points

After a stay, it may take up to 7 days for Marriott Rewards points to be credited to your account.

Terms of Use: Internet Privacy Statement(c)1996-2012 Marriott International, Inc. All rights reserved. Marriott proprietary information.



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XX

Closing Date
05/28/12

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
2,748.43	62.88	0.00	2,748.43	0.00	62.88	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
05/14/12 CORPORATE REMITTANCE RECEIVED 05/14	05508000000	2,748.43
05/16/12 BAJA FRESH - KING FA ROCKVILLE MD REF# EAST FOOD RESTAU 05/15/12	10372200000	29.63
04/30/12 CVS 1431 01431 OLNEY MD REF# DRUG STORE/PHARM 04/28/12	00177382000	33.25
Total for ROLAND IKHELOA	New Charges/Other Debits Payments/Other Credits	62.88 -2,748.43

Do not staple or use paper clips
Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

05/15/12 - Lunch meeting - Ikhekoa with Constituent

#157

2 Bottle Water	3.50
1 Speciality Drink	2.49
1 Skinny Chciken Bowl	6.99
2 CH 2 TACO COMBO	13.98
1 CH 3 TACO	0.99

Taxable: 27.95

Sub-total: 27.95

Gratuity: 0.00

Taxes: 1.68

Total:

Baja
302 ... Farm Blvd #150
Rockville, MD 20850
240-683-3907

Date: 05/15/12
Time: 3:36 PM
Server: O. N/A
Order: 103722
Description: DLV: 157

Card Type: Amex
Card No: XXXXXX
Expires: XX/XX
Exp Code: 504820

Purchases: \$ 29.63

Tip: \$ _____

Total: \$ _____

IKHELOA/R

I agree to pay the above total amount according to the card issuer agreement.

Thank you for Dining at
Baja Fresh !!!



Division of Controller Office
 850 Hungerford Drive, Room 154
 Rockville, Maryland, 20850
 Billing@mcpsmd.org

DEPOSIT SLIP

Print Form

Reset Form

Requestor: Becky Gibson
Department: Board of Education
School:
Contact Name: Becky Gibson
E-Mail: Becky_Gibson@mcpsmd.org
Phone: 301-279-3617
Fax: 301-279-3860
Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 2012/06/18

Customer Signature *Becky Gibson*

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Roland Ikhehoa, Reimburse AMEX, CVS, Olney	\$33.25
<i>Bank of America Advantage</i>			

Total \$33.25

Receipts Confirmation for Customer Only

Received By: In the amount of \$33.25 Received Date

#2569

DEPOSIT SLIP



Division of Controller Office
850 Hungerford Drive, Room 154
Rockville, Maryland, 20850
Billing@mcpsmd.org

Print Form

Reset Form

Requestor: Becky Gibson

Department: Board of Education

School:

Contact Name: Becky Gibson

E-Mail: Becky_Gibson@mcpsmd.org

Phone: 301-279-3617

Fax: 301-279-3860

Address: CESC, Room 123

Cash Check Credit Card Money Order

Request Date: 2012/06/18

Customer Signature

Deposit Type	FMS Account String	Purpose/Invoice Number	Amount
Check	[REDACTED]	Roland Ikheloa, Reimburse AMEX, CVS, Olney	\$33.25

Total \$33.25

Receipts Confirmation for Customer Only

Received By:

In the amount of \$33.25

Received Date 6-27-12

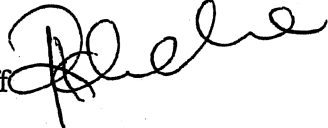
MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland


May 21, 2012

PAID

MEMORANDUM

To: Mr. Robert Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to **Ikhide Roland Ikheloa, ID** 

Please issue a check in the amount of **\$117.94** in reimbursement of the attached receipts for ground transportation and meals while attending the National School Boards Associations Conference and deposit check.

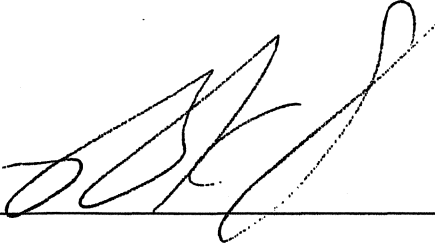
Please charge the account number indicated.

Mr. Ikhide Roland Ikheloa 

Thank you.

IRI:rlg

Attachment

Approved  _____

04/19/2012 - Breakfast, NSBA Conference, Ikhefoa, Xie

SILVER DINER
BWI Airport

104 K-nice J

Tbl 7/1 Chk 3173 Gst 2
Apr19'12 07:01AM

2 Coffee	4.78
1 Two Eggs Ala	1.99
1 Bagel w/Cm C	2.49
1 Hearty Bfast	9.69
Charge Tip	4.00
XXXXY [REDACTED]	
V*	24.09
Sub. Total	18.95
Tax	1.14
Service Charge	4.00
Payment	24.09

-----104 Check Closed-----
-----Apr19'12 07:30AM-----

04/19/2012 - 04/21/2012 -- Ground Transportation,
NSBA Conference - Boston

1/20
1/25
Metrocab
617 782-5500

www.metro-cab.com

- ✦ Airport Service
- ✦ Station Wagons
- ✦ 24hr. Service
- ✦ Handicapped Vehicles Available
- ✦ Courier Service
- ✦ Business Acct. Available

Credit Cards Accepted

TOP CAB BOSTON 617-266-4800	ASSOC.	CITY CAB BOSTON 617-536-5100
www.topcab.us		
<i>\$22</i>		JOHN FORD

Amount \$ 21.50 Cab # _____

CAB COMPANY

Cab Fare From Airport
To Hotel

Date 4-19-12
RECEIVED PAYMENT

RECEIPT FOR CAB FARE
PASSENGER; RECHECK NUMBER ON OUTSIDE OF CAB
CAB NUMBER ALSO LOCATED ON INSIDE TAXI PARTITION

DATE 4/24/12 (AM) 24:00 TIME(PM) \$24.00

FROM _____

TO _____

CAB NO. _____ HACK LIC. NO. _____

LESSEE OR ASSOCIATION _____

DRIVERS NAME _____

Support the WEST END HOUSE Boys and Girls Club.
105 Allston Street - Allston, MA 02134-5029

TRU NEWS
COURT INT'L AIRPORT
500 TERMINAL D,E
EAST BOSTON, MA 02128

STORE: 00071 REG: 001 CASHIER: GUAMRA
FANTA ORANGE 20 OZ

49000019162	1 @ 2.49	2.49 N
SUBTOTAL		2.49
TOTAL		2.49
AMOUNT TENDERED		
Cash		5.00

TOTAL PAYMENT 5.00
CHANGE 2.51

Transaction: 240813 4/23/2012 7:53 PM

We accept returns (except for print media) for exchange or refund within 14 days of original purchase date when accompanied by the sales receipt and original receipt.



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheioa

School/office name Board of Education

Work location CESC, Room 123

For the period: From June 1, 2012 To June 28, 2012

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
06/12/2012	06/13/2012	\$40.00	Il Pizzico, Rockville	Lunch Meeting with Senator King	06/28/2012	██████
Total		\$40.00				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

[Signature] 8/3/12 Date
 Signature, Card Member Date

[Signature] 6/27/12 Date
 Senator/Approving Official Date

REVIEWED BY THE PRESIDENT



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

XXXX-XX [REDACTED]

Closing Date
06/28/12

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
62.88	40.00	0.00	62.88	0.00	40.00	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity

Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXX [REDACTED]		
06/12/12 CORPORATE REMITTANCE RECEIVED	06/12 0552800000	-62.88
06/13/12 IL PIZZICO [REDACTED] ROCKVILLE	MD 26300000300	40.00
REF# [REDACTED]	06/12/12	
Total for ROLAND IKHELOA	New Charges/Other Debits	40.00
	Payments/Other Credits	-62.88

Do not staple or use paper clips

Payment Coupon

Account Number

Please enter account number on all correspondence.



ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

06/12/12 - Lunch meeting - Ikheloa with Senator King

IL PIZZICO
RISTORANTE

IL PIZZICO

12:09 L 06/12/12 #3
TABLE RAFFAELE GUESTS 2

1 PENN MELANZANE 11.95
1 SELEZIONE DI PIZZA
1 COKE

IL PIZZICO
15209 FREDERICK RD
ROCKVILLE, MD. 20850
301-309-0610

: 06/12/12
: 12:40 PM
: 55 CHECK: 3
: 1
: 14 RAFFAELE
: INV#: 20000301
: AMEX XXXXXX
: XX/XX

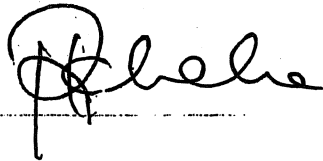
APPROVED: 517850

AUTH \$ 34.34

TIP \$ 5.66

CHARGE \$ 40.00

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



X
IKHELOA/R

TOP COPY-MERCHANT BOTTOM COPY-GUEST

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

June 27, 2012

PAID

James C. [unclear]
6/28/12

MEMORANDUM

To: Mr. Robert Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff



Subject: Check Request Payable to Ikhide Roland Ikheloa, ID # [REDACTED]

Please issue a check in the amount of \$53.00 in reimbursement of the attached receipts for business meetings and deposit check.

Please charge the account number indicated.

Mr. Ikhide Roland Ikheloa [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved Brian K. Edwards/pw

06/15/12 - Lunch meeting - Ikheloa with Mr. Barclay

05/30/12 - Lunch meeting - Ikheloa with Dr. Spatz

Paradise Indian Grill
15124 Frederick Rd
Rockville, MD 20850
ph (301) 762-2440

Thank you for visiting

TABLE: C 2 - 1 Guest
Your server was Demo User
6/15/2012 2:48:40 PM - ID #: 0062065

IL PIZZICO
15209 FREDERICK RD
ROCKVILLE, MD. 20850
301-309-0610

ITEM	QTY	PRICE
Weekday Lunch Buffet	(2@)	\$9.99
		\$19.98
Subtotal		\$19.98
Total Taxes		\$1.20
Grand Total		\$21.18
Amount Due:		\$21.18
		21.18

DATE: 05/30/12
TIME: 12:51 PM
TABLE: 25 CHECK: 6
SEATS: 1
SRVR: 1 OSMAR
AUTH#: 175733 INV#: 00000601
ACCT: VISA XXXXX [REDACTED]
EXDT: XX/XX

Credit Purchase

Name : IKHELOA/IKHIDE R
CC Type : VISA
CC Num : XXXX XXXX [REDACTED]
Reference [REDACTED]
Approval [REDACTED]
Server : Demo User
Ticket Name : C 2

APPROVED: [REDACTED]

AUTH \$ 23.22

TIP \$ 5.78

CHARGE \$ 29.00

Payment Amount: \$21.18

Tip: 2.82

Total: \$ 24.00

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

X

CUSTOMER COPY

I agree to pay the amount shown above.

X

IKHELOA/IKHIDE R

TOP COPY-MERCHANT BOTTOM COPY-GUEST



**Corporate Purchasing
Cardmember Report**

**Sign-up For Online
Statements**
www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-> [REDACTED]

Closing Date
08/28/12

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$ Do Not Pay
0.00	1,270.00	0.00	0.00	0.00	1,270.00

For important information regarding your account refer to page 2.

Called BA at 9/28/12 to dispute membership fee. They are reviewing their records.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number XXXX-XXXX	Reference Code	Amount \$
08/01/12 BARNES&NOBLE MEMBER NEW YORK REF# [REDACTED] B. Membership Renewal ROC NUMBER [REDACTED]	NY 08/01/12 00029565285	25.00
08/15/12 PAYPAL *MABE [REDACTED] REF# [REDACTED] OTHER [REDACTED] ROC NUMBER [REDACTED]	CA 08/14/12 93341741000	1,245.00

Total for ROLAND IKHELOA New Charges/Other Debits 1,270.00
Payments/Other Credits 0.00

Do not staple or use paper clips
Payment Coupon

Account Number
[REDACTED]

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-XXXX

Closing Date
10/28/12

Page 1 of 3

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
0.00	4,078.88	0.00	0.00	0.00	4,078.88	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
10/06/12 B.J.'S ON THE WATER OCEAN CITY MD REF# [REDACTED] RESTAURANT 10/05/12	8245180000	166.00 ✓
-10/06/12 CLARION RESORT HOTEL OCEAN CITY MD FOL# [REDACTED] LODGING 10/06/12 ARRIVAL DATE DEPARTURE DATE 10/03/12 10/05/12 00 ROOM RATE \$165.00 ROC NUMBER [REDACTED]		-172.43 ✓
10/06/12 CLARION RESORT HOTEL OCEAN CITY MD FOL# [REDACTED] LODGING 10/06/12 ARRIVAL DATE DEPARTURE DATE 10/03/12 10/05/12 00 ROOM RATE \$145.00 ROC NUMBER [REDACTED]		151.53 ✓
10/02/12 CUBAN CORNER RESTAUR ROCKVILLE MD [REDACTED] USFC20850 10/01/12 ROC NUMBER [REDACTED]	85189932276	33.92 ✓
10/04/12 NANTUCKET 461682000 FENWICK ISLAN DE REF# [REDACTED] 10/03/12	73011002276	390.00 ✓

Continued on Page 3

Do not staple or use paper clips

Payment Coupon

Account Number [REDACTED]

Please enter account number on all correspondence.



ROLAND IKHELOA
MCPS MDTAX [REDACTED]
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.





Prepared For
ROLAND IKHELOA
MCPS MDTAX [REDACTED]

Account Number
XXXX- [REDACTED]

Closing Date
10/28/12

Activity Continued				Reference Code	Amount \$
10/18/12	NSBA 0115	ALEXANDRIA	VA	88027090850	3,165.00/
	REF# [REDACTED]		10/17/12		
	CONTRIBUTIONS/DONAT				
	ROC NUMBER [REDACTED]				
Total for ROLAND IKHELOA				New Charges/Other Debits	4,078.88
				Payments/Other Credits	0.00

Maryland Association of
Boards of Education



Secure payments by **PayPal**

Payment Receipt

Receipt ID
[REDACTED]

Total
\$1,245.00 USD

We'll send a confirmation email to Becky_Gibson@mcpsmd.org. This transaction will appear on your statement as PayPal *MABE.

Paid to
Maryland Association of Boards of Education
registration@mabe.org
410-841-5414 x 31

Shipped to
Roland Ikheloa
850 Hungerford Drive
Rockville, MD 20850
United States

Your shopping cart

Description	Price	Quantity	Amount
Payment to Katherine Bennett for invoice 2012 Annual Conf# [REDACTED]	\$1,245.00	1	\$1,245.00
		Item total	\$1,245.00
		Total	\$1,245.00 USD

Maryland Association of
Boards of Education



INVOICE

Katherine Bennett

Phone: 410-841-5414
Fax: 410-841-6580

registration@mabe.org

Invoice number	2012 Annual Con [REDACTED]
Invoice date	8/6/2012
Payment terms	Net 10
Due date	8/16/2012

Bill To

Rebecca_Gibson@mcpsmd.org
Montgomery County Board of Education
Becky Gibson
850 Hungerford Drive
Rockville, MD 20850
United States

Date	Description	Quantity	Unit price	Amount
10/3/2012	Annual Conference Registration - Philip Kauffman	1	\$415.00	\$415.00
10/3/2012	Annual Conference Registration - John Mannes	1	\$415.00	\$415.00
10/3/2012	Annual Conference Registration - Patricia B. O'Neill (complimentary)	1	\$0.00	\$0.00
10/3/2012	Annual Conference Registration - Laura Steinberg	1	\$415.00	\$415.00
			Subtotal	\$1,245.00
			Total	\$1,245.00 USD



PURCHASING CARD Card Member Transaction Log

MCPS Form 234-21
June 2009

Office of the Chief Operating Officer
Department of Materials Management
MONTGOMERY COUNTY PUBLIC SCHOOLS • Rockville, Maryland 20850

Card member name Ikhide Roland Ikheloa

School/office name Board of Education

Work location CESC, Room 123

For the period: From September 29, 2012 To October 28, 2012

USE SEPARATE LOG FOR EACH ACCOUNT

Date Ordered	Date Delivered	Total Amount (\$)	Supplier Name	Supplies/Services (required) (Student or other—must be identified.)	Statement Date	Account (03, 05, etc.)
10/01/2012	10/02/2012	\$33.92	Cuban Corner, Rockville	Mtg with Council Vice Pres. Navarro	10/28/2012	██████
10/03/2012	10/04/2012	\$390.00	Nantuckets, Ocean City	Dinner while attending MABE Conf. (Attendees: JM, IRI, PK, SB, JS, PO, MD, JD, NK, CB)	10/28/2012	██████
10/03/2012	10/06/2012	\$172.43	Clarion Fontainebleau Hotel	Lodging, MABE Annual Conference (10/03/2012 - 10/05/2012) - Ikheloa	10/28/2012	██████
10/03/2012	10/06/2012	\$151.53	Clarion Fontainebleau Hotel	Lodging, MABE Annual Conference (10/03/2012 - 10/05/2012) - Steinberg	10/28/2012	██████
Total		\$747.88				

CERTIFICATION STATEMENT

I certify that, to the best of my knowledge, the transactions recorded for the month indicated on this purchasing card log are correct and complete. All purchases were made in support of school programs as outlined in the Purchase Card Guide. I understand that any material misrepresentation or omission from this log may be grounds for cancellation of my purchase card privilege and/or disciplinary action.

Ikhide Roland Ikheloa
Signature, Card Member

12/21/12
Date

[Signature]
Signature, Approving Official

12/10/12
Date

10/01/2012 - Meeting with Council Vice President Navarro

10/03/2012 - Dinner while attending MABE Annual Conference
(Attendees: JM, IRI, PK, SB, JS, PO, MD, JD, NK, CB)

Tap Room

Date: 10/03/2012 Time: 08:19:17 PM
Check: 176623 Table: 40 Covers: 1
Person#: 1
Ser#: 179 Opened: 06:04:00 PM

Sale

ANEX

XXXXXXXXXX

Entry Method: Swiped

Apprvd: Online Batch#: 000000

10/01/12 13:18:33

Inv#: 00000003 Appr Code:

Amount: \$ 29.92

Tip: 4.08

Total: 34.00

Customer Copy

THANK YOU!

3	TEA	7.50
2	COFFEE	4.50
2	CRAB & ARTICHOKE	19.78
1	Tempura Artchoke	14.99
1	Mussels	11.89
3	SOUP DU JOUR	25.77
1	FIELD OF GREENS	8.89
1	SPLIT STILTON	12.99
2	SCALLOPS AMERICAINE	31.76
2	CRAB CAKES (2)	57.78
1	FILET MIGNON	34.40
2	LOBSTER PIE	59.38
1	BOUILLABAISSE	29.59
1	Fish Special	31.59
1	SEARED TUNA	12.39
1	CAESAR	8.89
4	COFFEE	9.00
1	HOT TEA	2.5
1	ESPRESSO	3.25
	WINE ALA	8.50
	ad Pudding	8.50

(000)000-0000

Date: 10/03/2012 Time: 08:26:08 PM

Card Type: American Express

Card Number: XXXXX

Expiration Date: XX/XX/XXXX

Server Name: Kelly

Check Number: 176623

Card Owner: IKHELOA/R

AMOUNT 324.00

TIP 66.00

TOTAL 390.00

Approval: 557518

RETAIN THIS COPY FOR YOUR RECORDS

before Discount
403.85

NOT INCLUDED!

total -79.85

*mk's!
Kelly*

324.00

THANK YOU!
Kelly

COMMENTS TO MAKE YOUR
DINING EXPERIENCE BETTER THAN YOU
THANK YOU!!!

10/03/2012 - 10/05/2012 - Hotel stay while attending
MABE's Annual Conference

Fontainebleau Hotel
10100 Coastal Highway
Ocean City, MD 21842
United States
410-524-3535 Fax: 410-524-3834

Ikhide Roland Ikheloa
Montgomery Co Board Of Ed
850 Hungerford Drive
Room 123
Rockville, MD 20850
United States
BE1001 - Mabe

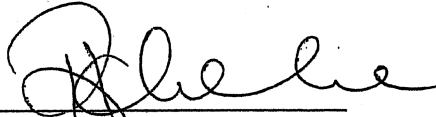
Page Number : 1
Guest Number: [REDACTED] Arrive Date: 10-03-12
Folio ID : A Depart Date: 10-05-12
No. Of Guest: 1
Room Number : 717
Club Account:
AR Account :

-Copy Tax Invoice

Fontainebleau Hotel 10-05-12 11:14 LEILAM

Date	Reference	Description	Charges	Credits
10-03-12	DEPOSIT	Deposit Applied		-172.43
10-03-12	[REDACTED]	Room	165.00	
		Exch Rate: 0		
10-03-12	[REDACTED]	4.5% Occupancy Tax	7.43	
10-04-12	[REDACTED]	Room	165.00	
		Exch Rate: 0		
10-04-12	[REDACTED]	4.5% Occupancy Tax	7.43	
10-05-12	AX	American Express		-172.43
		For Authorization Purpose Only		
	xx [REDACTED]			
	Date	Code	Authorized	
	10-03-12	[REDACTED]	256.57	
		** Total	344.86	-344.86
		*** Balance	0.00	

Signature _____



I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

10/03/2012 - 10/05/2012 - Hotel stay while attending
MABE's Annual Conference

Fontainebleau Hotel
10100 Coastal Highway
Ocean City, MD 21842
United States
410-524-3535 Fax: 410-524-3834

Laura Steinberg
Montgomery Co Board Of Ed
850 Hungerford Drive
Room 123
Rockville, MD 20850
United States
BE1001 - Mabe


Page Number : 1
Guest Number: [REDACTED] Arrive Date: 10-03-12
Folio ID : A Depart Date: 10-05-12
No. Of Guest: 1
Room Number : 1110
Club Account:
AR Account :

Copy Tax Invoice

Fontainebleau Hotel 10-05-12 11:14 LEILAM

Date	Reference	Description	Charges	Credits
10-03-12	DEPOSIT	Deposit Applied		-151.53
10-03-12	[REDACTED]	Room	145.00	
		Exch Rate: 0		
10-03-12	[REDACTED]	4.5% Occupancy Tax	6.53	
10-04-12	[REDACTED]	Room	145.00	
		Exch Rate: 0		
10-04-12	[REDACTED]	4.5% Occupancy Tax	6.53	
10-05-12	AX	American Express		-151.53
	For Authorization Purpose Only			
	xxxxxx [REDACTED]			
	Date	Code	Authorized	
	10-05-12	[REDACTED]	151.53	
		** Total	303.06	-303.06
		*** Balance	-0.00	

Signature



I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

10/05/2012 - Dinner while attending MABE Annual Conference
(Attendees: JM, IRI, PK, PO, MD, CB, LS)



B.J.'S ON THE WATER
115 75th Street
Ocean City, MD 21842
(410)524-7575

Date: 10/04/2012 Time: 12:31:49 PM

Card Type: American Express
Card Number: XXXXX [REDACTED]
Server Name: Jenifer
Check Number: 824518

Card Owner: IKHELOA/R

AMOUNT 144.62

TIP 21.38
TOTAL \$166.00

Approval: [REDACTED]

RETAIN THIS COPY FOR YOUR RECORDS



B.J.'S ON THE WATER
115 75th Street
Ocean City, MD 21842
(410)524-7575
Dining Room

Date: 10/04/2012 Time: 12:30:06 PM
Check: 824518 Table: 16 Covers: 7
Person#: 1
Server #: 1289 Opened: 11:41:00 AM

2	SOUP DU JOUR	10.
	MD CRAB SOUP	10.00
	House Salad	2.
1	Black Russian	8.99
	SUB FRIES	1.1
	Chop Chop	12.9
	SIDE FRIES	1.5
	Steak Caesar	37.9
	B L T	8.4
	Single Crab Cake	14.99
	Pork BBQ	8.99
	Iced Tea	6.87
	Raspberry Tea	2.29

3 Pepsi 6.87

SUB TOTAL	135.79
Food Tax	8.15
Liquor Tax	0.00
OC Tax2	0.68
Total Tax	8.83

TOTAL 144.62

THANK YOU!
Jenifer

BJ's On The Water
THE Bayfront

NSBA National School Boards Association

School Board Leadership for Student Achievement

Shopping Cart | Receipt

Thank you for your order. You may Print this page for your records.

Proceed to Housing Reservation

Item	quantity	price	discount	tax	shipping	net-total
Annual Conference 2013	1.00	725.00	\$0.00	\$0.00	\$0.00	\$725.00
Annual Conference 2013	1.00	725.00	\$0.00	\$0.00	\$0.00	\$725.00
Annual Conference 2013	1.00	725.00	\$0.00	\$0.00	\$0.00	\$725.00
Council Of Urban Boards of Education Programming: Friday 4/12	1.00	200.00	\$0.00	\$0.00	\$0.00	\$200.00
Black Caucus Luncheon, Sunday 4/14, 12:00pm	1.00	65.00	\$0.00	\$0.00	\$0.00	\$65.00
Annual Conference 2013	1.00	725.00	\$0.00	\$0.00	\$0.00	\$725.00

customer name: Ikheloa Roland
 email: roland_ikheloa@mcpsmd.org
 phone: (301)279-3617

billing name: Montgomery County Board of Education
 contact: Ikheloa Roland

shipping label: Mr. Roland Ikheloa
 Chief of Staff
 Montgomery County Board of Education
 850 Hungerford Dr Rm 123
 Rockville, MD 20850-1718

billing label: Montgomery County Board of Education
 850 Hungerford Dr Rm 123
 Rockville, MD 20850-1718

net credit: \$0.00
 payment amount: 3,165.00
 payment method: American Express
 cardholder's name: Roland Ikheloa
 credit card number: [REDACTED]
 expiration date: 2013/10

Total: \$3,165.00
Paid: \$3,165.00
Balance: \$0.00

authorization code: [REDACTED]
 reference number: [REDACTED]

Gibson, Becky

From: registration@nsba.org
Sent: Wednesday, October 17, 2012 11:50 AM
To: King, Suzann M - BOE Office
Cc: Gibson, Becky
Subject: 2013 Annual Conference Confirmation Letter



10/17/2012

Confirmation ID #: [REDACTED]

Dear Ms. King:

We are delighted you will be joining us for NSBA's 73rd Annual Conference to be held April 13-15, 2013, at the San Diego Convention Center, San Diego, California. The programs you have chosen are listed below.

Registration Details For: Ms. Suzann King
Staff Assistant, Policy & Communications
Montgomery County Board of Education

Qty	Item	Sub-Total	Discount	Paid	Balance
1	National Affiliate/Technology Leadership Network Early Rate Reg Fee	725.00	0.00	725.00	0.00

NSBA conference registration is located in the San Diego Convention Center – Lobby D. **All registrants must pick up their registration materials in person.**

Registration hours are:

Friday, April 12	8:00 a.m. – 6:00 p.m.
Saturday, April 13	7:00 a.m. – 5:00 p.m.
Sunday, April 14	8:00 a.m. – 4:30 p.m.
Monday, April 15	7:30 a.m. – 1:00 p.m.

IF YOU ARE REGISTERED FOR THE COUNCIL OF SCHOOL ATTORNEYS' SCHOOL LAW SEMINAR, please pick up your badge and seminar materials at the Manchester Grand Hyatt San Diego. Registration begins on Thursday, April 11 at 12 noon. If you are also registered for NSBA's conference, your conference badge will be available with your seminar materials at the Manchester Grand Hyatt. The School Law Seminar begins on Thursday, April 11 with Early Bird Concurrent Sessions at 2:30 p.m. and will adjourn on Saturday, April 13 at 12:10 p.m.

Gibson, Becky

From: registration@nsba.org
Sent: Wednesday, October 17, 2012 11:50 AM
To: Mannes, John B
Cc: Gibson, Becky
Subject: 2013 Annual Conference Confirmation Letter



10/17/2012

Confirmation ID #: [REDACTED]

Dear Mr. Mannes:

We are delighted you will be joining us for NSBA's 73rd Annual Conference to be held April 13-15, 2013, at the San Diego Convention Center, San Diego, California. The programs you have chosen are listed below.

Registration Details For: Mr. John Mannes, III
Board Member
Montgomery County Board of Education

Qty	Item	Sub-Total	Discount	Paid	Balance
1	National Affiliate/Technology Leadership Network Early Rate Reg Fee	725.00	0.00	725.00	0.00

NSBA conference registration is located in the San Diego Convention Center – Lobby D. **All registrants must pick up their registration materials in person.**

Registration hours are:

Friday, April 12	8:00 a.m. – 6:00 p.m.
Saturday, April 13	7:00 a.m. – 5:00 p.m.
Sunday, April 14	8:00 a.m. – 4:30 p.m.
Monday, April 15	7:30 a.m. – 1:00 p.m.

IF YOU ARE REGISTERED FOR THE COUNCIL OF SCHOOL ATTORNEYS' SCHOOL LAW SEMINAR, please pick up your badge and seminar materials at the Manchester Grand Hyatt San Diego. Registration begins on Thursday, April 11 at 12 noon. If you are also registered for NSBA's conference, your conference badge will be available with your seminar materials at the Manchester Grand Hyatt. The School Law Seminar begins on Thursday, April 11 with Early Bird Concurrent Sessions at 2:30 p.m. and will adjourn on Saturday, April 13 at 12:10 p.m.

Gibson, Becky

From: registration@nsba.org
Sent: Wednesday, October 17, 2012 11:50 AM
To: Ikheloa, Roland
Cc: Gibson, Becky
Subject: 2013 Annual Conference Confirmation Letter



10/17/2012

Confirmation ID #: [REDACTED]

Dear Mr. Ikheloa:

We are delighted you will be joining us for NSBA's 73rd Annual Conference to be held April 13-15, 2013, at the San Diego Convention Center, San Diego, California. The programs you have chosen are listed below.

Registration Details For: Mr. Roland Ikheloa
Chief of Staff
Montgomery County Board of Education

Qty	Item	Sub-Total	Discount	Paid	Balance
1	National Affiliate/Technology Leadership Network Early Rate Reg Fee	725.00	0.00	725.00	0.00

NSBA conference registration is located in the San Diego Convention Center – Lobby D. **All registrants must pick up their registration materials in person.**

Registration hours are:

Friday, April 12	8:00 a.m. – 6:00 p.m.
Saturday, April 13	7:00 a.m. – 5:00 p.m.
Sunday, April 14	8:00 a.m. – 4:30 p.m.
Monday, April 15	7:30 a.m. – 1:00 p.m.

IF YOU ARE REGISTERED FOR THE COUNCIL OF SCHOOL ATTORNEYS' SCHOOL LAW SEMINAR, please pick up your badge and seminar materials at the Manchester Grand Hyatt San Diego. Registration begins on Thursday, April 11 at 12 noon. If you are also registered for NSBA's conference, your conference badge will be available with your seminar materials at the Manchester Grand Hyatt. The School Law Seminar begins on Thursday, April 11 with Early Bird Concurrent Sessions at 2:30 p.m. and will adjourn on Saturday, April 13 at 12:10 p.m.

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

*Amey
10/31/12*

October 26, 2012

PAID

MEMORANDUM

To: Mrs. Susan Chen, Acting Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff



Subject: Check Request Payable to Ikhide Roland Ikheloa, ID# [REDACTED]

Please issue a check in the amount of **\$107.00** in reimbursement of the attached receipts for business meetings and deposit check.

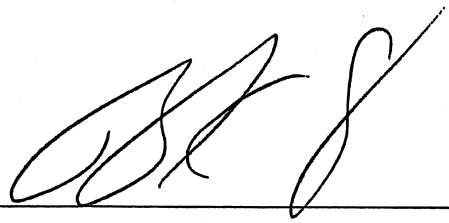
Please charge the account number indicated.

Mr. Ikhide Roland Ikheloa [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved  _____

10/11/2012 - Ikheloa - Dinner meeting
with Board member

AMBROSIA GRILLE
802 HUNGERFORD DR
ROCKVILLE MD 20850
301-251-5816

Merchant ID: 450102165
Term ID: 4547
Server ID: 11

Sale

VISA

XXXXXXXXXX

Entry Method: Swiped

Apprvd: Online Batch#: 000000

10/11/12 18:42:07

Inv#: 00000037 Appr Code: [REDACTED]

Amount: \$ 37.05

Tip: 5.95

Total: 43.00

Customer Copy

THANK YOU
FOR VISITING

10/25/2012 - Ikheloa - Lunch meeting
with Board member

Paradise Indian Grill
15124 Frederick Rd
Rockville, MD 20850
ph (301) 762-2440

Guest Check
Thank you for visiting

TABLE: Demo User #29 - 1 Guest
Your server was Demo User
10/25/2012 1:09:46 PM - ID #: 0063345

ITEM	QTY	PRICE
Weekday Lunch Buffet	(2@)	\$9.99 \$19.98
Subtotal		\$19.98
Total Taxes		\$1.20
Grand Total		\$21.18
Amount Due:		\$21.18
		21.18

SPICE GRILL
15124 FREDERICK ROAD
ROCKVILLE MD 20850
301-545-0013

Terminal #: 00000100
OCT 25, 12 1:19 PM

VISA

SALE
BATCH #: 046
RRN: [REDACTED]

REF#: 004
AUTH #: 151667

AMOUNT \$21.18

TIP \$ 3.82

TOTAL \$ 25.00

APPROVED
CUSTOMER COPY

09/28/2012 - Ikheloa - Lunch meeting with former Board member

0127

Server: JOSEPH G Rec: 25
09/28/12 13:04, Swiped T: 55 Term: 7

GORDON BIERSCH-ROCKVILLE
200 E. MIDDLE LN
UNIT A
(301)340-7159
MERCHANT #:

CARD TYPE ACCOUNT NUMBER
VISA XXX [REDACTED]
Name: IKHIDE R IKHELOA
OO TRANSACTION APPROVED
AUTHORIZATION #: [REDACTED]
Reference: [REDACTED]
TRANS TYPE: Credit Card SALE

CHECK : 32.65
TIP : \$ 6.35
TOTAL : 39.00

X _____

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
ASK ABOUT OUR BANQUET ROOM
duplicate copy -> customer

GORDON BIERSCH
BREWERY RESTAURANT
0127 Table 55 #Party 2
JOSEPH G SvrCk: 1 12:03p 09/28/12

1 Coke	2.95
1 Tea	2.95
1 Mushroom Swiss	10.95
1 Kobe Chzburger	13.95

Sub Total: 30.80

Tax: 1.85

Sub Total: 32.65

09/28 12:49p TOTAL: 32.65

FOOD	24.90
N/A BEV	5.90

REWARD YOURSELF
WITH OUR PASSPORT.
ASK YOUR SERVER.
WE HAVE BEER TO GO!



Corporate Purchasing Cardmember Report

**Sign-up For Online
Statements**

www.americanexpress.com/checkyourbill

Prepared For
ROLAND IKHELOA
MCPS MDTAX

Account Number
XXXX-X

Closing Date
12/28/12

Page 1 of 2

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Balance Due \$	Do Not Pay
0.00	29.00	0.00	0.00	0.00	29.00	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Activity Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
XXXX-XXXX		
12/14/12 THAI PAVILION ROCKVI ROCKVILLE MD REF# 12/13/12	10156420121	29.00

Total for ROLAND IKHELOA	New Charges/Other Debits	29.00
	Payments/Other Credits	0.00

Do not staple or use paper clips
Payment Coupon

Account Number

Please enter account number on all correspondence.

ROLAND IKHELOA
MCPS MDTAX
850 HUNGERFORD RM123
ROCKVILLE MD 20850-1718



Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

12/13/2013 - Ikhekoa Lunch Meeting
with Yolanda Pruitt

PHI
1000 PENNSYLVANIA AVENUE S.W.
ROCKVILLE MD 20850
301-545-0244

TERMINAL ID: 00800445 0002

12/13/12 13:12
Server ID: 19

AM EXPRESS

SALE REF#: 725
BATCH #: 354 AUTH #: [REDACTED]

AMOUNT \$24.27

TIP \$ 4.73

TOTAL \$ 28.99

APPROVED

CUSTOMER COPY