

Unit	Voucher	Description	Period	Year	Invoice	Date	Employee Name	Category	Amount	Adjustment	Adjusted Amount	TCC T&D
103	00813870	Other Business Expense	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$7.00	(\$7.00)	\$0.00	\$0.00
103	00813870	Other Business Expense	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$5.00	(\$5.00)	\$0.00	\$0.00
103	00813871	Airfare	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$443.20	\$0.00	\$443.20	\$341.26
103	00813871	Airfare	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$318.00	\$0.00	\$318.00	\$244.86
103	00813871	Meal - Business Entertainment	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$20.67	\$0.00	\$20.67	\$15.92
103	00813871	Room Rate	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$105.29	\$0.00	\$105.29	\$81.07
103	00813871	Rental Car	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$226.95	\$0.00	\$226.95	\$174.75
103	00813871	Parking	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$70.00	\$0.00	\$70.00	\$53.90
103	00813871	Rental Car - Gasoline	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$3.91	\$0.00	\$3.91	\$3.01
103	00813871	Room Rate	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$443.00	\$0.00	\$443.00	\$341.11
103	00813871	Office Supplies	4	2006	0000145873ER36	4/18/2006	Bennett, Sandra	Employee Expenses	\$192.09	\$0.00	\$192.09	\$0.00
103	00821473	Airfare	5	2006	0000145873ER37	5/9/2006	Bennett, Sandra	Employee Expenses	\$1,034.10	(\$1,034.10)	\$0.00	\$0.00
103	00821473	Room Rate	5	2006	0000145873ER37	5/9/2006	Bennett, Sandra	Employee Expenses	\$211.72	(\$211.72)	\$0.00	\$0.00
103	00821473	Parking	5	2006	0000145873ER37	5/9/2006	Bennett, Sandra	Employee Expenses	\$15.00	(\$15.00)	\$0.00	\$0.00
103	00821473	Airfare	5	2006	0000145873ER37	5/9/2006	Bennett, Sandra	Employee Expenses	\$549.50	(\$549.50)	\$0.00	\$0.00
103	00839348	Taxi/Limo Fare	6	2006	0000145873ER38	6/30/2006	Bennett, Sandra	Employee Expenses	\$23.50	(\$23.50)	\$0.00	\$0.00
103	00839349	Meal - Business Entertainment	6	2006	0000145873ER38	6/30/2006	Bennett, Sandra	Employee Expenses	\$1,123.80	\$0.00	\$1,123.80	\$865.33
103	00839349	Airfare	6	2006	0000145873ER38	6/30/2006	Bennett, Sandra	Employee Expenses	\$105.83	(\$5.83)	\$100.00	\$77.00
103	00839349	Meal - Business Entertainment	6	2006	0000145873ER38	6/30/2006	Bennett, Sandra	Employee Expenses	\$208.88	\$0.00	\$208.88	\$160.34
103	00857706	Room Rate	8	2006	0000145873ER40	8/29/2006	Bennett, Sandra	Employee Expenses	\$338.17	\$0.00	\$338.17	\$259.58
103	00857706	Airfare	8	2006	0000145873ER40	8/29/2006	Bennett, Sandra	Employee Expenses	\$93.82	\$0.00	\$93.82	\$72.02
103	00857706	Meal - Business Entertainment	8	2006	0000145873ER40	8/29/2006	Bennett, Sandra	Employee Expenses	\$53.49	\$0.00	\$53.49	\$41.09
103	00865724	Rental Car	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$30.00	\$0.00	\$30.00	\$23.04
103	00865724	Parking	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$1.34	\$0.00	\$1.34	\$1.03
103	00865724	Rental Car - Gasoline	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$104.44	\$0.00	\$104.44	\$80.22
103	00865724	Room Rate	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$169.10	\$0.00	\$169.10	\$129.89
103	00865724	Room Rate	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$169.10	\$0.00	\$169.10	\$129.89
103	00865724	Room Rate	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$45.00	\$0.00	\$45.00	\$34.56
103	00865724	Parking	9	2006	0000145873ER41	9/21/2006	Bennett, Sandra	Employee Expenses	\$804.58	\$0.00	\$804.58	\$618.00
103	00881534	Airfare	11	2006	0000145873ER42	11/6/2006	Bennett, Sandra	Employee Expenses	\$381.20	\$0.00	\$381.20	\$293.30
103	00881534	Room Rate	11	2006	0000145873ER42	11/6/2006	Bennett, Sandra	Employee Expenses	\$350.02	\$0.00	\$350.02	\$269.31
Sub Total									\$7,696.70	-\$2,043.74	\$5,652.96	\$4,348.19

Employee

Expense Report

00813870
00813871 Page 1 of 5

BENNETT, SANDRA S



00005000014587336

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623**Required Receipts**

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

****Do Not submit Bank One statements with your receipts******Do Not staple or paperclip multiple reports together******Attendees: Attach list to cover sheet OR use the functionality within NOVA**Are International Receipts Included? **Y / N**

Expense Report					
Number	36	Date	18 Apr 2006	Gross Claim	2022.02
Status	Approved			Personal	0.00
Period	27 Feb 2006 to 10 Apr 2006			Net Claim	2022.02
Employee ID	0000145873	Division	103	Company Paid 1	0.00
Name	BENNETT, SANDRA S			Company Paid 2	2010.02
Purpose	Tx - Affiliate Mtgs/TCC Rate Case Mtg, Software, Air Travel, Hotel			CA Deduction	0.00
				Reimbursement	12.00
				Total Recovery	0.00
Reference					

Expense Report

Page 2 of 5

Report Items

Number	1	Category	Airfare	Amount	443.20	✓
Date	27 Feb 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	443.2	
Provider	CONTINEN 00513615799255	Guideline	Unlimited	Recovery on #1	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00	0.00	VAT	0.00	

Number	2	Category	Airfare	Amount	318.00	✓
Date	14 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	318.0	
Provider	CONTINEN 00513651653992	Guideline	Unlimited	Recovery on #2	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00	0.00	VAT	0.00	

Number	3	Category	Meal - Business Entertainment	Amount	20.67	✓
Date	21 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	520	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	20.67	
Provider	CAFE MAYA	Guideline	Unlimited	Recovery on #3	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....520					
Description	Affiliate Mtgs/Tx					
Taxes	TAX 174	0.00	0.00	VAT	0.00	
Num of Units	2	People	Guideline per Unit	Unlimited		
Attendees						
Name	BENNETT, SANDRA S	Title	employee			
Name	BROAD, JEFF	Title	EMPLOYEE			

Number	4	Category	Hotel	Amount	105.29	✓
Date	21 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	105.29	
Provider	COMFORT INNS	Guideline	Unlimited	Recovery on #4	0.00	
Fin. Code	See folio					
Description	Was booked due to flight being late due to weather. After 6pm could not cancel			Receipt Required	☐	
Taxes	0.00	0.00	VAT	0.00		
Num of Units	1	Nights	Guideline per Unit	Unlimited		
Folio item						
Number	1	Category	Room Rate	Amount	105.29	
Date	21 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					

Expense Report

Page 3 of 5

Description					
Number	5	Category	Airfare	Amount	100.00
Date	22 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	100.0
Provider	CONTINEN 00513676208146	Guideline	Unlimited	Recovery on #5	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	6	Category	Meal - Business Entertainment		Amount	86.91
Date	23 Mar 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0.0
GL Code	520	Location	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	86.91
Provider	CAFE MAYA	Guideline		Unlimited	Recovery on #6	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....520					
Description	Tcc/TNC Rate Case Mtgs					
Taxes	TAX 174	0.00			0.00	VAT 0.00
Num of Units	5	People			Guideline per Unit	Unlimited
Attendees						
Name	BENNETT, SANDRA S	Title	employee			
Name	NAPOLITANO, NANCY	Title	EMPLOYEE			
Name	BROAD, JEFF	Title	EMPLOYEE			
Name	RYAN, RHONDA	Title	EMPLOYEE			
Name	HUERTA, JERRY	Title	EMPLOYEE			

Number	7	Category	Rental Car		Amount	226.95
Date	24 Mar 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0.0
GL Code	510	Location	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	226.95
Provider	AVIS RENT-A-CAR	Guideline		Unlimited	Recovery on #7	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00
Num of Units	4	Days			Guideline per Unit	Unlimited

Number	8	Category	Parking		Amount	70.00
Date	24 Mar 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0.0
GL Code	510	Location	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	70.0
Provider	PORT COLUMBUS PARKING	Guideline		Unlimited	Recovery on #8	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00			0.00	VAT 0.00

Number	9	Category	Rental Car - Gasoline	Amount	3.91
Date	24 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0

Expense Report

Page 4 of 5

GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	3.91
Provider	CIRCLE K 2179 Q39	Guideline	Unlimited	Recovery on #9	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	10	Category	Hotel	Amount	443.00
Date	24 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	443.0
Provider	OMNI HOTELS BAY FRONT	Guideline	Unlimited	Recovery on #10	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	☐
Taxes		0.00		0.00	VAT 0.00
Num of Units	4	Nights		Guideline per Unit	Unlimited
Folio item					
Number	1	Category	Room Rate	Amount	443.00
Date	24 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					

Number	11	Category	Office Supplies	Amount	192.09
Date	28 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	390	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	192.09
Provider	STAPLES #451	Guideline	Unlimited	Recovery on #11	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....390				
Description	Software to Reconstruct Global E3 Books for Tim King				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	12	Category	Other Business Expense	Amount	7.00
Date	15 Mar 2006	Meth.Pmt.	Out of Pocket	Pers.Amount	0.00
GL Code	510	Location	United States	Comp. Paid 1	0.00
Exp.Type	Expense	Client		Comp. Paid 2	0.00
Provider	Vending Machine	Guideline	Unlimited	Recovery on #12	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description	Water for Staff Mtg				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	13	Category	Other Business Expense	Amount	5.00
Date	10 Apr 2006	Meth.Pmt.	Out of Pocket	Pers.Amount	0.00
GL Code	510	Location	United States	Comp. Paid 1	0.00
Exp.Type	Expense	Client		Comp. Paid 2	0.00
Provider	Vending Machine	Guideline	Unlimited	Recovery on #13	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description	Water for TCC/TNC Mtgs April 10-13th				

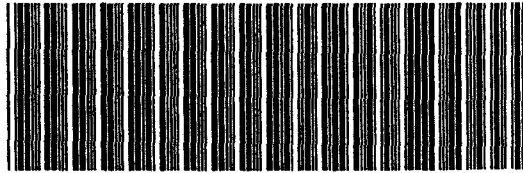
Expense Report

Page 5 of 5

Taxes	TAX 174	0.00	0.00	VAT	0.00
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00839348

BENNETT, SANDRA S



00005000014587338

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

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Expense Report					
Number	38	Date	30 Jun 2006	Gross Claim	2523.32
Status	Approved			Personal	0.00
Period	08 May 2006 to 15 Jun 2006			Net Claim	2523.32
Employee ID	0000145873	Division	103	Company Paid 1	0.00
Name	BENNETT, SANDRA S			Company Paid 2	2474.32
Purpose	Acctg Conf/TSCPA			CA Deduction	0.00
				Reimbursement	49.00
				Total Recovery	0.00
Reference					

Report Items

Expense Report

Page 2 of 4

Number	1	Category	Airfare	Amount	431.20
Date	08 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	431.2
Provider	AMERICAN 00113774046676	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....510				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	2	Category	Meal - Business Entertainment	Amount	23.50
Date	17 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	23.5
Provider	MATT S EL RANCHO	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	3	People	Guideline per Unit	Unlimited	
Attendees					
Name	BENNETT, SANDRA S	Title	employee		
Name	jones, Gary	Title	employee		
Name	broad, jeff	Title	employee		

Number	3	Category	Hotel	Amount	371.38
Date	20 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	371.38
Provider	HYATT HOTELS AUSTIN	Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	☐
Taxes		0.00	0.00	VAT	0.00
Num of Units	1	Nights	Guideline per Unit	Unlimited	
Folio item					
Number	1	Category	Room Rate	Amount	371.38
Date	20 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....510				
Description					

Number	4	Category	Meal - Business Entertainment	Amount	86.61
Date	25 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	86.61
Provider	TED'S MONTANA GRILL	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....520				

Expense Report

Page 3 of 4

Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	1	People	Guideline per Unit	Unlimited	

Number	5	Category	Airfare	Amount	1123.80
Date	07 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	1123.8
Provider	AMERICAN 00177623572991	Guideline	Unlimited	Recovery on #5	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	6	Category	Meal - Business Entertainment	Amount	105.83
Date	12 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	105.83
Provider	DOC'S SEAFOOD & STEAKS	Guideline	Unlimited	Recovery on #6	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	4	People	Guideline per Unit	Unlimited	
Attendees					
Name	BENNETT, SANDRA S	Title	employee		
Name	Broad, Jeff	Title	employee		
Name	Hoersdig, Jeff	Title	employee		
Name	Erkin, David	Title	employee		

Number	7	Category	Hotel	Amount	332.00
Date	15 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	332.0
Provider	OMNI HOTELS BAY FRONT	Guideline	Unlimited	Recovery on #7	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	☐
Taxes		0.00	0.00	VAT	0.00
Num of Units	1	Nights	Guideline per Unit	Unlimited	
Folio item					
Number	1	Category	Room Rate	Amount	332.00
Date	15 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....510				
Description					

Number	8	Category	Taxi/Limo Fare	Amount	49.00
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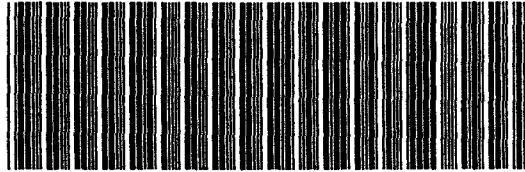
Expense Report

Page 4 of 4

Date	12 Jun 2006	Meth.Pmt.	Out of Pocket	Pers.Amount	0.00
GL Code	510	Location	United States	Comp. Paid 1	0.00
Exp.Type	Expense	Client		Comp. Paid 2	0.00
Provider		Guideline	Unlimited	Recovery on #8	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

00857706

BENNETT, SANDRA S



00005000014587340

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

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Expense Report					
Number	40	Date	29 Aug 2006	Gross Claim	778.66
Status	Approved			Personal	0.00
Period	27 Jul 2006 to 21 Aug 2006			Net Claim	778.66
Employee ID	0000145873	Division	103	Company Paid 1	0.00
Name	BENNETT, SANDRA S			Company Paid 2	778.66
Purpose	Employee Recognition, TCC/TNC Rate Case Testimony			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

Expense Report

Page 2 of 3

Report Items					
Number	1	Category	Other Business Entertainment	Amount	137.79
Date	27 Jul 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	137.79
Provider	MOORE SYNDICATION INC	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.FINAN.FANANDA.G0001021.9210001.334....520				
Description	AEP Memorabilia for employee recognition				
Taxes	TAX 174	0.00		0.00 VAT	0.00
Num of Units	1 People			Guideline per Unit	Unlimited

Number	2	Category	Hotel	Amount	208.88
Date	05 Aug 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	208.88
Provider	EMBASSY SUITES TULSTIP	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	☐
Taxes		0.00		0.00 VAT	0.00
Num of Units	1 Nights			Guideline per Unit	Unlimited
Folio item					
Number	1	Category	Room Rate	Amount	208.88
Date	05 Aug 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					

Number	3	Category	Airfare	Amount	338.17
Date	21 Aug 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	338.17
Provider	AMERICAN 00177778282065	Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					
Taxes	TAX 174	0.00		0.00 VAT	0.00

Number	4	Category	Meal - Business Entertainment	Amount	93.82
Date	21 Aug 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	93.82
Provider	BD'S MONGOLIAN BARBEQU	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....520				
Description					
Taxes	TAX 174	0.00		0.00 VAT	0.00

Expense Report

Page 3 of 3

Num of Units	6	People	Guideline per Unit	Unlimited
Attendees				
Name	BENNETT, SANDRA S	Title	employee	
Name	Broad, Jeff	Title	employee	
Name	Ricketts, Phil	Title	employee	
Name	Napolitano, Nancy	Title	employee	
Name	Williams, John	Title	employee	
Name	Thomas, d	Title	employee	

00865724

Expense Report

BENNETT, SANDRA S



00005000014587341

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

****Do Not submit Bank One statements with your receipts**

****Do Not staple or paperclip multiple reports together**

****Attendees: Attach list to cover sheet OR use the functionality within NOVA**

Are International Receipts Included? **Y / N**

Expense Report					
Number	41	Date	21 Sep 2006	Gross Claim	1377.05
Status	Approved			Personal	0.00
Period	01 Sep 2006 to 08 Sep 2006			Net Claim	1377.05
Employee ID	0000145873	Division	103	Company Paid 1	0.00
Name	BENNETT, SANDRA S			Company Paid 2	1377.05
Purpose	Tulsa and Austin for review of TCC and TNC Rate Case Schedules and Testimony			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

Expense Report

Page 2 of 3

Report Items

Number	1	Category	Rental Car	Amount	53.49	✓
Date	08 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	53.49	
Provider	AVIS RENT-A-CAR 1	Guideline	Unlimited	Recovery on #1	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00
Num of Units	1	Days		Guideline per Unit	Unlimited	

Number	2	Category	Parking	Amount	30.00	✓
Date	08 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	30.0	
Provider	PORT COLUMBUS PARKING	Guideline	Unlimited	Recovery on #2	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00

Number	3	Category	Rental Car - Gasoline	Amount	1.34	✓
Date	08 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	1.34	
Provider	SHELL OIL 93004107627	Guideline	Unlimited	Recovery on #3	0.00	
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00

Number	4	Category	Hotel	Amount	104.44	✓
Date	08 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	104.44	
Provider	EMBASSY SUITES TULSTIP	Guideline	Unlimited	Recovery on #4	0.00	
Fin. Code	See folio					
Description	See Folio			Receipt Required	☐	
Taxes		0.00		0.00	VAT	0.00
Num of Units	1	Nights		Guideline per Unit	Unlimited	

Folio item					
Number	1	Category	Room Rate	Amount	104.44
Date	08 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					

Number	5	Category	Hotel	Amount	338.20
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Expense Report

Page 3 of 3

Date	01 Sep 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0.0
GL Code	510	Location	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	338.2
Provider	HYATT HOTELS AUSTIN	Guideline		Unlimited	Recovery on #5	0.00
Fin. Code	See folio					
Description	See Folio				Receipt Required	☐
Taxes		0.00		0.00	VAT	0.00
Num of Units	2	Nights		Guideline per Unit	Unlimited	
Folio item						
Number	1	Category	Room Rate		Amount	169.10
Date	01 Sep 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0
GL Code	510	Guideline		Unlimited	Recovery on #1	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						
Folio item						
Number	2	Category	Room Rate		Amount	169.10
Date	01 Sep 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0
GL Code	510	Guideline		Unlimited	Recovery on #2	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510					
Description						

Number	6	Category	Parking	Amount	45.00 ✓
Date	01 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	45.0
Provider	PORT COLUMBUS PARKING	Guideline	Unlimited	Recovery on #6	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	7	Category	Airfare	Amount	804.58 ✓
Date	01 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	804.58
Provider	AMERICAN 00177805256580	Guideline	Unlimited	Recovery on #7	0.00
Fin. Code	103.11176.Legal.EON018181.SP06000901.9210001.280....510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Unit	Voucher	Description	Period	Year	Invoice	Date	Employee Name	Category	Amount	Adjustment	Adjusted Amount	TCC T&D
103	00808882	Meal - Self (travel req'd)	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$14.23	\$0.00	\$14.23	\$10.96
103	00808882	Meal - Self (travel req'd)	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$28.04	(\$3.04)	\$25.00	\$19.25
103	00808882	Personal Auto Mileage 2006	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$434.77	\$0.00	\$434.77	\$334.77
103	00808883	Meal - Business Entertainment	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$216.89	(\$116.89)	\$100.00	\$77.00
103	00808883	Room Rate	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$90.00	\$0.00	\$90.00	\$69.30
103	00808883	Room Tax 1	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$8.10	\$0.00	\$8.10	\$6.24
103	00808883	Other Room Tax	4	2006	0000093405ER80	4/3/2006	Berny, Billy	Employee Expenses	\$5.40	\$0.00	\$5.40	\$4.16
Sub Total									\$797.43	-\$119.93	\$677.50	\$521.68

Employee

Expense Report

00808882
00808883 Page 1 of 5

BERNY, BILLY G



00005-0000093405-80

Send Receipts by Company Mail or US Mail to:
AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- ALL purchased materials and services (no minimum dollar limit)
- ALL hotel/motel stays
- ALL international travel
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- ALL SAFETY SHOE AND BOOT PURCHASES

****Do Not submit Bank One statements with your receipts**

****Do Not staple or paperclip multiple reports together**

****Attendees: Attach list to cover sheet OR use the functionality within NOVA**

Are International Receipts Included? **Y / N**

Expense Report					
Number	80	Date	31 Mar 2006 10:13	Gross Claim	1200.37
Status	Submitted			Personal	0.00
Period	24 Feb 2006 to 28 Mar 2006			Net Claim	1200.37
Employee ID	0000093405	Division	103	Company Paid 1	0.00
Name	BERNY, BILLY G			Company Paid 2	647.13
Purpose	Travel, meals, lodging and other expenses incurred in performing job duties.			CA Deduction	0.00
				Reimbursement	553.24

<http://ohaephqas231/ReportServlet?rNum=16395164261916143711143818126507&rType=1>

3/31/2006

pg 5 of 5

OMNI HOTELS

OMNI CORPUS CHRISTI HOTEL
900 FIFTH SHORELINE BOULEVARD
CORPUS CHRISTI TX 78401
Tel: 361-887-1600 Fax: 361-887-6715

Employee: BILLY G
Account: AEP ELECTRIC POWER

Room Number: 1745
Daily Rate: 90.
Room Type: DDNB
No. of Guests: 1/0

ARRIVAL	DEPARTURE	CREDIT CARD	RATE CODE	MKT GROUP	ACCOUNT
03/22/06			AMELEC	ESR	14500877635
DATE	ROOM NO.	DESCRIPTION	REFERENCE		AMOUNT

02	1745	REPUBLIC OF TEXAS	1745/982/20:29/REPUBLIC OF TEXAS	\$216.89 ✓	(116.89)
03	1745	ROOM CHARGE	#1745 BERNY, BILLY G	\$90.00 ✓	
01	1745	CITY OCC TAX - 9%	CITY OCC TAX - 9%	\$8.10 ✓	
01	1745	STATE OCC TAX - 6%	STATE OCC TAX - 6%	\$5.40 ✓	
03	1745	MASTERCARD	MASTERCARD	(5320.39)	

TCC/TNC Rate Case Prep mtgs - C.C.

216.89
4 X 25 = 100.00
116.89

Korri Le Masters - Columbus
Todd Rind - Tulsa Mgr.
Jack Andres - AEP SWEP CO
B. Berny

TOTAL DUE: \$0.00

Unit	Voucher	Description	Period	Year	Invoice	Date	Employee Name	Category	Amount	Adjustment	Adjusted Amount	TCC T&D
103	00876457	Meal - Business Entertainment	10	2006	0000110535ER79	10/23/2006	Brewer, Larry	Employee Expenses	\$70.57	\$0.00	\$70.57	\$54.30
103	00910771	Meal - Business Entertainment	1	2007	0000110535ER84	1/30/2007	Brewer, Larry	Employee Expenses	\$33.82	\$0.00	\$33.82	\$26.04
Sub Total									\$104.39	\$0.00	\$104.39	\$80.34

Employee

Expense Report

Docket No. 33309

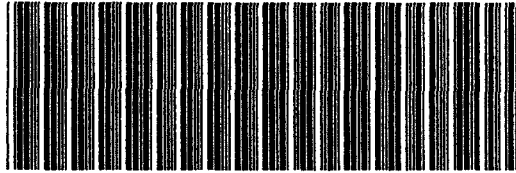
Employee Expenses

Brewer

Page 1 of 3Page 2 of 6

00876457

Brewer, Larry W



00005000011053579

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

****Do Not submit Bank One statements with your receipts******Do Not staple or paperclip multiple reports together******Attendees: Attach list to cover sheet OR use the functionality within NOVA**Are International Receipts Included? Y (N)

Expense Report					
Number	79	Date	23 Oct 2006 11:04	Gross Claim	333.03
Status	Submitted			Personal	0.00
Period	06 Sep 2006 to 29 Sep 2006			Net Claim	333.03
Employee ID	0000110535	Division	103	Company Paid 1	0.00
Name	Brewer, Larry W			Company Paid 2	333.03
Purpose	Trip to Columbus, Business entertainment			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

Report Items					
Number	1	Category	Meal - Self (travel req'd)	Amount	10.57
Date	06 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp./Paid 1	0.0

Expense Report

Exp.Type	Expense	Client		Comp. Paid 2	10.57
Provider	HMSHOST-DFW-AIRPT #007	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11523.LEGAL.LGNANDA.G0001007.9210001.290....520				
Description					
Taxes	TAX 174	0.00		0.00 VAT	0.00

Number	2	Category	Parking	Amount	18.00
Date	07 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	18.0
Provider	AMPCO - AUSTIN BERGQ40	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11523.LEGAL.LGNANDA.G0001007.9210001.290....510				
Description					
Taxes	TAX 174	0.00		0.00 VAT	0.00

Number	3	Category	Hotel	Amount	163.31
Date	07 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	163.31
Provider	CROWNE PLAZA/SIX CONTI	Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	☐
Taxes		0.00		0.00 VAT	0.00
Num of Units	1	Nights		Guideline per Unit	Unlimited

Folio item

Number	1	Category	Meal - Self (dinner)	Amount	18.54
Date	07 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	520	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11523.LEGAL.LGNANDA.G0001007.9210001.290....520				
Description					

Folio item

Number	2	Category	Room Rate	Amount	144.77
Date	07 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11523.LEGAL.LGNANDA.G0001007.9210001.290....510				
Description					

Number	4	Category	Meal - Business Entertainment	Amount	1
Date	29 Sep 2006	Meth.Pmt.	Corporate Card	Pers.Amount	
GL Code	520	Location	United States	Comp. Paid 1	
Exp.Type	Expense	Client		Comp. Paid 2	1
Provider	MR. GATTI'S PIZZA 160	Guideline	Unlimited	Recovery on #4	
Fin. Code	See split				
Description					
Taxes	TAX 174	0.00		0.00 VAT	
Num of Units	23	People		Guideline per Unit	Unli
Attendees					
Name	Brewer, Larry W	Title	employee		

Expense Report

Name	Walter Demond	Title	Attorney				
Name	Kerry McGrath	Title	Attorney				
Name	Phil Ricketts	Title	Attorney				
Name	John Williams	Title	Attorney				
Name	Sandra Bennett	Title	Employee				
Name	Jeff Broad	Title	Employee				
Name	Nancy Napolitano	Title	Employee				
Name	Gilbert Hughes	Title	Employee				
Name	Blake Gross	Title	Employee				
Name	Barbara Cody	Title	Employee				
Name	Lauri White	Title	Employee				
Name	Janet Reaves	Title	Employee				
Name	Julio Reyes	Title	Employee				
Name	Steven Beaty	Title	Employee				
Name	Teri Walker	Title	Employee				
Name	Grieg Gullickson	Title	Employee				
Name	Barry Smith	Title	Employee				
Name	Larry Jones	Title	Employee				
Name	Graham Dodson	Title	Employee				
Name	Randy Roper	Title	Employee				
Name	Jerry Huerta	Title	Employee				
Name	Carol Stewien	Title	Employee				
Split							
Fin. Code	103.11523.TRANS.000014184.SP06004201.1860151.266....520	""	50.00	Amount	70.58	Recovery	
Fin. Code	103.11523.LEGAL.EON018181.SP06000901.9280002.280...TX.520	""	50.00	Amount	70.57	Recovery	

00910771
Page 1 of 1

Expense Report

Brewer, Larry W



00005000011053584

Send Receipts by Company Mail or US Mail to:

AEF Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

****Do Not submit Bank One statements with your receipts**

****Do Not staple or paperclip multiple reports together**

****Attendees: Attach list to cover sheet OR use the functionality within NOVA**

Are International Receipts Included? Y ☒ N

Expense Report					
Number	84	Date	30 Jan 2007	Gross Claim	293.01
Status	Submitted			Personal	0.00
Period	04 Jan 2007 to 23 Jan 2007			Net Claim	293.01
Employee ID	0000110535	Division	103	Company Paid 1	0.00
Name	Brewer, Larry W			Company Paid 2	293.01
Purpose	Travel to Chicago for JV, Business lunch - Rate Case			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

Report Items

Number	1	Category	Parking	Amount	
Number	2	Category	Hotel	Amount	
Number	3	Category	Meal - Business Entertainment	Amount	

<http://ohaephqas231/ReportServlet?rNum=-406606619919184648811170171974007&rType=>

Brewer

Austin-Bergstrom
International Airport
Parking

42
Roger ID #148 18
01/03/07 05:12
01/04/07 17:40
Dispenser #11
AREA 1
\$18.00
\$18.00

Free Computer Number:
Printer:
Transaction Number:
Entered:
Ticket #17930
Total Fee:
Master Card
XXXXXXXXXX6742

E1 Mercado Uptown

1702 Lavaca St.
Tel: 477--76-89
Check: 347941

Server: Jillian385
Table: 5

Date: 01/23/2007
Time: 12:29

MSTRCRD

*****6742

BREWER/LARRY W

AUTH 041598 ONLINE
MERCHANT# 200203578

SUBTOTAL \$ 27.82

TIP \$ 6.00

TOTAL \$ 33.82

** CUSTOMER COPY **

Commemorate the
National Champion Long Horns
with a souvenir pint glass
\$2.00

*John Williams
Phil Ricketts
Nancy Popelton
Larry Suwen*

Unit	Voucher	Description	Period	Year	Invoice	Date	Employee Name	Category	Amount	Adjustment	Adjusted Amount	TCCT&D
103	0802124	Meal - Business Entertainment	3	2006	0000090928ER63	3/14/2006	Broad, Jeff	Employee Expenses	\$28.43	\$0.00	\$28.43	\$21.83
103	0809751	Rental Car	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$205.85	\$0.00	\$205.85	\$158.50
103	0809751	Rental Car - Gasoline	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$32.19	\$0.00	\$32.19	\$24.79
103	0809751	Room Rate	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$436.00	\$0.00	\$436.00	\$335.72
103	0809751	Meal - Self (breakfast)	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$10.16	\$0.00	\$10.16	\$7.82
103	0809751	Mini-bar	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$11.90	(\$11.90)	\$0.00	\$0.00
103	0809751	Rental Car - Gasoline	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$8.05	\$0.00	\$8.05	\$6.20
103	0809751	Meal - Business Entertainment	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	\$39.80	\$0.00	\$39.80	\$30.65
103	0809751	Mini-bar	4	2006	0000090928ER64	4/5/2006	Broad, Jeff	Employee Expenses	-\$11.90	\$0.00	(\$11.90)	-\$9.16
103	0816659	Airfare	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$650.20	\$0.00	\$650.20	\$500.65
103	0816659	Meal - Business Entertainment	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$12.00	(\$12.00)	\$0.00	\$0.00
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$19.62	\$0.00	\$19.62	\$15.11
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$30.45	(\$5.45)	\$25.00	\$19.25
103	0816659	Meal - Business Entertainment	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$83.57	\$0.00	\$83.57	\$64.35
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$3.91	\$0.00	\$3.91	\$3.01
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$7.28	\$0.00	\$7.28	\$5.61
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$3.76	\$0.00	\$3.76	\$2.90
103	0816659	Meal - Business Entertainment	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$91.33	\$0.00	\$91.33	\$70.32
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$32.30	(\$32.30)	\$0.00	\$0.00
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$3.86	\$0.00	\$3.86	\$2.97
103	0816659	Meal - Self (travel req'd)	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$28.32	\$0.00	\$28.32	\$21.81
103	0816659	Meal - Business Entertainment	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$45.00	\$0.00	\$45.00	\$34.65
103	0816659	Parking	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$106.33	\$0.00	\$106.33	\$81.87
103	0816659	Rental Car	4	2006	0000090928ER65	4/26/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.46
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.64
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.46
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.64
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.46
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.64
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.46
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.64
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$40.87	\$0.00	\$40.87	\$31.47
103	0830261	Rental Car - Gasoline	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$26.47	(\$1.47)	\$25.00	\$19.25
103	0830261	Airfare	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$316.70	\$0.00	\$316.70	\$243.86
103	0830261	Rental Car	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$81.63	\$0.00	\$81.63	\$62.86
103	0830261	Rental Car - Gasoline	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$16.84	\$0.00	\$16.84	\$12.97
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$90.00	\$0.00	\$90.00	\$69.30
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$13.50	\$0.00	\$13.50	\$10.40
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$90.00	\$0.00	\$90.00	\$69.30
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$13.50	\$0.00	\$13.50	\$10.40
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$16.79	\$0.00	\$16.79	\$12.93
103	0830261	Meal - Self (travel req'd)	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$20.70	\$0.00	\$20.70	\$15.94
103	0830261	Meal - Business Entertainment	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$14.97	\$0.00	\$14.97	\$11.53
103	0830261	Rental Car - Gasoline	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$92.00	\$0.00	\$92.00	\$70.84
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$12.44	\$0.00	\$12.44	\$9.58
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$92.00	\$0.00	\$92.00	\$70.84
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$12.44	\$0.00	\$12.44	\$9.58
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$92.00	\$0.00	\$92.00	\$70.84
103	0830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$12.44	\$0.00	\$12.44	\$9.58
103	0830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$92.00	\$0.00	\$92.00	\$70.84

Employee

Unit	Voucher	Description	Period	Year	Invoice	Date	Employee Name	Category	Amount	Adjustment	Adjusted Amount	TCC T&D
103	00830261	Room Rate	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$92.00	\$0.00	\$92.00	\$70.84
103	00830261	Room Tax 1	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$12.44	\$0.00	\$12.44	\$9.58
103	00830261	Rental Car	6	2006	0000090928ER66	6/5/2006	Broad, Jeff	Employee Expenses	\$217.45	\$0.00	\$217.45	\$167.44
103	00845301	Rental Car - Gasoline	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$30.41	\$0.00	\$30.41	\$23.34
103	00845301	Meal - Business Entertainment	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$25.83	\$0.00	\$25.83	\$19.83
103	00845301	Rental Car	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$144.04	\$0.00	\$144.04	\$110.57
103	00845301	Rental Car - Gasoline	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$37.58	\$0.00	\$37.58	\$28.85
103	00845301	Room Rate	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$90.00	\$0.00	\$90.00	\$69.08
103	00845301	Meal - Business Entertainment	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$9.00	(\$9.00)	\$0.00	\$0.00
103	00845301	Telephone	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$0.50	\$0.00	\$0.50	\$0.38
103	00845301	Room Rate	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$90.00	\$0.00	\$90.00	\$69.08
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$13.50	\$0.00	\$13.50	\$10.36
103	00845301	Room Rate	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$90.00	\$0.00	\$90.00	\$69.08
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$13.50	\$0.00	\$13.50	\$10.36
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$13.50	\$0.00	\$13.50	\$10.36
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$491.20	\$0.00	\$491.20	\$377.05
103	00845301	Airfare	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$27.83	(\$27.83)	\$0.00	\$0.00
103	00845301	Meal - Self (travel req'd)	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$7.03	\$0.00	\$7.03	\$5.40
103	00845301	Meal - Self (travel req'd)	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$28.63	(\$28.63)	\$0.00	\$0.00
103	00845301	Meal - Self (travel req'd)	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$65.19	(\$15.19)	\$50.00	\$38.38
103	00845301	Meal - Business Entertainment	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$21.05	\$0.00	\$21.05	\$16.16
103	00845301	Meal - Self (travel req'd)	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$45.00	\$0.00	\$45.00	\$34.50
103	00845301	Parking	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$112.45	\$0.00	\$112.45	\$86.32
103	00845301	Rental Car	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.22
103	00845301	Room Rate	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.22
103	00845301	Room Rate	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.60
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.22
103	00845301	Room Rate	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.60
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.22
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.60
103	00845301	Room Tax 1	7	2006	0000090928ER67	7/20/2006	Broad, Jeff	Employee Expenses	\$210.20	\$0.00	\$210.20	\$161.35
103	00858819	Airfare	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$68.50	\$0.00	\$68.50	\$52.58
103	00858819	Meal - Business Entertainment	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$15.71	\$0.00	\$15.71	\$12.06
103	00858819	Meal - Business Entertainment	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$33.63	(\$8.63)	\$25.00	\$19.19
103	00858819	Meal - Self (travel req'd)	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$104.44	\$0.00	\$104.44	\$80.17
103	00858819	Room Rate	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$33.00	\$0.00	\$33.00	\$25.33
103	00858819	Parking	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$1,033.74	\$0.00	\$1,033.74	\$793.50
103	00858819	Airfare	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$7.22	\$0.00	\$7.22	\$5.54
103	00858819	Meal - Self (travel req'd)	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$16.56	\$0.00	\$16.56	\$12.71
103	00858819	Meal - Self (travel req'd)	8	2006	0000090928ER68	8/31/2006	Broad, Jeff	Employee Expenses	\$23.66	\$0.00	\$23.66	\$18.17
103	00864891	Meal - Self (travel req'd)	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$54.00	\$0.00	\$54.00	\$41.48
103	00864891	Parking	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$14.00	\$0.00	\$14.00	\$10.75
103	00864891	Rental Car - Gasoline	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.27
103	00864891	Room Rate	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.61
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.27
103	00864891	Room Rate	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.61
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.27
103	00864891	Room Rate	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.61
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.27
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.61

Employee

Unit	Voucher	Description	Period	Year	Invoice	Date	Employee Name	Category	Amount	Adjustment	Adjusted Amount	TCC T&D
103	00864891	Room Rate	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.27
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.61
103	00864891	Room Rate	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$98.00	\$0.00	\$98.00	\$75.27
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$16.42	\$0.00	\$16.42	\$12.61
103	00864891	Rental Car	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$173.11	\$0.00	\$173.11	\$132.97
103	00864891	Airfare	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$316.70	\$0.00	\$316.70	\$243.26
103	00864891	Room Rate	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$92.00	\$0.00	\$92.00	\$70.67
103	00864891	Room Tax 1	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$12.44	\$0.00	\$12.44	\$9.56
103	00864891	Parking	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$18.00	\$0.00	\$18.00	\$13.83
103	00864891	Meal - Business Entertainment	9	2006	0000090928ER69	9/19/2006	Broad, Jeff	Employee Expenses	\$59.22	\$0.00	\$59.22	\$45.49
103	00873440	Meal - Business Entertainment	10	2006	0000090928ER70	10/13/2006	Broad, Jeff	Employee Expenses	\$12.55	\$0.00	\$12.55	\$9.66
103	00873440	Meal - Business Entertainment	10	2006	0000090928ER70	10/13/2006	Broad, Jeff	Employee Expenses	\$38.28	(\$8.28)	\$50.00	\$38.47
103	00893025	Other Business Expense	12	2006	0000090928ER71	12/7/2006	Broad, Jeff	Employee Expense	\$45.79	\$0.00	\$45.79	\$35.23
103	00893025	Meal - Business Entertainment	12	2006	0000090928ER71	12/7/2006	Broad, Jeff	Employee Expense	\$52.74	(\$52.74)	\$0.00	\$0.00
103	00903984	Meal - Business Entertainment	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$17.00	\$0.00	\$17.00	\$13.09
103	00903984	Taxi/Limo Fare	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$22.00	\$0.00	\$22.00	\$16.94
103	00903984	Taxi/Limo Fare	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$22.00	\$0.00	\$22.00	\$16.94
103	00903984	Meal - Self (travel req'd)	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$7.58	\$0.00	\$7.58	\$5.84
103	00903984	Meal - Business Entertainment	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$43.60	\$0.00	\$43.60	\$33.57
103	00903984	Meal - Self (travel req'd)	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$5.36	\$0.00	\$5.36	\$4.13
103	00903984	Meal - Business Entertainment	1	2007	0000090928ER72	1/3/2007	Broad, Jeff	Employee Expenses	\$42.85	\$0.00	\$42.85	\$32.99
103	00906325	Meal - Business Entertainment	1	2007	0000090928ER73	1/16/2007	Broad, Jeff	Employee Expenses	\$27.26	\$0.00	\$27.26	\$20.99
103	00906325	Meal - Business Entertainment	1	2007	0000090928ER73	1/16/2007	Broad, Jeff	Employee Expenses	\$43.71	\$0.00	\$43.71	\$33.66
Sub Total									\$8,786.14	-\$213.42	\$8,572.72	\$6,590.54

Employee

00802124
Page 1 of 2

Expense Report

Broad, Jeff C



00005-0000090928-63

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- ALL purchased materials and services (no minimum dollar limit)
- ALL hotel/motel stays
- ALL international travel
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- ALL SAFETY SHOE AND BOOT PURCHASES

****Do Not submit Bank One statements with your receipts**

****Do Not staple or paperclip multiple reports together**

****Attendees: Attach list to cover sheet OR use the functionality within NOVA**

Are International Receipts Included? Y / **(N)**

Expense Report					
Number	63	Date	14 Mar 2006	Gross Claim	65.85
Status	Submitted			Personal	0.00
Period	21 Feb 2006 to 01 Mar 2006			Net Claim	65.85
Employee ID	0000090928	Division	103	Company Paid 1	0.00
Name	Broad, Jeff C			Company Paid 2	65.85
Purpose	Business Lunches			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

<http://ohaephqas232/ReportServlet?rNum=-261196606276707070911142350714694&rTy...> 3/14/2006

Expense Report

Page 2 of 2

Report Items					
Number	1	Category	Meal - Business Entertainment	Amount	28.43 ✓
Number	2	Category	Meal - Business Entertainment	Amount	37.42

<http://ohaephqas232/ReportServlet?rNum=-2611966062767070911142350714694&rTy...> 3/14/2006

Legal EOMB 18181
WD- 506000901

Texas Rate Cases -

Dennis Thomas

Phil Ricketts

Nancy Neapolitano

Texadelphia @ Moonlight Place
501 W 15th Street, Ste. B
Austin, TX 78701
512-391-9189

35

Host: Allen
35

02/21/2006
12:17 PM
10082

Cheesesteak 5.69
No Sauce
NO Grilled Onions
Mushrooms
Soda/Tea (2 @1.40) 2.80
Burger 5.79
Cheddar
The Texican-Chicken 5.99
Smoked Turkey Salad 5.99
Oil and Vinegar
No Dressing
NO Grated Mozz Cheese

Sub Total 26.26
Tax 2.17

Dine-In Total 28.43

M/C 28.43

Balance Due 28.43 ✓

THANKS & COME AGAIN !!

HULA HUT

3825 LAKE AUSTIN BLVD
AUSTIN, TX 78703
512-476-4852

EMP: SAM M.
Date 03/01/06
Table 43
430016

MASTERCARD
Time 20:06
DINING

Card Holder BROAD/JEFF C
Card Number *****14230 ###
Auth-Code.. 090234 Ctrl: 64762

Amount.. 31.42
Tip... 6.00
Total 37.42

Cardmember agrees to pay total in
accordance with agreement governing
use of such card.

*** Customer Copy ***

D. 32155 TLC-Scenitization

Carl Kogelhan
Jeff Broad

00809751

Page 1 of 2

Expense Report

Broad, Jeff C



00005-0000090928-64

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- ALL purchased materials and services (no minimum dollar limit)
- ALL hotel/motel stays
- ALL international travel
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- ALL SAFETY SHOE AND BOOT PURCHASES

****Do Not submit Bank One statements with your receipts**

****Do Not staple or paperclip multiple reports together**

****Attendees: Attach list to cover sheet OR use the functionality within NOVA**

Are International Receipts Included? Y / N

Expense Report					
Number	64	Date	04 Apr 2006	Gross Claim	710.05
Status	Submitted			Personal	0.00
Period	24 Mar 2006 to 27 Mar 2006			Net Claim	710.05
Employee ID	0000090928	Division	103	Company Paid 1	0.00
Name	Broad, Jeff C			Company Paid 2	710.05
Purpose	TCC/TNC Rate Case meeting - Corpus			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

699.89

<http://ohaephqas231/ReportServlet?rNum=-9968370930792233801144163258584&rType...> 4/4/2006

Expense Report

Page 2 of 2

Report Items				
Number	1	Category	Rental Car	Amount 205.85
Number	2	Category	Rental Car - Gasoline	Amount 32.19
Number	3	Category	Hotel	Amount 436.06
Number	4	Category	Rental Car - Gasoline	Amount 8.05
Number	5	Category	Meal - Business Entertainment	Amount 39.80
Number	6	Category	Hotel	Amount -11.90

<http://ohaephqas231/ReportServlet?rNum=-9968370930792233801144163258584&rType...> 4/4/2006



INVOICE

OWNER OF VEHICLE: ENTERPRISE RENT-A-CAR COMPANY OF TEXAS

BRANCH ADDRESS: 1201 WEST 5TH, AUSTIN, TX 78703-5200 512-476-2300

 MO 7:30A- 2:00P TU 7:30A- 6:00P
 WE 7:30A- 6:00P TH 7:30A- 6:00P
 FR 7:30A- 6:00P SA 9:00A- 2:00P
 SUNDAY CLOSED

RENTAL TYPE: ROAD*		SO. RCE: 992	RENTAL AGREEMENT: NO	D: 677621
RENTER: ROAD* OFF C*				
START CHARGES IF DIFFERENT		DAY = 24 HOUR PERIOD		
ORIGINAL VEHICLE		NO CHARGE FOR MILES		
COLOR: SEA	LICENSE NO.: 13-KCM	HOURS: 8.00/HOUR		
MODEL: M-LT	ECAR#	DAYS: 37.25/DAY		
MILEAGE: IN 6198	OUT: 5731	149.00		
DRIVEN	BILL TO: COMPANY	TCC/ITNC		
CONDITION AGREED TO: NO DAMAGE	REFERENCE NUMBER	RATE CASE MTC		
ADDITIONAL AUTHORIZED DRIVER(S): EXCEPT AS REQUIRED BY LAW, NONE PERMITTED WITHOUT OWNER'S WRITTEN APPROVAL. REQUEST OWNER'S PERMISSION TO ALLOW: NO OTHER DRIVER PERMITTED		CORPUS CHRISTI		
W-C IS UNDER MY CONTROL AND DIRECT OR TO DRIVE VEHICLE FOR ME AND ON MY BEHALF. I AM RESPONSIBLE FOR THEIR ACTS WHILE THEY ARE DRIVING AND FOR FOLLOWING TERMS AND CONDITIONS OF THIS RENTAL AGREEMENT. USE OF VEHICLE BY AN UNAUTHORIZED DRIVER WILL AFFECT MY LIABILITY AND THIS AGREEMENT.				
PERMISSION GRANTED TO OPERATE VEHICLE ONLY IN THE STATE OF TEXAS AND THE FOLLOWING STATE(S): TX ONLY				
OPERATION IN ANY OTHER STATE OR COUNTRY WILL AFFECT YOUR LIABILITY AND RIGHTS UNDER THIS AGREEMENT.				
RENTER DECLINES OPTIONAL DAMAGE WAIVER (DW) AND ASSUMES DAMAGE RESPONSIBILITY. SEE PAGE 2, PARAGRAPH 11.5.		RENTER ACCEPTS OPTIONAL DAMAGE WAIVER (DW) AT FEE \$-OVN IN CO. (DW) TO RIGHT SEE NOTICE TO LEFT AND PAGE 3, PARAGRAPH 16. DW IS NOT INSURANCE.		
RENTER DECLINES OPTIONAL PERSONAL ACCIDENT INSURANCE (PAI).		RENTER ACCEPTS OPTIONAL PERSONAL ACCIDENT INSURANCE (PAI) AT FEE SHOWN IN COLUMN TO RIGHT. SEE PAGE 3, PARAGRAPH 15.		
RENTER DECLINES OPTIONAL SUPPLEMENTAL LIABILITY PROTECTION (SLP). SEE PAGE 2, PARAGRAPH 7.		RENTER ACCEPTS OPTIONAL SUPPLEMENTAL LIABILITY PROTECTION (SLP) AT FEE SHOWN IN COLUMN TO RIGHT. SEE NOTICE BELOW AND PAGE 3, PARAGRAPH 17.		
ACKNOWLEDGMENT OF THE ENTIRE AGREEMENT, WHICH CONSISTS OF PAGES 1 THROUGH 4. I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS ON PAGES 1 THROUGH 4 OF THIS AGREEMENT AND BY MY SIGNATURE BELOW I AM THE "RENTER" UNDER THIS AGREEMENT. BY SIGNING BELOW I AM AUTHORIZING OWNER TO PROCESS CHARGES ON MY CREDIT CARD(S) AND/OR DEBIT CARD(S) FOR ADVANCE DEPOSITS, INCIDENTAL AUTHORIZATION DEPOSITS, AND CHARGES INCURRED, AS WELL AS PAYMENTS REFUSED BY A THIRD PARTY TO WHOM BILLING WAS DIRECTED. I CERTIFY THAT THE DRIVER'S LICENSE(S) PRESENTED IS CURRENTLY VALID AND IS NOT SUSPENDED, EXPIRED, REVOKED, CANCELLED OR SURRENDERED.				
REPLACEMENT VEHICLE		DATE: 3/22/05		
OWNER REP: Beth Hodge		EMPL: 6204J		
I WILL RETURN CAR BY: DATE: 3/24/05 01:00P TIME: 20P.00		DEPOSIT(S): AMOUNT: XXXXXX PAID BY: XXXXXX		
MODEL: ECAR#		MCAUTH: XXXXXX		
MILEAGE: IN				
DRIVEN				
CONDITION AGREED TO: NO DAMAGE				
NOTICE: YOUR PERSONAL AUTOMOBILE INSURANCE MAY PROVIDE COVERAGE FOR YOUR LIABILITY WHILE OPERATING A RENTAL VEHICLE. THE PURCHASE OF SLP IS NOT REQUIRED AS A CONDITION OF RENTING AN AUTOMOBILE. THIS INSURANCE DOES NOT APPLY TO ANY BODILY INJURY OR PROPERTY DAMAGE ARISING OUT OF THE USE OF A RENTAL VEHICLE BY ANY DRIVER WHILE UNDER THE INFLUENCE OF DRUGS OR ALCOHOL IN VIOLATION OF THE LAW. THE RENTAL CAR COMPANY'S EMPLOYEES, AGENTS OR ENDORSEES ARE NOT QUALIFIED TO EVALUATE THE ADEQUACY OF THE RENTER'S EXISTING COVERAGE.				
ADDITIONAL INFORMATION				
*TERMS FROM TAX: TITLE & LICENSE FEE REIMBURSEMENT 1st J. bnpv				
*THE CITY OF AUSTIN REQUIRES THAT AN ADDITIONAL TAX OF \$1.00 BE IMPOSED ON EACH MOTOR VEHICLE RENTAL FOR THE PURPOSE OF FINANCING THE TOWN LAKE PARK COMMUNITY CENTER VENUE PROJECT.				
OWNER IS AN AFFILIATE OF ENTERPRISE RENT-A-CAR COMPANY, WHICH OWNS ALL RIGHTS TO ENTERPRISE NAMES AND MARKS.				

© Enterprise Rent-A-Car Company of Texas 20

03/27/2006 MON 11:18 FAX 361 903 3616 OMNI ACCT

002/002

OMNI CORPUS CHRISTI HOTEL
707 N SHORELINE BLVD BAYFRONT AND MARINA
CORPUS CHRISTI TX 78401
Tel: 361-987-1600 Fax: 361-903-3616

BROAD, JEFF C
AMERICAN ELECTRIC POWER

738
90
DDNB

ARRIVAL	DEPARTURE	CREDIT CARD	ROOM NO	RATE CODE	MTG GROUP	ACCOUNT
03/20/2006	03/24/2006	AMELEC		ESP		14500872620
DATE	ROOM NO	DESCRIPTION	REFERENCE	DETAIL	AMOUNT	

03/20/2006	ROOM CHARGE	#545 BROAD, JEFF C	\$90.00
03/20/2006	CITY OCC TAX - 9%	CITY OCC TAX - 9%	\$8.10
03/20/2006	STATE OCC TAX - 6%	STATE OCC TAX - 6%	\$5.40
03/21/2006	GLASS PAVILION RESTAURANT	545/7270/08-58/GLASS PAVILION RESTAURANT	\$10.16
03/21/2006	ROOM CHARGE	#738 BROAD, JEFF C	\$90.00
03/21/2006	CITY OCC TAX - 9%	CITY OCC TAX - 9%	\$8.10
03/21/2006	STATE OCC TAX - 6%	STATE OCC TAX - 6%	\$5.40
03/22/2006	REFRESHMENT CENTER	REFRESHMENT CENTER	\$5.95
03/22/2006	ROOM CHARGE	#738 BROAD, JEFF C	\$90.00
03/22/2006	CITY OCC TAX - 9%	CITY OCC TAX - 9%	\$8.10
03/22/2006	STATE OCC TAX - 6%	STATE OCC TAX - 6%	\$5.40
03/23/2006	REFRESHMENT CENTER	REFRESHMENT CENTER	\$5.95
03/23/2006	ROOM CHARGE	#738 BROAD, JEFF C	\$90.00
03/23/2006	CITY OCC TAX - 9%	CITY OCC TAX - 9%	\$8.10
03/23/2006	STATE OCC TAX - 6%	STATE OCC TAX - 6%	\$5.40
03/24/2006	MASTERCARD	MASTERCARD	(\$436.06)
03/27/2006	ADJUST REFRESHMENT CENTER	ADJUST REFRESHMENT CENTER	(\$11.90)
03/27/2006	MASTERCARD	MASTERCARD	\$11.90

TCC / TNC RATE CASE MTG - CORPUS CHRISTI

436.06
22.06
414.00

TOTAL DUE: \$0.00

103.50
+ 24
414.00

TCC/TNC RATE CASE MTC CORPUS CHRISTI

LOST RECEIPTS

4/24/06 GAS for Rental Car 32.¹⁹₇₄

TEX-BEST TVL CENTER

4/27/06 / / / / 8.⁰⁵₀₀

7-11

TCL/TNC RATE CASE MTL - CORPUS CHRISTI

Rhonda R.
Gerry H.
Jeff B.
Nancy N.

TIM CAVE'S RESTAURANT
426 RAND MORGAN R
CORPUS CHRISTI, TX 78401

BATCH: 522
S-A-L-E-S D-R-A-F-T
74729651
00000001570

0016
CARD TYPE: MASTERCARD
TRANSACTION TYPE: PURCHASE
DATE: MAR 24, 05, 12:27:42

AMOUNT \$35.85

TAX 4.00

TOTAL 39.85

ACCT: 55670003044200 EXP: 11/05
CITY: 822402
NAME: JEFF C BROAD
CITY: 1
ST: 1

MEMBER ACKNOWLEDGES RECEIPT OF GOODS
AND/OR SERVICES IN THE AMOUNT OF \$4
TOTAL SHOWN HEREIN AND AGREES TO PERFORM
THE OBLIGATIONS SET FORTH BY THE
MEMBER'S AGREEMENT WITH THE ISSUING

Broad, Jeff C



0000500009092865

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

****Do Not submit Bank One statements with your receipts******Do Not staple or paperclip multiple reports together******Attendees: Attach list to cover sheet OR use the functionality within NOVA**Are International Receipts Included? **Y / N**

Expense Report					
Number	65	Date	25 Apr 2006	Gross Claim	1117.93
Status	Approved			Personal	0.00
Period	31 Mar 2006 to 13 Apr 2006			Net Claim	1117.93
Employee ID	0000090928	Division	103	Company Paid 1	0.00
Name	Broad, Jeff C			Company Paid 2	1117.93
Purpose	Texas Rate Case Meetings			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

Report Items

Expense Report

Number	1	Category	Airfare	Amount	650.20
Date	31 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	650.2
Provider	AMERICAN 00113698712945	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	2	Category	Meal - Business Entertainment	Amount	12.00
Date	31 Mar 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	12.0
Provider	THE DOG & DUCK PUB	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	2	People		Guideline per Unit	Unlimited
Attendees					
Name	Broad, Jeff C	Title	employee		
Name	John Williams	Title	Attorney		

Number	3	Category	Meal - Self (travel req'd)	Amount	19.62
Date	09 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	19.62
Provider	FRIDAYS_AM_BAR #0806	Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	4	Category	Meal - Self (travel req'd)	Amount	30.45
Date	09 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	30.45
Provider	TED'S MONTANA GRILL	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	5	Category	Meal - Business Entertainment	Amount	83.57
Date	10 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	83.57
Provider	O SHAUGHNESSY PUBLIC H	Guideline	Unlimited	Recovery on #5	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				

Expense Report

Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00
Num of Units	6	People		Guideline per Unit	Unlimited	
Attendees						
Name	Broad, Jeff C	Title	employee			
Name	Phil Ricketts	Title	Attorney			
Name	John Williams	Title	Attorney			
Name	Nancy Napolitano	Title	Reg Consultant			
Name	Sandra Bennett	Title	Assistant Controller			
Name	Jeff Hoersdig	Title	Accountant			

Number	6	Category	Meal - Self (travel req'd)	Amount	3.91
Date	11 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	3.91
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #6	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	7	Category	Meal - Self (travel req'd)	Amount	7.28
Date	11 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	7.28
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #7	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	8	Category	Meal - Self (travel req'd)	Amount	3.76
Date	12 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	3.76
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #8	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	9	Category	Meal - Business Entertainment		Amount	91.33
Date	12 Apr 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0.0
GL Code	520	Location	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	91.33
Provider	TED'S MONTANA GRILL	Guideline		Unlimited	Recovery on #9	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520					
Description						
Taxes	TAX 174	0.00			0.00	VAT 0.00
Num of Units	7	People			Guideline per Unit	Unlimited
Attendees						

Expense Report

Name	Broad, Jeff C	Title	employee
Name	Dennis Thomas	Title	Consultant
Name	John Williams	Title	Attorney
Name	Phil Ricketts	Title	Attorney
Name	Nancy Napolitano	Title	Reg Consultant
Name	Jerry Huerta	Title	Attorney
Name	Rhonda Ryan	Title	Attorney

Number	10	Category	Meal - Self (travel req'd)	Amount	32.30
Date	12 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	32.3
Provider	THE ELEVATOR BREWERY&D	Guideline	Unlimited	Recovery on #10	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	11	Category	Meal - Self (travel req'd)	Amount	3.86
Date	13 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	3.86
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #11	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	12	Category	Meal - Business Entertainment	Amount	28.32
Date	13 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	28.32
Provider	HIGH ST CAFE-CMH-AIRPO	Guideline	Unlimited	Recovery on #12	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00
Num of Units	2	People		Guideline per Unit	Unlimited
Attendees					
Name	Broad, Jeff C	Title	employee		
Name	Dennis Thomas	Title	Consultant		

Number	13	Category	Parking	Amount	45.00
Date	13 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	45.0
Provider	AMPCO - AUSTIN BERGSTR	Guideline	Unlimited	Recovery on #13	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Expense Report

Number	14	Category	Rental Car	Amount	106.33
Date	13 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	106.33
Provider	THRIFTY CAR RENTAL CMH	Guideline	Unlimited	Recovery on #14	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00 VAT	0.00
Num of Units	1	Days		Guideline per Unit	Unlimited

Virtually There - Itinerary - Printable By Category

Page 1 of 2



AEP TRAVEL SERVICES
PHONE: 888-237-7008
E-MAIL AEP@AEP-TRAVEL-SERVICES.COM

Itinerary - Printable By Category

[Print this page](#) | [Close window](#) | [Help](#)

Itinerary

JEFF C BROAD

Reservation code: MQYMHN

Travel Arranger Priority Comments:

THANK YOU FOR CALLING AEP TRAVEL SERVICES.
FOR ASSISTANCE AROUND THE CLOCK CALL 1-888-237-7008
PLEASE CHECK YOUR ITINERARY FOR ACCURACY AND CONTACT
AEP TRAVEL IMMEDIATELY TO CORRECT ANY DISCREPANCIES
TO AVOID ANY ADDITIONAL FEES OR COST.

THIS TICKET IS NON-REFUNDABLE - PENALTIES APPLY.
ANY CHANGES/CANCELLATIONS TO NON-REFUNDABLE TICKETS
MUST BE MADE PRIOR TO FLIGHT DEPARTURE.

***** AEP TRAVEL *****

VIRTUALLYTHERE - ACCOUNTING DATA
THIS TRIP IS PREPARED FOR - JEFF BROAD
THE AMERICAN TICKET NUMBER 1 IS - 1369871294
THIS TICKET WAS ISSUED - 31MAR
THE INVOICE NUMBER IS - 0166298
THE TOTAL AIRFARE IS - 650.20 USD
THANK YOU FOR USING WWW.VIRTUALLYTHERE.COM

FLIGHTS

Thu, Apr 13: AMERICAN AIRLINES, AA 1119

From: COLUMBUS OH, OH (CMH)
To: DALLAS FT WORTH, TX (DFW)
Class: Economy
Status: Confirmed
Meal:

Aircraft: MCDONNELL DOUGLAS MD-80 JET

Flight Time: 2 hours and 37 minutes

Frequent Flyer: AMERICAN AIRLINES 1UM4790

Verify flight times prior to departure

Departs: 1:13pm

Arrives: 2:50pm

Seat: Check-In Required

Confirmation: MQYMHN

Smoking: No

Mileage: 922

Gate B32

Thu, Apr 13: AMERICAN AIRLINES, AA 2021

From: DALLAS FT WORTH, TX (DFW)
To: AUSTIN, TX (AUS)
Class: Economy
Status: Confirmed
Meal:

Aircraft: MCDONNELL DOUGLAS MD-80 JET

Flight Time: 53 minutes

Frequent Flyer: AMERICAN AIRLINES 1UM4790

Verify flight times prior to departure

Departs: 4:37pm

Arrives: 5:30pm

Seat: Check-In Required

Confirmation: MQYMHN

Smoking: No

Mileage: 183

17

ER

ct 10:

City: COLUMBUS OH, OH (CMH)
Status: Confirmed

www.virtuallythere.com/new/printerFriendly.html?pnr=MQYMHN&name=BROAD&language=0&e... 4/13/2006

Virtually There - Itinerary - Printable By Category

Page 2 of 2

Information: THANK YOU FOR CALLING AEP TRAVEL

ARRANGER REMARKS

Notes: DUE TO INCREASED SECURITY MEASURES PLEASE CHECK-IN
AT LEAST 2 HOURS PRIOR TO FLIGHT TIME AND BE PREPARED
TO SHOW GOVERNMENT ISSUED PROOF OF IDENTIFICATION.

Copyright and Trademark Notices

Entre
virtually
there

<https://www.virtuallythere.com/new/printerFriendly.html?pnr=MQYMHN&name=BROAD&language=0&e...> 4/13/2006

ALL CHARGES SUBJECT TO FINAL AUDIT
LICENSEE:

CMH-Port Cois-In Terminal
THRIFTY CAR RENTAL
2000 INTERNATIONAL GATEWAY DR COLUMBUS OH, 43219
Phone: (614) 237-5800 Fax: (614) 239-3298



ST O M E R I N F O R M A T I O N	Renter: JEFF/C BROAD Address: 4060 OUTPOST LAGO VISTA TX 78645 Phone: (512) 743-7174 D.O.B.: 09/01/1953 License: 07222038 TX 09/01/2006 Emp.: AEP (1) Local: Cell: Email: Credit Card: MC XXXXXXXXXXXXXXXX4230 096974 Auth. Amt.: \$150.00 XX/XX	Car To Be Returned To Above Unless Stated 4 Rental Days	Rental Expires On 04/13/2006 05:07 PM Rental Agreement Number CMH-15253
	Add. Driver: NONE Address: Phone: D.O.B.: License: Confirmation #: D889T6 Checked Out By: Ryan Checked In By: TC	Vehicle Information 35264 Lic #: OE280 Owning Loc.: CMI Class: ICAR Year: 2006 Make: CHEVROLET Model: MALIBU LT Color: GRAY Class: ICAR Stall#: 6 Fuel Out Full In: Full Miles Out: 5245 In: 5275 I HAVE DECLINED PDW _____ I AM RESPONSIBLE FOR ANY DAMAGE TO THE VEHICLE. I HAVE DECLINED PAI _____ I HAVE DECLINED _____ A NICER VEHICLE _____ I HAVE DECLINED SLI _____	Date In: 04/13/2006 11:33 AM Date Out: 04/09/2006 05:07 PM Late: \$5.86 1 Days: \$17.59 \$17.59 3 XDays: \$22.59 \$67.77 Total Time And Miles \$85.36 Sales Tax 6.75% \$0.00 Airport Surcharge 10.19% \$6.72 Garage Fee \$3.96 /1X \$9.21 VLF \$0.27 /Day \$3.96 Optional Charges \$0.00 Fuel Per Gal \$4.99 \$106.33 Total Bill: \$106.33 Payments: \$0.00 Net Due: \$0.00 Net Due Renter: \$0.00 Payments Methods: MC \$106.33

Only authorized renters may drive the car. Minimum charge is one day. Extensions must be approved by renting office above and are subject to rate increases. Grace period applies to ONLY time and mileage. Fee for original key not returned with car is \$100.00.
THRIFTY IS NOT RESPONSIBLE FOR ITEMS LEFT IN THE VEHICLE.

You have read and agree to the terms and conditions, both printed and written, including Physical Damage Waiver, that appear on page 1 and 2 of the rental statement. All the information provided by you is true. You hereby submit to the jurisdiction and venue of the Court of Common Pleas of Franklin County, Ohio with respect to any legal action brought to enforce the terms and conditions of this Agreement and that this Agreement will be interpreted pursuant to and governed by the laws of the State of Ohio. Vehicle is presumed stolen if not returned when due. Renters financial responsibility does not end until vehicle is checked in by an authorized Thrifty agent.
I AUTHORIZE THRIFTY TO CHARGE MY CARD ABOVE FOR ESTIMATED CHARGES AND ADDITIONAL CHARGES UPON RETURN.

X
SIGNATURE

NOTES:

You agree to pay 20 cents for every mile driven during this agreement if the vehicle is taken outside the territory on this map and you authorize the credit or debit card to be charged for this unless otherwise noted. Vehicle may be tracked via satellite.

RENTER'S INITIALS _____

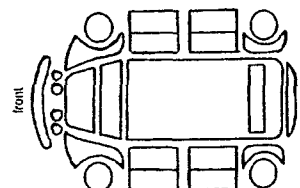


You authorize us to charge your credit card for all amounts not paid by a third party to whom billing was directed.

You agree that Thrifty may charge the card above for unpaid traffic or parking fines and an administrative fee of \$50.00 for each occurrence.

If PDW is declined you are responsible for any damage to the vehicle, towing, storage, loss of use, administrative fees and diminution of value. The renter authorizes the card above to be billed for these fees.

Condition Out:
(X) Identifies Damage



We hope you don't but.....

If You Have An Accident:

Immediately report it to Thrifty and the Police. Failure to do so may void any protection to you under the Rental Agreement.

USE THIS FORM to record on-the-scene information. Immediately Telephone information to Thrifty @ (614) 237-5800 ext. 0. Then give this form to Thrifty upon return of vehicle; or mail.

Accident: Date _____ Time _____

Place _____

Damage To Other Vehicle(s):

Owner, Address, Phone _____

Make & Year _____

Driver, Address & Phone _____

Insurance Company _____

Occupants: Indicate vehicle: Yours #1, other #2
(Circle name if possible injury) Name Address/Phone Vehicle#

Witnesses: Name Address/Phone

Your name _____

Your address _____

Police: Name _____ Badge _____

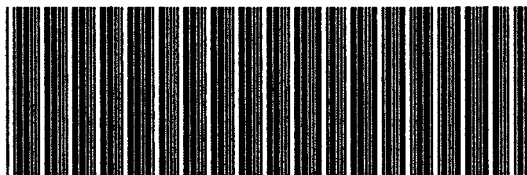
Before driving you will inspect the vehicle including the roof, windshield and fuel gauge. If any damage, other than that noted above exists or the fuel gauge is less than full, you will notify a Thrifty agent who will document and initial such.

RENTER'S INITIALS _____

Please Complete At Check-In:

Mileage In							
Gas In	E	1/4	1/2	3/4	F		
Time In							

Broad, Jeff C



00005000009092866

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
C/O Receipts Administrator
301 Cleveland Ave SW
Canton, OH 44702-1623

Required Receipts

- All purchased materials and services--NO MINIMUM DOLLAR AMOUNT
- All hotel/motel stays--NO MINIMUM DOLLAR AMOUNT
- All international travel--NO MINIMUM DOLLAR AMOUNT
- ALL single CASH transactions \$75 or more when corporate charge card is not used (purchases made with cash or personal credit card)
- All safety shoe and boot purchases--NO MINIMUM DOLLAR AMOUNT
- All small package shipping charges--NO MINIMUM DOLLAR AMOUNT

****Do Not submit Bank One statements with your receipts******Do Not staple or paperclip multiple reports together******Attendees: Attach list to cover sheet OR use the functionality within NOVA**Are International Receipts Included? **Y / N**

Expense Report					
Number	66	Date	05 Jun 2006	Gross Claim	2535.10
Status	Approved			Personal	0.00
Period	09 Apr 2006 to 13 May 2006			Net Claim	2535.10
Employee ID	0000090928	Division	103	Company Paid 1	0.00
Name	Broad, Jeff C			Company Paid 2	2535.10
Purpose	Texas Rate Cases, SWEPCO Fuel Reconciliation 2006, Professional Dues			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

Expense Report

Report Items						
Number	1	Category	Hotel	Amount	457.68	
Date	09 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0	
GL Code	510	Location	United States	Comp. Paid 1	0.0	
Exp.Type	Expense	Client		Comp. Paid 2	457.68	
Provider	COURTYARD BY MARRIOTT	Guideline		Unlimited	Recovery on #1	0.00
Fin. Code	See folio					
Description	See Folio			Receipt Required	☐	
Taxes		0.00		0.00	VAT	0.00
Num of Units	4	Nights		Guideline per Unit	Unlimited	
Folio item						
Number	1	Category	Room Rate	Amount	98.00	
Date	09 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline		Unlimited	Recovery on #1	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	2	Category	Room Tax 1	Amount	16.42	
Date	09 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline		Unlimited	Recovery on #2	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	3	Category	Room Rate	Amount	98.00	
Date	10 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline		Unlimited	Recovery on #3	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	4	Category	Room Tax 1	Amount	16.42	
Date	10 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline		Unlimited	Recovery on #4	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	5	Category	Room Rate	Amount	98.00	
Date	11 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline		Unlimited	Recovery on #5	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	6	Category	Room Tax 1	Amount	16.42	
Date	11 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline		Unlimited	Recovery on #6	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						

Expense Report

Folio item						
Number	7	Category	Room Rate	Amount	98.00	
Date	12 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline	Unlimited	Recovery on #7	0.00	
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	8	Category	Room Tax 1	Amount	16.42	
Date	12 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline	Unlimited	Recovery on #8	0.00	
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						

Number	2	Category	Conference Registration	Amount	355.00
Date	24 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	355.0
Provider	TEXAS SOCIETY OF CPA S	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.12313.LEGAL.LGNANDA.G0001465.9210001.290....510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	3	Category	Membership dues/fees	Amount	325.00
Date	26 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	954	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	325.0
Provider	TEXAS SOCIETY OF CPA S	Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	103.12313.LEGAL.LGNANDA.G0001465.9210001.290....954				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	4	Category	Rental Car - Gasoline	Amount	40.87
Date	03 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	40.87
Provider	TEXACO 0306127	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	5	Category	Meal - Self (travel req'd)	Amount	26.47
Date	03 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	26.47
Provider	WATER STREET SEAFOOD C	Guideline	Unlimited	Recovery on #5	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Expense Report

Number	6	Category	Airfare	Amount	316.70
Date	04 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	316.7
Provider	SOUTHWES 5262720449327	Guideline	Unlimited	Recovery on #6	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	7	Category	Rental Car	Amount	81.63
Date	05 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	81.63
Provider	ENTERPRISE RENT-A-CAR	Guideline	Unlimited	Recovery on #7	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	3 Days	Guideline per Unit		Unlimited	

Number	8	Category	Rental Car - Gasoline	Amount	16.84
Date	05 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	16.84
Provider	7-ELEVEN 21884 Q39	Guideline	Unlimited	Recovery on #8	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	9	Category	Hotel		Amount	207.00
Date	05 May 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0.0
GL Code	510	Location	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	207.0
Provider	OMNI HOTELS BAY FRONT	Guideline		Unlimited	Recovery on #9	0.00
Fin. Code	See folio					
Description	See Folio				Receipt Required	☐
Taxes		0.00		0.00	VAT	0.00
Num of Units	2 Nights				Guideline per Unit	Unlimited
Folio item						
Number	1	Category	Room Rate		Amount	90.00
Date	05 May 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0
GL Code	510	Guideline		Unlimited	Recovery on #1	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Folio item						
Number	2	Category	Room Tax 1		Amount	13.50
Date	05 May 2006	Meth.Pmt.	Corporate Card		Pers.Amount	0

Expense Report

GL Code	510	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Folio item					
Number	3	Category	Room Rate	Amount	90.00
Date	05 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Folio item					
Number	4	Category	Room Tax 1	Amount	13.50
Date	05 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					

Number	10	Category	Meal - Self (travel req'd)	Amount	16.79
Date	08 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	16.79
Provider	LOVE FIELD FOOD AN	Guideline	Unlimited	Recovery on #10	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00

Number	11	Category	Meal - Business Entertainment	Amount	20.24
Date	08 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	20.24
Provider	THE DOG & DUCK PUB	Guideline	Unlimited	Recovery on #11	0.00
Fin. Code	103.12313.LEGAL.000006988.G0001113.9210001.280....520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	2	People	Guideline per Unit	Unlimited	
Attendees					
Name	Broad, Jeff C	Title	employee		
Name	Bill Coe	Title	Outside Counsel		

Number	12	Category	Meal - Business Entertainment	Amount	20.70
Date	09 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	20.7
Provider	DOUBLETREE TULSA F AND	Guideline	Unlimited	Recovery on #12	0.00
Fin. Code	103.12313.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00	0.00	VAT	0.00
Num of Units	3	People	Guideline per Unit	Unlimited	