

Report Item # 4
192

ORDER TA

DELIVERY

DATE: 3/2

DAY: Thur

Jason's deli

DATE 000000001901 TIME
03/23/06 0200 001 06:58:21

421224180806
JASON'S DELI
1416 AIRLINE
CORPUS CHRISTI, TX 78412

CREDIT SALE

SERVEN ID 1
CATCH # 329
TRAY # 000
AUTH # 019335
MAIN ACCOUNT #
XXXXXXXXXXXX7491

EXP DATE

SALE AMOUNT \$252.46

TIP AMOUNT \$ 25.00

TOTAL AMOUNT \$ 277.46

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

CUSTOMER COPY

26 People
\$10.67/Person

COMPANY NAME: AEP

ADDRESS: 531 Caranchua

CITY: Elba

STATE:

FIRST NAME: Elsa

LAST NAME:

PHONE: 000 - 881 - 5515

FAX: 000 - 000

PAYMENT INFORMATION

CASH ☐

CHECK ☐

CREDIT CARD ☒

JASON'S DELI ACCOUNT #:

000000

DEPT/COST CEN

QUANTITY/NAME	ORDER INFORMATION
	mcbs tray Ranch & honeymust
	ff
	chef tray Ranch & honeymust
	ff
	asst Dess. tray
	(PNO25)
	Cups, ice
	3 gal. SWT
	don't forget the drinks!

DELIVERY INSTRUCTIONS AND ADDRESS IF DIFFERENT FROM ABOVE:

DELIVERED BY:

TIME IN:

TIME OUT: 11:15

ORDER NUMBER: T2

DELIVERY CHARGE:

(DOES NOT INCLUDE DRIVER GRATUITY)

TAX EXEMPT? YES ☐ NO ☐ TAX:

SUBTOTAL:

IF ADDING A DRIVER GRATUITY
PLEASE FILL-IN HERE AND INITIAL:

TOTAL:

CUSTOMER SIGNATURE:

PRINT NAME:

DELI CODE:

DELI COPY

*Report Item #4
Attachment
2 of 2*

AEP Texas Rate Case Meeting
March 22, 2006

Jason's Deli - Lunch

\$277.46

1 Charles Brower	AEP
2 Jeff Stracner	AEP
3 Blake Gross	AEP
4 David Hooper	AEP
5 Julio Reyes	AEP
6 Teri Gallup	AEP
7 Gonzalo Sandoval	AEP
8 Rocky Miracle	AEP
9 Don Moncrief	AEP
10 Jennifer Jackson	AEP
11 Sandra Bennett	AEP
12 Jeff Broad	AEP
13 Nancy Napolitano	AEP
14 Randy Hamlett	AEP
15 Dennis Thomas	Consultant
16 Jerry Huerta	AEP
17 Rhonda Ryan	AEP
18 Phil Ricketts	Bracewell Giuliani
19 John Williams	Clark Thomas & Winters
20 Ron Ford	AEP
21 David Hooper	AEP
22 Dan Snider	AEP
23 Teri Flora	AEP
24 Elsa Mora	AEP
25 Tina Salazar	AEP
26 Nancy Johnson	AEP

Report Item #5

OMNI HOTELS

OMNI CORPUS CHRISTI HOTEL
900 NORTH SHORELINE BOULEVARD
CORPUS CHRISTI TX 78401
Tele- 361-887-1600 Fax- 361-887-6715

NAPOLITANO, NANCY J
AMERICAN ELECTRIC POWER

Room Number: 929
Daily Rate: 90
Room Type: DDNB
No. of Guests: 1 / 0

ARRIVAL	DEPARTURE	CREDIT CARD	RATE CODE	MKT GROUP	ACCOUNT
03/21/06	03/24/06		AMELEC	ESP	14500866243
DATE	ROOM NO	DESCRIPTION	REFERENCE		AMOUNT

03/21/06	929	ROOM CHARGE	#929 NAPOLITANO, NANCY J		\$90.00
03/21/06	929	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$8.10
03/21/06	929	STATE OCC TAX - 6%	STATE OCC TAX - 6%		\$5.40
03/22/06	929	ROOM CHARGE	#929 NAPOLITANO, NANCY J		\$90.00
03/22/06	929	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$8.10
03/22/06	929	STATE OCC TAX - 6%	STATE OCC TAX - 6%		\$5.40
03/23/06	929	ROOM CHARGE	#929 NAPOLITANO, NANCY J		\$90.00
03/23/06	929	CITY OCC TAX - 9%	CITY OCC TAX - 9%		\$8.10
03/23/06	929	STATE OCC TAX - 6%	STATE OCC TAX - 6%		\$5.40
03/24/06	929	MASTERCARD	MASTERCARD		(\$310.50)

TOTAL DUE: \$0.00

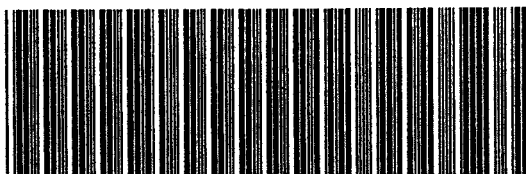
ASH 3-6563

Expense Report

00810657

Page 1 of 2

Napolitano, Nancy J



0000500009376373

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	73	Date	07 Apr 2006	Gross Claim	479.76
Status	Approved			Personal	0.00
Period	06 Apr 2006 to 06 Apr 2006			Net Claim	479.76
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	0.00
Purpose	Meeting in Tulsa related to TCC/TNC Rate case (functionalization, Studies, acct. model)			CA Deduction	0.00
				Reimbursement	479.76
				Total Recovery	0.00
Reference					

Expense Report

Page 2 of 2

Report Items

Number	1	Category	Personal Auto Mileage 2006	Amount	462.36
Date	06 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		Guideline	462.355	Recovery on #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00
Num of Units	1039	Miles		Guideline per Unit	0.445

Number	2	Category	Toll	Amount	3.50
Date	06 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		Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

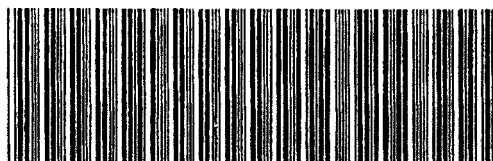
Number	3	Category	Meal - Self (travel req'd)	Amount	13.90
Date	06 Apr 2006	Meth.Pmt.	Out of Pocket	Pers.Amount	0.00
GL Code	520	Location	United States	Comp. Paid 1	0.00
Exp.Type	Expense	Client		Comp. Paid 2	0.00
Provider		Guideline	Unlimited	Recovery on #3	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

00813853

Page 1 of 1

Expense Report

Napolitano, Nancy J



00005000009376374

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	74	Date	17 Apr 2006	Gross Claim	242.27
Status	Submitted			Personal	0.00
Period	04 Apr 2006 to 13 Apr 2006			Net Claim	242.27
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	242.27
Purpose	TX Regulatory Filings			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference	000				

Expense Report

Number	1	Category	Meal - Self (travel req'd)	Amount	1.73
Date	04 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	1.73
Provider	AEP-TULSA CAFE30039176	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case Meeting-Functionalization				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	2	Category	Meal - Self (travel req'd)	Amount	7.35
Date	04 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	7.35
Provider	AEP-TULSA CAFE30039176	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case Meeting-functionalization				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	3	Category	Hotel	Amount	208.88
Date	05 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	208.88
Provider	EMBASSY SUITES TULSTIP	Guideline		Unlimited	Recovery on #3 0.00
Fin. Code	See folio				
Description	Rate Case meeting-Tulsa			Receipt Required	<input type="checkbox"/>
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	208.88
Date	05 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline		Unlimited	Recovery on #1 0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description	Rate Case Meeting - Tulsa				

Number	4	Category	Meal - Self (travel req'd)	Amount	5.14
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	5.14
Provider	PIZZA INN EXPRESS S	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case meeting Affiliate-Columbus				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	5	Category	Meal - Self (travel req'd)	Amount	3.60
Date	09 Apr 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0

Expense Report

GL Code	520	Location	United States	Comp. Paid 1	0.0
Exp.Type	Expense	Client		Comp. Paid 2	3.6
Provider	AUSTIN-BERGSTROM INTL	Guideline	Unlimited	Recovery on #5	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case meeting Affiliate-Columbus				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	6	Category	Meal - Self (travel req'd)	Amount	3.54
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	3.54
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #6	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case Meeting Affiliate - Columbus				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	7	Category	Meal - Self (travel req'd)	Amount	5.96
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	5.96
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #7	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case Meeting Affiliate - Columbus				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	8	Category	Meal - Self (travel req'd)	Amount	2.80
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	2.8
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #8	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case Meeting Affiliate-Columbus				
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	9	Category	Meal - Self (travel req'd)	Amount	3.27
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	3.27
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #9	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Rate Case Meeting affiliate-Columbus				
Taxes	TAX 174	0.00		0.00	VAT 0.00

3332 S. 79TH E. AVE
TULSA, OK 74145
TELEPHONE 918-622-4000 FAX 918-665-2347



Name & Address

NAPOLITANO, NANCY J
UNKNOWN
COLUMBUS, OH 99999
US

Room:
Arrival Date:
Departure Date: 605/TDBN
04/03/06 8:47AM
Adult / Child 04/05/06
Room Rate: 1/0
\$92.00

EMBASSY SUITES
HOTELS

RATE PLAN L-AEP

HH# 921005371 SILVER

Rate quoted based on arrival date and length of stay. If you choose to depart early, rate is subject to change. INIT. BONUS AL. CAR:

The Hilton Family Hilton HHonors
Policies & Rates

Confirmation: 86951880

04/05/06 PAGE 1

RATES SUBJECT TO APPLICABLE SALES, OCCUPANCY, OR OTHER TAXES. PLEASE DO NOT LEAVE ANY MONEY OR ITEMS OF VALUE UNATTENDED IN YOUR ROOM. A SAFE DEPOSIT BOX IS AVAILABLE FOR YOU IN THE LOBBY. I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND AGREE TO BE HELD PERSONALLY LIABLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF THESE CHARGES. I HAVE REQUESTED WEEKDAY DELIVERY OF USA TODAY. IF REFUSED, A CREDIT OF \$0.50 WILL BE APPLIED TO MY ACCOUNT. IN THE EVENT OF AN EMERGENCY, I OR SOMEONE IN MY PARTY, REQUESTS SPECIAL EVACUATION ASSISTANCE DUE TO A PHYSICAL DISABILITY, PLEASE INDICATE YES BY CHECKING HERE: ☐ ☒
A SAFE DEPOSIT BOX IS PROVIDED FOR THE DEPOSIT OF VALUABLES - THE HOTEL CANNOT BE RESPONSIBLE FOR VALUABLES NOT LEFT IN THE SAFE DEPOSIT BOX.

DATE	REFERENCE	DESCRIPTION	AMOUNT
04/03/06	1847563	GUEST ROOM	\$92.00
04/03/06	1847563	STATE TAX	\$7.84
04/03/06	1847563	CITY TAX	\$4.60
04/04/06	1848045	GUEST ROOM	\$92.00
04/04/06	1848045	STATE TAX	\$7.84
04/04/06	1848045	CITY TAX	\$4.60
WILL BE SETTLED TO MC *7481			\$208.88
EFFECTIVE BALANCE OF			\$0.00



Hilton HHonors (R) stays post to your account within 72 hours of checkout. To check your earnings for this stay or any other stay at more than 2,700 hotels worldwide visit www.hiltonhhonors.com

Thank you for staying with us. Be sure to visit embassysuites.com for information on your next business or leisure stay, reservations or subscribe to E-announcements e-newsletter with news and offers.

HOTELS



307639 A

0.00

SODEXHO
P S O
TULSA CAFE

001-0030-0043-4-S

Seq: 4
App: 036916
Ref: 60941225526312.37

04/03/2006 19:51
JODI

SALE

XXXXXXXXXXXX7481
EXP DATE : 11/06

AMOUNT 1.73

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU
WE APPRECIATE YOUR
PATRONAGE

SODEXHO
P S O
TULSA CAFE

001-0030-0229-19-S

Seq: 19
App: 084747
Ref: 60941778188579.17

04/04/2006 00:26
JODI

SALE

XXXXXXXXXXXX7481
EXP DATE : 11/06

AMOUNT 7.35

KEEP THIS COPY FOR YOUR RECORDS

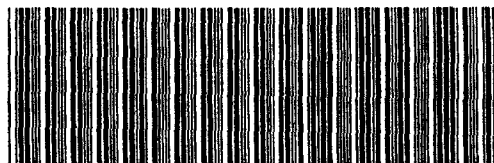
THANK YOU
WE APPRECIATE YOUR
PATRONAGE

00816674

Page 1 of 1

Expense Report

Napolitano, Nancy J



0000500009376375

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**

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

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

Expense Report					
Number	75	Date	24 Apr 2006 15:11	Gross Claim	690.12
Status	Submitted			Personal	0.00
Period	13 Apr 2006 to 19 Apr 2006			Net Claim	690.12
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	690.12
Purpose	TCC/TNC Rate Case Travel			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference	000				

4337 S PADRE ISLAND DRIVE
CORPUS CHRISTI, TX 78411
361-853-7899
FAX: 361-851-1310



EMBASSY SUITES
HOTEL

Name & Address

NAPOLITANO, NANCY
UNKNOWN
COLUMBUS, OH 99999
US

Room 308/KNGN
Arrival Date 04/18/06 3:56PM
Departure Date 04/19/06

Adult/Child 1/0
Room Rate \$95.00

RATE PLAN L-AEP
HH#
AL:
BONUS AL: CAR:

Confirmation: 86689954

04/19/06 PAGE 1

The Hilton Family

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. "I have requested weekday delivery of USA TODAY. If refused, a credit of \$75 will be applied to my account." In the event of an emergency, I, or someone in my party, require special evacuation assistance due to a physical disability. Please indicate yes by checking here. ☐

Signature

THANK YOU

DATE	REFERENCE	DESCRIPTION	AMOUNT
04/18/06	1172607	RESTAURANT FOOD SALES	\$14.20
04/18/06	1172620	SALES TAX RESTAURANT	\$1.17
04/18/06	1172734	GUEST ROOM	\$95.00
04/18/06	1172734	STATE	\$5.70
04/18/06	1172734	CITY	\$8.55
WILL BE SETTLED TO MC *7481			\$124.62
EFFECTIVE BALANCE OF			\$0.00

ACCOUNT NO	DATE OF CHARGE	FOLIO NO./CHECK NO.
CARD MEMBER NAME	AUTHORIZATION	211990 A
ESTABLISHMENT NO. & LOCATION	INITIAL	
PURCHASES & SERVICES		
TAXES		
TIPS & MISC		
CARD MEMBER'S SIGNATURE	TOTAL AMOUNT	0.00
X		

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT - 1% PER MONTH INTEREST CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES.



50 South Front Street • Columbus, OH 43215
Phone (614) 228-4600 • Fax (614) 228-0297
Reservations
www.doubletree.com

Name & Address

NAPOLITANO, NANCY J
UNKNOWN

COLUMBUS, OH 99999
US

Room 321/NK1S
Arrival Date 04/09/06 6:01PM
Departure Date 04/13/06

Adult/Child 1/0
Room Rate \$104.00

RATE PLAN L-AEP
HH# 921005371 SILVER
AL:
BONUS AL: CAR:

Confirmation: 84538536

04/13/06 PAGE 1

DATE	REFERENCE	DESCRIPTION	AMOUNT
04/09/06	2374597	* LOUNGE-CAUCUS ROOM	\$34.78
04/09/06	2374719	GUEST ROOM	\$104.00
04/09/06	2374719	STATE TAX	\$7.02
04/09/06	2374719	CITY TAX	\$10.40
04/10/06	2375214	GUEST ROOM	\$104.00
04/10/06	2375214	STATE TAX	\$7.02
04/10/06	2375214	CITY TAX	\$10.40
04/11/06	2375948	GUEST ROOM	\$104.00
04/11/06	2375948	STATE TAX	\$7.02
04/11/06	2375948	CITY TAX	\$10.40
04/12/06	2376664	GUEST ROOM	\$104.00
04/12/06	2376664	STATE TAX	\$7.02
04/12/06	2376664	CITY TAX	\$10.40
WILL BE SETTLED TO MC *7481			\$520.46
EFFECTIVE BALANCE OF			\$0.00
<p>Hilton HHonors (R) stays post to your account within 72 hours of checkout. To check your earnings for this stay or any other stay at more than 2,700 hotels worldwide visit www.hiltonhonors.com</p> <p>You may be leaving, but you don't have to say goodbye. For information, reservations, or a subscription to our monthly Doubletree (R) Items e-newsletter with news and offers, just visit doubletree.com</p>			

EXPRESS CHECK-OUT

Good Morning ! We hope you enjoyed your stay. With Express Check-Out there is no need to stop at the Front Desk to check out.

- Please review this statement. It is a record of your charges as of late last evening.
 - For any charges after your account was prepared, you may:
 - + pay at the time of purchase.
 - + charge purchases to your account, then stop by the Front Desk for an updated statement.
 - + or request an updated statement be mailed to you within two business days.
- Simply call the Front Desk from your room and tell us when you are ready to depart. Your account will be automatically checked out and you may use this statement as your receipt. Feel free to leave your key(s) in the room.
- Please call the Front Desk if you wish to extend your stay or if you have any questions about your account.*

DATE OF CHARGE	FOLIO NO /CHECK NO.
AUTHORIZATION	276915 INITIAL
PURCHASES & SERVICES	
TAXES	
TIPS & MISC.	
TOTAL AMOUNT	0.00

PAYMENT DUE UPON RECEIPT - 1.5% PER MONTH INTEREST CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES.

T
H
A
N
K

Y
O
U

ANTON AIRFOOD
DAMON'S EXPRESS
COLUMBUS AIRPORT

1013 YOSEPH

4386 APR13'06 11:49AM

TO GO

1 YOGURT	3.99
2 HOT DOG	5.98
1 FRUIT CUP	3.49
2 SODA FTN 22	3.58

SUBTOTAL	17.04
AMOUNT	17.04
XXXXXXXXXXXX7481	XX/XX
MSTRCARD A1 5*	17.04

Your order number is: 4386

Austin Fast Park
2303 Highway 71 East
78617 Del Valle

Fee 04/13/06 23:37
Cashier 9
Receipt 037713

Short-term parking tkt

No. 050071

Austin Fast Park

04/09/06 09:20 -

04/13/06 23:37

Period 4d14h17'

(TAX) \$28.00

Gross Total \$28.00

Payment

VALDN 0007

VALDN 0014 -6.18

MC \$28.00

XXXXXXXXXXXX7481 11/06

TAX

Net Total \$24.72

TAX (8.25%) 2.04

ABI TX (5%) 1.24

All amounts in USD.
Deliv. Date=Receipt Date

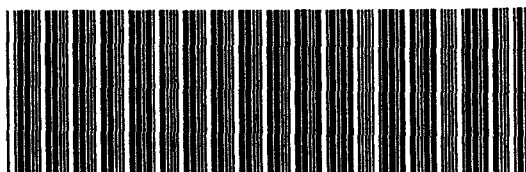
Thank You for Parking @
Airport Fast Park

Expense Report

00816675

Page 1 of 2

Napolitano, Nancy J



00005000009376376

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	76	Date	25 Apr 2006	Gross Claim	216.11
Status	Approved			Personal	0.00
Period	24 Apr 2006 to 24 Apr 2006			Net Claim	216.11
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	0.00
Purpose	TCC/TNC Rate Case - Travel to Corpus Christi			CA Deduction	0.00
				Reimbursement	216.11
				Total Recovery	0.00
Reference					

Expense Report

Page 2 of 2

Report Items

Number	1	Category	Personal Auto Mileage 2006	Amount	213.16
Date	24 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		Guideline	213.155	Recovery on #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description	Travel from Austin to Corpus Christi and back				
Taxes	TAX 174	0.00		0.00 VAT	0.00
Num of Units	479	Miles		Guideline per Unit	0.445

Number	2	Category	Meal - Self (travel req'd)	Amount	2.95
Date	24 Apr 2006	Meth.Pmt.	Out of Pocket	Pers.Amount	0.00
GL Code	520	Location	United States	Comp. Paid 1	0.00
Exp.Type	Expense	Client		Comp. Paid 2	0.00
Provider		Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description	Snack at Houston airport 4/13/06				
Taxes	TAX 174	0.00		0.00 VAT	0.00

00824599
Page 1 of 1

Expense Report

Napolitano, Nancy J



0000500009376377

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	77	Date	16 May 2006	Gross Claim	251.41
Status	Submitted			Personal	0.00
Period	03 May 2006 to 11 May 2006			Net Claim	251.41
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	251.41
Purpose	TCC/TNC Rate Case - Review of first draft testimony (Hooper-Gordon)			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

<http://ohaephqas231/ReportServlet?rNum=-478427150013506524111147804668684&rType=2>

5/16/2006

4337 S PADRE ISLAND DRIVE
CORPUS CHRISTI, TX 78411
361-853-7899
FAX: 361-851-1310



EMBASSY SUITES
HOTEL

Name & Address

NAPOLITANO, NANCY J
UNKNOWN
COLUMBUS, OH 99999
US

Room 205/KNGN
Arrival Date 05/03/06 4:05PM
Departure Date 05/05/06
Adult/Child 1/0
Room Rate \$95.00

RATE PLAN L-AEP
HH# 921005371 SILVER
AL-
BONUS AL- CAR:

The Hilton Family

Confirmation: 82754062

05/05/06 PAGE 1

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. "I have requested weekday delivery of USA TODAY. If refused, a credit of \$.75 will be applied to my account." In the event of an emergency, I, or someone in my party, require special evacuation assistance due to a physical disability. Please indicate yes by checking here. ☐

THANK YOU

DATE	REFERENCE	DESCRIPTION	AMOUNT
05/03/06	1178780	GUEST ROOM	\$95.00
05/03/06	1178780	STATE	\$5.70
05/03/06	1178780	CITY	\$8.55
05/04/06	1179263	GUEST ROOM	\$95.00
05/04/06	1179263	STATE	\$5.70
05/04/06	1179263	CITY	\$8.55
WILL BE SETTLED TO MC #7481 EFFECTIVE BALANCE OF			\$218.50 \$0.00
<p>Hilton HHonors (R) stays post to your account within 72 hours of checkout. To check your earnings for this stay or any other stay at more than 2,700 hotels worldwide visit www.hiltonhhonors.com</p> <p>Thank you for staying with us. Be sure to visit embassysuites.com for information on your next business or leisure stay, reservations or subscribe to E-announcements e-newsletter with news and offers.</p>			

ACCOUNT NO.	DATE OF CHARGE	FOLIO NO./CHECK NO.
CARD MEMBER NAME	AUTHORIZATION	212612 A
ESTABLISHMENT NO. & LOCATION	INITIAL	
ESTABLISHMENT AGREES TO TRANSFER TO CARD HOLDER FOR PAYMENT	PURCHASES & SERVICES	
CARD MEMBER'S SIGNATURE	TAXES	
X	TIPS & MISC.	
	TOTAL AMOUNT	0.00

*Revised 1st Draft for
EPCO group
TCC/TNC Rate Card*

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE REFUND OR RETURNED FOR A CASH REFUND.

PAYMENT DUE UPON RECEIPT - 1% PER MONTH INTEREST CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES.

TCC/THC Late Case
Quinn

THANK YOU
FOR CHOOSING
WENDY'S!

PLEASE COME AGAIN!

REG 1 ORDER STORE SW33
158
DATE: 5/03/06 TIME: 4:44PM

Cashier 1 Prism
CREDIT SALE

CREDIT
1 JR CHEZ .99
2 SM-FRSTY 1.98
1 CLASSIC
SINGLE 2.29

SUBTOTAL 5.26
TAX .43
Eat-in Total 5.69

CASH TEND 5.69
Change .00

SODEXHO
P S O
TULSA CAFE

001-0050-0059-4-S

Seq: 4
App: 020752
Ref: 61291375656021.54

05/09/2006 08:17
Lorraine

SALE

XXXXXXXXXXXX7481
EXP DATE : 11/06

AMOUNT 2.37

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU
WE APPRECIATE YOUR
PATRONAGE

SODEXHO
P S O
TULSA CAFE

001-0021-0145-21-S

Seq: 21
App: 054776
Ref: 613016523492106.54

05/10/2006 11:38
MARIE

SALE

XXXXXXXXXXXX7481
EXP DATE : 11/06

AMOUNT 8.21

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU
WE APPRECIATE YOUR
PATRONAGE

SODEXHO
P S O
TULSA CAFE

002-0016-0053-21-S

Seq: 21
App: 003971
Ref: 612916277223120.33

05/09/2006 11:53
Karen

SALE

XXXXXXXXXXXX7481
EXP DATE : 11/06

AMOUNT 7.35

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU
WE APPRECIATE YOUR
PATRONAGE

SODEXHO
P S O
TULSA CAFE

002-0050-0035-19-S

Seq: 19
App: 084939
Ref: 61311627944896.45

05/11/2006 11:59
Lorraine

SALE

xxxxxxxxxxxx7481
EXP DATE : 11/06

AMOUNT 9.29

KEEP THIS COPY FOR YOUR RECORDS

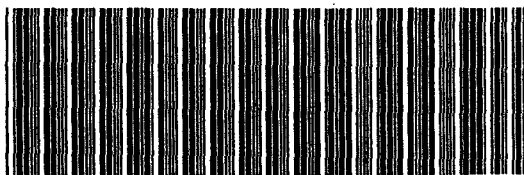
THANK YOU
WE APPRECIATE YOUR
PATRONAGE

Expense Report

00824600

Page 1 of 2

Napolitano, Nancy J



00005000009376378

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**

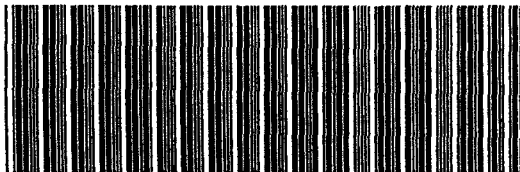
Expense Report					
Number	78	Date	17 May 2006	Gross Claim	223.84
Status	Approved			Personal	0.00
Period	16 May 2006 to 16 May 2006			Net Claim	223.84
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	0.00
Purpose	TCC/TNC Rate Case - Travel to Corpus Christi for 1st draft testimony review			CA Deduction	0.00
				Reimbursement	223.84
				Total Recovery	0.00
Reference					

Expense Report

Report Items					
Number	1	Category	Personal Auto Mileage 2006	Amount	223.84
Date	16 May 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		223.835	Recovery on #1 0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00
Num of Units	503	Miles		Guideline per Unit	0.445

00825206

Napolitano, Nancy J



00005000009376379

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	18 May 2006	Gross Claim	475.20
Status	Approved			Personal	0.00
Period	05 May 2006 to 11 May 2006			Net Claim	475.20
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	0.00
Purpose	TCC/TNC Rate Case - Travel to Tulsa for Tulsa meeting			CA Deduction	0.00
				Reimbursement	475.20
				Total Recovery	0.00
Reference					

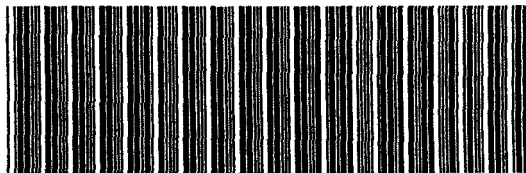
Expense Report

Report Items

Number	1	Category	Personal Auto Mileage 2006	Amount	471.70
Date	05 May 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	471.700	Recovery on #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00
Num of Units	1060	Miles		Guideline per Unit	0.445

Number	2	Category	Toll	Amount	3.50
Date	05 May 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 #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Napolitano, Nancy J



0000500009376380

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	80	Date	19 Jun 2006	Gross Claim	263.41
Status	Approved			Personal	0.00
Period	05 Jun 2006 to 14 Jun 2006			Net Claim	263.41
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	0.00
Purpose	Meetings in Columbus for testimony review and in Corpus Christi on discretionary service and research and query with OPCO support in TCC/TNC Rate Case			CA Deduction	0.00
				Reimbursement	263.41
				Total Recovery	0.00
Reference					

Expense Report

Report Items						
Number	1	Category	Taxi/Limo Fare		Amount	22.42
Date	05 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 #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00

Number	2	Category	Tip		Amount	1.58
Date	05 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 #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00

Number	3	Category	Personal Auto Mileage 2006		Amount	239.41
Date	14 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		239.410	Recovery on #3	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Taxes	TAX 174	0.00		0.00	VAT	0.00
Num of Units	538	Miles			Guideline per Unit	0.445

CERTIFIED NETWORK TAXI SERVICE

FOR TRIP *** PLEASE CALL

(614) 323-6706

447-8366 Radio



THANKS FOR YOUR
PATRONAGE

Receipt

Date

6/5/06

Amount \$

22⁴²

Driver

(1.58 tip)

Cab #

24⁰⁰ pd
Cash



EMBASSY SUITES
HOTELS®

6/12 - 6/14
Mileage - 29680 Start
odometer → 30218 Stop
538 miles

239⁴¹

The Hilton Family

Reservations: www.embassysuites.com or 1-800-EMBASSY



Official Sponsor of the U.S. Olympic Team



00835753

Page 1 of 2

Expense Report

Napolitano, Nancy J



0000500009376381

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	81	Date	19 Jun 2006	Gross Claim	1869.95
Status	Unsubmitted			Personal	0.00
Period	11 May 2006 to 14 Jun 2006			Net Claim	1869.95
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	1869.95
Purpose	Kick-off meeting in Tulsa, testimony review in Columbus and meeting on discretionary services and research/query with OPCO support staff in TCC/TNC Rate case. Parking for TSCPA Conference.			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00

<http://ohaephqas231/ReportServlet?rNum=415377258539946912311150739306119&rType=2>

6/19/2006

Expense Report

Reference

Report Items

Number	1	Category	Hotel	Amount	313.32	✓
Date	11 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	313.32	
Provider	EMBASSY SUITES TULSTIP	Guideline	Unlimited	Recovery on #1	0.00	
Fin. Code	See folio					
Description	See Folio			Receipt Required	<input type="checkbox"/>	
Taxes		0.00		0.00 VAT	0.00	
Num of Units	3	Nights		Guideline per Unit	Unlimited	
Folio item						
Number	1	Category	Room Rate	Amount	313.32	
Date	11 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00	
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						

Number	2	Category	Airfare	Amount	676.38	✓
Date	22 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	676.38	
Provider	AMERICAN 00113809635811	Guideline	Unlimited	Recovery on #2	0.00	
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510					
Description						
Taxes	TAX 174	0.00		0.00 VAT	0.00	

Number	3	Category	Hotel	Amount	9.00	✓
Date	22 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	9.0	
Provider	HYATT HOTELS AUSTIN	Guideline	Unlimited	Recovery on #3	0.00	
Fin. Code	See folio					
Description	See Folio			Receipt Required	<input type="checkbox"/>	
Taxes		0.00		0.00 VAT	0.00	
Num of Units	1	Nights		Guideline per Unit	Unlimited	
Folio item						
Number	1	Category	Parking	Amount	9.00	
Date	22 May 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0	
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00	
Fin. Code	103.12313.LEGAL.LGNANDA.G0001465.9210001.317...510					
Description	Parking for TSCPA Conference					

Number	4	Category	Meal - Self (travel req'd)	Amount	7.16	
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Expense Report

Date	04 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	7.16
Provider	PIZZA HUT C19	Guideline	Unlimited	Recovery on #4	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	5	Category	Meal - Self (travel req'd)	Amount	7.92
Date	04 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	7.92
Provider	AUSTIN-BERGSTROM INTL	Guideline	Unlimited	Recovery on #5	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	6	Category	Meal - Self (travel req'd)	Amount	4.02
Date	05 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	4.02
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #6	0.00
Fin. Code	103.11524.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	4.66
Date	06 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	4.66
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #7	0.00
Fin. Code	103.11524.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	6.70
Date	06 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	6.7
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #8	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	9	Category	Meal - Self (travel req'd)	Amount	4.71
Date	07 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	4.71
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #9	0.00

Expense Report

Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	10	Category	Meal on site for training	Amount	39.31
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	39.31
Provider	TED'S MONTANA GRILL	Guideline	Unlimited	Recovery on #10	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00
Num of Units	3	People		Guideline per Unit	Unlimited
Attendees					
Name	Napolitano, Nancy J	Title	employee		
Name	Phil Richetts	Title	Lawyer		
Name	John Williams	Title	Lawyer		

Number	11	Category	Meal - Self (travel req'd)	Amount	4.62
Date	08 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	4.62
Provider	AEP - CAFE 30011Q20	Guideline	Unlimited	Recovery on #11	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	12	Category	Meal - Self (travel req'd)	Amount	1.79
Date	08 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	1.79
Provider	WENDY'S #5587 Q25	Guideline	Unlimited	Recovery on #12	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	13	Category	Parking	Amount	28.00
Date	09 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	28.0
Provider	PARKING CO OF AMER Q01	Guideline	Unlimited	Recovery on #13	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	14	Category	Hotel	Amount	517.15
Date	10 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0.0
GL Code	510	Location	United States	Comp. Paid 1	0.0

Expense Report

Exp.Type	Expense	Client		Comp. Paid 2	517.15
Provider	DOUBLETREE GUEST SUTIP	Guideline	Unlimited	Recovery on #14	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	<input type="checkbox"/>
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	485.68
Date	10 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Folio item					
Number	2	Category	Meal - Business Entertainment	Amount	31.47
Date	10 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	520	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Attendees					
Name	Napolitano, Nancy J	Title	employee		
Name	Terri Gallup	Title	Case Manager		

Number	15	Category	Meal - Self (travel req'd)	Amount	9.05
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	9.05
Provider	WHATABURGER 787 Q26	Guideline	Unlimited	Recovery on #15	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00 VAT	0.00

Number	16	Category	Hotel	Amount	231.20
Date	14 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	231.2
Provider	EMBASSY SUITES 9TIP	Guideline	Unlimited	Recovery on #16	0.00
Fin. Code	See folio				
Description	See Folio			Receipt Required	<input type="checkbox"/>
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	218.50
Date	14 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	510	Guideline	Unlimited	Recovery on #1	0.00

Expense Report

Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Folio item					
Number	2	Category	Meal - Self (dinner)	Amount	12.70
Date	14 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amount	0
GL Code	520	Guideline		Unlimited	Recovery on #2 0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					

Number	17	Category	Meal - Self (travel req'd)	Amount	4.96
Date	14 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	4.96
Provider	WHATABURGER 313 Q26	Guideline	Unlimited	Recovery on #17	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

3332 S. 79TH E. AVE
TULSA, OK 74145
TELEPHONE 918-622-4000 FAX 918-665-2347



EMBASSY SUITES
HOTEL N

Name & Address

NAPOLITANO, NANCY
400 W 15TH ST STE 650
AUSTIN, TX 78701
US

Room: 812/TDBN
Arrival Date: 05/08/06 1:33PM
Departure Date: 05/11/06
Adult / Child: 1/0
Room Rate: \$92.00

Rate quoted based on arrival date and length of stay. Subject to change. INHT
BONUS AL: WY #00000052328846
CAR: L-AEP
AL: 92100837 SILVER



Confirmation: 81036299

05/11/06 PAGE 1

IF THE DEBIT/CREDIT CARD YOU ARE USING FOR CHECK-IN IS ATTACHED TO A BANK OR CHECKING ACCOUNT, A HOLD WILL BE PLACED ON THE ACCOUNT FOR THE FULL ANTICIPATED DOLLAR AMOUNT TO BE DEDUCTED IN THE HOTEL, INCLUDING ESTIMATED INCIDENTALS, THROUGH YOUR DATE OF CHECK-OUT AND SUCH FUNDS WILL NOT BE RELEASED FOR 72 BUSINESS HOURS FROM THE DATE OF CHECK-OUT OR LONGER AT THE DISCRETION OF YOUR FINANCIAL INSTITUTION. RATES SUBJECT TO APPLICABLE SALES, OCCUPANCY, OR OTHER TAXES. PLEASE DO NOT LEAVE ANY MONEY OR ITEMS OF VALUE UNATTENDED IN YOUR ROOM. A SAFE DEPOSIT BOX IS AVAILABLE FOR YOU IN THE LOBBY. I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND AGREE TO BE HELD PERSONALLY LIABLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OF THE FULL AMOUNT OF THESE CHARGES. I HAVE REQUESTED WEEKDAY DELIVERY OF USA TODAY. IF REFUSED, A CREDIT OF \$0.75 WILL BE APPLIED TO MY ACCOUNT. IN THE EVENT OF AN EMERGENCY, I OR SOMEONE IN MY PARTY, WILL BE SPECIAL EVALUATION ASSISTANCE DUE TO A PHYSICAL DISABILITY PLEASE INDICATE YES BY CHECKING HERE ☐

GUEST SIGNATURE
X

A SAFE DEPOSIT BOX IS PROVIDED FOR THE DEPOSIT OF VALUABLES. THE HOTEL CANNOT BE RESPONSIBLE FOR VALUABLES NOT LEFT IN THE SAFE DEPOSIT BOX.

DATE	REFERENCE	DESCRIPTION	AMOUNT
05/08/06	1864389	GUEST ROOM	\$92.00
05/08/06	1864389	STATE TAX	\$7.84
05/08/06	1864389	CITY TAX	\$4.60
05/09/06	1864895	GUEST ROOM	\$92.00
05/09/06	1864895	STATE TAX	\$7.84
05/09/06	1864895	CITY TAX	\$4.60
05/10/06	1865458	GUEST ROOM	\$92.00
05/10/06	1865458	STATE TAX	\$7.84
05/10/06	1865458	CITY TAX	\$4.60

WILL BE SETTLED TO MC *7481 \$313.32 ✓
EFFECTIVE BALANCE OF \$0.00



Hilton HHonors (R) stays post to your account within 72 hours of checkout. To check your earnings for this stay or any other stay at more than 2,700 hotels worldwide visit www.hiltonhhonors.com

Thank you for staying with us. Be sure to visit embassysuites.com for information on your next business or leisure stay, reservations or subscribe to E-announcements e-newsletter with news and offers.



Official Sponsor

0.00

Reservations: www.embassysuites.com or 1-800-EMBASSY

Tulsa Kick-off
TCC/TMC Rate Case

310330 A



50 South Front Street • Columbus, OH 43215
Phone (614) 228-4600 • Fax (614) 228-0297
Reservations
www.doubletree.com

Name & Address

NAPOLITANO, NANCY J
400 W 15TH ST
AUSTIN, TX 78701
US

Room 814/NK1S
Arrival Date 06/04/06 5 01PM
Departure Date 06/08/06

Adult/Child 1/0
Room Rate \$104.00

RATE PLAN L-AEP
HH# 921005371 SILVER
AL:
BONUS AL: CAR:

Confirmation: 81492781

06/08/06 PAGE 1

DATE	REFERENCE	DESCRIPTION	AMOUNT
06/04/06	2412283	GUEST ROOM	\$104.00
06/04/06	2412283	STATE TAX	\$7.02
06/04/06	2412283	CITY TAX	\$10.40
06/05/06	2412591	*RESTAURANT- CAUCUS ROOM	\$30.47
06/05/06	2412997	GUEST ROOM	\$104.00
06/05/06	2412997	STATE TAX	\$7.02
06/05/06	2412997	CITY TAX	\$10.40
06/06/06	2413258	COOKIES	\$1.00
06/06/06	2413648	GUEST ROOM	\$104.00
06/06/06	2413648	STATE TAX	\$7.02
06/06/06	2413648	CITY TAX	\$10.40
06/07/06	2414422	GUEST ROOM	\$104.00
06/07/06	2414422	STATE TAX	\$7.02
06/07/06	2414422	CITY TAX	\$10.40
WILL BE SETTLED TO MC #7481			\$517.15
EFFECTIVE BALANCE OF			\$0.00
<p>Hilton HHonors (R) stays post to your account within 72 hours of checkout. To check your earnings for this stay or any other stay at more than 2,700 hotels worldwide visit www.hiltonhhonors.com</p> <p>You may be leaving, but you don't have to say goodbye. For information, reservations, or a subscription to our monthly Doubletree (R) Items e-newsletter with news and offers, just visit doubletree.com</p>			

T
H
A
N
K
Y
O
U

Tina Gallup
Nancy J. Napolitano
31.47 Food
**485-68*

EXPRESS CHECK-OUT

Good Morning! We hope you enjoyed your stay. With Express Check-Out there is no need to stop at the Front Desk to check out.

- Please review this statement. It is a record of your charges as of late last evening.
- For any charges after your account was prepared, you may:
 - pay at the time of purchase.
 - charge purchases to your account, then stop by the Front Desk for an updated statement.
 - or request an updated statement be mailed to you within two business days.

Simply call the Front Desk from your room and tell us when you are ready to depart. Your account will be automatically checked out and you may use this statement as your receipt. Feel free to leave your key(s) in the room.

Please call the Front Desk if you wish to extend your stay or if you have any questions about your account.

DATE OF CHARGE	FOLIO NO / CHECK NO.
AUTHORIZATION	283447 INITIAL
PURCHASES & SERVICES	
TAXES	
TIPS & MISC	
TOTAL AMOUNT	0.00

PAYMENT DUE UPON RECEIPT - 1.5% PER MONTH INTEREST CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES.

4337 S PADRE ISLAND DRIVE
CORPUS CHRISTI, TX 78411
361-853-7899
FAX: 361-851-1310



EMBASSY SUITES
HOTEL

Name & Address

NAPOLITANO, NANCY J
UNKNOWN

COLUMBUS, OH 99999
US

Room 307/KNGN
Arrival Date 06/12/06 9:54AM
Departure Date 06/14/06

Adult/Child 1/0
Room Rate 95.00 L-AEP

RATE PLAN
HH# 921005371 SILVER
AL:
CAR:

The Hilton Family

CONFIRMATION NUMBER : 87870816

06/14/06 PAGE 1

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. "I have requested weekday delivery of USA TODAY. If refused, a credit of \$.75 will be applied to my account." In the event of an emergency, I, or someone in my party, require special evacuation assistance due to a physical disability. Please indicate yes by checking here ☐
Signature

THANK YOU

DATE	REFERENCE	DESCRIPTION	AMOUNT
06/12/06	1196496	RESTAURANT FOOD SALES	\$10.20
06/12/06	1196497	SALES TAX RESTAURANT	\$0.84
06/12/06	1196498	RESTAURANT & BAR TIPS	\$1.66
06/12/06	1196635	GUEST ROOM	\$95.00
06/12/06	1196635	STATE	\$5.70
06/12/06	1196635	CITY	\$8.55
06/13/06	1197074	GUEST ROOM	\$95.00
06/13/06	1197074	STATE	\$5.70
06/13/06	1197074	CITY	\$8.55
** BALANCE **			\$231.20
<p>You have earned approximately 2331 HHonors points and approximately 0.5 miles with SOUTHWEST AIRLINES for this stay. For reservations and to check your point balance, visit hiltonfamily.com.</p> <p>Thank you for staying with us. Be sure to visit embassysuites.com for information on your next business or leisure stay, reservations or subscribe to E-announcements e-newsletter with news and offers.</p> <p>Tec/TJC Rick Case Mtg with Wilson Support Staff</p>			
ACCOUNT NO.		DATE OF CHARGE	FOLIO NO./CHECK NO. 215484 A
CARD MEMBER NAME		AUTHORIZATION	INITIAL
ESTABLISHMENT NO. & LOCATION		PURCHASES & SERVICES	
		TAXES	
		TIPS & MISC	
CARD MEMBER'S SIGNATURE X		TOTAL AMOUNT	

MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE REFUND OR RETURNED FOR A CASH REFUND

PAYMENT DUE UPON RECEIPT - 1% PER MONTH INTEREST CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES.

Virtually There - Itinerary - Printable By Category



AEP TRAVEL SERVICES
PHONE: 888-237-7008
E-MAIL [AEP TRAVEL SERVICES](mailto:AEP@AEPTRAVELSERVICES.COM)

Itinerary - Printable By Category

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

Itinerary

NANCY J NAPOLITANO
Reservation code: **HWNGAU**

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 - NANCY NAPOLITANO
THE AMERICAN TICKET NUMBER 1 IS - 1380963581
THIS TICKET WAS ISSUED - 22MAY
THE INVOICE NUMBER IS - 0170639
THE TOTAL AIRFARE IS - 676.38 USD
THANK YOU FOR USING WWW.VIRTUALLYTHERE.COM

FLIGHTS

Sun, Jun 4: AMERICAN AIRLINES, AA 2024

From: AUSTIN, TX (AUS)
To: DALLAS FT WORTH, TX (DFW)

Class: Economy

Status: Confirmed

Meal:

Aircraft: MCDONNELL DOUGLAS MD-80 JET

Flight Time: 1 hour(s) and 1 minutes

Frequent Flyer: AMERICAN AIRLINES 048XY84

Notes: SEAT ASSIGNMENTS RESTRICTED TO AIRPORT CHECK IN ONLY

Verify flight times prior to departure

Disclaimer

Mileage shown is air miles between airports and is not necessarily the mileage (or fare) used for calculation of frequent flyer mileage credits or awards. For frequent flier mileage information, please contact the airline.

Departs: 11:15am

Arrives: 12:16pm

Seat: Check-In Required

Confirmation: HWNGAU

Smoking: No

Mileage: 183

Sun, Jun 4: AMERICAN AIRLINES, AA 0458

From: DALLAS FT WORTH, TX (DFW)
To: COLUMBUS OH, OH (CMH)

Class: Economy

Status: Confirmed

Meal:

Aircraft: MCDONNELL DOUGLAS MD-80 JET

Flight Time: 2 hour(s) and 21 minutes

Frequent Flyer: AMERICAN AIRLINES 048XY84

Verify flight times prior to departure

Disclaimer

Mileage shown is air miles between airports and is not necessarily the mileage (or fare) used for calculation of frequent flyer

Departs: 1:20pm

Arrives: 4:41pm

Seat: 21F

Confirmation: HWNGAU

Smoking: No

Mileage: 922

<https://www.virtuallythere.com/new/prINTERfriendly.html?pnR=HWNGAU&name=NAPOLITANO&...> 5/22/2006

Virtually There - Itinerary - Printable By Category

mileage credits or awards. For frequent flier mileage information, please contact the airline.

Thu, Jun 8: AMERICAN AIRLINES, AA 1119

From: COLUMBUS OH, OH (CMH)	Departs: 1:13pm
To: DALLAS FT WORTH, TX (DFW)	Arrives: 2:50pm
Class: Economy	Seat: 20A
Status: Confirmed	Confirmation: HWNGAU
Meal:	Smoking: No
Aircraft: MCDONNELL DOUGLAS MD-80 JET	Mileage: 922
Flight Time: 2 hour(s) and 37 minutes	
Frequent Flyer: AMERICAN AIRLINES 048XY84	

Verify flight times prior to departure

Disclaimer

Mileage shown is air miles between airports and is not necessarily the mileage (or fare) used for calculation of frequent flyer mileage credits or awards. For frequent flier mileage information, please contact the airline.

Thu, Jun 8: AMERICAN AIRLINES, AA 2021

From: DALLAS FT WORTH, TX (DFW)	Departs: 4:37pm
To: AUSTIN, TX (AUS)	Arrives: 5:30pm
Class: Economy	Seat: 19F
Status: Confirmed	Confirmation: HWNGAU
Meal:	Smoking: No
Aircraft: MCDONNELL DOUGLAS MD-80 JET	Mileage: 183
Flight Time: 53 minutes	
Frequent Flyer: AMERICAN AIRLINES 048XY84	

Verify flight times prior to departure

Disclaimer

Mileage shown is air miles between airports and is not necessarily the mileage (or fare) used for calculation of frequent flyer mileage credits or awards. For frequent flier mileage information, please contact the airline.

HOTEL & LODGING

Sun, Jun 4-Thu, Jun 8: DOUBLETREE HOTELS DOUBLETREE SUITES COLUMBUS

Address: 50 S FRONT ST	Check In: Jun 4
COLUMBUS OH 43215	Check Out: Jun 8
Phone: 614 228-4600	FAX: 614 538-8228
Room Type: AEP-AMERICAN ELECTRIC POWER	Room(s): 1
Status: Confirmed	Rate: 104.00 USD / night
Client ID #:	Corp Discount #: 0550000044
Confirmation: 81492781	
Guarantee: Room is guaranteed for late arrival	
Cancellation: Cancel 24 hours prior to arrival to avoid a penalty.	
Special Request: ZD269501443 NONSMOKING	

OTHER

Tue, Dec 5:

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

PIZZA HUT

TERMINAL C GATE 19
DFW AIRPORT, TEXAS

CHECK: 1343
SERVER: 15079 LISA
DATE: JUN04'06 1:00PM
CARD TYPE: MASTERCARD
ACCT #: XXXXXXXXXXXXX7481
EXP DATE: XX/XX
AUTH CODE: 062359
RESEARCH: 615517006503
NANCY J NAPOLITANO

6/4/2006 9:46:04 AM



Delaware North Companies
Austin Bergstrom Airport

Bookpeople
Austin, TX 78719

6/4/2006 Receipt #: 43164
Assoc: chrystal Store: 005A
Cashier: chrystal

SUBTOTAL: 7.16

TOTAL -----

PRINT NAME -----

SIGNATURE -----

ITEM#	DCS	QTY	PRICE	EXT PRICE
4331	400501	1	1.99	1.99
BOTTLE WATER LG : LG 24Oz				
7449	400107	1	3.99	3.99
TROPICAL MIX				
7779	400101	1	1.49	1.49
ORBIT SUGRLSS GUI				
3 Unit(s) Subtotal:				7.47
8.250 % Tax:				0.45
RECEIPT TOTAL:				7.92

Tend: 7.92
CrCard: 7.92 MC Auth: 067404
Acct: XXXXXXXXXXXX 7481

We appreciate your business!
All Returns and Exchanges require an original receipt.



43164

AEP CAFE-REG 14
AEP Cafe-Reg. 14
COLUMBUS OH 43215
614-716-2520
REG-14

Term ID:0001
Ref #: 0003
Clerk: 1

Sale

XXXXXXXXXX7481
Entry Method: Swiped
Batch #: 574
MASTERCARD
06/05/06 07:20:22
Inv#: 000003
Appr Code: 007073
Total: \$ 4.02

Customer Copy
THANK YOU!

AEP CAFE-REG 14
AEP Cafe-Reg. 14
COLUMBUS OH 43215
614-716-2520
REG-14

Term ID:0001
Ref #: 0001
Clerk: 1

Sale

XXXXXXXXXX7481
Entry Method: Swiped
Batch #: 575
MASTERCARD
06/06/06 07:04:08
Inv#: 000004
Appr Code: 022577
Total: \$ 4.66

Customer Copy
THANK YOU!

AEP CAFE-REG 14
AEP Cafe-Reg. 14
COLUMBUS OH 43215
614-716-2520
REG-14

Term ID:0001
Ref #: 0039
Clerk: 1

Sale

XXXXXXXXXX7481
Entry Method: Swiped
Batch #: 575
MASTERCARD
06/06/06 07:06:28
Inv#: 000039
Appr Code: 008637
Total: \$ 6.70

Customer Copy
THANK YOU!

AEP CAFE-REG 14
AEP Cafe-Reg. 14
COLUMBUS OH 43215
614-716-2520
REG-14

Term ID:0001
Ref #: 0003
Clerk: 1

Sale

XXXXXXXXXX7481
Entry Method: Swiped
Batch #: 576
MASTERCARD
06/07/06 07:02:52
Inv#: 000003
Appr Code: 075907
Total: \$ 4.71

Austin Fast Park
2303 Highway 71 East
78617 Del Valle

Fee 06/08/06 17:52
Cashier 9
Receipt 064796

Short-term parking tkt
No. 063079
Austin Fast Park
06/04/06 09:19 -
06/08/06 17:52
Period 4d08h33'
(TAX) \$28.00

Gross Total \$28.00

Payment
VALDN 0007
VALDN 0014 -6.18
MC \$28.00
XXXXXXXXXXXX7481 11/06

TAX
Net Total \$24.72
TAX (8.25%) 2.04
ABI TX (5%) 1.24

All amounts in USD.
Deliv. Date=Receipt Date

Thank You for Parking @
Airport Fast Park

Ted's Montana Grill
191 W. Nationwide Blvd
Columbus, OH
614-227-0013

Server: Scott 06/07/2006
Table 17/1 12:22 PM
Guests: 3 50005
Reprint #: 1

Fountain Diet	1.99
Bison Spikebox Burger	9.49
UnSweet Tea	1.99
Chicken Skinny Dip Sand	7.39
Fresh Squeezed Lemonade	1.99
Bison Cordon Bleu Burger	9.29

Sub Total	32.14
Tax	2.17

Total	34.31
-------	-------

Mastercard #XXXXXXXXXXXX7481	34.31
Auth:071831 Exp 1106	

+ Gratuity:

= Total:

Phil Rickards
x *John William*
Nancy Napolitano
Balance Due 0.00

Nobody but the cattle know

WENDY'S #5587
TERMINAL C 0615 14
DALLAS, TX 75261

TERMINAL I.D.: 13400002
MERCHANT #: 00004015
MC: 901 14

*****7481
SALE
BATCH: 006323
DATE: JUN 08, 06
KRN: 000044788797

INVOICE: 006124
TIME: 14:38
AUTH NO: 005774

TOTAL \$1.79

CUSTOMER COPY

AEP CAFE-REG 14
AEP Cafe-Reg. 14
COLUMBUS OH 43215
614-716-2520
REG-14

Term ID: 0001
Ref #: 0006
Clerk: 1

Sale

*****7481
Entry Method: Swiped
Batch #: 577
MASTERCARD
06/08/06

07:24:34

Inv#: 000000
Appr Code: 030283

Total: \$ 4.62

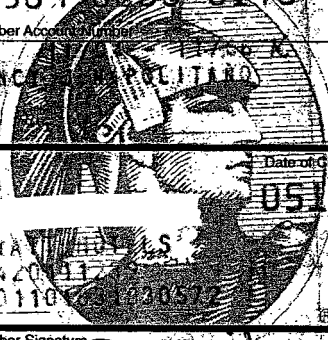
Customer Copy
THANK YOU!

208 Barton Springs
Austin TX 78704

*TECPA
Copy: Napolitano*

See Computer Number: 1
Cashier: Anthony ID #405
Transaction Number: 115
Entered: 05/19/2006 07:07
Exited: 05/19/2006 16:39
Rate: Area 1
Total Fee: \$8.00
Cash: \$9.00

Thank you for choosing
HYATT REGENCY ON TOWN LAKE
Have a nice day

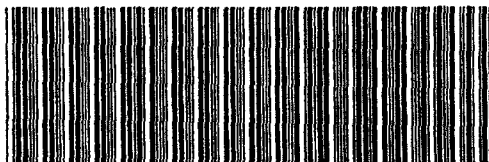
5567 0000 0140 7481																																					
Cardmember Account Number																																					
																																					
Cardmember	051906																																				
Service Establishment	HYATT REGENCY ON TOWN LAKE																																				
Cardmember Signature	<i>[Signature]</i>																																				
<small>Merchandise and/or service purchased on this card shall not be resold or returned for cash refund. Establishment agrees to transmit to American Express Travel Related Services Co., Inc. or authorized representative for payment.</small>																																					
AMERICAN EXPRESS	591068																																				
Cards	Invoice Number																																				
<table border="1"> <tr> <td colspan="2">EXPIRATION DATE</td> <td colspan="2">APPROVAL CODE</td> </tr> <tr> <td colspan="2">CHECKED</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">DESCRIPTION</td> </tr> <tr> <td colspan="4">PARKING</td> </tr> <tr> <td colspan="4">MERCHANDISE/SERVICES</td> </tr> <tr> <td colspan="4">TAXES</td> </tr> <tr> <td colspan="4">TIPS/MISC.</td> </tr> <tr> <td colspan="4">TOTAL</td> </tr> <tr> <td colspan="2">Dollars</td> <td colspan="2">Cents</td> </tr> </table>		EXPIRATION DATE		APPROVAL CODE		CHECKED				DESCRIPTION				PARKING				MERCHANDISE/SERVICES				TAXES				TIPS/MISC.				TOTAL				Dollars		Cents	
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Cardmember Copy																																					

00848175

Page 1 of 2

Expense Report

Napolitano, Nancy J



00005000009376382

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	82	Date	28 Jul 2006	Gross Claim	405.70
Status	Unsubmitted			Personal	0.00
Period	27 Jun 2006 to 19 Jul 2006			Net Claim	405.70
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	405.70
Purpose	AICPA Membership dues for 2006-2007 and Testimony review in Tulsa for TCC/TNC rate case			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

<http://ohaephqas231/ReportServlet?rNum=-417636596245681862011154118289491&rType=2>

7/28/2006

Expense Report

Docket No. 33309
 Employee Expenses
 Napolitano
 Page 2 of 2
 Page 53 of 83

Report Items

Number	1	Category	Membership dues/fees	Amount	185.00
Date	27 Jun 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	185.0
Provider	ALCPA *DUES LB	Guideline	Unlimited	Recovery on #1	0.00
Fin. Code	103.12313.LEGAL.LGNANDA.G0001465.9210001.290.....954				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

Number	2	Category	Airfare	Amount	220.70
Date	19 Jul 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	220.7
Provider	SOUTHWES 5262734316868	Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00



2006-2007 DUES NOTICE

AICPA MEMBERSHIP YEAR
AUGUST 1, 2006-JULY 31, 2007

BILLING DATE:	June 15, 2006
PAYMENT DUE DATE:	Aug 1, 2006
MEMBER NUMBER:	01582906

METHODS OF PAYMENT

To ensure proper processing, all payments, regardless of method, must include the member's name and member number.

☒ EMPLOYER PAYING FOR MEMBER(S)

Send payment and member(s) information to the address identified below. NOTE: this address is different than the one identified elsewhere on the dues bill.

AICPA Dues Processing
Multiple Member Payment
PO Box 2219
Jersey City, New Jersey 07303-2219

☒ BY MAIL:

Send payment and member(s) information to:

AICPA
PO Box 10069
Newark, NJ 07101-3069

☒ ONLINE AT

www.aicpa.org/about/dues.htm

Register here or use your user name and password to log on. If you've forgotten either, please call our Web support team at 888-777-7077 option 3.

☒ ONLINE BANKING

When utilizing your bank for paying bills please remember to include the member name and member number in the memo/note section of your payment information to ensure proper and timely application of the payment. If your bank's online system does not provide you with this option, please select another payment method.

NEED HELP?

E-MAIL: service@aicpa.org

FAX: 1-800-362-5066

PHONE: 1-888-777-7077, option 2

Hours: Mon-Fri 9-6PM ET

IMPORTANT: MEMBER NUMBER AND AMOUNT ARE REQUIRED ON ALL PAYMENTS TO ENSURE PROMPT AND ACCURATE CREDITING OF DUES PAYMENTS

RETAIN FOR YOUR RECORDS

American Power Company Services Inc
Nancy Napolitano
400 W 15th St Ste 650
Austin, TX 78701-1662



CURRENT AICPA MEMBERSHIP RECORD	
DESCRIPTION	AMOUNT BILLED
AICPA Institute Membership	185.00
Voluntary Contributions:	
AICPA PAC Contribution	25.00
Benevolent Fund Contribution	10.00
AICPA Foundation/Minority	25.00
TOTAL	245.00

CONTRIBUTIONS: AICPA dues may be deducted as a business expense but not as a charitable contribution. 4% of dues are not deductible in accordance with IRC Sec. 6033. See aicpa.org for the information on restrictions that apply to contributions to a political action committee. Contributions to the AICPA Foundation and the Benevolent Fund are tax deductible as charitable contributions.

**AEP TRAVEL SERVICES**

PHONE: 888-237-7008

E-MAIL AEP TRAVEL SERVICES**Itinerary - Printable By Category** [Print this page](#) | [Close window](#) | [Help](#)**Itinerary****NANCY J NAPOLITANO**

Reservation code: CGAPVL

Travel Arranger Priority Comments:

WESTERN EUROPE PHONE 0800-032-6125

PACIFIC RIM PHONE 005-31-160412

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.

THE SOUTHWEST RECORD LOCATOR IS 5T2GXA

THE TOTAL AIRFARE IS 220.70

THIS TICKET IS NON-REFUNDABLE - PENALTIES APPLY.

ANY CHANGES/CANCELLATIONS TO NON-REFUNDABLE TICKETS

MUST BE MADE PRIOR TO FLIGHT DEPARTURE.

FLIGHTS**Tue, Aug 1: SOUTHWEST AIRLINES, WN 0222**

From: AUSTIN, TX (AUS)

To: DALLAS LOVE FLD, TX (DAL)

Class: Economy

Status: Confirmed

Meal:

Aircraft: BOEING 737-300 JET

Flight Time: 55 minute(s)

Departs: 7:50am

Arrives: 8:45am

Seat: Check-In Required

Smoking: No

Mileage: 183

Please verify flight times prior to departure

Tue, Aug 1: SOUTHWEST AIRLINES, WN 0010

From: DALLAS LOVE FLD, TX (DAL)

To: TULSA, OK (TUL)

Class: Economy

Status: Confirmed

Meal:

Aircraft: BOEING 737-300 JET

Flight Time: 55 minute(s)

Departs: 9:45am

Arrives: 10:40am

Seat: Check-In Required

Smoking: No

Mileage: 238

Please verify flight times prior to departure

Thu, Aug 3: SOUTHWEST AIRLINES, WN 1996

From: TULSA, OK (TUL)

To: DALLAS LOVE FLD, TX (DAL)

Class: Economy

Status: Confirmed

Meal:

Aircraft: BOEING 737-300 JET

Flight Time: 55 minute(s)

Departs: 2:15pm

Arrives: 3:10pm

Seat: Check-In Required

Smoking: No

Mileage: 238

Please verify flight times prior to departure

<https://www.virtuallythere.com/new/printerFriendly.html?pnr=CGAPVL&name=NAPOLITANO&la...> 7/19/2006

Thu, Aug 3: SOUTHWEST AIRLINES, WN 1608

From: DALLAS LOVE FLD, TX (DAL) Departs: 3:55pm
To: AUSTIN, TX (AUS) Arrives: 4:45pm
Class: Economy Seat: Check-In Required
Status: Confirmed
Meal:
Aircraft: BOEING 737-500 JET Smoking: No
Flight Time: 50 minute(s) Mileage: 183

Please verify flight times prior to departure

CAR

Tue, Aug 1-Thu, Aug 3: AVIS RENT A CAR

Pick Up: TULSA, OK (TUL) Pick Up Date/Time: Aug 1/1040A
Drop Off: TULSA, OK (TUL) Drop Off Date/Time: Aug 3/2:00pm
Car Type: Intermediate Car Automatic Air Car(s): 1
Status: Confirmed Confirmation: 15870105US6
Rate Info: Guaranteed Rate Code: UV
Client ID #: U4W60F Corp Discount #: B201300
Telephone: Fax:
Rate Plan: 3 Days, 0 Hours USD MI/KM Extra MI/KM
Daily 40.00 UNL 0.00
Extra Hour 13.35 UNL 0.00
Extra Day 40.00 UNL 0.00
Mandatory Charges 40.49 UNL 0.00
Approx Total Price 160.49 UNL 0.00

HOTEL & LODGING

Tue, Aug 1-Thu, Aug 3: EMBASSY SUITES EMBASSY STES TULSA I 44

Address: 3332 S 79TH E AVE Check In: Aug 1
TULSA OK 74145 Check Out: Aug 3
Phone: 918 622-4000 FAX: 918 665-2347
Room Type: AMERICAN ELECTRIC POWER Room(s): 1
Status: Confirmed Rate: 92.00 USD / night
Client ID #: Corp Discount #: 550000044
Confirmation: 84638267
Guarantee: Room is guaranteed for late arrival
Cancellation: Cancel by 6:00pm on day of arrival to avoid a penalty.
Special Request: ZD000011597

OTHER

Tue, Jan 30:

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

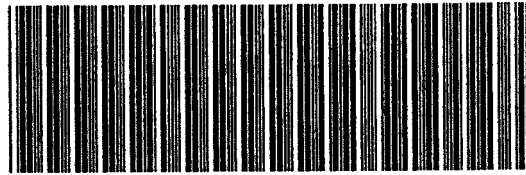
Copyright and Trademark Notices

Expense Report

00858013

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Napolitano, Nancy J



00005000009376383

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

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

Expense Report					
Number	83	Date	29 Aug 2006	Gross Claim	491.18
Status	Approved			Personal	0.00
Period	14 Aug 2006 to 18 Aug 2006			Net Claim	491.18
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	0.00
Purpose	TCC/TNC Rate Cases - Travel to Tulsa for meetings with Regulatory Accounting and Pricing&Costing			CA Deduction	0.00
				Reimbursement	491.18
				Total Recovery	0.00
Reference					

Expense Report

Report Items

Number	1	Category	Personal Auto Mileage 2006	Amount	481.94
Date	14 Aug 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	481.935	Recovery on #1	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00
Num of Units	1083	Miles		Guideline per Unit	0.445

Number	2	Category	Meal - Self (travel req'd)	Amount	9.24
Date	14 Aug 2006	Meth.Pmt.	Out of Pocket	Pers.Amount	0.00
GL Code	520	Location	United States	Comp. Paid 1	0.00
Exp.Type	Expense	Client		Comp. Paid 2	0.00
Provider		Guideline	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.520				
Description					
Taxes	TAX 174	0.00		0.00	VAT 0.00

00858014

Expense Report

Page 1 of 2

Napolitano, Nancy J



00005000009376384

Send Receipts by Company Mail or US Mail to:

AEP Accounts Payable
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301 Cleveland Ave SW
Canton, OH 44702-1623

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

Expense Report					
Number	84	Date	29 Aug 2006	Gross Claim	1725.56
Status	Unsubmitted			Personal	0.00
Period	28 Jul 2006 to 24 Aug 2006			Net Claim	1725.56
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nancy J			Company Paid 2	1725.56
Purpose	TCC/TNC Rate Case meetings in Tulsa and Columbus			CA Deduction	0.00
				Reimbursement	0.00
				Total Recovery	0.00
Reference					

2006-08-29 14:31:25 60648271843125182411156865588130&rTvne=2

8/29/2006