•		Report Dem # 4	
		Report Idem # 4	
ORDER TA DELIVERY	Jason's deli	%3/23/06 8200 001 05: 421224160896	: 1ME 58:A)
DATE:	NE TILL	JASON'S ČELT 1416 AIRLINE CORPUS CHRISTI.TX 7841	2
COMPANY NAME:	539 (aranchua)	CREDIT SALE SERVER TO 1 BATCH # 329	
ADDRESS:	STATE:		WE.
FIRST NAME:	LAST NAME:	SALE HABONT \$25	2.46
PHONE:	LI-ODILO FAX: LII-L.	TIP AMOUNT # 3.5 TOTAL AMOUNT # 277	46
PAYMENT INFORMATION CASH JASON	CREDIT CARD DEPT/COST CE	I NORSE TO MAY THE REDVE AN ACCORDING TO CHRO ISSUER MORECHENI	26 People 1/Prost
QUANTITY/NAME	ORDER INFORMATION	COSTOMER CORY	#10
	MCBS tray Ranch	& honeymust	650
	Chef tray ffranch	& honeymust	650 X 13
	ASST DSS. Hay		155 X25
	(PPD85)		NC
	Cupstice. Asn't forget the di	3941 SWT	aga X3
DELIVERY INSTRUCTIONS	AND ADDRESS IF DIFFERENT FROM ABOVE:	DELIVERY CHARGE: (DOES NOT INCLUDE DRIVER GRATUITY) TAX EXEMPT? YES \(\begin{array}{c} \ \text{NO} \eqric \\ \text{TAX:} \end{array}	300
DELIVERED BY:	11:15	SUBTOTAL: IF ADDING A DRIVER GRATUITY PLEASE FILL-IN HERE AND INITIAL:	· ·
TIME IN:	TIME OUT: 11.13 ORDER NUMBER: 1	TOTAL:	
CUSTOMER SIGNATURE: _	PRINT	NAME:	
	DELI CODE:		

DELI COPY

Report Hom ##4
Attachment
292

AEP Texas Rate Case Meeting March 22, 2006

lason's	Deli - I	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 Consultalt	
16 Jerry Huerta AEP	
17 Rhonda Ryan AEP	
18 Phil Ricketts Bracewell Giuliani	
19 John Williams Clark Thomas & Wir	iters
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 Hum #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:

റാറ

Daily Rate: 929

Room Type:

DDNB

No. of Guests:

1/0

		<u> </u>		<u> </u>
ARRIVAL O	EPARTUR	ELCREDET CARD	RATEGODE & MKTGROUP	ACCOUNT!
CINCOL VASION AND DESCRIPTION OF THE PERSON AND DESCRIPTION OF THE	(Carrier production)	COLUMN TO SERVICE STATE OF THE SERVICE STATE STATE OF THE SERVICE STATE		Design Section Control of the Contro
03/21/06	3/24/06		AMELEC ESP	14500866243
DATE	COMINO	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

Page 1 of 2

Napolitano, Nancy J



00005000009376373

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 <u>CASH</u> 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? \mathbf{Y} / \mathbf{N}

		Expense Rep							
Number	73	Date	07 Apr 2006	Gross Claim	479.76				
Status	Approved		Personal	0.00					
Period	06 Apr 2006 to 0	6 Apr 2006	Net Claim	479.76					
Employee ID	0000093763	Division	103	Company Paid 1	0.00				
Name	Napolitano, Nan	cy J	Company Paid 2	0.00					
				CA Deduction	0.00				
Purpose	Meeting in Tulsa (functionalization			Reimbursement	479.76				
i dipose	(iuncuonanzauor	i, Studies, acct.	Hibaeij	Total Recovery	0.00				
Reference									

Report Items							
Number	1	Category	Persor	nal Auto Mileage 200	Amount	462.36	
Date	06 Apr 2006					Pers.Amount	0.00
GL Code	510	Location		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.LI	EGAL.EON	018181	.SP06000901.92800	02.280TX	.510	
Description							
Taxes	TAX 174	0.0				0.00 VAT	0.00
Num of Units	1039	Miles				Guideline per Unit	0.445
	<u> </u>	<u> </u>					
Number	2	Cate	ory	ory Toll		Amount	3.50
Date	06 Apr 200			Out of Pocket F		Pers.Amount	0.00
GL Code	510	Loca	tion	United States C		Comp. Paid 1	0.00
Exp.Type	Expense	Clien	t			Comp. Paid 2	0.00
Provider		Guid	eline	T	Unlimited	Recovery on #2	0.00
Fin. Code	103.11524.	LEGAL.EC	N01818	31.SP06000901.9280	002.280T	X.510	
Description							
Taxes	TAX 174		0.00			0.00 VAT	0.00
L							
Number	3	Category	Mea	I - Self (travel reg'd)		Amount	13.90
Date	06 Apr 2006	Meth.Pm		of Pocket		Pers.Amount	0.00
GL Code	520	Location	Unite	ed States		Comp. Paid 1	0.00
Exp.Type	Expense	Client				Comp. Paid 2	0.00
Provider	1	Guidelin	e		Unlimite	ed Recovery on #3	0.00
Fin. Code	103,11524.LI			.SP06000901.92800	02.280TX	.520	
Description	<u> </u>						
Taxes	TAX 174	0	.00			0.00 VAT	0.00
			· · · · ·				

Page 1 of 1

Expense Report

Napolitano, Nancy J



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?

					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
	TX Regulatory Filings			CA Deduction	0.00
Purpose				Reimbursement	0.00
·			Total Recovery	0.00	
Reference	000				

http://ohaephqas232/ReportServlet?rNum=-446297619566611692711145300174355&rType=2

						_			
Number	1	Categor	у	Meal - Self (trav	/el req'd)		Amount		1.73
Date	04 Apr 2006	Meth.Pm	ıt.	Corporate Card			Pers.Amou	int	0.0
GL Code	520	Location	,	United States			Comp. Pai	d 1	0.0
Exp.Type	Expense	Client	7				Comp. Pai	d 2	1.73
Provider	AEP-TULSA	Coridation			Ī.,	nlimited	Recovery	on ,	0.00
Provider	CAFE30039176	Guidelin					#1		3.00
Fin. Code	103.11524.LEGAL.EON0	18181.SP06	300	00901.9280002	.280TX	520			
Description	Rate Case Meeting-Func	tionalization							
Taxes	TAX 174	0.0	00				0.00 VA	T (0.00
Number	2	Categor	у	Meal - Self (tra	vel req'd)		Amount		7.35
Date	04 Apr 2006	Meth.Pn	nt.	Corporate Card	1		Pers.Amo	unt	0.0
GL Code	520	Location	<u> </u>	United States			Comp. Pai	d 1	0.0
Exp.Type	Expense	Client					Comp. Pai	d 2	7.35
	AEP-TULSA				,	Inlimited	Recovery	on	0.00
Provider	CAFE30039176	Guidelin	1e			mmea	#2	[0.00
Fin. Code	103.11524.LEGAL.EON0	18181.SP0	60	00901.9280002	.280TX	.520			
Description	Rate Case Meeting-funct	ionalization							
Taxes	TAX 174	0.	00				0.00 V	\T	0.00
Number	3	Categor	у	Hotel		Amour	ıt	20	8.88
Date	05 Apr 2006		_	Corporate Card	j	Pers.A	mount		0.0
GL Code	510	Location	2	United States		Comp.	Paid 1		0.0
Exp.Type	Expense	Client			·	Comp.	Paid 2	20	8.88
Provider	EMBASSY SUITES TULSTIP	Guidelir	ne		Unlimited	Recov	ery on #3		0.00
Fin. Code	See folio								
Description	Rate Case meeting-Tul	sa				Receir Requir			J
Taxes		0.	00			0.0	OVAT		0.00
Num of Units		2 Nights				Guidel Unit	ine per	Unlin	nited
		F	ol	io item					
Number	1	Catego	ry	Room Rate		Amou	nt	20	88.80
Date	05 Apr 2006	Meth.Pr	nt.	Corporate Car	d	Pers.A	mount		0
GL Code	510	Guidelii	ne		Unlimited	Recov	ery on #1		0.00
Fin. Code	103.11524.LEGAL.EON	N018181.SF	906	000901.928000	02.2807	X.510			
Description	Rate Case Meeting - To	ulsa							-
<u> </u>		****	_						
Number	14	Category	M	leal - Self (trave	l reg'd)		Amount		5.14
Date	09 Apr 2006		_	orporate Card			Pers.Amo	unt	0.0
GL Code	520	Location	-	nited States			Comp. Pa		0.0
Exp.Type	Expense	Client	ť				Comp. Pa		5.14
Provider	PIZZA INN EXPRESS S		十		Ti	Inlimited	Recovery		
Fin. Code	103.11524.LEGAL.EON			000901.928000			1		
i iii. Code	100. 11024.EEGAE.EON	0.0101.01		333301.323000.					

http://ohaephqas232/ReportServlet?rNum=442058003045390113311145300147746&rType=1

Category Meal - Self (travel req'd)

Meth.Pmt. Corporate Card

Description Rate Case meeting Affiliate-Columbus

TAX 174

09 Apr 2006

Taxes

Number

Date

4/17/2006

0.00

3.60

0.0

0.00 VAT

Pers.Amount

Amount

GL Code	520	Locatio	n United States		Comp. Paid 1	0.0
Exp.Type	Expense	Client			Comp. Paid 2	3.6
	AUSTIN-BERGSTROM INTL	Guidelii	ne	Unlimited	Recovery on #5	0.00
Fin. Code	103.11524.LEGAL.EON	18181.SP0	6000901.9280002.2807	TX.520	*···	<u> </u>
Description	Rate Case meeting Affilia	te-Columbi	us			
Taxes	TAX 174	0.	00		0.00 VAT	0.00
					<u> </u>	
Number	6	Category	Meal - Self (travel reg'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	<u> </u>		Recovery on #6	0.00
Fin. Code	103.11524.LEGAL.EON	018181.SP0	06000901.9280002.280			
Description	Rate Case Meeting Affilia	ate - Colum	bus	·····		\neg
Taxes	TAX 174	0.00			0.00 VAT	0.00
						<u> </u>
Number	7	Category	Meal - Self (travel reg'd)		Amount	5.96
Date	11 Apr 2006		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	
Fin. Code	103.11524.LEGAL.EON	018181.SP(06000901.9280002.280			
Description	Rate Case Meeting Affili	ate - Colum	bus			
Taxes	TAX 174	0.00			0.00 VAT	0.00
					<u> </u>	البينينا
Number	8	Category	Meal - Self (travel reg'd)		Amount	2.80
Date	12 Apr 2006		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	
Fin. Code	103.11524.LEGAL.EON	018181.SP	06000901.9280002.280			
Description	Rate Case Meeting Affili	ate-Columb	us			
Taxes	TAX 174	0.00			0.00 VAT	0.00
					<u> </u>	
Number	9 .	Category	Meal - Self (travel req'd)		Amount	3.27 V
Date	13 Apr 2006		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	
Fin. Code			06000901.9280002.280			\Box
Description	Rate Case Meeting affilia	ate-Columb	us			
Taxes	TAX 174	0.00			0.00 VAT	0.00
	*				L	

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

Room: Arrival Date:

Departure Date: 605/TDBN 04/03/068:47AM Adult / Child 04/05/06

Room Rate:

1/0 \$92.00

HOTELS.

RATE PLAN

L-AEP BONUS AL: CAR:

Rate quoted based on arrival date and langual tay 23 100 537 2 53 by VERsan arriy, rate is The Hilton Family Hilton BHonors'

Confirmation: 86951880

04/05/06

PAGE

RATES SUBJECT TO APPLICABLE SALES, OCCUPANCY, BY OTHER TAXES, PLEASE DO NOT LEAVE ANY MONSY OR ITEMS OF VALUE UNATTENDED BY YOUR ROCM, A SAFE DEPOSIT BOX IS AVAILABLE FOR YOU IN THE LOBBY I AGREE THAT MY BABILLTY FOR THIS BILL IS NOT WARYD AND AGREE TO BE HELD PERSONALLY LABBLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FALLS TO PAY FOR ANY PART OR THE FULL AMOUNT OF THESE CHARGES. "I HAVE REQUESTED WERE RECOLD TO BE ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHILE BE APPLED TO KAY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHILE BE APPLED TO KAY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHILE BE APPLED TO KAY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHILE BE APPLED TO KAY ACCOUNT. THE THE EVENT OF AN EMERGENCY OF THE FULL CHARGES. "I HAVE REQUESTED WHILE BE APPLED TO KAY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHILE BE APPLED TO KAY ACCOUNT. THE THE EVENT OF AN EMERGENCY OF THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHITE ANY ACCOUNT. THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHITE ANY ACCOUNT. THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHITE ANY ACCOUNT. THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE EVENT OF AN EMERGENCY OF THE FULL CHARGES." I HAVE REQUESTED WHITE ANY ACCOUNT. THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ACCOUNT." IN THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE FULL CHARGES. "I HAVE REQUESTED WHITE ANY ANY ACCOUNT." IN THE

A SAFE DEPOSE BOX S PROVIDED FOR THE DEPOSIT OF VALUABLES - THE HOTEL CANNOT BE RESPONSIBLE FOR VALUABLES NOT LEFT LYTHE SAFE DEPOSIT BOX.

DATE REFERENCE DESCRIPTION TRUCMA **GUEST ROOM** \$92.00 04/03/06 1847563 \$7.84 1847563 STATE TAX 04/03/06 \$4.60 04/03/06 1847563 CITY TAX **GUEST ROOM** \$92.00 04/04/06 1848045 STATE TAX \$7.84 1848045 04/04/06 \$4.60 04/04/06 1848045 CITY TAX WILL BE SETTLED TO MC *7481 EFFECTIVE BALANCE OF S208.88 \$0.00

> Hilton HHonors (R) stays post to your account within 772 Trous 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-nnouncements e-newsletter with news and HOTELS:



307639

0.00

SODEXHO PSO TULSA CAFE SODEXHO PSO TULSA CAFE

001-0030-0043-4-\$

Seq:

4

App: Ref: 036916 60941225526312.37

04/03/2006 19:51 JODI

SALE

XXXXXXXXXXXXX7481 EXP DATE : 11/06

AMOUNT

1.73

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU WE APPRECIATE YOUR PATRONAGE 001-0030-0229-19-S

Seq: App: Ref:

084747

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

Experise Report

Napolitano, Nancy J



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 <u>CASH</u> 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

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

http://ohaephqas231/ReportServlet?rNum=-450634458732484470211145905915036&rType=2

4/24/2006

4337 S PADRE ISLAND DRIVE CORPUS CHRISTI, TX 78411 361-853-7899

Name & Address

PAGE

NAPOLITANO, NANCY UNKNOWN

COLUMBUS, OH 99999 US

04/19/06

FAX: 361-851-1310

308/KNGN 04/18/063:56PM 04/19/06 Room Arrival Date Departure Date

1/0 \$95.00 Adult/Child Room Rate

RATE PLAN HH# AL: BONUS AL:

L-AEP CAR:

The Hilton Family Confirmation: 86689954

TREALIMONITATION

Reles 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 fobby. I agree that my faibility 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, nequire special evecuetion assistance due to a physical disability. Please indicate yes by checking here.

EMBASSY SUITES HOTEL*

THANK YOU

DATE 04/18/06	REFERENCE	DESCRIPTION		AMOUNT
04/18/06				
04/18/06			Ì	
	1172607	RESTAURANT FOOD SALES		\$14.20
04/18/06	1172620	SALES TAX RESTAURANT	4	\$1.17
04/18/06	1172734	GUEST ROOM		\$95.00
04/18/06	1172734	STATE	İ	\$5.70
04/18/06	1172734	CITY		\$8.55
		WILL BE SETTLED TO		\$124.62
		EFFECTIVE BALA	INCEOF	\$0.00
		,		
			1	
]			
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			İ	
	}			
		•	ŀ	
ACCOUNT NO			DATE OF CHARGE	FOLIO NO /CHECK NO. 211990 A
CARD MEMBER NA	ME		AUTHORIZATION	INITIAL
STABLISHMENT N	0 & LOCATION	estableshment address to transmit the ard his dek for payment	PURCHASES & SERV	KES
			TAXES	
			TIPS & MISC	
CARD MEMBER'S S	ignaturi:		TIPS & MISC	

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



Name & Address

NAPOLITANO, NANCY J

COLUMBUS, OH 99999

DOUBLETREE GUEST SUITES COLUMBU

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

Room Arrival Date Departure Date 321/NK1S 04/09/066:01PM 04/13/06

Adult/Child Room Rate 1/0 \$104.00

RATE PLAN L-AEP HH# 921005371 SILVER

AL: BONUS AL:

CAR:

Confirmation: 84538536

04/13/06

PAGE

GE

AMOUNT DESCRIPTION REFERENCE DATE \$34.78 * LOUNGE-CAUCUS ROOM 2374597 04/09/06 \$104.00 **GUEST ROOM** 04/09/06 2374719 \$7.02 STATE TAX 04/09/06 2374719 \$10.40 CITY TAX 2374719 04/09/06 \$104.00 **GUEST ROOM** 04/10/06 2375214 \$7.02 2375214 STATE TAX 04/10/06 \$10.40 2375214 CITY TAX 04/10/06 \$104.00 **GUEST ROOM** 04/11/06 2375948 \$7.02 04/11/06 2375948 STATE TAX \$10.40 CITY TAX 04/11/06 2375948 \$104.00 **GUEST ROOM** 2376664 04/12/06 \$7.02 04/12/06 2376664 STATE TAX \$10.40 CITY TAX 04/12/06 2376664 WILL BE SETTLED TO MC *7481 EFFECTIVE BALANCE OF \$520.46 \$0.00 Hilton HHono's (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 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 oliers, just visit doubletree.com DATE OF CHARGE FOLIO NO /CHECK NO.

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 auestions about your account.

AUTHORIZATION 276915 ANITIAL

PURCHASES & SERVICES

TAXES

TIPS & MISC.

TOTAL AMOUNT

0.00

Y

U

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

ANTON AIRFOOD DAMON'S EXPRESS COLUMBUS AIRPORT

1013 YOSEPH 4386 APR13'06 11:49AM TO GO 3.99 1 YOGURT 2 HOT DOG 5.98 1 FRUIT CUP 3.49 2 SODA FTN 22 SUBTOTAL 17.04 17.04 AMOUNT 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 -6.18MC \$28.00 XXXXXXXXXXXXX7481 11/06 TAX Net Total \$24.72

All amounts in USD. Deliv. Date=Receipt Date

2.04

1.24

TAX (8.25%)

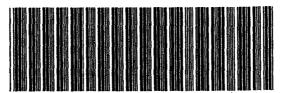
ABI TX (5%)

Thank You for Parking @ Airport Fast Park

00816075

Page 1 of 2

Napolitano, Nancy J



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 <u>CASH</u> 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.	
Status	Approved		-1	Personal		DE
Period	24 Apr 2006 to 24 Apr 2006			Net Claim	216	.11
Employee ID	0000093763	Division	103	Company Paid 1	0	.00
Name	Napolitano, N	ancy J		Company Paid 2	0	.00
·				CA Deduction	0	.00
Purpose		te Case - Ti	ravel to Corpus	Reimbursement	216	.11
	Christi			Total Recovery	0	0.00
Reference						

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.LI	EGAL.EON	018181.SP06000901.9280002.	280TX	.510	
Description	Travel from A	Austin to Co	rpus 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		Inlimited	Recovery on #2	0.00
Fin. Code	103.11524.LE	GAL.EON01	3181.SP06000901.9280002.280)TX.52	0	
Description	Snack at Hou	ston airport 4	/13/06			
Taxes	TAX 174	0.00			0.00 VAT	0.00

Napolitano, Nancy J



00005000009376377

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

Reference

- · ALL international travel
- ALL single <u>CASH</u> 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

	,			Expense	e 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, Na	ncy J	Company Paid 2	251.41	
	 				0.00
Purpose			v of first draft testimony	Reimbursement	0.00
	(Hooper-Gordo	inj		Total Recovery	0.00

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

Name & Address

NAPOLITANO, NANCY J UNKNOWN

COLUMBUS, OH 99999

205/KNGN Room Arrival Date Departure Date 05/03/06 4:05PM 05/05/06

Adult/Child Room Rate

1/0 \$95.00

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

CAR:

Confirmation: 82754062

05/05/06

PAGE

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 tobby, I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the hidicated person, company or association fairs to pay for any part or the full amount of these charges. I have requested weekday delivery of USA TDDAY, if returned, a orditi of \$.75 will be applied to my account. In the event of an emergency, it or someone in my perty, require special evacuation assistance due to a physical disability. Please indicate yes by checking here.

The Hilton Family

THANK YOU

EMBASSY SUITES

HOTEL*

		Signature			1
DATE	REFERENCE	DESCRIPTION		AMOUNT	ן '
05/03/06 05/03/06 05/03/06 05/04/06 05/04/06 05/04/06	for this stay or Thank you for	GUEST ROOM STATE CITY GUEST ROOM STATE CITY WILL BE SETTLED TO MO EFFECTIVE BALANG s (R) stays post to your account within 72 hour any other stay at more than 2,700 hotels word staying with us. Be sure to visit embassysuite sure stay, reservations or subscribe to E-nnou	rs of checkout. To a dwide visit www.hilto es.com for informalia	\$218.50 \$0.00 heck your earnings anhhonors.com	Raine 1st line it for Experience TCC/TNC Restress
ACCOUNT NO.			DATE OF CHARGE	FOLIO NO./CHECK NO. 212612 A	
CARD MEMBER NA	AME		AUTHORIZATION	INITIA	
ESTABLISHMENT N	0. & LOCATION	ENTABLISHMENT AGREES TO TRANSMIT TO CARD HUMBER FOR PAYMENT	PURCHASES & SHR	VICES	
			TAXES		
			TIPS & MISC.		
CARD MEMBER'S	SIGNATURE				-{
X			TOTALAMOUNT	0.00	

or services in rchased on the card shall neit be resign on returned for a cash hereind.

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

SODEXHO PSO TULSA CAFE

001-0050-0059-4-8

Seq: App:

02075

Ref:

61291375656021.54

05/09/2006 08:17 Lorraine

SALE

XXXXXXXXXXXXX7481 EXP DATE : 11/06

AMOUNT

2.37

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU WE APPRECIATE YOUR PATRONAGE

> SODEXHO PSO ULSA CAFE

001-0021-0145-21-S

Seq: App: 21 054776

Ref:

613016523492106.54

05/10/2006 11:38 MARIE

SALE

XXXXXXXXXXXXX7481 EXP DATE : 11/06

AMOUNT

8.21

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU WE APPRECIATE YOUR PATRONAGE TCC/TWO Robo Case

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 Change 5.69 00

SODEXHO ... PSO TULSA CAFE.

002-0016-0053-21-S

Seq: App: Ref: 003971 612916277223120.33

05/09/2006 11:53 Karen

SALE

XXXXXXXXXXXXX7481 EXP DATE : 11/06

AMOUNT

7.35

KEEP THIS COPY FOR YOUR RECORDS

THANK YOU WE APPRECIATE YOUR PATRONAGE

SODEXHO PS0 TULSA CAFE

002-0050-0035-19-S

Seq:

084939

App: Ref: 61311627944896.45

> 05/11/2006 11:59 Lorraine

> > SALE

xxxxxxxxxxxx7481 EXP DATE: 11/06

AMOUNT

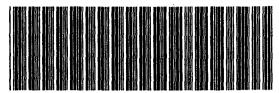
9.29

KEEP THIS COPY FOR YOUR RELURDS

THANK YOU WE APPRECIATE YOUR PATRONAGE

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 <u>CASH</u> 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? \mathbf{Y} / \mathbf{N}

		Expense	nse 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, Nar	ncy J		Company Paid 2	0.00
				CA Deduction	0.00
Purpose			to Corpus Christi for 1st	Reimbursement	223.84
-	draft testimony	review		Total Recovery	0.00
Reference					

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	2	23.835	Recovery on #1	0.00
Fin. Code	103.11524.LE	GAL.EON0	18181.SP06000901.9280002.28	80TX.	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



00005000000376379

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 <u>CASH</u> 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

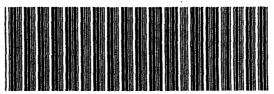
Are International Receipts Included? \mathbf{Y} / \mathbf{N}

		e 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, Na	ncy J		Company Paid 2	0.00
				CA Deduction	0.00
Purpose	1	Case - Tra	vel to Tulsa for Tulsa	Reimbursement	475.20
_	meeting			Total Recovery	0.00
Reference					

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	4	71.700	Recovery on #1	0.00
Fin. Code	103.11524.LE	GAL.EON0	18181.SP06000901.9280002.28	80TX.	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	Unli	mited Recovery on #2	0.00
Fin. Code	103.11524.LEC	AL.EON018181	.SP06000901.9280002.28	80TX.510	
Description			<u> </u>		
Taxes	TAX 174	0.00		0.00 VAT	0.00

Napolitano, Nancy J



00005000009376380

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 <u>CASH</u> 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? \mathbf{Y} / \mathbf{N}

				Expense l	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, Nanc	y J		Company Paid 2	0.00
	Meetings in Colu	mbus for testimon	y review and in Corpus	CA Deduction	0.00
Purpose	Christi on discreti	onary service and	research and query with	Reimbursement	263.41
•	OPCO support in	TCC/TNC Rate C	Total Recovery	0.00	
Reference			<u></u>		

Report Items								
Number]1	Cat	egor	v T	axi/Limo Fare		Amount	22.42
Date	05 Jun 2006		Meth.Pm		Out of Pocket		Pers.Amount	0.00
GL Code	510	Loc	atior	, (Inited States		Comp. Paid 1	0.00
Ехр.Туре	Expense	Clie	nt				Comp. Paid 2	0.00
Provider		Gui	delin	е		Unlimited	Recovery on #1	0.00
Fin. Code	103.11524.L	EGAL.E	ONO	18181	.SP06000901.928	0002.280T	X.510	
Description								
Taxes	TAX 174			0.00			0.00 VAT	0.00
Number	2		tego	ry	Tip		Amount	1.58
Date	05 Jun 2006) Me	th.P	mt.	Out of Pocket		Pers.Amount	0.00
GL Code	510	Lo	Location		United States		Comp. Paid 1	0.00
Exp.Type	Expense	Cli	Client				Comp. Paid 2	0.00
Provider		Gu	ideli	ne	Unlimited		Recovery on #2	0.00
Fin. Code	103.11524.1	LEGAL.	EON	01818	1.SP06000901.928	30002.2807	TX.510	
Description								
Taxes	TAX 174			0.00			0.00 VAT	0.00
-								
Number	3	Catego	ry	Person	al Auto Mileage 20	006	Amount	239.41
Date	14 Jun 2006	Meth.P	mt.	Out of I	Pocket		Pers.Amount	0.00
GL Code	510	Locatio	on l	Jnited	States		Comp. Paid 1	0.00
Exp.Type	Expense	Client	1				Comp. Paid 2	0.00
Provider		Guideli	ine			239.410	Recovery on #3	0.00
Fin. Code	103.11524.LE	GAL.E	ON0	18181.	SP06000901.9280	0002.280TX	C.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 TEARES FOR YOUR	:
Receipt PATROBAGE Date 6/5/06 Amount \$ 22 42 Driver (1.58 tip) Cab # Cabh	
	-
E6/12 - 6/14	
EMBASSY SUITES HOTELS*	
nilrages - Shit	

29680 Start 30218 Stop 538. milio

TheHib	@ family	Reservati	Reservations: www.embassysuites.com or 1–800–EMBASSY				
Hilton	COMPTO	P DownleTate	<u> </u>	Juana	Histor Garden harr	Hillon Grund Vecations Club	HOLEROOD ATTE
						•	U.S.A

Napolitano, Nancy J



00005000009376381

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 <u>CASH</u> 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

		Expense R	eport	
81	Date	19 Jun 2006	Gross Claim	1869.95
Unsubmitted			Personal	0.00
11 May 2006 to 1	4 Jun 2006		Net Claim	1869.95
0000093763	Division	103	Company Paid 1	0.00
Napolitano, Nanc	y J		Company Paid 2	1869.95
			CA Deduction	0.00
			Reimbursement	0.00
		ne case. I alking to	Total Recovery	0.00
	Unsubmitted 11 May 2006 to 14 0000093763 Napolitano, Nancy Kick-off meeting in meeting on discre OPCO support sta	Unsubmitted 11 May 2006 to 14 Jun 2006 0000093763 Division Napolitano, Nancy J Kick-off meeting in Tulsa, testimony meeting on discretionary services as	Unsubmitted 11 May 2006 to 14 Jun 2006 0000093763 Division 103 Napolitano, Nancy J 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	81 Date 19 Jun 2006 Gross Claim Unsubmitted Personal 11 May 2006 to 14 Jun 2006 Net Claim 0000093763 Division 103 Company Paid 1 Napolitano, Nancy J 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

6/19/2006

Number

Reference Report Items 313.32 Number Amount Category Hotel 11 May 2006 0.0 Date Meth.Pmt. Corporate Card Pers.Amount 510 **United States** 0.0 **GL Code** Location Comp. Paid 1 313.32 Comp. Paid 2 Client Exp.Type Expense EMBASSY SUITES 0.00 Provider Guideline Unlimited Recovery on #1 TULSTIP Fin. Code See folio Receipt Description See Folio Required TAV 00.0 0.00 0.00 Taxes Guideline per Num of 3 Nights Unlimited Unit Units Folio item Number Category Room Rate **Amount** 313.32 11 May 2006 Meth.Pmt. Corporate Card Pers.Amount Date Unlimited Recovery on #1 0.00 GL Code Guideline 103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510 Fin, Code Description 676.38 Airfare **Amount** Number Category Pers.Amount 22 May 2006 Meth.Pmt. Corporate Card 0.0 Date 0.0 GL Code 510 Location United States Comp. Paid 1 Comp. Paid 2 676.38 Client Exp.Type Expense 0.00 Provider AMERICAN 00113809635811 Guideline Unlimited Recovery on #2 103.11524.LEGAL.EON018181.SP06000901.9280002.280...TX.510 Fin. Code Description 0.00 0.00 VAT 0.00 Taxes TAX 174 9.00 Amount Number Category Hotel Date 22 May 2006 Meth.Pmt. Corporate Card Pers.Amount 0.0 **United States** 0.0 510 Location Comp. Paid 1 **GL Code** 9.0 Comp. Paid 2 Expense Client Exp.Type HYATT HOTELS 0.00 Unlimited Recovery on #3 Provider Guideline AUSTIN Fin. Code See folio Receipt Required Γ Description See Folio TAV 00.0 0.00 Taxes 0.00 Num of Guideline per Unlimited 1 Nights Unit Units Folio item Amount 9.00 Parking Number Category Corporate Card Pers.Amount 22 May 2006 Meth.Pmt. Date 0.00 Unlimited Recovery on #1 **GL Code** 510 Guideline 103.12313.LEGAL.LGNANDA.G0001465.9210001.317....510 Fin. Code Parking for TSCPA Conference Description

Category

Meal - Self (travel req'd)

6/19/2006

7.16

Amount

Date	04 Jun 2006			orate Card		Pers.Amount	0.0
GL Code	520	Location	Unite	ed States		Comp. Paid 1	0.0
хр.Туре	Expense	Client				Comp. Paid 2	7.16
Provider	PIZZA HUT C19	Guidelin	9		Unlimited	Recovery on #4	0.00
in. Code	103.11524.LEGAL	EON018	181.SP(06000901.9280002.28	30TX.520		
Description							
Taxes	TAX 174	0.	00	· - · · · · · · · · · · · · · · · · · ·		0.00 VAT	0.00
Number	5	. (ategor	y Meal - Self (travel r	ea'd)	Amount	7.92
Date	04 Jun 2006			t. Corporate Card		Pers.Amount	0.0
GL Code	520		ocation			Comp. Paid 1	0.0
Ехр.Туре	Expense		lient		 	Comp. Paid 2	7.92
Provider	AUSTIN-BERGSTF	MOS	Suidelin	e	Unlimite	5	0.00
Fin. Code		EON0181	81.SP0	6000901.9280002.280) TX 520		<u></u>
Description			J. U				
Taxes	TAX 174	T	0.0	00		0.00 VAT	0.0
. 4700		l.	V.1	~		1 0.00 1/1	10.00
Number	6	loca	2007/	Meal - Self (travel req	'd\	Amount	4.02
	05 Jun 2006				<u>u)</u>		0.0
Date Cl. Codo				Corporate Card		Pers.Amount	
GL Code	520			United States		Comp. Paid 1	0.0
Exp.Type	Expense	Clie			hie e	Comp. Paid 2	4.0
Provider	AEP - CAFE 30011					d Recovery on #6	JU.00
Fin. Code		.EON0181	81.SP0	6000901.9280002.28	UTX.520		
Description					·····		
Taxes	TAX 174		0.00			0.00 VAT	0.0
Number	7			Meal - Self (travel req	'd)	Amount	4.6
Date	06 Jun 2006	Met	h.Pmt.	Corporate Card		Pers.Amount	0.
GL Code	520	Loc	ation	United States		Comp. Paid 1	0.0
Exp.Type	Expense	Clie				Comp. Paid 2	4.6
Provider	AEP - CAFE 3001	1Q20 <mark>Gui</mark>	deline		Unlimite	d Recovery on #7	0.0
Fin. Code	103.11524.LEGAL	.EON0181	81.SP0	6000901.9280002.28	0TX.520		
Description							
Taxes	TAX 174		0.00			0.00 VAT	0.0
Number	8	Cat	egory	Meal - Self (travel req	ı'd)	Amount	6.7
Date	06 Jun 2006			Corporate Card	· · · · · · · · · · · · · · · · · · ·	Pers.Amount	0.
GL Code	520			United States		Comp. Paid 1	0.
Exp.Type	Expense	Clie				Comp. Paid 2	6.
Provider	AEP - CAFE 3001				Unlimite	d Recovery on #8	
Fin. Code				6000901.9280002.28		1	1
Description Description	,						
Taxes	TAX 174	1	0.00			0.00 VAT	0.0
. 4770	1		0.00	L		0.00[4/1	10.0
Number	9	lo-4	000-:	Mool Colf /traval	·'d\	TAmoust.	4.7
เงนแบบยโ				Meal - Self (travel red	<u> u) </u>	Amount	-
D-4-	07 Jun 2006	Met	in.Pmt.	Corporate Card		Pers.Amount	10.
Date	 			II Imitaal Chakaa		Comp. Paid 1	1 0.
GL Code	520			United States			
	 	Clie		United States		Comp. Paid 2 ed Recovery on #9	4.7

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6/19/2006

		2060009		7				
TAX 174	0.0	0				0.00 VA	\T	0.00
								-
10	Category	Meal on	site for train	ning	Amo	unt	:	39.31
					Pers.	Amount		0.0
510	Location	United S	States		Com	p. Paid 1		0.0
Expense	Client				Com	p. Paid 2	;	39.31
TED'S MONTANA GRILL	Guideline			Unlimited	Reco #10	very on		0.00
103.11524.LEGAL.EC	N018181.5	P06000	901.928000	2.280TX	(.510			
TAX 174	0.00				0	.00 VAT		0.00
. 3	People				Guid Unit	eline per	Unlir	nited
Napolitano, Nancy J	Title	employe	е]			
Phil Richetts	Title	Lawyer]			
John Williams	Title	Lawyer]			
11	Category	Meal -	Self (travel	req'd)		Amount		4.62
08 Jun 2006						Pers.Amou	nt	0.0
520		_ 		***		Comp. Paid	11	0.0
Expense	Client	1		·····				4.62
AEP - CAFE 30011Q2		e		Unl	imited			0.00
			01.9280002					
							-	
TAX 174	0.0	0				0.00 🗸	AΤ	0.0
						-		
12	Category	Meal -	Self (travel i	req'd)		Amount		1.7
08 Jun 2006						Pers.Amou	nt	0.0
500	Location	United	States			Comp. Paid	1 1	0.0
J520								
Expense	Client	1				Comp. Paid	12	1.7
				Uni	imited	Comp. Paid Recovery o		
Expense	Guideline		901.928000					
Expense WENDY'S #5587 Q25	Guideline		901.928000					
Expense WENDY'S #5587 Q25 103.11524.LEGAL.EO	Guideline	P060009	901.928000				on #12	0.0
Expense WENDY'S #5587 Q25 103.11524.LEGAL.EO	Guideline N018181.S	P060009	901.928000			Recovery o	on #12	0.0
Expense WENDY'S #5587 Q25 103.11524.LEGAL.EO	Guideline N018181.S 0.00	P060009	901.928000 Parking		.520	Recovery o	on #12	0.0
Expense WENDY'S #5587 Q25 103.11524.LEGAL.EO TAX 174	Guideline N018181.S 0.00	6P060009		2.280TX	520	Recovery o	on #12	0.0 0.0 28.0
Expense WENDY'S #5587 Q25 103.11524.LEGAL.EO TAX 174	Guideline N018181.S 0.00	6P060009 olimategory eth.Pmt.	Parking	2.280TX	.520	Recovery o	on #12 AT	0.0 0.0 28.0 0.
Expense WENDY'S #5587 Q25 103.11524.LEGAL.EO TAX 174 13 09 Jun 2006	Guideline N018181.S 0.00 Ca Mo	6P060009 olimitegory eth.Pmt.	Parking Corporate	2.280TX	.520	0.00 V	AT nt 1	0.0 0.0 28.0 0.
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6/19/2006

Ехр.Туре	Expense	Client			Comp. Paid 2	517.15
Provider	DOUBLETREE GUEST SUTIP	Guideline		Unlimited	Recovery on #14	0.00
in. 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
		Fo	lio item			
Number	1	Category	Room Rate		Amount	485.68
Date	10 Jun 2006	Meth.Pmt.	Corporate Card		Pers.Amount	(
GL Code	510	Guideline		Unlimited	Recovery on #1	0.0
Fin. Code	103.11524.LEGAL.EON	18181.SP0	6000901.928000	2.280TX	.510	
Description						
		Fo	lio item			
Number	2	Category	Meal - Business Entertainment		Amount	31.4
Date	10 Jun 2006	Meth.Pmt.	Corporate Card		Pers.Amount	(
GL Code	520	Guideline		Unlimited	Recovery on #2	0.0
	103.11524.LEGAL.EON	018181.SP0	6000901.928000	2.280TX	.520	-
Fin. Code	1103.11324.LLGAL.LON					
Fin. Code Description	103.11324.ELGAL.EON					
	103.11324.LEGAL.EON					
Description	Napolitano, Nancy J	Title	employee			

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	Unli	mited	Recovery on #15	0.00
Fin. Code	103.11524.LEGAL.EON	018181.SP06	000901.9280002.280TX.5	20		
Description	n					
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
Ехр.Туре	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	
Taxes		0.00			0.00 VAT	0.00
Num of Units		2 Nights			Guideline per Unit	Unlimited
		Fo	olio 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

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Fin. Code	103.11524.LEGAL	.EON018181.SP0	06000901.92800	02.280TX.510	
Description					
		Fo	olio item		
Number	2	Category	Meal - Self (dinr	ner) Amount	12.70
Date	14 Jun 2006	Meth.Pmt.	Corporate Card	Pers.Amo	unt 0
GL Code	520	Guideline		Unlimited Recovery	on #2 0.00
Fin. Code	103.11524.LEGAL	.EON018181.SP0	06000901.92800	02.280TX.520	
Description		-			

Number	17	Category	Meal - Self (travel reg'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.EON	018181.SP06	000901.9280002.280	TX.520		
Description	n					
Taxes	TAX 174	0.00	•		0.00 VAT	0.00

3332 S. 79TH E. AVE TULSA, OK 74145

TELEPHONE 918-622-4000

Julia Kick- Off

TCC ITAL Kates Care

FAX 918-665-2347

E

· Name & Address SSY SUITES Room: Arrival Date. 812/TDBN HOTELST NAPOLITANO, NANCY 400 W 15TH ST STE 650 Departure Date: 05/08/061:33PM 05/11/06 **AUSTIN, TX 78701** Adult / Child Room Rate: \$92.00 Flace quoted based on arroral date and length of stay SAME PLAN 1. LARP 12 0053473 BUVER Server to change 1917 AL: WN #0000052328846 Hilton Effonors HH# 92/1005/17 SELVER

AL: WN #00000052328846

FIRE DEBICAGED THE ARE HARDER FOR CHEEK AS STATEMED FOR BEAM OR CHECKARG ACCOUNT: A ROLD YELL BE PRICED BY THE ACCOUNT OR HIS HALL AND PRICED FOR BEAM OR CHECKARG ACCOUNT: A ROLD YELL BE PRICED BY THE ACCOUNT OR HIS HALL AND PRICED FOR A RANGE OF THE ACCOUNT OR HIS SUCH FUNDS WILL HAVE BY BUSINESS.

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Name & Address

NAPOLITANO, NANCY J 400 W 15TH ST

AUSTIN, TX 78701 US

Room Arrival Date Departure Date

814/NK1S 06/04/065:01PM 06/08/06

Adult/Child Room Rate

1/0 \$104.00

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

CAR:

Confirmation: 81492781

06/08/06

PAGE

questions about your account.

DATE	REFERENCE	DESCRIPTION		AMOUNT		Tankallur Namilatar II
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06/04/06	2412283	CITY TAX	1	\$10.40		31.47 Food
06/05/06	2412591	*RESTAURANT- CAUCUS ROOM		330.47	1	31.47 7000
06/05/06	2412997	GUEST ROOM		\$104.00		7
06/05/06	2412997	STATE TAX		\$7.02	/	
06/05/06	2412997	CITY TAX		\$10.40	1	
06/06/06	2413258	COOKIES		\$1.00	1	
06/06/06	2413648	GUEST ROOM	İ	\$104.00		
06/06/06	2413648	STATE TAX		\$7.02	- 1	79. ▼
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06/07/06	2414422	GUEST ROOM		\$104.00 \$7.02	1	485 68
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			DATE OF CHARGE	FOLIO NO /CHI	CK NO.	\mathcal{T}
	EXPRE	SS CHECK-OUT		1	1	V
Good Mornin	og! We hope you	enjoyed your stay. With Express Check-Out	AUTHORIZATION	283447	(NITIAL	
		ront Desk to check out.	AUTHORIZATION		anna.	
	•	is a record of your charges as of late last				
evening.		· ·	PURCHASES & SERV	VICES		
For any char	ges after your acco	ount was prepared, you may:			- 1	
+ pay at the t	time of purchase.		TAXES			
+ charge pun	chases to your acco	ount, then stop by the Front Desk for an	·			
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		n your room and tell us when you are ready to				TY
		automatically checked out and you may use this	TOTAL AMOUNT			
		ree to leave your key(s) in the room.	Į	0.	00	
riease call th	ie rrom veskij j	ou wish to extend your stay or if you have any	<u> </u>			

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

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



Name & Address

CONFIRMATION NUMBER: 87870816

NAPOLITANO, NANCY J UNKNOWN

COLUMBUS, OH 99999 US

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

Adult/Child Room Rate 1/0 95.00

L-AEP

EMBASSY SUITES HOTEL*

RATE PLAN HH# 921005371 SILVER AL:

The Hilton Family

CAR: Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or idems of value unattended in your room. A safety deposit box is available for you in the fobby. 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 fals 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 pady, require special avacuation assistance due to a physical disability. Please indicate yes by chocking here:

THANK YOU

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DATE	REFERENCE		DESCRIPTION			AMOUN	T
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06/12/06	1196497	SALES TAX R	ESTAURANT		1	\$0.84	•
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06/12/06	1196635	STATE			1	\$5.70	
06/12/06	1196635	CITY				\$8.55	
06/13/06	1197074	GUEST ROOM	А			\$95.00	
06/13/06 06/13/06	1197074	STATE			1	\$5.70 \$8.55	
<i>)</i> 6/13/06	1197074	LIT				\$6. 00	
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ACCOUNT NO.		U			DATE OF CHARGE	FOLIO NO /CI 215484	HECK NO. Å
CARD MEMBER N	AME	<u>_</u>			AUTHORIZATION		INTTIAL
STABLISHMENT	NO. & LOCATION	ESTABLISIO-ESYT ACRUES	TO TRAKSMET TO CARD HAN DEEP FOR PAYAGE	NT.	PURCHASES & SERV	TCES	.l
					TAXES		
					TIPS & MISC		

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



AEP TRAVEL SERVICES

PHONE: 888-237-7008 E-MAIL AEP TRAVEL SERVICES

Itinerary - Printable By Category

Print this page | Close window | Help

Departs: 11:15am Arrives: 12:16pm

Confirmation: HWNGAU

Smoking: No

Mileage: 183

Seat: Check-In Required

Departs: 1:20pm

Arrives: 4:41pm Seat: 21F

Confirmation: HWNGAU

Smoking: No

Mileage: 922

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.

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

https://www.virtuallythere.com/new/printerFriendly.html?pnr=HWNGAU&name=NAPOLITANO&... 5/22/2006

Departs: 1:13pm

Arrives: 2:50pm

Seat: 20A

Confirmation: HWNGAU

Smoking: No

Mileage: 922

Departs: 4:37pm

Arrives: 5:30pm Seat: 19F

Confirmation: HWNGAU Smoking: No

Mileage: 183

Check In: Jun 4

FAX: 614 538-8228

Rate: 104.00 USD / night

Check Out: Jun 8

Corp Discount #: 0550000044

Room(s): 1

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)
To: DALLAS FT WORTH, TX (DFW)

Class: Economy
Status: Confirmed

Meal:

Aircraft: MCDONNELL DOUGLAS MD-80 JET

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)
To: AUSTIN, TX (AUS)

Class: Economy

Status: Confirmed

Aircraft: MCDONNELL DOUGLAS MD-80 JET

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

COLUMBUS OH 43215

Phone: 614 228-4600

Room Type: AEP-AMERICAN ELECTRIC POWER

Status: Confirmed

Client ID #:

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 CHĘCK-IN AT LEAST 2 HOURS PRIOR TO FLIGHT TIME AND BE PREPARED TO SHOW GOVERNMENT ISSUED PROOF OF IDENTIFICATION.

https://www.virtuallythere.com/new/printerFriendly.html?pnr=HWNGAU&name=NAPOLITANO&... 5/22/2006

PIZZA HUT

TERMINAL C GATE 19 UFW AIRPORT, TEXAS

CHECK:

1343

SERVER:

15079 LISA

DATE:

JUN04'06 1:00PM

CARD TYPE:

MASTERCARD

ACCT #:

XXXXXXXXXXX7481

EXP DATE:

XX/XX

AUTH CODE: RESEARCH:

062359 615517006503

NANCY J NAPOLITANO

SUBTOTAL:

7.16

SIGNATURE _____

PRINT NAME

CrCard: 7.92 MC Acct: XXXXXXXXXXX 7481

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

receipt.

RECEIPT TOTAL:

6/4/2006 9:46:04 AM



Delaware North Companies Austin Bergstrom Airport

Bookpeople Austin, TX 78719

QTY

Receipt #:

43164

6/4/2006 Assoc: chrystal

DCS

BOTTLE WATER LG ! LG

7449 400107 TROPICAL MIX

ORBIT SUGRESS GUI

400501

400101

3 Unit(s)

ITEM#

4331

7779

Store: Cashier:

PRICE

3.99

Subtotal: 8.250 % Tax:

Tend:

2402

005A chrystal

EXTPRICE

1.99

3.99

1.49

7.47

0.45

7.92

7.92

Auth: 067404

888

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

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

Term ID:0001 Ref #: 0003 Clerk: 1

Term ID:0001 Ref m: 0004 Clerk: 1

Sale

87:20:22

4.02

12.06:28

6.70

Sale

****************** Entry Method: Swiped Batch #:

monuma.Wi Entry Method: Swiped Batch #:

MASTERCARD 06/05/06

MASTERCARD 06/06/06

97 04:88

Inv#: 000003 Appr Code: 007073 Inv#: 000004 Appr Code: C22577

Total:

Total:

4.66

Customer Copy THANK YOU!

Customer Copy THANK YOU!

AEP CAFE-REG 14 AEP Cafe-Reg. 14 COLUMBUS OH 43215 614-716-2520 REG. 1:

Sale

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

Term ID:0001 Ref M: 0039 Clark: 1

Sale

Term ID:0001 Ref W: 0003 Clerk. 1

TREPPRETEREN 7481 Entry Nethod: Social Batch #: 575

Gerr Method: Sured tatch #: 576 MASTERCARD

MASTERCARD 06/06/06

06/07/06

Inv#: 000039 Appr Code: 088637 Inv#: 000003 Appr Code: 075907

Total:

4.71

57-27:52

Total:

Customer Cop.
THANK YOU!

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 XXXXXXXXXXXXXX7481 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

_	614-227-0013	06/07/2006
T	erver: Scott able 17/1 duests: 3 deprint #: 1	12:72 PM 30005 .
F (Fountain Diet Bison Spikebox Burger UnSweet Tea Chicken Skinny Dip Sand Fresh Squeezed Lemonade Bison Cordon Bleu Burger	1.99 -9.49 1.99 7.39 1.99 9.29
. І	Sub Total Tax	32.14 2.17
	Total	34.31
-	Mastercard #XXXXXXXXXXXXX7481 Auth:071831 Exp 1106	34.31 _00
-	+ Gratuity:	3031
	= Total:	<u> </u>
	Rhil Richtts x John William	
	Khil Kicketts X John William Navey Napolitano Balance Due	0.00
	i e	

Nobody but the cattle know

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

TERMITHAL I.B.:	12498002
MERCHANT H:	09000015°913006
ME.	591 14
SALE	
BATCH: 806123	DATE: JUM 08. 06
RZN: 080044788787	AUTH NO: 905774
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 H: 0006 Clark: 1

Sale

Entry Method: Swiped
Batch #: 577
MASTERCARD
06/98/96 07:24:34

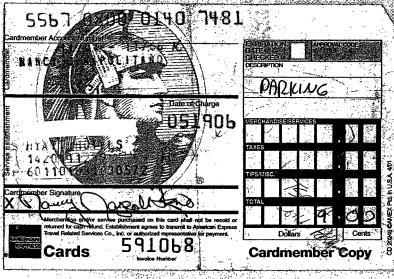
Inv#: 00000t Appr Code: 030283

Total:

4.62

Customer Copy THANK YOU!

208 Barton Springs Austin TX 78704 e Computer Number: shier: Anthony ID #405 ansaction Number: 115 tered: 05/19/2006 07:07 Eki ted: 05/19/2006 16439 Area 1 Rate: Iptal Fee: Cash: \$9,00 00 \$9.00 Thank you for choosing HYATT REGENCY ON TOWN LAKE Have a nice day



∞848175 Page 1 of 2

Expense Report

Napolitano, Nancy J



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 <u>CASH</u> 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	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, Nan	cy J	Company Paid 2	405.70		
				CA Deduction	0.00	
Purpose	AICPA Members	ship dues for 200	6-2007 and Testimony	Reimbursement	0.00	
	review in Tuisa	review in Tulsa for TCC/TNC rate case			0.00	
Reference	 					

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

7/28/2006

0.00 VAT

0.00

Taxes

TAX 174

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. Raid 2 /	185.0	
Provider	ALCPA *DUES LB	Guideline		Unlimited	Recovery on #1	0.00	
Fin. Code	103.12313.LEGAL.	03.12313.LEGAL.LGNANDA.G0001465.9210001.290954					
Description							

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	Į.	Jnlimited	Recovery on #2	0.00
Fin. Code	103.11524.LEGAL.EON01818	1.SP06000	901.9280002.280.	TX.510		
Description						
Taxes	TAX 174	0.00			0.00 VAT	0.00



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2006–2007 DUES NOTICE

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

	W00031	1, 2000 3021 31, 2001
-	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.

1 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

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

ш	CURRENT AICPA MEMBERSHIP RECORD	
ĸ	DESCRIPTION	AMOUNT BILLED
FOR YOUR	AICPA Institute Membership Voluntary Contributions: AICPA PAC Contribution Benevolent Fund Contribution AICPA Foundation/Minority	185.00 25.00 10.00 25.00
2		
⋖	TOTAL •	245.00 18

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)

Departs: 7:50am

Arrives: 8:45am

Class: Economy Seat: Check-In Required Status: Confirmed

Meal: Smoking: No Aircraft: BOEING 737-300 JET Mileage: 183

Flight Time: 55 minute(s)

Please verify flight times prior to departure

Tue, Aug 1: SOUTHWEST AIRLINES, WN 0010

From: DALLAS LOVE FLD, TX (DAL)

To: TULSA, OK (TUL)

Departs: 9:45am

Arrives: 10:40am

Class: Economy Seat: Check-In Required Status: Confirmed

Meal: Smoking: No Aircraft: BOEING 737-300 JET Mileage: 238

Flight Time: 55 minute(s)

Please verify flight times prior to departure

Thu, Aug 3: SOUTHWEST AIRLINES, WN 1996

From: TULSA, OK (TUL)

To: DALLAS LOVE FLD, TX (DAL)

Departs: 2:15pm

Arrives: 3:10pm

Class: Economy
Seat: Check-In Required
Status: Confirmed

Meal: Smoking: No

Aircraft: BOEING 737-300 JET Mileage: 238
Flight Time: 55 minute(s)

Please verify flight times prior to departure

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Thu, Aug 3: SOUTHWEST AIRLINES, WN 1608

From: DALLAS LOVE FLD, TX (DAL)
To: AUSTIN, TX (AUS)

To: AUSTIN, TX (AUS)

Class: Economy

Arrives: 4:45pm

Seat: Check-In Required

Status: Confirmed

Meal: Smoking: No Aircraft: BOEING 737-500 JET Mileage: 183

Flight Time: 50 minute(s)

Please verify flight times prior to departure

Departs: 3:55pm

0.00

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:

Extra MI/KM Rate Plan: 3 Days, 0 Hours USD MI/KM 40.00 UNI 0.00 Daily 0.00 13.35 UNL Extra Hour 40.00 UNL 0.00 Extra Day Mandatory Charges 40.49

HOTEL & LODGING

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

 Address: 3332 \$ 79TH E AVE
 Check In: Aug 1

 TULSA OK 74145
 Check Out: Aug 3

Phone: 918 622-4000 FAX: 918 665-2347

160.49

UNL

Room Type: AMERICAN ELECTRIC POWER Room(s): 1

Status: Confirmed Rate: 92.00 USD / night Client ID #: Corp Discount #: 550000044

Confirmation: 84638267

Approx Total Price

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.

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Expense Report

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

- 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 <u>CASH</u> 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? \mathbf{Y} / \mathbf{N}

				Expense	Report-
Number	83	Date	29 Aug 2006	Gross Claim	(491.18
Status	Approved			Personal	9.00
Period	14 Aug 2006 to	18 Aug 2006		Net Claim	491.18
Employee ID	0000093763	Division	103	Company Paid 1	0.00
Name	Napolitano, Nan	cy J		Company Paid 2	0.00
			CA Deduction	0.00	
Purpose		TCC/TNC Rate Cases - Travel to Tulsa for meetings with			491.18
•	Regulatory Accounting and Pricing&Costing			Total Recovery	0.00
Reference	İ				

Report Items			
Ivehout items	•		•

Num of Units		Miles	<u> </u>		Guideline per Unit	0.445
Taxes	TAX 174	0.00			0.00 VAT	0.00
Description						
Fin. Code	103.11524.LE	GAL.EON	018181.SP06000901.9280002.2	80TX	.510	
Provider		Guideline	· · · · · · · · · · · · · · · · · · ·		Recovery on #1	0.00
Exp.Type	Expense	Client			Comp. Paid 2	0.00
GL Code	510	Location	United States		Comp. Paid 1	0.00
Date	14 Aug 2006	Meth.Pmt.	Out of Pocket		Pers.Amount	0.00
Number	1	Category	Personal Auto Mileage 2006		Amount	481.94

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.LE	GAL.EON018	181.SP06000901.9280002.28	0TX.52	0	
Description	1					
Taxes	TAX 174	0.00			0.00 VAT	0.00

Expense Report

Page 1 of 2

Napolitano, Nancy J



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 <u>CASH</u> 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 /(IV



	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	0.00			
Name	Napolitano, Nancy J		Company Paid 2	1725.56				
				CA Deduction	0.00			
Purpose	rpose TCC/TNC Rate Case meetings in Tulsa and Columbus		Reimbursement	0.00				
•				Total Recovery	0.00			
Reference								

8/29/2006