UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE		OOF OF CLAIM	YOUR CLA Schedule/Claim ID	IM IS SCHEDULED AS:			
n re:	Case Nu	ımber:	Amount/Classificati				
American of Martinsville, Inc.	10-1	1638	\$230,265.90 Unsecured Contingent,Disputed,Unliquidate				
OTE: See Reverse for List of Debtors/Case Numbers/ important details. Other talaims under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim dministrative expenses arising after the commencement of the case. A "request ayment of an administrative expense may be filed pursuant to 11 U.S.C. § 503(a	tor " for .).	Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of		ted above constitute your claim as			
Name of Creditor and Address: the person or other entity to whom to owes money or property 2483895200 SUNRISE TECHNOLOGIES, INC. 111 N CHESTNUT STREET SUITE 300 WINSTON-SALEM, NC 27101		statement giving particulars. Check this box if you are the debtor or trustee in this case.	scheduled by the Debtor or pursuant to a filed claim. I you agree with the amounts set forth herein, and have other claim against the Debtor, you do not need to file proof of claim EXCEPT as stated below. If the amounts shown above are listed as Continge Unliquidated or Disputed, a proof of claim must be filed. If you have already filed a proof of claim with the				
		1		or BMC, you do not need to file again. E IS FOR COURT USE ONLY			
Name and address where payment should be sent (if different from	above).	RECEIVED		ex to indicate that this			
Name and address where payment should be sent (if different from	abovej.	1 o 2010		s a previously filed claim.			
		JUL 19 2010	Claim Number	er (if known):			
Payment Telephone Number (336) 7-22 - 6741		BMC GROUP	Filed on:				
1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 220	اع مار	90					
If all or part of your claim is secured, complete item 4 below; however, if all	of your clair	n is unsecured, do not complete i	item 4.				
If all or part of your claim is entitled to priority, complete item 5.	•						
Check this box if claim includes interest or other charges in addition to the	principal am	ount of claim. Attach itemized sta	tement of interest or	charges.			
2. BASIS FOR CLAIM:	(See ins	structions 3. LAST FOUR DI	GITS OF ANY NU	MBER BY WHICH CREDITOR			
	#2 and a	side \ IDEITTI TEO DED	TOR: ve scheduled accoun	t ae-			
Unpoid Cookelting Expenses		3a. Debior may have	ve scheduled account	. 43.			
Check the appropriate box if your claim is secured by a lien on property or a right of set off and provide the requested information		im Amount: \$im Amount: \$		NOT include the priority portion of ur claim here.			
Nature of property or right of setoπ:							
Real Estate Motor Vehicle Other				ne case fi included in secured claim, sis for Perfection:			
Value of Property: \$ Annual Interest Rate	e:	% if any: \$	Ba.	33 101 1 011001011.			
5. PRIORITY CLAIM Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.	Priority Cla	Up to \$2,600* of deposits tow services for personal, family,	or household use -11	U.S.C. § 507(a)(7).			
You MUST specify the priority of the claim: Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	[Taxes or penalties owed to g Other - Specify applicable pa * Amounts are subject to adju	ragraph of 11 U.S.C. ustment on 4/1/13 and	§ 507(a) (). d every 3 years thereafter			
Wages, salaries, or commissions (up to \$11,725*), earned within 180 days before filling of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).	;	SECTION 503(b)(9) Check this box if your page.	CLAIM \$	received by the debtor within 20 days S.C. § 503(b)(9)). Include the amount of			
Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).		such claim in the space for *	Amount entitled to priorit	y above.			
 6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 7. SUPPORTING DOCUMENTS: <u>Attach redacted copies of supporting documents</u>, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of evidence of perfection of a security interest. (See instruction 7 and definition of "redacted" on reverse side.) If the documents are not available, please explain. DATE-STAMPED COPY To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim. 							
The original of this completed proof of claim form must be se ACCEPTED) so that it is actually received on or before 4:00 p Non-Governmental Claimants OR on or before November 15,	ent by ma m, prevai	il or hand delivered (FAXES	S NOT st 6, 2010 for	THIS SPACE FOR COURT USE ONLY			
BY MAIL TO: BMC Group, Inc Attn: Barcalounger Corporation Claims Processing PO Box 3020 Chanhassen, MN 55317-3020	BY HAN BMC Gr Attn: Ba 18750 L Chanha	D OR OVERNIGHT DELIVERY T roup, Inc arcalounger Corporation Clair ake Drive East assen, MN 55317	ms Processing	Barcalounger 00106			
DATE SIGNATURE: The person filing this claim m	ust sign it. S	Sign and print name and title, if an	y of the creditor or o	ther person authorized to file this claim			

7-16-2010

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

ITEMS TO BE COMPLETED IN PROOF OF CLAIM FORM (IF NOT ALREADY PROPERLY FILLED IN)

Court, Name of Debtor, and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example Central District of California), the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the Claims Agent, BMC Group, some or all of this information may have been already completed.

 Case No
 10-11638
10-11637

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed: State the total amount owed to the creditor on the date of the Bankruptcy filing.

Follow the instructions concerning whether to complete item 4. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor: State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority. Claims entitled to administrative priority under 11 U.S.C. § 503(b)(9) should be asserted by filling in the appropriate information on this Proof of Claim form. All other administrative claims must be asserted by an appropriate "request" under 11 U.S.C. § 503(a) and should not be asserted on this Proof of Claim form.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Supporting Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d).

Do not send original documents, as attachments may be destroyed after scanning. Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attomey. Criminal penalties apply for making a false statement on a proof of

Date-Stamped Copy

Return claim form and attachments, if any. If you wish to receive an acknowledgement of your claim, please enclose a self-addressed stamped envelope and a second copy of the proof of claim form with any attachments to the Claims Agent, BMC Group, at the address on the front of this form.

Please read - important information: upon completion of this claim form, you are certifying that the statements herein are true.

Be sure all items are answered on the claim form. If not applicable, insert "Not Applicable."

DEFINITIONS

DEBTOR

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

CREDITOR

A creditor is any person, corporation, or other entity to whom the debtor owed a debt on the date that the bankruptcy case was filed.

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

PROOF OF CLAIM

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditor's claim). This form must be filed with the court-appointed Claims Agent, BMC Group, at the address listed on the reverse side of this page

SECURED CLAIM Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors.

The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

UNSECURED NONPRIORITY CLAIM

If a claim is not a secured claim it is an unsecured claim. A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full,

UNSECURED PRIORITY CLAIM Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other

INFORMATION

document showing that the lien has been filed or recorded.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

ONCE YOUR CLAIM IS FILED YOU CAN OBTAIN OR VERIFY YOUR CLAIM NUMBER BY VISITING www.bmcgroup.com



American of Martinsville
Noel Chitwood
Ekta Chopra
128 E. Church St.
Martinsville, VA 24112

Sunrise Technologies, Inc
111 N. Chestnut St.
Suite 300
Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.		TERMS	DUE DATE	PROJECT
4919	5/4/2009			Net 45	6/18/2009	
DES	SCRIPTION		D/	AYS	RATE per DAY	AMOUNT
Susan Mitchell - Project I AOM - 04/20-05/03	Manager/Fina	incial Consultant -		9	1,200.00	10,800.00
John Huggins - Supply C 04/20-05/03	hain Consult	ant - AOM -		4.5	1,200.00	5,400.00
Reimbursable Travel Exp 04/20-04/24	ense - Susar	n Mitchell -			440.41	440.41
Reimbursable Travel Exp 04/27-05/01	ense - Susar	ı Mitchell -			442.30	442.30
Reimbursable Travel Exp. 04/20-04/24	ense - John I	Huggins -			475.47	475.47
AOM Phase B Project			· · · · · · · · · · · · · · · · · · ·		Total	
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FORM TREFORM 1/01

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	Susan I	Mitchell		Consulting		111 N. Chesti	nut St. Winston S	alem, NC 27101		4/24/2009	
NAME				DEPARTMENT	Ī	LOCATION				DATE	<u>-</u>



50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



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Explar Martinst Rocky M	MILEAGE Ination of trip includ sville VA - AOM Mount, NC - AOM ACCC	Эвмих тичс	ER SUB non-food	\$ \$388.46	ADVANCES: CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE	230 CHECKS	130 DOCUMENT #		\$190.46	
Explar Martinst Rocky M	MILEAGE Ination of trip includ sville VA - AOM Mount, NC - AOM ACCC	Эвмих тичс	ER SUB	\$	ADVANCES: CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	230 CHECKS	130		\$190.46	\$244,30
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Explar Martinst Rocky M	MILEAGE Ination of trip includ sville VA - AOM Mount, NC - AOM ACCC	Эвмих тичс	ER SUB non-food	\$ \$388.46 \$53.84	ADVANCES: CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	230 CHECKS TO	DOCUMENT #		\$190.46	\$244.30
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Clympic Team



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711 Sutters Creek Blvd Rocky Mount, NC 27804 252-443~3838 Fax 252-443-6159 www.texassteakhouse.com

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MARTINSUILLE UA 24112

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DAILY GRIND COFFEE HOUSE & CAFE 10 E. Church St. Martinsville, VA 24112 (540) 682-0035

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Thank you for your patronage!
Receive a Free Specialty
Espresso Beverage When You
Load \$20 or More on Your Quick
Card or Gift Card!

--- Check Closed ---

\$6900 STOR FROM COTTAL SP 2373

Thank You! Sales Essectate, 31" STUART

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CUSTOMER SERVICE 1-800-210-9569

THANK YOU FOR SHOPPENG FURD LIGH JOIN OUR MYP PROGRAM TOBAY AND SAVE EVEN HORE!

THURSDAY IS CAKE DRY. DRIVER YOUN SHEET CAKE ON THURSDAY AND SAVE \$2 90

Good neighbors. Great prices.

PLEASE KEEP YOUR RECEIPT, IT IS REQUIRED FOR REFUNDS.



4/25/2009
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\$350.



50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



4/23/2009 PAGE 1					BONUS AL to applicable sales, occus safety deposit box is ava sonally liable in the ever ese charges. I have requ	O252025432 C/ upancy, or other tax silable for you in the ot that the indicated lested weekday deli ency. Lor someone	5:20:00PM AR es. Please do not leave a lobby. I agree that my l person, company or as very of USA TODAY. If i in my party, require spe	liability for this bill is isociation fails to pay refused, a credit of \$	not waived and agree for any part or the full
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04/20/2009 Merchant ID: 18:42:16

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CREDIT CARD

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CARD # INVOICE Batch #: **SERVER** Approval Code: XXXXXXXXXXXXXX1292 0025

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TOTAL AMOUNT

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ELIZABETH'S PIZZA 2365 VIRGINIA AVE COLLINSVILLE. VA 24078

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RANIAS RESTAURANT 147 E MAIN STREET MARTINSVILLE VA 24112 276-638-4462

Merchant ID: 000000994296 Term ID: 60141439 Ref #: 0001

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Sale

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HUGOS FOOD SPORT & SPI 10 E. CHURCH STREET . MARTINSVILLE, VA 24112

Merchant 10: 4451469464 Term ID: E04451469464 4451469464

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Inv H: 000002 Appr Code: 522643

Amount:

8.03

Tip:

Total:



BILL TO .

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112

REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.	TERMS	DUE DATE	PROJECT
4926	5/4/2009		Net 45	6/18/2009	
DE	SCRIPTION		HOURS	RATE per HR	AMOUNT
SDS-AOM_US004 - De	v_Refresh - 04/20	,	8	200.00	1,600.00
AOM Phase B Project				Total	\$1,600.00



BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112

REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.		TERMS	DUE DATE	PROJECT
4942	5/18/2009				7/2/2009	
DES	SCRIPTION		D/	AYS	RATE per DAY	AMOUNT
Susan Mitchell - Project I AOM - 05/04-05/17	Manager/Fina	incial Consultant -		8.5	1,400.00	11,900.00
John Huggins - Supply C 05/04-05/17	hain Consult	ant - AOM -		9.5	1,400.00	13,300.00
Rod Pruett - Technical Al Gary Bumgarner - Techn 05/04-05/17		1		5 2	1,600.00 1,600.00	,
Reimbursable Travel Exp 05/04-05/08	ense - Susar	n Mitchell -			361.01	361.01
Reimbursable Travel Exp 05/11-05/15	ense - Susar	n Mitchell -			443.67	443.67
Reimbursable Travel Exp 05/04-05/08	ense - John	Huggins -			334.05	334.05
Reimbursable Travel Exp 05/11-05/15	ense - John	Huggins -			453.42	453.42
Reimbursable Travel Exp 05/11-05/15	ense - Rod F	Pruett -			264.00	264.00
Reimbursable Travel Exp 05/04-05/08	ense - Gary l	Bumgarner -			138.60	138.60
AOM Phase B Project					Total	\$38,394.75



				DEPARTMEN	T	LOCATION				DATE	
	Susan	Mitchell		Consulting		111 N. Chestni	ut SI. Winston Sal	lem, NC 27101		5/8/2009	
INSTRUCTIO	NS:	Report due	within 10 days of	Iravel, with hotel bills ar	d other recepts attached	Any expenditure of \$25 00 or	more must be supported t	y a receipted bill Foreign	currency Translation		
		C RECURSIONS	must be cleany si	nown in the supporting o	ocumentation If reimbu	rsement for "Entertainment or I	Aral is claimed, the revers	er side of this form must b	e completed	1	Γ
	TRAVEL D	ATES		5/3/2009	5/4/200	9 5/5/2009	5/6/2009	5/7/2009	5/8/2009	5/9/2009	
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9 TIPS (o	ther than m	eals)							<u></u>		
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11 SUBTO	TAL LINES	S 1 - 10					\$312.56				\$312.
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13 LUNCH				-	6.94	\$13.06	\$19.97	~			630
14 DINNER	₹				\$8.48	1			···		\$39.
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16 OTHER						-					
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RANIAS RESTAURANT 147 E MAIN STREET MARTINSVILLE VA 24112 276-638-4462

Merchant ID: 000000994296 Term 10: 00141439 Ref #: 0003 Server ID: 1

Sale

Entry Method: Swiped ANEX

Amount:

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Tip:

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Batch#: 000332 Approd: Online

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45 E CHURCH ST MARTINSUILLE VA 24112

276-666-6655

MERC # .0000001546853

TERM ID: 00184024

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SALE

REF#: 0002 BATCH# 629 AUTH# 564435

AMOUNT

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CUSTOMER COPY

000002350 361 COMMONAEALTH BLVD, MARTINSVILLE, VA 24112 276-634-5335

Sale

Clerk ID: 38 ID: 082 Merchant ID: 000000072330 Bank ID: 1340 05/05/09

Batch#: 125001

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#0070 STORE PHONE: (276) 638-2373

Thank You! Sales Associate, IRENE BYRD

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3.49 B

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GARDEN SALAD 60Z LN CUIS LC GRILLED

SC 3597 PERRIER NIRL BBUY .39-B ***** 2.5% FOOD TAX . 21 *** BALANCE DUE 8.48

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> MVP CUSTOMER 46999999999 YOU ARE A VALUED MVP CUSTOMER

YOUR MVP SAVINGS TODAY WERE

THURSDAY IS CAKE DAY. ORDER YOUR SHEET CAKE ON THURSDAY AND SAVE \$2.00

Good neighbors, Great prices.

PLEASE KEEP YOUR RECEIPT. IT IS REQUIRED FOR REFUNDS.

WIN \$2,000 IN GROCERIES Complete Tell Food Lion survey. Receive 10 CHANCES TO WIN by visiting www.talktofoodlion.com * or 1 chance to win by * calling 1-877-884-5412. NO PURCHASE* NEEDED to enter, win, or improve chances to win sweepstakes. Must Take Survey Within 5. Days. * For details see sweepstakes rules * In store or website. ***********



50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



MITCHELL, SUSAN name 413 WESTBROOK DR address	room number: arrival date: departure date:	409/KXTD 5/4/2009 5:55:00PM 5/6/2009
RALEIGH, NC 27615 US	adult/child: room rate:	1/0 \$89.00
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 owed to 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.	RATE PLAN HH# 854967083 AL AA #4 BONUS AL	LV0 DIAMOND 6N403X6 CAR
5/6/2009 PAGE 1 my	or room. A safety deposit box is avail be held personally liable in the event ount of these charges. I have reque	pancy, or other taxes. Please do not leave any money or items of value unattended lable for you in the lobby. I agree that my liability for this bill is not waived and agree that the indicated person, company or association fails to pay for any part or their sted weekday delivery of USA TODAY. If refused, a credit of \$.75 will be applied ancy, I, or someone in my party, require special evacuation due to a physical disable.
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5/4/2009	BALANCE OF	\$89.00 \$3.56 \$0.89 \$3.56 \$0.89 \$1.78 \$190.46 \$0.00
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Got a child that plays sports? Hampton is the place for and their friends. See what we can offer your group by	r room blocks dedicated to y visiting hampton.com/gr	o your little star athlete oups.
for reservations call 1.800.hampt	on or visit us online at t	www.hampton.com
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INAME			DEPARTMENT	•	LOCATION				DATE	
	Susan Mitchel		Consulting			ut St. Winston S			5/15/2009)
INSTRUCTIO		f due within 10 days of its alions must be clearly sho	avel, with hotel bills and win in the supporting do	other receipts attached cumentation. If reimbu	L. Any expenditure of \$25.00 cursement for 'Entertainment or	or more must be supported Meal' is claimed, the revi	d by a recepted bill. Foreign	currency translation		
										T
ļ	TRAVEL DATES		5/10/2009	5/11/200	9 5/12/2009	5/13/2009	5/14/2009	5/15/2009	5/16/2009	1
NO.	EXPENSE ITEM		SUNDAY	MONDA	Y TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
1 AIR FA	ARE			ļ.,						
2 AUTO	RENTAL									
3 TAXi -	ETC.									
4 MILEA	GE @	\$0.550		ļ <u>.</u>		\$119.35	\$66.00	· · · · · ·		\$185.
5 GAS &	OIL					<u> </u>				-
6 PARKI	NG, TOLLS									
7 HOTEL	L					190.46	6		,	\$190.4
8 TELEP	HONE		• • • • • • • • • • • • • • • • • • • •							
9 TIPS (c	other than meals)									
10 OTHER	?									·
11 SUBTO	OTAL LINES 1 - 10					\$309.81	\$66.00			\$375,8
12 BREAK	FAST									
13 LUNCH	l			14.73	\$15.92	\$20.42	\$8.31		-	\$59.3
14 DINNER	R			\$8.48						\$8.4
15 ENTER	TAINMENT			-						\$0.40
16 OTHER	\			_						
17 SUBTO	TAL LINES 12 - 16	3		\$23.21	\$15.92	\$20.42	\$8.31			\$67.86
18 GRAND	TOTAL			\$23,21	\$15.92	\$330.23	\$74.31			\$443.67
		- 		EXPLANATION	OF TRANSPORT	ATION EXPENS	Ē			\$4436
TRAVEL	L FROM			Home			Horne			
TRAVEL	LTO			Martinsville	Martinsville	Martinsvilte	RockyMount	_		
TRAVEL	L TO				,	Home	Home			
AUTO M	MILEAGE				-	217	120			
					ADVANCES:		DOCUMENT #	DATE	AMOUNT	
Explan	ation of trip inc	luding city (ci	tles) visited:		CASH ADVANCE					
Martinsvi	ille VA - AOM				CASH					
	ches were for Susa		 		TRAVELERS	CHECKS				
Rocky M	lount, NC - Barcalor	unger			SUBTOTAL					
					COMPANY PAID					
			 -		AIRLINE					
					AUTO RENTA	L				
	·	*			HOTEL				\$190.46	
<u> </u>	1	COUNT NUMBE	ER		TELEPHONE					1
DIV	PLT DEP	BASE	SUB	\$	FOOD				\$59.55	ĺ
-			non-food	\$375.81	OTHER					
			food	\$67.86			OTAL ADVANCES			\$250.01
-	 				1				<u>-</u>	
					DUE COMPANY (ATTACH REFUN	ID)			
		+				М	IANUAL CHECK#			
<u> </u>				\$443.67	DUE EMPLOYEE	P	C VOUCHER #			\$193.66
PLOYEE SK	GNATURE				APPROVAL SIGN.	ATURE	<u></u>			
LIVER CHEC	CK TO				PRINT NAME & TI	TI E	 -			



Sale

Clerk ID: 30
10: 002
Aerchant ID: 000000072330
Bank IC: 1340
05:11:00
Batch#: 131001
Retrieval Ref #: 81170224 12:00:00 Entry Method: Swiped XXXXXXXXXXX1400 Inv #: 000005 Appr Code: 527583 14, 13 lotal:

Customer Copy

ARTS ETC 45 E CHURCH ST MARTINSUILLE UA 24112 276-666-6655 MERC # 0000001646853 TERM ID: 00184024

05/12/09 12:139 ***********1409 EXP: **** SALE REF#: 0003 BATCH# 597 AUTH# 547436

AMOUNT

\$15,92

TIP

TOTAL

APPROVED

CUSTOMER COPY



F-0031 #Party 1 SvrCk: 5 12:08p 05/14/09 COUNTER RIGHT

6.29 1 ZENSATION ZALAD 1 REG DRINK 1.49

Sub Total: 7.78 Tax: 0.538.31 05/14 12:07pTOTAL:

ZAXBY'S MISSION STATEMENT "CONSISTENTLY CREATE ENCORE EXPERIENCES THAT ENRICH LIVES ONE PERSON AT A TIME!!"

COASTER #: 0

AMT-TEND CHANGE TALLY 8.31 VISA 8.31 8.31

Memo: 004101,xxxxxxxxxxxx2712, 8.31 05/14/09 12:07

AMY C

DAILY GRIND COFFEE HOUSE & CAFE 10 E. Church St. Martinsville, VA 24112 (540) 632-0035

Cheese Red Pot Chowder Veggie Panini NO Pesto Unwind Club Panini Smoothie Medium Wildberry Table Number Subtotal Tax Order Total Cheese Red Pot Chowder 6. 6. 5. 6. 7. 8. 8. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9. 9.	Host: 25	(340) 001	. 0000	12:	/2009 17 PM 10025
Unwind Club Panini Smoothie Medium Wildberry Table Number Subtotal Tax Order Total AMEX #XXXXXXXXXXXXXXX1409 Auth:544643 Tip TOTAL	Cheese Red Veggie Pani	Pot Chowd	er		6.95
Table Number 0. Subtotal 18. Tax 2. Order Total 20.4 AMEX #XXXXXXXXXXXXXX1409 Auth: 544643 Tip :	Unwind Club P Smoothie Medi				6.95 4.50
Tax 2. Order Total 20.4 AMEX #XXXXXXXXXXXXXX1409 20: Auth:544643 Tip :					0.00
AMEX #XXXXXXXXXXXXX1409 20: Auth:544643 Tip :					18.40 2.02
Auth: 544643 Tip :	Order -	rotal		20	42
TOTAL :					20:42
TOTAL : TOTAL :	Tip :_				
	TOTAL :_	<u></u>	TOTAL	:	

Receive a free Specialty Espresso Beverage When You Load \$20 or More on Your Quick

--- Check Closed ---

Thank you for your patronage! Card or Gift Card!

SIGNATURE :_____

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



MITCHELL, S 413 WESTBI RALEIGH, NO	ROOK DR	name address	room number: arrival date: departure date:	414/KXTD 5/11/2009 6:42: 5/13/2009	00PM
US			adult/child: room rate:	1/0 \$89.00	
be placed on the accordantals, t	ount for the full anticip through your date of che	cin is attached to a bank or checking account, a hold will alled dollar amount to be owed to the hotel, including ck-out and such funds will not be released for 72 business the discretion of your financial institution.	RATE PŁAN HH# 854967083 AL AA # BONUS AL	LV0 3 DIAMOND 56N403X6 CAR	
Confirmation: 5/13/2009		1	to be held personally liable in the event amount of these charges. I have reque	lable for you in the lobby, I a that the indicated person, ci isted weekday delivery of US	do not leave any money or items of value unattended in gree that my liability for this bill is not waived and agree company or association fails to pay for any part or the full A TODAY. If refused, a credit of \$.75 will be applied to
		,	Please indicate yes by checking here: Signature;	Too, i, or someone in my pan	y, require special evacuation due to a physical disability.
date	reference	descriptio	n	amount	
5/11/2009 5/11/2009 5/11/2009 5/11/2009 5/12/2009 5/12/2009 5/12/2009 5/12/2009	490810 490810 490810 490810 490949 490949 490949 490949	EFFECTIV rned approximately 3560 HHonors poi ther stay at any of more than 3,000 Hi	ED TO AX *1409 E BALANCE OF Ints for this stay. To check to liton Family hotels worldwide	\$89.00 \$3.56 \$0.89 \$1.78 \$89.00 \$3.56 \$0.89 \$1.78 \$190.46 \$0.00	
	HiltonHHono Got a child tr		for room blocks dedicated to	your little ster athlet	
	and their frie	nat plays sports? Hampton is the place nds. See what we can offer your group for reservations call 1.800.ham			
account no.		o reservations con riscontain	date of charge	folio/check no.	om
card membe	r name		authorization	141502 Anit	ial
establishmen	it no. and locati	On establishment agrees to Iransmit to card holder	for payment Purchases & serv	ices	
			tips & misc.		
	of card member		total amount		
X			total amount	0.00	
The Hilton Fa	mily Hillon	CONRAD (D) E (FFE) Million	olon (files) teaments in exapper	(ii)	thanks



DELIVER CHECK TO

John Huggins

TRAVEL AND ENTERTAINMENT EXPENSE REPORT

DEPARTMENT LOCATION DATE NAME Consulting 111 N. Cheslnut St. Winston Salem, NC 27101 5/10/2009 John Huggins INSTRUCTIONS: Report due within 10 days of travel, with botel bills, and other recepts attrached. Any expenditure of \$25.00 or more must be supported by a recepted bill. Foreign currency translation calculations must be clearly shown in the supporting documentation. If rembursement for "Entertainment or Meal" is claimed, the reverse side of this form must be completed 5/4/2009 # 5/5/2009 TRAVEL DATES 5/3/2009 5/6/2009 5/7/2009 5/8/2009 5/9/2009 NO. EXPENSE ITEM SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY Salurday TOTALS AJR FARE 2 AUTORENTAL TAXI - ETC. 41.250 4 MILEAGE \$0.550 41.25 \$82.50 5 GAS & OIL PARKING, TOLLS 7 HOTEL \$95.23 \$95.23 \$190.46 8 TELEPHONE 9 TIPS (other than meals) 10 OTHER (Cleaners and Groceries) 11 SUBTOTAL LINES 1 - 10 \$136.48 \$95.23 \$41.25 \$272,96 12 BREAKFAST \$20.46 13 LUNCH \$20.46 14 DINNER \$29.77 \$10,86 \$40,63 15 ENTERTAINMENT 16 OTHER 17 SUBTOTAL LINES 12 - 16 \$10.86 \$20.46 \$29.77 \$61,09 \$61.71 \$166.25 \$106.09 18 GRAND TOTAL \$334.05 **EXPLANATION OF TRANSPORTATION EXPENSE** TRAVEL FROM home TRAVEL TO GSO TRAVEL TO home 75 75 AUTO MILEAGE DOCUMENT# ADVANCES: DATE **AMOUNT** Explanation of trip including city (cities) visited: CASH ADVANCE CASH TRAVELERS CHECKS Roundtrip drive to Martinsville SUBTOTAL COMPANY PAID Dinner 5/05 Susan and John **AIRLINE** Mastercard payments noted on receipts **AUTO RENTAL** Lunch 5/07 John and Gary HOTEL \$190.46 TELEPHONE ACCOUNT NUMBER BASE SU8 FOOD \$61.09 DIV PLT \$272.96 OTHER non-food **TOTAL ADVANCES** \$61.09 food \$251,55 DUE COMPANY (ATTACH REFUND) **MANUAL CHECK#** DUE EMPLOYEE PC VOUCHER# \$82.50 EMPLOYEE SIGNATURE John Huggins APPROVAL SIGNATURE



50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119 official sponsor U.S. Olympic Team



HUGGINS, JOH 111 NORTH CH SUITE 300 WINSTON-SALI US	ESTNUT STRE	eET name address	room number: arrival date: departure date: adult/child: room rate:	419/KXTE 5/5/2009 5/7/2009 1/0 \$89.00	5:28:00PM			
be placed on the accourt estimated incidentals, thro	nt for the full anticipat ough your date of check	n is attached to a bank or checking account, a hold will ted dollar amount to be owed to the hotel, including k-out and such funds will not be released for 72 business he discretion of your financial institution.	RATE PLAN HH# 810044663 AL DL #0 BONUS AL	LV0 DIAMOND 252025432 CAF	₹			
Confirmation: 8	5515213		your room. A safety deposit box is avail	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				
5/7/2009	PAGE 1	•	amount of these charges. I have reque my account. In the event of an emerge	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 3.75 will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by checking here:				
			signature:					
date	reference	descriptio	on	amou	nt de la companya de			
5/5/2009 5/5/2009 5/5/2009 5/5/2009 5/6/2009 5/6/2009 5/6/2009	HiltonHHond Got a child t	EFFECTI Fried approximately 3810 HHonors po other stay at any of more than 3,000 l	ce for room blocks dedicated	o your little sta	,			
'		for reservations call 1.800.har	mpton or visit us online at	www.hamp	oton.com			
account no.			date of charge	folio/chec	rk no.			
card membe	er name		authorization	141763	initial			
establishme	nt no. and loca	ation establishment agrees to transmit to card ho	older for payment purchases & se	rvices				
			taxes					
i			tips & misc.					
signature	of card member	er	4.4.1					
×			total amount	1	0.00			

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

05/05/2009

18:44:58

Merchant ID:

000000004340543

Terminal ID: 4450553540

01573118

CREDIT CARD

AMEX SALE

XXXXXXXXXXXXXX1292

CARD # INVOICE

0045

8atch #: SERVER

000273 0002

Approval Code: Entry Method:

508158 · Swiped

Approved:

Online

PRE-TIP AMT

\$24.77

ΠP

TOTAL AMOUNT

CUSTOMER COPY

PIGS R US 1014 LIBERTY ST MARTINSVILLE VA 24112 276-632-1161

Merchant ID: 068002066598 Jers 10: 00172120 Ref #: UUSE

Server 10: 1

Sale

***********1292

AMEX

Entry Method: Swiped

Amount:

8.86

lip:

Total:

05/06/09

19:07:01

r Code: 503286

Batch#: 000311

HUGOS FOOD SPORT & SPI 10 E. CHURCH STREET MARTINSVILLE. VA 24112

Merchant ID: 4451469464 Term 10: E04451469464

£02 18 85

4451469464

Sale

AMEX

XXXXXXXXXXXX1292

Entry Method: Swiped

Appryd: Online

Batch#: 000067

05/07/09

12:59:57

Inv #: 500805 Appr Code: 584496

Amount:

16.46

[ip:

Total:



∤AME Iohn Hugoi:				DEPARTMENT	404	LOCATION	d C4 140 C	-l NO 07:5:	7.2.4	DATE 5/17/2009	
lohn Huggi NSTRUCTIO		Dated &		Consulting	AOM	111 N. Chestnut St. Winston Salem, NC 27101 5/ ny expendiuse of \$25.00 or more must be supported by a recepted bill. Foreign currency translation					
NS IN OCTIO		calculations	musi be clearly shi	own in the supporting doci	ther receipts attached. Any umentation. If remburseme	expenditure of \$25 00 or mo int for *Entertainment or Meal	re must be supported by f is claim ed, the reverse	a receipted bill. Foreign curre side of this form must be com-	ncy translation pleted		
	TRAVEL 0.	ATES		5/10/2009	5/11/2009	# 5/12/2009	5/13/2009	5/14/2009	5/15/2009	6/16/2009	
VO.	EXPENSE	ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Saturday	TOTALS
1 AIR FA	RE	· - · · · · · ·		ļ					18 VI-		
2 AUTO	RENTAL							_			
3 TAXI-	ETC.			<u> </u>							
4 MILEA	GE	@	\$0,550)	\$41.25			41.25			\$82
5 GAS &	OIL							_			
6 PARKI	NG, TOLLS				=	<u> </u>					. <u>.</u>
7 HOTE					95.23	\$95.23	\$95.23				\$285
8 TELEF	HONE			ļ <u>.</u>							
9 TIPS (c	other than m	eals)									
10 OTHER	R (Cleaners	and Groc	eries)	ļ							
11 SUBTO	TAL LINES	1 - 10			\$136.48	\$95.23	\$95.23	\$41.25			\$368.
12 BREAK	FAST										
13 LUNCH] 							\$6.49	_		\$6,
14 DINNE	२				\$36.74	\$30.58	\$11.42				\$78.
15 ENTER	TAINMENT	···						ļ			
6 OTHER							<u>_</u>				
_	TAL LINES	12 - 16			\$36.74	\$30.58	\$11.42	\$6.49			\$85,
8 GRANE	TOTAL				\$173.22	\$125.81	\$106.65	\$47.74	<u> </u>		\$453.4
					EXPLANATION (F TRANSPORTA	TION EXPENS	E			54 50
TRAVE	L FROM	home			<u></u>						
TRAVE	L TO	GSO									
TRAVE	L TO	home									
AUTO N	MILEAGE		J		75			75			
						ADVANCES:		DOCUMENT#	DATE	AMOUNT	
Explan	ation of tr	ip includ	iing city (c	lties) visited:		CASH ADVANCE		<u></u>			
						CASH					
Roundtr	ip drive to M	larlinsville	•			TRAVELERS (CHECKS				
						SUBTOTAL					
Dinner 5	5/02 and 5/1	3 Susan a	ınd John			COMPANY PAID					
Masterc	ard paymen	ts noted o	n receipts			AIRLINE					
						AUTO RENTAL	-				
						HOTEL				\$285.69	
		ACC	MUN THUO	BERr		TELEPHONE					
DiV	PLT.	DEPT	8ASE	SUB	\$	FOOD				\$73.81	
				non-food	\$368,19	OTHER					
				food	\$85.23			TOTAL ADVANCE	s –		\$359,50
	_	İ				DUE COMPANY (A	ATTACH REFU	ND): -			
							_	BANILAL OUTOWA			
								MANUAL CHECK #			
					3453.42 I	DUE EMPLOYEE		PC VOUCHER#			\$93.92
PLOYFES	IGNATURE	John Hud	ngins			DUE EMPLOYEE					\$93.92



50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 . FAX 276 -647-4119

official sponsor U.S. Olympic Team



HUGGINS, JOHN 111 NORTH CHESTNUT STREET SUITE 300 WINSTON-SALEM, NC 27101	room number: arrival date: departure date:	200/KXTE 5/11/2009 5/14/2009	6:41:00PM		
US ·	adult/child: room rate:	1/0 \$89.00			
If the debt/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 owed to 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.	RATE PLAN LV0 HH# 810044663 DIAMOND AL DL #0252025432 BONUS AL CAR				
5/14/2009 PAGE 1	Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended 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 fiamount 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 due to a physical disability Please indicate yes by checking here:				
date reference description		amo	ınt		
5/11/2009 490769 GUEST ROOM 5/11/2009 490769 STATE TAX 5/11/2009 490769 COUNTY TAX 5/12/2009 490906 GUEST ROOM 5/12/2009 490906 STATE TAX 5/12/2009 490906 COUNTY TAX 5/12/2009 490906 OCCUPANCY TAX 5/13/2009 491050 GUEST ROOM 5/13/2009 491050 STATE TAX 5/13/2009 491050 COUNTY TAX 5/13/2009 491050 OCCUPANCY TAX WILL BE SETTLE! EFFECTIVE You have earned approximately 5590 HHonors points stay or any other stay at any of more than 3,000 Hills HiltonHHonors.com Got a child that plays sports? Hampton is the place for and their friends. See what we can offer your group to the stay at any of more than 3,000 Hills and their friends. See what we can offer your group to the stay at any of more than 3,000 Hills and their friends. See what we can offer your group to the stay at any of more than 3,000 Hills and their friends. See what we can offer your group to the stay at any of more than 3,000 Hills and their friends. See what we can offer your group to the stay at any of more than 3,000 Hills and their friends. See what we can offer your group to the stay at any of more than 3,000 Hills and their friends. See what	BALANCE OF Is for this stay. To check we confidence on Family hotels worldwide for room blocks dedicated to	o vour little sta	;		
for reservations call 1.800.hamp	í		oton.com		
account no.	date of charge	folio/chec	k no.		
card member name	authorization	141937	Anitial		
establishment no. and location establishment agrees to transmit to card holder f	or payment purchases & ser	vices			
	taxes				
	tips & misc.				
signature of card member	total amount				
X			.00		

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

Merchant ID:	00000004340543	
Terminal ID:	01573118	
4450553540		
	CDEDTE CARD	

05/12/2009 Merchant ID: Terminal ID:

18:46:54 000000004340543

4450553540

01573118

CREDIT CARD AMEX SALE

CREDIT CARD AMEX SALE

CADD #	VVVVVVVVVVVVVVVV
CARD #	XXXXXXXXXXXXX1292
INVOICE	0036
Batch #:	000279
SERVER	0002
Approval Code:	527481
Entry Method:	Swiped
Approved:	Online
PRF-TIP AMT	¢30.74

CARD #
INVOICE
Batch #:
SERVER
Approval Code:
Intry Method:
pproved:
PRF-TTP AMT

XXXXXXXXXXXXXX1292 0035 000280 0002 565638 Swiped Online

AKE ITA HILI

LKE-ITL VIALI

\$25,58

TTP

05/11/2009

19:37:42

ΠP

5-00

TOTAL AMOUNT

\$76.00 \$76.74

TOTAL AMOUNT

CUSTOMER COPY

CHINA BUFFET 1090 MEMORIAL BLUD MARTINSVILLE, VA 2411

TERMINAL ID. : 01149561 HERCHAHL H: 323545438992 MC . SVR. 1 *************** SALE BATCH: 800629 OATE: May 13, 09 INU: 355135 SEQ: 0010 AUTH:865368 BASE \$9.42 TIP

Store #16338 Subway Control Subway Sandwiches & Salads 937 E. Church Street MARTINSVILLE 276-634-5667 276-634-5667 Trans# 111 Clerk 15 Dwr 1 TRDT 051409
Receipt # 0000157468 Reg-ID REG-MAIN
--- ITEM --- QTY PRICE MEMO PLU
ChTeri6 6r 1 TD\$ 3.47FFITML 18262
DRK-210z 1 T\$ 1.39FFITML 10002 TD\$ T \$ T \$ DRK-21oz CHIPS 0.99FFITML 10020 SUBTOTAL \$ 5.85 Sales Tx 0.64 TAKE-OUT **TOTAL \$
CredCardAMT TEND \$ 6.49 6.49 CHANGE DUES 0.00 warm up with a hot bowl of

soup!! Approval No: 526849

Reference No: 913418402566 Account No: *********1292 Card Issuer: AMERICANEXPRESS Amount: \$6.49

TOTAL

JOHN HUGGINS

CUSTOMER COPY

, 911 42

Duntant &L. ! I



NAM					DEPARTMENT	•	LOCATION				DATE	
	Rod Pruett Consulting INSTRUCTIONS: Report due within 10 days of limited with horse between other presents when horse							Salem, NC 27101		5/18/2009	 	
INST	RUCTION	VS:	Report dus calculation	e within 10 days of tre s must be clearly sho	ivel, with hotel bills and win in the supporting do	other recepts attached. cumentation. If reimburs	Any expenditure of \$25,00 or r ement for 'Entendaryment or M	nore must be supported be ealf is claimed the revers	ly a receipted bill. Foreign curre ie sde of this form must be cor	ency translation		
		TRAVEL (5/10/2009	5/11/200	· _ · _	5/13/2009	5/14/2009	5/15/2009	5/16/2009	
NO.	[EXPENSE	ITEM		SUNDAY	MONDA	Y TUESDAY	WEDNESDA	Y THURSDAY	FRIDAY	SATURDAY	TOTALS
1	AIR FA	RE								-		101720
2	AUTO F	RENTAL	-									
3	TAXI - E	ETC.									 	
4	MILEAC	3E	@	\$0.550		\$66.00	\$66.00	\$66.00	\$66,00			\$264.0
5	GA\$ & (OIL										\$204.0
6	PARKIN	IG, TOLLS	3									
7	HOTEL											
8	TELEPH	ONE										
9	TIPS (ot	ther than r	neals)									
10	OTHER	(Copy Cl	arges)			<u> </u>				-		
11	SUBTO	TAL LINE	S 1 - 10			\$66.00	\$66,00	\$66,00	\$66.00		,	\$264,00
12	BREAK	AST				<u> </u>						······································
13	LUNCH					ļ						
-f	DINNER											
	-	AINMEN	<u> </u>						<u> </u>			
	OTHER				<u> </u>							
		AL LINES	12 - 16		 -	 						
18	GRAND	IUIAL	<u> </u>			\$66.00	\$66,00	\$66.00	\$66.00	<u> </u>		\$264.00
—		FROM				T	OF TRANSPORT	ATION EXPENS	E			\$264 00
	TRAVEL					W-S	W-S	W-S	W-S			
	TRAVEL					Martinsville	Martinsville	Martinsville	Martinsville			
	RAVEL AUTO M!			_	 .	W-S	W-S	W-S	W-S			
	1010#1					120	120	120	120			
,	Evalene	tion of t	in Includ	ling olby folt	les) visited:		ADVANCES:		DOCUMENT#	DATE	AMOUNT	
•	-xpiaiia		ip iliciuu	mig city (cit	iesį visiteu.		CASH ADVANC	<u> </u>	!			
_	merican	of Martins						CLIECKS				
-	411CHOOT	OI WISHING			- w		TRAVELERS SUBTOTAL	CHECKS	**			
-							COMPANY PAID					
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ſ			ACC	BMUN TNUO	ER		TELEPHONE					
	DIV	PLT	DEPT	BASE	SUB	\$	FOOD		-			
					non-food	\$264.00	OTHER		- 			
					lood				TOTAL ADVANCES			
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F							DUE COMPANY (ATTACH REFU	ND)			ļ
		•			-			·	ANUAL CHECK#			
						\$264 00	DUE EMPLOYEE		C VOUCHER#			\$264,00
IPL O	YEE SIG	SNATURE					APPROVAL SIGN		· · · · · · · · · · · · · · · · · · ·			
								·				
LIVE	R CHEC	K 10					PRINT NAME & TI	TLE R	od Pruett			



NAME					DEPARTME	NT	LOCATION				DATE			
Gary E	3umgarr	er			Consulting		111 N. Ches	lnut St. Winsto	in Salem, NC 27	101	5/18/200	9		
INSTRU	CTIONS:		Report due with calcutations mu	on 10 days of the of the clearly sho	wai, with hotel bilts and ob was in the supporting docs	her receipts ettached. An enertation, Kreimburser	expensiture of \$25 00 or m ent for Ententainment or Ma	ore must be supported by rai" is claimed, the reverse	a receipted bell. Foreign curri	ency translation replated.				
					Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	T		i
	TRA	VEL DA	ATES -		5/3/2009	5/4/2009	5/5/2009	5/6/2009	5/7/2009	5/8/2009	5/9/2009		Paid by	- .
NO.	EXF	ENSE	TEM		<u> </u>		ļ 					TOTALS	Sunrise	
1 A	IR FAR	Ε						<u> </u>						_
2 A	UTO RE	ENTAL									T		•	_
3 T.	AXI - E	TC.						1			1		,	_
4 M	ILEAGE	=	@	\$0.550				}	\$138.60			\$138.60	\$138.60	-
5 G	AS & O	IL.				1						† <u> </u>		- ,
6 P.	ARKING	3, TOLL	s		 	Ţ <u> </u>			1					-
7 H	OTEL				Ţ									_
8 T	ELEPH	ONE												-
9 1	IPS (oth	ner than	meals)			1			1		T	 		-
10 0	THER	(Copy C	harges)											-
11 S	TOTEU	AL LINI	ES 1 - 10						\$138.60			\$138,60	\$138.60	\$138.60
12 8	REAKF	AST											2 8 7	
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14 D	INNER													•
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			ES 12 - 16				<u> </u>				<u> </u>			
18 G	RAND	TOTAL				<u></u>	<u> </u>	}	\$138.60		<u> </u>	\$138.60	\$138.60\ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\$138.60
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 -	RAVEL					ļ	 		Martinsville		l	}		
	RAVEL				<u> </u>			<u> </u>	Hickory,NC		ļ <u>.</u>	}	}	
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}				_			ADVANCES:		DOCUMENT #	DATE	AMOUNT	}		
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۱ ا	HC) y x	1120				CASH		 					
<u> </u>								RS CHECKS	 		<u> </u>			
} _						-	SUBTOTAL		 		<u> </u>	1		
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- }							AUTO DEA	(TA)	 		 	ļ		
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ļ -	+		├		food	\$130.00	OTTLEN		TOTAL ADVA	UCES -				
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} }-			 		<u> </u>	 -	502 0011174		MANUAL CHE	CK#			}.	•
-			 			\$138.60	DUE EMPLOY		PC VOUCHER			\$138.60		
EMPI (JAEE 6	IGNATU	JRF	Gary Bur	mnarner		APPROVAL S	IGNATURE						
							PRINT NAME							
DELIVI	こべいかに	CAIU	,	Gary Bur	ព្យុងអម		FRING NAME	O 11117E				1		



BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112 REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

INVOICE NO.	INVOICE NO. DATE		TERMS	DUE DATE	PROJECT
4960	5/18/2009		Net 45	7/2/2009	
	SCRIPTION		HOURS	RATE per HR	AMOUNT
SDS-AOM_AR_102 - Sal 05/04-05/17 SDS-AOM_AR_103 - De			12	75.00 75.00	
AOM Dynamics AX Impl	lementation			Total	\$2,550.00



BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112 REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

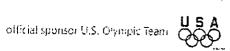
13.13.13.13.13								
INVOICE NO.	DATE	P.O. NO.		TERMS	DUE DATE	PROJECT		
4980	6/1/2009	·		Net 45	7/16/2009			
DE	ESCRIPTION		D/	YS	RATE per DAY	AMOUNT		
Susan Mitchell - Project AOM - 05/18-05/31	Manager/Fina	incial Consultant -		8	1,400.00	11,200.00		
John Huggins - Supply 05/18-05/31	Chain Consult	ant - AOM -		9	1,400.00	12,600.00		
Gary Bumgarner - Tech 05/18-05/31	nical Architect	- AOM -		4	1,600.00	6,400.00		
Reimbursable Travel Ex 05/18-05/22	pense - Susar	Mitchell -			478.12	478.12		
Reimbursable Travel Ex 05/25-05/29	pense - Susar	Mitchell -			290.85			
Reimbursable Travel Ex 05/18-05/22	pense - John I	luggins -			567.74			
Reimbursable Travel Ex 05/25-05/29	pense - John I	luggins -			506.21	506.21		
Reimbursable Travel Ex 05/25-05/29	pense - Gary E	Bumgarner -			424.29	424.29		
					_			
AOM Phase P Project								
AOM Phase B Project				-	Total	\$32,467.21		



	r	Mitchell		DEPARTMEN	•	LOCATION				DATE	
		Mitchell		Consulting			ul St. Winston Sal			5/22/200	9
INSTRUCTIO	JNS:	Report due calculations	within 10 days of it imust be clearly sh	ravel, with hotel bills an lown in the supporting o	id other receipts attached. A documentation. If reimburse	Any expenditure of \$25.00 or ement for 'Entenanment or k	more must be supported t deal' is claimed, the revers	by a receipted bill. Foreig se side of this form must	n currency translation be completed		
	T041/51 0	4750		<u> </u>		fuerrana					
	TRAVEL D			5/17/2009		5/19/2009	5/20/2009	5/21/2009	5/22/2009	5/23/2009	
NO.	EXPENSE	TEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTAL
1 AIR FA											
2 AUTO	RENTAL			ļ <u>. </u>							
3 TAXI -	ETC.			ļ							}
4 MILEA	(GE	@	\$0.550				\$119.35		\$114,95		\$23
5 GAS &	OIL										<u> </u>
6 PARKI	NG, TOLLS	1									
7 HOTEL	L						190.46	·			\$19
8 TELEP	HONE										
9 TIPS (d	other than m	ieals)								-	<u>.</u>
10 OTHER	₹										
11 SUBTO	TAL LINES	3 1 - 10					\$309.81		\$114.95		F424
12 BREAK	(FAST								V111,00		\$424
13 LUNCH	1				19,31	\$16.29	\$17.76				
14 DINNER	R					7.0.20	*******		<u></u>		\$53
15 ENTER	TAINMENT				 				-		 -
16 OTHER		···	+								
	TAL LINES	12 - 16			\$19.31	£16.30	647.70	· -			_
	TOTAL				\$19.31	\$16.29 \$16.29	\$17.76 \$327.57		5444.05		\$53.
					<u> </u>	OF TRANSPORTA			\$114.95		\$478.
TRAVEL	I FROM				Home	OF TRANSPURIA	TION EXPENSE	· · · · · · · · · · · · · · · · · · ·	<u></u>		\$47
TRAVEL					Martinsville	Martinevilla I	Aortinavilla		Home		
TRAVEL					Marnizatie		Martinsville		Martinsville		
	AILEAGE				-		lome	, [Home 209		
			I		1	!	247		2174 í		
					J	ADVANCES:	217	DOGULEUT A			
Evolan	ation of t	dn includ	Ing city (c	itlac) vicitad	J	ADVANCES:		DOCUMENT #	DATE	AMOUNT	
			ling city (c	itles) visited	:	CASH ADVANCE		DOCUMENT #		AMOUNT	
Martinsvi	rille VA - AO	M		itles) visited		CASH ADVANCE		DOCUMENT #		AMOUNT	
Martinsvi		M		itles) visited	: 	CASH ADVANCE CASH TRAVELERS C		DOCUMENT #		AMOUNT	
Martinsvi	rille VA - AO	M		itles) visited		CASH ADVANCE CASH TRAVELERS C SUBTOTAL		DOCUMENT #		AMOUNT	
Martinsvi	rille VA - AO	M		itles) visited		CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID		DOCUMENT #		AMOUNT	
Martinsvi	rille VA - AO	M		itles) visited		CASH ADVANCE CASH TRAVELERS O SUBTOTAL COMPANY PAID AIRLINE	CHECKS	DOCUMENT #		AMOUNT	
Martinsvi	rille VA - AO	M		itles) visited		CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL	CHECKS	DOCUMENT #			
Martinsvi	rille VA - AO	or Susan a	nd John			CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL	CHECKS	DOCUMENT #		\$190.46	
Martinsvi	rille VA - AO	or Susan a	ndol bn	BER		CASH ADVANCE CASH TRAVELERS O SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE	CHECKS	DOCUMENT #		\$190.46	
Martinsvi	rille VA - AO	or Susan a	nd John	BER SUB	\$	CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	CHECKS	DOCUMENT #			
Martinsvi	rille VA - AO	or Susan a	ndol bn	BER SUB non-food	\$ \$424.76	CASH ADVANCE CASH TRAVELERS O SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE	CHECKS		DATE	\$190.46	
Martinsvi	rille VA - AO	or Susan a	ndol bn	BER SUB	\$	CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	CHECKS	DOCUMENT #	DATE	\$190.46	\$243.82
Martinsvi	ches were f	or Susan a	ndol bn	BER SUB non-food	\$ \$424.76 \$53.36	CASH ADVANCE CASH TRAVELERS O SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	CHECKS	OTAL ADVANCE	DATE	\$190.46	\$243.8:
Martinsvi	rille VA - AO	or Susan a	ndol bn	BER SUB non-food	\$ \$424.76 \$53.36	CASH ADVANCE CASH TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	CHECKS TO	OTAL ADVANCE	DATE	\$190.46	\$243.82
Martinsvi Note lund	ches were f	or Susan a	ndol bn	BER SUB non-food	\$ \$424.76 \$53.36	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	TO STACH REFUND	OTAL ADVANCE	DATE	\$190.46	\$243.82
Martinsvi	ches were f	or Susan a	ndol bn	BER SUB non-food	\$ \$424.76 \$53.36	CASH ADVANCE CASH TRAVELERS O SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	TO STACH REFUND	OTAL ADVANCE	DATE	\$190.46	\$243.82 \$234.30

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119



RALEIGH, NC 27815 US HIR CONTROL MINUTERS AND THE CONTROL AND THE CONTROL OF THE PROPERTY OF	departure date: aduis/child room rate: RATE PLAN	1/0 \$89.00
	RATE PLAN	
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	raportu A (20v), Gepotat bo ku supa e pielo perso (20v) jegaje ki pre event	ourly, or care trained. Hence do not leads any maney or forms of votur unattended received on the impay it agree that any labition for this bill is too wared and ag- ther the indicates Leason, compan, or establish talk to pay for any part of the
5/20/2009 PAGE 1 1 1 1 1 1 1 1 1 1	utst ut their si broes, i neve regue	sted weet day to very of USA TOBAY. I reliable a fromical 1-15 will be appared BIG-1-7150T-6071-71-77 DBTV from the species of an icanon of section proporation still
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5/18/2009 491489 GUEST ROOM 5/18/2009 491489 COUNTY TAX 5/18/2009 491489 COUNTY TAX 5/18/2009 491586 GUEST ROOM 5/19/2009 491586 STATE TAX 5/19/2009 491586 COUNTY TAX 5/19/2009 491586 COUNTY TAX 5/19/2009 491586 COUNTY TAX 5/19/2009 491586 COUNTY TAX WILL BE SETTLED EFFECTIVE 8 You have earned approximately 3560 HHonors points stey or any other stay at any of more than 3,000 Hilton HiltonHHonors.com Got a child that plays sports? Hampton is the place for and their friends. See what we can offer your group by	Ior this stay. To chack you family hotels worldwide	o veur lilla siar othinia
for reservations call 1.800.hampto	or visit us online at v	www.hampton.com
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	taxes	
signature of card member	tips & misc.	
x	total amount	
The Hilton Family		Hillon Hildonoxs thanks.

ARNIAS RESIRVACAN MARSINSVILLE VA PALLIZ POR ESTA PALLIZ CONTROL DE COMMONSARAN Service DE COMMONSARAN SERVICE DE COMMONS

Sale

AMES Entry Method: Surped

Acount: 14.76

Total: 3.00

OS/20/09 12:51:50

Apprel : 521597

Batcha: 000351

Custoner Coo.
THANK YOU!

CYTT VCYTR LEIVER AOM AOME BECEIAL

Arts esta inc 45 FAST CHURCU STREET MARTINSVILLE VA 24°12 278 896 8885

18.6 05-19-2008 12:07 080aph

DATLY GRIND COFFEE HOUSE & DAFE 10 E. Church St. Mantinaville, VA 24112 (540) 632-0035

Host: 33			05/18/2009 12:14 PK 10033
1/2 Panji 7 Bean Veggje NO Pa	Panini		6.95
	lub Panini The Day		6.93 3.50
Table Num	ber		0.00
Subtotal Tax			17.40 1.91
Order	Total		19.31
AMEX #XXX Auth:56	XXXXXXXX1469 5488		19.31
ī îp	!		
TOTAL	:	TOTAL	:

Thank you for your patronage!
Receive a Free Specialty
Espresso Beverage When You
Load \$20 or More on Your Duick
Card or Gift Card!

SIGNATURE :____

--- Sheak Slosed ---



NAME				DEPARTMEN	ſ	LOCATION	-	— <u>*</u>		DATE	
	Susan	Mitchell		Consulting		111 N. Chestn	ut St. Winston Sa	lem, NC 27101		5/29/2009	
INSTRUCT	TIONS:	Report due	within 10 days of to	avel, with hotel bills an	d other recepts attached	Any expenditure of \$25.00 or rsement for "Enterlainment or	w more must be supported	by a receipted bill. Foreign	currency translation		
							With the business, the legge	se soe or the family files, ge	Compered]	
	TRAVEL D	ATES		5/24/2009	5/25/200	9 5/26/2009	5/27/2009	5/28/2009	5/29/2009	5/30/2009	
NO.	EXPENSE	ITEM		SUNDAY	MONDA	Y TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
1 AIR	FARE										
2 AUT	TO RENTAL										
3 TAX	KI - ETC.										
4 MiLE	EAGE	@	\$0 550				\$114.95	\$114.95	•		\$229.9
5 GAS	S & OIL										
6 PAR	RKING, TOLLS								-		
7 HOT	TEL						_			1	
8 TEL	EPHONE										
9 TIPS	S (other than m	eals)									
10 OTH	:ER										-
11 SUB	STOTAL LINES	3 1 - 10					\$114.95	\$114.95	.		\$229.9
12 BRE	AKFAST										
13 LUN	ICH						\$29.56	\$31.39			\$60.9
14 DINA	NER			·-··							
15 ENT	ERTAINMENT								-		
16 OTH	ER						· · · · · · · · · · · · · · · · · · ·				• • • • • • • • • • • • • • • • • • • •
17 SUB	STOTAL LINES	12 - 16					\$29,56	\$31,39			\$60.95
18 GRA	ND TOTAL						\$144.51	\$146.34			\$290,85
					EXPLANATIO	N OF TRANSPORT	ATION EXPENSI	E			\$290 B
TRAN	VEL FROM						Home	Home			
TRA	VEL TO		Ì				Martinsville	Martinsville	•		
TRA	VEL TO						Home	Home			
AUTO	O MILEAGE						209	209			
						ADVANCES:		DOCUMENT #	DATE	AMOUNT	
Expl	lanation of t	rip Includ	ding city (d	cities) visited):	CASH ADVANC	E				
Martii	nsville VA - AC	M				CASH					
Note	lunches were t	or Susan,	John and Ga	ıry		TRAVELERS	CHECKS]	
						SUBTOTAL					
						COMPANY PAIL	D				
						AIRLINE					
						AUTO RENTA	AL.				
						HOTEL					
		ACC	MUN TNUO	BER		TELEPHONE					
יום	V PLT	DEPT	BASE	SUB	\$	FOOD				\$60.95	
				non-food	\$229,90	OTHER					
				food	\$60.95		1	TOTAL ADVANCE	· 8		\$60.95
		1				DUE COMPANY	(ATTACH REFUI	ND)			-
						++		MANUAL CHECK	.		
		 			1250 85	DUE EMPLOYER		C VOUCHER#			\$229.90
uni ovre	C CICHATUST		<u> </u>								J22J,JU
	E SIGNATURE	-				APPROVAL SIG					
ELIVER C	CHECK TO					PRINT NAME &	TITLE				

EL PARRAL REST #2 670 COMMONWEALTH BLU MARTINSUILLE UA 2411

8-A-L-E-5 D-R-A-F-F 7258790 009433780802

45 E CHURCH ST

ARTS ETC

REF: 8913 SENVENT CO TYPE: ANEX TR TYPE: PURCHASE DATE: MAY 28, 89 12:51:38 SERVER: 2

\$31.39 AMOUNT

TIP

TOTAL

EXP: ##/## ACCT: AP: 583186 NAME: SUSAH MITCHELL CARDMENGER ACKNOMEDGES RECEIPT OF 6000S AND/OR SERVICES IN THE AMOUNT OF THE 101AL SHOWN HEREON AND AGREES TO PERFORM THE OBLIGATIONS SET FORTH BY THE CARDMENBER'S AGREEMENT WITH THE ISSUER

TERM ID: 00184024 0003 REF#: 0003 BATCH# 649 AUTH# 569359 12:14P MARTINSUILLE UA 24112 MERC # 0000001646853 276-666-6655 *********** 05/27/09 田XD: 本事章事章 SALE

\$28.56 AMOUNT 르

TOTAL

APPROUED

CUSTONER COPY

CUSTOMER COPY



NAM	E				DEPARTMENT		LOCATION				DATE	
Johr	n Huggins	S			Consulting	AOM	111 N. Chestnu	it St. Winston S	alem, NC 27101		5/24/2009	
INST	RUCTION	s:					y expenditure of \$25 00 or mo					
	7	RAVEL DA		must be treaty sno	5/17/2009	5/18/2009	# 5/19/2009	5/20/2009	5/21/2009	5/22/2009	5/23/2009	7.2
NO.	1	XPENSE			 	MONDAY	TUESDAY	-		 		<u> </u>
	AIR FAF		I I E IVI		SUNDAY	MONDAI	TUESDAT	WEDNESDAY	THURSDAY	FRIDAY	Saturday	TOTALS
1								 				
2	AUTOR											
3	TAXI - E					444.45						<u> </u>
4	MILEAG		@	\$0.550		\$41.25				\$41.25		\$82.50
5	GAS & C						+					_
- 6		G, TOLLS					<u> </u>			·		
7	HOTEL					95.23	\$95.23	\$95.23	\$95.23			\$380.92
8	TELEPH	IONE										
9	TiPS (ot	her Ihan m	eals)									
10	OTHER	(Cleaners	and Groc	eries)				<u> </u>				
11	SUBTO	TAL LINES	1 - 10			\$136.48	\$95.23	\$95.23	\$95.23	\$41.25		\$463.42
12	8REAKF	AST										
13	LUNCH								\$6.52			\$6.52
14	DINNER		•			\$37.31	\$34.60	\$14.47	\$11.42			\$97.80
15	ENTERT	AINMENT										
16	OTHER											
17	SUBTOT	AL LINES	12 - 16			\$37.31	\$34.60	\$14.47	\$17.94			\$104.32
18	GRAND	TOTAL		-		\$173.79	\$129.83	\$109.70	\$113.17	\$41.25		\$567.74
						EXPLANATION	OF TRANSPORTA	TION EXPENS	E			\$567,74
	TRAVEL	FROM	home							Ţ		
	TRAVEL	то	GSO									ľ
	TRAVEL	то	home									
	AUTO MI	LEAGE				75				75	_	İ
							ADVANCES:		DOCUMENT#	DATE	AMOUNT	
	Explana	tlon of tr	ip includ	ling city (cl	ties) visited:		CASH ADVANCE	•				
							CASH					}
-	Roundtrip	drive to M	lartinsville				TRAVELERS	CHECKS				
-							SUBTOTAL					Ì
-	Dinner 5/	18 and 5/1	9 Susan a	ind John			COMPANY PAID			~		}
-	Masterca	rd paymen	ts noted o	n receipts			AIRLINE		****			
-							AUTO RENTA	L				}
-							HOTEL				\$380.92	1
ſ			ACC	OUNT NUM	BER		TELEPHONE					
Ī	DIV	PLT	DEPT	BASE	SUB	\$	FOOD				\$92.90	
f					non-food	\$463.42	OTHER	-				}
Ì				1	food	\$104,32			TOTAL ADVANCE	s		\$473.82
<u> </u>		-										\$47.5.0 <u>2</u>
							DUE COMPANY (ATTACH REFU	IND)			1
									MANUAL CHECK			· · · · · · · · · · · · · · · · · · ·
ŀ						\$567,74	DUE EMPLOYEE		C VOUCHER#			\$93.92
				<u> </u>								400.02
MPL	OYEE SK	GNATURE	John Hug	gins			APPROVAL SIGN	ATURE			·	

signature of card member

X

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



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283 Commonwealth Blvd Martinville Va 24112 276-632-7133 Fax 276-632-7656 www.texassteakhouse.com

Date:

May18'09 06:55PM

Card Type:

: AMEX

Acct #: Trans Key: XXXXXXXXXXXX1292 AIA001719877860

Exp Date:

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Auth Code: Check:

2923 E3/1

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Subtotal:

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EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

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SALE BATCH: 000637

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PIGS R US 1014 LIBERTY ST MARTINSVILLE VA 24112 276-632-1161

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Clerk ID: 1 16: 608 Merchant ID: 000197792770 Bank ID: 1340 05/21/09

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JOHN HUGGINS

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signature of card member

X

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



									
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Confirmation: 5/29/2009	86826746 PAGE 1	i	your room. A to be held pe amount of th my account. I	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 due to a physical disability. Please indicate yes by checking here:					
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TASTY CREAM DOMUTS 24 W CHURCH STREET MARTINSVILLE. VA 24114 (276) 656-1117

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

AMEX SALE

PIGS R US 1014 LIBERTY ST MARTINSVILLE VA 24112 276-632-1161

Merchant 10: 728008137284

05/26/2009 Merchant ID:

19:00:32 000000004340543 01573118

Merchant ID: 000002066598 Term 10: 00172120 Ref #: 0050

Terminal ID:

4450553540

Server IB: 1

Sale

CREDIT CARD

Sale

Inc 8: 000056 Appr Code: 527492

Entry Method: Swiped

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16.27

12:35.26 Appr Code: 222528

Batch#: 000520

Customer Copy THANK YOU!

PLEASE COME AGAIN!

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SERVER Approval Code: Entry Method:

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PRE-TIP AMT

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Online

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Tip:

Total:

AMEX

Amount:

17.72

TIP

Host:

Table Number

Unwind Club Panini (2 @6.95)

(2)Cheese Red Pot Chowder

Soup Of The Day (2 @3.50)

41

05/27/09

19:02:24

05/29/2009 12:13 PM

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0.00

13.90

7.00

TOTAL AMOUNT

CUSTOMER COPY

DAILY GRIND COFFEE HOUSE & CAFE 10 E. Church St. Martinsville, VA 24112 (540) 632-0035

283 Commonwealth Blvd Martinville Va 24112 276-632-7133 Fax 276-632-7656 www.texassteakhouse.com

Date:

May28'09 07:15PM

AMEX Card Type:

XXXXXXXXXXXXX1292 Acct #: EIE001369360563

Trans Key: $\chi\chi/\chi\chi$ Exp Date: 504942 Auth Code:

2229 Check: F3/1 Table:

Server:

201 STEVEN

Subtotal:

28.92

Tip Amount:

Total:

Iced Tea	Medium (2 @1.70)	3.40
Subtotal Tax		24.30 2.67
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119 official sponsor U.S. Clympic Team



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50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



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5/28/2009	PAGE 1		annount or these charges, I have requi	that the indicated person, company or association fails to pay for any part or the full sted weekday delivery of USA TODAY. If refused, a credit of \$.75 will be applied to nex, t, or someone in my party, require special evacuation due to a physical disability.
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



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BUMGARNEF 1793 FAIRWA NEWTON, NO	AY DR	name address	rcom number; arrival date; departure date;	213/SXBL 5/26/2009 5:23:00PM 5/29/2009 12:41:00PM	
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American of Martinsville
Noel Chitwood
Ekta Chopra
128 E. Church St.
Martinsville, VA 24112

Sunrise Technologies, Inc
111 N. Chestnut St.
Suite 300
Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.	TERMS	DUE DATE	PROJECT
4985	6/1/2009		Net 45	7/16/2009	
DE	SCRIPTION		HOURS	RATE per HR	AMOUNT
SDS-AOM_AR_103 - De	posits on Invoice	- 05/18-05/31	16	75.00	1,200.00
AOM Phase B Project				Total	\$1,200.00



BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112 REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300

Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.		TERMS	DUE DATE	PROJECT
4998	6/15/2009			Net 45	7/30/2009	
DE	SCRIPTION		DAYS		RATE per DAY	AMOUNT
Susan Mitchell - Project AOM - 06/01-06/14	Manager/Fina	ncial Consultant -		9.5	1,200.00	11,400.00
Susan Mitchell - Project AOM - 05/04-05/14 (cree	•			8.5	-200.00	-1,700.00
incorrectly) Susan Mitchell - Project AOM - 05/18-05/31 (cred	-	I T		8	-200.00	-1,600.00
John Huggins - Supply (06/01-06/14	Chain Consulta	nt - AOM -		9.5	1,200.00	11,400.00
John Huggins - Supply 0 05/04-05/17 (credit for ra				9.5	-200.00	-1,900.00
John Huggins - Supply C 05/18-05/31 (credit for ra	Chain Consulta	nt - AOM -		9	-200.00	-1,800.00
Gary Bumgarner - Techr 06/01-06/14				8	1,600.00	12,800.00
Rod Pruett - Technical A Reimbursable Travel Exp 06/01-06/05				2.5	1,600.00 399.91	4,000.00 399.91
Reimbursable Travel Exp 06/08-06/12	oense - Susan	Mitchell -			557.87	557.87
Reimbursable Travel Exp 06/01-06/05	oense - John H	uggins -			495.55	495.55
AOM Phase B Project					Total	



American of Martinsville
Noel Chitwood
Ekta Chopra
128 E. Church St.
Martinsville, VA 24112

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.		TERMS	DUE DATE	PROJECT
4998	6/15/2009		-	Net 45	7/30/2009	
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Reimbursable Travel Exp 06/01-06/05	ense - Gary	Bumgarner -			329.06	329.06
Reimbursable Travel Exp 06/08-06/12	ense - Gary	Bumgarner -			442.47	442.47
Reimbursable Travel Exp 06/08-06/12	ense - Rod F	Pruett -			132.00	132.00
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			•			
AOM Phase B Project					Total	\$35,431.76





NAME DEPARTMENT						LOCATION DATE					
	Susan I	Mitchell		Consulting		111 N. Chestnut St. Winston Salem, NC 27101				6/5/2009	
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1	AIR FARE										
2	AUTO RENTAL				 						
3	TAXI - ETC.						 	 			
4	MILEAGE	@	\$0.550			\$126.50	\$66.00	\$66.00	<u> </u>	 	\$258.50
5	GAS & OIL		40.000			\$7.10.00	\$00.00	\$00.00			\$200.00
6	PARKING, TOLLS							 		 	
7	HOTEL					96.23			4	£05.00	
8	TELEPHONE				+	33.23]	Ţi			\$95.23

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,	LUNCH				24.28	\$21,90		<u> </u>			\$46.18
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112

MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119 official sponsor U.S. Olympic Team

U.S.A.



			 					
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MARTINSVILLE, VA 24112

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11	SUBTO	TAL LINES	1 - 10						\$405,04	\$66.00		\$471.04
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13	LUNCH					24.14	\$25 03	\$15.28	\$22.38			\$86.83
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119 official sponsor U.S. Olympic Tearn



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TASTY CACAM LOWERS 24 W CAUNCY STARFT MARTINEVILLE, VA 24114 (205) 656-1217

, Perchant ID. 120182137253

Sale

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CUSTOMER COPY

PLANATAL ...

TASTY CREAT LONGIS

24 II CRERCH STREET

THET DESPITEE. VA 24114

(275) 656-1117

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Sale

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Custoner Cook HANAC YCU! PIERSE COTE AGRIN! DAILY GRIND OGFFEE HOUSE & CAFE 10 E. Church St. Vartinsville, VA 24112 (540) E3Z-0035 OS/C9/2009

Hoes: 49	12:38 PM 10049
1/2 Panio1 1/2 Sour	6.95
7 Bean Soup Veggie Panini Unwind Club Panini Beef & Sheddar Icod Ten Madium	6,95 6,95 1,70
Subsotal Tax	22.55 2.48
Order Total	25.03
AMEX #XXXXXXXXXXXX1409 Auth:509912	25.03
Tip :	

SIGNATURE :_____

TOTAL

TOTAL

Thank you for your patronage!
Receive a Free Specialty
Espresso Beverage When You
Load \$20 or Hore In Your Quick
Card or Gift Card!

--- Check Closed ---



DELIVER CHECK TO John Huggins

NAME DEPARTMENT							LOCATION DATE					
Johr	Huggins				Consulting	AOM	111 N. Chestnul St. Winston Salem, NC 27101					
INST	RUCTIONS	:							receipted bill. Foreign curren ide of this form must be com			
	T8	AVEL DA			5/31/2009	6/1/2009 #		6/3/2009	6/4/2009	6/5/2009	6/6/2009	
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6	PARKING	3, TOLLS				95.23	\$95.23	\$95.23				\$285,69
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	VER CHEC		John Hug				PRINT NAME & 1	NTLE				



signature of card member

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



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SUITE 300 WINSTON-SA US	CHESTNUT STR		room number: arrival date: departure date: adult/child: room rate;	419/KXTE 6/1/2009 6/4/2009 1/0 89.00	5:30:00PM 7:37:00AM			
estimated incidentals	ccount for the full anticip s, through your date of ch	k-in is attached to a bank or checking account, a hold will pated dollar amount to be owed to the hotel, including eck-out and such funds will not be released for 72 business I the discretion of your financial institution.	RATE PLAN LV0 HH# 810044663 DIAMOND AL: DL #0252025432 CAR:					
CONFIRMATI 6/4/2009	ION NUMBER :	87635719	to be held personally liable in the e- full amount of these charges. I have	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. Lagree 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 will be applied to my account. In the event of an emergency, i, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by cherking here.				
			Please indicate yes by checking here signature:		my party, require special evacu	ration due to a physical disability.		
date	reference	descriptio	on .	amo	unt	32		
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account no	night at partici	paling holels. Visit hampion.com or ca	date of charge		ren.	thanks.		
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eHoppeina	INJOAN and locat	ON establishment agrees to transmit to card holder	lor payment 589950 hases & ser	vices				
THANK YO	OU FOR CHOOS	ING HAMPTON INN	taxes					

tips & misc.

total amount

-285.69

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

06/01/2009

18:39:44

Merchant ID: Terminal ID:

000000004340543

01573118

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CREDIT CARD

AMEX SALE

CARD #

XXXXXXXXXXX1292

INVOICE

0028

Batch #: SERVER

000300

Approval Code:

0006

580596

Entry Method:

Swiped

Approved:

Online

PRE-TIP AMT

\$36.50

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CARD TYPE: AMEX CARD NUMBER: *******1292

MEGAN S

APPROVAL CODE: 544381 Merchant ID: 61345

Trans Type: Auth

TOTAL AMOUNT

Amount:

40.02

TB#65

APPLEBEE'S NEIGHBORHOOD GRILL & BAR

281 W. Commonwealth Blvd.

Martinsville, VA 24112

276-638-2377

DATE: 06-02-09 TIME: 07:09 PM GUESTS: 2

Store #3454

Martinsville 276-638-3433

Subway Sandwiches & 2444 Greensboro Roac

ELIZABETH'S PIZZA 2365 UIRGINIA AUE COLLINSUIL, UA 24078 276-647-3859

THE SMOKEY PIG 2820 Greensboro Rd. Martinsville, VA 24112 eh 276-632-5800

Thank You for Visiting Smokey Pig Bar-B-Que

TABLE: D 1 - 1 Guests Your Server was [Not Found] 6/3/2009 12:20:55 PM - ID #0084618

Subtotal Total Taxes \$1.08

Grand Total \$13.06

This Payment \$13.06 lotal Charged: \$13.06 Paid by Credit Card

Credit Purchase

Mame : HUGGINS/JK CC Type : Smex

CC Num 100 Reference : 4(:4.3 TERMINAL ID.: HERCHAHT H:

88910091186

MASTERCARD SALE BAICH: 600028 INV: 000034 Jun 03, 09 19:29 RRH: 00209031 AUTH: 85422B

TRACE #: MCCLYNZHF8603

BASE

\$13.13

TIP

TOTAL

JOHN HUGGINS

at AMOUNT

Register of S

Protect the balance on the card.

rd com

Martinsville 276-638-3433 Trans# 43 Clerk 3 SIERRA Dwr1 TRDT 060409 Reg-ID REG-MAIN Receipt # 0000146335 --- ITEM --- QTY PRICE MEMO PLU PRICE MEMO PLU 1 I \$ 1.39FFITML 19450 1 3.72FFITML 19450 1 3.99FFITML 10020 SUBTOTAL \$

Sales Tx \$ TAKE-OUT **TOTAL \$ 6.65 CredCardAMT TEND \$ 6.65CHANGE DUES 0.00

Try your sandwich toasted!!

Approval No: 520342 Reference No: 915516012166 Account No: ***********1292 Card Issuer: AMERICANEXPRESS

Amount: \$6.65



	NAME	Ξ				DEPARTMENT		LOCATION				DATE	
TANKEL DATE	John	ohn Huggins Consulting AOM						111 N. Chestnut St. Winston Salem, NC 27101 6/13/2009					
TRAVEL DATES — 6/7/2009 68/8/2009 / 68/7/2009 6/11/2009	NSTF	RUCTIONS	s:										
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### RELEPHONE ### STELEPHONE ### STE	6	PARKIN	g, Tolls										
9 TIPS (other than meals)	7	HOTEL					95.23	\$95.23	\$95.23				\$285.6
10 OTHER (Cleaners and Groceries)	8	TELEPH	ONE										
SUBTOTAL LINES 1 - 10	9	TIP\$ (oth	ner Ihan m	neats)									
	10	OTHER	(Cleaners	and Groce	eries)								
13 LUNCH	11	SUBTOT	AL LINES	1 - 10			\$136.48	\$95.23	\$95.23	\$41.25			\$368.1
14 DINNER	12	BREAKF	AST										
SENTERTAINMENT	13	LUNCH											
16 OTHER	14	DINNER					\$27.62	\$50.13·	\$28.96				\$106.71
TRAVEL FROM home	15	ENTERT.	AINMENT	•									
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EXPLANATION OF TRANSPORTATION EXPENSE TRAVEL FROM home TRAVEL TO GSO TRAVEL TO home AUTO MILEAGE 75 ADVANCES: DOCUMENT # DATE AMOUNT CASH ADVANCE CASH TRAVELERS CHECKS DINNER 6/8, 6/9 and 6/10 Dinner Susan and John Mastercard payments noted on receipts ACCOUNT NUMBER DIV PLT DEPT BASE SUB \$ DIV PLT DEPT BASE SUB \$ DOCUMENT # DATE ACCOUNT NUMBER FOOD TELEPHONE FOOD TELEPHONE FOOD TOTAL ADVANCES TELEPHONE FOOD TOTAL ADVANCE TOTAL ADVANCE TOTAL ADVANCE TOTAL ADVANCE TOTAL ADVANCE TOTAL ADVANCE DUE COMPANY (ATTACH REFUND) MANUAL CHECK # DUE EMPLOYEE PC VOUCHER # MPLOYEE SIGNATURE John Huggins APPROVAL SIGNATURE	\rightarrow			12 - 16			\$27.62	\$50,13	\$28.96				\$106.71
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APPROVAL SIGNATURE APPROVAL SIGNATURE	-							DIE END OVER			#		*** **
				<u> </u>			\$474 90	DUE EMPLUTEE		PU VUUCHER#			\$82.50
ELIVER CHECK TO John Huggins PRINT NAME & TITLE	APLO	OYEE SK	GNATUR	John Hu	ggins			APPROVAL SIGN	ATURE				
	ELIV	ER CHE	СКТО	John Hug	ggins			PRINT NAME & T	ITLE				



50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team

0.00



SUITE 300	OHN CHESTNUT STR LEM, NC 27101		name address	arri der adu	om number: ival date: parture date: ult/child: im rate:	200/KXTE 6/8/2009 6/11/2009 1/0 \$89.00	5:22:00PM		
be placed on the acci estimated incidentals, t	ount for the full anticipa through your date of chec	in is attached to a bank or ch sted dollar amount to be ow sk-out and such funds will not the discretion of your financia	red to the hotel, including be released for 72 business		RATE PLAN LV0 HH# 810044663 DIAMOND AL DL #0252025432 BONUS AL CAR				
Confirmation:	85894674	<u> </u>		your room. A	safety deposit box is avai	lable for you in the	s. Please do not leave any money or items of value unattended in lobby. I agree that my liability for this bill is not waived and agree		
6/11/2009	PAGE 1			to be held per amount of the my account. If Please indicate	rsonally liable in the event ese charges. I have reque in the event of an emerge e yes by checking heré:	that the indicated sted weekday deliv ncy, I, or someone i	person, company or association fails to pay for any part or the full ery of USA TODAY. If refused, a credit of \$.75 will be applied to n my party, require special evacuation due to a physical disability.		
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date	reference		descriptio	n .		amo	unt		
6/8/2009 6/8/2009 6/8/2009 6/8/2009 6/9/2009 6/9/2009 6/9/2009 6/10/2009 6/10/2009 6/10/2009	HiltonHHonor	rs.com	TAX TAX WILL BE SETTLE EFFECTIVE 5590 HHonors point more than 3,000 Hi	E BALANC ints for this ilton Family	E OF stay. To chack yo hotels worldwide		·		
	night at partic	rs member r 1909 a sipating hotels. Visit	hrough June 30, 20 hampton.com or c	09, eam 7, all 1-800-F	UUU HIITON FION P IAMPTON for deta	rs bonus pom ils.	's per		
	·	for reservations	s call 1.800.ham	ipton or v	visit us online at v	www.hamp	oton.com		
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establishme	ent no. and locat	ion establishment	agrees to transmit to card hold	ler for payment	purchases & ser	vices			
					taxes				
					tips & misc.				
signature	of card membe	r			total amount				

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

06/08/2009 18:49:04 Merchant ID: 000000004340543 Terminal ID: 01573118

4450553540

CREDIT CARD AMEX SALE

CARD # XXXXXXXXXXX1292 INVOICE 0060 Batch #: 000307 **SERVER** 0002 Approval Code: 501644 Entry Method: Swiped Approved: Online PRE-TTP AMT \$22.62

ΠP

TOTAL AMOUNT

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

06/10/2009 18:36:13 Merchant ID: 000000004340543 Terminal ID: 01573118 4450553540

CREDIT CARD

AMEX SALE

CARD # XXXXXXXXXXX1292 INVOICE 0039 Batch #: 000310 0007 **SERVER** 521309 Approval Code: Swiped Entry Method: Online Approved: PRE-TTP AMT

ΠP

TOTAL AMOUNT



283 Commonwealth Blvd Martinville Va 24112 276-632-7133 Fax 276-632-7656 www.texassteakhouse.com

Jun09'09 06:59PM Date:

Card Type: **AMEX**

Acct #: XXXXXXXXXXX1292 Trans Key: EIE001407441219

Exp Date: XX/XX Auth Code: 547305 Check: 2737 Table: G2/1Server: 242 shawn

42.13 Subtotal:

Tip Amount:

Total:

Signature:

\$50.13 of K Hugg=



NAME Gary Bum	narner		DEPARTMENT			LOCATION DATE 111 N. Chestnut St. Winston Salem, NC 27101 6/							
INSTRUCTIO		Panert due surfrie 10 dan		her recents attached. Any	expenditure of \$25,00 or more must be supported by a receipted bill foreign currency translation								
		calculations must be cle	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday				
	TRAVEL DA	ATES	5/31/2009	6/1/2009	6/2/2009	6/3/2009	6/4/2009	6/5/2009	6/6/2009		Paid by	,	
NO.	EXPENSE	ITEM								TOTALS		Sunrise	
1 AIR F	FARE				1								
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3 TAXI	ETC.												
4 MILE		@ \$0	1.550	\$69.30)	\$69.30				\$138.60	\$138.60		
	& OIL												
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7 HOTE				\$95.23	\$95.23	-				\$190.46		\$190.46	
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	(other than	meals)											
	ER (Copy C												
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17 SUB	TOTAL LIN	ES 12 - 16									Ě	医配面	
18 GRA	ND TOTAL			\$164.53	\$95.23	\$69.30				\$329.06	\$138.60	\$190.46	\$329.06
			EX	PLANATION C	F TRANSPOR	TATION EXPE	NSE			\$329.06		1	
TRA	VEL FROM				Hickory,NC			Martinsville,Va	1			-	
TRA	VEL TO				Martinsville, Va			Hickory,NC		İ	ļ		
TRAV	VEL TO											İ	
AUTO	O MILEAGE	<u>_</u>		<u> </u>								ŀ	
					ADVANCES:		DOCUMENT #	DATE	AMOUNT				
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					HOTEL				\$190.46				
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DIV	V PLT	DEPT BA		\$	FOOD								
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			food				TOTAL ADVA	NCES	<u> </u>	\$190.46			
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ļ				ļ	DUE COMPAI	NY (ATTACH R							
<u> </u>							MANUAL CHE						
		<u> </u>		\$329.06	DUE EMPLOY	/EE	PC VOUCHER	(# 		\$138.60	_		
EMPLOYE	E SIGNAT	URE Gary	Bumgarner		APPROVAL SIGNATURE								
DEL MED	CHECK TO	Gan	Rumaarner		PRINT NAME & TITLE								

Gary Bumgarner

From: Sent: To: Subject:

Brenda Quesinberry [brenda@blueridge-realestate.com] Tuesday, June 16, 2009 11:06 AM Gary Bumgarner Reservation Reciept

June 16, 2009

Gary Bumgarner

1793 Fairway Drive

Newton, NC 28658

Dear Gary,

Thank you for your reservation with Blue Ridge Real Estate at the Reserve at Fairystone. I hope your stay was enjoyable.

The following shows the information from your visit.

Arrival Date:

Departure Date:

Cabin Name:

June 8, 2009

June 11, 2009

Escape #19

Rental Rate:

10% Tax:

Total:

\$ 300.00

30.00

\$ 330.00

_

Total paid:

\$ 330.00

Please call if there are any questions or concems.

I hope that you will come and visit us again soon.

Sincerely,

Brenda J. Quesinberry

v



NAME Capy Bumparner		DEPARTMENT Consulting		LOCATION DATE 111 N. Chestnut St. Winston Salem, NC 27101 6/15/2009									
						y expenditure of \$75.00 or more must be supported by a receipted bit. Foreign currency Bendeton							
	RUCHONS	o	Report due within 10 days at calculations must be clearly	shown in the supporting docs	umentation. If reimbursem	and for Entertainment or Me Tuesday	Wednesday	Thursday	Friday	Cotueday	·		1
				Sunday	Monday	ruesuay	vveunesuay	indisday	Filoay	Saturday			_1
	TR	RAVEL DAT	ES	6/7/2009	6/8/2009	6/9/2009	6/10/2009	6/11/2009	6/12/2009	6/13/2009		Paid by	
NO.	EX	KPENSE IT	ЕМ		1					1	TOTALS	Sunrise	
1	AIR FAI	RÉ								İ			-
2	AUTO F	RENTAL											-
3	TAXI - I	ETC.											-
4	MILEAC	GE (@ \$0.5	50	\$69.30			\$69.30			\$138.60	\$138.60	-
5	GAS &	OIL											-
6	PARKIN	NG, TOLLS											-
7	HOTEL				\$95.23	\$95.23	\$95.23	3			\$285.69	\$285.69	-
8	TELEPI	HONE											-
9	TIPS (o	ther than m	neals)										-
10	OTHER	(Copy Chi	arges)										-
11	SUBTO	TAL LINES	S 1 - 10	ĺ	\$164.53	\$95.23	\$95.23	\$69.30			\$424.29	\$138.60 \$285.69	\$424.
12	BREAK	FAST								-			
13	LUNCH											135.4	•
14	DINNEF	₹				\$18.18					\$18.18	\$18.18	•
15	ENTER	TAINMENT	•									The second	•
16	OTHER	<u> </u>			<u> </u>						<u> </u>		
		TAL LINES	5 12 - 16			\$18.18			-		\$18.18	##£\$18.18	\$18.1
18	GRAND	TOTAL			\$164.53	\$113.41	\$95.23	\$69.30			\$442.47	\$138.60 - \$303.87	
				EXI	PLANATION O	F TRANSPOR	TATION EXPE	NSE			\$442.47		, ,,,
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	TRAVE	L TO				Martinsville, Va			Hickory,NC			1 1	
	TRAVE	L TO									·		
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						ADVANCES:		DOCUMENT #	DATE	AMOUNT			
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ĺ				noл-food	\$424.29	OTHER							
Ì				food	\$18.18			TOTAL ADVA	NCES		\$303.87		
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j							<u> </u>	MANUAL CHE	CK#				
				1	\$442.47	DUE EMPLOY	'EE	PC VOUCHER	#	<u> </u>	\$138.60		
MP	LOYEE	SIGNATUR	RE Gary B	ımgarner		APPROVAL S	IGNATURE						
		ECK TO				PRINT NAME							
<u>/</u> ELI	VERGI	IECK IO	Gary Bi	ımgamer		FRIGI NAME	G IIILE						



Martinsville Store #16 Liberty Fair Mall 276-666-0766

Server: Matthew Cashier: AM CASHIER	06/09/2009
Table 34/2 Guests: 7 Reprint #: 1	5:58 PM 20034
New York Strip Tea	11.99 1.69
Subtotal	13.68
State Tax	0.68
Meals Tax	0.82
Totai	15.18
AMEX #XXXXXXXXXXXXX1557 Tip Total Auth:504201	15.18 3.00 18.18
Balance Due	0.00

Gratuity Not Included Try Our All You Can Eat Breakfast Served Friday, Saturday & Sunday

--- Check Clased ---



Gary Bumgarner

From: Sent:

To: Subject:

Brenda Quesinberry [brenda@blueridge-realestate.com] Tuesday, June 16, 2009 11:06 AM Gary Bumgarner Reservation Reciept

June 16, 2009

Gary Bumgarner

1793 Fairway Drive

Newton, NC 28658

Dear Gary,

Thank you for your reservation with Blue Ridge Real Estate at the Reserve at Fairystone. I hope your stay was enjoyable.

The following shows the information from your visit.

Arrival Date:

Departure Date:

June 8, 2009

June 11, 2009

Escape #19

Cabin Name:

Rental Rate:

10% Tax:

Total:

\$ 300.00

30.00

\$ 330.00

Please call if there are any questions or concems.

I hope that you will come and visit us again soon.

Sincerely,

Brenda J. Quesinberry

_ .



NAM	Ε				DEPARTMENT		LOCATION				DATE	
Rod Pruett Consulting				111 N. Chesinu	6/16/2009	<u>-</u> .						
INST	RUCTIONS:						expenditure of \$25.00 or mo ent for "Enlettanment or Mea					
	TR	AVEL DA		<u> </u>	6/7/2009	6/8/2009	6/9/2009	6/10/2009	6/11/2009	6/12/2009	6/13/2009	
NO.	EX	PENSE IT	ЕМ		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
1	AIR FARE	<u> </u>										
2	AUTO RE	NTAL										
3	TAXI - ET	C,										
4	MILEAGE		@	\$0.550					\$66.00	\$66.00		\$132.0
5	GAS & OI	IL										
6	PARKING	S, TOLLS				<u> </u>						
7	HOTEL											
8	TELEPHO	ONE										
9	TIPS (oth	er than me	eals)									
10	OTHER (Copy Cha	rges)									
11	SUBTOTA	AL LINES	1 - 10						\$66,00	\$66.00		\$132,00
12	BREAKF	AST										
13	LUNCH				·							
14	DINNER			:	i 				:			
15	ENTERTA	AINMENT										
16	OTHER											
17	SUBTOTA	AL LINES	12 - 16									
18	GRAND 1	TOTAL							\$66.00	\$66.00		\$132.00
						EXPLANATION	OF TRANSPORT	ATION EXPENS	E .			\$132.0
	TRAVEL	FROM							W-S	W-S		
	TRAVEL	то	 .						Martinsville	Martinsville		
	TRAVEL	то							W-S	W-S		
	AUTO MI	LEAGE							120	120		
							ADVANCES:		DOCUMENT#	DATE	AMOUNT	
	Explana	tion of tr	ip includ	ling city (c	itles) visited:		CASH ADVANC	E		· · · ·		
					•••		CASH					
	American	of Martins	ville				TRAVELERS	CHECKS		-		
							SUBTOTAL					
							COMPANY PAI	<u></u>	<u> </u>			
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		-			.n.e.		HOTEL					
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	DIV	PLT _	DEPT	BASE	SUB non-food	\$ \$132.00	OTHER					
			 	+	food	\$132.00	OTREK		TOTAL ADVANC	:FS		
					1000				TOTALADVANC	100		
		-					DUE COMPANY	' (ATTACH REF	UNDI		1	
		 	 				2-2	<u> </u>	MANUAL CHEC	K#		
	-		-			\$132.00	DUE EMPLOYE		PC VOUCHER #			\$132.00
		1		·		<u>'</u>	ADDDOVAL OF	MATHE		-		
≞MP	LOYEE SI	GNATURE	<u> </u>				APPROVAL SIG					
DEL	IVER CHE	СК ТО					PRINT NAME &	TITLE	Rod Pruett			



BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112 REMIT TO ·

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

INVOICE NO.	DATE	P.O. NO.	TERMS	DUE DATE	PROJECT
5018	6/29/2009		Net 45	8/13/2009	
C	ESCRIPTION		DAYS	RATE per DAY	AMOUNT
Susan Mitchell - Project AOM - 06/15-06/28	ct Manager/Fina	ncial Consultant -	8.5	1,200.00	10,200.00
John Huggins - Supply 06/15-06/28	Chain Consulta	ant - AOM -	9	1,200.00	10,800.00
Gary Bumgarner - Tecl 06/15-06/28	hnical Architect	- AOM -	5	1,600.00	8,000.00
Rod Pruett - Technical Reimbursable Travel E 06/15-06/19			1	1,600.00 366.37	
Reimbursable Travel E 06/22-06/26	xpense - Susan	Mitchell -	379.08		
Reimbursable Travel E. 06/15-06/19	xpense - John I	ługgins -		471.65	
Reimbursable Travel E: 06/22-06/26	xpense - John F	luggins -		433.62	433.62
Reimbursable Travel E: 06/22-06/26	xpense - Gary E	lumgarner -		431.13	431.13
Reimbursable Travel Ex 06/22-06/26	kpense - Rod Pi	ruett -		66.00	66.00
AOM Phase B Project					
				Total	\$32,747.85



NAME DEPARTMENT						LOCATION DATE						
Susan Mitchell Consulting						111 N. Chestnut St. Winston Salem, NC 27101 6/19/						
INSTRUCTION	VS:	Report due :	within 10 days of tr must be clearly sh	avel, with hotel bills and o	thei recepts allached .	Any expenditure of \$25.00 or	more must be supported b	y a receipted bill. Foreign cu e side of this form must be co	Mency translation			
							i i contest and the	I See G this idni muz py (xnpetes	Ţ		
1	RAVEL D	ATES		6/14/2009	6/15/2009	6/16/2009	6/17/2009	6/18/2009	6/19/2009	6/20/2009		
NO. E	XPENSE	ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS	
1 AIR FA	RE									Ţ		
2 AUTO I	RENTAL					İ						
3 TAXI-	ETC.				i					nacho kon tra com di del lon a reas cassos dedeca n		
4 MILEAC	GE	@	\$0.550	[1			\$123.20			\$123.20	
5 GAS &	OIL					****						
6 PARKIN	IG, TOLLS						1				10 Tiefr de um municipa pa der un d	
7 HOTEL				<u> </u>			1	190.46		L	\$190.46	
8 TELEPI	ONE					·				1		
9 TIPS (o	lher lhan m	neals)										
10 OTHER		<u>-</u>										
11 SUBTO	TAL LINE:	S 1 - 10			Ī	İ		\$313.66			\$313.66	
12 BREAK	FAST		•		İ							
13 LUNCH						\$14.73	\$17.89	\$20.09		\	\$52.71	
14 DINNER	}	·					<u> </u>			-		
15 ENTER	TAINMENT								~			
16 OTHER												
17 SUBTO	TAL LINES	S 12 - 16				\$14.73	\$17.89	\$20.09	- · · · · · ·		\$52.71	
18 GRAND	TOTAL			,		\$14.73	\$17.89	\$333.75			\$366.37	
					XPLANATION	OF TRANSPORT	TATION EXPENS	SE.			\$366,37	
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TRAVEL	.TO					Martinsville	Martinsville	Martinsville				
TRAVEL	.TO							Home				
M QTUA	ILEAGE							224			į	
		,				ADVANCES:		DOCUMENT #	DATE	AMOUNT		
Explan	ation of t	rip includ	ding city (d	cities) visited	:	CASH ADVAN	CE				í	
Martinsv	ille VA - AC	DM .				CASH						
Note lune	ches were	for Susan	and John			TRAVELERS	S CHECKS				i	
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						COMPANY PAI	D					
						AIRLINE						
						AUTO RENT	AL					
						HOTEL				\$190.46	}	
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DIV	PLT	DEPT	BASE	SUB	\$	FOOD				\$52.71	ĺ	
				non-food	\$313.66	OTHER					j	
				food	\$52.71			TOTAL ADVANCE	s		\$243.17	
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	<u> </u>			- 1	\$366 37	DUE EMPLOYE	E 1	PC VOUCHER #			\$123.20	
MPLOYEE SI	GNATURE	<u> </u>		_		APPROVAL SIG	NATURE					
ELIVER CHE	CK IU					PRINT NAME &	IIILE					



50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



MITCHELL, SU 413 WESTBRO RALEIGH, NC US	OOK DR	name address	room number: 401/KXTH arrival date: 6/16/2009 5:17:00PM departure date: 6/18/2009 adult/child: 1/0 room rate: \$89.00
be placed on the acco estimated incidentals, the	ount for the full anticipa brough your date of chec	in is attached to a bank or checking account, a hold will ted dollar amount to be owed to the hotel, including k-out and such funds will not be released for 72 business he discretion of your financial institution.	9 HH# 854967083 DIAMOND
Confirmation: 8	86210595 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 hobby, lagree 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 will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by checking here:
date	reference	descripti	ton amount 🙃
6/16/2009 6/16/2009 6/16/2009 6/16/2009 6/17/2009 6/17/2009 6/17/2009	494373 494373 494373 494373 494480 494480 494480	GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX	\$89.00 \$3.56 \$0.89 \$1.78 \$89.00 \$3.56 \$0.89 \$1.78
0/11/2003	101400		**************************************
	Hilton HHono	s.com	2009, earn 1,000 Hilton HHonors bonus points per
for reserva		0.hampton or visit us online at t	
account no.			date of charge folio/check no.
card memb	er name	· U	authorization 142495 Ainitial
establishme	nt no. and locat	establishment agrees to transmit to card ho	taxes tips & misc.
signature	of card membe	r	•
×			total amount 0.00
The Hilton	Family	D CONTARD da R E	Billianium HOMER HOMER

:	Customer Copy THANK YOU	ARTS ETC 45 E CHURCH
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12:38:00	Retrieval Ref m: 13856857	06/17/09
	Perchant ID: 080000072338 Bank ID: 1348 06-16-83 Batchi	1
	Clerk ID: 30 ID: 882	BATCH# 667 AUTH
VA 24112 335	MARTINSVILLE, VA 24112 276-634-5335	FNOUNT
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ARTS ETC 45 E CHURCH ST 276-666-6655 MERC # 0000001646953 TERM ID: 00184024 0003 06/17/09 12:00P **********************************

\$17.89

10043

12:12 PM

TOTAL <u>-</u>

APPROUED

CUSTOMER COPY

06/18/2009 DAILY GRIND
COFFEE HOUSE & CAFE
10 E. Church St.
Martinsville, VA 2411
(540) 632-0035 Host: 43

5.95 3.50 6.95 18.10 1.99 20.09 20.09 Order Total AMEX #XXXXXXXXXX1409 Auth:561225 Unwind Club Panini Iced Tea Medium Veggie Wrap Soup Of The Day Tomato Bisque Subtotal Tax TOTAL Ţip

SIGNATURE :

Thank you for your patronage! Receive a Free Specialty Espresso Beverage When You Load \$20 or More on Your Quick Card or Gift Card!

--- Check Closed ---



AME	Susan	Mitchell		Consulling		LOCATION 1111 N. Cheston	ut St. Winston S.	alem NC 27101		DATE 6/26/2009	
ISTRUCTION		•	within 10 days of tr		ther receipts affached	Any expenditure of \$25.00 or m			r ency translation	0/20/2009	
						sement for "Entertainment or Mi					, -
1	RAVEL D	ATES		6/21/2009	6/22/2009	6/23/2009	6/24/2009	6/25/2009	6/26/2009	6/27/2009	
O. E	XPENSE	ITEM		SUNDAY	MONDA	Y TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
1 AIR FAI	RE								<u></u>		
2 AUTO F	RENTAL				!						
3 TAXI - E	TC.		***************************************								· · · · · · · · · · · · · · · · · · ·
4 MILEAC	3E	@	\$0.550		i			\$126.50			\$126
GAS &	OIL										
S PARKIN	iG, TOLLS	S									
7 HOTEL								190.46			\$190
3 TELEPH	ONE										
TIPS (o	ther than n	neals)									
0 OTHER											*******
1 SUBTO	TAL LINE	S 1 - 10						\$316.96			\$316
2 BREAK	FAST				1						
3 LUNCH						\$24.70	\$ 20.10	\$17.32			\$62
4 DINNER											
5 ENTER	[AINMEN]								·		
6 OTHER									·		
7 SUBTO	TAL LINE	S 12 - 16				\$24.70	\$20.10	\$ 17.32			\$62.
8 GRAND	TOTAL					\$24.70	\$20.10	\$334.28			\$379.
TRAVEL	. 10					Martinsville [Martinsville Horne	·····		
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Evolon	ation of t	sin includ	lina city (citical vicitad				DOCUMENT#	DATE	AMOUNT	
	ille VA - A		ning city (cities) visited	i	CASH ADVANC	<u> </u>				
			John and C	ary (only Susan	and Gary on 1		CHECKS				
IAOIG IOIS	ruez weis	101 305311,	John and C	aly (only Susan	and Gary On	SUBTOTAL	CHECKS				
						COMPANY PAIL	,				
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		ACCC		BER		TELEPHONE				\$130.40	
DIV	PLT	DEPT	BASE	SUB	\$	FOOD				\$62.12	
				non-food	\$316.96	OTHER				φυ2.12	
 				food	\$62,12			OTAL ADVANCI			\$252.5
ļ											4202.0
	 					DUE COMPANY	(ATTACH REFL	IND)		į	
 	 -	1						MANUAL CHECK			
	 				\$379.08	DUE EMPLOYEE		C VOUCHER #			\$126.5
PLOYEE S	GNATUR	 E	<u> </u>			APPROVAL SIGI					7,20,00
IVER CHE						PRINT NAME & 1				***************************************	
TAEFORM WIT	J. 10					The state of the s		*		,	



50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



And the state of t			•							
MITCHELL, SU 413 WESTBRO RALEIGH, NC US	OOK DR	name address	room number: arrival date: departure date: adult/child: room rate:	400/KXTE 6/23/2009 6/25/2009 1/0 \$89.00	5:29:00PM					
be placed on the acc estimated incidentals,	ount for the full anticip through your date of che	in is attached to a bank or checking account, a hold will ated dollar amount to be owed to the hotel, including ck-out and such funds will not be released for 72 business the discretion of your financial institution.	RATE PLAN LV0 HH# 854967083 DIAMOND AL AA #6N403X6 BONUS AL CAR							
Confirmation: 6/25/2009	85948579 PAGE 1		your room. A safety deposit box is to be held personally liable in the full amount of these charges, I ha	available for you in the event that the indicate we requested weekday gency, I, or someone in	e lobby. I agree that my liabled person, company or assi- delivery of USA TODAY, if	money or items of value unattended in ility for this bill is not waived and agree ociation fails to pay for any part or the refused, a credit will be applied to my evacuation due to a physical disability.				
date	reference	descripțio		amo	unt	•				
6/23/2009 6/23/2009 6/23/2009 6/23/2009 6/24/2009 6/24/2009 6/24/2009	495192 495192 495192 495192 495362 495362 495362 495362	GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX WILL BE SETTLE EFFECTIVE	ED TO AX *1409 E BALANCE OF	\$89.00 \$3.56 \$0.89 \$1.78 \$89.00 \$3.56 \$0.89 \$1.78 \$190.46 \$0.00						
	HiltonHHonol Hilton HHono	ned approximately 3560 HHonors poin ther stay at any of more than 3,000 Hill is.com rs member? Now through June 30, 200 ipating hotels. Visit hampton.com or ca	09, earn 1,000 Hilton HHoi	nors bonus point						
for reserva	1 .	0.hampton or visit us online at ha				thanks.				
account no			date of charg	ge folio/ched	ck no.	<u> 1970 - 1</u> 980 - 1977 - 19 - 24 - 22 - 18				
card memb	er name		authorization		initial					
establishme	nt no. and local	IOD establishment agrees to transmit to card holde	purchases & s	services	i					
			taxes			·				
			tips & misc.			·				
signature	of card membe	r								

total amount

0.00

ARTS ETC 45 E CHURCH ST MARTINSUILLE VA 24112 276-666-6655 MERC # 0000001646853 TERM ID: 00184024 12:11P 06/23/09 **********1409 EXP: **** REF#: 0004 SALE BATCH# 671 AUTH# 506840 \$24.70 **AMOUNT** TIP TOTAL APPROVED

CUSTOMER COPY

THE SMOKEY PIG 2820 Greensboro Rd. Martinsville, VA 24112 ph 276-632-5800

Thank You for Visiting Smokey Pig Bar-B-Que

TABLE: SHUOWANTA #96 - 1 Guests Your Server was [Not Found] 6/24/2009 12:23:07 PM - ID #0086343 Subtotal \$18.32 Total Taxes \$1.78 Grand Total \$20.10 This Payment \$20.10 Total Charged: \$20.10 Paid by Credit Card Credit Purchase Name : MITCHELL/SUSAN CC Type : Amex CC Num · xxxx xxxx xxxx 1409 Reference : 4322 Approva! : 549904 CUSTOMER COPY Please Come Back! WE CATER 632-5800

DAILY GRIND
COFFEE HOUSE & CAFE
10 E. Church St.
Martinsville; VA 24112
(540) 632-0035

06/25/200

Host:

26			11:56 10	A 02
7 Bea	nini 1/2 Soup In Soup e Panini	0	б	.9
Unwind Iced Te	Club Panini a Medium			.9! .7i
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Orde	er Tota	a 7	17.3	2
	(XXXXXXXXX14) 527702	09	17.	32
Tip	:		-	
TOTAL	:	TOTAL	:	
SIGNATUR	E :			

Thank you for your patronage!
Receive a Free Specialty
Espresso Beverage When You
Load \$20 or More on Your Quick
Card or Gift Card!

--- Check Closed ---



NAME					DEPARTMENT		LOCATION				DATE	- 1
John	Huggins	;			Consulting	AOM	111 N. Chestnu	it St. Winston S	alem, NC 27101		6/20/2009	
INST	RUCTION	S:							is receipted bill. Foreign curre side of this form must be con-		<u> </u>	
	ī	RAVEL D	ATES		6/14/2009	6/15/2009	# 6/16/2009	6/17/2009	6/18/2009	6/19/2009	6/20/2009	
NO.	Ε	XPENSE	ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Saturday	TOTALS
1	AIR FAF	₹E										
2	AUTO R	ENTAL										
3	TAXI - E	TC.										
4	MILEAG	Ę	@	\$0.550		\$41.25			41.25			\$82.
5	GAS & C	ΣÌL								• •		
6	PARKIN	G, TOLLS										
7	HOTEL					95.23	\$95.23	\$95.23				\$285.
8	TELEPH	ONE										
9	TIPS (otl	her than m	eals)									
10	OTHER	(Cleaners	and Groo	eries)								
11	SUBTO	AL LINES	1 - 10			\$136.48	\$95,23	\$95.23	\$41.25			\$368,
12	BREAKE	AST										
13	LUNCH					\$8.22	1			-		\$8.2
14	DINNER				· · · · · · · · · · · · · · · · · · ·	\$10.42	\$24.60	\$60.22	1 1			\$95.2
15	ENTERT	AINMENT										
16	OTHER	•		-						-	-	
17	SUBTOT	AL LINES	12 - 16			\$18.64	\$24.60	\$60.22				\$103.4
18	GRAND	TOTAL				\$155.12	\$119.83	\$155,45	\$41.25			\$471,6
						EXPLANATION (OF TRANSPORTA	ATION EXPENS	SE			\$471
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	TRAVEL	то	GSO									
	TRAVEL	то	home									
,	AUTO MI	LEAGE				75			75			
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i	Explana	ition of t	rip includ	ding city (c	itles) visited:		CASH ADVANC	Ē		7.000.1	_	
							CASH					
F	Roundtrip	drive to N	Aartinsville	e			TRAVELERS	CHECKS				
	Dinner 6/	16 and 6/	17 Susan	and John			SUBTOTAL			:		
-							COMPANY PAID			,		
1	/asterca	rd paymei	nts noted o	on receipts			AIRLINE					
-			•				AUTO RENTA	L				
-							HOTEL				\$285.69	
ſ			ACC	COUNT NUM	BER		TELEPHONE					
	δIV	PLT	DEPT	BASE	SUB	8	FOOD				\$93.04	
	•		-		non-lood	\$368.19	OTHER					
ľ					food	\$103.46			TOTAL ADVANCE	ES -		\$378.73
[
ļ		<u> </u>					DUE COMPANY					
ŀ						\$471.65	DUE EMPLOYEE		MANUAL CHECK PC VOUCHER #	#		\$92.92
4 D1 -	NEE 01	CNATUR	Lohn Liv	unnine	<u></u>		APPROVAL SIGN				<u> l</u>	,,,,,,
EMPLOYEE SIGNATURE John Huggins								,				
ELIV	ER CHE	CK TO	John Hu	iggins			PRINT NAME & T	ITLE				



50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



					\sim				
SUITE 300 WINSTON-SA	CHESTNUT STR	aduless	room number: arrival date: departure date:	400/KXTE 6/15/2009 6/18/2009	5:45:00PM				
US			adult/child: room rate:	1/0 \$89.00					
estimated incidentals,	count for the full anticip through your date of ch	k-in is attached to a bank or checking account, a hold will nated dollar amount to be owed to the hotel, including eck-out and such funds will not be released for 72 business the discretion of your financial institution.	RATE PLAN LV0 HH# 810044663 DIAMOND AL DL #0252025432 BONUS AL CAR						
Confirmation:	87497954		Rates subject to applicable sales, occ	UDANCY or other ta	yor Plants do not leave				
6/18/2009	PAGE 1		your room. A safety deposit box is available for you in the lobby. Lagree that my liability for this bill is not waived at to be held personally liable in the event that the indicated person, company or association fails to pay for any par full amount of these charges. I have requested weekday delivery of USA TODAY. If refused, a credit will be applie account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical d signature:						
date	reference	description		amo	DUNT.	*			
6/15/2009 6/15/2009 6/15/2009 6/15/2009 6/16/2009 6/16/2009 6/16/2009 6/17/2009 6/17/2009 6/17/2009 6/17/2009	494274 494274 494274 494274 494372 494372 494372 494372 494479 494479 494479	GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX GUEST ROOM STATE TAX COUNTY TAX COUNTY TAX COUNTY TAX OCCUPANCY TAX WILL BE SETTLED EFFECTIVE E	BALANCE OF	\$89.00 \$3.56 \$0.89 \$1.78 \$89.00 \$3.56 \$0.89 \$1.78 \$89.00 \$3.56 \$0.89 \$1.78					
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	Hilton HHonor night at partic	rs member? Now through June 30, 2009, pating hotels. Visit hampton.com or call	earn 1,000 Hilton HHonon elah 1,800-HAMPTON for delah	rs bonus point. ils.	s per				
for reserva	tions call 1.80 0).hampton or visit as online at han	pton.com	73.	thanks				
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card membe	er name		authorization	142973	initial				
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		On establishment agrees to transmit to card holder for .	payment purchases & ser	vices					
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signature	of card member		,						
~-			total amount						

0.00

NI KAMENITO KESTAUKANT 1212 MEMORIAL BLVD MARTINSVILLE. VA 24112

Merchant ID: 5010

Ref #: 0605

Server 10: 1

Sale

mmmm1292

Entry Method: Swiped AYEX

7.22 Amount:

lip: 1.00

8.22 Total:

11:44:39 06/15/09

Appr Code: 586809 Inv #: 000005 Batch#: 000533 Approximatine

ISTORET COPY

EL RANCHITO 3069 VIRGINIA AVE

COLLINSVILLE, VA 24078

19:10:25 06/16/2009 000000004340543 Merchant ID: 01573118

Terminal ID: 4450553540

CREDIT CARD

AMEX SALE

XXXXXXXXXXXXXXXXX1292 CARD # 0026 INVOICE 000316 Batch #: 0008 SERVER 527000 Approval Code: Swiped Entry Method: Online

Approved: PRE-TIP AMT

\$5.40 TIP

TOTAL AMOUNT

1090 MEMORIAL BLUD. MARTINSUILLE, VA 2411

TERMINAL ID. : 01149561 MERCHAHT #: 323545438992

HC SVR. 3609

SALE 9A1CH: 000662 DATE: Jun 15, 09 SEO: 0016 IHU: 356005 IIM: 18:57 AUTH: 03226B

BASE

TIP

TOTAL

JOHN HUGGINS

RANIAS RESTAURANT 147 E MAIN STREET MARTINSVILLE VA 24112 276-638-4462

63

Merchant ID: 000008994296 Term ID: 00141439 Ref #: 0008

Server ID: 1

Sale

XXXXXXXXXXXX1292

Entry Method: Swiped X3MA

58.22 Amount:

Tip:

19:02:18 06/17/09

Inv #: 000008 Appr Code: 528464 Batch#: 000389 Approd: Online

> fustomer Copy TANK YOU!



NAMI					DEPARTMENT		LOCATION	1		·		DATE	
\vdash	Huggi				Consulting	AOM	DATE						
INSTE	RUCTIO	NS:	Report o	tue within 10 days of it ons must be clearly sho	avel, with hotel bills and	other receipts attached	Any expenditure of \$25	00 or ma	er musi be supported	by a receipted bill. Foreign rise side of this form must b	tunency translation		
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					food	\$78.16	OTTIER			OTAL ADVANC			
			_	<u> </u>						OTAL ADVANC	28		\$283.50
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						MANUAL CHECK # SAGE DUE EMPLOYEE PC VOUCHER #					0450 45		
PLOV	EE SIG	NATUDE	John Hug	gine				_					\$150.12
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LIVER		K 10	John Hug	gins			PRINT NAME 8	TITL	.E				



A TABLE OF THE PROPERTY OF THE

50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



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HUGGINS, JOH 111 NORTH CH SUITE 300 WINSTON-SAL	HESTNUT STR		name address	room number: arrival date: departure date:	401/KXTH 6/22/2009 6/24/2009	6:00:00PM 7:43:00AM				
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CONFIRMATIO 6/24/2009	ON NUMBER :	85254765 1		to be held personally liable in the e	vent that the indicate requested weekday	riodoy. I agree that my liability of person, company or associated person.	oney or items of value unattended in y for this bill is not waived and agre- ation fails to pay for any part or the lused, a credit will be applied to m icuation due to a physical disability			
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	any other stay	at more than 3,000	Hilton Family hotel	ls worldwide, please visit Hi	earnings for this ItonHHonors.co	s or nm.				
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THANK YOU) FOR CHOOS	ING HAMPTON INN	1	taxes						
				tips & misc.						
signature o	f card member									
X				total amount						

-190.46

HUGOS FOOD SPORT & SPI 10 E. CHURCH STREET MARTINSVILLE, VA 24112

Merchant IO: 4451469464 Term 10: E04451469464

4451469464

Sale

AMEX

XXXXXXXXXXXX1004

Entry Method: Swiped

Approd: Online 06/22/09

Batch#: 000113 13:07:06

Inv #: 000002 Appr Code: 583546

Amount:

14.26

Tip:

Total:

\$17-26

Customer Copy

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

06/22/2009

Merchant ID:

19:14:30 000000004340543

01573118

XXXXXXXXXXX1292

0024

0002

000322

524955

Swiped

Online

Terminal ID: 4450553540

CREDIT CARD

AMEX SALE

CARD # INVOICE

Batch #: SERVER Entry Method:

Approval Code: Approved:

PRE-TIP AMT

ΠP

\$20.14

TOTAL AMOUNT

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

06/23/2009 Merchant ID: 000000004340543

Terminal ID: 4450553540

19:04:13

CREDIT CARD AMEX SALE

CARD # INVOICE XXXXXXXXXXXX1292

Batch #: SERVER

0041 000323 0009

Approval Code: Entry Method: Approved:

521508 Swiped Online

PRE-TIP AMT

ΠP

TOTAL AMOUNT

\$600 \$36.76



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50 HAMPTON DRIVE



30 P. F. S.		,	MNSVILLE, VA			· .*			USA
Hamptoni		TELEPHONE 276 647	7-4700	FAX.276	8 -647-4119	offi	icial sponsor U.	S. Olympic Team	ĢĞĢ
							· : / 		
BUMGARNER, 1793 FAIRWAY			name address	·] arti	im number: ival date: sarture date:	307/SOBL 6/24/2009 5 6/25/2009	5:38:00PM		
NEWTON, NC : US	28658 			adu	ulvchild: om rate:	1/0 \$89.00			
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Confirmation: 8	8107089 PAGE 1			your room, a to be hold pr full amount account. In t	n to applicable sales, occur A salety deposit box is ava- tersonally liable in the eve- of these charges, I have the event of an emergon ate yes by checking hare: (pilable for you in the ent that the indicated requested weekday only. I, or someone in.	lobby, I agree that my d person, company or delivery of USA TODA	liability for this bill is not association falls to pay fire. If refused, a credit will	Waived and agree for any part or the
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50 HAMPTON DRIVE



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Hamplet		MARTINSVILLE, VA TELEPHONE 276 647-4700	24112 FAX 276	647-4119	official	sponsor U.S. Olympic Team
						60
BUMGARNER, 1 1793 FAIRWAY	BARY DR	name address	· arriv	al date:	12/SXBL 5/22/2009 6:02 5/23/2009	2:00PM
NEWTON, NC 2 US	8658		adúl	artore date.	/0 \$89,00	
be placed on the accou-	nt for the full anticipat ough-your date of check	n is attached to a bank or thecking account, a hold will ted dollar amount to be owed to the hotel, including arous and such funds will not be released for 72 business te discretion of your financial institution.		RATE PLAN HH# 227066682 BI AL US #410 BONUS AL	LV0 LUE 4B6H4 CAR	
Confirmation: 81 6/23/2009	1458382 PAGE 1		your room. A to be held per full amount of account, in the Please indicate	safety deposit box is available something the overties of the safety of the overties overties of the overties	ble for you in the lobb that the Indicated per weekday delivi	est do not leave any money or items of value unanterided in y. Lagree that my liability for this bill is not walved and agree son, company or association falls to pay for any peri or the ery of USA TODAY. It refused, a credit will be applied to my party, require appellal evacuation due to a physical disability.
			signatur	re;		The second secon
date	reterence	description	bij 📜 🛒		amount	· · · · · · · · · · · · · · · · · · ·
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	night at partic	cipating hotels. Visit hampton.com or	call 1-800-l	HAMPTON for detail	ils	
for reservat	ions call 1.80	O.hampton or visit us online at h	ampton.	.com		thanks,
account no.			•	date of charge	folio/check	no.
card membe	er name			authorization	143207	initial
establishme	nt no. and loca	RION establishment Syrees to transmit to Gold no	alder for payment	purchases & ser	vices	
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			}	tips & misc.	- 	
signature	of card membe	er				
×			}	total amount		_

























EL RANCHITO 3069 VIRGINIA AVE

Merchant ID: 06/24/2009 COLLINSVILLE, VA 24078 000000004340543 18:49:23

CREDIT CARD

4450553540

Terminal ID:

01573118

AMEX SALE

CARD #
INVOICE SERVER Batch #: Approval Code: XXXXXXXXXXX1557

PRE-TIP AMT

Approved:

Entry Method:



Rod P	Pruett		DEPARTI Consultii		LOCATION	l C1 111			DATE	
INSTRI	UCTIONS:	Report due within 10 da			III N. Chest	nut St. Winston S	alem, NC 27101		7/7/200	9
		atulations must be clea	arly shown in the suppor	as and other receipts attack ding documentation. If reim	hed. Any expenditure of \$25.00 or nbursement for 'Entenanment or A	more must be supported by feat" is claimed, the reverse	a recepted bill. Foreign ou	Trency franslation	·	
	TRAVEL DATE	<u> </u>	6/21/2	2009 672272		6/24/2009	6/25/2009	6/26/2009	6/27/2000	7
NO.	EXPENSE ITE	M	SUND	DAY MON	DAY TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	6/27/2009	
1 A	AIR FARE							1770	SATURDAY	10
	UTO RENTAL					T		 -	 	
3 T.	AXI - ETC.						 	 -	 	
4 M	IILEAGE @	\$0.	550	\$66.0	00			<u> </u>	 	
5 G	AS & OIL						<u> </u>			
6 P/	ARKING, TOLLS	<u> </u>				<u> </u>	<u> </u>			<u> </u>
7 H	OTEL									
8 TE	ELEPHONE	<u> </u>				† · · · · · · ·			 	
9 TU	PS (other than meals	:)				1				·
10 01	THER (Copy Charge	s)		-			— — ——————————————————————————————————			
1 80	JBTOTAL LINES 1 -	10		\$66.0	0					
2 BR	REAKFAST									
3 LU	NCH									
4 DIN	NNER									
5 EN	TERTAINMENT									
1TO 8	HER									
' SUI	BTOTAL LINES 12.	16								
GR/	AND TOTAL			\$66.00						
				EXPLANATIO	ON OF TRANSPORTA	TION EXPENSE				\$6
TRA	AVEL FROM			W-S						
TRA	AVEL TO			Martinsville						
TRA	VEL TO			W-s		·				
AUT	O MILEAGE			120						
					ADVANCES:	D	OCUMENT#	DATE	AMOUNT	
Exp	lanation of trip in	cluding city (cities) visited	d:	CASH ADVANCE				XIIO0141	
					CASH	1 -		[
Ame	rican of Martinsville				CASH TRAVELERS C	HECKS				
Ame	rican of Martinsville				·	HECKS				
Amer	rican of Martinsville				TRAVELERS C	HECKS				
Amer	rican of Martinsville				TRAVELERS C SUBTOTAL	HECKS				
Amer	rican of Martinsville				TRAVELERS C SUBTOTAL COMPANY PAID	HECKS				
Amer	rican of Martinsville				TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE	HECKS				
Amer		CCOUNT NUM	1BER		TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL	HECKS				
Amer	A	1	ABER SUB	\$	TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL	HECKS				
	A			\$ \$66.00	TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE	HECKS				
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	A		SUB non-food		TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	TOTA	AL ADVANCES			
	A		SUB non-food		TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	TOT,				
	A		SUB non-food		TRAVELERS C SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	TOT,	AL ADVANCES DAL CHECK # DUCHER #			\$66.0



BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112 REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

INN/OLOGE NO	DATE	5.0				
INVOICE NO.	DATE	P.O. NO.		TERMS	DUE DATE	PROJECT
5039	7/13/2009			Net 45	8/27/2009	
DE	SCRIPTION		DA	YS	RATE per DAY	AMOUNT
Susan Mitchell - Project AOM - 06/29-07/12	Manager/Fina	ncial Consultant -		4	1,200.00	4,800.00
John Huggins - Supply (06/29-07/12	Chain Consulta	int - AOM -		10	1,200.00	12,000.00
Gary Bumgarner - Techr 06/29-07/12	nical Architect	- AOM		8	1,600.00	12,800.00
Reimbursable Travel Exp 07/06-07/10	pense - Susan	Mitchell -			251.95	251.95
Reimbursable Travel Exp 06/29-07/03	oense - John H	luggins -			631.22	631.22
Reimbursable Travel Exp 07/06-07/10	oense - John H	luggins -			598.50	598.50
Reimbursable Travel Ex 06/29-07/03	pense - Gary I	Bumgarner -			530.22	530.22
Reimbursable Travel Exp 07/06-07/10	ense - Gary B	umgarner -			573.59	573.59
AOM Phase B Project					Total	\$32,185.48



NAME	DEPARTMEN	1	LOCATION				DATE	
Susan Mitchell	Consulting		111 N. Chestnu	t St. Winston Sale	em, NC 27101		7/10/200	9
INSTRUCTIONS: Report due water 10 days	of Iravel, with hotel bills an	d other receipts attache	ed. Any expenditure of \$25.00 or n	note must be supported by	a receipted bill. Foreign	Currency translation		-
The book street of the	shown in the suppoining o	ocumentation II reint	oursement for 'Ententainment or M	eal' is claimed the reverse	side of this form must b	e completed		
TRAVEL DATES	7/5/2009	7/6/20	09 7/7/2009	7/8/2009	7/9/2009	7/10/2009	744,0000	
NO. EXPENSE ITEM	SUNDAY	MOND	AY TUESDAY	WEDNESDAY	THURSDAY	 	7/11/2009	ļ
1 AIR FARE			1000711		INURSUAT	FRIDAY	SATURDAY	TOTALS
2 AUTO RENTAL		 				 	 	
3 TAXI-ETC.						 -	 -	ļ
4 MILEAGE @ \$0.50	50	 	\$118.80			 	 	
5 GAS & OIL		 	\$110.00		-	<u> </u>	 	\$118.80
6 PARKING, TOLLS	 	 				<u> </u>		
7 HOTEL		 -	95.00	Ĺ				<u> </u>
8 TELEPHONE		 	95.23					\$95.23
9 TIPS (other than meals)	·				·····		ļ	
10 OTHER	 	-					ļ 	
11 SUBTOTAL LINES 1 - 10	 	 						
12 BREAKFAST	 	 	\$214.03					\$214.03
13 LUNCH		24.35	642.57					
14 DINNER		24.55	\$13.57					\$37.92
15 ENTERTAINMENT	<u> </u>							
16 OTHER								
17 SUBTOTAL LINES 12 - 16		\$24.35	\$13.57					
18 GRAND TOTAL		\$24,35	\$227.60					\$37,92
			N OF TRANSPORTAT	ION EXPENSE	 !-		+	\$251.95
TRAVEL FROM		Home	NOT HOMOFORIA	ION EXPENSE				\$251.95
TRAVEL TO		Martinsville	Martinsville			L		
TRAVEL TO		}	Home					
AUTO MILEAGE			216		۲			ĺ
			ADVANCES:		OCUMENT #	DATE	111011117	
Explanation of trip including city (cities) visited:		CASH ADVANCE		OCCUIENT &	DATE	AMOUNT	}
Martinsville VA - AOM	•		CASH					ļ
Note lunches were for Susan, John and G	ary (Mon) and Su	san and John (HECKS				
	 -	·	SUBTOTAL					i
			COMPANY PAID					ĺ
	·		AIRLINE				———	j
			AUTO RENTAL					
		·	HOTEL				\$95 23	
ACCOUNT NUM	BER		TELEPHONE				\$55.25	ĺ
DIV PLT DEPT BASE	SUB	\$	FOOD				\$13,57	
	non-food	\$214.03	OTHER				\$13,37	ļ
	food	\$37.92	·	TOT	AL ADVANCES			\$100.00
			·					\$108.80
		}					İ	i
			DUE COMPANY (AT	TACH REFUND)				
			DUE COMPANY (AT		IUAL CHECK#			
		\$251.95	DUE COMPANY (AT	MAN	IUAL CHECK #			\$143.15
IPLOYEE SIGNATURE		\$251.95		MAN PC V				\$143.15

Customer Copy
THANK YOU!
PLEASE COME AGAIN!

THE SMOKEY PIG 2820 Greensboro Rd. Martinsville, UR 24112 Ph 276-632-5800 | TABLE: D | - | Gusta | 7/7/2009 12:38:24 PM - ID | #8087450 PM - ID \$12.33 Thank You for Visiting Smokey Pig Bar-8-Due Total Taxes Grand Tota; Subtotal

Name
CC Type
: MITCHELL/SUSAN
CC Num
: Amex
Reference
: Axxx xxxx xxxx 1409
Approval
: 560313
CUSTOMER COPY \$13.57 \$13.57 \$13.57 Credit Card Total Charged: Credit Purchase This Payment

Please Come Back! NE CRTER 632-5800

Entry Method: Swiped 12:22:47

公 经

Merchant ID: 728808137284

TASTY CREAM DOWNTS
24 W CHURCH STREET
MORTINSVILLE, VA 24114
(276) 656-1117

floor with finding

Apar Code: 807183 Batch#: 000554

Inv#: 800000 87/85/89

lotal:

TLEMMANNING ST.

Sale



50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



			· · · · · · · · · · · · · · · · · · ·			J J.,,
MITCHELL, S	SUSAN ROOK DR	name	room number:	216/KXTD		
RALEIGH, NO	C 27615	address	arrival date: departure date:	7/6/2009 7/7/2009	5:41:00PM	
US			adult/child: room rate:	1/0 \$89.00		
Les hiaren ou tue sco	Ount for the full anticio	ein is attached to a bank or checking account, a hold will lated dollar amount to be owed to the hotel, including	RATE PLAN	LV0		
estimated arcidentals,	inrough your date of the	ck-out and such funds will not be released for 72 business the discretion of your financial institution.	HH# 854967083 AL AA # BONUS AL	6N403X6 CA	AR	
Confirmation:	86775661		Rates subject to applicable sales, occu your room. A salety deposit box is av	UDADOV or other task	or Diameter	MODEL OF John of July
7/7/2009	PAGE 1		your room. A salety deposit box is avito be held personally liable in the ever full amount of these charges. I have account. In the event of an emergen Please indicate yes by checking here: signature:	ent that the indicate requested weekday	ed person, company or assi	ality for this bill is not waived and agre ociation fails to pay for any part or th
date	reference	descriptio	n -	amo	ini	
3 10/00						U
7/6/2009 7/6/2009	496689 496689	GUEST ROOM STATE TAX	: :	\$89.00		
7/6/2009	496689	COUNTY TAX		\$3.56		
7/6/2009	496689	OCCUPANCY TAX		\$0.89 \$1.78		
		14/11 . 27 . 27		\$1.78		
	;	WILL BE SETTLE EFFECTIVE	ED TO AX *1409 E BALANCE OF	\$95.23 \$0.00		
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	Earn up to 10,	000 Hilton HHonors® bonus poin	ts Now through September 3	30,2009, earn E	oonus	
for reservati	· [-	cipating hotels. Visit hampton.com for c hampton or visit us online at har	letalis, Subject to HHonors T	erms and Con	ditions.	
		mampton of visit us online at har	npton.com			thanks.
account no.			date of charge	folio/check	no.	A STATE OF THE PARTY OF THE PAR
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card member	name		authorization	143190	-A	
			authorization		initial	
establishment	no. and locatio	establishment agrees to transmit to card holder fo	Purchases & service	ces	İ	
			taxes			
			tips & misc.			
signature of	card member					

total amount

0.00



MPL	OYEE SIGI	NATURE	John Hu	ggins			APPROVAL SIGN	ATURE				
			<u> </u>			\$ 531.22	DUE EMPLOYEE		C VOUCHER#		<u> </u>	\$178.05
								ı	MANUAL CHECK			
							DUE COMPANY (ATTACH REFU	IND)			
										•		
					food	\$180.53			TOTAL ADVANCE	s		\$453.17
					non-food	\$450,69	OTHER					
	ĐΙV	PLT	DEPT	BASE	SUB	\$	FOOD				\$167.48	
			ACC	OUNT NUM	3ER		TELEPHONE					
_							HOTEL				\$285.69	
_							AUTO RENTA	L				
1	Mastercard	paymer	its noted o	n receipts			AIRLINE					İ
	unch and	dinner 6	/29 - 7/2 C	Sary and Johi	n		COMPANY PAID					,
_	Dinner 6/23	Susan	and John				SUBTOTAL					1
1	Roundtrip o	frive to N	Martinsville				TRAVELERS	CHECKS				
-							CASH					
	Explanati	on of ti	rip includ	ling city (ci	ities) visited:		CASH ADVANCE					
							ADVANCES:		DOCUMENT#	DATE	AMOUNT	}
	AUTO MILI	EAGE				75			75	150		
	TRAVEL T	0	home						-			
	TRAVEL T	0	GSO									
<u> </u>	TRAVEL F	ROM	home									
						EXPLANATION	OF TRANSPORTA	TION EXPENS	E			\$631 22
18	GRAND TO	DTAL				\$181.67	\$161,59	\$146.86	\$58.60	\$82.50		\$631.22
17	SUBTOTA	LLINES	12 - 16			\$45.19	\$66 36	\$51.63	\$17.35			\$180.53
16	OTHER											
15	ENTERTA	INMENT										-
14	DINNER					\$32.14	\$46.13	\$35.47				\$113,74
13	LUNCH					\$13.05	\$20.23	\$16,16	\$17.35	-		\$66.79
12	BREAKFA	ST										
11	SUBTOTA	LUNES	S 1 - 10			\$136,48	\$95.23	\$95.23	\$41.25	\$82.50		\$450,69
10	OTHER (Cleaners	and Groo	eries)								
9	TIPS (other				<u> </u>							
8	TELEPHO											
7	HOTEL					95.23	\$95.23	\$95.23			<u> </u>	\$285.69
	PARKING	, TOLLS					-					
5	GAS & OII	L					ļ					
4	MILEAGE		@	\$0.550		\$41.25			41,25	\$82.50		\$165.00
3	TAXI - ET	C										
2	AUTO RE	NTAL							<u> </u>			
1	AIR FARE			<u>.</u>		ļ		ļ				
NO	EX	PENSE	ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Saturday	TOTALS
	TR	AVEL D	ATES		6/28/2009	6/29/2009	# 6/30/2009	7/1/2009	7/2/2009	7/3/2009	7/4/2009	
									a receipted bill. Foreign curre side of this form must be com			
	Huggins		Danna dua	or the Michael I	Consulting	AOM	111 N. Chestnu	7/4/2009				
NAM					DEPARTMENT		LOCATION				DATE	<u>-</u> -



50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



					·····
SUITE 300	HN HESTNUT STRE LEM, NC 27101	EET name address	room number: arrival date: departure date: adult/child: room rate:	419/KXTE 6/29/2009 7/2/2009 1/0 \$89.00	5:36:00PM
be placed on the acc estimated incidentals,	ount for the full anticipa through your date of chec	in is attached to a bank or checking account, a hold will sted dollar amount to be owed to the hotel, including tk-out and such funds will not be released for 72 business he discretion of your financial institution.	RATE PLAN HH# 810044663 AL DL #0 BONUS AL	252025432	AR
Confirmation: 7/2/2009	85230967 PAGE 1		to be held personally liable in the ev full amount of these charges. I have	railable for you in t ent that the indica requested weekd ncy. I, or someone	exes. Please do not leave any money or items of value unattended in he lobby I agree that my liability for this bill is not waived and agree ted person, company or association fails to pay for any part or the ay delivery of USA TODAY. If refused, a credit will be applied to my in my party, require special evacuation due to a physical disability.
date	reference	descriptio		-	
				d)	ount
6/29/2009 6/29/2009 6/29/2009 6/30/2009 6/30/2009 6/30/2009 7/1/2009 7/1/2009 7/1/2009 7/1/2009	HiltonHHonors Earn up to 10,	ned approximately 5590 HHonors poin her stay at any of more than 3,000 Hill s.com 000 Hilton HHonors® bonus poi	BALANCE OF Its for this stay. To check yo fon Family hotels worldwide	30.2009. ear	: n bonus
for resense		cipating hotels. Visit hampton.com for I. hampton or Visit us online at ha		Terms and C	onditions.
account no		Anting to the state of the stat	date of charge	folio/ch	thanks. eck no.
card memb	er name		authorization	143409	initial
establishme	nt no. and locati	On establishment agrees to transmit to card holde	r for payment purchases & ser	rvices	
			taxes		
			tips & misc.	<u> </u>	
signature	of card member		total amount		
X				(0.00

ARTS ETC 45 E CHURCH ST MARTINSUILLE UA 24112

276-666-6655

MERC # 0000001646853 TERM ID: 00184024

06/30/09 ********1292

12:24P

EXP: ****

SALE

REF#: 0007

BATCH# 676 AUTH# 584760

AMOUNT

\$17.23

TIP

TOTAL

APPROVED

CUSTOMER COPY

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

06/29/2009

19:01:53

Merchant ID:

000000004340543

Terminal ID: 4450553540

01573118

CREDIT CARD

AMEX SALE

CARD # INVOICE XXXXXXXXXXXX1292 0044

Batch #: SERVER

000329 0009

Approval Code: Entry Method: Approved:

585698 Swiped

PRE-TIP AMT

Online

ПΡ

TOTAL AMOUNT

CUSTOMER COPY

TASTY CREAM DONUTS 24 W CHURCH STREET MARTINSVILLE, VA 24114 (276) 656-1117

Merchant ID: 720000137284

Sale

Entry Method: Swiped

13,05

06/29/09

12:10:09

Tovil: AMAMA

Appr Code: 288328

Approd: Online

8atch#: 000549

Customer Copy TRANK YOU! PLEASE COME AGAILM

APRILLER ... NETTOBLE OF GOVERNOR 281 il. CommonWearth Blvd. Martinsville, VA 24112 276-638-2377

283 Commonwealth Blvd

Martinville Va 24112 276-632-7133 Fax 276-632-7656 www.texassteakhouse.com

AMEX

 $\chi\chi/\chi\chi$

3216

02/1

11 Wendy

587298

Date:

Card Type:

Trans Key:

Exp Date:

Auth Code:

acct #:

Check:

Table:

Jun30'09 07:42PM

XXXXXXXXXXXX1292

AIA001897622500

TB#15

ARTS ETC 45 E CHURCH ST SENOVIA Z MARTINSUILLE UA 24112 DATE: 07-01-09 TIME: 07:21 PM GUESTS: 1 276-666-6655 MERC # 0000001646853 CARD TYPE: AMEX

TERM ID: 00184024 CARD NUMBER: #*******1292 APPROVAL CODE: 506408 01:25P Merchant ID: 61345 07/02/09

Trans Type: Auth *********1292 EXP: ****

SALE Amount: BATCH# 678 AUTH# 568345

\$14.45 Tip: AMOUNT

TIP \$17.35 TOTAL

APPROVED Cardmember agrees to pay total in accordance with agreement onversion

AUGUS FOOD SPORT & SPI IN E. CHURCH STREET . . . MARTINSVILLE. VA 24112

REF#: 0014

Merchant 10: 4451469464 Term 10: E04451469464 4451469464

Sale

AMEX

XXXXXXXXXXX1292 Entry Method: Swiped

Batch#: 099122

Appryd: Online 12:34:31 97/01/03

Inv #: 898082 Appr Code: 588228

Server:

13.16 40.13 Amount: Subtotal:

lip: Tip Amount:

\$6.00 \$46.00 John K. Hugger Total: Total: Signature:

Customer Cape



laha Uwasi			DEPARTMENT		LOCATION				DATE	
lohn Huggi	ins		Consulting	AOM	111 N. Chestnu	I St. Winston S	alem, NC 27101		7/11/2009)
NSTRUCTIO		within 10 days of tra	vel, with hotel bills and o	ther receipts attached. Any	expenditure of \$25,00 or mor	e musi be supported by	a receipted bill Foreign curren	cy translation		
• • • • • •	TRAVEL DATES	musi ne czeany snow	7/5/2009	7/6/2009		7/8/2009	7/9/2009		744,0000	<u> </u>
.1	EXPENSE ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY		7/10/2009	7/11/2009	
1 AIR FA	·		3011071	MONDAT	TOESDAT	WEDNESOAY	THURSDAY	FRIDAY	Saturday	TOTA
	RENTAL									
3 TAXI-									-	<u> </u>
	 -	80.550		1	· 	·				
4 MILEA		\$0.550		\$41.25			41.25	\$82.50		\$11
5 GAS &	···········			-	-	 				
	ING, TOLLS			<u> </u>				-		
7 HOTE		`		95 23	\$95.23	\$95.23	<u> </u>			\$28
	PHONE		 .		-					
	other than meals)									
	R (Cleaners and Groc	eries)		<u> </u>						
	OTAL LINES 1 - 10			\$136.48	\$95.23	\$95.23	\$41.25	\$82.50		\$45
12 BREAK							ļ			
13 LUNCH						\$17.26	\$25.92			\$4
14 DINNE	R			\$31.87	\$43,81	\$28,95				\$10
5 ENTER	RTAINMENT	-								
6 OTHER										
	OTAL LINES 12 - 16			\$31,87	\$43.81	\$46,21	\$25.92			\$14
8 GRANE	D TOTAL			\$168.35	\$139.04	\$141.44	\$67.17	\$82.50		\$59
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Roundtr Dinner 7 Lunch a Masterc	rip drive to Martinsville 7/53 Susan and John and dinner 7/6 - 7/9 Ga and payments noted o	ry and John n receipts OUNT NUMB	ER SUB	\$	CASH ADVANCE CASH TRAVELERS CI SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	HECKS	DOCUMENT#		\$285.69	\$433.
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 . FAX 276 -647-4119

official sponsor U.S. Olympic Team



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	signature of card member		total amount		
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	date. reference		signature:	···.[_]	. ,
	7/9/2009 PAGE 1		to be held personally liable in the full amount of these charges. I ha	event that the indicate ave requested weekday	res. Please do not leave any money or items of value unattended in e lobby. I agree that my liability for this bill is not waived and agree ed person, company or association fails to pay for any part or the r delivery of USA TODAY. If refused, a credit will be applied to my n my party, require special evacuation due to a physical disability.
	or placed on the account for the foll appendi	n is attached to a bank or checking account, a hold will ed dollar amount to be owed to the hotel, including out and such funds will not be released for 72 business e discretion of your financial institution.	AL DL BONUS AL		AR
	US		adult/child: room rate:	1/0 \$89.00	
	HUGGINS, JOHN 111 NORTH CHESTNUT STRI SUITE 300 WINSTON-SALEM, NC 27101	EET name address	room number: arrival date: departure date:	210/KXPL 7/6/2009 7/9/2009	8:00:00PM
4	•				

EL RANCHITO 3069 VIRGINIA AVE

COLLINSVILLE, VA 24078 07/06/2009

Merchant ID: Terminal ID:

19:51:29 000000004340543

01573118

4450553540

CREDIT CARD

AMEX SALE

CARD # XXXXXXXXXXXX1292 INVOICE 0032 Batch #: 000336 **SERVER** 0006 Approval Code: 505701 Entry Method: Swiper Approved: Onlin

PRE-TIP AMT

ΠP

\$25.8

TOTAL AMOUNT

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

07/08/2009 20:02:47 Merchant ID: 000000004340543 Terminal ID: 01573118 4450553540

CREDIT CARD

AMEX SALE

CARD# XXXXXXXXXXXXX1292 INVOICE 0040 Batch #: 000338 SERVER 0004 Approval Code: 541552 Entry Method: Swiped Approved: Online PRE-TTP AMT \$23.95

TTP

TOTAL AMOUNT



283 Commonwealth 81vd Martinville Va 24112 276-632-7133 Fax 276-632-7656 www.texassteakhouse.com

Date: Jul07'09 07:52PM

Card Type: AMEX

Acct #: XXXXXXXXXXX1292 Trans Key: CIC001490304696

Exp Date: XX/XX Auth Code: 564584 Check: 2728 Table: F1/1 Server: 210 CINDY

Subtotal:

36.81

Host:

33

Tip Amount:

Total:

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HUGOS FOOD SPORT & SPI 10 E. CHURCH SIREET MARTIRSVILLE, VA 24112

Merchant 10: 4451469464 Term ID: ED4451469184 4451469464

Sale

AMEX

XXXXXXXXXX1292

Entry Method: Swiped

Appryd: Online Batch#: 000129

07/08/A9

13:23:39

Inv #: 000009 Appr (see: 524118

Amount:

14.26

lip:

Total:

07/09/2009

12:23 PM

\$17.2G

DATE: GRIND COFFEE HOUSE & CAFE 10 E. Church St. Martins: Ille, VA 24112

(540) 632-0035

10033 Soup Of The Day 3.50 Lobster Bisque w/ Sherry Unwind Club Panini (2 @6.95) 13.90 Iced Tea Medium 1.70 Iced Tea Small 1.55 Table Number 0.00

Subtotal 20.65 Tax 2.27

Order Total 22.92

AMEX #XXXXXXXXXXXX1292 22.92 Auth:542845

Tip TOTAL

CUSTOMER COPY



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Jampton)		50 HAMPTON DR MARTINSVILLE, VA TELEPHONE 276 647-4700		offi	cial sponsor U.S. Olympic Team: COOO
100					
BUMGÄRNER 1793 FAIRWA	/ DR	name address	room number: arrival date:	106/SXBL 7/1/2009 6	16:00PM
NEWTON, NC US	28658		departure date:	7/2/2009	
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112



Hampton	•	TELEPHONE 278 647-4700	FAX 276 -847-4119	official sponsor U.S. Olympic Team.
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BUMGARNER. 1793 FAIRWAY NEWTON, NC 2 US	DR .	name address	room number: arrival date: departure date: adult/child: room rate:	312/SXBL 6/30/2009 6:26:00PM 7/1/2009 1/0 \$89.00
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50 HAMPTON DRIVE 50 HAMPTON DRIVE MARTINSVILLE, VA 24112



(Mamplent)	TELEPHONE 276 647-4700	FAX 276 -847-4119	official sponsor	U.S. Olympic Team
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07/07/09 12:12P

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REF#: 0004

BATCH# 679 AUTH# 509122

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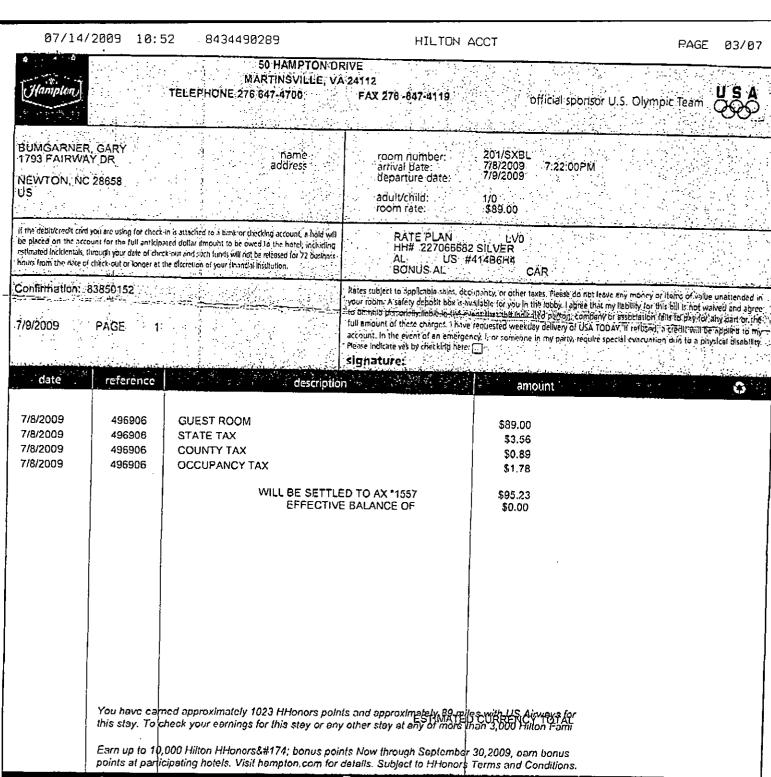
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TIP

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for reservations call 1.800.hampton or visit us online at hampton.com thanks. account no. date of charge follo/check no. 143727 card member name authorization nitial establishment no. and location establishment agrees to (poism)) to cord holder (or payment purchases & services taxes tips & misc. signature of card member total amount X 0.00





17/2		50 HAMPTON D MARTINSVILLE, V	RIVE A 24112			-
(Hampton)		TELEPHONE 276 647-4700	FAX 276 -647-4119	Ó	fficial sponsor U.S. Olympic Team	J S A
BUMGARNE 1783 FAIRWA NEWTON, NO	AY DR	name address	room number: arrival:date: departure date:	412/SXBL 7/7/2009 7/8/2009	6:21:00PM	
US			adult/child: room rate;	1/0 \$89.00		
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BILL TO

American of Martinsville Noel Chitwood Ekta Chopra 128 E. Church St. Martinsville, VA 24112 REMIT TO

Sunrise Technologies, Inc 111 N. Chestnut St. Suite 300 Winston Salem, NC 27101

	INVOICE NO.	DATE					
-		DATE	P.O. NO.		TERMS	DUE DATE	PROJECT
	5057	7/27/2009	_		Net 45	9/10/2009	
	DES	SCRIPTION		DAYS		RATE per DAY	AMOUNT
	Susan Mitchell - Project M AOM - 07/13-07/26	Manager/Fina	incial Consultant -		7	1,200.00	8,400.00
	John Huggins - Supply Cl 07/13-07/26	hain Consulta	ant - AOM		9	1,200.00	10,800.00
	Gary Bumgarner - Techni 07/13-07/26	cal Architect	- AOM -		4	1,600.00	6,400.00
	Rod Pruett - Technical Ard Reimbursable Travel Expe 07/13-07/17	ense - Susan	Mitchell -		5	1,600.00 477.33	8,000.00 477.33
F	Reimbursable Travel Expe 17/20-07/24	ense - Susan	Mitchell -			430.35	430.35
F	Reimbursable Travel Expe 07/13-07/17	ense - John F	luggins -			418.87	418.87
F	Reimbursable Travel Expe 17/20-07/24	ense - John H	luggins -			472.46	472.46
F 0	Reimbursable Travel Expe 7/20-07/24	nse - Gary B	umgarner -			467.66	467.66
F 0	Reimbursable Travel Expe 7/13-07/17	nse - Rod Pr	uett -			264.00	264.00
A	OM Phase B Project						
						Total	\$36,130.67



				DEPARTME	M)	į.	LOCATION				DATE	
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



MITCHELL, SUSAN 413 WESTBROOK DR RALEIGH, NC 27615 US	name address	room number: arrival date: departure date: adult/child: room rate:	417/KXTD 7/13/2009 5:32:00PM 7/16/2009 1/0 \$89.00		
If the debit/credit card you are using for check-in is attached to a bat be placed on the account for the full anticipated dollar amount to estimated incidentals, through your date of check-out and such funds hours from the date of check-out or longer at the discretion of your	be owed to the hotel, including will not be released for 72 business	HH# 854967083 DIAMOND			
Confirmation: 80484909 7/16/2009 PAGE 1		your foom. A safety deposit box is a to be held personally hable in the e full amount of these charges. I hav	vailable for you in the lobby. Lagree that yent that the indicated person, company e requested weekday delivery of USA TO (195), 1, or someone in my party, require.	ave any money or items of value unattended in my liability for this bill is not waived and agree y or association fails to pay for any part or the DDAY if refused, a credit will be applied to my special evacuation due to a physical disability.	
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:	You have ear stay or any o HiltonHHondr	rned approximately 5340 HHonors points for this stay. I ther stay at any of more than 3,000 Hilton Family hotels s.com	STARKTEU CARRIEN CY TUSTAL WORLDWIGE VISIT	

Earn up to 10,000 Hilton HHonors® bonus points Now through September 30,2009, earn bonus points at participating hotels. Visit hampton.com for details. Subject to HHonors Terms and Conditions.

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ARTS ETC 45 E CHURCH ST 276-666-6655 MERC # 0000001646853 TERM ID: 00184024 0003 07/13/09 12:16P **********1409 AX EXP: ***** SALE BATCH# 683 AUTH# 522043 AMOUNT \$16.29 TIP TOTAL CUSTOMER COPY	RANIAS RESTAURANT 147 E MAIN STREET MARTINSVILLE VA 24112 276-638-4462 Merchant IV: 000000994296 Term IV: 00141439 Ref #: 0005 Server ID: 1
ARTS ETC 45 E CHURCH ST 276-666-6655 MERC # 0000001646853 TERM ID: 00184024 0003 02/16/09 12:40P ************1409 AX EXP: ***** EXP: ***** REF #: 0006 BATCH# 686 AUTH# 568394 AMQUNT TOTAL TOTAL CUSTOMER COPY	Sale *************1409 AMEX Entry Method: Swiped Amount: \$ 14.76 Tio: 3.40 Total: 17-76
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NAME	Sus	an Mitchell	J	DEPARTA Consultin			LOCATION 111 N Chest	nut St. Winston	Salem MC	27101	 	DATE	
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50 HAMPTON DRIVE MARTINSVILLE, VA 24112 TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



MITCHELL, SUSAN 413 WESTBROOK DR RALEIGH, NC 27615 US	name address	room number: arrival date: departure date: adult/child: room rate:	400/KXTE 7/22/2009 5:32:00PM 7/23/2009 1/0 \$89.00
If the debit/credit card you are using for check-in is attached to a bank or checkin be placed on the account for the full anticipated dollar amount to be oved to estimated incidentals, through your date of check-out and such funds will not be relined from the date of check-out or longer at the discretion of your financial insist.	the hotel, including eased for 72 business	RATE PLAN HH# 854967083 AL AA #6 BONUS AL	LV0 DIAMOND 6N403X6 CAR
Confirmation: 82320365 7/23/2009 PAGE 1		to be held personally liable in the everall amount of these charges. I have r	upancy, or other taxes. Please do not leave any money or items of value unattended in allable for you in the lobby. I agree that my liability for this bill is not waived and agree ent that the indicated person, company or association fails to pay for any part or the requested weekday delivery of USA TODAY. If refused, a credit will be applied to my cy, I, or someone in my party, require special evacuation due to a physical disability.
: date : reference		signature:	emount
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	j		
7/22/2009	498569	GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX	\$89.00
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7/22/2009	498569		\$0.89
7/22/2009	498569		\$1.78
·		WILL BE SETTLED TO AX *1409	\$95.23
·		EFFECTIVE BALANCE OF	\$0.00

You have earned approximately 1780 HHonors points for this stay. To check your earnings for this stay or any other stay at any of more than 3,000 Hilton Family hotels worldwide visit HiltonHHonors.com

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Sale

Clerk 10: 30
Merchant 10: 000000072330
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87722-86
EatchH: 203031
Retrieval Ref H: 38349494

12:19:69

Entry Method: Swiped amex XXXXXXXXXXXI403

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Customer Copy THANK YOU

RANIAS RESTAURANT 147 E MAIN STREET MARTINSVILLE VA 24112 276-638-4462

Merchant 10: 000000394296 Trm ID: 00141439 Ref H: 0001 ..rver ID: 1

Sale

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Entry Method: Swiped

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67/23/09

12:48:44 Inv #: 000001 Appr Code: 546504 Batch#: 000432 Apprvd: Online

CUSTOMER COPY

Customer Copy THANK YOU!

ARTS ETC

MARTINSUILLE UA 24112 45 E CHURCH ST 276-666-6655 12:05P #******** 07/20/09 EXD: ****

TERM ID: 00184024 0003

MERC # 0000001646853

REF#: 0004 AUTH# 563316 BATCH# 688 SALE

AMOUNT

\$29,91

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TOTAL

APPROUED



John Hug			DEPARTMEN	T	LOCATION		_		DATE	
			Consulting	АОМ	111 N. Chestr	ut St. Winston	Salem, NC 27101		7/18/200	09
INSTRUCT		if due water 10 days of it ations must be clearly who	avel, with hotel bills on	d other receipts attached	Any expenditure of \$25.00 or n	nore must be supported i	by a recepted bill. Foreign curr	ency franslation		
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-	(other than meals)			<u> </u>						
	ER (Cleaners and G TOTAL LINES 1 - 10					<u> </u>				
	AKFAST			\$116.10	\$74.85	\$74.85	\$41.25			\$307
13 LUNC			-							
14 DINNE	······································			001.00			\$6.42			\$6
	ERTAINMENT			\$31.87	\$41.92	\$31.61	<u> </u>			\$105
16 OTHE			·	 						
	OTAL LINES 12 - 16			601.07			 			
	ID TOTAL	'		\$31.87 \$147.97	\$41.92	\$31.61	\$6.42			\$111
1		<u></u>		<u> </u>	\$116.77	\$106.46	\$47.67			\$418
TRAVE	EL FROM home			EXPLANATION	OF TRANSPORTA	TION EXPENS	SE T			Ş4°
TRAVE			-							
			· . <u>-</u>							
IRAVE				ļ	 					
AUTO	·			75	1 1		} I			
	MILEAGE		- -	75	4 Ditable 50		75			
AUTO	MILEAGE	uding city leit	ine) vicitade	75	ADVANCES:		75 DOCUMENT#	DATE	AMOUNT	
AUTO	·	uding city (cit	ies) visited:	75	CASH ADVANCE			DATE	AMOUNT	
Explar	MILEAGE		ies) visited:	75	CASH ADVANCE			DATE	AMOUNT	
Explar Roundt	MILEAGE nation of trip including trip drive to Martinsvi	lle		75	CASH ADVANCE CASH TRAVELERS (DATE	AMOUNT	
Explar Roundt	MILEAGE nation of trip inch trip drive to Marlinsvi 713, 7/14 and 7/15	lle Susan and Johr		75	CASH ADVANCE CASH TRAVELERS (SUBTOTAL			DATE	AMOUNT	
Explar Roundti Dinner	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and	lle Susan and John John		75	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID			DATE	AMOUNT	
Explar Roundti Dinner	MILEAGE nation of trip inch trip drive to Marlinsvi 713, 7/14 and 7/15	lle Susan and John John		75	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE	CHECKS		DATE	AMOUNT	
Explar Roundti Dinner	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and	lle Susan and John John		75	CASH ADVANCE CASH TRAVELERS (SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL	CHECKS		DATE	AMOUNT	
Explar Roundti Dinner	mation of trip inch trip drive to Marlinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts		75	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL	CHECKS		DATE	\$224.55	
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER.		CASH ADVANCE CASH TRAVELERS (SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE	CHECKS		DATE		
Explar Roundti Dinner	mation of trip inch trip drive to Marlinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB	\$	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	CHECKS		DATE		
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB non-food	\$ \$307.05	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	CHECKS	DOCUMENT#		\$224.55	
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB	\$	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD	CHECKS			\$224.55	\$336.37
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB non-food	\$ \$307.05	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	CHECKS	DOCUMENT #		\$224.55	\$336.37
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB non-food	\$ \$307.05	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	CHECKS	DOCUMENT #		\$224.55	\$336.37
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB non-food	\$ \$307.05 \$111.82	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER DUE COMPANY (A	CHECKS	TOTAL ADVANCES		\$224.55	\$336.37
Explar Roundti Dinner Lunch a	mation of trip inch trip drive to Martinsvi 713, 7/14 and 7/15 and dinner Gary and card payments noted	lle Susan and John John I on receipts COUNT NUMB	ER SUB non-food	\$ \$307.05	CASH ADVANCE CASH TRAVELERS OF SUBTOTAL COMPANY PAID AIRLINE AUTO RENTAL HOTEL TELEPHONE FOOD OTHER	CHECKS	DOCUMENT#		\$224.55	\$336.37 \$82.50



QUALITY INN - DUTCH INN (VA381)

2360 VIRGINIA AVE

COLLINSVILLE, VA 24078 USA

Phone: (276) 647-3721 Fax: (276) 647-4857

gm.va381@choicehotels.com

Account: VA381 - 168280

Date: 07/16/09 Page: 1 of 1

Room: 202

Arrival Date: 07/13/09 17:31 Departure Date: 07/16/09 07:29

Frequent Traveler ID:

You were checked out by: AMANDA
You were checked in by: AMANDA

HUGGINS, JOHN 4445 BRIDAL CREEK WINSTON SALEM, NC 27106 US

Post Date	Description	Comment	Amount
	t.	No.	,,,,,
07/13/09	ROOM CHARGE	#202 HUGGINS, JOHN	20.0-
07/13/09	TAX	TAX	69.95
07/14/09	ROOM CHARGE	#202 HUGGINS, JOHN	4.90
07/14/09	TAX	TAX	69.95
07/15/09	ROOM CHARGE	#202 HUGGINS, JOHN	4.90
07/15/09	TAX	TAX	69.95
07/16/09			4.90
07710/09	AMERICAN EXPRESS	AMERICAN EXPRESS Acot: ********1292	-224.55
		Balar	ace Due: 0.00

If payment by credit card, I agree to pay the above total charge amount according to the card issuer agreement.



QUALITY INN - DUTCH INN (VA381)

Thank you for your business! Book your next reservation on choicehotels com for the host int

2360 VIRGINIA AVE COLLINSVILLE, VA 24078 USA

Phone: (276) 647-3721 Fax: (276) 647-4857

gm.va381@choicehotels.com

Room: 202 Arrival Date: 07/13/09 Departure Date: 07/16/09

Account: VA381 - 168280

Frequent Traveler ID:

Approval Number: 520512

Card Type: AX

Date: 7/16/2009

Card Number: *******1292

Total: 224,55

JOHN HUGGINS 4445 BRIDAL CREEK WINSTON SALEM, NC 27106 US

If payment by credit card, I agree to pay the above total charge amount according to the card issuer agreement.

х_____

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

07/13/2009 Merchant ID: 二、气 18852:57

0000000004340543

Terminal ID:

01573118

4450553540

CREDIT CARD

AMEX SALE

CARD # INVOICE XXXXXXXXXXXX1292 0027

Batch #: SERVER Approval Code: 000343 0009

Entry Method: Approved:

58\$877 Swiped Online

PRF-TIP AMT

ΠP

TOTAL AMOUNT

CUSTOMER COPY

ITE RANCHITO RESTAURANT 1212 MEMORIAL BLVD MARTINSVILLE, VA 24112

Merchant ID: 5010

Ref 4: 0038

Server ID: 1

Sale

2021222222222

AYEX

Entry Method: Swiped

Amount:

26.61

io:

Total:

07/15/09

19:01:31

Inv #: 000038

Appr Code: 584288

Approd: Online

Batch#: 909562

Customer Copy

THANK YOU!

Tones.

283 Commonwealth Blvd Martinville Va 24112 275-632-7133 Fax 276-632-7656 www.texassteakhouse.com

Date:

Jul14'09 06:4SPM

Card Type: AMEX

Acct #:

CIC001512875426 Trans Key: Exp Date: XX/XX Auth Code:

542657

Check: Table: 3726 E3/1

258 Robin . Server:

Subtotal:

34.92

Tip Amount:

Total:

Signature:

SALE RECEIPT Store #3454 tko 67/16/09 12:42:25 Subway Sandwiches & Salads 2444 Greensboro Read Martinsville VA 24115 276-638-3433 Trans# 49 Clerk 6 sharnon Dwrl TRDT 071609 Reg-ID REG-MAIN Receipt # 0000151717 PRICE MEMO PLU --- ITEM --- OTY ChiTer6M Gr 1 5.89 18270 SUBTOTAL \$ 5.89 Sales Tx 0.53TAKE-OUT **TOTAL \$ 6.42 CredCardAMT TEND \$ 6.42 CHANGE DUES 0.00fry your sandwich toasted!!

Approva) No: 544564 Reference No: 919716626916 Account No: ###########1292 Card Issuer: AMERICAMEXPRESS Amount: \$6.42

Protect the balance on your card. Register at www.wo.com/cspc/ad.com/ Host Order 18: Pablic, Asserbig47



NAME					DEPARTMENT		LOCATION				DATE	
<u> </u>	Huggins				Consulting	АОМ	111 N. Chesinu	il St. Winston Sa	alem, NC 27101	···	7/25/2009	
INSTRU	UCTIONS	S:	Report due calculations	within 10 days of tra must be clearly sho	avel, with hotel bills and o win in the supporting docu	ther receipts attached. Any imentation: If reimbursema	expenditure of \$25,00 or mo ent for 'Entenanment or Mea	re must be supported by a If is claimed, the reverse s	s receipted bill. Foreign curre side of this form must be rom	ncy translation		
	Т	RAVEL (7/19/2009	7/20/2009	···	7/22/2009	7/23/2009	7/24/2009	7/25/2009	
NO.	Ε	XPENSE	ITEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	Saturday	TOTALS
1 /	AIR FAR	₹E										
2 /	UTO R	ENTAL	·								 	
3 1	AXI - E	TC.				<u> </u>						
4 N	MILEAG		@	\$0,550		\$41.25			41.25	·		\$82,50
5 (SAS & C)IL				† · · · · · · · · · · · · · · · · · · ·						902,50
-		G, TOLLS	3			<u> </u>				 		
-	OTEL					95,23	\$95.23	\$95,23				\$285.69
	ELEPH	ONE						••••		·		\$203.03
-		ner Ihan r	neals)									
			s and Groc	eries)								
		AL LINE				\$136.48	\$95.23	\$95,23	\$41.25			F2C9.40
-	REAKE		• • • • •			\$100.10	\$60.20	¥33,20	\$41,25			\$368,19
	UNCH	,,,,,,					\$17.26					647.00
	INNER					\$32.96	\$11.42	\$42.63				\$17.26
		A!NMEN	т			402.00	\$11.72	ψ+2.03				\$87.01
16 O												
	,	AL LINES	S 12 - 16			\$32.96	\$28.68	\$42.63				\$104.27
	RAND 1			-		\$169.44	\$123.91	\$137,86	\$41.25			\$472.46
						EXPLANATION (OF TRANSPORTA	TION EXPENS	E	== !		\$472.46
ŢJ	RAVEL	FROM	home			-						
TF	RAVEL	то	GSO									
TF	RAVEL	TO	horne									
Αŧ	UTO MII	LEAGE				75			75			
				1			ADVANCES:		DOCUMENT#	DATE	AMOUNT	
E	xplana	tion of t	rip includ	ling city (ci	tles) visited:		CASH ADVANCE					
							CASH			-		1
Ro	oundtrip	drive to I	Martinsville				TRAVELERS (CHECKS				
Di	nner 7/2	20 Susar	and John				SUBTOTAL					ļ
Di	nner 7/2	22 Susan	and Gary				COMPANY PAID					Ì
Ma	astercar	đ payme	nts noted o	n receipts			AIRLINE					
_							AUTO RENTAL	_				
_							HOTEL				\$285,69	
			ACC	OUNT NUME	BER		TELEPHONE					
	VID	PLT	DEPT	BASE	SUB	\$	FOOD				\$92.85	
					nan-food	\$368.19	OTHER					Ì
					food	\$104.27		T	OTAL ADVANCE	s		\$378.54
							DUE COMPANY (ATTACH REFU	ND)		İ	
									ANUAL CHECK	t		
						\$472.46	DUE EMPLOYEE	Р	C VOUCHER#	_		\$93.92
1D1 C	·		Flohn Huo	· · · · · · · · · · · · · · · · · · ·			ADDDOVAL CICH					

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700 FAX 276 -647-4119

official sponsor U.S. Olympic Team



HUGGINS, JOHN name 111 NORTH CHESTNUT STREET address SUITE 300 WINSTON-SALEM, NC 27101	room number. 401/KXTH arrival date: 7/20/2009 6:13:00PM departure date. 7/23/2009
US US	adult/child: 1/0 room rate: \$89.00
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 owed to 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.	RATE PLAN LV0 HH# 810044663 DIAMOND AL DL #0252025432 BONUS AL CAR
7/23/2009 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 salety 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 will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical disability please indicate yes by checking here:
description description	amount 🥱
7/20/2009	BALANCE OF \$0.00
Earn up to 10,000 Hilton HHonors® bonus point points at participating holels. Visit hampton.com for d	ts Now through September 30,2009, earn bonus letails. Subject to HHonors Terms and Conditions.
for reservations call 1.800.hampton or visit us online at han	
account no.	date of charge folio/check no.
card member name	authorization 143968 initial
establishmentino, and location establishment agrees to transmit to care holder	purchases & services
	taxes
	tips & misc.
signature of card member	total amount 0.00

FL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

07/20/2009

19:28:34

Merchant ID: Terminal ID:

000000004340543

01573118

4450553540

CREDIT CARD

AMEX SALE

CARD # INVOICE Batch #: XXXXXXXXXXXXX1292 0046

SERVER Approval Code: 000350 0006

Entry Method: Approved:

585115 Swiped

PRE-TIP AMT

Online \$26.96

ΠP

TOTAL AMOUNT

CLISTOMER COPY

CHINA BUFFET 1090 MEMORIAL BLUD. MARTINSVILLE, VA 2411

TERMINAL ID. : HERCHAHT_#: MĆ

01149561 323545438992

SUR. 3609

SALE BATCH: 800698 DATE: Jul 21, 09 SEQ: 0923

356915 TIME: 19:02 IHU: AUTH: 04907B

BASE

\$9.42

TIP

TOTAL

\$ \$11.42

JOHN KUGGIHS

Costoner Cory

HUGOS FOOD SPORT & SPI 10 E. CHURCH STREET mar)!nSVILLE. va 24112

Merchant III: 4451469464 Term 10: E04451469464 4451469464

Sale

AMEX

ZXXXXXXXXXX1292

Entry Method: Swiped

Approd: Online

Batch#: 000246

07/21/09

12:31:33

Inv M: 000001 Appr Code: 522066

.\$

Amount:

14.28

Tip:

Total:

EL RANCHITO 3069 VIRGINIA AVE COLLINSVILLE, VA 24078

07/22/2009 Merchant ID:

18:59:18 000000004340543

Terminal ID:

01573118

4450553540

CREDIT CARD AMEX SALE

CARD # INVOICE XXXXXXXXXXXX1292 0035

Batch #: SERVER

Approved:

000352 0007

Approval Code: Entry Method:

544259 Swiped Online

PRE-TIP AMT

\$35,63

ΠP

TOTAL AMOUNT



Gary Bum	ngarner		Consulting		111 N. Ches	stnut St. Winst	on Salem, NC 2	7101	7/27/2009	3			
INSTRUCTIO	ONS:	Report due within 10 days of tri calculations must be clearly shi	evel, with hotel bells and o	other receipts attached. A	My expenditure of \$25 00 or a	more must be supported by	y a raceupted bell. Foreign cu	rency translation	<u>'</u>				
			Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday				
	TRAVEL	DATES	7/19/2009	7/20/2009	9 7/21/2009	7/22/2009	7/23/2009	7/24/2009	7/25/2009	!	Paid by		_
	EXPENSE	ITEM		1	1					TOTALS	•	Sunrise	
1 AIR F	ARE				·		i						-
2 AUTO	DRENTAL			į		_		!		!			-
3 TAXI	- ETC.		<u> </u>							!	-		-
4 MILE	AGE	@ \$0.550		\$69.3	30 \$69.30	\$ 69.3	\$69.30)		\$277.20	\$277.20		•
5 GAS													-
6 PARK	(ING, TOL	LS										·	
7 HOTE	EL				\$95.20	3	\$95.23			\$190.46		\$190.46	
8 TELE	PHONE			!									
9 TIPS	(other tha	n meals)		<u> </u>								·	
10 OTHE	R (Copy	Charges)											
11 SUBT	OTAL LIN	IES 1 - 10		\$69.3	0 \$164.53	\$69.3	0 \$164.53			\$467.66	\$277.20	\$190.46	\$467.6
12 BREA	KFAST											4100.10	V-107.0
13 LUNC	Н												
14 DINNE	ĒR							<u> </u>					
15 ENTE	RTAINME	NT											
16 OTHE	R	j		J		i							
17 SUBT	OTAL LIN	ES 12 - 16		1				-		N 1 20	173	* 6	
18 GRAN	D TOTAL			\$69.30	\$164.53	\$69.30	\$164.53			\$467.66	\$277.20	\$190.46	\$467.66
			EXI	LANATION C	OF TRANSPOR	TATION EXPE	NSE			\$467.66			<u> </u>
TRAV	EL FROM			Hickory NC	Martinsville, Va	Hickory,NC	Martinsville,Va						
TRAV	EL TO			Martinsville, V	'a Hickory,NC	Martinsville,V	Hickory,NC						
TRAVE	EL TO												
AUTO	MILEAGE		·.			-						!	
					ADVANCES:		DOCUMENT #	DATE	AMOUNT	j	ŀ		
Explar	nation of	trip including city (d	cities) visited	l :	CASH ADVAN	ICE				İ			
AOM -	Barcalour	iger Project			CASH								
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					AIRLINE						Ì		
					AUTO REN	TAL						1	
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ACCOUNT NUMBER			TELEPHONE										
DIV	PLT	DEPT BASE	SUB	\$	FOOD	•							
			non-food	\$467.66	OTHER								
			food				TOTAL ADVAN	CES		\$190.46		J	
					DUE COMPANY (ATTACH REFUND)								
	1		1	i			MANUAL CHEC	:K#					
				\$467.66	DUE EMPLOYE		PC VOUCHER#			\$277.20			
PLOYEE	SIGNATU	IRE Gary Bumg	jamer		APPROVAL SI	GNATURE			<u> </u>				
LIVER CHECK TO Gary Bumgarner					PRINT NAME 8	TITLE		· · · · · · · · · · · · · · · · · · ·					
					····								

The Hilton Family

Hilton HHonors



50 HAMPTON DRIVE MARTINSVILLE, VA 24112



Campun		TELEPHONE 276 647-4700	FAX 276 -647-4119	0	fficial sponsor U.S. Olympic Team
BUMGARNE 1793 FAIRW NEWTON, N US	AY DR	name address	room number; arrival date, depaπure date;	407/SXBL 7/20/2009 7/21/2009	6:10:00PM
			adult/child: room rate:	1/0 \$89.00	
estimated incidentals	count for the full anticip through your date of the	k-in is attached to a bank or checking account, a hold will pated dollar amount to be owed to the hotel, including erk-out and such funds will not be released for 72 business the discretion of your financial institution	RATE PLAN HH# 2270666 AL US BONUS AL	#414B6H4	AR
Confirmation: 7/21/2009	87038778 PAGE 1		to be held personally liable in the full amount of these charges. That	event that the indicat	xes. Please do not leave any money or items of value unattended in the Jobby I agree that my liability for this bill is not woiwed and agree ted person, company or association fails to pay for any part or this ty delivery of USA TODAY. If refused, a credit will be applied to my
	_		Please indicate yes by checking he signature:	re: []	y delivery or USA TODAY. If refused, a credit will be applied to m in my party, require special evacuation due to a physical disability
date	reference	description	Now off to man beared	amo	ount of the second
7/20/2009 7/20/2009 7/20/2009 7/20/2009	498299 498299 498299 498299 You have earn this stay. To c	GUEST ROOM STATE TAX COUNTY TAX OCCUPANCY TAX WILL BE SETTLE EFFECTIVE	BALANCE OF	\$89.00 \$3.56 \$0.89 \$1.78 \$95.23 \$0.00	maks for
	Earn up to 10.	000 Hillon HHonors® bonus point cipaling hotels. Visit hamplon.com for d	la Manual	_	Í
for reservat	ions call 1.800	.hampton or visit us online at han	npton.com	Terms and Co	
account no.			date of charge	folio/chec	k no.
card membe	r name	· · · · · · · · · · · · · · · · · · ·	authorization	144094	Ainitial
establishmen	t no. and location	on establishment agrees to transmit to card holder to	purchases & se	rvices	
			taxes		
			tips & misc.		
signature o	of card member				
X			total amount	0.0	0

50 HAMPTON DRIVE MARTINSVILLE, VA 24112

TELEPHONE 276 647-4700

FAX 276 -647-4119

official sponsor U.S. Olympic Team



2		,						
BUMGARNER, GARY 1793 FAIRWAY DR NEWTON, NC 28658 US	name address	room number: arrival date: departure date: adult/child: room rate:	320/KSTY 7/22/2009 7/23/2009 1/0 \$89.00	5:20:00PM				
If the debit/dedit card you are using for check-in is attached to be placed on the account for the full anticipated dollar amount incidentals, through your date of check-out and such finding the date of check-out or longer at the discrebon of your date of the date of the date	int to be owed to the hotel, including ands will not be released for 72 business	HH# 227066682 SILVER						
Confirmation: 88144608 7/23/2009 PAGE 1		your (oon). A safety deposit box is to be held personally liable in the full amount of these charges. I have	available for you in the e-ent that the indica ve requested weekda gency, I, or someone	xes. Please do not leave any money or items of value unattended in ne lobby I agree that my lability for this bill is not waived and agree ted person, company or association foils to pay, for, any part or the try delivery of USA TODAY, if refused, a credit will be applied to my in my party, require special evacuation due to a physical disability.				
date reference	descriptio	n A The State of the	amo	ount .				

7/22/2009	The great of the state of the s
7/22/2009 498568 STATE TAX \$3.56 7/22/2009 498568 COUNTY TAX \$0.89	
7/22/2009 498568 COUNTY TAX \$0.89	
7/32/3000	
1/22/2009	
WILL BE SETTLED TO AX 1557 \$95.23 EFFECTIVE BALANCE OF \$0.00	
į į	
	İ
Vou hours correct consequently 1002 (III)	
You have earned approximately 1023 HHonors points and approximately 89 miles with US Airways for this stay. To check your earnings for this stay or any other stay at any of more than 3,000 Hillon Famil	
Earn up to 10,000 Hilton HHonors® bonus points Now through September 30,2009, earn bonus points at participating hotels. Visit hampton.com for details. Subject to HHonors Terms and Conditions.	

for reservations call 1.800.hampton or visit us online at hampton.com thanks. account no. date of charge folio/check no. 144172 card member name authorization initial establishment no. and location establishment agrees to transmit to gold holder for payment purchases & services taxes tips & misc. signature of card member total amount \mathbf{X}_{i} 0.00





























NAME					DEPARTMENT		LOCATION		DATE			
Rod Pruett					Consulting		111 N. Chestnu	t St. Winston St	7/28/2009			
INST	RUCTIONS:						ry expenditure of \$25.00 or mo nens for "Enterlanment or Mea					
	TR	AVEL DA			7/12/2009	7/13/2009	7/14/2009	7/15/2009	7/16/2009	7/17/2009	7/18/2009	
NO.	EX	PENSE I	TEM		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	TOTALS
	AIR FARE						1					
	AUTO RE								<u> </u>			···
	TAXI - ET								 			
	MILEAGE		@	\$0,550		\$66.00	\$66.00	\$66,00	\$66.00			\$264.00
	GAS & OI					<u> </u>						
	PARKING											
	HOTEL									.,		
	TELEPHO)NE		-								
	TIPS (oth		eals)									
	OTHER (
	SUBTOTA					\$66.00	\$66.00	\$66.00	\$66,00			\$264.00
_	BREAKFA								1			
	LUNCH											
_	DINNER											
	ENTERTA	INMENT										-
	OTHER											
	SUBTOTA	L LINES	12 - 16					<u></u>				-
	GRAND T					\$66.00	\$66.00	\$66,00	\$66.00			\$264.00
						EXPLANATION	OF TRANSPORT	ATION EXPENS	E			\$264.00
	TRAVEL F	ROM		i		W-S	w-s	W-S	W-S			
	TRAVEL 1	0				Martinsville	Martinsville	Martinsville	Martinsville		1-1	
	TRAVEL 1	ТО				W-S	w-s	W-S	W-S			
	AUTO MIL	EAGE				120	120	120	120			
							ADVANCES:		DOCUMENT#	DATE	AMOUNT	
	Explanation of trip including city (cities) visited:							E				
							CASH					
	American of Martinsville						TRAVELERS CHECKS SUBTOTAL					
							COMPANY PAIL)				
,						AJRLINE						
					AUTO RENTAL					,		
						HOTEL TELEPHONE						
	ACCOUNT NUMBER											
	DIV PLT DEPT BASE SI		SUB	\$	FOOD							
					non-food	\$264.00	OTHER					
					food				TOTAL ADVANC	ES		
[
					DUE COMPANY (ATTACH REFUND)							
						MANUAL CHECK						
	5264 00				DUE EMPLOYEE PC VOUCHER#					\$264.00		
MPI	LOYEE SIG	SNATUR					APPROVAL SIG	NATURE				
	VED CHEC						PRINT NAME &	TITI F	Rod Pruett			



July 17, 2010

BMC Group, Inc Attn: Barcalounger Corporation Claims Processing 18750 Lake Drive East Chanhassen, MN 55317

To: Whom it may concern;

Please find enclosed two original POC's with supporting documentation. I am including a FedEx pre-paid air bill and envelope. I would like for you to date stamp one and return to me for my records.

If you have questions please let me know.

Sincerely,

Tonya Cottingham

Office Manager

(336) 722-6741 x106