

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23046****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Auto rental P.Kalifeh PreK Transition

Auto rental P.Kalifeh PreK Transition

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 004 02 01 02 100 OEL Transition 100	N/A	Auto rental P.Kalifeh PreK Transition	59.00	0.000	59.00

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:51 PM
Anita Bushnyakova	Contracts Mgr	09/04/2018 4:42 PM
Shelley Shafer	Requester	08/28/2018 1:50 PM

TOTAL**\$59.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22743

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
	8/1/18			Vendor ID	4300	For fiscal Use	
Purchase Description	PreK Transition Summit			Vendor Name	TSB Visa Kalifeh		
				Street Address			
Purchase/Service Date	7/24/18	To	7/25/18	City		State	IL Zip
Requestor's Name/Dept	Phyllis Kalifeh			Phone		Fax	
Supervisor Approval	[Signature]			Reservation#			
				Terms (Due)			

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. AB 8/31/18

CEO(+ \$1,000) _____

Phyllis Kalifeh

From: DoNotReply@erac.com
Sent: Thursday, July 26, 2018 7:15 AM
To: Phyllis Kalifeh
Subject: ENTERPRISE Rental Agreement 2ZNLN1



RA #: 2ZNLN1

Renter: KALIFEH,PHYLLIS

Dates & Times	Location
Pickup Jul 24, 2018 9:21 AM	3404 MAHAN DR TALLAHASSEE, FL 32308-5667 8508781500
Return Jul 25, 2018 6:00 PM	3404 MAHAN DR TALLAHASSEE, FL 32308-5667 8508781500

Vehicle
Make/Model: TOYO/CAMR
Color: PER MFG
Mileage: 33
Fuel Out: Full
Fuel In: Full
License: TPC9528
Unit #: 7Q3V4F
Vehicle #: JU578792

Charges	Price/Unit	Total
TIME & DISTANCE 07/24 - 07/25	2 @ \$28.73/DAY	\$57.46
TIRE AND BATTERY FEE	2 @ \$0.02/DAY	\$0.04
VLF RECOVERY FEE	2 @ \$0.75/DAY	\$1.50
Total Charges:		\$59.00
Charge To:		VISA xxxx4368

2018-07-26 07:14:31

*Auto Rental Expense
incurred by: Phyllis Kalifeh
and paid 7/25/18*

2

DATE 7/1/18

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23048****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Hotel and gas for P. Kalifeh and M. Clements

Hotel and gas for P. Kalifeh and M. Clements

Unit Qty	Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 004 02 01 02 100 OEL Transition 100	N/A	Hotel and gas for P. Kalifeh and M. Clements	288.43	0.000	288.43

Approval Information

Shelley Shafer Accounting 09/06/2018 1:52 PM
Anita Bushnyakova Contracts Mgr 09/04/2018 4:42 PM
Shelley Shafer Requester 08/28/2018 1:54 PM

TOTAL**\$288.43**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22745

23048

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information			
		8/1/18		Vendor ID		For fiscal Use	
Purchase Description		Hampton Inn		Vendor Name		TSB-Admin Kalifeh	
Purchase/Service Date		7/24/18 To 7/25/18		Street Address			
Requestor's Name/Dept		Phyllis Kalifeh		City		State	Zip
Supervisor Approval				Phone		Fax	
				Invoice #			
				Terms (Due)			

Purchase Information		
Distribution Code	Item Description	Amount
Forum	Hotel	\$ 240.00
Transition	(Room for PK and Melissa)	
	Gasoline charged to Visa	\$ 12.01
		\$ 36.42
Total		\$ 288.43

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	AB 9/14/18
CEO(+ \$1,000)	



Hampton Inn Clearwater Central
21030 US Hwy 19N • Clearwater, FL 33765
Phone (727) 797-8173 • Fax (727) 791-7759



Official Sponsor

CLEMENTS, MELISSA
KALIFEH, PHYLLIS

name
address

5419 PIMLICO DRIVE

TALLAHASSEE FL 32309
UNITED STATES OF AMERICA

room number: 285/KXTD
arrival date: 7/24/2018 6:43:00 PM
departure date: 7/25/2018 7:27:00 AM

adult/child: 1/0
room rate: 120.00

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: CVT
HH #: 610503288 SILVER
AL:
Car:

Confirmation Number: 81848069

7/26/2018

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. In the event of an emergency, I, or someone in my party require special evacuation assistance due to a physical disability. Please indicate yes by checking here: ☐

signature:

date	reference	description	amount	
7/24/2018	2783491	GUEST ROOM EXEMPT	\$120.00	
7/25/2018	2783560	VS *4368	(\$120.00)	
		BALANCE	\$0.00	
Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit Honors.com Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.				

for reservations call **1.800.hampton** or visit us online at **hampton.com**

thanks.

account no.	date of charge	folio/check no.
		498993 A
card member name	authorization	initial
establishment no. and location	establishment agrees to transmit to card holder for payment	
THANKS FOR STAYING WITH US HERE IN CLEARWATER AT THE HAMPTON INN. ATTACHED YOU WILL FIND YOUR RECEIPT FOR YOUR STAY. I HOPE YOU HAVE A GREAT DAY!	purchases & services	
	taxes	
	tips & misc.	
signature of card member	total amount	-120.00
X		





Hampton Inn Clearwater Central
21030 US Hwy 19N • Clearwater, FL 33765
Phone (727) 797-8173 • Fax (727) 791-7759



Official Sponsor

KALIFEH, PHYLLIS
5419 PIMLICO DRIVE
TALLAHASSEE FL 32309
UNITED STATES OF AMERICA

name
address

room number: 199/KXTD
arrival date: 7/24/2018 6:41:00 PM
departure date: 7/25/2018 7:27:00 AM

adult/child: 1/0
room rate: 120.00

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: CVT
HH #: 610503288 SILVER
AL:
Car:

Confirmation Number: 81848069

7/26/2018

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. In the event of an emergency, I, or someone in my party require special evacuation assistance due to a physical disability. Please indicate yes by checking here: ☐

signature:

date	reference	description	amount	
7/24/2018	2783484	GUEST ROOM EXEMPT	\$120.00	
7/25/2018	2783559	VS *4368	(\$120.00)	
		BALANCE	\$0.00	

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit Honors.com

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for reservations call **1.800.hampton** or visit us online at **hampton.com**

thanks.

account no.	date of charge	folio/check no.
		498992 A
card member name	authorization	initial
establishment no. and location	establishment agrees to transmit to card holder for payment	
THANKS FOR STAYING WITH US HERE IN CLEARWATER AT THE HAMPTON INN. ATTACHED YOU WILL FIND YOUR RECEIPT FOR YOUR STAY. I HOPE YOU HAVE A GREAT DAY!	purchases & services	
	taxes	
	tips & misc.	
signature of card member	total amount	-120.00
X		



Welcome to Shell
WELCOME
HOMOSASSA SHELL
9406 S. SUNCOAST BLV
HOMOSASSA, FL. 34446
57546233206
SHELL
9406 S SUNCOAST BLVD
HOMOSASSA FL
34446

DATE 07/15/18 17:13
TRAN# 9084812
PUMP# 08
SERVICE LEVEL: SELF
PRODUCT: Unld
GALLONS: 13.107
PRICE/G: \$ 2.779
FUEL SALE \$ 36.42
CREDIT \$36.42

XXXX XXXX XXXX 4368
VISA
Swiped
APPROVED
AUTH # 028025
INV # 532580

Local Store Discount
Join Fuel Rewards
and save every day!
Fuel Rewards members
save up to \$0.10/gal
after every 5 gal
fill-up of Shell
V-Power NITRO+
through 9/2.
Terms/cond apply.

Please come again
THANK YOU
HAVE A NICE DAY

PAN FOOD STORE #3
2290 CAPITAL CIR NE
TALLAHASSEE FL 3230
850-386-6888

CARY116601
PAN FOOD 3
2290 CAP CIR NE
TALLAHASSEE FL

DATE 07/25/18 20:59
TRAN# 9055597
PUMP# 05
SERVICE LEVEL: SELF
PRODUCT: UNLEADED
GALLONS: 4.484
PRICE/G: \$ 2.679
FUEL SALE \$ 12.01
CREDIT \$12.01

VISA
Auth #: 075956
Resp Code: 000
Stan: 0510765155
Reference: 67472

SITE ID: CARY116601

THANK YOU
HAVE A NICE DAY

*Gasoline Expenses
Incurred*

by:

Shylus Kalifel

7/25/18

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-22860****Vendor Information****Phyllis Kalifeh**

5419 Pimlico Drive
Tallahassee, FL 32309
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
07/31/2018	08/12/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Travel expenses P. Kalifeh Keynote Speaker for EHS-CPP Miami
Travel expenses P. Kalifeh Keynote Speaker for EHS-CPP Miami					

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 004 01 01 01 100 NA 100	N/A	Travel expenses P. Kalifeh Keynote Speaker for EHS- CPP Miami	160.81	0.000	160.81

Approved

Approval Information

Shelley Shafer Accounting 08/08/2018 2:18 PM
Anita Bushnyakova Contracts Mgr 08/03/2018 12:23 PM
Shelley Shafer Requester 08/02/2018 11:27 AM

TOTAL**\$160.81**

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Control No. 22553

Wednesday, August 8, 2018

Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information					
				Vendor ID	1008		For fiscal Use		
Purchase Description	EHS-CPP Miami			Vendor Name	Phyllis Kalifeh				
Purchase/Service Date	7/29/18	To	7/31/18	Street Address					
Requestor's Name/Dept	Phyllis Kalifeh			City		State		Zip	
Supervisor Approval	[Signature]			Phone		Fax			
				Invoice #					
				Terms (Due)					

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	

Approvals	
Fiscal Dept.	AB 8/3/18
CEO(+ \$1,000)	

[illegible]



↶ Start Over



Where are you starting?

2807 Remington Green Cir, Ta.



Where are you going?

Tallahassee International Airp.



Add Stop



Route Settings

Choose Your Route

Route #1

Route #2

via I-10 W

20min

14.4mi



x 4 = 58 miles

Est. fuel cost: \$1.59

Add your vehicle for more accurate fuel cost

Current Traffic: Light

[View Route Directions >](#)

Your route is sponsored by:

MapQuest



Carlos A. Giménez
Mayor

BOARD OF COUNTY COMMISSIONERS

Esteban L. Bovo, Jr.
Chairman

Audrey M. Edmonson
Vice Chairman

Barbara J. Jordan
District 1

Jean Monestime
District 2

Audrey M. Edmonson
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District 5

Rebeca Sosa
District 6

Xavier L. Suarez
District 7

Daniella Levine Cava
District 8

Dennis C. Moss
District 9

Senator Javier D. Souto
District 10

Joe A. Martinez
District 11

Jose "Pepe" Díaz
District 12

Esteban L. Bovo, Jr.
District 13

Harvey Ruvin
Clerk of Courts

Pedro J. Garcia
Property Appraiser

Abigail Price-Williams
County Attorney



Miami-Dade County Community Action and Human Services Department extends its gratitude to our sponsors, presenters, and host company for making this event a success.

**Head Start/Early Head Start
Overtown Transit Village
701 NW 1st Court, 9th Floor
Miami, FL 33136**

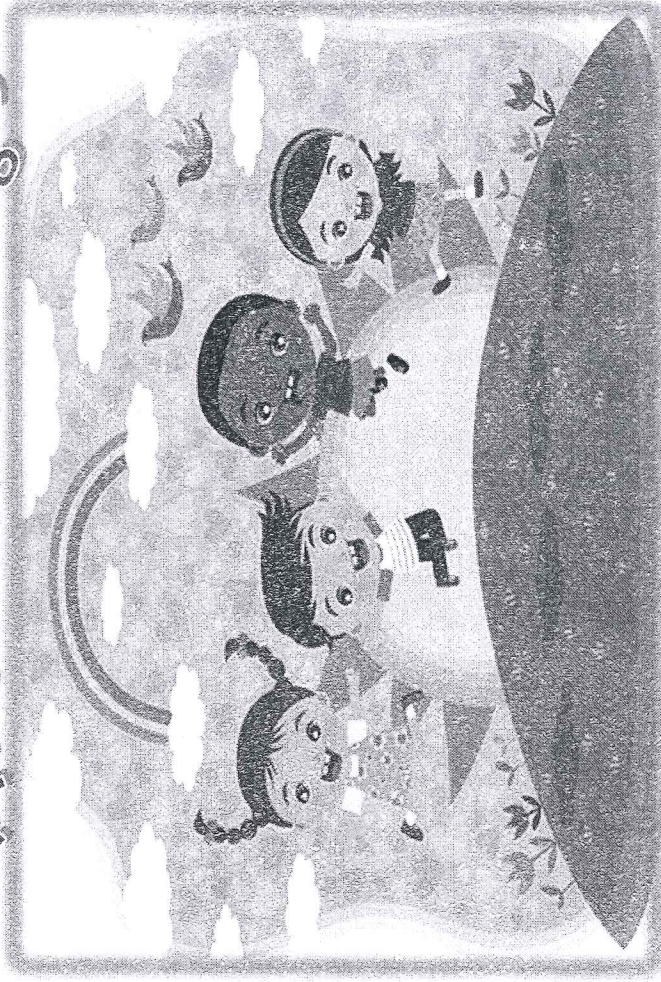
Linda Davis-Rafford, Director

Miami-Dade County

**Community Action and Human Services Department
Early Head Start Child Care Partnership Program**

Infant and Toddler In-Service Training Conference

"Hop Into Learning"



MONDAY, JULY 30th - TUESDAY, JULY 31st

2018

HYATT REGENCY MIAMI

Our Mission:

"To develop the social competency of young children, promote school readiness, and to serve as a catalyst to empower families for growth and change."

Teacher Track

July 31 2018

Registration and Reception
Opening Session
Keynote Speaker: Phyllis Kalifeh, Ed. D
Jasmine

8:00 am-8:55 am

Sessions

CLASS Overview Toddler
English – Presenters : Barbara Thomas-Robinson, Mabel Ramirez - *Hibiscus A*

9:00 am-10:25 am

CLASS Overview Toddler
Spanish – Presenters: C. Vicky Castaneda, Arlene Rodriguez
Hibiscus B

10:30 am-12:25 pm

ASQ-3 Overview English
Presenters: DeAdra Rolle, Chere Herring
Hibiscus A

ASQ-3 Overview Spanish
Presenters: Rosa Pache, Mabel Ramirez
Hibiscus B

12:30 pm-1:25 pm

Lunch
Keynote Speaker: Tony Chaidez, Lakeshore
(Jasmine)

ASQ-SE2 English - DeAdra Rolle, Chere Herring
Hibiscus A

1:30 pm-3:00 pm

ASQ-SE2 Spanish - Rosa Pache, Mabel Ramirez
Hibiscus B

Afternoon Refreshments *(Jasmine)*

3:00 pm – 3:15 pm

Closing Ceremony

3:15 pm-4:30 pm

Keynote Speaker: Tony Chaidez
Lakeshore & Ines Murray Discount School Supply

(5)

Director Track

July 30, 2018

Registration and Reception
Opening Ceremony
Keynote Speaker: Phyllis Kalifeh, Ed. D
Jasmine

8:00 am-8:55 am

Sessions

ERSEA/Disability & School Readiness Subsidy
Presenters : Connie Williams, Rosa Pache

9:00 am-10:25 am

Facility/Quality Assurance
Presenters: Nelson Medina, Michelle Toral

10:30 am-12:25 pm

Lunch

12:30 am-1:25 pm

Keynote Speaker : Phyllis Kalifeh, Ed. D
Jasmine

Health and Safety
Presenters : Ronald Phillips, Rosa Pache

1:30 pm-3:00 pm

Afternoon Refreshments *(Jasmine)*

3:00 pm – 3:30 pm

ChildPlus

3:30 pm-3:55 pm

Presenters: Angela McCoy, Joann Surrancy, Sabrina Keen

Community and Family Engagement/Governance
Social Work

Presenters: Cassandra Alexander, Barbara Thomas-
Robinson

4:00 pm-5:00 pm

(6)

Teacher Track

July 30, 2018

Registration and Reception
Opening Ceremony

Keynote Speaker: Phyllis Kalifeh, Ed.D
Jasmine

8:00 am-9:15 am

Sessions

9:15 am-10:45 am
Infant/Toddler Creative Curriculum Overview 0-36 month
English – Presenters : Arlene Rodriguez, Pearlina Marr
Hibiscus B

Infant/Toddler Creative Curriculum Overview 0-36 month
Spanish – Presenters: C. Vicky Castaneda, Mabel Ramirez
Hibiscus A

10:50 am-12:25 pm
CLASS Overview Infant English
Presenters: Arlene Rodriguez Pearlina Marr
Hibiscus B

CLASS Overview Infant Spanish
Presenters: C. Vicky Castaneda, Mabel Ramirez
Hibiscus A

12:30 pm-1:25 pm
Lunch

Keynote Speaker: Phyllis Kalifeh, Ed.D
Jasmine

Galileo English - DeAdra Rolle, Arlene Rodriguez
Hibiscus B

Galileo Spanish – Mabel Ramirez, C. Vicky Castaneda
Hibiscus A

3:00 pm – 3:30 pm
Afternoon Refreshments (*Jasmine*)

Experience Plan -Spanish
Presenters: C. Vicky Castaneda, Mabel Ramirez
Hibiscus A

3:30 pm-5:00 pm

Experience Plan - English
Presenters: Arlene Rodriguez, Pearlina Marr
Hibiscus B

(1)

Director Track

July 31, 2018

Registration and Reception
Opening Session

Keynote Speaker: Phyllis Kalifeh, Ed. D
Jasmine

8:00 am-8:55 am

Sessions

9:005 am-10:25 am
Human Resources
Presenters : Kristen Anderson Simoze Dorleans
Japengo

10:30 am-12:25 pm
Fiscal
Presenters: John Bode, Marie Joseph

12:30 pm-1:25 pm
Lunch
Keynote Speaker: Phyllis Kalifeh, Ed. D
Jasmine

1:30 pm-2:00 pm
Nutrition
Rani Panchanathan

2:00 pm-3:00 pm
Mental Health
Presenter: Carol Clarke

3:00 pm-3:15 pm
Afternoon Refreshments (*Jasmine*)

3:15 pm-4:30 pm
Closing Ceremony
Guest Speakers: Tony Chaidez, Lakeshore & Ines
Murray , Discount School Supply

(2)

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23043****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Baggage fees

Baggage fees

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 522 02 01 02 600 NA 500	N/A	Baggage fees	35.00	0.000	35.00

Approved

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:50 PM
Anita Bushnyakova	Contracts Mgr	09/04/2018 4:54 PM
Shelley Shafer	Requester	08/28/2018 1:16 PM

TOTAL**\$35.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22739

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

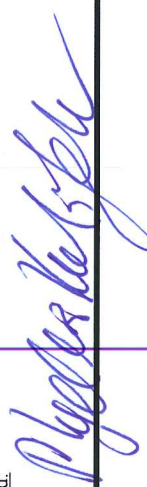
Purchase Order Information				Vendor Information		
Acct. No. (if applicable)	8/1/18			Vendor ID		For fiscal Use
Purchase Description	American Airlines			Vendor Name	TSB Visa Kalifeh	
Purchase/Service Date	7/29/18	To	7/29/18	Street Address		
Requestor's Name/Dept	Phyllis Kalifeh			City		
Department Approval				Phone		
				Invoice #		
				Terms (Due)	Pay by Invoice	

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

\\main\shared\pkalifeh\Desktop\Fiscal Forms\P.O.Template.xls

STAPLE
HERE

2nd Street
 of HMC
 Wills
 11/15/1913
 March
 11/15/1913

State of Florida Authorization to Incur Travel Expenses		Name: Phyllis Kalifeh		Official Headquarters: Tallahassee		Date: 7/23/2018	
Department:		Division:		Distribution or Fund:		%	
Purpose of Trip: EHS-CPP in Miami for training & technical assistance							
Destination: Miami, FL		Departure Date 7/29/2018		Return Date 7/31/2018		Total Days 3	
Conference or convention travel: Explanation of benefits accruing to the State of Florida							
Total Estimated Per Diem:		\$ 135.00					
Registration Fee:		\$ -					
Transportation:		\$ 50.00					
Hotel		Hotel Name		Confirm		Rate	
Flights		Airline		Departing Flight		Returning Flight	
				Time		Time	
				Cost		Cost	
				\$ -		\$ 766.00	
TOTAL ESTIMATED COST FOR TRIP		\$ 951.00					
Comments: I will transport Help Me Grow materials for the EHS-CPP Training.							
I hereby certify that travel as shown above is to be incurred in connection with official business of the State							
Signed:		Approved by Supervisor:		Date		Approved-Agency Head	
				7/23/18			

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23045****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Airfare for P.Kalifeh, L. Stegmeyer, D. Bishop, M. Clements and L. Adams Early Education Leaders Conf

Airfare for P.Kalifeh, L. Stegmeyer, D. Bishop, M. Clements and L. Adams Early Education Leaders Conf

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		18200	N/A	Airfare for P.Kalifeh, L. Stegmeyer, D. Bishop, M. Clements and L. Adams Early Education Leaders Conf	1,682.00	0.000	1,682.00

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$1211.04
861 02 01 02 602 NA 800	0.28	\$470.96

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:50 PM
Kerri Cloud	Dir of Finance	08/29/2018 4:44 PM
Shelley Shafer	Requester	08/28/2018 1:23 PM

TOTAL \$1,682.00

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22741

Thursday, September 6, 2018 Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
Acct. No. (if applicable)	2861			Vendor ID			For fiscal Use
Purchase Description	Airline Tickets for Early Educators Leadership Conf.			Vendor Name	T5B- Phyllis Kalifeh		
Purchase/Service Date	7/26/18	to	8/1/18	Street Address	VISA		
Requestor's Name/Dept	Lisa Roberts			City		State	Zip
Department Approval	[Signature]			Phone			
				Invoice #	EZOTFA		
				Terms (Due)			

Expense Coding Info	
GL Code	18200 53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. Keloud 8/29/18

CEO(+\$1,000) [Signature]



Plan Travel

Travel Information

AAAdvantage



Home Hello, PHYLLIS

English

Search aa.com

Thank you for making your reservation on AA.com!

Thank you. Your email has been sent.



Your trip is booked

Once the status of your trip is 'Ticketed,' you'll receive a confirmation email and can print your itinerary and receipt on aa.com (usually within 3 hours).

Tallahassee to Washington

5 Adults

Tuesday October 9, 2018 – Friday October 12, 2018

AA Record Locator

EZOTFA

Your record locator is your reservation confirmation number and will be needed to retrieve or reference your reservation.

Reservation Name

TLH/DCA

Status: Ticket Pending on Jul 26, 2018

Flight	Depart	Arrive
American Airlines 4626 Operated by Republic Airlines As American Eagle Create Notification	Tallahassee (TLH) October 9, 2018 07:21 AM Travel Time : 2 h 8 m Class : Economy Seat : 14C , 14A , 15C , 15A , 14D	Washington (DCA) October 9, 2018 09:29 AM Booking Code : O Plane Type : E75
American Airlines 4504 Operated by Republic Airlines As American Eagle Create Notification	Washington (DCA) October 12, 2018 08:00 PM Travel Time : 2 h 16 m Class : Economy Seat : 14C , 14A , 15C , 15A , 14D	Tallahassee (TLH) October 12, 2018 10:16 PM Booking Code : O Plane Type : E75

Your Trip Price:

\$1,682.00 USD

Fare Amount

Adult

5 × \$286.51 USD

\$1,432.55 USD

AAAdvantage® Benefits

Priority AccessSM

\$0.00 USD

Taxes & Carrier-Imposed Fees

Taxes

\$249.45 USD

Carrier-Imposed Fees

\$0.00 USD

Flight Subtotal

\$1,682.00 USD

Hotel Offers

Book your hotel with us and earn up to 10,000 miles per night

Destination/Hotel Name: Washington, DC

Check-in: 10/09/2018

Check-out: 10/12/2018

Search

Alexander

3-night stay

\$345

Global Luxury Suites at The White House

3-night stay

\$1,457

Heaven on Washington Center of the City Furnished Apartments

3-night stay

\$1,197

More hotel offers

Baggage Information

Checked Baggage (per person)

Based on your travel, one airline is designated as the Most Significant Carrier, and that airline's baggage allowances and charges apply to your entire journey. Other Baggage and Optional Charges

Carry-On Baggage		Cost (USD)	Size*	Additional Info
American Airlines Domestic	 1st Carry-On	No Charge	36 din / 91 dcm	Includes: purse, briefcase, laptop bag or similar item that must fit under the seat in front of you.
	 2nd Carry-On	No Charge	45 din / 114 dcm	Maximum dimensions not to exceed: 22" long x 14" wide x 9" tall (56 x 35 x 23 cm)

		Cost (USD)	Size*	Weight
American Airlines	 1st Bag	\$25	62 din / 158 dcm	Under 50 lbs/ 23 kgs
	 2nd Bag	\$35	62 din / 158 dcm	Under 50 lbs/ 23 kgs

*Dimensional Size is calculated as follows: (Length + Width + Height)

Passenger Summary

Save time at the airport! Add your travel information below to check-in online.

PHYLLIS KALIFEH

☒ No Further information required to travel

Trip Contact Information

We may need to contact you in the event there is important information relevant to your trip. Please enter your cell phone number. This information will not be used for marketing purposes.

1

Area Code and Number

Summary

All information required for online check-in has been provided.

Online check-in will be available 24 hours prior to your departure.

☒ Secure Flight Information

Frequent Flyer Number
219HPX2

LORI STEGMEYER

☒ No Further information required to travel

Trip Contact Information

We may need to contact you in the event there is important information relevant to your trip. Please enter your cell phone number. This information will not be used for marketing purposes.
Passenger details have been updated.

1

Area Code and Number

Summary

All information required for online check-in has been provided.

Online check-in will be available 24 hours prior to your departure.

☒ Secure Flight Information

Frequent Flyer Number
619TYW6

MARGOT BISHOP

☒ No Further information required to travel

Trip Contact Information

We may need to contact you in the event there is important information relevant to your trip. Please enter your cell phone number. This information will not be used for marketing purposes.
Passenger details have been updated.

1

Area Code and Number

Summary

All information required for online check-in has been provided.

Online check-in will be available 24 hours prior to your departure.

☒ Secure Flight Information

Frequent Flyer Number

Not an AAdvantage member?

MELISSA CLEMENTS

☒ No Further information required to travel

Trip Contact Information

We may need to contact you in the event there is important information relevant to your trip. Please enter your cell phone number. This information will not be used for marketing purposes.
Passenger details have been updated.

1

Area Code and Number

Summary

All information required for online check-in has been provided.

Online check-in will be available 24 hours prior to your departure.

☒ Secure Flight Information

Frequent Flyer Number

82FKM14

LISA ADAMS

☒ No Further information required to travel

Trip Contact Information

We may need to contact you in the event there is important information relevant to your trip. Please enter your cell phone number. This information will not be used for marketing purposes.
Passenger details have been updated.

1

Area Code and Number

Summary

All information required for online check-in has been provided.

Online check-in will be available 24 hours prior to

☒ Secure Flight Information

Frequent Flyer Number

Not an AAdvantage member?

your departure.

Trip insurance

Insurance Offer Declined

Allianz Global Assistance

It's not too late! Trip Insurance from Allianz Global Assistance helps protect against expenses should you be required to cancel or interrupt your trip due to medical or other covered reasons affecting you or your family members. To purchase trip insurance or to learn more, visit Travel Insurance From Allianz Global Assistance or call Allianz Global Assistance directly at 1-800-628-5404.

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23047****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Hotel and transportation for Kalifeh, Adams and Grant EHS CCP for Miami Dade

Hotel and transportation for Kalifeh, Adams and Grant EHS CCP for Miami Dade

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Hotel and transportation for Kalifeh, Adams and Grant EHS CCP for Miami Dade	750.08	0.000	750.08

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$540.06
861 02 01 02 602 NA 800	0.28	\$210.02

Approval Information

Shelley Shafer Accounting 09/06/2018 1:51 PM
Anita Bushnyakova Contracts Mgr 09/04/2018 4:42 PM
Shelley Shafer Requester 08/28/2018 1:52 PM

TOTAL**\$750.08**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22744

Thursday, September 6, 2018

Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
	8/1/18			Vendor ID		For fiscal Use	
Purchase Description	EHS-CCP for Miami-Dade Hyatt Regency			Vendor Name	TSB-Admin Kalifeh		
Purchase/Service Date	7/29/18	To	7/31/18	Street Address			
Requestor's Name/Dept	Phyllis Kalifeh			City		State	Zip
Supervisor Approval	[Signature]			Phone		Fax	
				Invoice #			
				Terms (Due)			

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. AB 8/3/14

CEO(+ \$1,000) _____



Hyatt Regency Miami
400 SE Second Avenue
Miami, FL 33131-2197
Tel: 305 358 1234
Fax: 305 358 0529

INVOICE

Phyllis Kalifeh
2807 Remington Green Cir
Tallahassee, FL 32308
United States

Room No. 0610
Arrival 2018-07-29
Departure 2018-07-31
Page No. 1 of 1
Folio Window 1
Folio No. 27611603

Confirmation No. 864414701

Group Name

Date	Description	Charges	Credits
07-29-2018	Guest Room	119.00	
07-30-2018	Guest Room	119.00	
07-31-2018	Visa XXXXXXXXXXXXXXX4368		-238.00
Total		238.00	-238.00

Guest Signature

Balance

0.00

I agree that my liability for this bill is not waived and I 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.

World of Hyatt Summary

Membership: XXXXXX309U
Bonus Codes:
Qualifying Nights: 2
Eligible Spend: 238.00
Redemption Eligible: 0.00

Summary Invoice, please see front desk for eligibility details.



HYATT
REGENCY

Hyatt Regency Miami
400 SE Second Avenue
Miami, FL 33131-2197
Tel: 305 358 1234
Fax: 305 358 0529

INVOICE

Martha Grant
Phyllis Kalifeh

2807 Remington Green Cir
Tallahassee, FL 32308
United States

Confirmation No. 864414702

Group Name

Room No. 0533
Arrival 2018-07-29
Departure 2018-07-31
Page No. 1 of 1
Folio Window 1
Folio No. 27611603

Date	Description	Charges	Credits
07-29-2018	Guest Room	119.00	
07-30-2018	Guest Room	119.00	
07-31-2018	Visa XXXXXXXXXXXXXXX4368		-238.00
Total		238.00	-238.00
Guest Signature		Balance	0.00

I agree that my liability for this bill is not waived and I 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.

World of Hyatt Summary

Membership: XXXXXX309U
Bonus Codes:
Qualifying Nights: 2
Eligible Spend: 238.00
Redemption Eligible: 0.00

Summary Invoice, please see front desk for eligibility details.



Hyatt Regency Miami
400 SE Second Avenue
Miami, FL 33131-2197
Tel: 305 358 1234
Fax: 305 358 0529

INVOICE

Lisa Adams
2807 Remington Green Cir
Tallahassee, FL 32308
United States

Room No. 0941
Arrival 2018-07-29
Departure 2018-07-31
Page No. 1 of 1
Folio Window 1
Folio No. 27611779

Confirmation No. 864414703

Group Name

Date	Description	Charges	Credits
07-29-2018	Guest Room	119.00	
07-30-2018	Guest Room	119.00	
07-31-2018	Visa XXXXXXXXXXXXXXX4368		-238.00
Total		238.00	-238.00

Guest Signature

Balance

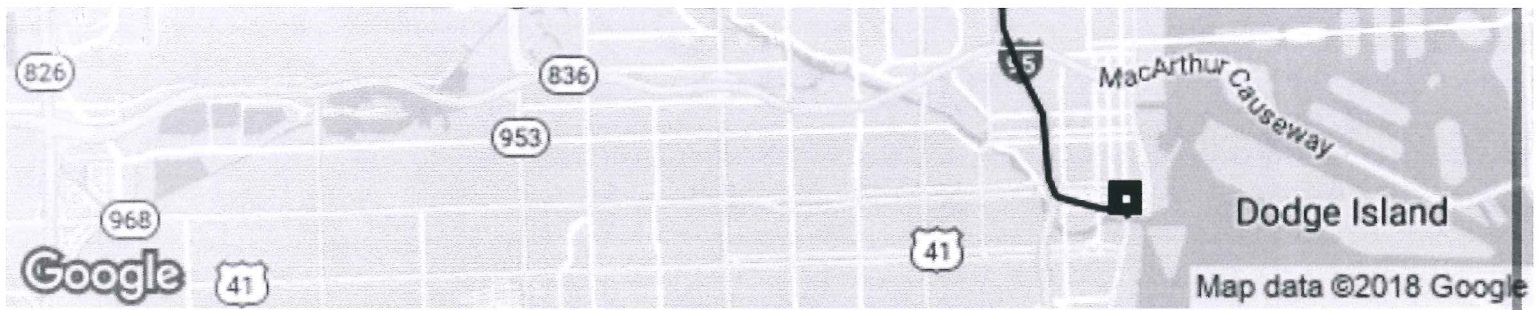
0.00

I agree that my liability for this bill is not waived and I 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.

World of Hyatt Summary

No Membership to be credited

Join World of Hyatt today and start earning points for stays, dining and more.
Visit www.worldofhyatt.com



7/29/18, 6:49 PM

Honda Accord HSXD26

\$13.81

Add a tip

● 1961 Miad Cir, Miami, FL 33126, USA

■ 400 US-41, Miami, FL 33131, USA



You rated Fernando



Help

Receipt

UberX Receipt

Trip fare

\$13.81

Subtotal

\$13.81

- 300 US-41, Miami, FL 33131, USA
- 1961 Miad Cir, Miami, FL 33126, USA



You rated Jean



Help

Receipt

UberX Receipt

Trip fare		\$19.27
Subtotal		\$19.27
Total	<i>\$22.27 total</i>	\$19.27
Tip		\$3.00

[illegible]

CONFERENCE OR CONVENTION TRAVEL: EXPLANATION OF BENEFITS ACCRUING TO THE CHILDREN'S FORUM

Provide training and technical assistance for the Early Head Start - Child Care Partnership participants in Miami-Dade County.

I HEREBY CERTIFY THAT TRAVEL AS SHOWN ABOVE IS TO BE INCURRED IN CONNECTION WITH OFFICIAL BUSINESS OF THE CHILDREN'S FORUM

APPROVED BY/SUPERVISOR

DATE _____

DATE _____

FISCAL APPROVAL

DATE _____

W. L. Jones	For	7.25.5	VB	7/25/12
-------------	-----	--------	----	---------

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23050****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Airfare for P. Kalifeh, L. Adams and M. Grant EHS CCP for Miami Dade

Airfare for P. Kalifeh, L. Adams and M. Grant EHS CCP for Miami Dade

Unit Qty	Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Airfare for P. Kalifeh, L. Adams and M. Grant EHS CCP for Miami Dade	2,296.20	0.000	2,296.20

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$1653.26
861 02 01 02 602 NA 800	0.28	\$642.94

Approved

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:53 PM
Anita Bushnyakova	Contracts Mgr	09/04/2018 4:41 PM
Shelley Shafer	Requester	08/28/2018 1:58 PM

TOTAL**\$2,296.20**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22747

Thursday, September 6, 2018

Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
	8/1/18			Vendor ID		For fiscal Use	
	EHS-CCP for Miami-Dade			Vendor Name	TSB Visa Kal:feh		
Purchase Description	American Airlines			Street Address			
Purchase/Service Date	7/29/18	To	7/31/18	City		State	Zip
Requestor's Name/Dept	Phyllis Kalifeh.			Phone		Fax	
Supervisor Approval				Confirmation#			
				Terms (Due)			

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

CEO(+\$1,000)

Phyllis Kalifeh

From: Phyllis Kalifeh <pkkalifeh@me.com>
Sent: Monday, July 23, 2018 4:21 PM
To: Phyllis Kalifeh; Martha Grant; Lisa Adams
Subject: Fwd: Your trip confirmation-JYOPQJ 29JUL

Our airline tickets.

Sent from my iPhone

Begin forwarded message:

From: American Airlines <no-reply@notify.email.aa.com>
Date: July 23, 2018 at 4:14:46 PM EDT
To: "PKKALIFEH@ME.COM" <pkkalifeh@me.com>
Subject: Your trip confirmation-JYOPQJ 29JUL

American Airlines 



Hello Phyllis Kalifeh!

Issued: Jul 23, 2018



Your trip confirmation and receipt

Record locator: **JYOPQJ**

[Manage Your Trip](#)

Sunday, July 29, 2018

TLH

4:59 PM



MIA

6:27 PM

Seats: 16A, 16B, 16C

Class: Economy (M)

Meals:

Tallahassee

Miami

American Airlines 3861

OPERATED BY ENVOY AIR AS AMERICAN EAGLE.

Free entertainment with the American app »

Tuesday, July 31, 2018

MIA

5:30 PM

Miami

American Airlines 3844

OPERATED BY ENVOY AIR AS AMERICAN EAGLE.



TLH

6:57 PM

Tallahassee

Seats: 13A, 13B, 13C

Class: Economy (V)

Meals:

Phyllis Kalifeh

AAdvantage # 219HPX2

Ticket # 0012101480465

Lisa Adams

Earn miles with this trip.

Join AAdvantage »

Ticket # 0012101480466

Martha Grant

AAdvantage # 43KW8F0

Ticket # 0012101480467

Your trip receipt



Visa XXXXXXXXXXXXXXX4368

Phyllis Kalifeh

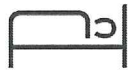
FARE-USD	\$ 685.58
TAXES AND CARRIER-IMPOSED FEES	\$ 79.82
TICKET TOTAL	\$ 765.40

Lisa Adams

FARE-USD	\$ 685.58
TAXES AND CARRIER-IMPOSED FEES	\$ 79.82
TICKET TOTAL	\$ 765.40

Martha Grant

FARE-USD	\$ 685.58
TAXES AND CARRIER-IMPOSED FEES	\$ 79.82
TICKET TOTAL	\$ 765.40



Hotel offers



Car rental offers

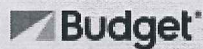


Buy trip insurance



SuperShuttle

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base rates +
1,000 bonus miles



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earn 20 miles per \$1

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Get the American Airlines app

Payee Phyllis Kalifeh
Vendor ID 1008

Account #:

18861
8/17/2018

Invoice	Description	Discount	Amount
09-EN-22992	Travel expenses Pre-K Transition summit	\$0.00	\$99.00

Electronic Payment Notification

Total :

\$0.00

\$99.00

Electronic Payment Notification

Phyllis Kalifeh
5419 Pimlico Drive
Tallahassee, FL 32309

VOID

Payee Phyllis Kalifeh
Vendor ID 1008

Account #:

18861
8/17/2018

Invoice	Description	Discount	Amount
09-EN-22992	Travel expenses Pre-K Transition summit	\$0.00	\$99.00

Electronic Payment Notification

Total :

\$0.00

\$99.00

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-22992****Vendor Information****Shipping Information****Phyllis Kalifeh**

5419 Pimlico Drive
Tallahassee, FL 32309
Phone - / Fax -

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/02/2018	08/23/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Travel expenses Pre-K Transition summit

Travel expenses Pre-K Transition summit

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 004 02 01 02 100 OEL Transition 100	N/A	Travel expenses Pre- K Transition summit	99.00	0.000	99.00

Approved

Approval Information

Shelley Shafer	Accounting	08/14/2018 12:59 PM
Anita Bushnyakova	Contracts Mgr	08/14/2018 11:55 AM
Shelley Shafer	Requester	08/13/2018 10:06 AM

TOTAL**\$99.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22687

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information				
				Vendor ID	1008	For fiscal Use		
Purchase Description	PreK Transition Summit			Vendor Name	Phyllis Kalifeh			
				Street Address				
Purchase/Service Date	8/1/18	To	8/2/18	City		State		Zip
Requestor's Name/Dept	Phyllis Kalifeh			Phone		Fax		
Supervisor Approval				Invoice #				
				Terms (Due)				

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	

Approvals

Fiscal Dept. AB 8/14/18

CEO(+ \$1,000) _____

Northeast Transition to Kindergarten Summit

August 2, 2018

10:00am	Kick-Off	Melinda Webster
10:20am	Overview & Introductions	Phyllis Kalifeh
10:45am	Vision and Current Practices Activity	Phyllis Kalifeh
11:15am	Child and Teacher Perspective Videos	Phyllis Kalifeh
11:30pm	Transition Resources & Best Practices	Melissa Clements
12:00pm	Exemplars from the field	Melissa Clements
12:30pm	Lunch on site	All
1:15pm	Transition System Needs Assessment	Small Groups
2:15pm	Groups Share Priorities for Improvement	Small Groups
2:30pm	S.W.O.T. & Transition Planning	Small Groups
3:30pm	Groups Share Key Action Steps	Small Groups
3:45pm	Closing Statements	Phyllis Kalifeh Melinda Webster

*Training Conducted
and attended -
Phyllis Kalifeh
8-2-18*

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23044****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/02/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies

Supplies

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300	N/A	Supplies	25.98	0.000	25.98
Account Information				Percent	Amount				
861 02 01 02 801 NA 800				0.72	\$18.71				
861 02 01 02 602 NA 800				0.28	\$7.27				

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:50 PM
Kerri Cloud	Dir of Finance	08/29/2018 4:43 PM
Shelley Shafer	Requester	08/28/2018 1:17 PM

TOTAL**\$25.98**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22740

Thursday, September 6, 2018 Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
Acct. No. (if applicable)				Vendor ID		For fiscal Use	
Purchase Description	Amazon			Vendor Name	TSB Visa <i>Kalifeh</i>		
Purchase/Service Date	8/2/18	To	8/2/18	Street Address			
Requestor's Name/Dept	Phyllis Kalifeh			City			
Department Approval	<i>Phyllis Kalifeh</i>			Phone			
				Invoice #			
				Terms (Due)	Pay by Invoice		

Expense Coding Info	
GL Code	57300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

\\main\shared\pkalifeh\Desktop\Fiscal Forms\P.O.Template.xls

**Details for Order #111-6038886-0033041**

[Print this page for your records.](#)

Order Placed: August 3, 2018

Amazon.com order number: 111-6038886-0033041

Order Total: \$25.98

Not Yet Shipped**Items Ordered****Price**

2 of: *For Kensington Wireless Presenter Pointer K33374USA / K33373US Travel* \$12.99

EVA Hard Protective Carrying Case by Hermitshell

Sold by: HermitShell Case ([seller profile](#))

Condition: New

Shipping Address:

Phyllis

2807 Remington Green Circle

Tallahassee, FL 32308

United States

Shipping Speed:

Two-Day Shipping

Payment information**Payment Method:**

Visa | Last digits: 4368

Item(s) Subtotal: \$25.98

Shipping & Handling: \$0.00

Total before tax: \$25.98

Estimated tax to be collected: \$0.00

Grand Total: \$25.98

Billing address

Phyllis Kalifeh

Children's Forum

2807 Remington Green Circle

Tallahassee, FL 32308

United States

To view the status of your order, return to [Order Summary](#).

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Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23042****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/01/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies

Supplies

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300 004 02 01 02 100 OEL Transition 100	N/A	Supplies	21.98	0.000	21.98

Approved

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:49 PM
Kerri Cloud	Dir of Finance	08/29/2018 4:42 PM
Shelley Shafer	Requester	08/28/2018 1:14 PM

TOTAL**\$21.98**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22738

Thursday, September 6, 2018 Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information					Vendor Information			
Acct. No. (if applicable)					Vendor ID			
Purchase Description		Supplies for PreKK Transition Summit			Vendor Name		TSB Visa <i>Kalifeh</i>	
					Street Address			
					City			
Purchase/Service Date		8/1/18	To	8/2/18	Phone			
Requestor's Name/Dept		Phyllis Kalifeh			Invoice #			
Department Approval		<i>[Signature]</i>			Terms (Due)		Pay by Invoice	

Expense Coding Info	
GL Code	57300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Supplies for Transition
Summit - Northeast

Dunkin Donuts # 355659
631 S. Walnut Street, Starke, FL 32091
8/2/2018 9:41:54 AM

Eat In
Order: 312

Tax Exempt ID: 858012541

Register:1 Tran Seq No: 521312

Cashier:Lakesha H.

*****SALE*****

1 Bx Joe Orig Blnd	15.99
1 25 Munchkins	5.99

Sub. Total:	\$21.98
Tax:	\$0.00
Total:	\$21.98
Discount Total:	\$0.00

Change	\$0.00
Visa:	\$21.98

VISA

Card Num : *****4368

Terminal : 1

Approval : 052698

AID : A0000000031010

TVR : 8080001000

IAD : 06010A03A00000

TSI : 6800

AR : Z3

TC : E028C8

USD\$ 21.98

Tell us about today's visit
at www.telldunkin.com within 3 days

RECEIVE A FREE CLASSIC DONUT

on your next visit when you
purchase a Medium or Larger Beverage
Survey Code: 31201-55659-0908-0289

Enter Validation Code: _____

See restrictions on dunkindonuts.com

Visit DunkinNation.com for product
offers and news. Enter Code DD2957

ôThank You Come Back Againô

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23052****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/02/2018	09/08/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Hotel and gas charges Kalifeh, Bishop and Clements PreK Transition

Hotel and gas charges Kalifeh, Bishop and Clements PreK Transition

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 004 02 01 02 100 OEL Transition 100	N/A	Hotel and gas charges Kalifeh, Bishop and Clements PreK Transition	331.47	0.000	331.47

Approved

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:54 PM
Anita Bushnyakova	Contracts Mgr	09/04/2018 4:44 PM
Shelley Shafer	Requester	08/29/2018 10:15 AM

TOTAL \$331.47

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22750

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information					Vendor Information				
					Vendor ID		For fiscal Use		
Purchase Description	PK Transition Hampton Lake B&B				Vendor Name	TSB-Admin Kae-fen			
Purchase/Service Date	8/1/18	To	8/2/18		Street Address				
Requestor's Name/Dept	Phyllis Kalifeh				City		State		Zip
Supervisor Approval					Phone		Fax		
					Invoice #				
					Terms (Due)				

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. AB 9/4/18

CEO(+ \$1,000) _____

Hampton Lake Bed & Breakfast

9138 SW 71st Street / P.O. Box 1209
Hampton, Florida 32044
www.hamptonlakebb.com

(352) 468-2703

staywithus@hamptonlakebb.com

HAMPTON LAJ
9138 SW
HAMPTON
(352) 468-2703

SAL
Store: 0
MID: 6107

RESERVATION INFORMATION (#16079) - PHYLLIS KELIFEH

Phyllis Kelifeh
Children's Forum- State
Tallahassee, Florida 32308
Pkelifeh@yahoo.com

850-322-8053
Estimated Arrival - --

The Johnson Bedroom**\$99.00**

Wed, Aug 1, 2018 — 2 Adults — \$99.00

➔ Depart: **Thu, Aug 2, 2018**

Sub Total: \$99.00
Tax Total: \$0.00
Total: \$99.00

RESERVATION INFORMATION (#16079) - DENISE BISHOP

Denise Bishop

1234567890
Estimated Arrival - ?

The Angler Room**\$99.00**

Wed, Aug 1, 2018 — 2 Adults — \$99.00

➔ Depart: **Thu, Aug 2, 2018**

Sub Total: \$99.00
Tax Total: \$0.00
Total: \$99.00

RESERVATION INFORMATION (#16079) - MELISSA CLEMENTS

Melissa Clements

1234567890
Estimated Arrival - ?

The Magnolia Room**\$99.00**

Wed, Aug 1, 2018 — 2 Adults — \$99.00

➔ Depart: **Thu, Aug 2, 2018**

Sub Total: \$99.00
Tax Total: \$0.00
Total: \$99.00

PAYMENTS / DEPOSITS

8/2/2018 VISA ...4368 Phyllis Kelifeh

\$297.00

Paid: \$297.00
Due: \$0.00

*Expenses
incurred and
paid by:
Phyllis Kelifeh
8-2-18*

- Reservations are confirmed upon the receipt of one night's deposit
- Deposit is refundable if cancellation is made 7 days in advance of your stay
- Personal and travelers checks are accepted

PAN FOOD STORE #3
2290 CAPITAL CIR NE
TALLAHASSEE FL 3230
850-386-6888

CARY116601
PAN FOOD 3
2290 CAP CIR NE
TALLAHASSEE FL

DATE 08/02/18 18:42
TRAN# 9032223
PUMP# 03
SERVICE LEVEL: SELF
PRODUCT: UNLEADED
GALLONS: 12.538
PRICE/G: \$ 2.749
FUEL SALE \$ 34.47
CREDIT \$34.47

VISA
Auth #: 023942
Resp Code: 000
Stan: 0519776370
Reference: 73078

SITE ID: CARY116601

THANK YOU
HAVE A NICE DAY

Paid for by: Myliss Khalifa
8-2-18

And you by: *Chas. Taylor*
8-2-18

THANK YOU
HAVE A NICE DAY

SITE ID: CARY116601

VISA
Auth #: 023942
Resp Code: 000
Stan: 0519776370
Reference: 73078

DATE 08/02/18 18:42
TRAN# 9032223
PUMP# 03
SERVICE LEVEL: SELF
PRODUCT: UNLEADED
GALLONS: 12.538
PRICE/G: \$ 2.749
FUEL SALE \$ 34.47
CREDIT \$34.47

PAN FOOD STORE #3
2290 CAPITAL CIR NE
TALLAHASSEE FL 3230
850-386-6888
CARY116601
PAN FOOD 3
2290 CAP CIR NE
TALLAHASSEE FL

***** ATTACH ORIGINAL TO TRAVEL EXPENSE REPORT**

[illegible]

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23049****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/02/2018	09/07/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies

Supplies

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300	N/A	Supplies	69.98	0.000	69.98
				Account Information	Percent	Amount			
				861 02 01 02 801 NA 800	0.72	\$50.39			
				861 02 01 02 602 NA 800	0.28	\$19.59			

Approval Information

Shelley Shafer	Accounting	09/06/2018 1:52 PM
Kerri Cloud	Dir of Finance	08/29/2018 4:44 PM
Shelley Shafer	Requester	08/28/2018 1:56 PM

TOTAL**\$69.98**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22746

Thursday, September 6, 2018 Page 1 of 1

23049

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information		
Acct. No. (if applicable)				Vendor ID		<i>For fiscal Use</i>
Purchase Description	Amazon			Vendor Name	TSB Visa <i>Kalifeh</i>	
Purchase/Service Date	8/2/18	To	8/2/18	Street Address		
Requestor's Name/Dept	Phyllis Kalifeh			City		
Department Approval	<i>Phyllis Kalifeh</i>			Phone		
				Invoice #		
				Terms (Due)	Pay by Invoice	

Purchase Information		
Distribution Code	Item Description	Amount
TEACH	Kensington Wireless Presenter (clickers)	34.99
	Kensington Wireless Presenter (clickers)	\$ 34.99
Total		\$ 69.98

Expense Coding Info	
GL Code	<i>57300</i>
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	<i>Keloid 8/29/18</i>
CEO(+ \$1,000)	

**Final Details for Order #112-3686274-8893808**

Print this page for your records.

Order Placed: August 2, 2018**Amazon.com order number:** 112-3686274-8893808**Order Total:** \$69.98**Shipped on August 2, 2018****Items Ordered**2 of: *Kensington Wireless Presenter with Red Laser Pointer (K33374USB)*

Sold by: Amazon.com Services, Inc.

Condition: New

Price

\$34.99

Shipping Address:

Phyllis Kalifeh
Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308
United States

Item(s) Subtotal: \$69.98

Shipping & Handling: \$0.00

Total before tax: \$69.98

Sales Tax: \$0.00

Total for This Shipment: \$69.98

Shipping Speed:

Two-Day Shipping

Payment information**Payment Method:**

Visa | Last digits: 4368

Item(s) Subtotal: \$69.98

Shipping & Handling: \$0.00

Total before tax: \$69.98

Estimated tax to be collected: \$0.00

Grand Total: \$69.98**Billing address**

Phyllis Kalifeh
Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308
United States

Credit Card transactions

Visa ending in 4368: August 2, 2018: \$69.98

To view the status of your order, return to [Order Summary](#).

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Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23121****Vendor Information**

Tallahassee State Bank
PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
08/09/2018	09/20/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Online training for VPK Instructors

Online training for VPK Instructors

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		54000 004 02 01 02 100 OEL Transition 100	N/A	Online training for VPK Instructors	20.00	0.000	20.00

Approved

Approval Information

Shelley Shafer	Accounting	09/11/2018 2:30 PM
Kerri Cloud	Dir of Finance	09/11/2018 2:04 PM
Shelley Shafer	Requester	09/10/2018 2:52 PM

TOTAL**\$20.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22819

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information				
Acct. No. (if applicable)				Vendor ID				For fiscal Use
Purchase Description	Online Training			Vendor Name	TSB-Kalifeh			
				Street Address				
Purchase/Service Date	8/9/18	To	8/9/18	City		FL		
Requestor's Name/Dept	Tamela Nelloms			Phone				
Department Approval	Phyllis Kalifeh			Invoice #				
				Terms (Due)				

Expense Coding Info	
GL Code	54000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. K Cloud 9/11/18

CEO(+ \$1,000) _____

DCF Child Care Training Office

Receipt Information

Receipt Print Date: 10-Sep-2018

Name: Phyllis K. Kalifeh

Student ID: 519885

The following receipt information is provided for your records. This receipt indicates payment for the following course.

Remember, you have 45 days to complete the online course from the date you actually started the course. Weekends do count.

Class Information

Package Name: Online Course

Date Applied: 08/09/2018

Payment Made: \$10.00

Payment Type: CREDIT CARD

Purchase Date: 08/09/2018

Module Name: Emergent Literacy for VPK Instructors (VPKR)

If a credit card transaction exist, it may have been used to purchase multiple items. All items purchased in this transaction will be listed below

Transaction ID: 160032430 **Amount Paid:** \$20.00 **Date Paid:** 08/09/2018

Course Module: Implementing the Florida Standards in Preschool Classrooms: 3 Years Old to Kindergarten (VFSP) **Fee:** \$10.00

Course Module: Emergent Literacy for VPK Instructors (VPKR) **Fee:** \$10.00

Training Provider Information

Name: Early Education and Care, Inc. Circuit 2 14

Address: 450 Jenks Ave

Panama City, FL 32401 - 2626

Phone Number: (850) 872-7550

Location Information

Location: Online Course

Payee Phyllis Kalifeh
Vendor ID 1008

Account #:

18918
10/4/2018

Invoice	Description	Discount	Amount
09-EN-23222	Travel expenses Forum PD Conference	\$0.00	\$94.35

Electronic Payment Notification

Total :

\$0.00

\$94.35

Electronic Payment Notification

Phyllis Kalifeh
5419 Pimlico Drive
Tallahassee, FL 32309

VOID

Payee Phyllis Kalifeh
Vendor ID 1008

Account #:

18918
10/4/2018

Invoice	Description	Discount	Amount
09-EN-23222	Travel expenses Forum PD Conference	\$0.00	\$94.35

Electronic Payment Notification

Total :

\$0.00

\$94.35

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23222****Vendor Information****Phyllis Kalifeh**

5419 Pimlico Drive
Tallahassee, FL 32309
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/21/2018	10/12/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Travel expenses Forum PD Conference

Travel expenses Forum PD Conference

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Travel expenses Forum PD Conference	74.00	0.000	74.00

Account Information	Percent	Amount
625 02 01 02 301 10134 600	0.1	\$7.40
317 02 01 02 301 10134 600	0.02	\$1.48
665 02 01 02 301 10134 600	0.05	\$3.70
994 01 01 01 100 10134 100	0.1	\$7.40
668 02 01 02 301 10134 600	0.2	\$14.80
522 02 01 02 300 10134 500	0.15	\$11.10
861 02 01 02 801 10134 800	0.27	\$19.98
861 02 01 02 602 10134 800	0.11	\$8.14

1	EA	0		53000	N/A	Travel expenses Forum PD Conference	20.35	0.000	20.35
---	----	---	--	-------	-----	---	-------	-------	-------

Account Information	Percent	Amount
004 01 01 01 100 NA 100	0.0009	\$0.02
004 01 01 01 100 NA 400	0.0001	\$0.00
004 02 01 02 100 NA 400	0.005	\$0.10
207 01 01 01 203 NA 600	0.0041	\$0.08
207 02 01 02 203 NA 600	0.0327	\$0.67
317 01 01 01 600 NA 600	0.0097	\$0.20
317 02 01 02 600 NA 600	0.0787	\$1.60
469 01 01 01 404 NA 104	0.0025	\$0.05
469 02 01 02 404 NA 104	0.0203	\$0.41
470 01 01 01 404 NA 104	0.0072	\$0.15
470 02 01 02 404 NA 104	0.0578	\$1.18
514 01 01 01 501 NA 102	0.0008	\$0.02
514 02 01 02 501 NA 102	0.0068	\$0.14
625 01 01 01 301 NA 600	0.014	\$0.28
625 02 01 02 301 NA 600	0.1132	\$2.30
665 01 01 01 301 NA 600	0.0046	\$0.09
665 02 01 02 301 NA 600	0.0375	\$0.76
861 01 01 01 801 NA 800	0.07	\$1.42
861 02 01 02 602 NA 800	0.102	\$2.08
861 02 01 02 801 NA 800	0.2622	\$5.34



Control No. 22924

Unit Qty	Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
522	01	01	01	501 NA 500	0.0084		\$0.17		
522	02	01	02	501 NA 500	0.0675		\$1.37		
668	01	01	01	301 NA 600	0.0092		\$0.19		
668	02	01	02	301 NA 600	0.0742		\$1.51		
127	01	01	01	301 NA 600	0.0008		\$0.02		
127	02	01	02	301 NA 600	0.0068		\$0.14		
125	01	01	01	501 NA 100	0.0003		\$0.01		
125	02	01	02	501 NA 100	0.0027		\$0.05		

Approved

Approval Information

Shelley Shafer	Accounting	10/03/2018 10:31 AM
Anita Bushnyakova	Contracts Mgr	10/03/2018 9:58 AM
Shelley Shafer	Requester	10/02/2018 9:22 AM

TOTAL	\$94.35
--------------	----------------

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22924

[illegible]

YOUR TRIP TO:

5419 Pimlico Dr

14 MIN | 7.6 MI 

Est. fuel cost: \$0.84

Trip time based on traffic conditions as of 12:16 PM on October 1, 2018. Current Traffic: Moderate



Print a full health report of your car with HUM vehicle diagnostics (800) 906-2501

mapquest

Enterprise to Home



1. Start out going southwest on Mahan Dr/US-90 W/FL-10 toward Brewster Rd.

Then 0.49 miles

0.49 total miles



2. Turn right onto Capital Cir/US-319 N/FL-261.

Capital Cir is 0.3 miles past Weems Rd.

If you reach Jaydell Cir you've gone about 0.2 miles too far.

Then 1.36 miles

1.86 total miles



3. Turn right onto Centerville Rd/County Hwy-151.

Centerville Rd is 0.1 miles past Tim Gamble Pl.

Then 0.17 miles

2.02 total miles



4. Turn left to stay on Centerville Rd/County Hwy-151.

If you are on Welaunee Blvd and reach Centennial Blvd you've gone about 0.2 miles too far.

Then 5.18 miles

7.20 total miles



5. Turn left onto Pimlico Dr.

Pimlico Dr is 0.2 miles past Donnybrook Pl.

If you reach Bradfordville Rd you've gone about 0.4 miles too far.

Then 0.39 miles

7.59 total miles



6. 5419 Pimlico Dr, Leon, FL, 32309-2408, 5419 PIMLICO DR is on the left.

Your destination is just past Santa Anita Dr.

If you reach Count Fleet Trl you've gone about 0.1 miles too far.

Use of directions and maps is subject to our [Terms of Use](#). We don't guarantee accuracy, route conditions or usability. You assume all risk of use.

YOUR TRIP TO:

3404 Mahan Dr, Tallahassee, FL, 32308-5667

mapquest

8 MIN | 3.3 MI **Est. fuel cost: \$0.36**

Trip time based on traffic conditions as of 12:13 PM on October 1, 2018. Current Traffic: Heavy

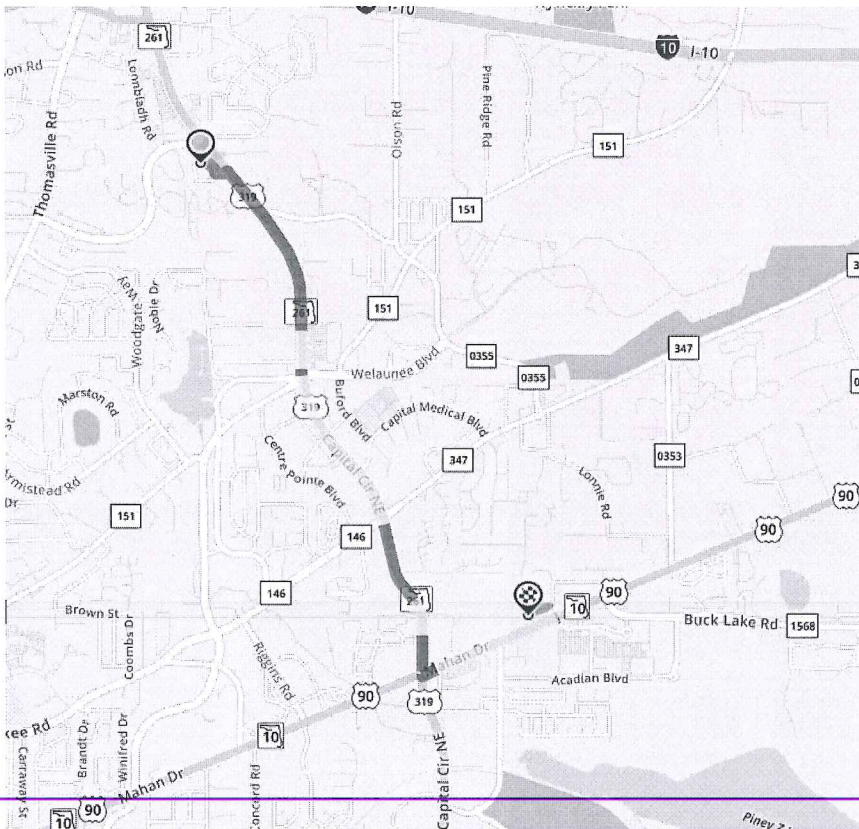


Print a full health report of your car with HUM vehicle diagnostics (800) 906-2501

Offire to Enterprise

-  1. Start out going **southeast** on Remington Green Cir.
..... Then 0.07 miles 0.07 total miles
-  2. Take the 1st **left** to stay on Remington Green Cir.
If you reach Remington Green Ln you've gone about 0.1 miles too far.
..... Then 0.05 miles 0.12 total miles
-  3. Take the 1st **right** onto Capital Cir/US-319 S/FL-261.
..... Then 2.38 miles 2.50 total miles
-  4. Turn **left** onto Mahan Dr/US-90 E/FL-10.
If you reach Mini Maxi Blvd you've gone about 0.3 miles too far.
..... Then 0.63 miles 3.14 total miles
-  5. Make a **U-turn** at Lagniappe Way onto Mahan Dr/US-90 W/FL-10.
If you reach Buck Lake Rd you've gone about 0.2 miles too far.
..... Then 0.11 miles 3.25 total miles
-  6. 3404 Mahan Dr, Tallahassee, FL 32308-5667, 3404 MAHAN DR is on the **right**.
Your destination is just past Silkbay Ct.
If you reach Brewster Rd you've gone a little too far.

Use of directions and maps is subject to our [Terms of Use](#). We don't guarantee accuracy, route conditions or usability. You assume all risk of use.



THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

CONWAY MAIN LANES

Lane: 3 Collector: 8623

Fri Sep 21 12:27:43 2018

Toll paid: \$ 1.25

THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

HIAWASSEE

Lane: 16 Collector: 10286

Fri Sep 21 12:39:32 2018

Toll paid: \$ 1.00

THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

PINE HILL RD.

Lane: 14 Collector: 9053

Fri Sep 21 12:36:00 2018

Toll paid: \$ 1.25

THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

UNIVERSITY AVE.

Lane: 15 Collector: 4305

Fri Sep 21 12:20:26 2018

Toll paid: \$ 1.00

FLORIDA'S TURNPIKE ENTERPRISE

CUSTOMER TOLL RECEIPT

Leesburg

PLAZA 003100 LANE 15
COLL C096
TOLL DUE 3.25
PAID 3.25 CHANGE 1.75
PAY TYPE CASH
09/21/18-13:01:02.582

You would have saved \$0.31 at
this Toll Plaza by using SUNPASS

Available at Publix, CVS,
Walgreens, AMSCOT, AAA and
www.SUNPASS.com

*Toll
receipts*

THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

HIAWASSEE

Lane: 1 Collector: 9403

Mon Sep 17 14:57:41 2018

Toll: \$ 1.00

$x2 = 2.00$

THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

UNIVERSITY AVE.

Lane: 2 Collector: 10987

Mon Sep 17 15:18:05 2018

Toll: \$ 1.00

$x2 = 2.00$

TOLL RECEIPT

INITIALS HC ID # 11073

\$.25 ☐	\$ 1.25 ☒	\$ 3.00 ☐
\$.50 ☐	\$ 1.50 ☐	\$ 4.00 ☐
\$.75 ☐	\$ 1.75 ☐	
\$ 1.00 ☐		\$ <u> </u> ☐

FAC

THANK YOU

CENTRAL FLORIDA
EXPRESSWAY AUTHORITY

PINE HILL RD.

Lane: 2 Collector: 11054

Mon Sep 17 15:01:19 2018

Toll: \$ 1.25

$x2 = 2.50$

FLORIDA'S TURNPIKE ENTERPRISE

Form-4/1

$x2 = 2.50$

CUSTOMER TOLL RECEIPT

Leesburg

PLAZA 003100 LANE 05
COLL C095
TOLL DUE 3.25
PAID 3.25 CHANGE 1.75
PAY TYPE CASH
09/17/18-14:35:56.084

$x2 = 6.50$

TOTAL:
\$15.50
Tolls

You would have saved \$0.31 at
this Toll Plaza by using SUNPASS

Available at Publix, CVS,
Walgreens, AMSCOT, AAA and
www.SUNPASS.com



**EXECUTIVE LEADERSHIP TEAM
MEETING AGENDA
September 17-18, 2018**

Intended outcomes:

- Children's Forum current status, goals, needs explored
 - Updated strategic plan for the board's consideration
 - Creative space to brainstorm new business lines and connections
-

Monday, 9/17/18

4:00	Welcome, review agenda, intended outcomes	Phyllis
4:15	Where are we now?	Phyllis
4:30	The Science of Social Networks	Allyson Adolphson
5:30	Break	
6:00	Leave for dinner	Restaurant TBD
8:30	Reconvene / Review / Reflection	
	1. What is working well?	
	2. What would you want to see change (from your program / area of responsibility perspective?)	

Tuesday 9/18/18

8:00	Meet for breakfast (we will find a location for breakfast off site)
9:00	Return to San Pedro
9:15	SWOT Analysis
10:15	Planning for new business
12:00	Reflection / next steps
12:30	Lunch (we will find a location for lunch off site)

CHILDREN'S FORUM PROFESSIONAL DEVELOPMENT CONFERENCE 2018

SAN PEDRO CENTER

- AGENDA -

WEDNESDAY, SEPT. 19		THURSDAY, SEPT. 20		FRIDAY, SEPT. 21	
USE YOUR NOODLES: Make A Difference					
7:45am	<u>Doral Office</u> Miami staff Leave for Winter Park, FL	8:00am	Breakfast - Provided	8:00am	Breakfast -Provided
7:45am	<u>Tallahassee Office</u>	8:30-11:00	<i>Trauma Informed Care</i>	8:30am-9:00	General Debriefing –
8:00am	Tallahassee staff leave for Winter Park, FL		<i>Resilience</i>		CEO Phyllis Kalifeh
	Vans Depart from Tallahassee		<i>Cultural Sensitivity</i>	9:00am	The Amazing Brain –
12:30pm	Staff traveling by car must arrive by 12:30pm		<i>Implicit Bias</i>		Guest Speaker Dr. Will Blechman
			<i>ACES</i>	10:30am	Pack bags and bring to Bldg. 300
12:30pm-1:00pm	Check into Rooms	11:00-12:00	Professional Development Activity	11:00am	Closing Session
	<i>Keys at Main Bldg.</i>				• <i>Workplace Safety Training</i>
1:00pm-2:00pm	Lunch - Provided	12:00pm	Lunch		<i>Tamara Price & Allyson Adolphson</i>
		1:00pm	Board bus for Winter Park	11:45am	Box Lunches - Provided
2:00pm-5:00pm	Group Meeting	1:30pm	Professional Development Activities in downtown Winter Park	12:00pm	Cars & Vans Leave for Home
	<i>Welcome from CEO Phyllis Kalifeh</i>			4:30pm (approx.)	Cars & Vans Arrive Home
	<i>Professional Development Activity</i>	By 8:00pm	Board bus for San Pedro Center		
	<i>Materials Distribution</i>				
	<i>Team Building Activity</i>				
	<i>Zip Code Video/Discussion</i>				
5:30pm	Dinner - Provided				
7:00pm-9:30 pm	Professional Development Activity				

State of Florida Authorization to Incur Travel Expenses		Name: Phyllis Kalifeh Department: Admin		Official Headquarters: Children's Forum Division:		Date: 9/11/18 Distribution or Fund:		% %	
Purpose of Trip: Children's Forum Professional Development Conference				Departure Date 9/17/2018	Return Date 9/21/2018	Total Days 5			
Destination: Winter Park, FL				Departure Time 11:00 a.m.	Return Time 4:30 p.m.	Trip Number			
Conference or convention travel: Explanation of benefits accruing to the State of Florida Meetings, councils, site visits, monitoring, training, summits, conferences and all activities related to the Children's Forum, Inc. and its funders' mission to ensure access, affordability and quality of early learning services for all of FL's children and families and build support systems to promote positive experiences and outcomes for young children.									
Total Estimated Meals & Per Diem:				\$ 85.00					
Registration Fee:				\$ -					
Transportation:				\$ 195.00					
<u>Hotel</u>	Hotel Name	Confirm	Rate	Nights	Cost \$ -				
<u>Flights</u>	Airline	Departing Flight Time	Returning Flight Time	Cost \$ -					
TOTAL ESTIMATED COST FOR TRIP					\$ 280.00				
Comments: Justification for rental car upgrade: transporting employees and conference materials.									
I hereby certify that travel as shown above is to be incurred in connection with official business of the State									
Signed: 		Approved by Supervisor: 		Date 9/11/18	Approved-Agency Head	Date			

Childrens Forum Inc.

2807 Remington Green Circle
 Tallahassee, FL 32308
 (850) 681-7002 Ext
 Shelley Shafer

PURCHASE ORDER**09-EN-23273****Vendor Information****Shipping Information****Tallahassee State Bank**

PO Box 23061
 Columbus, GA 31902
 Phone - / Fax -

2807 Remington Green Circle
 Tallahassee, FL 32308
 (850) 681-7002 Ext
 Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/21/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Auto rental and gas PD Conference

Auto rental and gas PD Conference

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Auto rental and gas PD Conference	206.93	0.000	206.93

Account Information	Percent	Amount
004 01 01 01 100 NA 100	0.0009	\$0.19
004 01 01 01 100 NA 400	0.0001	\$0.02
004 02 01 02 100 NA 400	0.005	\$1.03
207 01 01 01 203 NA 600	0.0041	\$0.85
207 02 01 02 203 NA 600	0.0327	\$6.77
317 01 01 01 600 NA 600	0.0097	\$2.01
317 02 01 02 600 NA 600	0.0787	\$16.29
469 01 01 01 404 NA 104	0.0025	\$0.52
469 02 01 02 404 NA 104	0.0203	\$4.20
470 01 01 01 404 NA 104	0.0072	\$1.49
470 02 01 02 404 NA 104	0.0578	\$11.96
514 01 01 01 501 NA 102	0.0008	\$0.17
514 02 01 02 501 NA 102	0.0068	\$1.41
625 01 01 01 301 NA 600	0.014	\$2.90
625 02 01 02 301 NA 600	0.1132	\$23.42
665 01 01 01 301 NA 600	0.0046	\$0.95
665 02 01 02 301 NA 600	0.0375	\$7.76
861 01 01 01 801 NA 800	0.07	\$14.49
861 02 01 02 602 NA 800	0.102	\$21.11
861 02 01 02 801 NA 800	0.2622	\$54.26
522 01 01 01 501 NA 500	0.0084	\$1.74
522 02 01 02 501 NA 500	0.0675	\$13.97
668 01 01 01 301 NA 600	0.0092	\$1.90
668 02 01 02 301 NA 600	0.0742	\$15.35
127 01 01 01 301 NA 600	0.0008	\$0.17
127 02 01 02 301 NA 600	0.0068	\$1.41
125 01 01 01 501 NA 100	0.0003	\$0.06
125 02 01 02 501 NA 100	0.0027	\$0.56



Control No. 22976

Monday, October 8, 2018

Page 1 of 2

Unit Qty	Type	Received Qty Rec'd	Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
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Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 1:55 PM
Anita Bushnyakova	Contracts Mgr	10/07/2018 3:45 AM
Shelley Shafer	Requester	10/05/2018 8:57 AM

TOTAL	\$206.93
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This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22976

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
				Vendor ID	5257	For fiscal Use	
Purchase Description	Forum Professional Development Conference			Vendor Name	TSB-Visa <i>Kalifeh</i>		
Purchase/Service Date	9/12/18	To	9/23/18	Card Holder Name			
Requestor's Name/Dept	Phyllis Kalifeh			City		State	Zip
Supervisor Approval	<i>Kalifeh</i>			Phone		Fax	
				Reservation#			
				Terms (Due)			

Total	\$ 210.00 206.93
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Approvals

Fiscal Dept. Chunfeng 9/27/18

CEO(+ \$1,000) _____



Rental Agreement Summary
RA#: 3J03H1
Renter: PHYLLIS KALIFEH
Emerald Club - EC Executive

Dates & Times **Location**

Pick up

Monday, September 17, 2018 9:01 AM 3404 MAHAN DR
Start Charges: TALLAHASSEE,
Monday, September 17, 2018 9:01 AM FL 32308-5667
(850) 878-1500

Anticipated Return

Friday, September 21, 2018 7:00 PM 3404 MAHAN DR
TALLAHASSEE,
FL 32308-5667
(850) 878-1500

Vehicle

2018 DODG GCAR GT MAROON License: VA UYA3068
VIN: 2C4RDGEG9JR282849 Vehicle: 7QWXFF
Pickup: 09/17/2018 @ 9:01 AM ODO:14216 Fuel:FULL

Vehicle Condition:

NO DAMAGE DOCUMENTED

Summary of Charges

Estimated Renter Charges

Charges	Price/Unit	Total
TIME & DISTANCE 9/17/18-9/21/18	\$34.23 / Day	\$171.15
NO CHARGE DISTANCE 9/17/18-9/21/18	\$0.00 / Mile	\$0.00
REFUELING CHARGE	\$3.05 / Gallons	\$0.00

Optional Protections Accepted

RAP	Included
DW	Included
Business Travel Insurance	Included

Optional Protections Declined

Renter Acknowledgement of Accepted and Declined Protections

I acknowledge that I have accepted or declined protections as indicated above.

Taxes and Fees

FL WASTE TIRE & BATTERY FEE	\$0.02 / Day	\$0.10
VEHICLE LICENSE FEE RECOVERY	\$0.75 / Day	\$3.75

Total Estimated Charge: \$175.00

Payments:

VISA *****4368 Auth (\$175.00)

Renter Acknowledgement of Charges

I acknowledge that I have reviewed and agree to all Estimated Renter Charges and fees listed on Summary of Charges and further agree to pay for final charges in accordance with the Terms and Conditions of this Rental Agreement.

PERMISSION GRANTED TO OPERATE VEHICLE ONLY IN THE STATE OF RENTAL AND THE FOLLOWING STATE(S):

OPERATION IN ANY OTHER STATE OR COUNTRY WILL AFFECT YOUR LIABILITY AND RIGHTS UNDER THIS AGREEMENT.

Owner: ENTERPRISE LEASING COMPANY - SOUTH CENTRAL, LLC

Additional Drivers

No Additional Drivers are authorized to drive the vehicle with the exception of the drivers listed below.
(Additional driver names listed here if applicable)

Please keep this Rental Agreement Summary with you in the vehicle during the rental.

Local Addenda

Failure to return rental property or equipment upon expiration of the rental period and failure to pay all amounts due (including costs for damage to the property or equipment) are evidence of abandonment or refusal to redeliver the property, punishable in accordance with section 812.155 and/or section 817.52 of the Florida Statutes.

SC REC IS THE FLORIDA STATE RENTAL CAR SURCHARGE. SEE RENTAL AGREEMENT JACKET PARAGRAPH 3.B.8.

VLF REC IS THE VEHICLE LICENSE FEE RECOVERY. SEE RENTAL AGREEMENT JACKET PARAGRAPH 3.B.8.

The valid and collectible liability insurance and personal injury protection insurance of any authorized rental or leasing driver is primary for the limits of liability and personal injury protection coverage required by Florida Statute Section 324.021(7) and Florida Statute Section 627.736.

OPTIONAL PRODUCTS NOTICE: WE OFFER FOR AN ADDITIONAL CHARGE THE FOLLOWING OPTIONAL PRODUCTS: DAMAGE WAIVER; PERSONAL ACCIDENT

PAN FOOD STORE #3
2290 CAPITAL CIR NE
TALLAHASSEE FL 3230
850-386-6888

CARY116601
PAN FOOD 3
2290 CAP CIR NE
TALLAHASSEE FL

DATE 09/21/18 16:54
TRAN# 9074673
PUMP# 07
SERVICE LEVEL: SELF
PRODUCT: UNLEADED
GALLONS: 12.052
PRICE/G: \$ 2.649
FUEL SALE \$ 31.93
CREDIT \$31.93

VISA
Auth #: 024066
Resp Code: 000
Stan: 0570851005
Reference:10946

SITE ID: CARY116601

THANK YOU
HAVE A NICE DAY

Gasoline

GENERAL INSTRUCTIONS

1. -- Continuous travel of 24 hours or more away from official headquarters.
2. -- Continuous travel of less than 24 hours which involves overnight absence from official headquarters.
3. -- Travel for short or day trips where the traveler is not away from his official headquarters overnight.

Allowance shall be made for meals when travel is confined to the city or town of official headquarters or immediate vicinity except assignments of official business outside the traveler's regular place of employment if travel expenses are approved and such special approval is noted on the travel voucher. Rate of Per Diem and Meals shall be those prescribed by Section 112.061, Florida Statutes.

Travel items may not be charged on the State of Florida Purchasing Card. Inadvertent non-reimbursable charges are to be deducted from the travel reimbursement claimed on the reverse side of this form. Less Non-Reimbursable Items Included on Purchasing Card" and the above "Non-reimbursable Items" section of "State of Florida Purchasing Card Charges" section above must be completed.

It will be completed at one-fourth of authorized rate for each quarter or fraction thereof. Travel over a period of 24 hours or more will be calculated on the basis of 6-hour cycles.

Midnight, less than 24-hours travel will be calculated on the basis of 6-hour cycles, beginning at the hour of departure from official headquarters. Hour of departure and hour of return should be shown for claimant per diem. The meal allowance columns should not be used. Claims for actual lodging at single occupancy rate plus meal allowances should be put in the "Per Diem and Lodging Expenses" column and include the appropriate meal allowances in the "Meals for Class A & B Travel" column. Claims for meals allowance involving travel that did not require the traveler to be away overnight should be included in the "Class C Meals" column. Vicinity travel must appear in the separate column. When travel is by common carrier and billed directly to the traveler, the amount and the carrier should be included in the "Other Expenses" column. A copy of the ticket or invoice should be attached to this form. If travel is by common carrier and billed directly to the State agency, then the "Travel and Lodging Expenses" section above should be completed. If travel is by common carrier and the carrier is paid by the use of the State of Florida Purchasing Card, then the "State of Florida Purchasing Card Charges" section above should be completed. The name of the common carrier should be inserted in the "Map Mileage Claimed" column in these instances. Justification must be provided for use of airfare or one offering equal or lesser rates than the contract airfare (or one having lower net rate) when contract carriers are available. Additionally, justification must be provided for use of a vehicle other than a Class "B" car. If travel is performed by the use of a State-owned vehicle, the word "State" should be inserted in the "Map Mileage Claimed" column on the reverse side of this form, and the vehicle designated as "Travel Performed by Common Carrier or State Vehicle" should be completed. If lodging is paid by the use of the State of Florida Purchasing Card, the words "Purchasing Card" should be inserted as "Travel Performed by Common Carrier or State Vehicle" on the reverse side of this form, and the above section designated as "State of Florida Purchasing Card Charges" should be completed. Incidental charges which may be reimbursed include: (a) reasonable taxi fare; (b) ferry fares and bridge, road, and tunnel tolls; (c) storage and parking fees; (d) telephone and telegraph expenses; (e) convention or registration fee. If meals are included in the registration fee, per diem should be reduced accordingly. Receipts should be obtained when required. The official Department of Transportation map should be used for mileage from point of origin to destination whenever possible. When any State employee is stationed in any city or town for over 30 days continuous work days, such city or town shall be deemed to be the headquarters and the shall not be allowed per diem or subsistence after the period of 30 continuous work days has elapsed, unless extended by the approval of the agency head. If travel is to a conference or the "Statement of Benefits to the State" section must be completed or a copy of the Authorization to Incur Travel Expense, Form DFS-AA-13, must be attached. Additionally, a copy of a agenda and other receipt must be attached. Any fraudulent claim for mileage, per diem or other travel expense is subject to prosecution as a misdemeanor.

State of Florida Authorization to Incur Travel Expenses		Name: Phyllis Kalifeh		Official Headquarters: Children's Forum		Date: 9/11/18	
Department: Admin		Division:		Distribution or Fund:		%	
%							
Purpose of Trip: Children's Forum Professional Development Conference							
Destination: Winter Park, FL		Departure Date 9/17/2018		Return Date 9/21/2018		Total Days 5	
Conference or convention travel: Explanation of benefits accruing to the State of Florida Meetings, councils, site visits, monitoring, training, summits, conferences and all activities related to the Children's Forum, Inc. and its funders' mission to ensure access, affordability and quality of early learning services for all of FL's children and families and build support systems to promote positive experiences and outcomes for young children.		Departure Time 11:00 a.m.		Return Time 4:30 p.m.		Trip Number	
Total Estimated Meals & Per Diem:		\$ 85.00					
Registration Fee:		\$ -					
Transportation:		\$ 195.00					
<u>Hotel</u>	Hotel Name	Confirm	Rate	Nights	Cost		
<u>Flights</u>	Airline	Departing Flight Time	Returning Flight Time	Cost	\$ -		
TOTAL ESTIMATED COST FOR TRIP		\$ 280.00					
Comments: Justification for rental car upgrade: transporting employees and conference materials.							
I hereby certify that travel as shown above is to be incurred in connection with official business of the State							
Signed: 		Approved by Supervisor: 		Date 9/11/18	Approved- Agency Head	Date	

*** ATTACH ORIGINAL TO TRAVEL EXPENSE REPORT

[illegible]

Childrens Forum Inc.

2807 Remington Green Circle
 Tallahassee, FL 32308
 (850) 681-7002 Ext
 Shelley Shafer

PURCHASE ORDER**09-EN-23279****Vendor Information****Tallahassee State Bank**

PO Box 23061
 Columbus, GA 31902
 Phone - / Fax -

Shipping Information

2807 Remington Green Circle
 Tallahassee, FL 32308
 (850) 681-7002 Ext
 Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/14/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies for PD Conference

Supplies for PD Conference

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300	N/A	Supplies for PD Conference	78.00	0.000	78.00

Account Information	Percent	Amount
004 01 01 01 100 NA 100	0.0009	\$0.07
004 01 01 01 100 NA 400	0.0001	\$0.01
004 02 01 02 100 NA 400	0.005	\$0.39
207 01 01 01 203 NA 600	0.0041	\$0.32
207 02 01 02 203 NA 600	0.0327	\$2.55
317 01 01 01 600 NA 600	0.0097	\$0.76
317 02 01 02 600 NA 600	0.0787	\$6.14
469 01 01 01 404 NA 104	0.0025	\$0.20
469 02 01 02 404 NA 104	0.0203	\$1.58
470 01 01 01 404 NA 104	0.0072	\$0.56
470 02 01 02 404 NA 104	0.0578	\$4.51
514 01 01 01 501 NA 102	0.0008	\$0.06
514 02 01 02 501 NA 102	0.0068	\$0.53
625 01 01 01 301 NA 600	0.014	\$1.09
625 02 01 02 301 NA 600	0.1132	\$8.83
665 01 01 01 301 NA 600	0.0046	\$0.36
665 02 01 02 301 NA 600	0.0375	\$2.93
861 01 01 01 801 NA 800	0.07	\$5.46
861 02 01 02 602 NA 800	0.102	\$7.96
861 02 01 02 801 NA 800	0.2622	\$20.45
522 01 01 01 501 NA 500	0.0084	\$0.66
522 02 01 02 501 NA 500	0.0675	\$5.27
668 01 01 01 301 NA 600	0.0092	\$0.72
668 02 01 02 301 NA 600	0.0742	\$5.79
127 01 01 01 301 NA 600	0.0008	\$0.06
127 02 01 02 301 NA 600	0.0068	\$0.53
125 01 01 01 501 NA 100	0.0003	\$0.02
125 02 01 02 501 NA 100	0.0027	\$0.21



Control No. 22982

Monday, October 8, 2018

Page 1 of 2

Unit Qty	Type	Received Qty	Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
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Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 2:00 PM
Kerri Cloud	Dir of Finance	10/05/2018 2:00 PM
Shelley Shafer	Requester	10/05/2018 9:14 AM

TOTAL	\$78.00
--------------	----------------

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22982

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information					Vendor Information			
Acct. No. (if applicable)					Vendor ID			For fiscal Use
Purchase Description		Dollar Tree			Vendor Name		TSB Visa Kalifeh	
Purchase/Service Date		9/14/18	To	9/14/18	Street Address			
Requestor's Name/Dept		Phyllis Kalifeh			City			
Department Approval					Phone			
					Invoice #			
					Terms (Due)		Pay by Invoice	

Expense Coding Info	
GL Code	51300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. Rcloud 10/5/18

CEO(+ \$1,000) _____



DOLLAR TREE STORES, INC.®

Store# 7520 (850) 668-0606
2910 Kerry Forest Pkwy
Ste D1
Tallahassee FL 32309-6828

DESCRIPTION	QTY	PRICE	TOTAL
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
HYDRANGEA BUSH	1	1.00	1.00N
GEL PENS	1	1.00	1.00N
GEL PENS	1	1.00	1.00N
SCOTCH TAPE	1	1.00	1.00N
SCOTCH TAPE	1	1.00	1.00N
COTTON BALLS	1	1.00	1.00N
COTTON BALLS	1	1.00	1.00N
COTTON BALLS	1	1.00	1.00N
COTTON BALLS	1	1.00	1.00N
COTTON BALLS	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
SCISSORS 8 IN	1	1.00	1.00N
TALLIC BEADS	1	1.00	1.00N
TALLIC BEADS	1	1.00	1.00N
OTCH TAPE	1	1.00	1.00N
OTCH TAPE	1	1.00	1.00N
OTCH TAPE	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
HAIR EXTENSIONS	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
TISSUE	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLUE STICKS	1	1.00	1.00N
GLUE STICKS	1	1.00	1.00N
GLUE STICKS	1	1.00	1.00N

*Supplies
for team
building
activity.*

IR EXTENSIONS	1	1.00	
IR EXTENSIONS	1	1.00	
IR EXTENSIONS	1	1.00	
IR EXTENSIONS	1	1.00	
IR EXTENSIONS	1	1.00	
IR EXTENSIONS	1	1.00	
ISSUE	1	1.00	
ISSUE	1	1.00	
ISSUE	1	1.00	1.00N
ISSUE	1	1.00	1.00N
ISSUE	1	1.00	1.00N
ISSUE	1	1.00	1.00N
ISSUE	1	1.00	1.00N
ISSUE	1	1.00	1.00N
ISSUE	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLITTERED SPIDER	1	1.00	1.00N
GLUE STICKS	1	1.00	1.00N
GLUE STICKS	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
COLOR DUCT TAPE	1	1.00	1.00N
CLOTHES PINS	1	1.00	1.00N
CLOTHES PINS	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N
BEE WING	1	1.00	1.00N

Sub Total \$78.00

SALES TAX \$0.00

Total \$78.00

VISA CREDIT \$78.00

*****4368 Approved

Purchase Chip

Auth/Trace Number: 020998/031240

Chip Card AID: A0000000031010

**** Tax Exempt ****

ID #: 858012541150

=====

Thank You for Shopping at Dollar Tree

Where Everything's \$1.00

Now Shop On-Line at Dollartree.com

=====

* We value your opinion! *

* Please provide your feedback at *

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* Receive chances to win \$1,000 daily plus *

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* For complete rules, eligibility and sweepstakes *

* period and previous winners please visit *

* www.dollartreefeedback.com *

* No purchase/survey required to enter. *

* Sweepstakes sponsored by Empathica, Inc. *

* across multiple international clients. *

* Survey Code: 9472 0417 8305 0101 *

* *

* We will gladly exchange any unopened item *

* with original receipt. We do not offer refunds. *

4817 07520 03 033 21425342 9/14/18 10:34

Sales Associate:david

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23285****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/20/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	PD Confernce mtg expense

PD Confernce mtg expense

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		54000 004 01 01 01 100 NA 100	N/A	PD Confernce mtg expense	61.44	0.000	61.44

Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 2:06 PM
Kerri Cloud	Dir of Finance	10/05/2018 2:02 PM
Shelley Shafer	Requester	10/05/2018 9:31 AM

TOTAL**\$61.44**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx

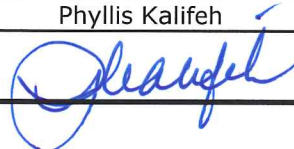


Control No. 22988

23285

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information		
Acct. No. (if applicable)				Vendor ID		
Purchase Description	Pannullo's			Vendor Name	TSB Visa - <i>Kalifeh</i>	
				Street Address		
Purchase/Service Date	9/20/18	To	9/20/18	City		
Requestor's Name/Dept	Phyllis Kalifeh			Phone		
Department Approval				Invoice #		
				Terms (Due)	Pay by Invoice	

Purchase Information		
Distribution Code	Item Description	Amount
Forum <i>2006</i>	Dinner for Presenters (Dr. Blechman and Paula Milona)	61.44
	<i>PD Conference</i>	
Total		\$ 61.44

Expense Coding Info	
GL Code	<i>54000</i>
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	<i>RCloud 10/5/18</i>
CEO(+ \$1,000)	

Dinner for Parents

PANHALLUM, TIGLION REST
216 PARK AVENUE SOUTH
WINTER PARK, FL 32789
407 829-7272
6436845557604278

Store #: 0001
Ref #: 0009

Sale

XXXXXXXXXXXX1368

VISA Entry Method: Chip

Amount \$ 61.44

Tip:

61.44

09/20/18 20:37:10
Inv #: 000045 Appr Code: 021375
Transaction ID: 308264022299160
Batch#: 000125

VISA URL:

ATM
ISO
E

Payee Phyllis Kalifeh
Vendor ID 1008

Account #:

18883
9/28/2018

Invoice	Description	Discount	Amount
09-EN-23170	Travel expenses FLAAYC Conf 9/4-9/9/18	\$0.00	\$301.25
09-EN-23171	Travel expenses Anita Zucker Symposium	\$0.00	\$99.00

Electronic Payment Notification

Total :

\$0.00

\$400.25

Electronic Payment Notification

Phyllis Kalifeh
5419 Pimlico Drive
Tallahassee, FL 32309

VOID

Payee Phyllis Kalifeh
Vendor ID 1008

Account #:

18883
9/28/2018

Invoice	Description	Discount	Amount
09-EN-23170	Travel expenses FLAAYC Conf 9/4-9/9/18	\$0.00	\$301.25
09-EN-23171	Travel expenses Anita Zucker Symposium	\$0.00	\$99.00

Electronic Payment Notification

Total :

\$0.00

\$400.25

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23170****Vendor Information****Shipping Information****Phyllis Kalifeh**

5419 Pimlico Drive
Tallahassee, FL 32309
Phone - / Fax -

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/09/2018	10/06/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Travel expenses FLAECY Conf 9/4-9/9/18

Travel expenses FLAECY Conf 9/4-9/9/18

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000 127 02 01 02 301 NA 600	N/A	Travel expenses FLAECY Conf 9/4-9/9/18	301.25	0.000	301.25

Approved

Approval Information

Shelley Shafer	Accounting	09/28/2018 12:47 PM
Anita Bushnyakova	Contract's Mgr	09/28/2018 12:28 PM
Shelley Shafer	Requester	09/26/2018 3:59 PM

TOTAL**\$301.25**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22872

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information					
				Vendor ID	1008		For fiscal Use		
Purchase Description	FLAEYC Conference			Vendor Name	Phyllis Kalifeh				
				Street Address					
Purchase/Service Date	9/4/18	To	9/9/18	City		State		Zip	
Requestor's Name/Dept	Phyllis Kalifeh			Phone		Fax			
Supervisor Approval				Invoice #					
				Terms (Due)					

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	

Approvals

Fiscal Dept. 9/27/18

CEO(+\$1,000) _____

[illegible]

Children's Forum
07 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

FLORIDA'S TURNPIKE ENTERPRISE

CUSTOMER TOLL RECEIPT

Interstate 4

PLAZA 003140 LANE 01
COLL C053
TOLL DUE 1.00
PAID 1.00 CHANGE 0.00
PAY TYPE CASH
09/09/18-12:28:50.214

You would have saved \$0.46 at
this Toll Plaza by using SUNPASS

Available at Publix, CVS,
Walgreens, AMSCOT, AAA and
www.SUNPASS.com

Tips

Tip-Crew \$40⁰⁰
Jalut \$5⁰⁰
Bellman \$10⁰⁰

— Unloading
Vans

— for all of staff
bags in our
van

Welcome
to the bank
of here.

Thank you for banking with us.

moving from
Seaside
to Pangasole
TIP \$3⁰⁰
Room Tip 8⁰⁰
\$76⁰⁰

Tolls: 4²⁵
Tips: 76⁰⁰
\$80²⁵

FLORIDA'S TURNPIKE ENTERPRISE

CUSTOMER TOLL RECEIPT

Leesburg

PLAZA 003100 LANE 16
COLL R451
TOLL DUE 3.25
PAID 3.25 CHANGE 0.75
PAY TYPE CASH
09/09/18-12:57:08.413

You would have saved \$0.31 at
this Toll Plaza by using SUNPASS

Available at Publix, CVS,
Walgreens, AMSCOT, AAA and
www.SUNPASS.com

***** ATTACH ORIGINAL TO TRAVEL EXPENSE REPORT**

[illegible]

AGENDA AT-A-GLANCE

Please check the YAPP app for real-time updates to the conference schedule.

Friday, September 7, 2018 Leading for Change

7:00 a.m. – 5:00 p.m.	Onsite Registration
10:00 a.m. – 5:00 p.m.	Exhibit Hall Open
8:00 a.m. – 10:00 a.m.	Welcome and Opening Keynote: D.J. Vanas , Native Discovery
10:00 a.m. – 10:45 a.m.	Exhibit Hall Grand Opening & D.J. Vanas Book Signing
10:45 a.m. – 11:00 a.m.	Break
11:00 a.m. – 12:30 p.m.	Session 1
12:30 p.m. – 12:45 p.m.	Break
12:45 p.m. – 2:00 p.m.	Director's Luncheon or Lunch on Your Own
2:00 p.m. – 3:30 p.m.	Session 2
3:30 p.m. – 4:00 p.m.	Break
4:00 p.m. – 5:30 p.m.	Session 3
6:00 p.m. – 7:30 p.m.	Advocacy Awards Reception
9:00 p.m. – 11:45 p.m.	Time of Our Life Celebration

Saturday, September 8, 2018 Teaching for Impact

7:00 a.m. – 5:00 p.m.	Onsite Registration
7:30 a.m. – 2:00 p.m.	Exhibit Hall Open
7:00 a.m. – 8:15 a.m.	Member Breakfast and Annual Meeting
8:15 a.m. – 8:30 a.m.	Break
8:30 a.m. – 10:00 a.m.	Session 4
10:00 a.m. – 10:30 a.m.	Break
10:30 a.m. – 12:00 p.m.	Session 5
12:00 p.m. – 12:15 p.m.	Break
12:15 p.m. – 1:30 p.m.	Luncheon with the Authors or Lunch on Your Own
1:30 p.m. – 3:00 p.m.	Session 6
3:00 p.m. – 3:30 p.m.	Break
3:30 p.m. – 5:00 p.m.	Closing Plenary Session - Music with Mar

Sunday, September 9, 2018

8:30 a.m. – 9:30 a.m.	Coffee and Breakfast with the FLAEEYC Board
9:45 a.m. – 11:15 a.m.	Sunday Closing Keynote – Ron Mohl , Lakeshore Learning

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23281****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/01/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies for FLAEYC

Supplies for FLAEYC

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300 127 02 01 02 301 NA 600	N/A	Supplies for FLAEYC	98.52	0.000	98.52

Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 2:02 PM
Kerri Cloud	Dir of Finance	10/05/2018 2:01 PM
Shelley Shafer	Requester	10/05/2018 9:20 AM

TOTAL**\$98.52**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22984

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
Acct. No. (if applicable)	9/1/18			Vendor ID		For fiscal Use	
Purchase Description	Walmart			Vendor Name	TSB Visa Kalifeh		
Purchase/Service Date	8/30/18	To	8/30/18	Street Address			
Requestor's Name/Dept	Phyllis Kalifeh			City			
Department Approval	Phyllis Kalifeh			Phone			
				Invoice #			
				Terms (Due)	Pay by Invoice		

Expense Coding Info	
GL Code	52300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

\\main\shared\pkalifeh\Desktop\Fiscal Forms\P.O.Template.xls

See back of receipt for your chance
to win \$1000 ID #:7M4FDNF7R0B

Walmart *

850-668-2511 Mgr: MICHAEL HICKS
5500 THOMASVILLE RD
TALLAHASSEE FL 32312

ST# 01223	OP# 000165	TE# 05	TR# 06423
2PKT ASST PA	489701408282K		
60 AT	1 FOR	0.15	9.00 0
2PKT ASST PA	489701408282K		
60 AT	1 FOR	0.15	9.00 0
MM MILK JMB0	004000051626 F		4.88 0
NO COFFEESHL	007279933512 F		1.98 0
WERTHER S	007279949016 F		1.98 0
WERTHER S	007279900861 F		1.98 0
MARS MINIS	004000020319 F		9.94 0
EESE MINI H	003400044900 F		2.98 0
EESE MINI H	003400044900 F		2.98 0
EP PATTIE	003400002063 F		2.98 0
KD H MS FS	004000051792 F		9.14 0
MM MILK JMB0	004000051626 F		4.88 0
EESE MINI H	003400044900 F		2.98 0
EESE MINI H	003400044900 F		2.98 0
WY KISS	003400013003 F		9.98 0
EP PATTIE	003400002063 F		2.98 0
EP PATTIE	003400002063 F		2.98 0
H MINI	003400021024 F		2.98 0
H MINI	003400021024 F		2.98 0
H MINI	003400021024 F		2.98 0
H MINI	003400021024 F		2.98 0
EP PATTIE	003400002063 F		2.98 0
	SUBTOTAL		98.52
	TOTAL		98.52
	VISA TEND		98.52

VISA CREDIT - 4368 1 2 APPR#005416

1042000314
TRANS ID - 468242634238233

VALIDATION - 7WPL
PAYMENT SERVICE - E

#ID A0000000031010
TC E9F8E8A72D7D05F2

TERMINAL # 283929088
*NO SIGNATURE REQUIRED

08/30/18 13:37:05

CHANGE DUE 0.00

ITEMS SOLD 140

TC# 9505 3577 5619 2558 8325



08/30/18 13:37:17

CUSTOMER COPY

Scan with Walmart app to save receipts



Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23284****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/01/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies for FLAEYC

Supplies for FLAEYC

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300 127 02 01 02 301 NA 600	N/A	Supplies for FLAEYC	235.60	0.000	235.60

Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 2:05 PM
Kerri Cloud	Dir of Finance	10/05/2018 2:01 PM
Shelley Shafer	Requester	10/05/2018 9:29 AM

TOTAL**\$235.60**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

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Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22987

23284

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information		
Acct. No. (if applicable)	9/1/18			Vendor ID		For fiscal Use
Purchase Description	Walmart			Vendor Name	TSB Visa K. Califeh	
Purchase/Service Date	8/26/18	To	8/26/18	Street Address		
Requestor's Name/Dept	Phyllis Kalifeh			City		
Department Approval				Phone		
				Invoice #		
				Terms (Due)	Pay by Invoice	

Purchase Information		
Distribution Code	Item Description	Amount
FLAEYC	Mobile phones / service for conference	224.40
	Paint pens for conference	\$ 11.20
	NOTE: THESE ARE CHARGES THAT WE NEED	
	TO BILL TO FLAEYC. THEY WILL REIMBURSE FOR	
	THESE EXPENSES.	
Total		\$ 235.60

Expense Coding Info	
GL Code	51300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	K. Cloud 10/5/18
CEO(+ \$1,000)	

See back of receipt for your chance
to win \$1000 ID #:7M4DWW1KY7RN

Walmart*

850-656-2151 Mr:ROBERT LUIZ

4021 LAGNIAPPE WAY

TALLAHASSEE FL 32317

ST# 04520 OP# 004455 TE# 16 TR# 00407
PAINTER WHT 007994607333 2.24 0
PAINTER GOLD 007994675810 2.24 0
PAINTER SILV 007994607330 2.24 0
PAINTER BLI 007994607331 2.24 0
PAINTER GLD 007994607622 2.24 0
SUBTOTAL 11.20
TOTAL 11.20
VISA TEND 11.20

VISA CREDIT- 4368 I 2 APPR#014234

REF # 823700528176

TRANS ID - 588237602565122

VALIDATION - F6FD

PAYMENT SERVICE - E

AID A0000000031010

TC 1EABE7FBABA0DE0E

TERMINAL # 285181124

*NO SIGNATURE REQUIRED

08/25/18 12:44:19

CHANGE DUE 0.00

ITEMS SOLD 5

TC# 3389 8742 6787 5766 1280



08/25/18 12:44:31

CUSTOMER COPY

Use Walmart Pay to save your receipts.



See back of receipt for your chance
to win \$1000 ID #:7M4DYK1KY85G

ST45UNLT/T/D 45.00

CARD # 2087379589

ST45UNLT/T/D 45.00

CARD # 2087379588

Walmart*

850-656-2151 Mr:ROBERT LUIZ

4021 LAGNIAPPE WAY

TALLAHASSEE FL 32317

ST# 04520 OP# 002370 TE# 68 TR# 00804

PRODUCT SERIAL #

840355744098861366

POP# 56124654525696819980168

MOBILE PHONE 061696021036

59.00 X

PRODUCT SERIAL #

840355744098338688

POP# 86367924525696819980168

MOBILE PHONE 061696021036

59.00 X

ST45UNLT/T/D 061696022214

45.00 T

E-911 FEE 060538817725

0.40 0

ST45UNLT/T/D 061696022214

45.00 T

E-911 FEE 060538817725

0.40 0

SUBTOTAL 208.80

TAX 1 7.500 % 15.60

TOTAL 224.40

VISA TEND 224.40

VISA CREDIT- 4368 I 2 APPR#056883

REF # 823700406731

TRANS ID - 588237583679745

VALIDATION - MW2W

PAYMENT SERVICE - E

AID A0000000031010

TC FD7281C56C752B56

TERMINAL # 283964343

*NO SIGNATURE REQUIRED

08/25/18 12:12:57

793 MINUTES

793 MINUTES

CHANGE DUE 0.00

ITEMS SOLD 6

TC# 7607 7958 1752 5157 6166 4



08/25/18 12:12:58

CUSTOMER COPY



Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23275****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/01/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies for FLAEYC

Supplies for FLAEYC

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300 127 02 01 02 301 NA 600	N/A	Supplies for FLAEYC	112.20	0.000	112.20

Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 1:57 PM
Kerri Cloud	Dir of Finance	10/05/2018 1:59 PM
Shelley Shafer	Requester	10/05/2018 9:01 AM

TOTAL**\$112.20**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of State sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22978

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
Acct. No. (if applicable)		9/1/18		Vendor ID		For fiscal Use	
Purchase Description		Walmart		Vendor Name		TSB Visa Kal. Fen	
Purchase/Service Date		8/26/18	To	8/26/18		Street Address	
Requestor's Name/Dept		Phyllis Kalifeh		City			
Department Approval		Phyllis Kalifeh		Phone			
				Invoice #			
				Terms (Due)		Pay by Invoice	

Expense Coding Info	
GL Code	57300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

\\main\shared\pkalifeh\Desktop\Fiscal Forms\P.O.Template.xls

See back of receipt for your chance
to win \$1000 ID #:7M4DYK1KY85H

ST45UNLT/T/D 45.00
CARD # 2086842803

Walmart *

850-656-2151 Mgr: ROBERT LUIZ
4021 LAGNIAPPE WAY
TALLAHASSEE FL 32317
ST# 04520 OP# 002370 TE# 68 TR# 00805
ST45UNLT/T/D 061696022214 45.00 T
E-911 FEE 060538817725 0.40 O
PRODUCT SERIAL #
840355744098343175
POP# 16883564525696819980164
MOBILE PHONE 061696021036 59.00 X
SUBTOTAL 104.40
TAX 1 7.500 % 7.80
TOTAL 112.20
VISA TEND 112.20
VISA CREDIT- 4368 I 2 APPR#051364
REF # 1042000314
TRANS ID - 468237584105518
VALIDATION - V8JF
PAYMENT SERVICE - E
AID A0000000031010
TC F6D3E64634A08C0F
TERMINAL # 283964343
*NO SIGNATURE REQUIRED
08/25/18 12:13:33

793 MINUTES

CHANGE DUE 0.00

ITEMS SOLD 3

TC# 6150 6682 9483 8984 4904 1



08/25/18 12:13:34

CUSTOMER COPY



Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23171****Vendor Information****Phyllis Kalifeh**

5419 Pimlico Drive
Tallahassee, FL 32309
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/13/2018	10/06/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Travel expenses Anita Zucker Symposium

Travel expenses Anita Zucker Symposium

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Travel expenses Anita Zucker Symposium	99.00	0.000	99.00

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$71.28
861 02 01 02 602 NA 800	0.28	\$27.72

Approval Information

Shelley Shafer	Accounting	09/28/2018 12:47 PM
Anita Bushnyakova	Contracts Mgr	09/28/2018 12:28 PM
Shelley Shafer	Requester	09/26/2018 4:00 PM

TOTAL \$99.00

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22873

Friday, September 28, 2018 Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information					Vendor Information					
					Vendor ID	1008		For fiscal Use		
Purchase Description	Professionalization of the Workforce Summit				Vendor Name	Phyllis Kalifeh				
					Street Address					
Purchase/Service Date	9/12/18	To	9/13/18		City		State		Zip	
Requestor's Name/Dept	Phyllis Kalifeh				Phone		Fax			
Supervisor Approval					Invoice #					
					Terms (Due)					

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	

Approvals

Fiscal Dept. *C. Smith* 9/12/18

CEO(+ \$1,000) _____

[illegible]

C:\Users\pkalifeh\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\928H8MSI\Travel Reimbursement_PKalifeh_091418.xls

2

[illegible]

CONFERENCE OR CONVENTION TRAVEL: EXPLANATION OF BENEFITS ACCRUING TO THE CHILDREN'S FORUM

I am sharing a rental car with Denise Bishop and Lisa Roberts.

Def. 2 Children's Forum mission statement.

I HEREBY CERTIFY THAT TRAVEL AS SHOWN ABOVE IS TO BE INCURRED IN CONNECTION WITH OFFICIAL BUSINESS OF THE CHILDREN'S FORUM

APPROVED BY SUPERVISOR

EMPLOYEE SIGNATURE

APPROVED BY SUPERVISOR

DATE 2/11/20

SCAL APPROVAL _____

DATE _____

91118

Starting Ahead.

STAYING AHEAD.



Early Childhood Symposium Series: **Professionalizing the Early Childhood Workforce**

Dr. Stacie Goffin

September 13, 2018

8:30 am – 4:30 pm

University of Florida Emerson Alumni Hall, Room 215

Program Agenda

8:00 am – 8:30 am	Registration & Networking
8:30 am – 9:00 am	Welcome & Introductions – Patricia Snyder and Maureen Conroy
9:00 am – 10:30 am	Keynote: Stacie Goffin
10:30 am – 10:45 am	Break
10:45 am – 11:45 am	Small Table Group Discussion/Reactions/Questions to Keynote
11:45 am – 12:15 pm	Q & A led by Stacie Goffin & Patricia Snyder
12:15 pm – 1:00 pm	Lunch
1:00 pm – 2:30 pm	Panel Discussion Phyllis Kalifeh, <i>FL Children's Forum</i> ; Herman Knopf, <i>University of Florida</i> ; Beth Rous, <i>University of Kentucky</i> ; Andy Sherrard, <i>O2B Kids</i> ; Erin Smeltzer, <i>FL Office of Early Learning</i>
2:30 pm – 2:45 pm	Break
2:45 pm – 3:00 pm	Overview of Conversations with Intent
3:00 pm – 3:45 pm	Small Table Group Discussion: Focused Questions & Recommendations for Action
3:45 pm – 4:30 pm	Report Out and Call to Action
5:00 pm – 7:00 pm	Reception: Emerson Alumni Hall Lobby

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23274****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/13/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Hotel P. Kalifeh EC Workforce event

Hotel P. Kalifeh EC Workforce event

Unit Qty	Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Hotel P. Kalifeh EC Workforce event	102.00	0.000	102.00

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$73.44
861 02 01 02 602 NA 800	0.28	\$28.56

Approval Information

Shelley Shafer	Accounting	10/08/2018 1:56 PM
Anita Bushnyakova	Contracts Mgr	10/07/2018 3:45 AM
Shelley Shafer	Requester	10/05/2018 8:59 AM

TOTAL \$102.00

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22977

Monday, October 8, 2018 Page 1 of 1

23274

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information			
				Vendor ID	5257	For fiscal Use	
Purchase Description	EC Workforce Event Travel			Vendor Name	TSB-VISA		
Purchase/Service Date	9/12/18	To	9/13/18	Card Holder Name	Phyllis Kalifeh		
Requestor's Name/Dept	Lisa Roberts			City		State	Zip
Supervisor Approval	OB			Phone		Fax	
				Invoice #			
				Terms (Due)			

Purchase Information		
Distribution Code	Item Description	Amount
2861	Hotel	\$ 102.00
2861	Gas receipts (unless paid personally)	\$ -
2861	Toll and parking receipts (unless paid personally)	\$ -
	All receipts attached	
Total		\$ 102.00

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	OB 10/7/18
CEO(+ \$1,000)	

NAME AND ADDRESS:

ROBERTS, LISA
 2982 ADIRON WAY
 TALLAHASSEE FL 32317-7453
 UNITED STATES OF AMERICA

Room: 420/K1
 Arrival Date: 9/12/2018 4:00:00 PM
 Departure Date: 9/13/2018
 Adult/Child: 1/0
 Room Rate: 102.00
 Rate Plan: G1
 HH #: 943302588 BLUE
 AL:
 Car:

Confirmation Number: 3484634918

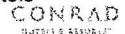
9/13/2018



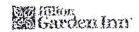
DATE	REFERENCE	DESCRIPTION	AMOUNT
9/12/2018	4005719	GUEST ROOM EXEMPT	\$102.00
9/13/2018	4005948	VS *4368	(\$102.00)
		BALANCE	\$0.00



Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit Honors.com



Thank you for choosing Hilton. You'll get more when you book directly with us - more destinations, more points, and more value. Book your next stay at hilton.com.



ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

834531 A

CARD MEMBER NAME

AUTHORIZATION

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

-102.00

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

PAYMENT DUE UPON RECEIPT



①

CONFERENCE OR CONVENTION TRAVEL: EXPLANATION OF BENEFITS ACCRUING TO THE CHILDREN'S FORUM I am sharing a rental car with Phyllis Kalifeh and Denise Bishop.		I HEREBY CERTIFY THAT TRAVEL AS SHOWN ABOVE IS TO BE INCURRED IN CONNECTION WITH OFFICIAL BUSINESS OF THE CHILDREN'S FORUM		APPROVED BY SUPERVISOR <i>M. Denise Bishop</i>		DATE 8-12-18		FISCAL APPROVAL <i>Denise Bishop</i>		DATE 9/12/18	
---	--	---	--	--	--	----------------------------	--	--	--	----------------------------	--

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23276****Vendor Information****Shipping Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/14/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Hotel D Bishop EC Workforce event

Hotel D Bishop EC Workforce event

Unit Qty	Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Hotel D Bishop EC Workforce event	102.00	0.000	102.00

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$73.44
861 02 01 02 602 NA 800	0.28	\$28.56

Approved

Approval Information

Shelley Shafer Accounting 10/08/2018 1:57 PM
Anita Bushnyakova Contracts Mgr 10/07/2018 3:46 AM
Shelley Shafer Requester 10/05/2018 9:02 AM

TOTAL \$102.00

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22979

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information					Vendor Information					
					Vendor ID	5257		For fiscal Use		
Purchase Description	EA Workforce Event Travel				Vendor Name	TSB-VISA				
Purchase/Service Date	9/12/18	To	9/14/18		Card Holder Name	Phyllis Kalifeh				
Requestor's Name/Dept	M. Denise Bishop				City		State		Zip	
Supervisor Approval					Phone		Fax			
					Invoice #					
					Terms (Due)					

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. Shirley B. 10/7/18

CEO(+ \$1,000) _____

NAME AND ADDRESS:

BISHOP, MARGOT D
 1849 EASTON FOREST DR
 TALLAHASSEE FL 32317
 UNITED STATES OF AMERICA

Room: 419/K1
 Arrival Date: 9/12/2018 3:59:00 PM
 Departure Date: 9/13/2018

Adult/Child: 1/0
 Room Rate: 102.00

Rate Plan: G1
 HH #: 225652949 BLUE
 AL:
 Car:

Confirmation Number: 3484634918

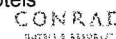
9/13/2018



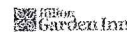
DATE	REFERENCE	DESCRIPTION	AMOUNT
9/12/2018	4005718	GUEST ROOM EXEMPT	\$102.00
9/13/2018	4005942	VS *4368	(\$102.00)
		BALANCE	\$0.00



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Thank you for choosing Hilton. You'll get more when you book directly with us - more destinations, more points, and more value. Book your next stay at hilton.com.



ACCOUNT NO.

DATE OF CHARGE

FOLIO NO./CHECK NO.

834530 A

CARD MEMBER NAME

AUTHORIZATION

INITIAL

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

PURCHASES & SERVICES

TAXES

TIPS & MISC.

CARD MEMBER'S SIGNATURE

TOTAL AMOUNT

-102.00

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

PAYMENT DUE UPON RECEIPT



Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23277****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/13/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Auto rental P. Kalifeh EC Workforce Event

Auto rental P. Kalifeh EC Workforce Event

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Auto rental P. Kalifeh EC Workforce Event	59.00	0.000	59.00

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$42.48
861 02 01 02 602 NA 800	0.28	\$16.52

Approval Information

Shelley Shafer	Accounting	10/08/2018 1:58 PM
Anita Bushnyakova	Contracts Mgr	10/07/2018 3:47 AM
Shelley Shafer	Requester	10/05/2018 9:08 AM

TOTAL**\$59.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22980

Monday, October 8, 2018 Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
	EC Workforce Event			Vendor ID	5257	For fiscal Use	
Purchase Description	Professionalization of the Workforce Summit			Vendor Name	TSB-Visa Kalifen		
Purchase/Service Date	9/12/18	To	9/13/18	Card Holder Name			
Requestor's Name/Dept	Phyllis Kalifeh			City		State	Zip
Supervisor Approval	[Signature]			Phone		Fax	
				Reservation#			
				Terms (Due)			

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. Quirk B 10/17/18

CEO(+\$1,000) _____



Rental Agreement Summary
RA#: 3GQQ76
Renter: PHYLLIS KALIFEH
Emerald Club - EC Executive

Dates & Times

Location

Pick up

Wednesday, September 12, 2018 9:28 AM
Start Charges:
Wednesday, September 12, 2018 9:28 AM

3404 MAHAN DR
TALLAHASSEE,
FL 32308-5667
(850) 878-1500

Anticipated Return

Friday, September 14, 2018 9:00 AM

3404 MAHAN DR
TALLAHASSEE,
FL 32308-5667
(850) 878-1500

Vehicle

2017 NISN ALTI 4DSV SILVER
VIN: IN4AL3AP7HC195085

License: FL 671YSS
Vehicle: 7N9H6P

Pickup:
09/12/2018 @ 9:28 AM

ODO:42265 Fuel:FULL

Vehicle Condition:

-PASSENGER FRONT DOOR --SCRATCH -DRIVER REAR DOOR --SCRATCH -DRIVER FRONT DOOR --DENT -DRIVER FRONT DOOR --SCRATCH -DRIVER FRONT DOOR --DING - PASSENGER REAR DOOR --DING -PASSENGER QUARTER PANEL --SCRATCH -PASSENGER QUARTER PANEL --DING ABOVE WHEEL WELL -KEY --FIRST SET MISSING ONLY ONE KEY RETURNED -DRIVER FENDER --SCRATCH - DRIVER FENDER --DING -REAR BUMPER --SCRATCH - FRONT BUMPER --OTHER CURB SCRAPES -FRONT BUMPER --CHIP UNDER LEFT HEADLIGHT -HEADLIGHTS --SCRATCH -DRIVER QUARTER PANEL --SCRATCH

Summary of Charges

Estimated Renter Charges

Charges	Price/Unit	Total
TIME & DISTANCE 9/12/18-9/14/18	\$28.73 / Day	\$57.46
NO CHARGE DISTANCE 9/12/18-9/14/18	\$0.00 / Mile	\$0.00
REFUELING CHARGE	\$3.05 / Gallons	\$0.00

Optional Protections Accepted

DW	Included
RAP	Included
Business Travel Insurance	Included

Optional Protections Declined

Renter Acknowledgement of Accepted and Declined Protections

I acknowledge that I have accepted or declined protections as indicated above.

Taxes and Fees

VEHICLE LICENSE FEE RECOVERY	\$0.75 / Day	\$1.50
FL WASTE TIRE & BATTERY FEE	\$0.02 / Day	\$0.04
Total Estimated Charge:		\$59.00

Payments:

VISA *****4368 Auth (\$59.00)

Renter Acknowledgement of Charges

I acknowledge that I have reviewed and agree to all Estimated Renter Charges and fees listed on Summary of Charges and further agree to pay for final charges in accordance with the Terms and Conditions of this Rental Agreement.

PERMISSION GRANTED TO OPERATE VEHICLE ONLY IN THE STATE OF RENTAL AND THE FOLLOWING STATE(S):

OPERATION IN ANY OTHER STATE OR COUNTRY WILL AFFECT YOUR LIABILITY AND RIGHTS UNDER THIS AGREEMENT.

Owner: ENTERPRISE LEASING COMPANY - SOUTH CENTRAL, LLC

Additional Drivers

No Additional Drivers are authorized to drive the vehicle with the exception of the drivers listed below.
(Additional driver names listed here if applicable)

Please keep this Rental Agreement Summary with you in the vehicle during the rental.

Local Addenda

Failure to return rental property or equipment upon expiration of the rental period and failure to pay all amounts due (including costs for damage to the property or equipment) are evidence of abandonment or refusal to redeliver the property, punishable in accordance with section 812.155 and/or section 817.52 of the Florida Statutes.

SC REC IS THE FLORIDA STATE RENTAL CAR SURCHARGE.
SEE RENTAL AGREEMENT JACKET PARAGRAPH 3.B.8.

VLF REC IS THE VEHICLE LICENSE FEE RECOVERY. SEE
RENTAL AGREEMENT JACKET PARAGRAPH 3.B.8.

The valid and collectible liability insurance and personal injury protection insurance of any authorized rental or leasing driver is primary for the limits of liability and personal injury protection

②

[illegible]

CONFERENCE OR CONVENTION TRAVEL: EXPLANATION OF BENEFITS ACCRUING TO THE CHILDREN'S FORUM

I HEREBY CERTIFY THAT TRAVEL AS SHOWN ABOVE IS TO BE INCURRED IN CONNECTION WITH OFFICIAL BUSINESS OF THE CHILDREN'S FORUM		FISCAL APPROVAL		DATE
EMPLOYEE SIGNATURE	APPROVED BY SUPERVISOR	DATE		
		8/20/18		
			8/20/18	

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23278****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/13/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Gas charges P.Kalifeh EC Workforce event

Gas charges P.Kalifeh EC Workforce event

Unit Qty	Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		53000	N/A	Gas charges P.Kalifeh EC Workforce event	27.38	0.000	27.38

Account Information	Percent	Amount
861 02 01 02 801 NA 800	0.72	\$19.71
861 02 01 02 602 NA 800	0.28	\$7.67

Approval Information

Shelley Shafer	Accounting	10/08/2018 1:59 PM
Anita Bushnyakova	Contracts Mgr	10/07/2018 3:47 AM
Shelley Shafer	Requester	10/05/2018 9:10 AM

TOTAL \$27.38

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22981

Monday, October 8, 2018 Page 1 of 1

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information				Vendor Information			
	EC Workforce Event			Vendor ID	5257	For fiscal Use	
Purchase Description	Professionalization of the Workforce Summit			Vendor Name	TSB-VISA Kalifeh		
				Card Holder Name			
Purchase/Service Date	9/12/18	To	9/13/18	City		State	Zip
Requestor's Name/Dept	Phyllis Kalifeh			Phone		Fax	
Supervisor Approval	Phyllis Kalifeh			Invoice #			
				Terms (Due)			

Expense Coding Info	
GL Code	53000
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals

Fiscal Dept. Chun B. 10/17/18

CEO(+ \$1,000) _____

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

If hotel is paid by multiple VISA cards, do separate PO for each card.

PAN FOOD STORE #3
2290 CAPITAL CIR NE
TALLAHASSEE FL 3230
850-386-6888

CARY116601
PAN FOOD 3
2290 CAP CIR NE
TALLAHASSEE FL

DATE 09 13 18 2 11 PM
TRAN# 9058850
PUMP# 05
SERVICE LEVEL: SELF
PRODUCT: UNLEADED
GALLONS: 10.335
PRICE/G: \$ 2.649
FUEL SALE \$ 27.38
CREDIT \$27.38

VISA
Auth #: 047381
Resp Code: 000
Stan: 0562839556
Reference: 5249

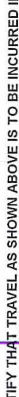
SITE ID: CARY116601

THANK YOU
HAVE A NICE DAY

②

[illegible]

CONFERENCE OR CONVENTION TRAVEL: EXPLANATION OF BENEFITS ACCRUING TO THE CHILDREN'S FORUM

I HEREBY CERTIFY THAT TRAVEL AS SHOWN ABOVE IS TO BE INCURRED IN CONNECTION WITH OFFICIAL BUSINESS OF THE CHILDREN'S FORUM	
EMPLOYEE SIGNATURE 	APPROVED BY SUPERVISOR 
DATE 8/22/18	FISCAL APPROVAL 
DATE 8/22/18	

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23282****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/01/2018	10/15/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Supplies

Supplies

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		57300	N/A	Supplies	62.49	0.000	62.49

Account Information	Percent	Amount
004 01 01 01 100 NA 100	0.0009	\$0.06
004 01 01 01 100 NA 400	0.0001	\$0.01
004 02 01 02 100 NA 400	0.005	\$0.31
207 01 01 01 203 NA 600	0.0041	\$0.26
207 02 01 02 203 NA 600	0.0327	\$2.04
317 01 01 01 600 NA 600	0.0097	\$0.61
317 02 01 02 600 NA 600	0.0787	\$4.92
469 01 01 01 404 NA 104	0.0025	\$0.16
469 02 01 02 404 NA 104	0.0203	\$1.27
470 01 01 01 404 NA 104	0.0072	\$0.45
470 02 01 02 404 NA 104	0.0578	\$3.61
514 01 01 01 501 NA 102	0.0008	\$0.05
514 02 01 02 501 NA 102	0.0068	\$0.42
625 01 01 01 301 NA 600	0.014	\$0.87
625 02 01 02 301 NA 600	0.1132	\$7.07
665 01 01 01 301 NA 600	0.0046	\$0.29
665 02 01 02 301 NA 600	0.0375	\$2.34
861 01 01 01 801 NA 800	0.07	\$4.37
861 02 01 02 602 NA 800	0.102	\$6.37
861 02 01 02 801 NA 800	0.2622	\$16.38
522 01 01 01 501 NA 500	0.0084	\$0.52
522 02 01 02 501 NA 500	0.0675	\$4.22
668 01 01 01 301 NA 600	0.0092	\$0.57
668 02 01 02 301 NA 600	0.0742	\$4.64
127 01 01 01 301 NA 600	0.0008	\$0.05
127 02 01 02 301 NA 600	0.0068	\$0.42
125 01 01 01 501 NA 100	0.0003	\$0.02
125 02 01 02 501 NA 100	0.0027	\$0.17



Control No. 22985

Monday, October 8, 2018

Page 1 of 2

Unit Qty	Type	Received Qty Rec'd	Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
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Approved

Approval Information

Shelley Shafer	Accounting	10/08/2018 2:03 PM
Kerri Cloud	Dir of Finance	10/05/2018 2:01 PM
Shelley Shafer	Requester	10/05/2018 9:22 AM

TOTAL	\$62.49
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This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 22985

23282

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information		
Acct. No. (if applicable)	9/1/18			Vendor ID		For fiscal Use
Purchase Description	Office Depot			Vendor Name	TSB Visa <i>Kalifeh</i>	
Purchase/Service Date	8/29/18	To	8/29/18	Street Address		
Requestor's Name/Dept	Phyllis Kalifeh			City		
Department Approval	<i>Phyllis Kalifeh</i>			Phone		
				Invoice #		
				Terms (Due)	Pay by Invoice	

Purchase Information		
Distribution Code	Item Description	Amount
Admin	Labels, folders, and dry erase markers	65.57
<i>2044-New</i>	Credit for return	\$ (3.08)
Total		\$ 62.49

Expense Coding Info	
GL Code	57300
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	<i>KCloud 10/5/18</i>
CEO(+ \$1,000)	

Office DEPOT. OfficeMax®

TALLAHASSEE - (850) 298-4441

08/29/2018 2:04 PM



22VTQUXPUY5Y8EWWF

SALE	447-2-8619-897353-18.7.2
168423 POR,PAP,W0,PG,	
12 @ 1.50	18.00
Instant Savings	-6.00
You Pay	12.00SS
511763 PORT,PPR,2PKT,	
5 @ 0.89	4.45
Instant Savings	-3.70
You Pay	0.75SS
321929 PORT,PPR,2PKT,	
10 @ 0.89	8.90
Instant Savings	-7.40
You Pay	1.50SS
406773 PORT,PPR,2PKT,	
11 @ 0.89	9.79
Instant Savings	-8.14
You Pay	1.65SS
272498 PORT,PPR,2PKT,	
4 @ 0.89	3.56
Instant Savings	-2.96
You Pay	0.60SS
934713 TB WHT IJ SHP	
3 @ 14.69	44.07
You Pay	44.07SS
268651 MKR,EXP0 2,FIN	
	7.89SS
Instant Savings	-2.89
You Pay	5.00SS
Subtotal:	65.57
Total:	65.57
Visa 4368:	65.57

*- folders,
- Dry-erase
- markers
- Labels for
folders*

AUTH CODE 062328
TDS Chip Read
AID A0000000031010 VISA CREDIT
TVR 8000008000
CVS No Signature Required

Tax Exemption Number 13675377
Total Savings:

\$31.09

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survey and receive a coupon for
**\$10 off your next qualifying
purchase of \$50 or more on
office supplies, furniture and more.**

Office DEPOT OfficeMax®

TALLAHASSEE - (850) 298-4441

08/30/2018 9:07 AM



D22VT3UXPUYXXEXWF

EXCHANGE	447-2-8712-881530-18.7.2
934713 TB WHT IJ SHP	(14.69) SS
934713 TB WHT IJ SHP	(14.69) SS
934713 TB WHT IJ SHP	(14.69) SS
213448 LABEL, 5.5X8.5,	40.99 SS
Subtotal:	(3.08)
Total:	(3.08)
Visa 4368:	(3.08)

Shop online at www.officedepot.com

WE WANT TO HEAR FROM YOU!

Participate in our online customer survey and receive a coupon for **\$10 off your next qualifying purchase of \$50 or more on office supplies, furniture and more.** (Excludes Technology. Limit 1 coupon per household/business.)

www.Tell10OfficeDepot.com

and enter the survey code below:

155X 4823 SF8Q

Bought inkjet labels instead of laser - so returned 3 packs and exchanged for one larger box of laser labels. Shift credit.

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23325****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/10/2018	10/27/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	Registration fees and Affiliate mtg dues

Registration fees and Affiliate mtg dues

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		18200 004 01 01 01 100 NA 100	N/A	Registration fees and Affiliate mtg dues	345.00	0.000	345.00

Approved

Approval Information

Shelley Shafer	Accounting	10/17/2018 3:33 PM
Kerri Cloud	Dir of Finance	10/17/2018 3:18 PM
Shelley Shafer	Requester	10/17/2018 11:26 AM

TOTAL**\$345.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

The Purchase Order # number must appear on billing invoices and packages and billing of the purchase must be submitted to the address shown above.

Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 23029

23325

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order

Purchase Order Information				Vendor Information		
Acct. No. (if applicable)				Vendor ID	5257	For fiscal Use
Purchase Description	NAEYC			Vendor Name	TSB Visa - Kalifeh	
Purchase/Service Date	9/10/18	To	9/10/18	Street Address		
Requestor's Name/Dept	Phyllis Kalifeh			City		
Department Approval				Phone		
				Invoice #		
				Terms (Due)	Pay by Invoice	

Purchase Information		
Distribution Code	Item Description	Amount
Admin 2004	Registration Fees	295.00
	Annual Conference	
Admin 2004	Affiliate Meeting / Dues	\$ 50.00
Total		\$ 345.00

Expense Coding Info	
GL Code	18200
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

Approvals	
Fiscal Dept.	Kcloud 10/17/18
CEO(+ \$1,000)	

Registration Tools

Name: PHYLLIS KALIFEH

Badge Number: 1208757

 Personal Information >

 Demographic Information >

 Session/Event Information >

 Payment Information >

 Invite a Colleague >

Payment Information

Date	Description	Quantity	Rate
09/10/2018	Member		\$295.00
09/10/2018	WAIT LIST-Advocacy and Action for a Unified Early Childhood Education Profession: Next Steps for Power to the profession	1	\$0.00
09/10/2018	Payment VISA PAYMENT XXXXXXXXXXXX4368		\$-295.00
			Balance: \$0.00

NAEYC
1313 L Street, NW
Suite 500
Washington, DC 20005



Bill To:

Customer Name:	Phyllis Kalifeh
Customer ID:	0000029701
Address:	Phyllis Kalifeh The Children's Forum, Inc. 2807 Remington Green Cir Tallahassee, FL 32308-3752 UNITED STATES
Phone #:	850-765-6390
Email Address:	pkalifeh@thechildrensforum.com

Receipt

Invoice #: 284953
Invoice Date: 06/09/2018
Purchase Order #:

Customer Name:	Phyllis Kalifeh
Customer #:	0000029701
Customer Address:	Phyllis Kalifeh The Children's Forum, Inc. 2807 Remington Green Cir Tallahassee, FL 32308- 3752 UNITED STATES

QTY	DESCRIPTION	UNIT PRICE	TOTAL
1	Member Benefit Card Shipping	\$0.00	\$0.00
1	Member Journal Shipping	\$0.00	\$0.00
1	Member Journal Shipping	\$0.00	\$0.00
1	Member Journal Shipping	\$0.00	\$0.00
1	NAEYC Lifetime Premium Level Membership	\$50.00	\$50.00
1	Premium Level Membership - Florida Affiliate		\$0.00

SUBTOTAL	\$50.00
Discounts	\$0.00
Tax	\$0.00
Shipping and Handling	\$0.00
TOTAL DUE	\$50.00
Credits Applied	\$0.00
Payments	\$50.00
BALANCE DUE	\$0.00

Childrens Forum Inc.

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

PURCHASE ORDER**09-EN-23326****Vendor Information****Tallahassee State Bank**

PO Box 23061
Columbus, GA 31902
Phone - / Fax -

Shipping Information

2807 Remington Green Circle
Tallahassee, FL 32308
(850) 681-7002 Ext
Shelley Shafer

Date	Require Date	Prepared By	Workflow	Status	Description
09/20/2018	10/27/2018	Shelley Shafer	Accounting	Documents Transferred to Abila	NWLC mtg registration

NWLC mtg registration

Qty	Unit Type	Qty Rec'd	Received Date	Account Information	Item Number	Item Description	Unit Price	Tax %	Total
1	EA	0		18200 004 01 01 01 100 NA 100	N/A	NWLC mtg registration	478.00	0.000	478.00

Approved

Approval Information

Shelley Shafer	Accounting	10/17/2018 3:33 PM
Kerri Cloud	Dir of Finance	10/17/2018 3:19 PM
Shelley Shafer	Requester	10/17/2018 11:27 AM

TOTAL**\$478.00**

This Purchase Order Authorizes the purchase of the items or services in the quantities and the amounts specified above by the purchaser identified above on the presentation of proper identification at time of purchase.

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Organization Name is exempt from payment of Sate sales tax under Exemption # xxxxxxxxxxxxxx



Control No. 23030

Children's Forum
2807 Remington Green Circle
Tallahassee, FL 32308

Purchase Order Information					Vendor Information		
Acct. No. (if applicable)					Vendor ID	5257	For fiscal Use
Purchase Description		NWLC			Vendor Name	TSB Visa - Kalifeh	
Purchase/Service Date		9/20/18	To	9/20/18	Street Address		
Requestor's Name/Dept		Phyllis Kalifeh			City		
Department Approval					Phone		
					Invoice #		
					Terms (Due)	Pay by Invoice	

Expense Coding Info	
GL Code	18200
Fund	
Audit	
FAS	
Function	
Program	
Activity	
Department	

\\main\shared\pkalifeh\Desktop\Fiscal Forms\P.O.Template.xls

Building on Our Success: 2019 Child Care and Early Learning Retreat

If you have any questions or need additional assistance filling out this registration please contact Candace Milner at 202-319-3056.

If you can't attend this event, but wish to make a fully tax-deductible contribution, click [here](#).

Contact Information

Prefix (Optional) First Name Last Name

Billing Address

Zip Code City State/Province

Work Email Personal Cell Phone

Organization Information

Employer

Organization Address

Zip Code City State

Work Phone

Ticket & Guest Information

**Please note: Overnight accommodations at the Mt. Washington Conference Center are limited and subject to availability. Early reservations are recommended.*

Complete Meeting Package - Single Room (Includes all day sessions and 2 nights in single occupancy room. \$239.00 per person/per night x 2 nights = \$478.00)

Complete Meeting Package - Double Room (Includes all day sessions and 2 nights in a double occupancy room. \$180.50 per person/per night x 2 nights = \$361.00. Please be sure to enter roommate information below)

Day Meeting Package with Dinner (Includes all day sessions and dinners on Tuesday and Wednesday. \$119.00 per person/per day x 2 full days = \$238.00)

Day Meeting Package without Dinner (\$94.00 per person/per day x 2 full days = \$188.00. Does not include dinner)

Ticket Level	Quantity
Complete Meeting Package, Single Room (\$478)	Number of Complete Meeting Package, Single Room tickets (\$478 each)
Complete Meeting Package, Double Room (\$361)	Number of Complete Meeting Package, Double Room tickets (\$361 each)
Day Meeting Package with Dinner (\$238)	Number of Day Meeting Package with Dinner tickets (\$238 each)

Ticket Level

Day Meeting Package without
Dinner (\$188)

Quantity

Number of Day Meeting Package without Dinner
tickets (\$188 each)

Additional Contribution (Optional)

TOTAL: \$478

QTY: 1

Payment Information

Card Number

Expiration Date

Additional Information

Name as you would like it to appear on your name tag

Title as it will appear on your name tag

Organization name as it will appear on your name tag

Food allergies/restrictions/needs

Name of requested roommate, or type in "pair me with a roommate." If you requested a single

room, please type N/A in the box

Emergency Contact Name

Emergency Contact Phone Number

Any other notes/needs/requests