

RESOLUTION NO. 702

A RESOLUTION OF THE BOARD OF COMMISSIONERS
OF BIRCH BAY WATER AND SEWER DISTRICT,
WHATCOM COUNTY, WASHINGTON,

WHEREAS, on March 10, 2011, Resolution No. 700 amended Resolution No. 401 by eliminating the "advance travel expense fund," renaming Chapter 3.16 to "Travel Advance," and amending and re-numbering certain sections and figures within Chapter 3.16;

WHEREAS, the Board wishes to amend Figure 3.16.010 and Figure 3.16.020 to eliminate duplicate and triplicate transmissions and to add signature lines required for approval;

NOW THEREFORE, BE IT RESOLVED by the Board of Commissioners of Birch Bay Water and Sewer District, Whatcom County, Washington as follows:

Section 1: Figure 3.16.010 shall be amended as shown in the attached Exhibit A with deletions in strikethrough and additions in bold.

Section 2: Figure 3.16.020 shall be amended as shown in the attached Exhibit B with deletions in strikethrough and additions in bold.

Section 3. BE IT FURTHER RESOLVED that any resolutions or parts of resolutions in conflict herewith are hereby repealed insofar as they conflict with the provisions of this resolution.

Section 4: If any section, subsection, sentence, clause or phrase of this Resolution is for any reason held to be invalid or unconstitutional, such decision shall not affect the validity of the remaining portions of this Resolution. The Board hereby declares that it would have passed this code and each section, subsection, sentence, clause and phrase thereof, irrespective of the fact that any one or more sections, subsections, sentences, clauses or phrases has been declared invalid or unconstitutional, and if, for any reason, this Resolution should be declared invalid, or unconstitutional, then the original Resolution shall be in full force and effect.

Section 5: This Resolution shall be effective immediately.

PASSED by the Board of Commissioners of Birch Bay Water & Sewer District, Whatcom County, Washington, at a regular meeting held the 24th day of March, 2011.


COMMISSIONER


COMMISSIONER


COMMISSIONER

THIS IS TO CERTIFY that the above is a true and correct copy of Resolution No. 702 of Birch Bay Water & Sewer District, Whatcom County, Washington, adopted at the regular meeting of the Board of Commissioners on March 24th, 2011.


SECRETARY

Figure 3.16.010
REQUEST FOR ADVANCE OF TRAVEL EXPENSE
(Submit in Duplicate)

NAME: _____ DEPARTMENT: _____

PURPOSE OF TRAVEL _____

ANTICIPATED DEPARTURE AND RETURN DATES _____

DESTINATION: Headquarters _____ City & State _____

Request that I receive an advance payment for travel expense for the above trip in the following amount.

TRAVEL EXPENSE ESTIMATE:

PER DIEM: _____ X _____ \$ _____
(Number of Nights) (Per Diem Rate)

TRAVEL BY: _____
OR CAR: _____ MILES at _____ cents per mile \$ _____

OTHER EXPENSE: _____ \$ _____
(State Type)

TOTAL ADVANCE REQUESTED \$ _____

I agree to submit a final statement for this travel within ten (10)* days after the end of the travel and will reimburse the District for any overpayment at that time, if any.

DATE OF REQUEST: _____ SIGNATURE: _____

APPROVED: _____, **Department Head**

APPROVED: _____, Interim Finance Director

APPROVED: _____, General Manager

*According to Bulletin No. 94 from the State Auditor's Office, "Any default in accounting for or repaying an advance shall render the full amount which is unpaid immediately due and payable with interest at the rate of 10% per annum from the date of default until repaid. To protect against any losses on account of advances, the governing body shall have a prior lien against and a right to withhold any and all funds payable to, or to become payable to such officer, or employee to whom such advance has been given. No advance of any kind may be made to any officer or employee at any time when he is delinquency in accounting for or repaying a prior advance."

RECONCILIATION:

ACTUAL EXPENSE AS SUBMITTED BY FINAL ITEMIZATION STATEMENT \$ _____

Overpayment Receipt No. _____ Dated _____ For \$ _____

Under payment - requesting additional reimbursement \$ _____

APPROVED: _____, Interim Finance Director

APPROVED: _____, General Manager

EXHIBIT A

FINAL ITEMIZATION STATEMENT OF ADVANCE TRAVEL EXPENSE**
(Submit in TriPLICATE)

NAME: _____ DEPARTMENT: _____

PURPOSE OF TRAVEL _____ DATES OF TRIP _____

DESTINATION: Headquarters _____ City & State _____

ITEMIZATION OF EXPENSE

PER DIEM: _____ \$ _____

TRAVEL BY: _____ \$ _____
(If by Auto, attach mileage report)

OTHER EXPENSE: _____ \$ _____
(State Type)

_____ \$ _____

_____ \$ _____

TOTAL OF EXPENSE \$ _____

I hereby certify under penalty of perjury, that this is a true and correct itemization of necessary expenses incurred by me.

DATE _____

SIGNATURE: _____

APPROVED: _____, Department Head

APPROVED: _____, Interim Finance Director