



NASRA

National Association of State Retirement Administrators

We have received your registration form indicating your participation at the 2005 Annual Conference. Your name and the name(s) of your guest(s) will appear as follows on badges and on the attendance roster:

Name, Title: Patricia Anderson, Trustee
System/Firm: Public Employees Retirement System of Minnesota
Address: 60 Empire Drive
Suite 200
St. Paul, MN 55103
Telephone: (651) 205-4663
Fax: (651) 296-8392 FAX
E-mail: sandy.stolt@state.mn.us
Name of guests: Camp NASRA:

2005 CONFERENCE PAST DUE INVOICE

Registration fee: \$ 600
Spouse/Guest(s):
Children:
Golf:
Tours:
Monday:
Iditarod Headquarters & Happy Trails Kennel
Portage Glacier & Big Game Alaska Wildlife Park
Historic Anchorage Walking Tour
Tuesday, Spouse Activity:
Seward Day Tour
TOTAL Fees:
Fees Received to Date:
Amount Due: \$

625
600
25

Please provide a copy of this invoice #C05_NASRA_1908 with your payment for any amount due as soon as possible. Credit card payments cannot be accepted at this time. All activity fees are non-refundable. Registration for golf and tours is not guaranteed until payment is received. If there are any corrections or changes to the information above, contact Liz Antin at 985-307-0342 or at liza@nasra.org.

P.O. Box 14117
Baton Rouge, LA 70898
Delivery address:
1120 Louray Drive
Baton Rouge, LA 70808

Telephone: (225) 757-9558
Fax: (225) 757-9765
E-mail: glendac@nasra.org
website: www.nasra.org

Please provide a copy of this invoice with payment.



AMERICAN
GROUP TOURS
OF MINNESOTA

1001 Sibley Memorial Highway
Suite 101
Lilydale, MN 55118

Phone # 651-452-4679
800-499-6190
Fax # 651-452-3739

Invoice No.
041173

CUSTOMER COPY
ITINERARY RECEIPT
PAGE NO. 1
FNR: 1F-LW20XB

PERA - ATTN SANDY
60 EMPIRE DR
SUITE 200
ST PAUL MN 55108

33724684

ANDERSON/PATRICIA

Agent	Branch	Customer No.	Account No.	Date
SARA			005219	16JUN05

Code	Day	Date	City-Airport	Time	Carrier	Flight & Class	Status	Service Amount
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* ELECTRONIC TICKET * POSITIVE IDENTIFICATION REQUIRED AT CHECK-IN
 **REQUEST TERMS/CONDITIONS OF TRAVEL AND CARRIER LIABILITY NOTICES FROM
 TRAVEL AGENCY OR THE TRANSPORTING CARRIER.**
 RESTRICTIONS-NON-REFUNDABLE//PENALTY FOR CHANGES
 ISSUED BY AMERICAN GRP TRS OF MN MENDOTA HEIGHTS MN

A WE 27JUL LV MINNEAPOLS/STPAUL 1146A NORTHWEST 843L OK
 AR ANCHORAGE 230P BAGS ALLOWED- 2PIECE OSTOP 753
 SEAT 35-D **RESERVED**
 ANDERSON/PATRICIA
 NOT VALID FOR TRAVEL-BEFORE 27JUL/AFTER 27JUL

A TU 09AUG LV ANCHORAGE 950P NORTHWEST 844L OK
 10AUG AR MINNEAPOLS/STPAUL 604A BAGS ALLOWED- 2PIECE OSTOP 753
 SEAT 32-D **RESERVED**
 ANDERSON/PATRICIA
 NOT VALID FOR TRAVEL-BEFORE 09AUG/AFTER 09AUG

TICKET NUMBER(S): E0121206838379
 SERVICE FEE MCO: 8908102873706

AIR FARE 523.05
 TAX 48.85
 TOTAL AIR FARE 571.90
 SERVICE FEE 35.00
 AMOUNT DUE 606.90

011-01
 BOTD
 2095
 2H

V # 11017006

Input 7/1/05

THIS AMOUNT IS TO BE PAID BY: CHECK

RECONFIRM FLIGHTS WITH THE AIRLINE 24HRS PRIOR TO DEPARTURE.
 NONREFUNDABLE ELECTRONIC TICKET/PHOTO ID REQUIRED.

THANK YOU FOR YOUR BUSINESS

PLEASE RECONFIRM FLIGHT INFORMATION DIRECTLY WITH CARRIERS.

CODE: A-Air T-Tour V-Other Travel Service	H-Hotel S-Surface C-Car	CLASS: F, A-First Y, B, H, T-Coach	S-Standard K-Economy	STATUS: OK-Confirmed WL-Wait List RQ-Request
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IN-STATE SHORT TERM ADVANCE
 OUT-OF-STATE RECURRING ADVANCE

SEMA4 EMPLOYEE EXPENSE REPORT

Check if advance was issued for these expenses
 FINAL EXPENSE(S) FOR THIS TRIP?

Employee Name: Paul Anderson Home Address: 2035 Selma Hill St, Fargo, ND 58122 Permanent Work Station: Fargo, ND Agency: _____ 1-Way Commute Miles: _____ Job Title: _____

Employee ID: _____ Rcd #: _____ Trip Start Date: _____ Trip End Date: 8/9/05 Reason for Travel/Advance (30 Char. Max): [example: XYZ Conference, Dallas, TX] Barg. Unit: _____ Expense Group ID (Agency Use): _____

MAPS CODE BLOCK(S)	FY	Fund	Agency	Org	SOrg	Appr	Actv	SObj	Project	Rpt Cat	Description										Distrib %
											200432639 00										
Date	Daily Description	Itinerary		Trip Miles	Total Trip & Local Mi	Mileage Rate	Meals ✓			Total Meals (overnight stay)	Total Meals no overnight stay	Lodging	Personal Telephone	Parking	Total						
		Time	Location				B	L	D												
8/5		Depart					<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			237.60									
8/6		Arrive					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			237.60									
8/7		Depart					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			237.60									
8/8		Arrive					<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			237.60									
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WASH. & SPENCER ST.
425 1st St
ANNAPOLIS, MD 21401
TELE 43

** Hill Country
Annapolis, Md.

DATE: 8-1-83
PHONE: 91210882398
NUMBER: 25

02 Lucie

1/2
AUGUST 1983 8.1

DEPT: AUG 01 23 10:33
REF: 2557
TO: AMEX
TO TYPE: PAIDUSER

AMOUNT 375.00
TIP
TOTAL
NAME: DE ANDERSON

1.50
10.75

TOTAL

PRINT NAME
ROOM #
TOUR #
TOUR NAME
SIGNATURE
YOU MAY SIGN IN THE ROOM OR
IF YOU SIGN IN THE ROOM
YOUR ROOM ATTENDANT

I AGREE TO PAY ABOVE TOTAL AMOUNT
INCLUDING TAX. I HAVE READ AND UNDERSTAND
THE TERMS AND CONDITIONS OF THE CREDIT AGREEMENT
AND I AGREE TO ACCEPT THE CREDIT AGREEMENT



TOP COPY - MERCHANT BOTTOM COPY - CUSTOMER

UPPER I LOUNGE
ANCHORAGE INT'L AIRPORT
ANCHORAGE, ALASKA

4018 Ilene

107/1 8115 GST 2
AUG08'05 5:42PM

**** SEAT 1 ****

2 GLS WATER 0.00
1 PEPSI 2.39
1 ICED TEA 2.39
TALL GLASS
3 TALL GLASS
2 CHIX STRIPS 15.38
1 CHILI SOMBRERO 7.59
1 SESAME CHIX SAL 7.99

RANCH
RANCH

1 BACON CHZBURGER 7.89

Tax 0.00 Amount 43.63

** ALL SEATS **

Amount \$43.63

THANK YOU
UPPER I LOUNGE
ANCHORAGE INT'L AIRPORT

*Dinner
Mon*

Date	Transaction	Amount
8/10	Standard Purch	983.60
8/10	HILTON HOTELS ANCHORAGE AK	
8/15	15177125	
8/15	N0751V01	

Payments, Credits & Adjustments
PAYMENT THANK YOU

Standard Purch
HILTON HOTELS ANCHORAGE AK
PHONE NUMBER: 9072727411
FOLIO NUMBER: 000271326
ARRIVE: 08/08/05 DEPART: 08/09/05

Account Number
XXXX-XXXXXX6-24008 08/19/05

Prepared For
PATRICIA E ANDERSON

Transactions Continued

Date	Transaction	Amount
08/05/05	BOSTON'S GOURMET ANCHORAGE AK	56.35
	FOOD/BEVERAGE	50.35
	FOOD/BEV	6.00
	TIP	
08/06/05	SIMON & SEAFORTS 10 ANCHORAGE AK	17.99
	FOOD/BEVERAGE	26.00
	FOOD/BEV	
08/06/05	JCPENNEY STORE 1831 ANCHORAGE AK	49.63
	MISSES SWIMWEAR	
08/08/05	HMSHOST-ANC-AIR #1 Anchorage AK	15.00
	FOOD/BEV	
08/08/05	ALASKA CAB ANCHORAGE AK	07.00
	TAXICABS/LIMOUSINES	

ALASKA CAB

563-5353

Cash Credit Card Check

PASSENGER'S RECEIPT, TAXICAB FARE

Date: 8/19/08

To: Airport

From: _____



Total \$ 16

Driver's Name Dom

Cab Number 112

Cab
8/07

Barbara Anderson
4190 ~~2024~~ ~~0718~~

QTY.	CLASS	DESCRIPTION	PRICE	AMOUNT
DATE		AUTHORIZATION		SUB TOTAL
<u>8-8-08</u>		<u>128014</u>		
REFERENCE NO.			SERVER	TAX
ID-FOLIO / CHECK NO. / LIC. NO. STATE		REG./DEPT.	CLERK	TIP / MISC
  <u>5552684</u>			TOTAL	<u>17.00</u>

SALES SLIP
CUSTOMER COPY

CUSTOMER: RETAIN THIS COPY FOR YOUR RECORDS

SIGN HERE

X

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.



500 West Third Avenue • Anchorage, AK 99501
 Phone (907) 272-7411 • Fax (907) 265-7044
 Reservations
 www.hilton.com or 1 800 HILTONS

Name & Address

ANDERSON, PATRICIA
 60 EMPIRE DRIVE

Room 641/K1
 Arrival Date 08/05/05 9:24PM
 Departure Date 08/09/05

SAINT PAUL, MN 55103
 US

Adult/Child 1/0
 Room Rate 220.00

RATE PLAN C-NAS

HH#

AL:

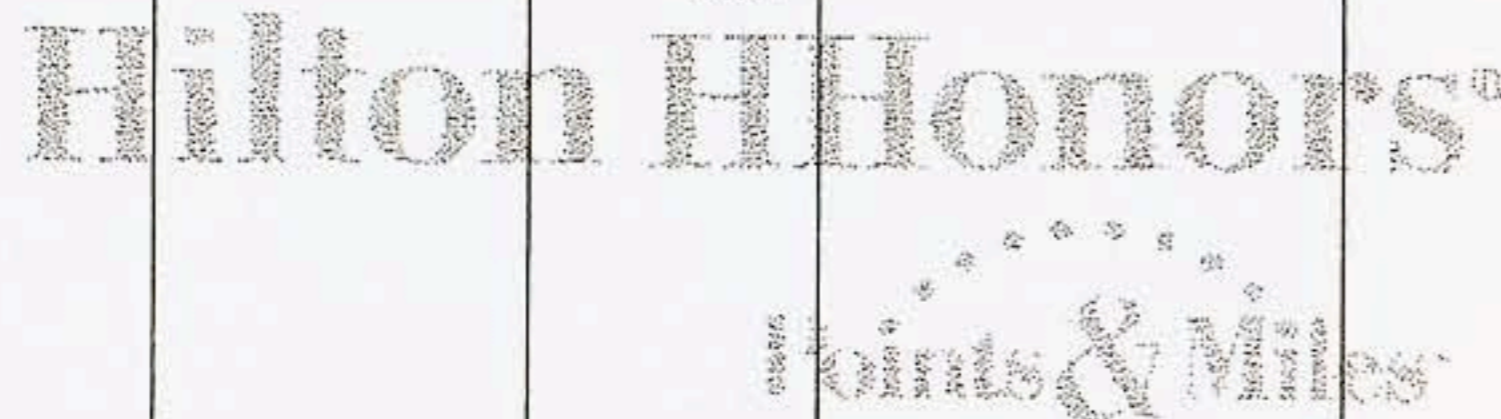
BONUS AL:

CAR:

CONFIRMATION NUMBER : 3198547692

08/09/05 PAGE 1

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
08/05/05	GUEST ROOM	JREINO	1585368	\$220.00		
08/05/05	BED TAX	JREINO	1585368	\$17.60		
08/06/05	*HOOPER BAY CAFE	LINTR	1585806	\$10.75		
08/06/05	GUEST ROOM	JREINO	1587080	\$220.00		
08/06/05	BED TAX	JREINO	1587080	\$17.60		
08/07/05	GUEST ROOM	JREINO	1588808	\$220.00		
08/07/05	BED TAX	JREINO	1588808	\$17.60		
08/08/05	*TOP OF THE WORLD	LINTR	1590224	\$22.45		
08/08/05	GUEST ROOM	RMIYASAT	1590782	\$220.00		
08/08/05	BED TAX	RMIYASAT	1590782	\$17.60		
08/09/05	MC *****2557	JVILLA	1591596		\$983.60	
	BALANCE					\$0.00



F

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T

ACCOUNT NO. MC *****2557 DATE OF CHARGE 08/09/05 FOLIO NO./CHECK NO. 230966 A