

8/30

Vendor# 6119

GL# 01104630-550300

**LUBBOCK COUNTY  
TRAVEL AUTHORIZATION & ADVANCE REQUEST**

THE DEPARTMENT DIRECTOR IS RESPONSIBLE FOR SECURING ALL SIGNATURES PRIOR TO TRAVEL. AN APPROVED TRAVEL AUTHORIZATION MUST BE SUBMITTED TO THE AUDITOR'S OFFICE ACCORDING TO THE ACCOUNTS PAYABLE PAYMENT SCHEDULE TO RECEIVE A TRAVEL ADVANCE. RELATED BROCHURES OR OTHER SUPPORTING DATA MUST BE ATTACHED.

NAME: Johnson Jason DATE: May 2nd, 2023  
Last First

DESTINATION: New Orleans, LA

PURPOSE: Child and Infant Death Investigations

DATE(S): September 17-22, 2023

Travel advance requested and required by the 15th day of September, 2023.

_____	Registration Fee	=	\$	_____	0.00
<u>6</u>	# of Breakfasts @ \$10.00 per meal	=	\$	_____	60.00
<u>6</u>	# of Lunches @ \$15.00 per meal	=	\$	_____	90.00
<u>6</u>	# of Dinners @ \$21.00 per meal	=	\$	_____	126.00
_____	# of Days lodging @ \$_____ per night	=	\$	_____	0.00
<b>Total Advance</b>				=	\$ <b>_____ 276.00</b>

Fund #: 01104630 Line Item: 550300

I hereby request authorization to travel outside Lubbock County on official business as detailed above. I have read the Lubbock County Travel Policy and will follow that policy for travel and in making requests for advancement and reimbursement of expenses. I understand that I must submit a travel report within ten days of returning from this travel or the full advance will be deducted from my next paycheck.

[Signature]  
EMPLOYEE SIGNATURE

05/02/2023  
DATE

I hereby certify the above requested travel for official Lubbock County business is directly related to this department's operations. There are sufficient unexpended funds in the current budget line item to cover all reimbursable expenses incurred. Related brochures or other supporting data are attached and 0 meals are included in the registration fee being requested and will not be reimbursed. Please issue travel expense advance if requested.

[Signature]  
DEPARTMENT DIRECTOR

5-9-23  
DATE

**APPROVAL FROM TWO (2) MEMBERS OF THE COMMISSIONERS' COURT:**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

NOTE: TRAVEL IS NOT APPROVED WITHOUT ALL SIGNATURES. TRAVEL MAY NOT BE REIMBURSED WITHOUT PROPER AUTHORIZATION AND SUPPORTING DOCUMENTATION.

830

Vendor# 12760

GL# 01104630-550300

LUBBOCK COUNTY  
TRAVEL AUTHORIZATION & ADVANCE REQUEST

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NAME: Gant Trent DATE: May 2nd, 2023

Last First

DESTINATION: New Orleans, LA

PURPOSE: Child and Infant Death Investigations

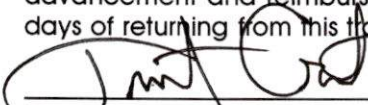
DATE(S): September 17-22, 2023

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<u>6</u>	# of Lunches @ \$15.00	per meal	=	\$	_____
<u>6</u>	# of Dinners @ \$21.00	per meal	=	\$	_____
_____	# of Days lodging @ \$_____	per night	=	\$	_____
	<b>Total Advance</b>	=	\$	_____	<b>276.00</b>

Fund #: 01104630 Line Item: 550300

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EMPLOYEE SIGNATURE

5/2/2023  
DATE

I hereby certify the above requested travel for official Lubbock County business is directly related to this department's operations. There are sufficient unexpended funds in the current budget line item to cover all reimbursable expenses incurred. Related brochures or other supporting data are attached and 0 meals are included in the registration fee being requested and will not be reimbursed. Please issue travel expense advance if requested.

  
DEPARTMENT DIRECTOR

5-9-23  
DATE

APPROVAL FROM TWO (2) MEMBERS OF THE COMMISSIONERS' COURT:

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

NOTE: TRAVEL IS NOT APPROVED WITHOUT ALL SIGNATURES. TRAVEL MAY NOT BE REIMBURSED WITHOUT PROPER AUTHORIZATION AND SUPPORTING DOCUMENTATION.

# Child and Infant Death Investigation Course

The IHIA and the Federal Bureau of Investigation will be holding our Child & Infant Death Investigation Course in New Orleans, Louisiana



**Dates: September 18 - 22, 2023**

All training will be held at the  
**Hyatt Centric French Quarter**  
900 Iberville Street | New Orleans, LA 70112

**\$ 435**

Non Member

**\$ 385**

IHIA Active Member

Includes all training materials, IHIA membership, coffee each morning, and a networking event.

[REGISTER HERE](#)

[BOOK HOTEL](#)

For questions, please contact:

Lt. Steve Lewis (ret), (813) 299-9921, [slewis@ihia.org](mailto:slewis@ihia.org)

Capt. Mike Corrado (ret), (609) 289-6233, [mcorrado@ihia.org](mailto:mcorrado@ihia.org)

or visit [IHIA.org](http://IHIA.org)

\*\* Department credentials will be required at check-in. Individuals who do not have issued department credentials should contact us directly prior to arrival. \*\*

## Topics Include:

- Bias and 911 Calls
- Investigative Response/ Best Practices
- Medical Examiner Perspectives
- Victimology
- Interviewing Child Victims/ Witnesses/Offender
- Legal Considerations
- Understanding Child Abductions
- False Allegations
- Child Abduction Response (CARD)
- Abusive Head Trauma and Defenses
- Child Torture
- Resiliency/Self Care
- Cold Case Planning
- Forensic Genealogy
- Neonaticide

