



# ERIE COUNTY WATER AUTHORITY

## INTEROFFICE MEMORANDUM

September 29, 2022

TO: Terrance McCracken, Secretary to the Authority

FROM: Sabrina A. Figler, Director of Water Quality

SUBJECT: Request to Travel to AWWA Water Quality Technology Conference (WQTC)

---

The AWWA Water Quality Technology Conference is scheduled for November 13 - 17, 2022 in Cincinnati, OH. The WQTC is established and highly regarded as the conference that provides a practical forum for a wide range of water technology professionals to exchange the latest research and information. It is considered the premier conference for water quality professionals around the world. The technical program has an extensive offering with sessions on the EPA LCRR, cyanobacteria, the UCMR5, PFAS, emerging contaminants, monitoring and treatment, taste and odor control and corrosion control, among many more topics. Due to the enormity of the program material, I request to bring a chemist with me to cover chemistry related topics. This year I am requesting my Senior Chemist, Jim Figler to attend the conference. The program may be viewed at: 2022 Water Quality Technology Conference ([tpni.com](http://tpni.com)).

Thank you for your consideration.

### BUDGET INFORMATION: BUDGET YEAR 2022

Water Quality Unit 1030

GL #: 401000 640212 Travel

Remaining Balance: \$2452.00

GL# 401000 640237 Training

Remaining Balance:\$1645

Sincerely,

A handwritten signature in blue ink that reads "Sabrina A. Figler".

Sabrina A. Figler

cc: Russel Stoll, COO

ERIE COUNTY WATER AUTHORITY  
AUTHORIZATION FORM  
For Approval/Execution of Documents  
(check which apply)

<b>Contract:</b>	<b>Project No.:</b>
<b>Project Description:</b> <u>AWWA WQTC TRAVEL REQUEST for James Figler, Senior Chemist</u>	

**Item Description:**


<input type="checkbox"/> Agreement	<input type="checkbox"/> Professional Service Contract	<input type="checkbox"/> Amendment	<input type="checkbox"/> Change Order
<input type="checkbox"/> BCD	<input type="checkbox"/> NYSDOT Agreement	<input type="checkbox"/> Contract Documents	<input type="checkbox"/> Addendum
<input type="checkbox"/> Recommendation for Award of Contract	<input type="checkbox"/> Recommendation to Reject Bids		
<input type="checkbox"/> Request for Proposals			
<input checked="" type="checkbox"/> Other <u>Approval by Board</u>			

**Action Requested:**


<input type="checkbox"/> Board Authorization to Execute	<input type="checkbox"/> Legal Approval
<input type="checkbox"/> Board Authorization to Award	<input type="checkbox"/> Execution by the Chairman
<input type="checkbox"/> Board Authorization to Advertise for Bids	<input type="checkbox"/> Execution by the Secretary to the Authority
<input type="checkbox"/> Board Authorization to Solicit Request for Proposals	
<input checked="" type="checkbox"/> Other <u>Approval by Board</u>	

**Approvals Needed:**

**APPROVED AS TO CONTENT:**

<input type="checkbox"/> Other (if Applicable)	_____	Date: _____
<input checked="" type="checkbox"/> Chief Operating Officer		Date: <u>9/29/2022</u>
<input type="checkbox"/> Executive Engineer	_____	Date: _____
<input type="checkbox"/> Director of Administration	_____	Date: _____
<input type="checkbox"/> Risk Manager	_____	Date: _____
<input type="checkbox"/> Chief Financial Officer	_____	Date: _____
<input type="checkbox"/> Legal	_____	Date: _____

**APPROVED FOR BOARD RESOLUTION:**

<input checked="" type="checkbox"/> Secretary to the Authority		Date: <u>10/3/22</u>
--	---	----------------------

**Remarks:** \_\_\_\_\_

\_\_\_\_\_

<b>Resolution Date:</b> _____	<b>Item No:</b> _____
-------------------------------	-----------------------

ERIE COUNTY WATER AUTHORITY  
AUTHORIZATION FORM  
For Approval/Execution of Documents  
(check which apply)

<b>Contract:</b>	<b>Project No.:</b>
<b>Project Description:</b> AWWA WQTC TRAVEL REQUEST for Sabrina Figler, Director of Water Quality	

**Item Description:**

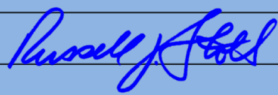
<input type="checkbox"/> Agreement	<input type="checkbox"/> Professional Service Contract	<input type="checkbox"/> Amendment	<input type="checkbox"/> Change Order
<input type="checkbox"/> BCD	<input type="checkbox"/> NYSDOT Agreement	<input type="checkbox"/> Contract Documents	<input type="checkbox"/> Addendum
<input type="checkbox"/> Recommendation for Award of Contract	<input type="checkbox"/> Recommendation to Reject Bids		
<input type="checkbox"/> Request for Proposals			
<input checked="" type="checkbox"/> Other <u>Approval by Board</u>			

**Action Requested:**


<input type="checkbox"/> Board Authorization to Execute	<input type="checkbox"/> Legal Approval
<input type="checkbox"/> Board Authorization to Award	<input type="checkbox"/> Execution by the Chairman
<input type="checkbox"/> Board Authorization to Advertise for Bids	<input type="checkbox"/> Execution by the Secretary to the Authority
<input type="checkbox"/> Board Authorization to Solicit Request for Proposals	
<input checked="" type="checkbox"/> Other <u>Approval by Board</u>	

**Approvals Needed:**

**APPROVED AS TO CONTENT:**

<input type="checkbox"/> Other (if Applicable)	_____	Date: _____
<input checked="" type="checkbox"/> Chief Operating Officer		Date: <u>9/29/2022</u>
<input type="checkbox"/> Executive Engineer	_____	Date: _____
<input type="checkbox"/> Director of Administration	_____	Date: _____
<input type="checkbox"/> Risk Manager	_____	Date: _____
<input type="checkbox"/> Chief Financial Officer	_____	Date: _____
<input type="checkbox"/> Legal	_____	Date: _____

**APPROVED FOR BOARD RESOLUTION:**

<input checked="" type="checkbox"/> Secretary to the Authority		Date: <u>10/3/22</u>
--	---	----------------------

**Remarks:** \_\_\_\_\_

\_\_\_\_\_

<b>Resolution Date:</b> _____	<b>Item No:</b> _____
-------------------------------	-----------------------

# TRAVEL REQUEST

Name James Figler Today's Date 9/21/2022

Job Title Senior Analytical Chemist

Department Water Quality

Destination(s) AWWA WQTC Cincinnati, Ohio

**Reason for Travel / (check one):** Training  Authority Business

Is this training needed to meet professional licensing requirements? no

Description of training or business, and reasons and benefits of attendance

Attend WQTC and participate in sessions on lead and copper rule revisions,

UCMR5, PFAS, 1,4-Dioxane Analysis, DBP's, Harmful Algal Blooms, Corrosion Control, Mananese

Taste and Odor and Legionella

## Dates of Travel

From: Day (M T W T F S **S**), Date 11/13/2022 To: Day (M T W **T** F S S), Date 11/17/2022

Total number of business days: 4

**Estimated Cost** Transportation costs can be obtained from Shari Zajdel X8459.


Transportation \$ \$0 Hotel Accommodations \$ \$0 Meals \$ \$375


**TOTAL ESTIMATED COST** \$ \$1050 **W/ REGISTRATION FEE** \$ \$675

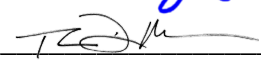
Balance in the travel budget prior to this trip \$1645 G/L Number: 640237  
Unit # 1030 Primary # 401000

**Comments** (i.e. spouse traveling, preferences): \_\_\_\_\_

## **Approvals:**

Department Head  Date 9/21/2022

Executive Director  Date 9/22/2022

Secretary  Date 9/22/22

Date of Resolution \_\_\_\_\_ Item No. \_\_\_\_\_

## WHEN TO USE THIS FORM

Use this form whenever you will be traveling on Authority business. **Complete this form as soon as possible to obtain all the necessary approvals in time to make reservations.** All travel arrangements and cost estimates should be obtained from Trish Fabozzi in Legal at the Ellicott Square Building.

**Note: If your travel relates to training, you must also complete a TRAINING REQUEST FORM.**

## INSTRUCTIONS

1. Complete the top section of the form including, name, date, job title, department, and destination. If your trip includes more than one destination, please list each on the line provided.
2. Indicate the **Reason for Travel**. Training includes any type of seminar, conference, etc.. Examples of Authority Business include meetings, travel to evaluate business or systems operations, etc..
3. If you must obtain continuing education or contact hours to meet professional licensing requirements, please indicate if this course or conference can be applied to those hours.
4. Describe the purpose of your trip. Indicate the topic of the training seminar or conference. You must also attach a copy of the training brochure, if applicable, including hotel information. If you are not attending training, please specify the purpose of your trip and the benefit to the Authority.
5. Indicate the **Dates of Travel**. Circle the day of the week and write the calendar date that you will be leaving and returning.
6. Count the total number of business days you will be away from your duties at the Authority. Do not include weekends or holidays, unless you are scheduled to work on those days.
7. Calculate the **Estimated Cost of Travel and Estimated Cost of Travel including registration fee**. Transportation costs include, airfare, train fare, car rental, etc.. Hotel accommodations should include the total cost for lodging. It should not include meals or other expenses you may charge to your room. Estimate the cost of meals on the line provided.
8. If you are traveling Monday or Friday, find out what the transportation cost would be if you travel on either Saturday or Sunday.
9. Total the estimated cost of transportation, hotel accommodations and meals.
10. Determine how much money is left in the travel budget for your department. Show the account number you will be charging these costs to. Your department head should complete this section for you.
11. Specify if your spouse is traveling with you so arrangements can be made for him/her. Also, if you have a flight preference (such as time or airlines) or hotel preference please indicate on the line provided.
12. Travel requests must be approved by your Department Head, the Executive Director and the Secretary. After receiving approval from the Executive Director, send your request to Trish Fabozzi at the Ellicott Square Building. Further approvals will be coordinated through her. She will notify you when your request is approved or denied by the Board.

# TRAVEL REQUEST

Name Sabrina Figler Today's Date 9/21/2022

Job Title Director of Water Quality

Department Water Quality

Destination(s) AWWA WQTC Cincinnati, Ohio

**Reason for Travel / (check one):** Training  Authority Business

Is this training needed to meet professional licensing requirements? no

Description of training or business, and reasons and benefits of attendance

Attend WQTC and participate in sessions on lead and copper rule revisions,

UCMR5, PFAS, 1,4-Dioxane Analysis, DBP's, Harmful Algal Blooms, Corrosion Control, Mananese

Taste and Odor and Legionella

## Dates of Travel

From: Day (M T W T F S **S**), Date 11/13/2022 To: Day (M T W **T** F S S), Date 11/17/2022

Total number of business days: 4

**Estimated Cost** Transportation costs can be obtained from Shari Zajdel X8459.


Transportation \$ \$150 Hotel Accommodations \$ \$800 Meals \$ \$375


**TOTAL ESTIMATED COST** \$ \$2000 **W/ REGISTRATION FEE** \$ \$675

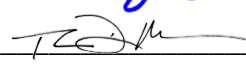
Balance in the travel budget prior to this trip \$2452 G/L Number: 640212  
Unit # 1030 Primary # 401000

**Comments** (i.e. spouse traveling, preferences): \_\_\_\_\_

## **Approvals:**

Department Head  Date 9/21/2022

Executive Director  Date 9/22/2022

Secretary  Date 9/22/22

Date of Resolution \_\_\_\_\_ Item No. \_\_\_\_\_

## WHEN TO USE THIS FORM

Use this form whenever you will be traveling on Authority business. **Complete this form as soon as possible to obtain all the necessary approvals in time to make reservations.** All travel arrangements and cost estimates should be obtained from Trish Fabozzi in Legal at the Ellicott Square Building.

**Note: If your travel relates to training, you must also complete a TRAINING REQUEST FORM.**

## INSTRUCTIONS

1. Complete the top section of the form including, name, date, job title, department, and destination. If your trip includes more than one destination, please list each on the line provided.
2. Indicate the **Reason for Travel**. Training includes any type of seminar, conference, etc.. Examples of Authority Business include meetings, travel to evaluate business or systems operations, etc..
3. If you must obtain continuing education or contact hours to meet professional licensing requirements, please indicate if this course or conference can be applied to those hours.
4. Describe the purpose of your trip. Indicate the topic of the training seminar or conference. You must also attach a copy of the training brochure, if applicable, including hotel information. If you are not attending training, please specify the purpose of your trip and the benefit to the Authority.
5. Indicate the **Dates of Travel**. Circle the day of the week and write the calendar date that you will be leaving and returning.
6. Count the total number of business days you will be away from your duties at the Authority. Do not include weekends or holidays, unless you are scheduled to work on those days.
7. Calculate the **Estimated Cost of Travel and Estimated Cost of Travel including registration fee**. Transportation costs include, airfare, train fare, car rental, etc.. Hotel accommodations should include the total cost for lodging. It should not include meals or other expenses you may charge to your room. Estimate the cost of meals on the line provided.
8. If you are traveling Monday or Friday, find out what the transportation cost would be if you travel on either Saturday or Sunday.
9. Total the estimated cost of transportation, hotel accommodations and meals.
10. Determine how much money is left in the travel budget for your department. Show the account number you will be charging these costs to. Your department head should complete this section for you.
11. Specify if your spouse is traveling with you so arrangements can be made for him/her. Also, if you have a flight preference (such as time or airlines) or hotel preference please indicate on the line provided.
12. Travel requests must be approved by your Department Head, the Executive Director and the Secretary. After receiving approval from the Executive Director, send your request to Trish Fabozzi at the Ellicott Square Building. Further approvals will be coordinated through her. She will notify you when your request is approved or denied by the Board.