JIM DALY EXPENSE STATEMENT

CYWI 4-001428

NA 3795 REV. [illegible]

EXPENSE STATEMENT (SEE INSTRUCTIONS FOR PREPARATION ON REVERSE SIDE)

PERIOD FROM 4-1-84 TO 4-30-84

NAME (LAST NAME FIRST): DALY, JAMES F.

HEADQUARTERS: MG

DIVISION & DEPARTMENT: MD - PC

DATE	EXPLANATION ORIGIN, DESTINATION AND PURPOSE OF TRIP	BUSINESS DAYS AWAY	GROUP 1 TRANSPORTATION DESCRIPTION	GROUP 1 TRANSPORTATION AMOUNT	GROUP 2 ROOM HOTEL	GROUP 2 ROOM AMOUNT	GROUP 2 MEALS AMOUNT	GROUP 3 TEL. & TEL.	GROUP 4 ENTERTAINMENT & BUS. MEETINGS	GROUP 5 OTHER EXPENSES
4-1	DENVER, CO LIA MEETING		MILEAGE 20 E.W	4 00						
	"		CAB	11 00				20		
4-2	"	1			FAIRMONT DENVER, CO	103 74	22 33	3 85		
4-3	"	1	CAB	10 00	"	103 74	10 61	50		
	"		PARKING	21 00						
	"		MILEAGE 20E.W	4 00						
4-30	SPG DUES									49 00
	TOTALS			50 00		207 48	32 94	8 75		49 00

I HEREBY CERTIFY THAT THE ABOVE IS A CORRECT STATEMENT OF EXPENSES INCURRED BY ME ON BEHALF OF THE COMPANY

SIGNATURE: J F Daly

TRAVELER NO.: 2092

IF YOU WERE AUTHORIZED TO HAVE YOUR SPOUSE ACCOMPANY YOU ON BUSINESS TRIP AND HIS/HER EXPENSES ARE INCLUDED ABOVE, CHECK HERE ☐ AND CHECK THOSE AMOUNTS WHICH INCLUDE HIS/HER EXPENSES.

AUDITED	COMPT'D.	TERR. NO.	APPROVED
			T Roffney

CO.	LED. CONT	SUB. CONT	INTER CONT	MINOR CONT	REF.	TERR. OR SM. NO.	PROD.	AMOUNT

CASH STATEMENT

BALANCE ON HAND LAST STATEMENT	169 27
ADVANCES SINCE LAST STATEMENT	
TOTAL	169 27
LESS: TOTAL EXPENSES THIS STATEMENT	348 17
BALANCE DUE ☐ COMPANY ☑ EMPLOYEE	178 90
ADD AMOUNT OF DRAFT(S) DRAFT NO. 55, 56	378 90
BALANCE DUE ☑ COMPANY ☐ EMPLOYEE	200 00

SUMMARY OF EXPENSES

GROUP 1	50 00
GROUP 2	207 48
MEALS	32 94
GROUP 3	8 75
GROUP 4	—
GROUP 5	49 00
TOTAL EXPENSES	348 17

CYWI 4-001429

It is Company policy to reimburse employees for all ordinary and necessary expenses of a business nature incurred by them in the course of their employment on Company business. It is recognized that the nature and amount of expense may vary with reference not only to the objectives of the employee's assignment and the surrounding circumstances, but also with respect to the employee's particular duties and responsibilities. Therefore, as it is not always possible to apply hard-and-fast rules to every situation, all employees are expected to use common sense in the disbursement of Company funds.

Administration of this policy should be on a conservative basis consistent with maintenance of the employee's normal living standards or appropriate representation of the Company in the matter to which the expenditure is related. Items of purely personal expense are not authorized costs for reimbursement.

For further details see General Order No. 4, dated October 1, 1964.

INSTRUCTIONS

GENERAL

1. Forward as directed by your Supervisor.
2. Statements should be submitted at least once a month but preferably on a calendar month basis.
3. Fill in forms completely so that all needed information will be furnished and the necessity for writing you will be avoided.
4. Obtain receipted bills where practicable and attach to Expense Statement. Receipts for any lodging and for any other expenditure of $25. or more (except for transportation charges where receipts are not readily available) must always be attached. Tips should be included with the expenditure to which they are related.
5. Expense Statement and receipted bills will be retained by the Company.

GROUP 1 -- TRANSPORTATION

Employee Car

Mileage Allowance: Enter business miles driven in column marked "DESCRIPTION", multiply by established per mile rate and enter allowance in "AMOUNT" column. Tolls, parking and garage fees should be totaled and shown in the "TRANSPORTATION" column.

Other Transportation

Paid by Employee: Enter expenditures in "AMOUNT" column by type of transportation. Enter type of carrier, such as air, rail, taxi, etc. in the column marked "DESCRIPTION".

Paid by Company: Show in the "DATE" column the date the tickets were used. In the "DESCRIPTION" column enter the type of carrier and the letters "PBC" when tickets are furnished and paid for by Company. For tickets charged to Company on Air Travel Card show "ATC" and cost in "DESCRIPTION" column. Leave "AMOUNT" column blank.

GROUP 2 -- ROOM AND MEALS

Date when room and meal charges are incurred should be shown in "DATE" column. Show the location of the hotel in the "EXPLANATION" column and its name in the "HOTEL" column. List daily total for room and meal expenditures in "ROOM" and "MEALS" columns. Include in Group 2 only your personal meals while away from headquarters. The cost of personal meals incurred as part of the cost of entertainment or in connection with any business meetings or conferences is to be recorded in Group 4.

GROUP 3 -- TELEPHONE & TELEGRAPH

Enter total daily expenditures for communications.

GROUP 4 -- ENTERTAINMENT AND BUSINESS MEETINGS

Enter total expenses for each occasion of entertainment or business meetings in the "AMOUNT" column of Group 4. City and nature of the expenditure should be shown in the column headed "EXPLANATION". In addition, show the following detailed information on Supplemental Expense Statement, Form GOF-3785A: the name and address of restaurant or other place of entertainment, the nature of expenditure (luncheon, dinner, theatre, ball-game, etc.), the names of persons involved in the expenditure (including employees of the Company), their occupation or title and company affiliations, and the business purpose for the expenditure.

GROUP 5 -- OTHER EXPENSES

Enter daily expenditures for other business expenses not provided for elsewhere. Describe briefly larger or unusual items in "EXPLANATION" column. In addition, show details and explain fully all expenditures posted in Group 5 on Supplemental Expense Statement, Form GOF-3785A.

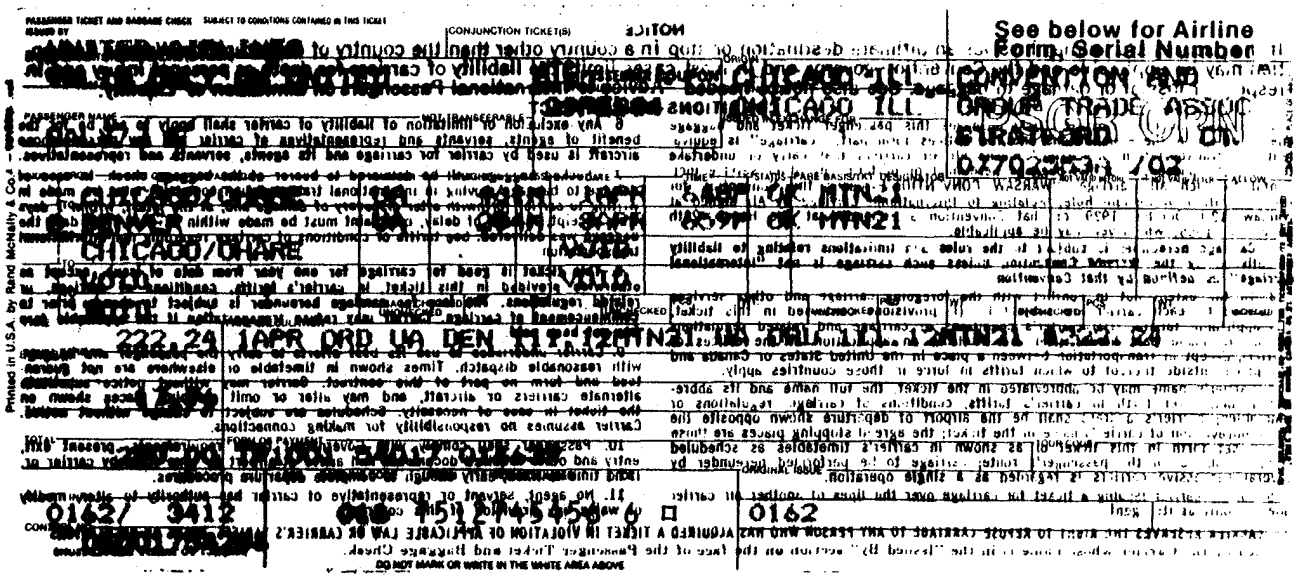
SUMMARY OF EXPENSES

Transcribe group totals to summary section and total

OTHER

Complete Cash Statement and sign your name.

CYWI 4-001430



CYWI 4-001431

NOTICE

If the passenger's journey involves an ultimate destination or stop in a country other than the country of departure the Warsaw Convention may be applicable and the Convention governs and in most cases limits the liability of carriers for death or personal injury and in respect of loss of or damage to baggage. See also notice headed "Advice to International Passengers on Limitation of Liability."

CONDITIONS OF CONTRACT

1. As used in this contract "ticket" means this passenger ticket and baggage check, of which these conditions and the notices form part, "carriage" is equivalent to "transportation", "carrier" means all air carriers that carry or undertake to carry the passenger or his baggage hereunder or perform any other service incidental to such air carriage, "WARSAW CONVENTION" means the Convention for the Unification of Certain Rules Relating to International Carriage by Air signed at Warsaw, 12th October 1929, or that Convention as amended at the Hague, 28th September 1955, whichever may be applicable.

2. Carriage hereunder is subject to the rules and limitations relating to liability established by the Warsaw Convention unless such carriage is not "international carriage" as defined by that Convention.

3. To the extent not in conflict with the foregoing carriage and other services performed by each carrier are subject to: (i) provisions contained in this ticket, (ii) applicable tariffs, (iii) carrier's conditions of carriage and related regulations which are made part hereof (and are available on application at the offices of carrier), except in transportation between a place in the United States or Canada and any place outside thereof to which tariffs in force in those countries apply.

4. Carrier's name may be abbreviated in the ticket, the full name and its abbreviation being set forth in carrier's tariffs, conditions of carriage, regulations or timetables; carrier's address shall be the airport of departure shown opposite the first abbreviation of carrier's name in the ticket; the agreed stopping places are those places set forth in this ticket or as shown in carrier's timetables as scheduled stopping places on the passenger's route; carriage to be performed hereunder by several successive carriers is regarded as a single operation.

5. An air carrier issuing a ticket for carriage over the lines of another air carrier does so only as its agent.

6. Any exclusion or limitation of liability of carrier shall apply to and be for the benefit of agents, servants and representatives of carrier and any person whose aircraft is used by carrier for carriage and its agents, servants and representatives.

7. Checked baggage will be delivered to bearer of the baggage check. In case of damage to baggage moving in international transportation complaint must be made in writing to carrier forthwith after discovery of damage and, at the latest, within 7 days from receipt; in case of delay, complaint must be made within 21 days from date the baggage was delivered. See tariffs or conditions of carriage regarding non-international transportation.

8. This ticket is good for carriage for one year from date of issue, except as otherwise provided in this ticket, in carrier's tariffs, conditions of carriage, or related regulations. The fare for carriage hereunder is subject to change prior to commencement of carriage. Carrier may refuse transportation if the applicable fare has not been paid.

9. Carrier undertakes to use its best efforts to carry the passenger and baggage with reasonable dispatch. Times shown in timetable or elsewhere are not guaranteed and form no part of this contract. Carrier may without notice substitute alternate carriers or aircraft, and may alter or omit stopping places shown on the ticket in case of necessity. Schedules are subject to change without notice. Carrier assumes no responsibility for making connections.

10. Passenger shall comply with Government travel requirements, present exit, entry and other required documents and arrive at airport by time fixed by carrier or, if no time is fixed, early enough to complete departure procedures.

11. No agent, servant or representative of carrier has authority to alter, modify or waive any provision of this contract.

CARRIER RESERVES THE RIGHT TO REFUSE CARRIAGE TO ANY PERSON WHO HAS ACQUIRED A TICKET IN VIOLATION OF APPLICABLE LAW OR CARRIER'S TARIFFS, RULES OR REGULATIONS

Issued by the Carrier whose name is in the "Issued By" section on the face of the Passenger Ticket and Baggage Check.

SUBJECT TO TARIFF REGULATIONS

CWM 4-001432

Receipt

Chicago O'Hare International Airport
Department of Aviation, City of Chicago

Thank you!

EXIT: SEQUENCE/LANE/CASHIER/ DATE / TIME / FEE / CUST. I.D. ENTRY: LANE/ SCR# /RATE/ DATE / TIME

CYWI 4-001433

CYWI 4-001434

FOR INFORMATION AT ANY FAIRMONT HOTEL
CALL YOUR TRAVEL AGENT OR CALL TOLL FREE
800-527-4727 (IN TEXAS CALL 800-492-6622)

REMARKS:

FOR F.O. CASHIER USE ONLY (CREDIT CARD IMPRINT ETC.)

	MEMO	DESCRIPTION REFERENCE NO	TRANSACTION AMOUNT	BALANCE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11		ROOM	A 66.0	
12		TAX	A 5.74	
13		T13.3 04/02 1212 64		
14		SUBTOTAL		
15		[illegible]	CA 5.3 -	
16		[illegible]	A 5.3	
17		T9107 04/02 1212 64		
18				
19		SUBTOTAL		
20		PHONE	A .30	
21		TOLST	A 3.36	
22		%1602 04/03 1212 76		
23				
24				
25				
26				
27				
28				

LAST AMOUNT IS BALANCE DUE

32218

RATE CODE | SPEC.

PLEASE REMIT DIRECTLY TO:

FAIRMONT HOTEL

1750 WELTON ST. DENVER, COLORADO 80202

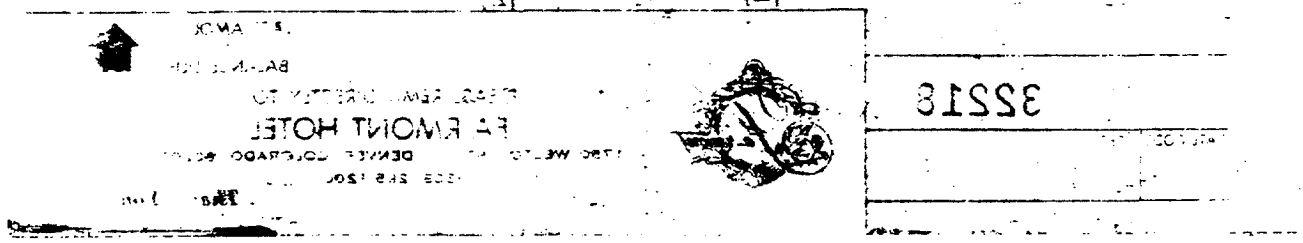
(303) 295-1200

Thank You

CYWI 4-001435

ABBREVIATIONS

A/V	AUDIO VISUAL
BANQ	BANQUET
BEV	BEVERAGE
GRGE	GARAGE
LL	LOBBY LOUNGE
LAUND	LAUNDRY
LDIST	LONG DISTANCE TELEPHONE
MARQ	MARQUIS ROOM
MC G	MC GUIRE'S
MISC.	MISCELLANEOUS
MOURL	MOULIN ROUGE
NEWS	NEWS STAND
PDOUT	PAID OUT
P S	PUBLIC SPACE
PKG	TOUR PACKAGE
POST	POSTAGE
RM SV	ROOM SERVICE
REST	RESTAURANT
SP A	SPECIAL ARRANGEMENTS
TRANS	TRANSPORTATION



Supplemental Expense Statement.

CYANAMID

DETAILS OF EXPENDITURES POSTED IN GROUPS 4 AND 5 ON FORM NA 3785

PERIOD FROM 4-1-84 TO 4-30-84

NAME	HEADQUARTERS	DIVISION AND DEPARTMENT
DALY, JAMES F	MG	PPD - PC

DATE (1)	PLACE (2) NAME, ADDRESS AND NATURE OF EXPENDITURE OR ENTERTAINMENT	BUSINESS RELATIONSHIP (3) – SEE NOTE NAME AND OCCUPATION, TITLE OR OTHER DESIGNATION OF PERSONS ENTERTAINED	BUSINESS PURPOSE (4) REASON FOR EXPENDITURE AND NATURE OF DISCUSSION OR ACTIVITY	AMOUNT
4-30-84	SOCIETY OF PLASTICS ENGINEERS BROOKFIELD CENTER, CT		ANNUAL DUES	49 00
			APPROVED	

NOTE – Where expenditure is not directly related to Company business but directly precedes or follows a substantial and bona fide business discussion, meeting or convention, etc. and is associated with Company business, denote with asterisk(*) those persons entertained who also participated in business discussion, meeting or convention. Also furnish: (1) Dates and duration of business discussion, meeting or convention in Column (1)
(2) Place of business discussion, meeting or convention in Column (2)
(3) Business purpose of discussion, meeting or convention in Column (4)

NA 3785-01 REV. 8-77 8-77

CYWI 4-001437

NA 5928 9-73

COMPANY PURCHASED AIRLINE TRANSPORTATION

(SUPPLEMENT TO EXPENSE STATEMENT)

NAME: DALY, JAMES F | TRAVEL NO.: 2092 | PERIOD FROM 7-1-83 TO 9-30-83

HEADQUARTERS: MG | DIVISION AND DEPARTMENT: PPD - PC

DATE TICKET ISSUED	ISSUED BY COMPANY	AIR TRAVEL CARD	AGENCY RESERVATION	DATES OF FLIGHTS				TICKET USED ENTIRELY	UNUSED PORTION ATTACHED	TICKET NUMBER	AMOUNT
7-12-83		X		7-25	7-28			X		7203968360	456 00
9-9-83		X		9-13	9-14	9-16		X		7209820430	488 00
										TOTAL	944 00

ATTACH UNUSED TICKET DATA

INSTRUCTIONS ON REVERSE SIDE	SIGNATURE OF TRAVELER	APPROVED

CYWI 4-001438

ATTACH ALL TICKET DATA

(except unused tickets)

IN THIS SPACE

COMPANY PURCHASED

AIRLINE TRANSPORTATION

This is a supplement to your expense statement and does not change any existing procedures in preparing expense reports.

All travelers who have had airline transportation purchased by the Company, or by a travel agency, or with an Air Travel Card must comply with the following procedure:

1. The passenger coupon (copy of ticket) must be attached in the space above.

2. The flight coupon (original ticket) of any unused portion of your flight should be attached to this report on the space provided on the reverse side of this page.

3. The reverse side of this form should be completed as outlined:

   A. Kindly PRINT all data required

   B. Place (X) in appropriate space as to how tickets were acquired

      Issued by Company
      Air Travel Card
      Agency Reservation

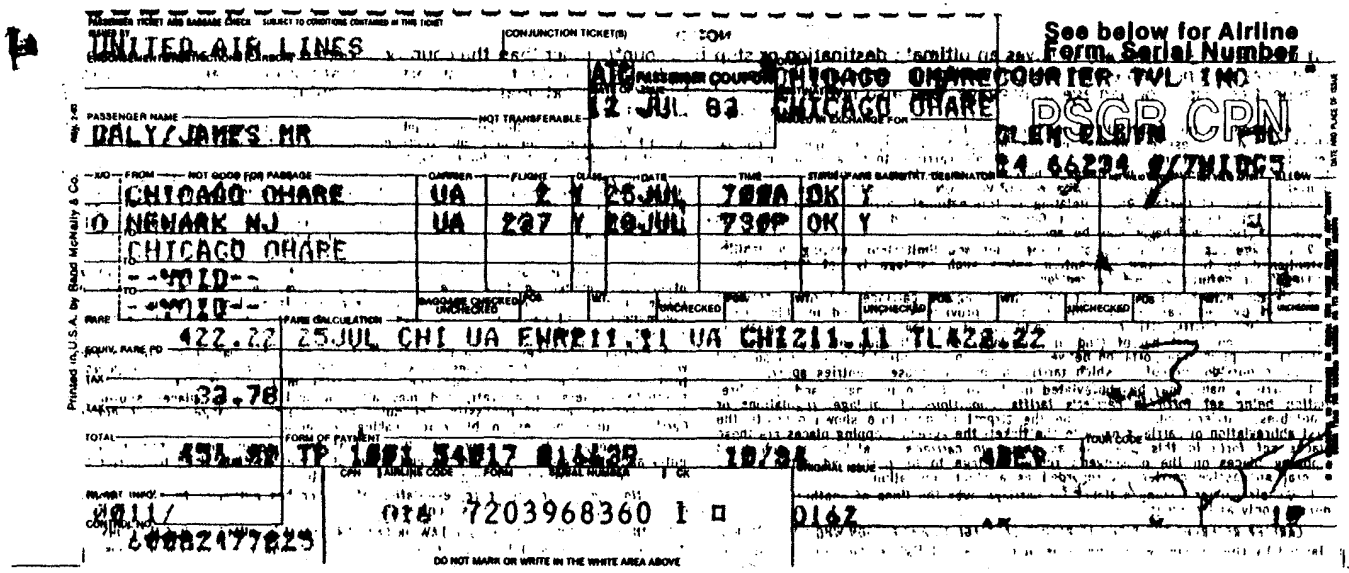
   C. Place (X) in appropriate space as to utilization of tickets

      Ticket Used Entirely
      Unused Portion Attached

4. ATTACH this form to the front of your expense statement and forward to the person delegated the responsibility of its approval. Approval must be obtained on your expense report and also on this supplement.

5. Under no circumstances should your Air Travel Card be used for personal use.

6. Any subsequent changes to original tickets issued which result in a price adjustment, a copy of the adjustment should also be attached in the appropriate space (used or unused).



PASSENGER TICKET AND BAGGAGE CHECK SUBJECT TO CONDITIONS CONTAINED IN THIS TICKET

ISSUED BY: UNITED AIR LINES

CONJUNCTION TICKET(S)

See below for Airline Form, Serial Number

ENDORSEMENT/RESTRICTIONS (CARRIER)

PASSENGER COUPON: CHICAGO OHARE COURIER TVL INC

DATE OF ISSUE: 12 JUL 83

ORIGINATION: CHICAGO OHARE

PSGR CPN

PASSENGER NAME: DALY/JAMES MR

NOT TRANSFERABLE

ISSUED IN EXCHANGE FOR

GLEN ELLYN

24 66234 0/7WIDC5

X/O	FROM / NOT GOOD FOR PASSAGE	CARRIER	FLIGHT	CLASS	DATE	TIME	STATUS	FARE BASIS/RT. DESIGNATOR				
	CHICAGO OHARE	UA	2	Y	25JUL	700A	OK	Y				
O	NEWARK NJ	UA	227	Y	28JUL	730P	OK	Y				
	CHICAGO OHARE											
	--VOID--											
	--VOID--											

BAGGAGE CHECKED UNCHECKED POS. WT. UNCHECKED POS. WT. UNCHECKED POS. WT. UNCHECKED POS. WT. UNCHECKED

FARE: 422.22 FARE CALCULATION: 25JUL CHI UA EWR211.11 UA CHI211.11 TL422.22

EQUIV. FARE PD

TAX: 33.78

TAX

TOTAL: 456.00 FORM OF PAYMENT: TP 1001 54017 016639 10/84 TOUR CODE: 4DEP

CPN AIRLINE CODE FORM SERIAL NUMBER CK ORIGINAL ISSUE

FLIGHT INFO: 0011/

CONTROL NO.: 60082477825

016 7203968360 1 □ 0162

DO NOT MARK OR WRITE IN THE WHITE AREA ABOVE

Printed in U.S.A. by Rand McNally & Co.

CYWI 4-001440

NOTICE

If the passenger's journey involves an ultimate destination or stop in a country other than the country of departure the Warsaw Convention may be applicable and the Convention governs and in most cases limits the liability of carriers for death or personal injury and in respect of loss of or damage to baggage. See also notice headed "Advice to International Passengers on Limitation of Liability."

CONDITIONS OF CONTRACT

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3. To the extent not in conflict with the foregoing carriage and other services performed by each carrier are subject to: (I) provisions contained in this ticket, (II) applicable tariffs, (III) carrier's conditions of carriage and related regulations which are made part hereof (and are available on application at the offices of carrier), except in transportation between a place in the United States or Canada and any place outside thereof to which tariffs in force in those countries apply.

4. Carrier's name may be abbreviated in the ticket, the full name and its abbreviation being set forth in carrier's tariffs, conditions of carriage, regulations or timetables; carrier's address shall be the airport of departure shown opposite the first abbreviation of carrier's name in the ticket; the agreed stopping places are those places set forth in this ticket or as shown in carrier's timetables as scheduled stopping places on the passenger's route; carriage to be performed hereunder by several successive carriers is regarded as a single operation.

5. An air carrier issuing a ticket for carriage over the lines of another air carrier does so only as its agent.

6. Any exclusion or limitation of liability of carrier shall apply to and be for the benefit of agents, servants and representatives of carrier and any person whose aircraft is used by carrier for carriage and its agents, servants and representatives.

7. Checked baggage will be delivered to bearer of the baggage check. In case of damage to baggage moving in international transportation complaint must be made in writing to carrier forthwith after discovery of damage and, at the latest, within 7 days from receipt; in case of delay, complaint must be made within 21 days from date the baggage was delivered. See tariffs or conditions of carriage regarding non-international transportation.

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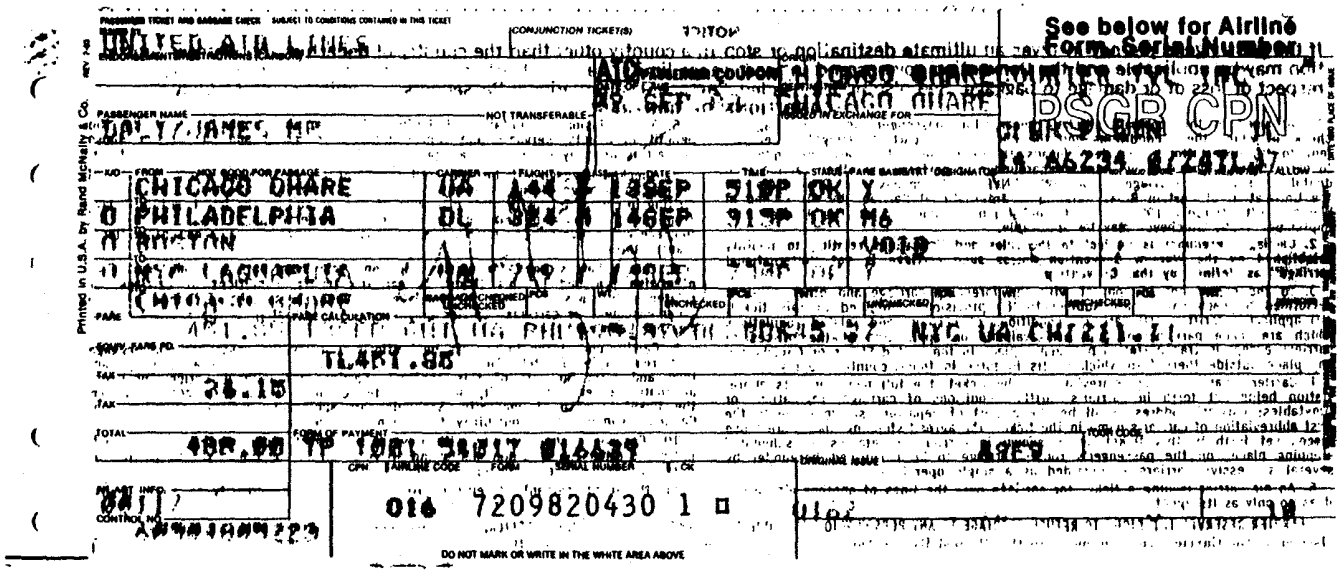
Issued by the Carrier whose name is in the "Issued By" section on the face of the Passenger Ticket and Baggage Check.

SUBJECT TO TARIFF REGULATIONS

CYWI 4-001441



CYWI 4-001442

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Issued by the Carrier whose name is in the "Issued By" section on the face of the Passenger Ticket and Baggage Check.

SUBJECT TO TARIFF REGULATIONS

CYWI 4-001443

EXPENSE STATEMENT

SEE INSTRUCTIONS FOR PREPARATION ON REVERSE SIDE

PERIOD FROM 7-1-83 TO 9-30-83

NAME (LAST NAME FIRST): DALY, JAMES F.

HEADQUARTERS: MG

DIVISION & DEPARTMENT: PPD - PC

DATE	EXPLANATION ORIGIN, DESTINATION AND PURPOSE OF TRIP	BUSINESS DAYS AWAY	GROUP 1 TRANSPORTATION DESCRIPTION	GROUP 1 AMOUNT	GROUP 2 ROOM HOTEL	GROUP 2 ROOM AMOUNT	GROUP 2 MEALS AMOUNT	GROUP 3 TEL. & TEL.	GROUP 4 ENTERTAINMENT & BUS. MEETINGS	GROUP 5 OTHER EXPENSES
7-15	ELK GROVE VILLAGE & FRANKLIN PK, IL SALES CALLS	1	40 mi. @ .20	8 00						
7-20	LANSING/CHICAGO, IL SALES CALLS	1	78 mi. @ .20	15 60						
			TOLLS	1 80						
8-10	GENEVA, IL SALES CALL	1	50 mi. @ .20	10 00						
			TOLLS	50						
9-12	ADDISON, IL SPE MEETING		30 mi. @ .20	6 00			16 50			
9-13	CHICAGO AREA TO PHILADELPHIA		20 mi. @ .20	4 00						
			TOLLS	40						
9-14	LIA MEETING	1			PHILADELPHIA AIRPORT MARRIOTT	87 20	16 25	3 89		
9-15	TOUR SPE CALLS MASS & RI	1			NORWAY INN DEDHAM, MA	53 91	5 50	9 89		
9-16	TOUR SPE CALLS MASS & CT	1	20 mi. @ .20	4 00	HOLIDAY INN S. ATTLEBORO, MA	43 34	5 50			
			TOLLS	40						
			PARKING	21 75						
9-26	SPE RETEC ROSEMONT, IL	1	42 mi. @ .20	8 40				45		95 00
	TOTALS			80 85		184 45	43 75	14 23		95 00

I HEREBY CERTIFY THAT THE ABOVE IS A CORRECT STATEMENT OF EXPENSES INCURRED BY ME ON BEHALF OF THE COMPANY

SIGNATURE: J. F. Daly

TRAVELER NO.: 2092

IF YOU WERE AUTHORIZED TO HAVE YOUR SPOUSE ACCOMPANY YOU ON BUSINESS TRIP AND HIS/HER EXPENSES ARE INCLUDED ABOVE, CHECK HERE ☐ AND CHECK THOSE AMOUNTS WHICH INCLUDE HIS/HER EXPENSES.

AUDITED | COMPT'D. | TERR. NO. | APPROVED

CO.	LED. CONT	SUB. CONT	INTER CONT	MINOR CONT	REF.	TERR. OR SM. NO.	PROD.	AMOUNT

CASH STATEMENT

BALANCE ON HAND LAST STATEMENT	200 00
ADVANCES SINCE LAST STATEMENT	—
TOTAL	200 00
LESS: TOTAL EXPENSES THIS STATEMENT	418 28
BALANCE DUE ☐ COMPANY ☑ EMPLOYEE	218 28
ADD AMOUNT OF DRAFT(S) DRAFT NO.	400 00
BALANCE DUE ☑ COMPANY ☐ EMPLOYEE	181 72

SUMMARY OF EXPENSES

GROUP 1	80 85
GROUP 2 ROOM	184 45
GROUP 2 MEALS	43 75
GROUP 3	14 23
GROUP 4	—
GROUP 5	95 00
TOTAL EXPENSES	418 28

CYWI 4-001444

It is Company policy to reimburse employees for all ordinary and necessary expenses of a business nature incurred by them in the course of their employment on Company business. It is recognized that the nature and amount of expense may vary with reference not only to the objectives of the employee's assignment and the surrounding circumstances, but also with respect to the employee's particular duties and responsibilities. Therefore, as it is not always possible to apply hard-and-fast rules to every situation, all employees are expected to use common sense in the disbursement of Company funds.

Administration of this policy should be on a conservative basis consistent with maintenance of the employee's normal living standards or appropriate representation of the Company in the matter to which the expenditure is related. Items of purely personal expense are not authorized costs for reimbursement.

For further details see General Order No. 4, dated October 1, 1964.

INSTRUCTIONS

GENERAL

1. Forward as directed by your Supervisor.
2. Statements should be submitted at least once a month but preferably on a calendar month basis.
3. Fill in forms completely so that all needed information will be furnished and the necessity for writing you will be avoided.
4. Obtain receipted bills where practicable and attach to Expense Statement. Receipts for any lodging and for any other expenditure of $25. or more (except for transportation charges where receipts are not readily available) must always be attached. Tips should be included with the expenditure to which they are related.
5. Expense Statement and receipted bills will be retained by the Company.

GROUP 1 -- TRANSPORTATION

Employee Car

Mileage Allowance: Enter business miles driven in column marked "DESCRIPTION", multiply by established per mile rate and enter allowance in "AMOUNT" column. Tolls, parking and garage fees should be totaled and shown in the "TRANSPORTATION" column.

Other Transportation

Paid by Employee: Enter expenditures in "AMOUNT" column by type of transportation. Enter type of carrier, such as air, rail, taxi, etc. in the column marked "DESCRIPTION".

Paid by Company: Show in the "DATE" column the date the tickets were used. In the "DESCRIPTION" column enter the type of carrier and the letters "PBC" when tickets are furnished and paid for by Company. For tickets charged to Company on Air Travel Card show "ATC" and cost in "DESCRIPTION" column. Leave "AMOUNT" column blank.

GROUP 2 -- ROOM AND MEALS

Date when room and meal charges are incurred should be shown in "DATE" column. Show the location of the hotel in the "EXPLANATION" column and its name in the "HOTEL" column. List daily total for room and meal expenditures in "ROOM" and "MEALS" columns. Include in Group 2 only your personal meals while away from headquarters. The cost of personal meals incurred as part of the cost of entertainment or in connection with any business meetings or conferences is to be recorded in Group 4.

GROUP 3 -- TELEPHONE & TELEGRAPH

Enter total daily expenditures for communications.

GROUP 4 -- ENTERTAINMENT AND BUSINESS MEETINGS

Enter total expenses for each occasion of entertainment or business meetings in the "AMOUNT" column of Group 4. City and nature of the expenditure should be shown in the column headed "EXPLANATION". In addition, show the following detailed information of Supplemental Expense Statement, Form GOF-3785A: the name and address of restaurant or other place of entertainment, the nature of expenditure (luncheon, dinner, theatre, ball-game, etc.), the names of persons involved in the expenditure (including employees of the Company), their occupation or title and company affiliations, and the business purpose for the expenditure.

GROUP 5 -- OTHER EXPENSES

Enter daily expenditures for other business expenses not provided for elsewhere. Describe briefly large or unusual items in "EXPLANATION" column. In addition, show details and explain fully all expenditures posted in Group 5 on Supplemental Expense Statement Form GOF-3785A.

SUMMARY OF EXPENSES

Transcribe group totals to summary section and total

OTHER

Complete Cash Statement and sign your name.

		RATE	C/O	ARV	C.O	GTD 6PM
			ARV			
			CLERK			

NO.	MEMO	DESCRIPTION	CHARGE/CREDIT	BALANCE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				

BILLING SIGNATURE	
BILLING ADDRESS	
STREET	
CITY	STATE ZIP
ATTENTION	

Marriott.

PHILADELPHIA MARRIOTT HOTEL
AIRPORT
4509 ISLAND AVENUE
PHILADELPHIA, PENNSYLVANIA 19153
(215) 365-4150

CYWI 4-001446

ROOM	NAME	FOLIO NO.
523	Daly	013390
RATE	ADDRESS	ARRIVE / OUT DATE
5	998667595	9/14 / 9/15
NO. PERS.	NAME OF COMPANY	CLERK
2/10	Corp # 147168	[illegible]



Holiday Inn®

OF BOSTON-DEDHAM

ROUTES 1 & 128 EXIT 60 N.
DEDHAM, MASSACHUSETTS 02026

TEL. 617-329-1000

- 205 delux rooms—free HBO movies
- Penthouse rooms with steam & whirlpool bath
- Convention facilities for 1200 people with 8000 square feet of unobstructed exhibit space
- Satellite teleconferencing capabilities
- "Piccalilli's"—the area's liveliest entertainment lounge and meeting place
- New England style dining room
- Olympic size pool

CYWI 4-001447

ROOM	(LAST) NAME	(FIRST)	(INITIAL)	FOLIO NO
GUESTS	STREET ADDRESS			RATE
PHONE	CITY	STATE		ADVANCE PAY'T $

BALANCE FORWARD

1		1	
2		2	
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	
9		9	
10		10	
11		11	
12		12	
13		13	
14		14	
15		15	
16		16	
17		17	
18		18	
19		19	
20		20	
21		21	
22		22	
23		23	
24	FROM FOLIO _____	24	
25		25	
26	TO _____	26	
27		27	
28		28	

Folio No. _____

Rate _____

ORIGAMI INC. of Montana (901) 352-9239

Holiday Inn® of PROVIDENCE

INTERSTATE 95 and NEWPORT AVENUE
SOUTH ATTLEBORO, MASSACHUSETTS 02703
TELEPHONE (617) 761-6660

DUPLICATE

CYWI 4-001448

Receipt

Chicago O'Hare International Airport
Department of Aviation, City of Chicago

Thank you!

EXIT: SEQUENCE/LANE/CASHIER/ DATE / TIME / FEE / CUST. I.D. ENTRY: LANE/ SER.# /RATE/ DATE / TIME

CYWI 4-001449



$ 95 00 9-26 1983 No. 7

Received from James Daley - Am Cyanamid

Ninety five 00/100 Dollars

Midwest Medical Polymer & Devices Corp

Joyce Valentine

TOPS FORM 3265

LITHO IN U. S. A.

CXWI 4-001450

NA-3785-01 Rev. 8-68 REVISED 8-68 U.S.A.

SUPPLEMENTAL EXPENSE STATEMENT

DETAILS OF EXPENDITURES POSTED IN GROUPS 4 AND 5 ON FORM GOF-3785

PERIOD FROM 7-1-83 -TO 9-30-83

NAME	HEADQUARTERS	DIVISION AND DEPARTMENT
DALY, JAMES F	MG	PPD - PC

DATE (1)	PLACE (2) NAME, ADDRESS AND NATURE OF EXPENDITURE OR ENTERTAINMENT	BUSINESS RELATIONSHIP (3) – SEE NOTE NAME AND OCCUPATION, TITLE OR OTHER DESIGNATION OF PERSONS ENTERTAINED	BUSINESS PURPOSE (4) REASON FOR EXPENDITURE AND NATURE OF DISCUSSION OR ACTIVITY	AMOUNT
9-26	MIDWEST MEDICAL POLYMER CONFERENCE - SPE		RETEC REGISTRATION	95 00
	SHERATON HOTEL ROSEMONT, IL			

GOF-3785 REV 7/63 PRINTED IN U.S.A. 7/63

EXPENSE STATEMENT (SEE INSTRUCTIONS FOR PREPARATION ON REVERSE SIDE)

PERIOD FROM 3-3-83 TO 3-31-83

NAME (LAST NAME FIRST): DALY, JAMES F

HEADQUARTERS: BB

DIVISION & DEPARTMENT: PPD - PA

DATE	EXPLANATION ORIGIN, DESTINATION AND PURPOSE OF TRIP	BUSINESS DAYS AWAY	GROUP 1 TRANSPORTATION DESCRIPTION	GROUP 1 AMOUNT	GROUP 2 ROOM HOTEL	GROUP 2 ROOM AMOUNT	GROUP 2 MEALS AMOUNT	GROUP 3 TEL. & TEL.	GROUP 4 ENTERTAINMENT & BUS. MEETINGS	GROUP 5 OTHER EXPENSES
3-7	EDISON, NJ SPE BOARD MEETING		30 MILES @ .20	6 00			16 75			
3-8	CHICAGO PLANT		36 MILES @ .20	7 20						
			TOLLS	60			15 75	4 81		
3-9	" "				HOL. DAY INN OAKBROOK TERR. IL	66 49	18 25			
3-10	" "				"	66 49	19 50			
3-11	" "		TOLLS	60	"	66 49	4 25			
			CAR RENTAL	137 11						
			PARKING	35 00						
			36 MILES @ .20	7 20						
3-16	PHILADELPHIA, PA LIA MEETING		MILEAGE 160 @ .20	32 00						
			TOLLS	2 80						
"	SPE MEETING EDISON, NJ		30 MILES @ .20	6 00			18 00			
3-28	ANTEC REGISTRATION									165 00
	TOTALS			234 51		199 47	92 50	4 81		165 00

MAY 31 1983

Effective 3/1/83, JF Daly appointed Tech. Manager for Chicago Plant. Therefore, please assign these expenses to the appropriate Cost Center.
J A Stuetzer

I HEREBY CERTIFY THAT THE ABOVE IS A CORRECT STATEMENT OF EXPENSES INCURRED BY ME ON BEHALF OF THE COMPANY

J P Daly
SIGNATURE

2092
TRAVELER NO.

IF YOU WERE AUTHORIZED TO HAVE YOUR WIFE ACCOMPANY YOU ON BUSINESS TRIP AND HER EXPENSES ARE INCLUDED ABOVE, CHECK HERE ☐ AND CHECK THOSE AMOUNTS WHICH INCLUDE HER EXPENSES.

AUDITED | COMPT'D. | TERR. NO. | APPROVED J B Sg 4-7 L McNamara

CO.	LED. CONT	SUB. CONT	INTER CONT	MINOR CONT	REF.	TERR. OR SM. NO.	PROD.	AMOUNT

RECEIVED
APR 4 1983

CASH STATEMENT

BALANCE ON HAND LAST STATEMENT	138 60
ADVANCES SINCE LAST STATEMENT	—
TOTAL	138 60
LESS: TOTAL EXPENSES THIS STATEMENT	696 29
BALANCE DUE ☐ COMPANY ☑ EMPLOYEE	557 69
ADD AMOUNT OF DRAFT(S) DRAFT NO. 40, 41, 42, 43	757 69
BALANCE DUE ☑ COMPANY ☐ EMPLOYEE	200 00

SUMMARY OF EXPENSES

GROUP 1	234 51
GROUP 2 ROOM	199 47
MEALS	92 50
GROUP 3	4 81
GROUP 4	—
GROUP 5	165 00
TOTAL EXPENSES	696 29

4-18

CYWI 4-001452

It is Company policy to reimburse employees for all ordinary and necessary expenses of a business nature incurred by them in the course of their employment on Company business. It is recognized that the nature and amount of expense may vary with reference not only to the objectives of the employee's assignment and the surrounding circumstances, but also with respect to the employee's particular duties and responsibilities. Therefore, as it is not always possible to apply hard-and-fast rules to every situation, all employees are expected to use common sense in the disbursement of Company funds.

Administration of this policy should be on a conservative basis consistent with maintenance of the employee's normal living standards or appropriate representation of the Company in the matter to which the expenditure is related. Items of purely personal expense are not authorized costs for reimbursement.

For further details see General Order No. 4, dated October 1, 1964.

INSTRUCTIONS

GENERAL

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2. Statements should be submitted at least once a month but preferably on a calendar month basis.
3. Fill in forms completely so that all needed information will be furnished and the necessity for writing you will be avoided.
4. Obtain receipted bills where practicable and attach to Expense Statement. Receipts for any lodging and for any other expenditure of $25. or more (except for transportation charges where receipts are not readily available) must always be attached. Tips should be included with the expenditure to which they are related.
5. Expense Statement and receipted bills will be retained by the Company.

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Employee Car

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Other Transportation

Paid by Employee: Enter expenditures in "AMOUNT" column by type of transportation. Enter type of carrier, such as air, rail, taxi, etc. in the column marked "DESCRIPTION".

Paid by Company: Show in the "DATE" column the date the tickets were used. In the "DESCRIPTION" column enter the type of carrier and the letters "PBC" when tickets are furnished and paid for by Company. For tickets charged to Company on Air Travel Card show "ATC" and cost in "DESCRIPTION" column. Leave "AMOUNT" column blank.

GROUP 2 -- ROOM AND MEALS

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GROUP 3 -- TELEPHONE & TELEGRAPH

Enter total daily expenditures for communications.

GROUP 4 -- ENTERTAINMENT AND BUSINESS MEETINGS

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GROUP 5 -- OTHER EXPENSES

Enter daily expenditures for other business expenses not provided for elsewhere. Describe briefly large or unusual items in "EXPLANATION" column. In addition, show details and explain fully all expenditures posted in Group 5 on Supplemental Expense Statement Form GOF-3785A.

SUMMARY OF EXPENSES

Transcribe group totals to summary section, and total.

OTHER

Complete Cash Statement and sign your name.

GOF-3785 BACKER REV. 12-64

CYWI 4-001453

PARKING LOT RECEIPT

NOT VALID UNLESS TIME & DATE STAMPED

TIME OUT: 070 21 52 N9 18

APCOA, Inc.
NEWARK INTERNATIONAL AIRPORT
CENTRAL TOLLS PLAZA, BUILDING 105
NEWARK, NEW JERSEY 07114
Phone: (201) 961-4750

Lot # ..... Lane # .....

Parking Charges Including .....

Newark Parking Tax .....

Total .....

Ticket # ..... Lic. # .....

Attendant .....

Please report any discourtesy or problem so we can improve our service to you.

CYWI 4-001454

HOLDEN BUSINESS FORMS CO., MINNEAPOLIS, MN 55401

COMPANY (RENTOR)

NATIONAL CAR RENTAL SYSTEM, INC.
O'HARE INTERNATIONAL AIRPORT
P.O. BOX [illegible]
CHICAGO, IL [illegible]
TEL.: 312/[illegible]-4640

(02) CITY NO. 011 | STA. NO. [illegible] | (01) R.A. NO. NZ 1173579 1

MILEAGE DETERMINED BY READING FACTORY INSTALLED ODOMETER

(04) ALTERNATE R.A. NO.

(35) MILES IN 2 1 0 0 8 CHICAGO O'HARE

(13) MILES OUT 2 0 7 8 5

(39) MILES DRIVEN 2 2 4

(68) MILES ALLOWED 2 2 4

(84) MILES CHARGED

(09) CAR WILL BE RETURNED BY: 3 11 83 CHICAGO

(08) CAR NO. 2 7 2 CHICAGO O'HARE IL

(08) CAR [illegible] RATE (62) RESERVED

CAR [illegible] (06) STATE IL (06) OWNING CITY NO. 1 1 1

(38) CHECK-IN CITY NO. 0 1 1 0 STATION NO.

(19) PREV. [illegible] 12305 92

(37) DATE 11735791

A.M. 1631 3-11-83
P.M.

ALTERNATE CAR AND DATE

(19) DATE/TIME 11735791

A.M. 1040 3-08-83
P.M.

MILES IN

MILES OUT

MILES DRIVEN

RENTAL DAYS 1

EXTRA DAYS @

FOR THIS RATE TO APPLY VEHICLE MUST BE RETURNED BY

(67) CREDIT CARD IMPRINT

3010 991255 7017

JAMES DALY

79 DC 889 07/82 07/[illegible]

	MILES ALLOWED	MILES @			(43)
(67) [illegible] 0783	PER DAY	DAYS 27.50	27.50	(46)	110.00
(75) AUTHORIZATION NO. [illegible]	PER WEEK	WEEKS 192.50	192.50	(46)	
(66) [illegible]	PER HOUR	HOURS 6.75	6.75	(46)	
(69) [illegible]	SPECIAL	SPECIAL @		(46)	
			SUB-TOTAL		110.00

BILL DIRECT

(69) RENTER'S (CUSTOMER'S) NAME (Full) (PLEASE PRINT)

(70) ADDRESS

(71) CITY (72) STATE (73) ZIP

TOTAL TIME AND DISTANCE OR MINIMUM CHARGE 110.00

[illegible] COMM SOURCE COMM CODE

[illegible]

EXPIR [illegible] (AREA [illegible] BUSINESS PHONE

RE [illegible]

AD [illegible]

CR [illegible]

LOCAL ADDRESS

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THERETO.
RENTER'S SIGNATURE X

(87) ADDITIONAL AUTHORIZED DRIVER

BY INITIALS CUSTOMER ACCEPTS OR DECLINES C.D.W. AT RATE SHOWN IN AREAS 99 OR 98. SEE PARAGRAPH 4(b) OR REVERSE SIDE. C.D.W. APPLICABLE

FUEL PER GALLON [illegible] FUEL

[illegible] 110.00

[illegible] 12.10

CUSTOMER ACCEPTS OR DECLINES AT RATE SHOWN IN AREA 98. ACCEPT

DAILY AXLE 15.01

[illegible]

(77) ONE DEPOSIT (78) ADDITIONAL

MISC. CHARGES

ADD'L CITY NO. DATE

(82) UNUSED

MISC. CREDITS

NET CHARGES [illegible]

SEE PAGE 1 (REVERSE SIDE)

INVOICE SUBJECT TO FINAL AUDIT (SEE PG 1, PARA 4d)

MINIMUM RENTAL — ONE DAY/[illegible] MILEAGE

INTERCITY FEE AND/OR OTHER RATE CHANGES MAY APPLY IF VEHICLE IS NOT RETURNED TO THE LOCATION SPECIFIED AND/OR WITHIN THE DATE AND TIME SPECIFIED AND/OR [illegible] (SEE PG 1, PARA 6b)

NO REIMBURSEMENT WILL BE MADE WITHOUT GAS RECEIPTS.

CHARGE FOR FUEL REPLACEMENT, MILEAGE OR MINIMUM CHARGE

[illegible]

CUSTOMER REQUESTS UPGRADE

[illegible]

[illegible] NO.

[illegible] 1

[illegible] THIS COPY MUST APPEAR ON RENTAL PAPERWORK AND CORRESPONDENCE.

[illegible] NATIONAL CAR RENTAL CARD HAS BEEN USED FOR THIS RENTAL. YOU WILL BE BILLED FROM AND PAYABLE TO: NATIONAL CAR RENTAL [illegible] AVENUE SOUTH, MINNEAPOLIS, MINN. [illegible]

PLEASE DETACH AND RETURN THIS STUB WITH PAYMENT

PAGE TWO OF FIVE SIDES

GOLDENROD CUSTOMER MEMO 5

CYWI 4-001455

NATIONAL RENTAL AGREEMENT

1. DEFINITIONS

This is an **Agreement** between you and the Company to rent a motor **Vehicle** and to you (including tires, tools, accessories and equipment).
The **Vehicle** rented to you is [illegible] described on Page 2 (front side) and may be referred to as "car".
The rental lessor (lessor) is called the **Company** and is identified in the upper left hand corner on Page 2 (front side).
The renter (lessee) under this Agreement is you (sometimes called the **Customer**) and you are identified on Page 2 (front side). You, the Customer, are responsible for all charges under this Agreement.
The Authorized Driver is: (1) you (the Customer) and (2) if a licensed driver who assumes the responsibility of an Authorized Driver and has your permission to drive the vehicle and who is at least 18 years old (under — 21 or 25 — at some locations) and is a member of your immediate family (and resides in the same household) or is your business associate (partner, employer, employee, fellow employee) and is driving the Vehicle for customary business purposes and (3) any additional Authorized Driver approved by the Company in writing who has signed their name in Area 87 on page 2 of this agreement. Customer agrees not to permit use of vehicle by any other person without obtaining prior written consent of Company.

2. VEHICLE CONDITION AND RETURN

Vehicle is delivered to you in good operating condition. You agree to return Vehicle in same condition (except for ordinary wear and tear) to Company's location at the place and on the date specified on Page 2 or sooner, if demanded by Company).
Company may repossess Vehicle without demand at your expense at any time it is illegally parked, is used in violation of the law or this Agreement or is apparently abandoned.

3. AUTHORIZED and PROHIBITED USE

Vehicle may be used **only** by an Authorized Driver.
Vehicle shall **NOT** be used:
(a) to carry persons or property for hire;
(b) to propel or tow any vehicle, trailer or other object;
(c) in any race, test or contest;
(d) in an abusive manner;
(e) for any illegal purpose;
(f) by anyone for whom Company has been given a false name, age, address or other information;
(g) or operated by any person who is under the influence of intoxicants, narcotics or any other substance known to impair driving ability.

4. PAYMENT

(a) You will pay Company on demand.
(i) **Rental Charges** — All time, mileage (as determined by factory-installed odometer), service, minimum and all other charges and applicable taxes specified on Page 2 at the rates and as provided by the terms and conditions of this Agreement.
(ii) **Vehicle Damage** — All loss or damage to Vehicle while rented under this Agreement, except that if Authorized Driver complies with all the provisions of this Agreement (i) your payment shall not exceed the amount set forth in the CDW information box on page 2, front side (except when interior or exterior damage to Vehicle was caused by negligent loading or unloading of baggage or equipment) and (ii) you need not pay for non-collision losses to Vehicle covered by a standard comprehensive insurance policy, including fire and theft, provided however that you, the Customer, are responsible for such losses if you have voluntarily surrendered possession of the Vehicle to any person named as an "Authorized Driver" in Paragraph 1, above and because that person fails to return the Vehicle to you, you are unable to return the Vehicle to the Company within the time required under this Agreement. You will promptly report to the Company any loss or damage referred to in this Paragraph 4 (a) (ii).
(iii) **Collection Expenses** — Expenses of collection or repossession, including court costs and reasonable attorney's fees, incurred by the Company in pursuing claims against Authorized Driver;
(b) CDW — If you elect to accept and pay Collision Damage Waiver as indicated on Page 2 and Authorized Driver complies with all terms and conditions of this Agreement, you are relieved from liability for damages to Vehicle caused by collision. THIS COLLISION DAMAGE WAIVER IS NOT INSURANCE.
(c) Payment Guarantee — If you have directed the Company to bill charges to some other person, firm or organization who has to make payment promptly when due, you will promptly pay the Company upon demand.
(d) Final Audit — SUBJECT TO FINAL AUDIT and [illegible] credits or adjustments (if any) to be given effect in the final transaction, if any, will be [illegible] used in the initial transaction.

5. LIABILITY INSURANCE

Authorized Driver is covered by an automobile liability insurance policy or certified self-insurance arrangements, on a primary basis in respect to other insurance, for bodily injury or death ([illegible] each person, $300,000 each accident) and for property damage ([illegible] each accident). Mandatory No-Fault coverage as required by applicable law is provided.
Authorized Drivers insured under this policy agree to comply with and be bound by all its terms, conditions, limitations and restrictions, which are made a part of this Agreement by reference. Evidence of this insurance is available for inspection at the Company's home office.
An Authorized Driver will immediately report any accident to the Company at the location where Vehicle was rented and will also deliver to the Company at that location every summons, complaint or paper of any kind received by Authorized Driver in any way relating to an accident involving the Vehicle while rented under this Agreement. An Authorized Driver will not aid or encourage the filing of any claim as a result of any accident and will cooperate fully with the Company and its insurer in investigation, defense of any claim or suit.
Coverage does not apply to:
(a) any obligation for which an Authorized Driver or the owner may be held liable;
(b) injury to or destruction of property owned by, rented to, in charge of or transported by an Authorized Driver;
(c) any liability of any nature whatsoever of a driver who is not an Authorized Driver;
(d) an accident which occurs while Vehicle is used in violation of Paragraph 3, above;
(e) MEXICO: Coverage not in Mexico. Authorized Driver must obtain the Company's written permission and purchase special insurance before entering Mexico.

6. GENERAL PROVISIONS

(a) Fines and Penalties — You will pay all fines, penalties, forfeitures and court costs imposed for parking or traffic violations with respect to Vehicle while rented under this Agreement. You will promptly report such violations to Company and will hold Company harmless from all claims arising out of such violations.
(b) Authorized Driver releases and holds harmless the Company, its agents and employees from all claims for loss or damage to his or her personal property, or that of any other person, which is left or carried in or upon Vehicle or in or upon any other vehicle or premises of the Company by Authorized Driver, or by any other person, or which is received [illegible] Company at any time before, during or after rental, whether or not due to Company's negligence or fault.
(c) In no event shall any Authorized Driver of Vehicle be or be deemed [illegible] agent, servants or employees of the Company incur charges for any purpose whatsoever.
(d) COMPANY MAKES NO EXPRESS OR IMPLIED WARRANTY AS TO [illegible] CONDITIONS, WITHOUT LIMITATION, THE CONDITION OF THE VEHICLE AND EQUIPMENT, ITS MERCHANTABILITY [illegible]
(e) No right of the Company under this Agreement may be waived [illegible]
(f) Credit, up to an amount of the estimated total charges due under this Agreement, may be [illegible] by the credit card issuer whose credit card you have given to Company in payment of your bill, and you [illegible] set aside of that amount.

7. DISTRICT OF COLUMBIA RENTALS

"For use only on rentals in the District of Columbia — as required under Chapter 22 of the laws of the District of Columbia"
[illegible] failure to return this vehicle according to terms of [illegible] may result in a criminal penalty of [illegible]

[illegible] National [illegible]

CUSTOMER MEMO

PLEASE DETACH AND RETAIN THIS PORTION FOR YOUR PAYMENT

CYWI 4-001456

CYWI 4-001457

ROOM NO.	LAST NAME	FIRST	INITIAL	GUESTS	RATE
[illegible]	[illegible]				[illegible]

OUT	CITY	STATE
[illegible]		

FOLIO NUMBER
307238

From Folio _____

To _____

STATEMENT

DATE	REFERENCE	CHARGES	CREDITS	BALANCE	PICK-UP
					**.00
03/08/83	ROOM 718	61.00			
03/08/83	TAX 718	5.49			
03/08/83	LDST 718	4.81		**71.30 /34	**71.3[illegible]
03/09/83	ROOM 718	61.00			
03/09/83	TAX 718	5.49		**137.79 /75	**137.79
03/10/83	ROOM 718	61.00			
03/10/83	TAX 718	5.49		**204.28 /15	

ROOM _____ RATE _____ TAX _____ NO. PERSONS _____

Holiday Inn of OAK BROOK TERRACE

17 W. 350 22nd STREET
VILLA PARK, ILLINOIS 60181
Telephone 312/833-3600

NA-3785-01 Rev. 8-68 8-68

SUPPLEMENTAL EXPENSE STATEMENT

DETAILS OF EXPENDITURES POSTED IN GROUPS 4 AND 5 ON FORM GOF-3785

PERIOD FROM 3-2-83 TO 3-31-83

NAME	HEADQUARTERS	DIVISION AND DEPARTMENT
JAMES F. DALY	BB	PPD - PA

DATE (1)	PLACE (2) NAME, ADDRESS AND NATURE OF EXPENDITURE OR ENTERTAINMENT	BUSINESS RELATIONSHIP (3) – SEE NOTE NAME AND OCCUPATION, TITLE OR OTHER DESIGNATION OF PERSONS ENTERTAINED	BUSINESS PURPOSE (4) REASON FOR EXPENDITURE AND NATURE OF DISCUSSION OR ACTIVITY	AMOUNT
3-28-83	SPE BROOKFIELD CENTER, CT		REGISTRATION FOR ANTEC	165 00

NA 5926 9-73

COMPANY PURCHASED AIRLINE TRANSPORTATION

(SUPPLEMENT TO EXPENSE STATEMENT)

NAME: JAMES F. DALY | TRAVEL NO.: 2092 | PERIOD: FROM 3-2-83 TO 3-31-83

HEADQUARTERS: BB | DIVISION AND DEPARTMENT: PPD - PA

DATE TICKET ISSUED	ISSUED BY COMPANY	AIR TRAVEL CARD	AGENCY RESERVATION	DATES OF FLIGHTS				TICKET USED ENTIRELY	UNUSED PORTION ATTACHED	TICKET NUMBER	AMOUNT
3/3/83	X			3/8	3/11			X		7165193331	264 00
										TOTAL	264 00

ATTACH UNUSED TICKET DATA IN THIS SPACE

INSTRUCTIONS ON REVERSE SIDE	SIGNATURE OF TRAVELER	APPROVED
	J F Daly	J S [illegible]

CYWI 4-001459

ATTACH ALL TICKET DATA

(except unused tickets)

IN THIS SPACE

COMPANY PURCHASED

AIRLINE TRANSPORTATION

This is a supplement to your expense statement and does not change any existing procedures in preparing expense reports.

All travelers who have had airline transportation purchased by the Company, or by a travel agency, or with an Air Travel Card must comply with the following procedure:

1. The passenger coupon (copy of ticket) must be attached in the space above.

2. The flight coupon (original ticket) of any unused portion of your flight should be attached to this report on the space provided on the reverse side of this page.

3. The reverse side of this form should be completed as outlined:

   A. Kindly PRINT all data required

   B. Place (X) in appropriate space as to how tickets were acquired

      Issued by Company
      Air Travel Card
      Agency Reservation

   C. Place (X) in appropriate space as to utilization of tickets

      Ticket Used Entirely
      Unused Portion Attached

4. ATTACH this form to the front of your expense statement and forward to the person delegated the responsibility of its approval. Approval must be obtained on your expense report and also on this supplement.

5. Under no circumstances should your Air Travel Card be used for personal use.

6. Any subsequent changes to original tickets issued which result in a price adjustment, a copy of the adjustment should also be attached to the appropriate ticket (used or unused).

CYWI 4-001460

See below for Airline
Form Serial Number
TRAVEL
VOID
VOID
VOID

NOTICE

country other than the country of departure the Warsaw Convention may be applicable and the Convention governs and in most cases limits the liability of carriers for death or personal injury and in destruction or loss of or damage to baggage. See also notice headed "Advice to International Passengers on Limitation of Liability."

If the passenger's journey involves an ultimate destination or stop in a

CONDITIONS OF CONTRACT

respect of loss of or damage to baggage.

1. As used in this contract "ticket" means this passenger ticket and baggage check, of which these conditions and the notices form part, "carriage" is equivalent to "transportation" "carrier" means all air carriers that carry or undertake to carry the passenger or his baggage hereunder or perform any other service incident to such air carriage. "WARSAW CONVENTION" means the Convention for the Unification of Certain Rules Relating to International Carriage by Air signed at Warsaw, 12th October 1929, or that Convention as amended at The Hague, 28th September 1955, whichever may be applicable.

2. Carriage hereunder is subject to the rules and limitations relating to liability established by the Warsaw Convention unless such carriage is not "international carriage" as defined by that Convention.

3. To the extent not in conflict with the foregoing carriage and other services performed by each carrier are subject to: (i) provisions contained in this ticket, (ii) applicable tariffs, (iii) carrier's conditions of carriage and related regulations which are made part hereof (and are available for inspection at the offices of carrier), except in transportation between a place in the United States or Canada and any place outside thereof to which tariffs relating to carriage are not required to be filed, and (iv) such conditions which may be established by the carrier to govern carriage not performed by it as are authorized by the Warsaw Convention.

4. Carrier's name may be abbreviated in the ticket, the airport of departure and destination and the first stopping place scheduled on the outward journey are shown in the timetables as the agreed stopping places on the passenger's route; carriage to be performed hereunder by several successive carriers is regarded as a single operation.

5. An air carrier issuing a ticket for carriage over the lines of another air carrier does so only as its agent.

CARRIER RESERVES THE RIGHT TO REFUSE CARRIAGE TO ANY PERSON WHO HAS ACQUIRED A TICKET IN VIOLATION OF APPLICABLE LAW OR CARRIER'S TARIFFS, RULES OR REGULATIONS

Issued by the Carrier whose name is in the "Issued By" section on the face of the Passenger Ticket and Baggage Check.

6. Any exclusion or limitation of liability of carrier shall apply to and be for the benefit of carrier's servants and representatives and any person whose aircraft is used by carrier for carriage hereunder and its agents, servants and representatives of carrier and its agents, servants and representatives.

7. Checked baggage will be delivered to bearer of the baggage check. In case of damage to baggage moving in international transportation a complaint must be made in writing to carrier forthwith after discovery of damage and, at the latest, within 7 days from receipt; in case of delay, complaint must be made within 21 days from date the baggage was delivered. See tariffs or conditions of carriage regarding non-international transportation.

8. This ticket is good for carriage for one year from date of issue, except as otherwise provided. The fare for carriage hereunder is subject to change prior to commencement of carriage. Carrier may refuse transportation if the applicable tariff related regulations have not been paid.

9. Carrier undertakes to use its best efforts to carry the passenger and baggage with reasonable dispatch. Times shown in timetable or elsewhere are not substituted no part of this contract. Carrier may without notice shown on ticket and forms or aircraft, and may alter or omit stopping places alternate carriers of necessity for making connections. Schedules are subject to change without notice. Carrier undertakes no responsibility for failure to make connections, or to carry the passenger or baggage in time for any particular flight. Carrier may substitute the ticket in case of necessity, for making connections, present omit, Carrier assumes no responsibility with Government travel requirements, by carrier or, time fixed by carrier for check-in, or for readiness for departure. Carrier shall not be liable for failure to comply with and arrive at airport by time fixed by carrier for check-in, or for readiness for departure.

10. Passenger shall comply with Government travel requirements and other applicable laws, and shall present such documents as may be required for entry and other required documents to complete departure of carrier has authority to alter, modify if no time is fixed, early or representative of carrier if no time is fixed, early or representative of carrier has authority to alter, modify or waive any provision of this contract.

11. No agent, servant or representative of carrier has authority to alter, modify or waive any provision of this contract.

SUBJECT TO TARIFF REGULATIONS

CYWI 4-001462

NA 3785 REV 7-77 3-77

EXPENSE STATEMENT (SEE INSTRUCTIONS FOR PREPARATION ON REVERSE SIDE)

PERIOD FROM 4-1-83 TO 5-31-83

NAME (LAST NAME FIRST): DALY, JAMES F

HEADQUARTERS: MG

DIVISION & DEPARTMENT: PPD - PC

DATE	EXPLANATION ORIGIN, DESTINATION AND PURPOSE OF TRIP	BUSINESS DAYS AWAY	GROUP 1 TRANSPORTATION DESCRIPTION	GROUP 1 AMOUNT	GROUP 2 ROOM HOTEL	GROUP 2 ROOM AMOUNT	GROUP 2 MEALS AMOUNT	GROUP 3 TEL. & TEL.	GROUP 4 ENTERTAINMENT & BUS. MEETINGS	GROUP 5 OTHER EXPENSES
4-21-83	DRAKE HOTEL, CHICAGO LIA MEETING		20 MILES @ .20	4 00						
			PARKING	7 00						
5-2-83	HYATT, CHICAGO SAE - ANTEC		18 MILES @ .20	3 60						
			PARKING	7 15						
5-3-83	"		18 MILES @ .20	3 60						
			PARKING	7 15						
5-4-83	"		18 MILES @ .20	3 60			13 50			
			PARKING	8 50						
5-11	SAE DUES									45 00
5-16	CHICAGO - FT. WAYNE SALES	1					20 25			
5-17	FT. WAYNE - CHICAGO SALES	1	24 MILES @ .20	4 80	HOLIDAY INN FT WAYNE, IN	47 30	4 25			
5-18	GENEVA, IL SALES	1	50 MILES @ .20	10 00						
			TOLLS	50						
	TOTALS			59 90		47 30	38 00			45 00

I HEREBY CERTIFY THAT THE ABOVE IS A CORRECT STATEMENT OF EXPENSES INCURRED BY ME ON BEHALF OF THE COMPANY

J P Daly
SIGNATURE

2092
TRAVELER NO.

IF YOU WERE AUTHORIZED TO HAVE YOUR SPOUSE ACCOMPANY YOU ON BUSINESS TRIP AND HIS HER EXPENSES ARE INCLUDED ABOVE CHECK HERE ☐ AND CHECK THOSE AMOUNTS WHICH INCLUDE HIS HER EXPENSES

AUDITED | COMPT'D. | TERR. NO. | APPROVED

CO.	LED. CONT	SUB. CONT	INTER CONT	MINOR CONT.	REF.	TERR. OR SM NO.	PROD.	AMOUNT

CASH STATEMENT

BALANCE ON HAND LAST STATEMENT	200 00
ADVANCES SINCE LAST STATEMENT	—
TOTAL	200 00
LESS TOTAL EXPENSES THIS STATEMENT	190 20
BALANCE DUE ☑ COMPANY ☐ EMPLOYEE	9 80
ADD AMOUNT OF DRAFT'S DRAFT NO. 44	190 20
BALANCE DUE ☑ COMPANY ☐ EMPLOYEE	200 00

SUMMARY OF EXPENSES

GROUP 1	59 90
GROUP 2 ROOM	47 30
MEALS	38 00
GROUP 3	
GROUP 4	
GROUP 5	45 00
TOTAL EXPENSES	190 20

CYWI 4-001463

It is Company policy to reimburse employees for all ordinary and necessary expenses of a business nature incurred by them in the course of their employment on Company business. It is recognized that the nature and amount of expense may vary with reference not only to the objectives of the employee's assignment and the surrounding circumstances, but also with respect to the employee's particular duties and responsibilities. Therefore, as it is not always possible to apply hard-and-fast rules to every situation, all employees are expected to use common sense in the disbursement of Company funds.

Administration of this policy should be on a conservative basis consistent with maintenance of the employee's normal living standards or appropriate representation of the Company in the matter to which the expenditure is related. Items of purely personal expense are not authorized costs for reimbursement.

For further details see General Order No. 4, dated October 1, 1964.

INSTRUCTIONS

GENERAL

1. Forward as directed by your Supervisor.
2. Statements should be submitted at least once a month but preferably on a calendar month basis.
3. Fill in forms completely so that all needed information will be furnished and the necessity for writing you will be avoided.
4. Obtain receipted bills where practicable and attach to Expense Statement. Receipts for any lodging and for any other expenditure of $25. or more (except for transportation charges where receipts are not readily available) must always be attached. Tips should be included with the expenditure to which they are related.
5. Expense Statement and receipted bills will be retained by the Company.

GROUP 1 -- TRANSPORTATION

Employee Car

Mileage Allowance: Enter business miles driven in column marked "DESCRIPTION", multiply by established per mile rate and enter allowance in "AMOUNT" column. Tolls, parking and garage fees should be totaled and shown in the "TRANSPORTATION" column.

Other Transportation

Paid by Employee: Enter expenditures in "AMOUNT" column by type of transportation. Enter type of carrier, such as air, rail, taxi, etc. in the column marked "DESCRIPTION".

Paid by Company: Show in the "DATE" column the date the tickets were used. In the "DESCRIPTION" column enter the type of carrier and the letters "PBC" when tickets are furnished and paid for by Company. For tickets charged to Company on Air Travel Card show "ATC" and cost in "DESCRIPTION" column. Leave "AMOUNT" column blank.

GROUP 2 -- ROOM AND MEALS

Date when room and meal charges are incurred should be shown in "DATE" column. Show the location of the hotel in the "EXPLANATION" column and its name in the "HOTEL" column. List daily total for room and meal expenditures in "ROOM" and "MEALS" columns. Include in Group 2 only your personal meals while away from headquarters. The cost of personal meals incurred as part of the cost of entertainment or in connection with any business meetings or conferences is to be recorded in Group 4.

GROUP 3 -- TELEPHONE & TELEGRAPH

Enter total daily expenditures for communications.

GROUP 4 -- ENTERTAINMENT AND BUSINESS MEETINGS

Enter total expenses for each occasion of entertainment or business meetings in the "AMOUNT" column of Group 4. City and nature of the expenditure should be shown in the column headed "EXPLANATION". In addition, show the following detailed information of Supplemental Expense Statement, Form GOF-3785A: the name and address of restaurant or other place of entertainment, the nature of expenditure (luncheon, dinner, theatre, ball-game, etc.), the names of persons involved in the expenditure (including employees of the Company), their occupation or title and company affiliations, and the business purpose for the expenditure.

GROUP 5 -- OTHER EXPENSES

Enter daily expenditures for other business expenses not provided for elsewhere. Describe briefly large or unusual items in "EXPLANATION" column. In addition, show details and explain fully all expenditures posted in Group 5 on Supplemental Expense Statement Form GOF-3785A.

SUMMARY OF EXPENSES

Transcribe group totals to summary section and total

OTHER

Complete Cash Statement and sign your name.

CYWI 4-001464

ROOM # | LAST NAME | FIRST | INITIAL | FOLIO NUMBER

B

NO & STREET | CITY | STATE | RATE

REF NO | DATE | CODE | AMOUNT | CODE

PBX OUT	NO IN PARTY ADULTS	CHILD.
PBX IN		
TOTAL		

PAID BY:
CASH
CHECK
CREDIT CARD
KIND
NO

DATE OF ARRIVAL

DATE OF DEPARTURE



Holiday Inn®

OF

FT. WAYNE N.W.

3330 West California Rd. and U.S. 30 Bypass
FT. WAYNE, IND. 46808

TELEPHONE 219/484-7711

From
Folio _____ To _____

RATE CODE	RATE AMOUNT	SPECIAL

BALANCE FORWARD

CYWI 4-001465

Supplemental Expense Statement

CYANAMID

DETAILS OF EXPENDITURES POSTED IN GROUPS A AND B ON FORM NA 3785

PERIOD FROM 4-1-83 TO 5-31-83

NAME	HEADQUARTERS	DIVISION AND DEPARTMENT
DALY, JAMES F	MG	PPD - PC

DATE	PLACE (2) NAME, ADDRESS AND NATURE OF EXPENDITURE OR ENTERTAINMENT	BUSINESS RELATIONSHIP (3) - SEE NOTE NAME AND OCCUPATION, TITLE OR OTHER DESIGNATION OF PERSONS ENTERTAINED	BUSINESS PURPOSE (4) REASON FOR EXPENDITURE AND NATURE OF DISCUSSION OR ACTIVITY	AMOUNT
5-11-83	SPE BROOKFIELD CENTER, CT	—	ANNUAL DUES	45.00

APPROVED

NOTE – Where expenditure is not directly related to Company business but directly precedes or follows a substantial and bona fide business discussion, meeting or convention, etc. and is associated with Company business, denote with asterisk(*) those persons entertained who also participated in business discussion, meeting or convention. Also furnish: (1) Dates and duration of business discussion, meeting or convention in Column (1)
(2) Place of business discussion, meeting or convention in Column (2)
(3) Business purpose of discussion, meeting or convention in Column (4)

NA 3785-01 REV. 8-77 8-77

CYWI 4-001466