

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET 1 EWS-11

NEXT FUNCTION: _____ ACTION: _____ 02/07/2023 08:49:00
 REQUEST: _____

 EMP VOUCHER NBR: _____ 2293-535 DATE: 01/13/2023 MODEL: P _____ US
 EMP SHORT NAME : JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: _____ PIERRE CM/DM : I
 TRAVEL BEG DATE: _____ 01/13/2023 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 02/07/2023 DO NOT USE : _____
 REMIT MSG: _____ TRAVEL_01/13/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CC NUMBER
0001	39.65	001	1000	52031400	2900000	
				NON_OVERNITE_PERDIEM	N N N N	
DEL		001	1000	52031500	2900000	
				OVER_NIGHT_PER_DIEM	N N N N	
DEL		001	1000	52030200	2900000	
				MILEAGE @ .28	N N N N	
0004						
						GROSS AMOUNT: 39.65

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

Claimant

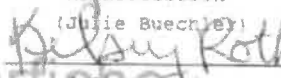
Date



Authorization

Date

02/07/23



Authorization

Date

2/8/23

Lasencio

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

NAME Marty Jackley
ADDRESS _____

ORGANIZATION _____
BUDGET ENTITY (coding) LS

Invoice ID	Date	Employee No	Return Date	Adv	Exp	License No.	Home Station	
<u>2293-535</u>	02/05/2023	[REDACTED]	01/13/2023			rode w/M. Barnett	Pierre	
Dates Mo/Day	Description of Travel, Destination	Time Leave	Time Return	Auto Miles	Trans. Cost	Overnight Meals	Lodging	Miscellaneous Expense
1-13	Pierre - Sioux Falls - Pierre	8:00 AM	9:15 PM					\$39.65

1/13 Claiming lunch receipt \$19.65 and dinner

SUBTOTALS

0 \$0.00 \$0.00 \$39.65 \$0.00 \$0.00

PURPOSE OF TRAVEL

D. Barnett Swearing in

GRAND TOTAL \$39.65

APPLY TO ADVANCE

AMOUNT

REIMBURSABLE

\$39.65

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my Knowledge and belief, is in all things true and correct.

[Signature]
Claimant

2-6-23
Date

[Signature]
Authorization

2-6-23
Date

Authorization

Date

Attorney General

FEB 06 2023

Finance

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET 1 EWC-1T

NEXT FUNCTION: _____ ACTION: _____ 03/08/2023 14:21:29
 REQUEST: _____

=====

EMP VOUCHER NBR: 2293-589 DATE: 03/03/2023 MODEL: P IS
 EMP SHORT NAME : JACKLEYMARTIN JACKLEY, MARTIN J CURE: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/DM : 1
 TRAVEL BEG DATE: 03/03/2023 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 03/08/2023 DO NOT USE : _____
 REMIT MSG: TRAVEL_03/03/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CD	ACCOUNT	CENTER	PROJ-CD	NUMBER
0001		001	1000	52031500	2900000		
				OVER_NIGHT_PER_DIEM	N	N	N
0002	34.00	001	1000	52031400	2900000		
				NON_OVERNITE_PERDIEM	N	N	N
0003		001	1000	52030200	2900000		
				MILEAGE @ .25	N	N	N
0004							
						GROSS AMOUNT:	34.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Claimant Date

 Authorization Date 03/08/23
 (Julie Buechler)

 Authorization Date 3/9/23
 Kelsey Roth

Lasertech

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

NAME Marty Jackley
ADDRESS _____

ORGANIZATION _____
BUDGET ENTITY (coding) _____

Invoice ID	Date	Employee No	Return Date	Adv	Exp	License No	Home Station	
2293-589	03/08/2023	[REDACTED]	03/03/2023			Rode w/ T Mangan	Pierre	
Dates Mo/Day	Description of Travel, Destination Misc Expense, DOT Coding	Time Leave	Time Return	Auto Miles	Trans. Cost	Overnight Meals	Lodging	Miscellaneous Expense
3-3	Pierre - Sioux Falls - Pierre	6:30 AM	11:00 PM					\$34.00

SUBTOTALS

0 50.00 50.00 34.00 50.00 50.00

PURPOSE OF TRAVEL _____
Sioux Falls LET Graduation and Meetings

GRAND TOTAL \$34.00
APPLY TO ADVANCE AMOUNT REIMBURSABLE \$34.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my Knowledge and belief is in all things true and correct.

[Signature]
Claimant

3/8/23
Date

[Signature]
Authorization

3-8-23
Date

Authorization

Date

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

ENC-11

NEXT FUNCTION: _____ ACTION: _____ 04/17/2023 14:43:30
 REQUEST: _____

=====

EMP VOUCHER NBR: 2293-872 DATE: 04/13/2023 MODEL: F LS
 EMP SHORT NAME : JACKLEYMARTIN JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] FIERRE CM/DM : Y
 TRAVEL BEG DATE: 04/12/2023 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 04/17/2023 DO NOT USE : _____
 REMIT MSG: TRAVEL_04/12/23-04/13/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CO NUMBER
	VAT QUANTITY UNIT	ITEM	NUMBER	ITEM DESCR	PRORATE (T F A D)	USE 99 I'RC
0001	40.00	001	1000	52031500	2900000	
				OVER_NIGHT_PER_DIEM	N N N N	
DEL		001	1000	52031400	2900000	
				NON_OVERNITE_PERDIEM	N N N N	
0003	191.76	001	1000	52030300	2900000	
	376			MILEAGE @ .51	N N N N	
0004						

GROSS AMOUNT: 231.76

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

 Claimant Date

 Authorization Date 04/17/23
 (Julie Buechler)

 Authorization Date 4/17/23
 Kelsey Both

Laserning

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

NAME Marty Jackley
ADDRESS _____

ORGANIZATION LS
BUDGET ENTITY (coding) _____

Invoice ID	Date	Employee No	Return Date	Adv	Exp	License No.	Home Station		
<u>2293-672</u>	04/17/2023	[REDACTED]	04/13/2023						
Dates Mo/Day	Description of Travel, Destination Misc Expense, DOT Coding	Leave	Return	Auto Miles	Trans. Cost	Overnight Meals	Own Non-Over-Ngt Meals	Lodging	Pierre Miscellaneous Expense
4-12	Pierre - Deadwood	4:45 PM		188	\$95.88	\$20.00			
4-13	Deadwood - Pierre		5:00 PM	188	\$95.88	\$20.00			No Claim

SUBTOTALS

376 \$191.76 \$40.00 \$0.00 \$0.00 \$0.00

PURPOSE OF TRAVEL speaking at the 2023 SD Chiefs and Sheriffs Conference

GRAND TOTAL \$231.76
APPLY TO ADVANCE AMOUNT
REIMBURSABLE \$231.76

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my Knowledge and belief, is in all things true and correct.

[Signature]
Claimant

4-17-23
Date

[Signature]
Authorization

4-17-23
Date

Authorization

Date

Attorney General

APR 17 2023

Finance

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

EWS-1T

NEXT FUNCTION: _____ ACTION: _____ 05/03/2023 12:59:46

REQUEST: _____

=====

EMP VOUCHER NBR: _____ 3293-722 DATE: 04/29/2023 MODEL: P _____ LS

EMP SHORT NAME : JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____

EMPLOYEE NUMBER: _____ PIERRE CM/DM : I

TRAVEL BEG DATE: _____ 04/27/2023 APPROVAL NBR: _____ MULTI PYMT: N

TERMS CODE: _____ PYMT DUE DATE: 05/03/2023 DO NOT USE : _____

PERMIT MSG: _____ TRAVEL_04/27/23-04/29/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CO NUMBER
0001	80.00	001	1000	52031500	2900000	
				OVER_NIGHT_PER_DIEM	N N N N	
0001		001	1000	52031500	2900000	
				NON_OVERNITE_PERDIEM	N N N N	
0003	291.76	001	1000	52030300	2900000	
	376			MILEAGE @ .51	N N N N	
0004						
						GROSS AMOUNT: 271.76

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

 Claimant Date

 Authorization Date 05/03/23
 (Julie Buchholz)

 Authorization Date 5/3/23
 (Kelsey Roth)

Laserfiche

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

NAME Marty Jackley
ADDRESS _____

ORGANIZATION _____
BUDGET ENTITY (coding) _____

Invoice ID	Date	Employee No	Return Date	Adv	Exp	License No	Home Station		
<u>2293-722</u>	05/01/2023	[REDACTED]	04/27/2023						
Dates Mo/Day	Description of Travel, Destination Misc Expense, DOT Coding	Time Leave	Return	Auto Miles	Trans. Cost	Overnight Meals	Own Non-Over-Ngt Meals	Lodging	Pierre Miscellaneous Expense
4-27	Pierre - Deadwood	4:30 PM		188	\$95.88	\$20.00		No Claim	
4-28	Deadwood					\$40.00		No Claim	
4-29	Deadwood - Pierre		3:30 PM	188	\$95.88	\$20.00			

SUBTOTALS

376 \$191.76 \$80.00 \$0.00 \$0.00 \$0.00

PURPOSE OF TRAVEL Speak at Sex Offender Registry Conference

GRAND TOTAL \$271.76
APPLY TO ADVANCE AMOUNT
REIMBURSABLE \$271.76

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my Knowledge and belief, is in all things true and correct.

[Signature]
Claimant

4-29-23
Date

[Signature]
Authorization

5-2-23
Date

Authorization

Date

Attorney General

MAY 02 2023

Finance

State of South Dakota - Office of Attorney General
VOUCHER

WV EMPLOYER EXPENSE WORKSHEET 1 EWS-11

NEXT FUNCTION: _____ ACTION: _____ 05/10/2023 11:06:18

REQUEST: _____

=====

EMP VOUCHER NBR: _____ 2293-752 DATE: 05/05/2023 MODEL: P _____ 05

EMP SHORT NAME : JACKLEYMARTIN_ JACKLEY, MARTIN J CURR: _____

EMPLOYEE NUMBER: [REDACTED] PIERRE CM/UM : 1

TRAVEL SEG DATE: _____ 05/03/2023 APPROVAL NBR: _____ MULTI PYMT: N

TERMS CODE: _____ PYMT DUE DATE: 05/10/2023 DO NOT USE : _____

RMIT MSG: _____ TRAVEL_05/03/23-05/05/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CC	ACCOUNT	CENTER	PROJ-CO NUMBER
QTY	QUANTITY UNIT	ITEM NUMBER	ITEM DESCR	PRORATE (T F A D)	USE SA I RC	
0001	80.00	001 1000	52031500		2900000	
			OVER_NIGHT_PER_DIEM	N N N N		
001		001 1000	32031400		2900000	
			NON_OVERNITE_PERDIEM	N N N N		
001		001 1000	52030200		2900000	
			MILEAGE_@ .28	N N N N		

0004

GROSS AMOUNT: _____ 80.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

Claimant _____ Date _____

Authorization _____ Date 05/10/23

(Julie Baehler)

Authorization _____ Date 5/11/23

(Kelsey Roth)

Lasernone

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

NAME Marty Jackley
ADDRESS _____

ORGANIZATION _____
BUDGET ENTITY (coding) _____

Invoice ID	Date	Employee No	Return Date	Adv	Exp	License No.	Home Station	
2293-752	05/01/2023	[REDACTED]	04/27/2023			Own	Pierre	
Dates Mo/Day	Description of Travel, Destination	Time	Auto Miles	Trans Cost	Overnight Meals	Non-Over-Ngt Meals	Lodging	Miscellaneous Expense
5-3	Pierre - Deadwood	3:30 PM			\$20.00		Direct Bill	
5-4	Deadwood				\$40.00		Direct Bill	
5-5	Deadwood - Pierre		3:30 PM		\$20.00			

SUBTOTALS

0 \$0.00 \$80.00 \$0.00 \$0.00 \$0.00

PURPOSE OF TRAVEL _____
2023 State's Attorney Conference

GRAND TOTAL \$80.00

APPLY TO ADVANCE
AMOUNT
REIMBURSABLE

\$80.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my Knowledge and belief, is in all things true and correct.

[Signature]
Claimant

5-8-23
Date

[Signature]
Authorization

5-9-23
Date

Authorization

Date

Attorney General

MAY 10 2023

Finance

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AV EMPLOYEE EXPENSE WORKSHEET : FWS 11

NEXT FUNCTION: ACTION: 06/05/2023 14:18:48

REQUEST:

EMP VOUCHER NBR: Z223-836 DATE: 06/01/2023 MODEL: P LS
EMP SHORT NAME : JACKLEYMARTINE JACKLEY, MARTIN J CURR:
EMPLOYEE NUMBER: PIERRE CM/DM : I
TRAVEL BEG DATE: 05/30/2023 APPROVAL NBR: MULTI PYMT: N
TERMS CODE: PYMT DUE DATE: 06/05/2023 DO NOT USE :
REMIT MSG: TRAVEL_05/30/23-06/01/23

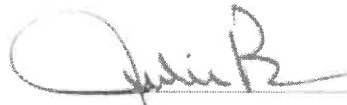
SIGNATURE APER CD:

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROF-CD	NUMBER	
0001	57.47	001	1000	50031500		2900000		
				OVER_NIGHT_PER_DIEM		N	N	N
0002	14.00	001	1000	52031400		2900000		
				NON_OVERNITE_PERDIEM		N	N	N
0003		001	1000	53032000		2900000		
				MILEAGE @ .25		N	N	N
							GROSS AMOUNT:	71.47

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

Claimant

Date

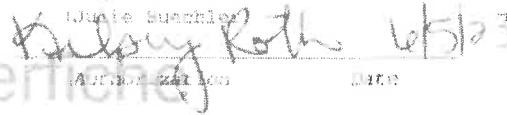


06/05/23

Authorization

Date

Julie Sunshlo


6/5/23

Lasertiche

Authorization

Date

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL
Office of Attorney General**

Invoice ID - Finance Office Use Only
2293-836

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense
		Leave	Return				Overnight	Non-Overnight		
5/30	Pierre - Aberdeen - Pierre	9:30 AM	7:00 PM	State				\$14.00		
5/31	Pierre - Vermillion	10:30 AM					\$37.47		Direct Bill	
6/1	Vermillion - Sioux Falls - Pierre		5:30 PM	State			\$20.00			
<p>05/31 receipt for dinner in Aberdeen</p> <p><i>lunch 14.00</i> <i>supper 23.47</i> <u>37.47</u></p>										
				Subtotals	0	\$0.00	\$57.47	\$14.00	\$0.00	\$0.00

Purpose of Travel: _____
Boys State in Aberdeen, Girls State in Vermillion and media in Sioux Falls

AMOUNT REIMBURSABLE
\$71.47

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Marty Jackley Claimant 6-2-23 Date *Charles M. Zing* Authorization 6-5-23 Date

1 OGS Travel Authorization	
2 Itinerary or tickets	
3 Luggage/parking receipts	
4 Taxi, Uber, Car rental receipts	
5 Lodging receipts with zero balance	
6 Agenda showing meals provided	

Authorization Date



Attorney General
JUN 05 2023
Finance

Customer Copy

EST. 2016

— DAKOTA —
BRICK
HOUSE

FIRE-GRILL-TAP-PATIO

Check Number 200668
Check Date 05/31/23
Card Type 
Card Number 

Reference Number 343573

Amount \$20.47

Tip: 3⁰⁰

Total: 23⁴⁷

Laserfiche

State of South Dakota - Office of Attorney General VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

EMS-IT

NEXT FUNCTION: _____ ACTION: _____ 07/06/2023 14:29:24

REQUEST: _____

EMP VOUCHER NBR: 2204-024 DATE: 06/27/2023 MODEL: P _____ LR

EMP SHORT NAME: JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____

EMPLOYEE NUMBER: _____ PIERRE CM/DM: 1

TRAVEL BEG DATE: 06/19/2023 APPROVAL NBR: _____ MULTI PYMT: N

TERMS CODE: _____ PYMT DUE DATE: 07/06/2023 DO NOT USE: _____

REMIT MSG: TRAVEL_06/19/23-06/27/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CD	ACCOUNT	CENTER	PROJ-CD	NUMBER
VAT	QUANTITY	UNIT	ITEM	NUMBER	ITEM	DESCR	PRORATE (T F A D) USE 99 1*RC
0001	289.22	259	1000	52033500		2300000	
						OOS OVERNITE PERDIEM	N N N N
0002	47.11	259	1000	52041400		2300000	
						NON OVERNITE PERDIEM	N N N N
DEL		001	1000	52030200		2300000	
						MESSAGE @ .78	N N N N
0004							

GROSS AMOUNT: 326.33

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief is in all things true and correct

Claimant

Date

07/06/23

Authorization

Date

Julie Buechler

Handwritten signature of Kimberly Roth

Date

Laser

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-024

Name		Employee ID		Center Code		Home Station					
Marty Jackley		[REDACTED]		2900000		Pierre					
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense		
		Leave	Return				Overnight	Non-Overnight			
6/18	Pierre - Rancho Palos Verdes CA	7:20 AM					\$126.27	✓	No Claim		
6/19	Rancho Palos Verdes CA						\$28.00	✓	No Claim		
6/20	Rancho Palos Verdes CA						\$28.00	✓	No Claim		
6/21	Rancho Palos Verdes CA						No Claim	✓	No Claim		
6/22	Rancho Palos Verdes CA						\$46.00	✓	No Claim		
6/23	Rancho Palos Verdes CA - Pierre		8:45 PM				\$60.95	✓			
6/27	Pierre - Sioux Falls - Pierre	7:00 AM	8:30 PM						\$37.11 ✓		
	06/18 Receipt for Lunch	\$74.18									
	06/18 Receipt for Dinner	\$52.09									
	06/19 Not Claiming Dinner										
	06/20 Claiming Dinner Only										
	06/22 Not Claiming Breakfast										
	06/23 Claiming Lunch Receipt - flight out of CA was at 12:16 pm and didn't have time for lunch before leaving	\$22.96	✓	38.00	✓	60.95					
	06/27 receipt	\$3.11	✓								
	34.00 + 3.11 = 37.11										
Subtotals						0	\$0.00	\$289.22	\$37.11	\$0.00	\$0.00

Purpose of Travel: 2023 Annual Meeting AG Alliance - Cit/Bank and meetings

GRAND TOTAL **\$326.33**

AMOUNT REIMBURSABLE **\$326.33**

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief is in all things true and correct.

[Signature] 6-28-23 *[Signature]* 7-5-23
Claimant Date Authorization Date

Employee Out of State Travel Checklist:	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General
JUL 06 2023
Finance

Nelson's
Terranea Resort
07/18/2023 3:08 PM

Item No 110
SERV 300241/ 1a R
CHG 5470

Trans Date : 06/18/2023

02:00 PM

130

Trans Type

Entry Mode

CVM

Invoice

Response

Auth Code

310

TVR

TAD

TSI

JRC

Amount : USD \$71.18

Tax

Total

3.00
74.18

APPROVED BY/MARTY

CUSTOMER COPY ***

Only Invoice
Available

Avenue Italy
31243 Palos Verdes Dr W
Rancho Palos Verdes, CA 90275
(310) 377-3940

Server: Filiberto Z
Check #83 Table 2
Guest Count: 2
Ordered: 6/18/23 7:09 PM

Input Type C (EMV Chip Read)
Time 7:43 PM

Transaction Type Sale
Authorization
Approval Code
Payment ID
Application ID
Application Label
Terminal ID
Card Reader MAGTEK_EDYNAMO

Amount \$47.09
+ Tip: 5.00
= Total: 52.09

x

MARTIN J
Only Invoice Available
CUSTOMER

Thank you for coming!
Lasertiche

Wolfgang Puck
Concourse B
Dia Concourse B
Denver, CO 80249

Server: Isaiah
04:04 PM
Marty/1

D06: 06/23/2023
06/23/2023
1/10260

SALE

06/23/2023 16:04:25
MID: 001 TID: RRN: 101639

PURCHASE - APPROVED



Mode: Issuer:



SubTotal USD \$ 22.95
Tip USD \$ _____
Total USD \$ _____

MARTY JACKLEY
Only Invoice Available

Thank You!!!

We would love to hear from you

Please email comments to:

feedback@skyporico.com

or Call 720-868-5938

This restaurant participates in an employee
employee tip share program
gratuities are shared by employees

--- Customer Copy ---

Laserfiche

Get N Go #18
5304 West 57th St
Sioux Falls SD 57108

06/27/2023 10:11:35 AM

Register: 2 Trans #: 3510 Op ID: 8495

Your cashier: jeffrey

CAPP OR COFF 200Z	\$1.89	102
BANANA FRESH	\$0.79	102
73 Fresh Fruit 2for\$1.00 EDLP MM	\$ 0.29	
BANANA FRESH	\$0.79	102
73 Fresh Fruit 2for\$1.00 EDLP MM	\$ 0.29	

Subtotal = \$2.89

Tax = \$0.22

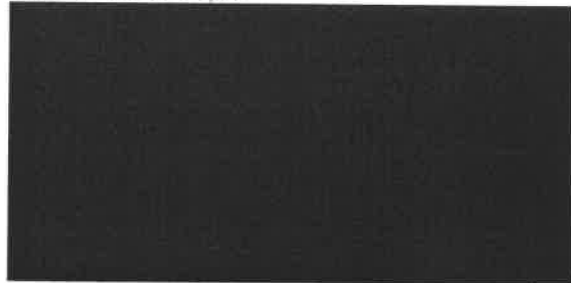
Total = \$3.11

Change Due = \$0.00

Credit

\$3.11

SALE Receipt



Save up to 15 cents
off per gallon.
Find out how at
bp.com/localheroes

REWARD



Only Invoice
Available

Go to getngo.com to register your
Get-N-Go Rewards card
Track club progress and point balance.

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYER EXPENSE WORKSHEET 1

EPS-17

NEXT PRINTION _____ ACTION: _____ 07/31/2023 10:55:57
 REQUEST: _____

EMP VOUCHER NBR: 2294-100 DATE: 07/24/2023 MODEL: P LE
 EMP SHORT NAME: JACKLEYMARTIN JACKLEY, MARTIN J CLERK:
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/CM : T
 TRAVEL REQ DATE: 07/24/2023 APPROVAL NBR: MULTI YR: N
 TERM CODE: PYMT DUE DATE: 07/31/2023 DO NOT USE :
 REMIT MSG: TRAVEL 07/24/23 07/26/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	RXP	CD	ACCOUNT	CENTER	PROJ-CD	NUMBER
0001	40.00	299	1000	52031400	2900000		
				OVER_NIGHT_PER_DIEM	N	N	N
0002	51.04	299	1000	52031400	2900000		
				NON_OVERNITE_PERDIEM	N	N	N
0003	132.27	299	1000	52030300	2900000		
				MILEAGE @ .51	N	N	N
0004							

GROSS AMOUNT: 204.31

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Claimant _____ Date _____
 Authorization _____ Date 07/31/23
 Julie Buechler
 Authorization _____ Date 7/31/23
 Kelsey Roth

Lasertech

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only

2294-109

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense
		Leave	Return				Overnight	Non-Overnight		
7/24	Pierre - Watertown	2:00 PM								Direct
7/25	Watertown - Sioux Falls - Pierre		9:30 PM				\$40.00			
7/26	Working lunch receipt							\$36.04		
7/28	Pierre - Rapid City - Pierre	8:00 AM	5:30 PM	Personal-High	377	\$192.27		\$14.00		
	7/24 Not claiming supper									
	07/28 Claiming extra mileage. ✓ Pierre to 23125 Thunderhead Falls is 186 then more miles driving around in Rapid for meetings.									
Subtotals					377	\$192.27	\$40.00	\$52.04	\$0.00	\$0.00

Purpose of Travel: _____
Pearce maker hearing; amazon tour; TAR at (23125 Tunderhead Falls Rd; Rapid City) : press

**AMOUNT
REIMBURSABLE** \$284.31

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Marty Jackley 7-31-23
Claimant Date

Charles M. [Signature] 7-31-23
Authorization Date

Employee Out of State Travel Checklist	
1. COS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

Customer Copy



THE LOMBANCH
DOWNTOWN PIERRE, SD

Only Invoice
Available

Lasertop

Check Number 596396
Date 07/26/23
Card Number [REDACTED]
Cardholder JACKIEY/MARTY

Reference Number 382502

Amount \$30.63
Tip 14%
Total 38.04

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET : EWS 17

NEW FUNCTION: _____ ACTION: _____ 08/15/2023 12:47:44

REQUEST: _____

=====

EMP VOUCHER NR: _____ 3234-128 DATE: 08/11/2023 MODEL: F _____ 25

EMP SHORT NAME: JACKLEYMARTINE JACKLEY, MARTIN J. COAR: _____

EMPLOYEE NUMBER: [REDACTED] USRPR: _____ CM/DM: _____

TRAVEL BAG DATE: 08/07/2023 APPROVAL NR: _____ MULTI PYMT: N

TRMS CODE: PYMT USE DATES 08/15/2023 DO NOT USE: _____

UNIT MSG: TRAVEL 08/07/23 08/11/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	REQ	CD	ACCOUNT	CENTER	PROG-NO	NUMBER											
MAI	QUANTITY	UNIT	ITEM	NUMBER	ITEM	DESCR	TPORATE	CT	P	A	O	USE	JR	LTIC				
0001	102.00	000	1000	52033500		2705000												
						COS_OVERNITE_PERDIEM	N	N	N	N								
0002	66.18	000	1000	52032800		2990000												
						DOS:UBRR	N	N	N	N								
DEL		001	1000	52030200		2500000												
						MILEAGE @ .28	N	N	N	N								
0004																		

GROSS AMOUNT: _____ 168.18

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

Claimant

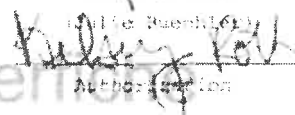
Date



08/15/23

Authorization

Date



8/15/23

Authorization

Date

Lasernet

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

invoice ID - Finance Office Use Only

2294-128

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc. Expense
		Leave	Return				Overnight	Non-Overnight		
8/9	Pierre - Rapid City - Seattle WA	8:00 AM					\$46.00	/	No Charge	\$63.18
8/10	Seattle WA						No Claim	/	No Charge	
8/11	Seattle WA - Pierre		9:00 PM				\$56.00	/		
8/9 Uber Airport to Hotel \$63.18										
Subtotals				0	\$0.00	\$102.00	\$0.00	\$0.00	\$63.18	

Purpose of Travel: Pearce/Amazon hearing, amazon tour, TAR at (23125 Tunderhead Falls Rd, Rapid City); press

GRAND TOTAL \$165.18

AMOUNT REIMBURSABLE \$165.18

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature]
Claimant

8-14-23
Date

[Signature]
Authorization

8-14-23
Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

Attorney General

AUG 14 2023

Finance

Subject:

Fwd: [EXT] Your Wednesday evening trip with Uber

Marty J. Jackley
Attorney
Phone: 605-773-3215

CONFIDENTIALITY NOTICE: This email is confidential or privileged. If you are not the intended recipient, you are hereby notified that any retention or distribution of this communication is strictly prohibited. Please reply to the sender that you have received this message in error, then delete this email.

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: August 9, 2023 at 10:04:38 PM PDT
[REDACTED]
Subject: Your Wednesday evening trip with Uber

*Only Invoice
Available*



Total **\$63.18**
August 9, 2023

Total

\$63.18

Trip fare	\$50.28
Subtotal	\$50.28
Wait Time <input type="checkbox"/>	\$1.23
Booking Fee <input type="checkbox"/>	\$4.73
King County accessibility and admin fee	\$0.33
SeaTac Airport Pickup Fee	\$6.00
Driver Paid Sick Time	\$0.61

Only Invoice Available

Download PDF

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

Driver Compensation	\$32.62
Trip earnings	\$32.62

You rode with Haroon

4.96 Rating

Has passed a multi-step safety screen

Drivers are critical to communities right now. Say thanks with a tip.

Rate or tip

When you ride with Uber, your trips are insured in case of a covered accident.

[Learn more >](#)

UberX 14.89 miles | 21 min



9:43 PM

Central Terminal, Seattle-Tacoma International Airport (SEA), Seattle, WA 98158, US

Only Invoice Available



10:04 PM

411 University St, Seattle, WA 98101, US

[Report lost item >](#)

[Contact support >](#)
[Contact support >](#)

[My trips >](#)



[Forgot password](#)

[Privacy](#)

[Terms](#)

Uber Technologies

1515 3rd Street

San Francisco, CA 94158

State of South Dakota - Office of Attorney General
VOUCHER

AT _____ EMPLOYEE EXPENSE WORKSHEET 1 RWS 11
 NEXT FUNCTION: _____ ACTION: _____ 08/28/23 15:03:53
 REQUEST: _____

EMP VOUCHER NBR: 2294 144 DATE: 08/24/2023 MODEL: B LS
 EMP SHORT NAME: JACKLEYMARTINE JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CMYCM: _____
 TRAVEL REQ DATE: 08/24/2023 APPROVAL NBR: _____ MULTI PYMT: N
 TRMNS TRMPT: _____ PYMT DUE DATE: 08/28/2023 DO NOT USE: _____
 TRMPT NBR: _____ TRAVEL_08/24/23

LINE	AMOUNT/PERCENT	EXT	CC	ACCOUNT	CENTER	PERCENT NUMBER
001		021	100	92001400	2900000	
				OVER NIGHT PER DIEM	N N N N	
002	34.00	295	100	92001400	2900000	
				NON-OVERNITE PERDIEM	N N N N	
003		001	100	92002000	2900000	
				MILEAGE @ .20	N N N N	
004						
GROSS AMOUNT:						34.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Date

08/28/23

 Authorization

Walter Roesch
 8/28/23
 Date

Lasentone

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-164



Name		Employee ID		Center Code			Home Station		
Marty Jackley		[REDACTED]		2900000			Pierre		
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc Expense
		Leave	Return				Overnight	Non-Overnight	
8/24	Pierre - Sioux Falls - Pierre	8:00 AM	9:45 PM					\$34.00	
	*Rode w/Dan Satterlee								
Subtotal's				0	\$0.00	\$0.00	\$34.00	\$0.00	\$0.00

Purpose of Travel: _____
Speaking and Meetings _____

GRAND TOTAL \$34.00

AMOUNT REIMBURSABLE \$34.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 8-25-23  8-25-23
Claimant Date Authorization Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

Attorney General

AUG 28 2023

Finance

State of South Dakota - Office of Attorney General
VOUCHER

AT EMPLOYEE EXPENSE WORKSHEET SWS (F)

NEXT FISCAL YEAR ACTION: 09/01/2024 09/02/24

REQUEST:

EMP VOUCHER NO: 2024-189 DATE: 07/05/2023 MODEL: P IS
 EMP SHORT NAME: JACKLEYMARTINE JACKLEY, MARTIN J CURR:
 EMPLOYEE NUMBER: PIERRE CN/DM:
 TRAVEL REQ DATE: 08/31/23 APPROVAL NO: MULTI PYMT: N
 TERMS CODE: PYMT DUR DATE: 09/02/2023 DO NOT USE:
 HEMT MSG: TRAVEL 08/31/23 09/05/23

SIGNATURE AFTER:

LINE	AMOUNT/PERCENT	EXT	CG	ACCOUNT	CENTER	PROJ-CG NUMBER
001		901	1000	52011300	2900000	
				OVERNIGHT PER DIEM	N N N N	
0102	48.00	001	1000	52011400	2900000	
				NON-OVERNITE PERDIEM	N N N N	
002		001	1000	52010200	2900000	
				RELEASE	N N N N	
0004	20.00	000	1000	52010200	2900000	
				ST PAID ENTRANCE FEE	N N N N	
GROSS AMOUNT						68.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Date

09/07/23

Authorizer
 Julie Bunchler
 Date

Authorizer
 Kelsey Roth
 Date 9/7/23

Authorizer
 Date

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-189

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Msc. Expense	
		Leave	Return				Overnight	Non-Overnight		Lodging
8/31	Pierre - Huron - Pierre	8:00 AM	5:15 PM				\$14.00		\$20.00	
9/5	Pierre - Watertown - Pierre	9:30 AM	10:00 PM				\$34.00			
06/31 Fair entry fee for himself and Tony Mangan \$20.00										
				Subtotals	0	\$0.00	\$0.00	\$48.00	\$0.00	\$20.00

Purpose of Travel:
State Fair, Hearing State v. Peacemaker and Meetings

GRAND TOTAL \$68.00
AMOUNT REIMBURSABLE \$68.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 **7-6-23**
Claimant Date

 **9-7-23**
Authorization Date

Employee Out of State Travel Checklist	
1. DOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General

SEP 07 2023

Finance

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET 1 05/15/23 17:33:40

NEXT BILLING: ACTION: 05/15/2023 17:33:40
 REQUEST:
 EMP VOUCHER NBR: 2204-014 DATE: 05/15/2023 MODEL: P
 EMP FRONT NAME: JACKLEYMARTIN, JACKLEY, MARTIN J TRM:
 EMPLOYER NUMBER: (PIERRE) CM/DM:
 TRAVEL SEC DATE: 09/09/2023 APPROVAL NBR: MULTI BVMT: N
 TERMS CODE: FVMT DUE DATE: 09/15/2023 DO NOT USE:
 REMIT NBR: TRAVEL 09/09/23-09/15/23

LINE	AMOUNT/PERCENT	EXP. CO	ACCOUNT	CENTER	PROJ. CO NUMBER	
0001	85.00	001	1000 60001000	2905000		
			OVER_NIGHT_PER_DIEM	N	N	
0002	20.00	001	1000 60001400	2905000		
			NON_VERNITE_PENSIUM	N	N	
0003	292.47	001	1000 00003000	2905000		
			MILEAGE	N	N	
0004						
					GROSS AMOUNT	292.47

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief, is in all things true and correct

Claimant: _____ Date: _____
 Authorization:  Date: 05/15/23
 (Julie Buehler)
 Authorization:  Date: 9/18/23
 (Kelsey Keith)

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-213

Name		Employee ID		Center Code		Home Station					
Marty Jackley		[REDACTED]		2900000		Pierre					
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense	
		Leave	Return				Overnight	Non-Overnight			
9/7	Pierre - Sioux Falls - Pierre	1:15 PM	11:00 PM	Personal-High	226	\$115.26	←	\$20.00			
9/8	Pierre - Rapid City Interrupted Travel	10:30 AM		Personal-High	171	\$87.21		\$14.00	No Claim		
9/9	Rapid City							\$40.00	No Claim		
9/10	Rapid City - Pierre		12:00 PM					\$6.00			
<p>09/07 Claiming miles one way only Pierre - Sioux Falls</p> <p>09/08 Claiming miles one way only Pierre - Rapid City</p> <p>09/08 Not Claiming Supper</p>											
Subtotals					397	\$202.47	20.00	60.00	\$0.00	\$0.00	\$0.00

Purpose of Travel: _____
Meetings; Media; Freedom's Journey Benefit and Dinner

GRAND TOTAL \$282.47

AMOUNT REIMBURSABLE **\$282.47**

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature] Claimant Date 9-15-23
[Signature] Authorization Date 9-15-23

1. DOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi/Uber/Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

RWS-1T

NEXT FUNCTION: _____ ACTION: _____ 10/12/2023 10:48:50
 REQUEST: _____

 EMP VOUCHER NBR: _____ 2294-246 DATE: 10/11/2023 MPRG: P _____ 14
 EMP SHORT NAME : JACKLEBMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER : _____ PIERRE CM/DM : J
 TRAVEL BEG DATE: 10/10/2023 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 10/12/2023 DO NOT USE : _____
 PERMIT MSG: _____ TRAVEL 10/10/23: 10/11/23

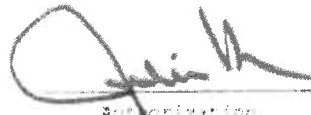
SIGNATURE APPROVED: _____

LINE	AMOUNT/PERCENT	EXP TO	ACCOUNT	CENTER	PROC CD NUMBER
VAT	QUANTITY UNIT	ITEM NUMBER	ITEM DESCR	PERCENT	(T F A D) USE OF TRC
001	34.00	001 1000	52037500	2400000	
			OVER NIGHT PER DIEM		N N N N
002	58.22	001 1000	52037000	2400000	
	14		REGULAR UNLOADED		N N N N
021		001 1000	52030200	2400000	
			MILEAGE @ .28		N N N N
004					
				GROSS AMOUNT	92.22

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct

Claimant

Date



10/12/23

Authorization

Date

(Julie Beechler)



10/13/23

Authorization

Date

Lasertech

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-286

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		2900000			Pierre			
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense
		Leave	Return				Overnight	Non-Overnight		
10/10	Pierre - Sioux Falls	3:30 PM		State			\$20.00		Direct	\$58.22
10/11	Sioux Falls - Pierre		3:00 PM				\$14.00			
	10/11 not claiming breakfast									
	\$58.22 Gas for the AG Pickup Credit Card wasn't working									
				Subtotals	0	\$0.00	\$34.00	\$0.00	\$0.00	\$58.22

Purpose of Travel:
Call to Freedom 8th Annual Community Breakfast

GRAND TOTAL \$92.22

AMOUNT REIMBURSABLE \$92.22

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature]
Claimant Date 10-11-23

[Signature]
Authorization Date 10-11-23

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General

OCT 11 2023

Finance

Holiday St 2746496
3312 S. Western Aven
Sioux Falls SD 57105
(605) 339-3763

10/10/2023 21:08:56
Order Num: 280284

Grade: UNL-REG
PUMP NUM: 11
Gallons: 16.176
PRICE/Gal: \$3.5991
TOTAL FUEL: \$58.22
TOTAL SALE: \$58.22

Term: [REDACTED]
Appr: [REDACTED]
Seq#: [REDACTED]
Auth: [REDACTED]

10/10/2023 21:06:30

PIN Bypassed

I agree to pay the
above Total Amount
according to Card
Issuer Agreement.
THANK YOU
HAVE A NICE DAY

State of South Dakota - Office of Attorney General

VOUCHER

AD

EMPLOYEE EXPENSE WORKSHEET 1

EWS-1T

NEXT FUNCTION: _____ ACTION: _____ 11/02/2023 10:28:56

REQUEST: _____

EMP VOUCHER NBR _____ 2294-358 DATE: 11/02/2023 MODEL: P _____ US
 EMP SHORT NAME JACLEYMARTIN7 JACLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER _____ FLSHR CM/DM : I
 TRAVEL BEG DATE: 10/25/2023 APPROVAL NBR. _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 11/02/2023 DO NOT USE : _____
 REMIT MSO: _____ TRAVEL 10/25/23-10/29/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CD	ACCOUNT	CENTER	PROG-CD	NUMBER
0001	240.00	00	001	1000 52041500	2900000		
							OVER NIGHT PER DIEM N N N N
0002			001	1000 52031400	2900000		
							NOK OVERNITE PERDIEM N N N N
0003	140.57	02	001	1000 52040200	2900000		
							MILEAGE @ .38 N N N N

GROSS AMOUNT: 380.57

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Claimant

Date



11/02/23

Authorization

Date

Willie Buechner

Lasernote

Authorization

Date

11/2/23

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL
Office of Attorney General

Invoice ID - Finance Office Use Only
224-358

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		2900000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc Expense	
		Leave	Return				Overnight	Non-Overnight		
10/25	Pierre - Sioux Falls	7:00 AM		Personal-High	226	\$115.26		No Claim	No Claim	
10/26	Sioux Falls						↑	\$40.00	No Claim	
10/27	Sioux Falls						↑	\$20.00	Direct billed	
10/28	Sioux Falls						↑	\$20.00	Direct billed	
10/29	Sioux Falls - Pierre		2:00 PM		226	\$115.26	↑	\$20.00		
	10/27 Not Claiming Dinner									
	10/28 Not Claiming Dinner									
Subtotals					452	\$230.52	100.00	\$100.00	\$0.00	\$0.00

Purpose of Travel: _____
LECC/Meetings/City of SF Public Safety Campus Opening

GRAND TOTAL \$330.52
AMOUNT REIMBURSABLE \$330.52

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief, is in all things true and correct.

[Signature] 10-31-23 Claimant Date
[Signature] 10-31-23 Authorization Date

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General
NOV 01 2023

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET I EWS-1T

NEXT FUNCTION: _____ ACTION: _____ 11/14/2023 11:56:59
 REQUEST: _____

EMP VOUCHER NBR: _____ 2254-ER4 DATE: 11/09/2023 MODEL: D _____ LS
 EMP SHORT NAME: JACKLEYMARTINE JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: _____ PIERRE CM/OM: _____
 TRAVEL RES DATE: 11/07/2023 APPROVAL NBR: _____ MULTI SYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 11/14/2023 DO NOT USE: _____
 REMIT MSG: TRAVEL_11/07/23 11/09/23

SIGNATURE APPR CD: _____

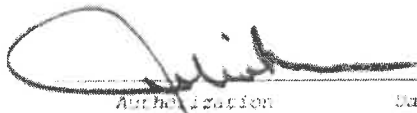
LINE	AMOUNT/PERCENT	EXP. CD	ACCOUNT	CENTER	PROG-CD NUMBER
0001	58.00	001	1000 52041500	2900000	
			OVER NIGHT PER DIEM	N	N N N
0002	14.00	001	1000 52031400	2900000	
			NON OVERTIME PERDIEM	N	N N N
0003	204.00	001	1000 42000300	2900000	
	40%		MILEAGE @ .51	N	N N N
0004					

TOTALS AMOUNT: 372.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

Claimant

Date


 Julie
 (Julie Beacher)
 Authorization

11/14/23

Date

Lasenfiche


 Kelly Beth
 Authorization

Date

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-384

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
11/7	Pierre - Rapid City - Deadwood	8:00 AM		Personal-High	212	\$106.12	\$34.00		No Claim	
11/8	Deadwood - Pierre		5:00 PM	Personal-High	188	\$95.88	\$20.00			
11/9	Pierre - Sioux Falls - Huron - Pierre	6:00 AM	6:00 PM	State				\$14.00		
Subtotals					400	\$204.00	\$54.00	\$14.00	\$0.00	\$0.00

Purpose of Travel: Meeting in RC and then Drug Court Conference, LET Graduation and meeting

AMOUNT REIMBURSABLE \$272.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

[Signature] 11-13-23
Claimant Date

[Signature] 11-13-23
Authorization Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General

NOV 13 2023

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET

6WS-11

NEXT FUNCTION: _____ ACTION: _____ 12/14/2023 11:48:00
 REQUEST: _____

EMP VOUCHER NBR: _____ Z294-443 DATE: 12/12/2023 MODEL: P _____ LS
 EMP SHORT NAME : JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/CM : I
 TRAVEL PER DATE: 12/12/2023 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 12/14/2023 DO NOT USE : _____
 REMIT MGR: TRAVEL 12/12/23

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CO NUMBER
DEL				001 1000 52031000	2900000	
				OVER_NIGHT_PER_DIEM	N N N N	
DEL				001 1000 52031400	2900000	
				NON_OVERNITE_PER_DIEM	N N N N	
0004	81.60	001	1000	52040000	2900000	
				MILEAGE_W_51	N N N N	
0004						
						\$
GROSS AMOUNT:						81.60

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

 Claimant Date
 _____ 12/14/23
 Authorization Date
 (Julie Busch) _____
 _____ 12/14/23
 Authorization Date

Lasertech

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only

2294-443


Name		Employee ID		Center Code			Home Station		
Marty Jackley		[REDACTED]		2900000			Pierre		
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense
		Leave	Return				Overnight	Non-Overnight	
12/12	Pierre - Aberdeen - Pierre *only claiming mileage one way	9:30 AM	5:30 PM	Personal-High	160	\$84.80 81.60			
Subtotals					160	\$84.80 81.60	\$0.00	\$0.00	\$0.00

Purpose of Travel: _____
Speaking engagement to homeschool kids

GRAND TOTAL ~~\$84.80~~
AMOUNT REIMBURSABLE 81.60
~~\$84.80~~

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief, is in all things true and correct.

 12-13-23
Claimant Date

 12-13-23
Authorization Date

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

State of South Dakota - Office of Attorney General

VOUCHER

AF: EMPLOYEE EXPENSE WORKSHEET 1 EWS-17

NEXT FUNCTION: ACTION: 01/08/2024 09:49:29

REQUEST: _____

 EMP VOUCHER NBR: 2294-472 DATE: 01/04/2024 MODEL: P LS
 EMP SHORT NAME: JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: PIERRE CM/DM : 1
 TRAVEL BEG DATE: 01/03/2024 APPROVAL NBR: MULTI PYMT: N
 TERMS CODE: PYMT DUE DATE: 01/08/2024 DO NOT USE : _____
 REMIT MSG: TRAVEL 01/03/24-01/04/24

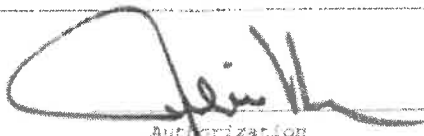
SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CO NUMBER
YAT	QUANTITY	UNIT	ITEM	NUMBER	ITEM DESCR	PRORATE (T F A D) USE 99 1'RC
0001	43.52	001	1000	52031500	2900000	
					OVER_NIGHT_PER_DIEM	N N N N
DEL		001	1000	52031400	2900000	
					NON_OVERNITE_FERDIEM	N N N N
DEL		001	1000	52030200	2900000	
					MILEAGE @ .28	N N N N
0004						
					GROSS AMOUNT	43.52

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct

Signature

Date

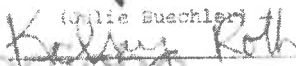


01/08/24

Authorization

Date

(Willie Suechler)



1/8/24

Authorization

Date

Lasernet

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-472

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
1/3	Pierre - Watertown	1:30 PM					\$23.00		Direct	
1/4	Watertown - Pierre		4:30 PM				\$20.92			
01/03 Dinner Receipt \$23.00 01/04 Lunch Receipt \$14.92 $+ \frac{6.00}{20.92}$										
Subtotals					0	\$0.00	\$43.92	\$0.00	\$0.00	\$0.00

Purpose of Travel: State v. Peacemaker Hearing

AMOUNT REIMBURSABLE **\$43.92**

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

[Signature]
Claimant

1-5-24
Date

[Signature]
Authorization

1-5-24
Date

Employee Out of State Travel Checklist	
1 OOS Travel Authorization	
2 Itinerary or tickets	
3 Luggage/parking receipts	
4 Taxi, Uber, Car rental receipts	
5 Lodging receipts with zero balance	
6 Agenda showing meals provided	

Authorization Date

Attorney General

JAN 08 2024

Laserfiche

Finance

Minerva's
Restaurant and Bar
1901 AVE GN
WATERTOWN, SD 57201

Server: Hannah
07:13 PM
Table: 16/2

01/03/2024
3/30018

SALE

Approval: 816157

Amount: \$20.35
+ Tip: 3.00
= Total: 23.35

I agree to pay the above
total amount according to the
card issuer agreement.

x

Thank you again,
Laserfiche

Dagwoods Subs

180 4th St NE
Waterloo, SD 57201
605-3668566

355537

DUPLICATE

Receipt #
01/04/2024
12:00 PM
Sale Num: 358898



Total \$ 13.56

Tip \$1.36

Total \$14.92

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOIDED)

X

Guest Copy

Thank You!

State of South Dakota - Office of Attorney General
VOUCHER

AE

EMPLOYEE EXPENSE WORKSHEET 1

EPS 11

NEXT FUNCTION: _____ ACTION: _____ 01/26/2024 13:12:09

REQUEST: _____

EMP VOUCHER NBR: _____ 0094 EXP DATE: 01/22/2024 MODEL: P _____ 1S
 EMP ASSET NAME: JACKLEYMARTIN, JACKLEY, MARTIN C CURR _____
 EMPLOYEE NUMBER: _____ PIERRE CM/EM : 1
 TRAVEL BEG DATE: 01/22/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ BYMT DUE DATE: 01/26/2024 DO NOT USE: _____
 SEMI MSC: TRAVEL 01/22/24

SIGNATURE AREA CD: _____

LINE	AMOUNT/PERCENT	EXP CO	ACCOUNT	CENTER	PROJ-CO NUMBER
001		001 1001	52031500	200000	
				OVERNIGHT PER DIEM	N N N N
002	20.00	001 1001	52031500	200000	
				NON-OVERNIGHT PERDIEM	N N N N
003		001 1000	52031500	200000	
				MEAL	N N N N
GROSS AMOUNT:					20.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Date: 01/26/24
 Signature: *[Handwritten Signature]*
 Title: *[Handwritten Title]*
 Date: 01/26/24
 Signature: *[Handwritten Signature]*
 Title: *[Handwritten Title]*
 Date: 01/26/24

Laserfiche

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General


Invoice ID - Finance Office Use Only
2294-509


Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
1/22	Pierre - Sioux Falls - Pierre	7:00 AM	5:00 PM				\$20.00			
ONLY REIMBURSING FOR DINNER										
Subtotals:					0	\$0.00	\$0.00	\$20.00	\$0.00	\$0.00

Purpose of Travel: Press stops and Rotary Club

GRAND TOTAL \$20.00
AMOUNT REIMBURSABLE \$20.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Claimant
Date: 1-25-24

 Authorization
Date: 1-26-24

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General
Authorization Date

JAN 25 2024

Finance

State of South Dakota - Office of Attorney General
VOUCHER

AF EMPLOYER EXPENSE WORKSHEET SWS-ET

NRXT FUNCTION: ACTION: 01/30/2024 10:45:18

REQUENT:

EMP VOUCHER NO: 2024-019 DATE: 01/28/2024 MODEL: P
 EMP SHORT NAME: JACINBYMARTINE JACKLEY, MARTIN C CTR:
 EMPLOYEE NUMBER: PIERRE CM/DM
 TRAVEL BEG DATE: 01/27/2024 APPROVAL NR: MULTI PYM: N
 TERM CODE: PYMT DUE DATE: 01/30/2024 DO NOT USE
 REMIT MSG: TRAVEL 01/27/24-01/28/24

SIGNATURE APPROVED:

LINE	AMOUNT/PERCENT	EXT	CO	ACCOUNT	CENTER	PRORATE (T F A D)	USE 99 1 1 0
000	44.92	001	1000	52031500	2900000		
				OVER NIGHT TRP DTRM	N N N N		
001		001	1000	52031400	2900000		
				NON_OVERNITE_TRANSP	N N N N		
000	230.52	001	1000	52030300	2900000		
	402			MILEAGE @ .50	N N N N		
000							
				GROSS AMOUNT			274.52

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

Claimant

Date

Authorization

Date

Julie Kuechler

1/30/24

Authorization

Date

Laserfiche

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-519

Name		Employee ID		Center Code			Home Station				
Marty Jackley		[REDACTED]		2900000			Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense	
		Leave	Return				Overnight	Non-Overnight			
1/27	Pierre - Sioux Falls	1:30 PM		Personal-High	226	\$115.26	\$20.00			Direct Bill	
1/28	Sioux Falls - Pierre		12:30 PM	Personal-High	226	\$115.26	\$24.00				
Receipt for Breakfast \$24.00											
Subtotals					452	\$230.52	\$44.00	\$0.00	\$0.00	\$0.00	

Purpose of Travel: _____
 Emily's Hope

GRAND TOTAL \$274.52

AMOUNT REIMBURSABLE \$274.52

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature]
Claimant

1-29-24
Date

[Signature]
Authorization

1-29-24
Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____

Attorney General

JAN 29 2024

Finance

Holiday Inn Sioux Falls
Restaurant
100 West 8th Street
Sioux Falls, SD 57104
(605) 339-2000
1/26/2024 9:50 AM

TABLE# 30
SERVER 3002/Sara
CHECK# 15980

Trans Time : 01/26/2024
09:50 AM



AMOUNT : USD \$21.44
Tip : 3.00
Total : 24.44

*** CUSTOMER COPY ***
**Only Invoice
Available**

A 3% convenience fee will be added
to all credit card payments.

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AF

EMPLOYEE EXPENSE WORKSHEET

PRG 17

NEKT FUNCTION: _____ ACTION: _____ 02/06/24 14:28:29

REQUEST: _____

 EMO VOUCHER NBR: _____ 143821 DATE: 02/05/2024 MODEL: F _____ GS
 EMP SHORT NAME : JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/DM : I
 TRAVEL REG DATE: 02/04/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 02/06/2024 DO NOT USE : _____
 REMIT MSO: TRAVEL_02/04/24 02/05/24

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXT	CO	ACCOUNT	REMARKS	TR	E	A	DI	USE	BY	DATE
0591	41.46	001	1000	52011500	OVERNIGHT FEES	N	N	N	N			
					NON OVERNITE PERDIEM	N	N	N	N			
061		001	1000	52011400	MILEAGE @ .36	N	N	N	N			
081		001	1000	52030200		N	N	N	N			
											CROSS AMOUNT:	41.46

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Claimant

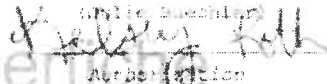
Date



02/06/24

Authorizator

Date



Authorizator

Date

Lasentech

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only

2294-533

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		2900000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
2/4	Pierre - Sioux Falls	5:00 PM		State					Direct Bill	
2/5	Sioux Falls - Flandreau - Sioux Falls - Pierre		4:30 PM	State			\$31.46			
Receipt for Lunch \$25.46										
Subtotals					0	\$0.00	\$31.46	\$0.00	\$0.00	\$0.00

Purpose of Travel: _____
 Initial Appearance State v. Hoek Meeting with Sanford

AMOUNT REIMBURSABLE \$31.46

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

 _____
 Claimant Date 2-6-24

 _____
 Authorization Date 2-6-24

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi/Uber/Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General

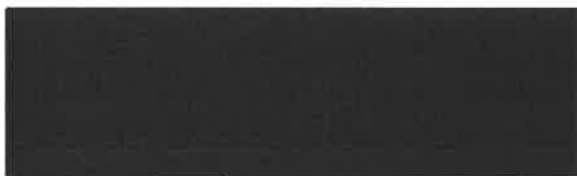
FEB 06 2024

* MACKENZIE RIVER PIZZA *
236 S Main Ave
Sioux Falls, SD 57104

Server: JP
12:21 PM
Table 54/4

DOB: 02/05/2024
02/05/2024
5/50015

SALE



Approval: 612903

Amount: \$22.46

+ Tip: 3.00

+ Round It Up America: _____

= Total: 25.46

I agree to pay the above
total amount according to the
card issuer agreement.

X _____

Help Support These
impactful Charities by
Rounding up on your
credit card receipt:
FEEDING AMERICA
FOLDED FLAG FOUNDATION
GRG R. I. S. E.

CUSTOMER COPY

**Only Invoice
Available**
Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET EWS 1F

NEXT FUNCTION: _____ ACTION: _____ 02/14/2024 09:23:24
 REQUEST: _____

EMP VOUCHER NBR: _____ Z294 546 DATE: 02/09/2024 MODEL: P _____ JACKLEY
 EMP SHORT NAME : JACKLEYMARTIN JACKLEY, MARTIN J CURR: _____
 EMPLOYEES NUMBER: _____ PIERRE CM/DM : I
 TRAVEL BEG DATE: 02/08/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 02/14/2024 OO NOT USE : _____
 REMIT MSG: _____ TRAVEL 02/08/24 - 02/09/24

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROG-CD	NUMBER
VAT	QUANTITY UNIT	ITEM NUMBER	ITEM DESCR	PRORATE (T F A D)	USE 98 1'RC		
0001	76.12	001	1000	52031000	2900000		
				OVER_NIGHT_PRR_DIEM	N N N N		
DEL		001	1000	52031400	2900000		
				NON_OVERNITE_PRRDIEM	N N N N		
DEL		001	1000	52030300	2900000		
				MILEAGE @ .28	N N N N		
0304							
						GROSS AMOUNT:	76.12

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief, is in all things true and correct

Claimant

Date



02/14/24

Authorization

Date

(Julie Buchheit)



2/14/24

Authorization

Date

Lasernet

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL
Office of Attorney General

Invoice ID - Finance Office Use Only
2294-546

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
2/8	Pierre - Madison - Sioux Falls	8:00 AM					\$34.00	/	Direct Billed	
2/9	Sioux Falls - Flandreau - Pierre		6:25 PM				\$42.12	/		
2-9 Lunch Receipt \$36.12										
* B. Kempema drove AG Pickup										
Subtotals					0	\$0.00	\$76.12	\$0.00	\$0.00	\$0.00

Purpose of Travel: _____
Funeral for Prorok: State v. Hoek Grand Jury

GRAND TOTAL \$76.12
AMOUNT REIMBURSABLE \$76.12

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Marty Jackley Claimant 2-12-24 Date [Signature] Authorization 2-13-24 Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____
Attorney General
FEB 13 2024
Finance

Walk JJ's Coffee Spot

108 N WIND ST
FLANDREAU
South Dakota 570281245
6055730940

Open Date & Time: 09-Feb-2024 12:35 PM
Close Date & Time: 09-Feb-2024 12:35 PM
Customer: Walkin

ORDER SUMMARY

ITEM	PRICE	QTY	AMOUNT
Cop Bowl	7.00	3	21.00
Pop	2.39	3	7.17

Sub-Total: \$ 28.17

TAX SUMMARY

TYPE	RATE	AMOUNT
Default	7.200	2.03

Total-TAX: \$ 2.03
CHECK TOTAL: \$ 30.20
TIP: \$ 4.71
TOTAL: \$ 36.12

Thank you for supporting JJ's Coffee Spot!

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET 1 ERN-17
 NEXT FUNCTION: ACTION: 03/12/2024 12:08:05
 REQUEST

EMP VOUCHER NBR: 2294-187 DATE: 03/06/2024 MODEL: P JACKLEY
 EMP SHORT NAME: JACKLEYMARTINI JACKLEY, MARTIN C CURR:
 EMPLOYEE NUMBER: ██████████ PIERRE CK/DM : I
 TRAVEL BEG DATE: 02/18/2024 APPROVAL NBR: MULTI FYMT: N
 TERMS CODE: FYMT END DATE: 03/12/2024 DT NOT USE :
 REMIT M33: TRAVEL 02/18/24 - 03/06/24

SIGNATURE APPRO ID:

LINE	AMOUNT/PERCENT	EXP	CD	ACCOUNT	CENTER	PROJ	CO	NUMBER
0001	597.81	001	1000	52031500		2900000		
				OVER_NIGHT_PER_DIEM		N	N	N
0002	14.00	001	1000	52031400		2900000		
				NON_OVERNITE_PERDIEM		N	N	N
0003		001	1000	52000300		2900000		
				MILEAGE w/ VEH		N	N	N
0004								
ORDER AMOUNT:								611.81

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

Claimant: _____ Date: _____
 Approver:  Date: 03/12/24
 Approver:  Date: 3/12/24
 Approver: _____ Date: _____

Lasernet

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-587

Name		Employee ID		Center Code		Home Station					
Marty Jackley		[REDACTED]		2900000		Pierre					
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc. Expense	
		Leave	Return				Overnight	Non-Overnight			
2/18	Pierre - Elk Point - Pierre	7:00 AM	3:30 PM	State			\$14.00				
2/20	Pierre - Watertown	3:00 PM		State			\$21.85		Direct Billed		
2/21	Watertown						\$40.00		Direct Billed		
2/22	Watertown - Pierre		5:00 PM	State			\$20.00				
2/25	Pierre - Watertown	2:00 PM		State			\$20.00		Direct Billed		
2/26	Watertown						\$43.21		Direct Billed		
2/27	Watertown						\$40.00		Direct Billed		
2/28	Watertown						\$40.00		Direct Billed		
2/29	Watertown						\$50.37		Direct Billed		
3/1	Watertown - Sioux Falls						\$40.00		Direct Billed		
3/2	Sioux Falls						\$41.53		Direct Billed		
3/3	Sioux Falls - Watertown						\$40.45		Direct Billed		
3/4	Watertown						\$42.35		Direct Billed		
3/5	Watertown						\$40.00				
3/6	Watertown - Pierre		2:00 PM				\$20.00				
	0/26 Dinner Receipt \$23.21										
	02/29 Dinner Receipt \$30.37										
	03/02 Lunch Receipt \$15.53										
	03/03 Lunch Receipt \$19.68										
	03/03 Dinner Receipt \$22.82										
	03/04 Dinner Receipt \$22.35										
					Subtotals	0	\$0.00	507.81	\$14.00	\$0.00	\$0.00
								GRAND TOTAL			\$621.76

Purpose of Travel:
Funeral, Peacemaker Trial

AMOUNT REIMBURSABLE
521.81

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Marty Jackley Claimant Date **3-11-24**

[Signature] Authorization Date **3-11-24**

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General
MAR 11 2024

Lone Pine Bar and Grill
2647 30th Ave SE
Watertown, South Dakota
605-878-4227

Server: Harll
Ticket: 2402200103
Table: Dining room;B6
Inv: 50

02/20/2024
8:24 PM
Server:



Total: 19.85

Only Invoice Available

+ Tip: 2.00

- Final Total: 21.85

X 
JACKLEY/MARTIN J.

I agree the amount above is correct and
to comply with my cardholder agreement

Merchant copy

Laserfiche

Handwritten signature

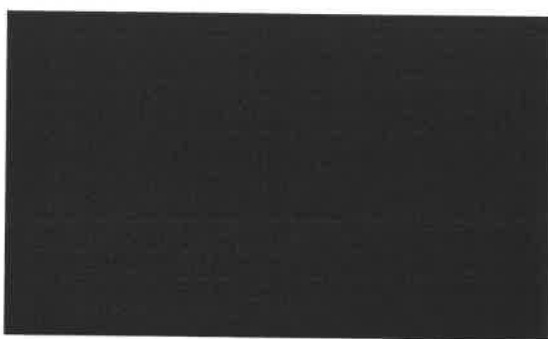
Buffalo Wild Wings
Store #3569 - Water town
2708 9th Ave SE

505 370-3777

Server: Ben J.P.
07:10 PM
Table: 2407

DOB: 02/26/2024
02/26/2024
4,400.47

Safe



Receipt #: 147953

Only Invoice Available

Amount: 110.57 (2)

+ Tip: 3

Total: 23.57

X

CARDHOLDER/VISA

Join our team.

CUSTOMER COPY

Jeffrey
JEFFREY'S
101 W SAINT MARY STREET
KRANZBURG, SD 57245
(605)886-9812

02/29/2024 19:52

Sale

Trans #: 4 Batch #: 403

BASE AMT: USD \$26.37

TIP AMT: \$ 4⁰⁰

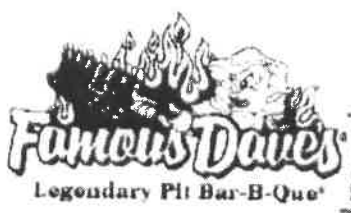
TOTAL AMT: USD \$ 30³⁷

Only Invoice
Available
THANK YOU!

CUSTOMER COPY

Use only for

Lunch



Only Invoice Available

Famous Dave's #3012
2700 S Minnesota Ave
Sioux Falls, SD 57105
605-334-8800

1285 Corey

CHK 37392 TBL 15/1
 GST 1
3/2/2024 12:17 PM

Dine In

1 ICE TEA - UNSWEET 3.00
1 L BRISKET SAND 11.49

Food \$11.49
NA Bev \$3.00
Food Tax \$1.04
Total Due \$15.53

Like Free Food?



3187061608170

Scan the barcode or QR code on your receipt!

You'll earn a \$10 reward
Not a member?
Not a member?
Sign up at famousdaves.com/rewards

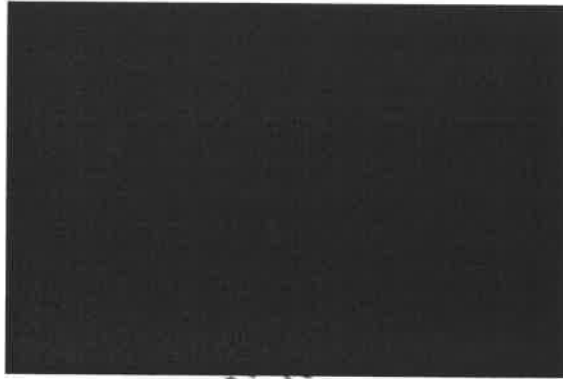
Buffalo Wild Wings
Store #3569 - Latertown
2708 9th Ave SE

605-678-5177

Server: Kerrigan
02:06 PM
Table 424/1

DOB: 05/03/2024
~~05/03/2024~~
6760056

Sale



On AV

Approval: 327741

Amount:: USD \$17.60

+ Tip:: 2.00

= Total:: 19.68

19.68

x

JACKLEY MARTIN J

Join our team.

Custom Copy

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

EWS 17

NEXT FUNCTION: _____ ACTION: _____ 03/18/2024 09:43:10

REQUEST: _____

=====

EMP VOUCHER NBR: _____ K284-613 DATE: 03/13/2024 MOBILE: P _____ JACKLEY
 EMP SHORT NAME: JACKLEYMARTINJ JACKLEY, MARTIN J CIRS. _____
 EMPLOYER NUMBER: _____ PIERRE CM/DM : I
 TRAVEL REQ DATE: 03/13/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 03/18/2024 DO NOT USE : _____
 REMIT NBR: _____ TRAVEL: 03/13/24

SIGNATURE AFTER CR: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROT-CD	NUMBER
001		001	1000	52001800			2900000
						OVER NIGHT PER DIEM	N N N N
002	17.80	001	1000	52001400			2900000
						NON OVERTIME PERDIEM	N N N N
003		001	1000	52000100			2900000
						MILEAGE @ .50	N N N N
004							
						GROSS AMOUNT:	17.80

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Claimant Date

 Authorization Date 03/18/24

 13010 Buschle
 Authorization Date 3/18/24

Lasemong

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only

2294-613

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		2900000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense
		Leave	Return				Overnight	Non-Overnight		
3/13	Pierre - Flandreau - Pierre	7:00 AM	4:15 PM					\$17.86		
	03/13 Lunch receipt									
Subtotals				0	\$0.00	\$0.00	\$17.86	\$0.00	\$0.00	\$0.00

Purpose of Travel: Hearing State v. Hoek

GRAND TOTAL \$17.86

AMOUNT REIMBURSABLE \$17.86

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature] Claimant 3-15-24 Date

[Signature] Authorization 3-15-24 Date

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____

Attorney General

MAR 15 2024

JJ's Coffee Spot

108 N WIND ST
FLANDREAU
South Dakota 570281245
6055730940

Open Date & Time: 13-Mar-2024 12:13 PM

Close Date & Time: 13-Mar-2024 12:14 PM

Customer: Walkin

ORDER SUMMARY

ITEM	PRICE	QTY	AMOUNT
BROILED CHICKEN WRAP	11.25	1	11.25
Soup	2.39	1	2.39

Sub-Total: \$ 13.64

TAX SUMMARY

TYPE	RATE %	AMOUNT
Default	7.200	0.98

Total TAX: \$ 0.98

CHECK TOTAL: \$ 14.62

TOTAL: \$ 15.20

Thank you for supporting JJ's Coffee Spot!

Laserrichte

JJ's Coffee Spot

108 N WIND ST
FLANDREAU
South Dakota 570281245
6055730940

Open Date & Time: 13-Mar-2024 12:14 PM
Close Date & Time: 13-Mar-2024 12:14 PM
Customer: Walkin

ORDER SUMMARY

ITEM	PRICE	QTY	AMOUNT
Pop	2.39	1	2.39
Sub-Total:			\$ 2.39

TAX SUMMARY

TYPE	RATE %	AMOUNT
Default	7.200	0.17
Total TAX:		\$ 0.17
GROSS TOTAL:		\$ 2.56
TOTAL:		\$ 2.56

Thank you for supporting JJ's Coffee Spot!

Laszlofiche

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

EKS 17

NEXT SECTION: ACTION 04/09/2024 14:00:01

REQUEST:

EMP VOUCHER NBR: 2024-654 DATE: 04/04/24 MODEL: F JACKLEY
 EMP SHORT NAME: JACKLEYMARTIN JACKLEY, MARTIN J CTR:
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/DM: 1
 TRAVEL BEG DATE: 04/04/2024 APPROVAL NBR: MULTI PYMT: N
 TERMS CODE: PYMT DUE DATE: 04/09/2024 DO NOT USE:
 PERMIT MSG: TRAVEL 04/04/24 04706124


SIGNATURE APPR CD:

LINE	AMOUNT/PERCENT	EXT	CC	ACCOUNT	ENTER	REQD CD NUMBER
000	100.00	000	1000	52000300	200000	
				OVERNIGHT_FEE_UCEM	N N N N	
000	60.00	000	1000	52000300	200000	
				NON_OVERNITE_FERDIAK	N N N N	
000	191.72	000	1000	52000300	200000	
				MILEAGE_4_51	N N N N	
000						
				GROSS AMOUNT		462.72

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Claimant

Date

 04/09/24

Authorization

Date

Requester



4/1/24

Authorization

Date

Lasertec

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-668


Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
4/4	Pierre - Aberdeen - Pierre	6:30 AM	5:03 PM	Personal-High	320	\$163.20		\$55.06	-	
4/5	Pierre - Sioux Falls - Pierre	9:15 AM	7:00 PM	Personal-High	452	\$229.02 231.52		\$14.00	-	
04/04 lunch receipt										
					452 x .51 = 231.52 DD					
					393.72					
Subtotals					772	\$293.72	\$0.00	\$59.06	\$0.00	\$0.00

Purpose of Travel:
Speaking to Northern Students and meeting with Brown Co Sheriff, Chief of PD and State's Attorney,
SD College Republicans State Convention and media

GRAND TOTAL \$362.78
AMOUNT REIMBURSABLE **462.78**
\$362.78

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

 **4-9-24**
Claimant Date

 **4-8-24**
Authorization Date

1 OOS Travel Authorization	
2 Itinerary or tickets	
3 Luggage/parking receipts	
4 Taxi, Uber, Car rental receipts	
5 Lodging receipts with zero balance	
6 Agenda showing meals provided	

Authorization Date
Attorney General
APR 08 2024
Finance

Lagers Inn
271 W 3rd Ave
Aberdeen, SD
605-229-1971

504008 Breakfast

Qty	Item	Price
	PK 1000	6.10
	12:57PM	
2	Coors 12.50	25.00
1	Mel. Coke	3.50
1	Deluxe Chzburger	11.95
	FF	
1	Bacon Lava Burgr	13.99
	Waffle Fries	
1	Hot Beef Pasta	3.99
	Subtotal	46.47
	Tax	2.59
01:22PM	Total	49.06

Tip + 6.00

55.06

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AP: _____ EMPLOYEE EXPRESS WORKSHEET: _____ EWR-11

NEXT FUNCTION: _____ ACTION: _____ 04/24/2024 08:33:24
 REQUISIT: _____

EMP VOUCHER NBR: _____ 2494 FLW DATE: 04/20/2024 MODEL: P _____ JACKLEY
 EMP SHORT NAME: JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: _____ PIERRE CM/EM : 1
 TRAVEL BSG DATE: 04/09/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ TRMT BEE DATE: 04/24/2024 DO NOT USE : _____
 BSM11 REC: TRAVEL_04/09/24_ 04/20/24

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CS	ACCOUNT	CENTER	PROJ/CO NUMBER
9001	124.28	001	1000	52031500	2970000	
				OVER_NIGHT_FER_NIEM	N N N N	
1000	21.24	001	1000	52031400	2970000	
				NON_OVERNTE_FER_NIEM	N N N N	
9002	422.28	001	1000	52030100	2900000	
				MILEAGE @ .51	N N N N	
9004						
						GROSS AMOUNT: 567.84

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Claimant Date
 _____ 04/24/24
 Authorization Date
 Julie Suechler
 _____ 4/24/24
 Authorization Date
 Laserfiche

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL
Office of Attorney General**

Invoice ID - Finance Office Use Only
2294-712


Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		2900000		Pierre				
Dates Mo/Day	Description of Travel, Destination and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense
		Leave	Return				Overnight	Non-Overnight		
4/9	Pierre - Deadwood - Pierre	5:30 AM	5:00 PM	Personal-High				\$23.28		
4/15	Pierre - Deadwood	4:00 PM		Personal-High	188	\$95.88	\$20.00			Direct Bill
4/16	Deadwood						\$64.08			Direct Bill
4/17	Deadwood - Pierre		4:00 PM	Personal-High	188	\$95.88	\$20.00			
4/19	Pierre - Sioux Falls	2:30 PM		Personal-High	226	\$115.26	No Claim			Direct Bill
4/20	Sioux Falls - Pierre		3:00 PM	Personal-High	226	\$115.26	\$20.00			
04/09 Lunch Receipt \$17.28										
04/16 Lunch Receipt \$17.01										
04/16 Dinner Receipt \$41.07										
Subtotals					828	\$422.28	\$124.08	\$23.28	\$0.00	\$0.00


Purpose of Travel: Sex Offender Registry Conference, LEOSTC Meeting and 2024 SD Chiefs and Sheriffs Conference, Crime Stoppers Shred Event and News Media Association on Open Meetings and Open Records

GRAND TOTAL \$569.64

AMOUNT REIMBURSABLE \$569.64

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Claimant
4-22-24 Date

 Authorization
4/22/24 Date

Employee Out of State Travel Checklist	
1. DOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

Attorney General

APR 22 2024

Finance

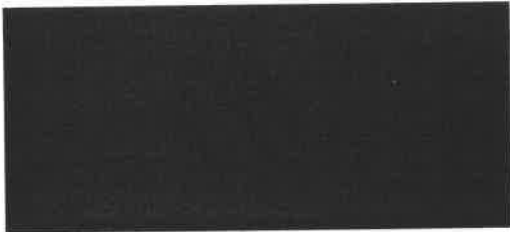


Loud American Roadhouse
1005 MAIN ST
Sturgis, SD 57785

Server: Tom K
Check #27 Table 17
Guest Count: 6
Ordered: 4/9/24 12:48 PM



Time 12:49 PM



Amount \$15.28
+ Tip: 2.00
= Total: 17.28

x 
VISA CARDHOLDER

Join our loyalty program and earn 14 points for this order! Earn 1 point for every \$1 spent and unlock \$7 off every 100 points. By providing your contact information, you are agreeing to participate in the rewards program and be contacted by the restaurant.

Phone Number

Customer Copy

Powered by Toast

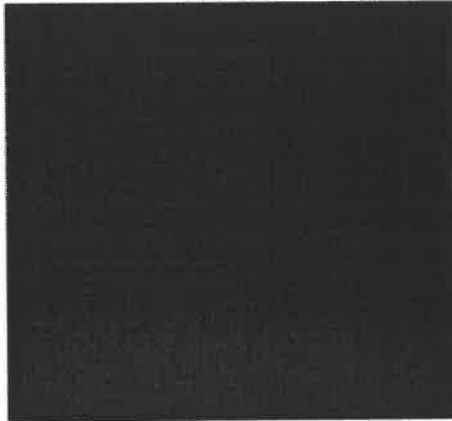
Laserfiche

The Lodge at Deadwood

100 Pine Crest Lane
Deadwood, SD 57732

Check # : 1621
Table # : 330/6
Employee : 2458 - Patty
16 Apr '24 15:00 PM

Trans Time : 04/16/2024 03:00 PM



Amount : USD \$15.01

Tip : 2

Total : 17.01

JACKLEY/MARTIN J

*** CUSTOMER COPY ***

I Agree to Pay the Above Total According
to Card Holder Agreement

04/16/2024

20:09

SALES TRAFF

Flyt
300 Main Street
Peabody, MA 01962

CASHIER: LINDA
TERMINAL: 101
PRN: 410054022120



AMOUNT: 41.07



TABLE: 16

CHECK: 103327

TOTAL: 41.07

TIP:

TOTAL:

41.07

x 
SIGNATURE

Merchant Code
Lasenciche

State of South Dakota - Office of Attorney General
VOUCHER

AP:

EMPLOYEE EXPENSE WORKSHEET 1

EMS 1T

NEXT FUNCTION: _____ ACTION: _____

05/08/2024 15:04:23

REQUEST: _____

EMP VOUCHER NBR: _____ Z294-795 DATE: 05/03/2024 MODEL: P _____ JACKLEY
 EMP SHORT NAME : JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: _____ PIERRE CM/DM : I
 TRAVEL BEG DATE: 04/23/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 05/08/2024 DO NOT USE : _____
 REMIT MSG: TRAVEL 04/23/24 - 05/03/24 SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CO NUMBER
MAI	QUANTITY	UNIT	ITEM NUMBER	ITEM DESCR	PRORATE (T F A D)	USE 99 I'RD
0001	102.89	001	1000	52031500	2300000	
				OVER_NIGHT_PER_DIEM	N N N N	
0002	17.50	001	1000	52031400	2300000	
				NON_OVERNITE_PERDIEM	N N N N	
0003	191.76	001	1000	52030100	2300000	
	376			MILEAGE @ .51	N N N N	
0004						
					GROSS AMOUNT:	312.15

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief is in all things true and correct

Claimant

Date



05/08/24

Authorization

Date

Multiple Voucher

5/8/24

Laserfiche

Authorization

Date

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2294-795


Name		Employee ID		Center Code			Home Station				
Marty Jackley		[REDACTED]		2900000			Pierre				
Dates Mo./Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense	
		Leave	Return				Overnight	Non-Overnight			
4/23	Pierre - Sioux Falls - Pierre	9:00 AM	2:30 PM	Personal-High				\$17.50			
5/1	Pierre - Deadwood	9:00 AM		Personal-High	188	\$95.88	\$20.00		Direct Bill		
5/2	Deadwood						\$62.89		Direct Bill		
5/3	Deadwood - Pierre		5:00 PM	Personal-High	188	\$95.88	\$20.00				
04/23 receipt for lunch \$17.50											
5/2 Dinner Receipt \$42.89											
Subtotals					376	\$191.76	\$102.89	\$17.50	\$0.00	\$0.00	

Purpose of Travel: _____
 Press Conference - Men's Prison Disturbance, State's Attorney Conference

GRAND TOTAL \$312.15

AMOUNT REIMBURSABLE \$312.15

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.


 Claimant Date 5-7-24


 Authorization Date 5/7/24

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____
 Attorney General
 MAY 07 2024
 Finance

Burger King
#16298



401 West Russell Street
Sioux Falls, SD 57104
605-215-5562

ORDER 7

DRIVE THRU - Lane 1

1	CHICKEN WHOPPER JR	8.58
1	*WHOPPER JR	
1	*SM FRY	
1	*SM COKE	
1	CHICKEN BURGER	7.29
1	*BAC CHS BURGER	
1	*MD FRY	
1	*MD DIET	

SUBTOTAL	16.32
7.2% TAX	1.18
TOTAL	17.50

BAGGING TICKET

EXPEDITOR RECEIPT

Survey Code: 19061-3701-53227-041816

=====

WHOPPER @ sandwich for your thoughts
www.mybckexperience.com

CHECK ON REVERSE FOR FOOD OFFER.

=====

Tue: Apr 23 2024 11:53 AM F=12L I=0 C=209

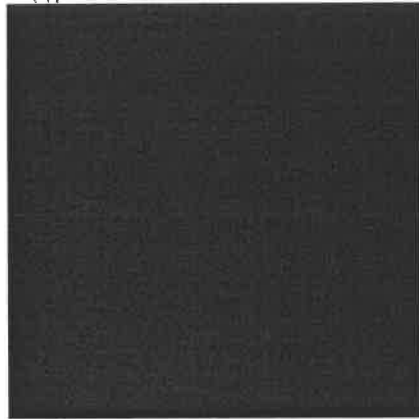
Turn Me Over Whopper! Turn Me Over Whopper! Turn Me Over Whopper!



709 Main Street
Deadwood, SD
605-578-3670

TABLE# 21.6
SERVER 7036/Bethany
CHECK# 4317

Trans Time : 05/02/2024 08:53
PM



Amount : USD 538.89
Tip : 4.00
Total : ~~40.00~~ 42.89

JACKLEY/MARTIN J
*** CUSTOMER COPY ***

Laserfiche

State of South Dakota - Office of Attorney General

VOUCHER

AF

EMPLOYEE EXPENSE MAINTENANCE 1

EMW-17

NEW FUNCTION: _____ ACTION: _____ 07/01/2024 15:22:36

REQUEST: _____

```

=====
PAY ENTITY      : EMPL                EMP SHORT NM : JACKLEYMARTINJ
EMP VCHER NBR: 2295-003 EMPLOYER NBR: ██████████   MULTI PYMT: W
TRVL RET DATE: 06/30/2024          DO NOT USE  : _____ .00   TERMS: _____
APPROVAL NBR : _____ TRAVEL BEGIN DATE : 06/05/2024    CM/EM : I
PYMT NBR: 001 PRTE PYMT NBR: 000 PYMT DUE DTS: 07/01/2024  GL EFF DT: 07/01/2024
PERM MESSAGE: TRAVEL_06/05/24_-_06/30/24
=====
    
```

LINE	AMOUNT	EXP	CO	ACCOUNT	CENTER	PROJ-OO	NUMBER	
	QUANTITY	UNIT	ITEM	NUMBER	ITEM DESCR	USE	1099	T'REC
0001	60.95	299	1000	52031500	2900000			
					OVER_NIGHT_PER_DIEM			
0002	14.81	299	1000	52031400	2900000			
					NON_OVERNITE_PERDIEM			
0003	147.43	299	1000	52033500	2900000			
					OOB_MHAL_PER_DIEM			
0004								
					GROSS AMOUNT:			352.19

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Claimant

Date



07/01/24

Authorization

Date

Julie Bushong

Lasertech



Authorization

Date

7/1/24

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2295-003

Name		Employee ID		Center Code			Home Station					
Marty Jackley		[REDACTED]		2900000			Pierre					
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense			
		Leave	Return				Overnight	Non-Overnight				
6/5	Pierre - Vermillion	2:00 PM		Personal-High			\$25.43	-	Direct Billed			
6/6	Vermillion - Lake Andes - Pierre		3:00 PM				\$20.00	-				
6/11	Pierre - Colorado Springs/Broadmore	6:15 AM					\$60.95	-	No Claim			
6/12	Colorado Springs/Broadmore						\$28.00	-	No Claim			
6/13	Colorado Springs/Broadmore						\$28.00	-	No Claim			
6/14	Colorado Springs/Broadmore						No Claim	-	No Claim			
6/15	Colorado Springs/Broadmore		11:59 PM				\$46.00	-				
6/20	Pierre - Flandreau - Pierre	7:00 AM	5:00 PM					\$14.81	-			
Subtotals							0	\$0.00	\$208.38	\$14.81	\$0.00	\$0.00

06/05 receipt for dinner \$25.43 ✓
 06/11 receipt for dinner \$42.95 ✓
 06/12 Not Claiming Dinner ✓
 06/13 Claiming Dinner ✓
 06/15 Not Claiming Breakfast ✓
 06/20 Lunch receipt \$14.81 ✓

147.43
60.95

Purpose of Travel: Girls State and meeting with Yankton Sioux Tribe, CWAG/AG Alliance Conference, State v. Hoek Hearing and meeting with FST

GRAND TOTAL \$223.19

AMOUNT REIMBURSABLE \$223.19

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature] Claimant **6-24-24** Date *[Signature]* Authorization **6/24/24** Date

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization
Attorney General

JUN 24 2024

Finance

Customer Copy

EST. 2016

— DAKOTA —
**BRICK
HOUSE**

FIRE-GRILL-TAP-PATIO

Check Number: 232121
Check Date: 06/05/24



Reference Number: 865134

Amount: \$22.43

Tip: 3.00

Total: 25.43

Laserfiche

JJ's Coffee Spot

1057 N WIND ST
FLANDREAU
South Dakota 570281245
6055730940

Open Date & Time: 20-Jun-2024 12:13 PM
Close Date & Time: 20-Jun-2024 12:14 PM
Customer: 9

ORDER SUMMARY

ITEM	PRICE	QTY	AMOUNT
Pop	2.39	1	2.39
ITALIAN	10.00	1	10.00
TORTILLA	0.00	1	0.00
SEA SALT	0.00	1	0.00

Sub-Total: \$ 12.39

TAX SUMMARY

TYPE	RATE %	AMOUNT
Default	7.200	0.89

Total-TAX: \$ 0.89
CHECK TOTAL: \$ 13.28
TIP: \$ 1.00
TOTAL: \$ 14.81

Thank you for supporting JJ's Coffee Spot!

Laserfiche

LUIGI'S RESTAURANT
947 S TEJICH ST
COLORADO SPRINGS CO 80903
719-632-7339

Terminal ID: 0000680
6/11/24 8:45 PM

SERVER # : 9



DESCRIPTION :
AMOUNT \$38.95
TIP \$ 4.00
TOTAL \$ 42.95

APPROVED

ARQC - 78REC1031REDD043E

CUSTOMER COPY

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AF EMPLOYEE EXPENSE WORKSHEET 1 EWS-1T

NEXT FUNCTION: _____ ACTION: _____ 07/15/2004 11:35:24
 REQUEST: _____

EMP VOUCHER NBR: _____ 2295-001 DATE: 07/09/2004 MODEL: P JACKLEY
 EMP SHORT NAME : JACKLEYMARTINO JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: _____ PIRRE CM/DM : I
 TRAVEL BEG DATE: 07/09/2004 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ FYMT DUE DATE: 07/15/2004 DO NOT USE : _____
 REMIT MSG: TRAVEL_07/09/24

LINE	AMOUNT/PERCENT	QTY	CO	ACCOUNT	CENTER	PROC-CO NUMBER
0001	34.00	299	1000	52031800	2900000	OVER_NIGHT_PER_DIEM N N N N
0002	230.37	289	1000	50000000	2900000	NON_OVERNITE_PERDIEM N N N N
0003	350					MILEAGE @ .005 N N N N
						GROSS AMOUNT: 264.37

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

 Claimant Date

 Authorization Date 07/15/24

 Authorization Date 7/15/24

Lasem

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only

2295-061

Name		Employee ID		Center Code		Home Station				
Marty Jackley				290000		Pierre				
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc Expense	
		Leave	Return				Overnight	Non-Overnight		
7/9	Pierre to Rapid City (1410 Central St)	9:00 AM		Personal-High	171	\$112.01				
7/9	1410 Central St to 2001 Skyline Dr			Personal-High	4	\$2.82				
7/9	2001 Skyline Dr to 315 St. Joseph St			Personal-High	3	\$1.97				
7/9	315 St. Joseph St to Pierre		11:00 AM	Personal-High	174	\$113.97		\$34.00		
				Subtotals	352	\$230.57	\$0.00	\$34.00	\$0.00	\$0.00
						GRAND TOTAL				\$264.57

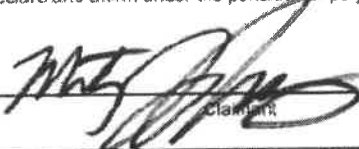
Purpose of Travel:

Press and Roetzel Investiture

AMOUNT
REIMBURSABLE

\$264.57

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.


Claimant

7/12/24
Date


Authorization

7/12/24
Date

Employee Out of State Travel Checklist:	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization

Date

Attorney General

JUL 15 2024

Finance

Laserfiche

State of South Dakota - Office of Attorney General
VOUCHER

AF EMPLOYEE EXPENSE WORKSHEET EWS-IT

NEXT FUNCTION: _____ ACTION: _____ 07/19/2024 11:45:54

REQUEST: _____

EMP VOUCHER NBR: 2295-072 DATE: 07/18/2024 MODEL: F JACKLEY
 EMP SHORT NAME : JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/DM : 1
 TRAVEL BEG DATE: 07/18/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 07/19/2024 DO NOT USE : _____
 REMIT MSG: TRAVEL 07/18/24

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PRORATE	(T F A D)	USE	99	TRC
001				52031500		2900000				
					OVER NIGHT PER DIEM			N	N	N
0001	17.01	299	1000	52031400		2900000				
					NON OVERNITE PERDIEM			N	N	N
001				52030300		2900000				
					MILEAGE @ .51			N	N	N
0004										
										GRAND AMOUNT: 17.01

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

Claimant _____ Date _____
 Author/Approver  Date 07/19/24
 Author/Approver  Date 7/19/24

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**
Office of Attorney General

Invoice ID - Finance Office Use Only

2295-072

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		290000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc Expense	
		Leave	Return				Overnight	Non-Overnight		
7/18	Pierre - Sioux Falls - Pierre	9:00 AM	3:30 PM					\$17.01		
	7/18 Lunch Receipt									
				Subtotals	0	\$0.00	\$0.00	\$17.01	\$0.00	\$0.00

Purpose of Travel: Carroll Press Conference

GRAND TOTAL \$17.01
AMOUNT REIMBURSABLE \$17.01

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature]
Claimant

7-18-24
Date

[Signature]
Authorization

7-18-24
Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____

Attorney General

JUL 18 2024

Finance

Minerva's
301 South Phillips Ave
Sioux Falls, SD 57104
605-334-0386

wait: ETTie DOB: 07/18/2024
43 PM 07/18/2024
HE 54/1 2/20003

SALE



Amount: \$15.01
+ Tip: 2.00
= Total: 17.01

I agree to pay the above
total amount according to the
card issuer agreement.

A handwritten signature in black ink, appearing to be a stylized 'N' or similar character.

Thank you! We look forward to
seeing you again soon!

Customer Copy

State of South Dakota - Office of Attorney General

VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

EWS-17

NEXT FUNCTION: _____ ACTION: _____ 08/12/2024 18:13:19
 REQUEST: _____

 EMP VOUCHER NBR: 2295-142 DATE: 08/09/2024 MODEL: V JACKLEY
 EMP SHORT NAME: JACKLEYMARTINJ JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] PIKRRR CM/DM: I
 TRAVEL BEG DATE: 08/08/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 08/12/2024 DO NOT USE: _____
 REMIT MSG: TRAVEL_08/08/24_-08/09/24
 SIGNATURE APPROVED: _____

LINE	AMOUNT/PERCENT	EXP	CC	ACCOUNT	CENTER	PROJ-CC NUMBER
VAT	QUANTITY UNIT	ITEM NUMBER	ITEM DESCR	PRORATE (T F A D)	USE BY	DTRC
0001	14.00	039 1000	52031500	2500000		
			OVERNIGHT PER DIEM	N N N N		
DEL		001 1000	52031400	2500000		
			NON OVERNITE PERDIEM	N N N N		
0003	229.26	295 1000	52030300	2900000		
	350		MILEAGE @ .055	N N N N		
0004						
				GROSS AMOUNT:	263.26	

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

Claimant _____ Date _____
 Authorization (Julie Buschley) _____ Date 08/12/24
 Lasemiro _____ Date 8/13/24

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**
Office of Attorney General

Invoice ID - Finance Office Use Only
2295-142

Name: **Marty Jackley** Employee ID: [Redacted] Center Code: **290000** Home Station: **Pierre**


Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc. Expense
		Leave	Return				Overnight	Non-Overnight		
8/8	Pierre - Sturgis	9:00 AM		Personal-High	175	\$114.63		\$34.00		
8/9			3:30 PM	Personal-High	175	\$114.63		No Claim		No Claim
				Subtotals	350	\$229.26	\$34.00	\$0.00	\$0.00	\$0.00

GRAND TOTAL \$263.26

AMOUNT REIMBURSABLE \$263.26

Purpose of Travel: Sturgis Rally

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

 Claimant
Date: **8-12-24**

 Authorization
Date: **8/12/24**

Employee Out of State Travel Checklist

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____

State of South Dakota - Office of Attorney General
VOUCHER

AP EMPLOYEE EXPENSE WORKSHEET 1 EWS-1T

NEXT FUNCTION: _____ ACTION: _____ 08/19/2024 10:07:43
 REQUEST: _____

EMP VOUCHER NBR: 2295-162 DATE: 08/13/2024 MODEL: V JACKLEY
 EMP SHORT NAME: JACKLEYMARTIN JACKLEY, MARTIN J CURR: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/DM : I
 TRAVEL BEG DATE: 08/13/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 08/19/2024 DO NOT USE : _____
 REMIT MSG: TRAVEL_08/13/24

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROG-CO NUMBER
VAT	QUANTITY	UNIT	ITEM NUMBER	ITEM DESCR	PROKATE (I F A D)	USE 19 L'RC
DEL			001	1000 52031500	2900000	
				OVERNIGHT PER DIEM	N N N N	
0002	14.00		200	1000 52031400	2900000	
				NON OVERNITE PERDIEM	N N N N	
DEL			001	1000 52030300	2900000	
				MILEAGE @ .655	N N N N	
0004						
						GROSS AMOUNT: 14.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

Claimant

Date

Julie Bush 08/19/24
 Authorization Date

Kathryn Roth 8/19/24
 Authorization Date

Lasernet

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2295-162

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		290000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
6/13	Pierre - Sioux Falls - Pierre	9:00 AM	4:15 PM				\$14.00			
				Subtotals	0	\$0.00	\$0.00	\$14.00	\$0.00	\$0.00

Purpose of Travel: AG Interviews

GRAND TOTAL \$14.00

AMOUNT REIMBURSABLE \$14.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature] Claimant 8-15-24 Date

[Signature] Authorization 8-15-24 Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date

State of South Dakota - Office of Attorney General
VOUCHER

AE EMPLOYEE EXPENSE WORKSHEET 1 EWS-IT

NEXT FUNCTION: ACTION: 08/25/2024 17:17:47

REQUEST:

BMP VOUCHER NBR: 2295-203 DATE: 08/20/2024 ADDR: V JACKLEY

BMP SHORT NAME: JACKLEYMARTINI JACKLEY, MARTIN J CURR:

EMPLOYEE NUMBER: [REDACTED] PIERRE CN/DM : 1

TRAVEL BEG DATE: 08/21/2024 APPROVAL NBR: MULTI PYMT: N

TERMS CODE: PYMT DUE DATE: 08/25/2024 DO NOT USE :


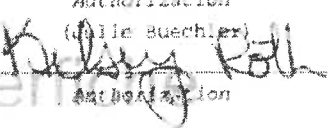
REMIT MSG: TRAVEL 08/20/24

SIGNATURE APPR CR:

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CC NUMBER
DEL		001	1000	52031500	2000000	
				OVERNIGHT PER DIEM	N N N N	
0000	20.00	200	1000	52031400	2000000	
				NON-OVERNITE FRNDLEM	N N N N	
DEL		001	1000	52030300	2000000	
				MILEAGE @ .650	N N N N	
0004						

GRAND TOTAL: 20.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct

Claimant: _____ Date: _____
 Authorization:  Date: 08/25/24
 Authorization:  Date: 8/26/24

Lasertech

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL
Office of Attorney General**

Invoice ID - Finance Office Use Only

2295-203

Name

Employee ID

Center Code

Home Station

Marty Jackley

290000

Pierre

Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc. Expense
		Leave	Return				Overnight	Non-Overnight		
8/20	Pierre/Rapid City/Pine Ridge/ Rosebud/Pierre	9:00 AM	9:30 PM					\$20.00		
Not Claiming Lunch										
Subtotals					0	\$0.00	\$0.00	\$20.00	\$0.00	\$0.00

Purpose of Travel:	meetings	GRAND TOTAL	\$20.00
		AMOUNT REIMBURSABLE	\$20.00

declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.


Claimant

8-23-24
Date


Authorization

8/23/24
Date

Employee Out of State Travel Checklist	
OOS Travel Authorization	
Itinerary or tickets	
Luggage/parking receipts	
Taxi, Uber, Car rental receipts	
Lodging receipts with zero balance	
Agenda showing meals provided	

Authorization:
Attorney General

Date

AUG 23 2024

Finance

State of South Dakota - Office of Attorney General
VOUCHER

AE EMPLOYEE EXPENSE WORKSHEET 1 EWS-11

NEXT FUNCTION: _____ ACTION: _____ 09/12/2024 08:47:08

REQUEST: _____

EMP VOUCHER NBR: _____ Z285-284 DATE: 09/10/2024 MODEL: V _____ JACKLEY

EMP SHORT NAME : JACKLEYMARTINO JACKLEY, MARTIN J CURR: _____

EMPLOYEE NUMBER: _____ PIERRE CM/DR _____

TRAVEL REQ DATE: 09/10/2024 APPROVAL NBR: _____ MULTI PYMT: N

TERMS CODE: _____ PYMT DUE DATE: 09/12/2024 DO NOT USE : _____

REMIT MSG: _____ TRAVEL_09/10/24

SIGNATURE APPR CD: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CD	NUMBER
VAC	QUANTITY UNIT	ITEM NUMBER		ITEM DESCR	PRORATE (T F A D)	USE	SS T SC
001		001 1000	52031500	OVERNIGHT_PER_DIEM	N N N N		
0012	14.00	001 1000	52031400	NON_OVERNITE_PERDIEM	N N N N		
001		001 1000	52030300	MILEAGE @ .655	N N N N		

GROSS AMOUNT: _____ 14.00

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

Claimant

Date

Julia

09/12/24

Authorization

Date

Julie Buechler

Kelsey Roth

9/12/24

Authorization

Date

Lasernet

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only
2295-253

Name: **Marty Jackley** Employee ID: [Redacted] Center Code: **290000** Home Station: **Pierre**

Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc. Expense		
		Leave	Return				Overnight	Non-Overnight				
9/10	Pierre - Sioux Falls - Pierre	8:15 AM	11:59 PM					\$34.00				
Subtotals							0	\$0.00	\$0.00	\$34.00	\$0.00	\$0.00

Purpose of Travel: **Meetings and Press**
GRAND TOTAL \$34.00

AMOUNT REIMBURSABLE **\$34.00**

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature]
Claimant

Sept 11, 24
Date

[Signature]
Authorization

9/11/24
Date

Employee Out of State Travel Checklist

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____

Attorney General

SEP 11 2024

State of South Dakota - Office of Attorney General
VOUCHER

AP: _____ EMPLOYEE EXPENSE WORKSHEET 1 EWS-UT
 NEXT FUNCTION: _____ ACTION: _____ 09/27/2024 10:27:52
 REQUEST: _____

EMP VOUCHER NBR: _____ X295-285 DATE: 09/20/2024 MODEL: V _____ JACKLEY
 EMP SHORT NAME: JACKLEYMARTIN JACKLEY, MARTIN J CURP: _____
 EMPLOYEE NUMBER: _____ PIERRE CM/DM: _____
 TRAVEL BEG DATE: 09/20/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ PYMT DUE DATE: 09/27/2024 DO NOT USE: _____
 REMIT MSG: TRAVEL 09/20/24

SIGNATURE APER CG: _____

LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CO NUMBER
DEL			001	1000 52031500		2900000
				OVERNIGHT_PER_DIEM	N	N N N
0002	34.00	001	1000	52031400		2900000
				NON_OVERNITE_PERDIEM	N	K N N
0003	358.29	001	1000	52030300		2900000
	547			MILEAGE @ .955	N	N N N
0004						
GROSS AMOUNT:						392.29

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct

 Claimant Date
 _____ 09/27/24
 Authorisation Date
 (Julie Buchler)
 _____ 9/30/24
 Authorisation Date
 Laserfiche

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only

2295-285

Name		Employee ID		Center Code		Home Station				
Marty Jackley		[REDACTED]		290000		Pierre				
Dates Mo/Day	Description of Travel Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc Expense
		Leave	Return				Overnight	Non-Overnight		
9/20	Pierre - Sioux Falls - Yankton - Pierre	6:30 AM	11:30 PM	Personal-High	547	\$358.29		34.00 \$40.00		
Subtotals:				547	\$358.29	\$0.00	34.00	\$0.00	\$0.00	\$0.00

Purpose of Travel
LET Graduation and Right To Life

GRAND TOTAL \$392.29
AMOUNT REIMBURSABLE \$392.29

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature] 9-24-24
Client Date

[Signature] 9-25-24
Authorization Date

1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General
SEP 25 2024
Finance

Handwritten: Dinner

APPLICBLE'S
RESTAURANT, BAR & BAKERY
200 S. 1st St.
4187 Hwy 10 97201
503-463-3504

JESSICA S TB#31
DATE 03-08-04 TIME 4:20 PM GUESTS 1
Check # 9967-151963



Available

We value your feedback

Get \$10 off your next \$40 visit
online or by restaurant
visit www.neighborfeedback.applcs.com
in the next 3 days & tell us about
your experience

To enter the survey, you will need
to use the matching code.

* Survey Code: 9967101519637 *

Amount:	19.82
Tip:	3.00
Total:	22.82

Cardholder agrees to pay total bill
with card and to accept governing
use of card (141)

** Guest Copy **

State of South Dakota - Office of Attorney General
VOUCHER

AE

EMPLOYEE EXPENSE WORKSHEET 1

EWS-17

NEXT FUNCTION: _____ ACTION: _____ 10/10/2024 08:31:15
 REQUEST: _____

EMP VOUCHER NBR: 2295-349 DATE: 10/01/2024 MODEL: V JACKLEY
 EMP SHORT NAME: JACKLEYMARTINJ JACKLEY, MARTIN J CNR: _____
 EMPLOYEE NUMBER: [REDACTED] PIERRE CM/DM : 1
 TRAVEL BEG DATE: 10/01/2024 APPROVAL NBR: _____ MULTI PYMT: N
 TERMS CODE: _____ FYMT DUE DATE: 10/10/2024 DO NOT USE : _____
 REMIT MSG: TRAVEL 10/01/24


SIGNATURE APPR CD: _____

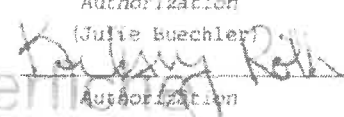
LINE	AMOUNT/PERCENT	EXP	CO	ACCOUNT	CENTER	PROJ-CC NUMBER
	VAT	QUANTITY	UNIT	ITEM NUMBER	ITEM DESCR	DEGRATE (T F A D) USE 99 1*RC
DRL				001 1000 52031500	2900000	
					OVERNIGHT_FER_DIEM	N N N N
0002	38.07			001 1000 52031400	2900000	
					NON_OVERNITE_FERDIEM	N N N N
DEL				001 1000 52030300	2000000	
					RELEASE # 1051	N N N N
0004						
						CROSS AMOUNT: 38.07

I declare and affirm under the penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief is in all things true and correct

Claimant

Date


 Authorization Date 10/10/24


 Authorization Date 10/10/24

Laserfiche

STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL
Office of Attorney General

Invoice ID - Finance Office Use Only


2295-345

Name		Employee ID		Center Code			Home Station		
Marty Jackley				290000			Pierre		
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense
		Leave	Return				Overnight	Non-Overnight	
10/1	Pierre - Watertown - Pierre	8.30 AM	10:00 PM				\$58.07		Direct Billed
	Lunch Receipt \$18.07						38.07		
				Subtotals	0	\$0.00	38.07		

Purpose of Travel: _____
 Sheriff's Fall meeting and Watertown Chamber

GRAND TOTAL \$58.07
 AMOUNT REIMBURSABLE 38.07

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.


 Claimant 10-8-24
 Date


 Authorization 10-8-24
 Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization _____ Date _____
 Attorney General

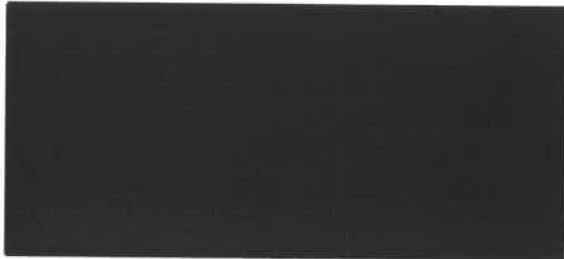
OCT 08 2024
 Finance

RESTAURANT
117 N BROADWAY
WATERLOO, SD 57201

Server: Nicole B
Check #35 Table P12
Guest Count: 3
Ordered: 10/1/24 1:17 PM



Time 1:24 PM



Amount \$16.07
Tip: 2.00
Total: 18.07

X

VISA CARDHOLDER

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Customer Copy

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STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL

Office of Attorney General

Invoice ID - Finance Office Use Only

2295-374

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		290000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Misc. Expense	
		Leave	Return				Overnight	Non-Overnight		
10/8	Pierre - Sioux Falls	3:00 PM		Personal-High	226	\$151.42	\$20.00		Direct Bill	
10/9	Sioux Falls - Vermillion - Pierre		6:00 PM	Personal-High	56	\$37.52	\$20.00			
10/15	Perre - Bismarck ND - Pierre	10:30 AM	5:00 PM					\$18.00		
10/8	Claiming mileage on Pierre to SF									
10/9	Claiming mileage from SF to Vermillion									
				Subtotals	282	\$188.94	\$40.00	\$18.00	\$0.00	\$0.00

Purpose of Travel: Call to Freedom/USD Law School Constitutional Panel

GRAND TOTAL \$246.94

AMOUNT REIMBURSABLE \$246.94

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.


Claimant

10-18-24
Date


Authorization

10/18/25
Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi, Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Attorney General

OCT 17 2024

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Finance

State of South Dakota - Office of Attorney General
VOUCHER

AP

EMPLOYEE EXPENSE WORKSHEET 1

EWS-117

NEXT FUNCTION: _____ ACTION: _____ 11/07/2024 15:51:01

REQUEST: _____

EMP VOUCHER NBR: _____ 2295-429 DATE: 10/31/2024 MODEL: V _____ JACKLEY

EMP SHORT NAME : JACKLEYMARTIN JACKLEY, MARTIN J CURR: _____

EMPLOYEE NUMBER: _____ PIERRE CM/UM : 3

TRAVEL BEG DATE: _____ 10/22/2024 APPROVAL NBR: _____ MULTI PYMT: N

TERMS CODE: _____ PYMT DUE DATE: 11/01/2024 DO NOT USE : _____

REMIT MSG: _____ TRAVEL_10/22/24 - 10/31/24

SIGNATURE APPELID: _____

LINE	AMOUNT/PERCENT	EXP	CD	ACCOUNT	CENTER	PROG-EO NUMBER
VAT	QUANTITY UNIT	ITEM NUMBER		ITEM DESCR	PRGRATE	PT F A D USE 99 I RC
0001	129.00	001	1000	52031000	2900000	
				OVERNIGHT PER DIEM		N N N N
DE1		001	1000	52031400	2900000	
				NON-OVERNITE PERDIEM		N N N N
0005	605.68	001	1000	52030300	2900000	
	904			MILEAGE @ .67		N N N N
0004						
					GROSS AMOUNT:	734.68

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct

Claimant

Date

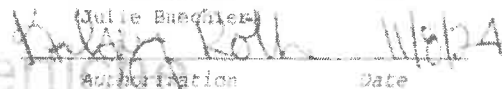


11/07/24

Authorization

Date

(Julie Buechler)



Authorization

Date

Lasernet

**STATE OF SOUTH DAKOTA
TRAVEL PAYMENT DETAIL**

Office of Attorney General

Invoice ID - Finance Office Use Only
2295-429

Name		Employee ID		Center Code			Home Station			
Marty Jackley		[REDACTED]		290000			Pierre			
Dates Mo/Day	Description of Travel, Destination, and Miscellaneous Expenses	Time		Auto Type	Personal Auto Miles	Auto Cost	Meals		Lodging	Misc. Expense
		Leave	Return				Overnight	Non-Overnight		
10/22	Pierre - Deadwood	4:00 PM					No Claim		No Claim	
10/23	Deadwood						\$20.00		No Claim	
10/24	Deadwood						No Claim		No Claim	
10/25	Deadwood - Pierre - Sioux Falls			Personal-High	226	\$151.42	\$14.00		Direct Bill	
10/26	Sioux Falls						\$14.00		Direct Bill	
10/27	Sioux Falls - Pierre		1:00 PM	Personal-High	226	\$151.42	\$20.00			
10/29	Pierre - Sioux Falls	4:00 PM		Personal-High	226	\$151.42	\$20.00		Direct Bill	
10/30	Sioux Falls						\$20.00		Direct Bill	
10/31	Sioux Falls - Mitchell - Pierre		6:00 PM	Personal-High	226	\$151.42	\$20.00			
	10/23 Just claiming dinner									
	10/25 Just claiming lunch									
	10/25 Claiming miles									
	Pierre to Sioux Falls only									
	10/26 Just claiming lunch									
	10/30 No: claiming dinner									
Subtotals					904	\$605.68	\$128.00	\$0.00	\$0.00	\$0.00

Purpose of Travel: AGA Working Group Meeting Governor's Hunt/ECC

GRAND TOTAL \$733.68

AMOUNT REIMBURSABLE \$733.68

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.

[Signature] 11-6-24
Claimant Date

[Signature] 11/6/24
Authorization Date

Employee Out of State Travel Checklist	
1. OOS Travel Authorization	
2. Itinerary or tickets	
3. Luggage/parking receipts	
4. Taxi Uber, Car rental receipts	
5. Lodging receipts with zero balance	
6. Agenda showing meals provided	

Authorization Date
Attorney General

NOV 06 2024

Finance