

*See Instructions and *Privacy Statement On Reverse Side*

CLAIMANT'S NAME Maria Bonneville			SSN or EMPLOYEE NUMBER* [REDACTED]	DEPARTMENT
POSITION Executive Director		CB/ID No.	DIVISION or BUREAU CIRM	INDEX NUMBER
RESIDENCE ADDRESS *			HEADQUARTERS ADDRESS 1999 Harrison Street, 1650	TELEPHONE NUMBER
CITY	STATE	ZIP CODE	CITY	STATE
[REDACTED]	[REDACTED]	[REDACTED]	Oakland	CA
				94612

(1) MONTH/YEAR	(2) DATE	(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY	
				BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
	TIME										MILES	AMOUNT		
Oct 16														
10/18	12:00 1:00	Walnut Creek											75.95	75.95
10/26	10:00	OAK to LAX						79.95	T		26	14.04	31.57	125.56
10/27		LA/BUR/OAK						58.18	T	48.00	26	14.04		120.22
														0.00
														0.00
														0.00
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														0.00
														0.00
(10) SUBTOTALS			0.00	0.00	0.00	0.00	0.00	138.13		48.00	52	28.08	107.52	321.73
COLUMN CODE (ACCTG. USE ONLY)														

CLAIM TOTAL 321.73

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)

10/18 - Communications Meeting
 10/26-10/27 - Travel for CFACO Meeting

(12) NORMAL WORK HOURS
 [REDACTED]

(13) PRIVATE VEHICLE LICENSE NUMBER
 [REDACTED]

(14) MILEAGE RATE CLAIMED
 .54

AGENCY ACCOUNTING OFFICE USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754

CLAIM # [REDACTED] DATE 11/2/16 [REDACTED] DATE 11/2/16

(17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE and TITLE (See Item 17 on reverse)