



# Palisades Charter High School

## Special Board Meeting

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### Date and Time

Monday February 9, 2026 at 5:00 PM PST

### Location

Library

Palisades Charter High School

15777 Bowdoin Street

Pacific Palisades, CA 90272

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### REASONABLE ACCOMMODATION WILL BE PROVIDED FOR ANY INDIVIDUAL WITH A DISABILITY:

*Pursuant to the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, any individual with a disability who requires reasonable accommodation to attend or participate in this meeting of the Governing Board of Palisades Charter High School may request assistance by contacting the Main Office at (310) 230-6623 at least 24 hours in advance.*

### SUPPORTING DOCUMENTATION:

*Supporting documentation is available at the Main Office of the School, located at 15777 Bowdoin Street, Pacific Palisades, CA 90272, (Tel: 310- 230-6623) and may also be accessible on the PCHS website at <http://palihigh.org/boardrecords.aspx>.*

### ALL TIMES ARE APPROXIMATE AND ARE PROVIDED FOR CONVENIENCE ONLY:

*Notice is hereby given that the order of consideration of matters on this agenda may be changed without prior notice. All items may be heard in a different order than listed on the agenda.*

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### Agenda

	Purpose	Presenter	Time
<b>I. Opening Items</b>			<b>5:00 PM</b>
Opening Items			
<b>A.</b> Call the Meeting to Order		Maggie Nance	
<b>B.</b> Record Attendance and Guests			2 m
Board Members Attending Remotely:			
Negeen Ben-Cohen - 739 Malcolm Ave., Los Angeles, CA 90024			
Fati Adeli - 719 Ocampo Drive, Pacific Palisades, CA 90272			
Jane Davis - 11725 Sunset Blvd., Los Angeles, 90049			
Amir Ebtehadj - 11728 Mayfield Avenue, Los Angeles, CA 90049			
<b>C.</b> Public Comment			30 m
<p>This special meeting is for the specific purpose of the considering actions on the agenda items listed below, which require timely consideration by the Board prior to the next regular meeting of the Board. Therefore, at this meeting, and consistent with the public meeting laws (Brown Act), at this special meeting public comment will be limited to comment on items on the agenda. Public comment on non-agenda items will continue to be a part of the agenda of regular meetings of the Board. Due to public meeting laws, the Board can only listen to your issue, not respond or take action. These presentations are limited to two (2) minutes, per person and one cannot cede their time to another. A member of the public who requires the use of a translator, in order to receive the same opportunity as others to directly address the Board, shall have twice the allotted time to speak, and the total allocated time shall be appropriately increased as well. Government Code § 54954.3(b)(2).</p> <p>Google Form Public Comment Procedure: A Google form is available 24 hours prior to the meeting for Public Comment on items on the agenda. Please refer to the Dewey Dolphin email or copy/paste this link <a href="https://forms.gle/kSsxkvL6T9GgXpdEA">https://forms.gle/kSsxkvL6T9GgXpdEA</a>. Your comment on agenda items will be read aloud by the Board Vice Chair. Public comments on agenda items submitted through the Google form will be read after the public comments on agenda items presented live at the meeting. Comments not read after 60 minutes will be included in the meeting minutes. Due to public meeting laws, the Board can only listen to your comment, not respond or take action. Comments are limited to two (2) minutes, per person and one cannot cede their time to another. A</p>			

	Purpose	Presenter	Time
<p>member of the public who requires the use of a translator, in order to receive the same opportunity as others to directly address the Board, shall have twice the allotted time to speak, and the total allocated time shall be appropriately increased as well.</p> <p>Government Code § 54954.3(b)(2).</p>			
<b>II.</b>	<b>Demolition Contract Approval</b>		<b>5:32 PM</b>
<b>A.</b>	Demolition Contract Approval	Vote	Rafael Negroe
	"Motion to Approve the Demolition Contract."		
<b>III.</b>	<b>Approval of Athletics Memorandum of Understanding (MOU)</b>		<b>6:02 PM</b>
<b>A.</b>	Approval of Athletics MOU	Vote	Josh Wilson/Dr. Pam Magee
	"Motion to Approve the Athletics MOU."		
<b>IV.</b>	<b>Consent Agenda</b>		<b>6:32 PM</b>
<b>A.</b>	Finance Items: School Organized Conferences/Trips	Vote	Maggie Nance
	<p>March 19 - March 21   Spring CUE/Steam Conference - Palm Springs, CA   Attendee: Dr. Pam Magee</p> <p>April 12 - April 15   College Board Preparate Conference - Chicago, IL   Attendees: Lucia Pereyra, Shirin Ramzi, Ed Sugden, Diana Kim, Amie Whiteley, Myrna Cervantes, Angelica Pereyra</p>		
<b>V.</b>	<b>New Business / Announcements</b>		<b>6:42 PM</b>
<b>A.</b>	Announcements / New Business	FYI	Maggie Nance
	<p>Next Regular Board Meeting: Tuesday, February 24, 2026 at 5:00 PM in Gilbert Hall</p> <p>15777 Bowdoin Street</p> <p>Pacific Palisades, CA 90272</p>		
<b>VI.</b>	<b>Closing Items</b>		<b>6:43 PM</b>
<b>A.</b>	Adjourn Meeting	FYI	Maggie Nance

# Coversheet

## Demolition Contract Approval

**Section:** II. Demolition Contract Approval

**Item:** A. Demolition Contract Approval

**Purpose:** Vote

**Submitted by:**

**Related Material:**

13zero3 Porposal Santa Monica P.H. Demo Rev2 1-27-26.pdf

25-0184 -R1- Palisades HS Miller.pdf

Raymond Bid Letter - Palisades Charter High School - Temp School Demolition.pdf





## PROPOSAL

Date: February 2, 2026

Estimate: 2556

**To:**

Name: Kalei Park

Company: PCHS Permit Manager

Phone: (310) 230-7230

Email: [kpark@palihigh.org](mailto:kpark@palihigh.org)

**JOB NAME / ADDRESS**

Job Name: Santa Monica P.H. Demo

Job Address: 302 Colorado Ave,  
Santa Monica, CA 90401

**Proposal – RE: Lump Sum Proposal – Office and Facility Improvements**

**13ZERO3, INC.** is pleased to present the following **SOW..**

This proposal covers the complete interior demolition of all classroom buildout improvements located on the Basement, First Floor, Second Floor, and Third Floor. The work includes removing all interior non structural walls, drywall, metal stud framing, sound barrier assemblies, carpet tile down to bare floor, electrical branch circuits and lighting associated with the classroom buildout, and full debris removal and cleanup.

All demolition will be performed in a safe and controlled manner. All debris will be removed from the project site and all areas will be left clean and ready for the next phase of work.

**Scope of Work Includes:**

The following services are included in the proposed demolition package.

**Interior Wall Demolition**

- Removal of all interior non structural metal stud walls, drywall assemblies, sound barrier materials, tack boards, and finishes that were installed to create classroom spaces throughout the building.

**Electrical Demolition**

- Removal of associated electrical branch wiring
- Safe off all circuits back to source
- Coordinate with building management regarding any required shut downs

**Flooring Demolition**

- Removal of all carpet tile and glue down material
- Scrape floors to achieve a clean demolition ready surface

**Material Handling and Debris Removal**

- Supply all labor and equipment for debris transport
- Load and haul all debris into onsite dumpsters
- Perform full daily cleanup of work areas

**Dumpsters**

- Provide all dumpsters required for the duration of demolition
- Coordinate all swaps and hauling
- Manage debris separation as required by local code

#### Site Management

- Provide onsite supervision
- Maintain safety control and compliance
- Implement all dust control measures
- Perform continuous housekeeping

#### Personal Protective Equipment

- Provide all PPE for field personnel
- Implement all required safety procedures

#### Dust Control

- Install plastic containment as required
- Utilize air scrubbers or negative air if necessary
- Protect surrounding occupied areas

#### Facilities

- Provide temporary toilets for demolition crew
- Include water, power, and basic site support as needed for demo operations

#### **Exclusions:**

- Permits and as-builts unless requested
- After Hours Work
- Rush or accelerated schedules
- Structural demolition
- Removal of hazardous materials or abatement
- Any work outside of the defined demolition areas
- Reconstruction or patching beyond standard demo cleanup

#### **Pricing Summary:**

- Demolition Labor and Services \$191,006.00
- Electrical Removal and Safe Off \$34,003.85
- Job Site Management and General Conditions \$20,550.00
- General Requirements \$9,150.00
- Liability Insurance and Related Costs \$15,347.04
- Contracting Fee \$25,578.40
  - Total Proposal Amount **\$296,709.40**

#### **Acceptance & Approval**

Please review the attached pricing and scope assumptions. We are happy to discuss any changes or answer any questions you may have.

If this proposal meets your needs, please sign below and return for scheduling.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you for your business!*

**Gaetano Giacalone**

[Philippians: 2:9-10](#)

Therefore God exalted him to the highest place and gave him the name above every name, that at the name of Jesus every knee should bow, in Heaven and on earth and under the earth, and every tongue acknowledge that Jesus Christ is Lord, to the glory of God the Father.

# MILLER

ENVIRONMENTAL  
INCORPORATED

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## HAZARDOUS MATERIAL REMEDIATION DEMOLITION

### PROPOSAL-R1

February 4, 2026

Proposal #: 25-0184-M

**Mr Rafael Negroe**  
Palisades High School  
302 Colorado Ave,  
Santa Monica, CA

**Project:** Palisades HS – Interior Demolition  
Santa Monica, CA  
**Scope of Work:** Demolition  
**Bid Documents:** Plans and Job Walk  
**Addenda:** n/a

Britney,

Thank you for the opportunity to provide our quotation for the above referenced project. We propose to furnish all labor, material, equipment and disposal necessary to perform the demolition scope of work in accordance with all existing S.C.A.Q.M.D. /E.P.A. /O.S.H.A. rules and regulations. Miller Environmental, Inc. is committed to complying with the safety, schedule and logistical requirements of the project.

Miller Environmental, Inc. is currently performing abatement, demolition and soil remediation projects from San Diego to Santa Barbara, CA. Please view our website at [www.millerenvironmental.com](http://www.millerenvironmental.com) for a listing of recently completed projects and ongoing work. Some of our ongoing and recently completed projects are as follows:

<b>Los Angeles Memorial Coliseum</b>	<b>Abatement and Demolition</b>	<b>\$ 5,500,000.00</b>
<b>LUMEN West LA</b>	<b>Demolition</b>	<b>\$ 9,500,000.00</b>
<b>California Market Center</b>	<b>Demolition</b>	<b>\$ 6,400,000.00</b>
<b>Universal Studios Hollywood</b>	<b>Abatement and Demolition</b>	<b>\$ 4,000,000.00</b>
<b>LAUSD Belvedere Middle School</b>	<b>Abatement and Demolition</b>	<b>\$ 6,800,000.00</b>
<b>LAX United Airlines</b>	<b>Abatement and Demolition</b>	<b>\$ 12,400,000.00</b>
<b>LAX Southwest Airlines T1&amp;T1.5</b>	<b>Abatement and Demolition</b>	<b>\$ 26,700,000.00</b>
<b>LA County Museum of Art</b>	<b>Abatement and Demolition</b>	<b>\$ 11,500,000.00</b>

## SCOPE OF WORK

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Miller Environmental, Inc. will provide all labor, material and equipment to perform the following scope of work based on Drawings by Gensler dated 03.28.2025, and current site conditions based on job walk on 01.22.2026 :

### INTERIOR DEMOLITION (GUT-OUT)

#### BASEMENT (29,520 SF)

Demo and remove interior walls and finishes - 1000 LF	10,000	SF
Selective demo and removal of finishes at perimeter retaining walls – Excluded	-	SF
Demo and remove floor finish where occurs (assuming carpet tile at all classrooms, Corridors and walkway have no floor finish removal)	12,722	SF
Demo and remove ceiling - n/a (no ceiling exists per job walk and photos)	-	SF
Demo and remove furring around existing metal columns – Excluded	-	SF
Demo and remove all MEPs ductwork, piping and equipment per layout - Excluded	-	SF

#### LEVEL 1 (33,160 SF)

Demo and remove interior walls and finishes - 1620 LF	16,200	SF
Demo and remove finishes exterior perimeter wall/glazing - Excluded	-	SF
Demo and remove floor finish where occurs (assuming carpet tile at all classrooms, Corridors and walkway have no floor finish removal)	21,348	SF
Demo and remove ceiling - n/a (no ceiling exists per job walk and photos)	-	SF
Demo and remove furring around existing metal columns - Excluded	-	SF
Demo and remove all MEPs ductwork, piping and equipment per layout - Excluded	-	SF

#### LEVEL 2 (27,930 SF)

Demo and remove interior walls and finishes - 1284 LF	12,840	SF
Demo and remove finishes exterior perimeter wall/glazing- Excluded	-	SF
Demo and remove floor finish where occurs (assuming carpet tile at all classrooms, Corridors and walkway have no floor finish removal)	16,600	SF
Demo and remove ceiling - n/a (no ceiling exists per job walk and photos)	-	SF
Demo and remove furring around existing metal columns - Excluded	-	SF
Demo and remove all MEPs ductwork, piping and equipment per layout - Excluded	-	SF

#### LEVEL 3 (21,250 SF)

Demo and remove interior walls and finishes - 1112 LF	11,120	SF
Demo and remove finishes exterior perimeter wall/glazing - <b>Excluded</b>	-	SF
Demo and remove floor finish where occurs (assuming carpet tile at all classrooms, Corridors and walkway have no floor finish removal)	12,721	SF
Demo and remove ceiling - n/a (no ceiling exists per job walk and photos)	-	SF
Demo and remove furring around existing metal columns - <b>Excluded</b>	-	SF
Demo and remove all MEPs ductwork, piping and equipment per layout - <b>Excluded</b>	-	SF

**ROOF LEVEL**

No Demo Scope	-	SF
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**SITE DEMOLITION**

No Site Demo scope		SF
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**MISCELLANEOUS**

Mobilization	1	EA
Equipment Engineering to place on elevated deck	1	LS
Layout & marking	1	LS
Temp Power – N/A demolition to be performed with hand tools and small equipment's.	-	EA
Temp Water as needed	1	LS
Temp interior trash chute for debris disposal - 2 months	1	LS
Set-up temp protection as needed for existing finishes to remain	1	LS
Toilets	1	LS
Cut power and electrical for demolition	1	LS
Cut water for demolition – N/A	-	LS

**PRICING and TERMS**

- **Base Bid R1 – \$ 511,000.00**
- **Schedule to complete is approx. 8 weeks. Pricing is based on Feb/March 2026 Start.**
- **Following items have been excluded from demolition pricing :**
  - All above head MEPs
  - Drywall furring around existing columns
  - Exterior wall/Glazing and associated finishes.
- **Cutting Power to Existing Walls is included in our pricing.**
- **No Cut & Cap of water or wet utilities required due to there being no water connection inside the building.**
- **Full Demo of interior walls will be performed except at the following locations : :**
  - **At Stair #1- Stair #3 (from basement to L3).**

- **At all elevator shafts and elevator rooms (from basement to L3).**
- **At mechanical shafts (from basement to L3).**
- **At basement IDF room, mechanical room, electrical room.**
- **At L3 level, no demolition scope at the balcony is included.**
- **Any demo scope associated with Roof is excluded.**
- **Scarping of fireproofing and other finishes at existing beams and columns is excluded.**
- **Salvage and relocation work is excluded from the pricing. Miller assumes all items to salvaged for reuse later to be completed by other prior to demolition start.**
- **Night work/swing shift work is not included in the pricing.**
- **Site demolition scope of work is excluded from the pricing.**
- **Pricing is based on (1) mobilization.**
- **See Exclusions below for other typical exclusions.**
- **Payment is Net 30.**

## CONDITIONS

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1. A "Right To Demo" document shall be issued to us that clearly identifies that all utilities have been terminated or isolated. If needed a sample of this document can be provided to you.
2. The quoted price reflects that all work will be done between normal working hours.
3. Price is contingent upon completion of our work in the most efficient manner for our crews and does not include beneficial occupancy or stacking of other trades within our work areas, nor alternating, staggering or rotating work schedules.
4. Price is also contingent on having a logistical plan that is conducive to productive load out of materials to bins and/or trucks and the use of equipment if applicable to perform our work.
5. This proposal will be part of our contract and is based on the award of all work.
6. This proposal is valid for a period of 30 days from the date of submission.
7. If this project is going to use Textura for payments, there will be an added fee of 0.22% of the contract value (22 basis points) or a maximum fee of \$3,750.00. For example, the added fee for a \$1,000,000.00 contract would be \$2,200.00. A maximum fee of \$3,750.00 would apply to any contract equal to or greater than \$1,704,545.00.
8. Miller Environmental, Inc.'s Bond Rate is 1.2% of the final contract price (if required). Additionally, for projects 25 months or longer, a 1.0% fee will be applied to the bond premium for each month over 24 months.
9. Miller Environmental, Inc.'s Experience Modification Rate is .75%.
10. Miller Environmental, Inc. is insured with Starr for up to \$5,000,000.00.
11. Retention not to exceed 5% and to be released at the completion of our scope of work.

## EXCLUSIONS

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Excluded items must be provided by others, if required, to ensure the timely completion of our work.

1. Hazardous material removal other than what is listed in this proposal.
2. Third Party monitoring for hazardous material work.
3. Clearance sampling for hazardous material work.
4. Permits and fees other than SCAQMD.

5. SCAQMD Rule 1466 requirements with the exception of adequate wetting and fugitive dust control training.
6. Unforeseen conditions.
7. Surface preparation for new finishes.
8. Underground (UG) utility removal or relocation.
9. Installation or adjustment of fencing/protection/barricades/railings/pedestrian canopies.
10. Patch and repair of anything unless damaged by MEI.
11. Earthwork, import, backfill and/or re-compaction.
12. Installation and/or maintenance of SWPPP.
13. Protection against inclement weather.
14. Shoring and/or bracing.
15. Coring and drilling.
16. Security or guards.
17. Construction signs.
18. Parking Fees.

Please do not hesitate to contact me with any questions or concerns at 714-385-0099.

Respectfully submitted,

*Rohan Desai*

**Miller Environmental, Inc.**

State Contractors Lic.# 772797 A, B, C21, C22, C39, C61/D06, ASB, HAZ Exp. 12-31-25

DOSH Registration No. 741

DIR Registration No. 1000000628, Exp. 6-30-25



February 4, 2026

Mr. Rafael Negroe  
Palisades Charter High School  
15777 Bowdoin Street  
Pacific Palisades, CA 90272

Via: rnegroe@palihigh.org

**Re: Palisades Charter High School**

Ladies and Gentlemen:

Raymond-Southern California, Inc., a California corporation, is pleased to submit our budget proposal for the above-referenced project.

**Budget Estimate:**                      \$ 439,752.00

**Inclusions:**

1. Demo of the following: metal stud framing walls, drywall, kickers, clips, and carpet.

**Exclusions:**

1. Concrete patching
2. Fireproof patching
3. Drywall patching
4. Paint patching
5. Any residual glue left from carpet
6. Overhead MEP demo

**Qualifications:**

1. All work to be performed during normal work hours. Overtime, accelerated schedule, and second shift not included.
2. Parking to be provided at no cost to Raymond.
3. Light, power, water, and toilets are to be provided by the General Contractor at no cost to Raymond, including dedicated power for electric plaster/fireproofing pumps.
4. In the absence of specifications, work will be performed according to manufacturers' recommendations and/or associated ASTM standards.
5. This proposal is based on performing work within a single and sequential operation according to a mutually agreeable construction **schedule** with our scope of work to begin no later than **January 1, 2026**, and be completed no later than **July 1, 2026**. Any changes to this schedule may result in increased costs for which Raymond will seek additional compensation.
6. If hazardous material is known or found to exist, the contractor is to provide Raymond with the building owner's "Asbestos Management Plan," as well as clean air certificates prior to mobilization.
7. This proposal is valid for 30 days.

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LOS ANGELES/ORANGE | SAN DIEGO | SAN FRANCISCO BAY AREA | LAS VEGAS

**Raymond-Southern California, Inc.**  
520 West Walnut Avenue, Orange, CA 92868  
714.771.7670 | CA License No. 243645  
**RAYMONDGROUP.COM**

certified  
**WBENC**  
WOMEN'S BUSINESS ENTERPRISE  
WBE2302991



Raymond-Southern California, Inc.  
**Palisades Charter High School**  
 February 4, 2026

**Raymond-Southern California, Inc.**  
 520 West Walnut Avenue, Orange, CA 92868  
 714.771.7670 | CA License No. 243645

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## RAYMOND-SOUTHERN CALIFORNIA

**T&M RATES: 7/1/25 - 6/30/26 w/o Markup**

TRADE	T&M W/O MARKUP	DAILY RATE	1.5 TIME OVERTIME	DOUBLE OVERTIME	1.5 TIME PREMIUM	DOUBLE PREMIUM
<b>Journeyman</b>	\$109.67	\$877.36	\$166.80	\$207.47	\$40.68	\$81.35
<b>Foreman</b>	\$128.17	\$1,025.36	\$194.94	\$242.50	\$47.54	\$95.11
<b>General Foreman</b>	\$153.29	\$1,226.32	\$235.29	\$294.31	\$59.01	\$118.02
<b>Senior Project Manager</b>	\$175.00	\$1,400.00				
<b>Project Manager</b>	\$150.00	\$1,200.00				
<b>Project Engineer</b>	\$125.00	\$1,000.00				

We appreciate this opportunity to provide you with our proposal and look forward to working with you on this project. If you have any questions or require clarification of any sort, please give me a call at extension #2 or (714) 771-7670.

Sincerely,

RAYMOND-SOUTHERN CALIFORNIA, INC.

A CALIFORNIA CORPORATION

*Taylor Leach*

Taylor Leach  
 Senior Project Manager

\_\_\_\_\_  
 Rafael Negroe  
 Palisades Charter High School

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 David Holthaus  
 Raymond-Southern California

# Coversheet

## Approval of Athletics MOU

<b>Section:</b>	III. Approval of Athletics Memorandum of Understanding (MOU)
<b>Item:</b>	A. Approval of Athletics MOU
<b>Purpose:</b>	Vote
<b>Submitted by:</b>	
<b>Related Material:</b>	Updated MOU 02_09_2026 - Cheviot Hills Field.pdf

## **MEMORANDUM OF UNDERSTANDING**

**Between**

**Palisades Charter High School ("PCHS")/Palisades Baseball Team ("PBT")**

**and**

**Cheviot Hills PONY Baseball Association ("CHPBA")**

### **1. Purpose**

This Memorandum of Understanding ("MOU") establishes the terms under which Cheviot Hills PONY Baseball Association agrees to share Field 4, located at 2551 Motor Ave., Los Angeles, CA 90064, with Palisades Charter High School/Palisades Baseball Team for high school baseball games.

### **2. Length of Agreement**

This MOU shall be effective upon execution and shall remain in effect for five (5) baseball seasons. The five (5) seasons covered by this Agreement are the 2026, 2027, 2028, 2029, and 2030 seasons. It is understood that CHPBA will provide access as specified herein so long as the City continues to allow the access that has been in place for many years. Either party may terminate this MOU by giving thirty (30) days written notice of termination to the other.

Upon mutual written agreement executed by both parties, this MOU may be extended beyond the initial five-season term under mutually agreed-upon terms and conditions.

### **3. Provided Games and Schedule**

#### **a. In-Season Games**

CHPBA agrees to allow PCHS/PBT the use of Field 4 for up to twenty-four (24) regular season games per season, split between Varsity and Junior Varsity.

#### **b. Post-Season Games**

Up to three (3) Varsity playoff games and up to two (2) Varsity state games.

#### **c. Scheduling Coordination**

The PCHS/PBT schedule is finalized by CIF by December. PCHS/PBT will provide CHPBA a schedule by December 15 of each applicable year. PCHS/PBT and CHPBA can work together to accommodate any modifications with the understanding that PCHS/PBT is obligated to the CIF schedule. Furthermore, PCHS/PBT will have the opportunity to reschedule any games that are canceled due to weather.

d. Pre-Season Games and Tryouts

CHPBA will work with PCHS/PBT to provide access to the field for pre-season games in January or February as long as there is no conflict or overlap of use. In addition, the same shall apply for tryouts in June and December. It is understood that CHPBA has priority to field time, but CHPBA will use best faith effort to provide access to additional field time.

**4. Game Days, Time & Permits**

- a. PCHS/PBT understands that exact game times may not always be available.
- b. CHPBA agrees to provide PCHS/PBT with field access during their typical permit times, 4-7pm Monday-Friday and 9am-5pm on Saturdays.
- c. In the event that PCHS/PBT would like permits issued for earlier weekday times, CHPBA shall assist in obtaining those permits.
- d. Should PCHS/PBT need any times after 7pm those will need to be procured via Municipal Sports and, again, CHPBA shall assist with that relationship as well. It is understood that CHPBA does procure permitting for some days/times after 7pm for their own use.

**5. Access**

- a. CHPBA shall provide digital access to PCHS/PBT to the field via a mobile phone application.
- b. This same access shall be provided by CHPBA to PCHS/PBT for the batting cages.
- c. As PCHS/PBT cannot use the batting cages on game days, CHPBA will provide access to these cages on non-game days and outside of the season as long as it does not conflict with any CHPBA activities (with the express understanding that CHPBA teams will have priority to access cages).
- d. PCHS/PBT and CHPBA shall both have access to the storage containers on site for the storage of goods and equipment.

**6. Payment and Ownership of Improvements**

- a. PBT in conjunction with PCHS agrees to pay CHPBA Seventy-Five Thousand Dollars (\$75,000) toward the construction of a high school field on Field 4 at Cheviot Park upon execution of this Agreement.
- b. PCHS/PBT agrees to pay for the tarps for both the pitching mound and the batter's box.
- c. PCHS/PBT agrees to pay for materials and tools needed to maintain the fields between games.

- d. PCHS/PBT recognizes that all field upgrades, upon PCHS/PBT's termination of its use of Field 4, will belong to CHPBA.

## **7. Field Maintenance**

### **a. Pre-Season Maintenance**

PCHS/PBT will provide yearly preseason maintenance prior to the start of each season starting with the 2027 season.

### **b. Regular Maintenance**

CHPBA holds the responsibility of monthly maintenance of the fields per the Right of Entry (ROE) permit issued by the City of Los Angeles.

### **c. Between-Game Field Care**

During the season, the fields will need to be maintained between games. CHPBA shall groom and line fields prior to all their games and PCHS/PBT shall be expected to do the same prior to all of their games. In addition, both teams, will need to assist with raking and light field clean-up prior to and between their games, appropriate tools will be made available.

### **d. In-Season Infield and Mound Protection**

The pitcher's mound shall be covered during the spring baseball season when not in use and the field will be fenced during the spring season.

### **e. Off-Season Protection**

CHPBA will use temporary fencing to protect the infield and mound during the off-season.

## **8. Signage**

a. PCHS/PBT shall be allowed to have signage on the field indicating it as their home field. This will be mutually agreed upon but CHPBA will have final decision on size, placement and quantity of signage.

b. CHPBA agrees to allow PBT to hold a sponsorship banner fundraiser each year where banners are displayed on the outfield fence. The space will be split by each organization for fair usage. Both entities shall enter into a separate agreement that details signage placement, costs, and upkeep.

c. CHPBA will allow for PCHS/PBT to have signage on the scoreboard.

## **9. Cooperation and Good Faith**

Both parties agree to work cooperatively and in good faith.

## **10. Insurance and Liability**

a. Each party shall maintain appropriate General Liability insurance and be responsible for its own acts and omissions. CHPBA will be named as an additional insured with customary indemnity. CHPBA shall name PCHS/PBT as an additional insured with customary indemnity.

b. It is understood that the fields were constructed by CHPBA, but CHPBA takes no responsibility for any losses or claims that may occur while PCHS/PBT is utilizing the fields, cages, bull pens, or any other areas of or associated with Field 4.

c. PCHS/PBT is waiving any claims against CHPBA that arise from the construction of the fields and their usage.

d. CHPBA agrees to hold harmless and indemnify PCHS/PBT, its Board Members, employees, agents, officers and assigns from every claim or demand which may be made by reason of any injury to person or damage to property sustained by any person, firm or corporation, to the extent that such injury or damage was caused by any negligent act or omission or willful misconduct of CHPBA in connection with this MOU. PCHS shall similarly hold harmless and indemnify CHPBA from every claim or demand which may be made by reason of any injury to person or damage to property sustained by any person, firm or corporation, to the extent that such injury or damage was caused by any negligent act or omission or willful misconduct of PCHS/PBT in connection with this MOU.

e. This MOU shall be governed by the laws of California, with venue in Los Angeles County, California.

## **11. Amendment**

This MOU may be amended only by mutual written agreement of all parties.

## **12. Signatures**

### **Palisades Charter High School**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

### **Palisades Baseball Team, Inc.**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

### **Cheviot Hills PONY Baseball Association**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

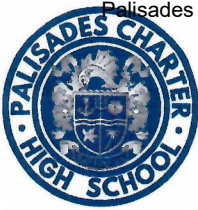
Date: \_\_\_\_\_

# Coversheet

## Finance Items: School Organized Conferences/Trips

<b>Section:</b>	IV. Consent Agenda
<b>Item:</b>	A. Finance Items: School Organized Conferences/Trips
<b>Purpose:</b>	Vote
<b>Submitted by:</b>	
<b>Related Material:</b>	CUE Spring Conference 02_09_2026.pdf College Board Prepare Conference 02_09_2026_.pdf



**Palisades Charter High School**

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(310) 230-6623 • FAX (310) 454-6328

**CONFERENCE/TRAVEL REQUEST FORM**

Employee Attendee(s) Name(s): Pam Magee

Department/Site: Administration Date of Request: 2/5/2025

Name of Conference/Activity: CUE Conference / STEAM Symposium

Organization/Company Holding the Conference/Activity: CALIE

Location of Conference/Activity: Palm Springs Convention Center Date(s) of Conference/Activity: March 19-21

Purpose/Rationale (How will this conference/activity be of value to the school?):  
AI: Ethical Use, Innovation w/ impact CALIE Leadership Academy

Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):

Estimated Expenditures	Paid to Pay Directly	Reimbursement Requested	Cost
Conference Registration <u>1</u> people @ \$ - per person	✓		\$ <u>460.00</u>
Certificated Substitute(s) _____ days @ _____ per day (sal. & stat. ben.)			\$ -
Travel - Mileage <u>128 x 2.25</u> miles @ \$ 0.70 per mile <u>256 x .70</u>		✓	\$ <u>179.20</u>
Travel - Airfare _____ people @ \$ - per person			\$ -
Travel - Ride Sharing Svs/Taxi/Shuttle _____ Type total amount into "cost" cell			\$ -
Lodging <u>2</u> nights @ \$ <u>340</u> per night	✓		\$ <u>680.00</u>
Meals <u>3</u> Breakfasts @ \$ 10.00 per meal <u>3</u> Lunches @ \$ 10.00 per meal <u>3</u> Dinners @ \$ 20.00 per meal		✓	\$ <u>360.00</u>
Other (Parking, Tolls, Conference Materials, etc.) - please list below: <u>membership \$50</u>	✓		\$ <u>50.00</u>
<b>TOTAL APPROXIMATE COST</b>			<b>\$ <u>1,729.20</u></b>
<b>AMOUNT APPROVED</b>			

without prior approval from an administrator. Upon returning from an approved event, attendee must submit an itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.

Requestor Signature: Pam Magee

Executive Director Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Funding Source: PD/Conference SACS Code: \_\_\_\_\_

Will costs be reimbursed by another organization? Yes/No If so, what organization? \_\_\_\_\_

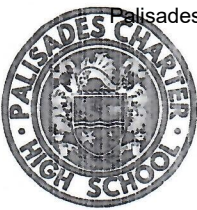
Board of Trustee/Designee Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Board Approval Date (if applicable): \_\_\_\_\_ Business Office Review \_\_\_\_\_

(initial)

(date)



**Palisades Charter High School**

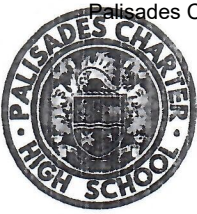
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**CONFERENCE/TRAVEL REQUEST FORM**

Employee Attendee(s) Name(s): <b>MYRNA CERVANTES</b>			
Department/Site: <b>FUERZA UNIDA PROJ.</b>		Date of Request: <b>1/16/26</b>	
Name of Conference/Activity: <b>PREPARATE</b>			
Organization/Company Holding the Conference/Activity: <b>COLLEGE BOARD</b>			
Location of Conference/Activity: <b>Chicago, IL.</b>		Date(s) of Conference/Activity: <b>4.12.26 to 4.15.26</b>	
Purpose/Rationale (How will this conference/activity be of value to the school?): <b>Preparate highlights national models that are successfully preparing latinos for college</b>			
Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):			
<b>Estimated Expenditures</b>		<b>Pay to Pay Directly</b>	<b>Reimbursement Requested</b>
Conference Registration <u>1</u> people @ \$ <u>650</u> per person			\$ <u>650.00</u>
Certificated Substitute(s) <u>4</u> days <u>one period only a day</u> @ \$ per day (sal. & stat. ben.)			\$ -
Travel - Mileage miles @ \$ 0.70 per mile			\$ -
Travel - Airfare <u>1</u> people @ \$ <u>350</u> per person			\$ <u>350</u>
Travel - Ride Sharing Type total amount into "cost" cell			\$ <u>100</u> -
Svs/Taxi/Shuttle <u>100.00</u>			\$ <u>100</u> -
Lodging <u>4</u> nights @ \$ <u>360</u> per night			\$ <u>1440.00</u>
Meals			\$ -
Breakfasts @ \$ 10.00 per meal			
Lunches @ \$ 10.00 per meal			
<u>4</u> Dinners @ \$ 20.00 per meal			\$ <u>80.00</u>
Other (Parking, Tolls, Conference Materials, etc.) - please list below:			\$ -
<b>TOTAL APPROXIMATE COST</b>			\$ <u>2620.00</u>
<b>AMOUNT APPROVED</b>			
without prior approval from an administrator. Upon returning from an approved event, attendee must submit an itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.			
Requestor Signature:			
Executive Director Approval: _____		Date: _____	
Funding Source: _____		SACS Code: _____	
Will costs be reimbursed by another organization? Yes/No		If so, what organization? _____	
Board of Trustee/Designee Approval: _____		Date: _____	
Board Approval Date (if applicable): _____		Business Office Review (initial) (date)	



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**CONFERENCE/TRAVEL REQUEST FORM**

Employee Attendee(s) Name(s): <u>SHIRIN RAUZI</u>			
Department/Site: <u>FUERZA UNIDA PROJ.</u>		Date of Request: <u>1/16/26</u>	
Name of Conference/Activity: <u>PREPARETE</u>			
Organization/Company Holding the Conference/Activity: <u>COLLEGE BOARD</u>			
Location of Conference/Activity: <u>Chicago, IL</u>		Date(s) of Conference/Activity: <u>4.12.26 to 4.15.26</u>	
Purpose/Rationale (How will this conference/activity be of value to the school?) <u>Preparate highlights national models that are successfully preparing Latinos for college</u>			
Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):			
<b>Estimated Expenditures</b>		<b>Paid to Pay Directly</b>	<b>Reimbursement Requested</b>
			<b>Cost</b>
Conference Registration	<u>1</u> people @ \$ <u>650</u> per person		\$ <u>650.00</u>
Certificated Substitute(s)	<u>4</u> days <u>one period only a day</u> @ <u>one</u> per day (sal. & stat. ben.)		\$ -
Travel - Mileage	<u>  </u> miles @ \$ <u>0.70</u> per mile		\$ -
Travel - Airfare	<u>1</u> people @ \$ <u>350</u> per person		\$ <u>350.00</u>
Travel - Ride Sharing	Type total amount into "cost" cell		\$ <u>100.00</u>
Svs/Taxi/Shuttle	<u>100.00</u>		\$ <u>100.00</u>
Lodging	<u>4</u> nights @ \$ <u>360</u> per night		\$ <u>1440.00</u>
Meals	Breakfasts @ \$ <u>10.00</u> per meal		\$ <u>80.00</u>
	Lunches @ \$ <u>10.00</u> per meal		
	<u>4</u> Dinners @ \$ <u>20.00</u> per meal		
Other (Parking, Tolls, Conference Materials, etc.) - please list below:			\$ -
		<b>TOTAL APPROXIMATE COST</b>	<u>2620.00</u>
		<b>AMOUNT APPROVED</b>	
without prior approval from an administrator. Upon returning from an approved event, attendee must submit an Itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.			
Requestor Signature: <u>[Signature]</u>			
Executive Director Approval: <u>[Signature]</u>		Date: <u>  </u>	
Funding Source: <u>  </u>		SACS Code: <u>  </u>	
Will costs be reimbursed by another organization?		Yes/No If so, what organization?	
Board of Trustee/Designee Approval: <u>  </u>		Date: <u>  </u>	
Board Approval Date (if applicable): <u>  </u>		Business Office Review <u>  </u>	
		(initial)	(date)



**Palisades Charter High School**

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**CONFERENCE/TRAVEL REQUEST FORM**

Employee Attendee(s) Name(s): <u>Angelica Pereyra</u>			
Department/Site: <u>FUERZA UNIDA PROG.</u>		Date of Request: <u>1/16/26</u>	
Name of Conference/Activity: <u>PREPARATE</u>			
Organization/Company Holding the Conference/Activity: <u>COLLEGE BOARD</u>			
Location of Conference/Activity: <u>Chicago, IL.</u>		Date(s) of Conference/Activity: <u>4.12.26 to 4.15.26</u>	
Purpose/Rationale (How will this conference/activity be of value to the school?): <u>Preparate highlights national models that are successfully preparing latinos for college</u>			
Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):			
Estimated Expenditures		Paid to Pay Directly	Reimbursement Requested
Conference Registration <u>1</u> people @ \$ <u>650</u> per person			\$ <u>650.00</u>
Certificated Substitute(s) <u>4</u> days @ <u>          </u> per day (sal. & stat. ben.)			\$ <u>-</u>
Travel - Mileage <u>          </u> miles @ \$ <u>0.70</u> per mile			\$ <u>-</u>
Travel - Airfare <u>1</u> people @ \$ <u>350</u> per person			\$ <u>350-</u>
Travel - Ride Sharing Svs/Taxi/Shuttle <u>100.00</u> Type total amount into "cost" cell			\$ <u>100-</u>
Lodging <u>4</u> nights @ \$ <u>360</u> per night			\$ <u>1440.00</u>
Meals Breakfasts @ \$ <u>10.00</u> per meal Lunches @ \$ <u>10.00</u> per meal <u>4</u> Dinners @ \$ <u>20.00</u> per meal			\$ <u>80.00</u>
Other (Parking, Tolls, Conference Materials, etc.) - please list below:			\$ <u>-</u>
TOTAL APPROXIMATE COST		\$ <u>2620.00</u>	
AMOUNT APPROVED			
without prior approval from an administrator. Upon returning from an approved event, attendee must submit an itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.			
Requestor Signature: <u>Angelica Pereyra</u>			
Executive Director Approval: _____		Date: _____	
Funding Source: _____		SACS Code: _____	
Will costs be reimbursed by another organization? Yes/No		If so, what organization? _____	
Board of Trustee/Designee Approval: _____		Date: _____	
Board Approval Date (if applicable): _____		Business Office Review _____ (initial) (date)	



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**CONFERENCE/TRAVEL REQUEST FORM**

Employee Attendee(s) Name(s): <u>Lucia Percera</u>			
Department/Site: <u>FUERZA UNIDA PROS</u>		Date of Request: <u>1/16/26</u>	
Name of Conference/Activity: <u>PREPARATE</u>			
Organization/Company Holding the Conference/Activity: <u>COLLEGE BOARD</u>			
Location of Conference/Activity: <u>Chicago, IL</u>		Date(s) of Conference/Activity: <u>4.12.26 to 4.15.26</u>	
Purpose/Rationale (How will this conference/activity be of value to the school?) <u>Preparate highlights national models that are successfully preparing latinos for college</u>			
Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):			
Estimated Expenditures		Paid to Pay Directly	Reimbursement Requested
Conference Registration <u>1</u> people @ \$ <u>650</u> per person			Cost \$ <u>650.00</u>
Certificated Substitute(s) <u>—</u> days @ <u>—</u> per day (sal. & exp. h-h 1.)			\$ <u>-</u>
Travel - Mileage <u>—</u> miles @ \$ <u>0.70</u> per mile			\$ <u>-</u>
Travel - Airfare <u>1</u> people @ \$ <u>350</u> per person			\$ <u>350.00</u>
Travel - Ride Sharing Svs/Taxi/Shuttle <u>100.00</u> Type total amount into "cost" cell			\$ <u>100.00</u>
Lodging <u>4</u> nights @ \$ <u>360</u> per night			\$ <u>1440.00</u>
Meals <u>—</u> Breakfasts @ \$ <u>10.00</u> per meal			\$ <u>—</u>
<u>—</u> Lunches @ \$ <u>10.00</u> per meal			\$ <u>—</u>
<u>4</u> Dinners @ \$ <u>20.00</u> per meal			\$ <u>80.00</u>
Other (Parking, Tolls, Conference Materials, etc.) - please list below:			\$ <u>-</u>
TOTAL APPROXIMATE COST \$ <u>2620.00</u>			
AMOUNT APPROVED			
without prior approval from an administrator. Upon returning from an approved event, attendee must submit an itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.			
Requestor Signature: <u>[Signature]</u>			
Executive Director Approval: _____		Date: _____	
Funding Source: _____		SACS Code: _____	
Will costs be reimbursed by another organization? Yes/No		If so, what organization? _____	
Board of Trustee/Designee Approval: _____		Date: _____	
Board Approval Date (if applicable): _____		Business Office Review (Initial) (date)	



**Palisades Charter High School**

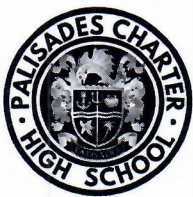
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**CONFERENCE/TRAVEL REQUEST FORM**

Employee Attendee(s) Name(s): <u>Ed Sugden</u>					
Department/Site: <u>FUERZA UNIDA PROJ.</u>		Date of Request: <u>1/16/26</u>			
Name of Conference/Activity: <u>PREPARE</u>					
Organization/Company Holding the Conference/Activity: <u>COLLEGE BOARD</u>					
Location of Conference/Activity: <u>Chicago, IL</u>		Date(s) of Conference/Activity: <u>4.12.26 to 4.15.26</u>			
Purpose/Rationale (How will this conference/activity be of value to the school?) <u>Preparate highlights national models that are successfully preparing Latin</u>					
Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals): <u>for College</u>					
Estimated Expenditures			Paid to Pay Directly	Reimbursement Requested	Cost
Conference Registration	<u>1</u> people @ \$ <u>650</u> per person				\$ <u>650.00</u>
Certificated Substitute(s)	<u>4</u> days @ <u>          </u> per day (sal. & stat. ben.)				\$ <u>-</u>
Travel - Mileage	<u>          </u> miles @ \$ <u>0.70</u> per mile				\$ <u>-</u>
Travel - Airfare	<u>1</u> people @ \$ <u>350</u> per person				\$ <u>350.00</u>
Travel - Ride Sharing		Type total amount into "cost" cell			\$ <u>100.-</u>
Svs/Taxi/Shuttle	<u>100.00</u>				
Lodging	<u>4</u> nights @ \$ <u>360</u> per night				\$ <u>1440.00</u>
Meals	Breakfasts @ \$ <u>10.00</u> per meal				\$ <u>-</u>
	Lunches @ \$ <u>10.00</u> per meal				\$ <u>80.00</u>
	<u>4</u> Dinners @ \$ <u>20.00</u> per meal				
Other (Parking, Tolls, Conference Materials, etc.) - please list below:					\$ <u>-</u>
TOTAL APPROXIMATE COST					\$ <u>2620.00</u>
AMOUNT APPROVED					
without prior approval from an administrator. Upon returning from an approved event, attendee must submit an Itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.					
Requestor Signature: <u>[Signature]</u> <u>2/9/26</u>					
Executive Director Approval: _____ Date: _____					
Funding Source: _____ SACS Code: _____					
Will costs be reimbursed by another organization? Yes/No If so, what organization? _____					
Board of Trustee/Designee Approval: _____ Date: _____					
Board Approval Date (if applicable): _____ Business Office Review _____					
(Initial) (date)					





# Palisades Charter High School

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## CONFERENCE/TRAVEL REQUEST FORM

Employee Attendee(s) Name(s): <u>Amie Whiteley</u>	
Department/Site: <u>IB</u>	Date of Request: <u>02/03/2026</u>
Name of Conference/Activity: <u>Preparat' 2026</u>	
Organization/Company Holding the Conference/Activity: <u>Collegeboard</u>	
Location of Conference/Activity: <u>Chicago, IL</u>	Date(s) of Conference/Activity: <u>April 13 - April 15</u>
Purpose/Rationale (How will this conference/activity be of value to the school?): <u>IB Program</u>	

**Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):**

Estimated Expenditures	Pali to Pay Directly	Reimbursement Requested	Cost
Conference Registration <u>1</u> people @ \$ <u>750</u> - per person			\$ <u>750</u> -
Certificated Substitute(s) _____ days @ _____ per day (sal. & stat. ben.)			\$ -
Travel - Mileage _____ miles @ \$ 0.70 per mile			\$ -
Travel - Airfare <u>1</u> people @ \$ <u>406.80</u> per person			\$ <u>406.80</u>
Travel - Ride Sharing Svs/Taxi/Shuttle _____ Type total amount into "cost" cell			\$ -
Lodging _____ nights @ \$ - per night			\$ -
Meals <u>2</u> Breakfasts @ \$ 10.00 per meal			
<u>1</u> Lunches @ \$ 10.00 per meal			\$ <u>70</u> -
<u>2</u> Dinners @ \$ 20.00 per meal			
Other (Parking, Tolls, Conference Materials, etc.) - please list below: <u>will be sharing a hotel room with Diana Kim</u>			\$ -
<b>TOTAL APPROXIMATE COST</b>			\$ -
<b>AMOUNT APPROVED</b>			

without prior approval from an administrator. Upon returning from an approved event, attendee must submit an itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.

Requestor Signature: [Signature]

Executive Director Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Funding Source: \_\_\_\_\_

SACS Code: \_\_\_\_\_

Will costs be reimbursed by another organization? \_\_\_\_\_

Yes/No

If so, what organization? \_\_\_\_\_

Board of Trustee/Designee Approval: \_\_\_\_\_

Date: \_\_\_\_\_

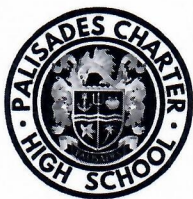
Board Approval Date (if applicable): \_\_\_\_\_

Business Office Review \_\_\_\_\_

(initial)

(date)





# Palisades Charter High School

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## CONFERENCE/TRAVEL REQUEST FORM

Employee Attendee(s) Name(s): <u>Diana Kim</u>	
Department/Site: <u>IB</u>	Date of Request: <u>02/03/2026</u>
Name of Conference/Activity: <u>Preparatory 2026</u>	
Organization/Company Holding the Conference/Activity: <u>College Board</u>	
Location of Conference/Activity: <u>Chicago, IL</u>	Date(s) of Conference/Activity: <u>April 13 - April 15</u>
Purpose/Rationale (How will this conference/activity be of value to the school?) <u>IB Program</u>	

**Cost Estimate (if one form is being submitted for multiple people, be sure to include all costs for all individuals):**

Estimated Expenditures	Pali to Pay Directly	Reimburse- ment Requested	Cost
Conference Registration <u>1</u> people @ \$150 - per person			\$ 150 -
Certificated Substitute(s) _____ days @ _____ per day (sal. & stat. ben.)			\$ -
Travel - Mileage _____ miles @ \$ 0.70 per mile			\$ -
Travel - Airfare <u>1</u> people @ \$406.80 per person			\$ 406.80
Travel - Ride Sharing Svs/Taxi/Shuttle _____ Type total amount into "cost" cell			\$ -
Lodging <u>3</u> nights @ \$ 299- per night			\$ 897 -
Meals <u>2</u> Breakfasts @ \$ 10.00 per meal			20
<u>1</u> Lunches @ \$ 10.00 per meal			\$ 10 -
<u>2</u> Dinners @ \$ 20.00 per meal			40 \$70
Other (Parking, Tolls, Conference Materials, etc.) - please list below: <u>Lodging does not include fees at this time</u> <u>will be sharing with Annie Whiteley</u>			\$ -
<b>TOTAL APPROXIMATE COST</b>			\$ -
<b>AMOUNT APPROVED</b>			

without prior approval from an administrator. Upon returning from an approved event, attendee must submit an itemized Request for Reimbursement and/or a Mileage Report & Reimbursement Claim form with a copy of this form, the activity agenda/program, and all original itemized receipts for any out of pocket expenses to supervisor within 3 to 5 days of return. Expenses submitted without original itemized receipts will not be reimbursed.

Requestor Signature: \_\_\_\_\_

Executive Director Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Funding Source: \_\_\_\_\_

SACS Code: \_\_\_\_\_

Will costs be reimbursed by another organization? \_\_\_\_\_

Yes/No

If so, what organization? \_\_\_\_\_

Board of Trustee/Designee Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Board Approval Date (if applicable): \_\_\_\_\_

Business Office Review \_\_\_\_\_

(initial)

(date)