Expenditures Form
2016-2017

Name: Pamela Magee Date: 2/21/2017 P.O. #

Date	Vendor	Description	Office Supplies	Classroom Materials	Confer-ences	Comm/ Postage	Other*	Business Miles	Rate Per Mile	Total Mileage
			4350	4310	5220	5920				5210
1/19/2017	Cathay Bank Corp Card	Chamber of Comerce Installation Dinner @ Riviera Country Club			115.00				-	115.00
3/21/2017	Cathay Bank Corp Card	California Charter School Conference (CCSA), Sacramento, SouthWest Flights			473.88				-	473.88
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
Total			-	-	588.88	-	-	-	0.535	588.88

Grand Total	**$**	**588.88**
Charged Amount	**$**	**588.88**
Net Due Employee	**$**	**-**

Employee Signature: Pam Magee

Approved By: **Date:**

Department/Program Name & #:

***-Provide full description on amounts in this column to allow for proper identification**
Please submit original receipts for reimbursement. Reimbursement forms must be submitted within 30 days of purchase.

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