

Palisades Charter High School
Expense Report/ Reimbursement Form
2018 Calendar Year

Name: Pamela Magee Date: 8/28/2018 P.O. # _____

Date	Vendor	Description	Office Supplies	Classroom Materials	Conferences	Comm/Postage	Other*	Business Miles	Business Rate Per Mile	Total Mileage
			4350	4310	5220	5920				5210
7/24/2018	Dr. Magee	The Resort - Admin Retreat (12760 W. Millennium Dr. Playa Vista, CA (round trip from PCHS)						18.40	0.545	10.03
7/25/2018	Dr. Magee	The California Endowment, Los Angeles (round trip from PCHS) mileage						40.40	0.545	22.02
8/8/2018	Dr. Magee	LAUSD Los Angeles Due Process Mtg. Beaudry (round-trip from PCHS)						38.00	0.545	20.71
8/9/2018	Dr. Magee	LAUSD Superintendent Annual Admin Address, Hollywood High Auditorium 1521 N. Highland Ave. LA, CA (round-trip from PCHS)						38.00	0.545	20.71
8/8/2018	Dr. Magee	LAUSD Los Angeles Due Process Mtg. Beaudry (round-trip from PCHS) Parking Fee			\$25.00				0.545	-
8/9/2018	Dr. Magee	LAUSD Superintendent Annual Admin Address, Hollywood High Auditorium 1521 N. Highland Ave. LA, CA (round-trip from PCHS) Parking Fee			\$8.00				0.545	-
8/15/2018	Dr. Magee	LAUSD Los Angeles Advocacy Council August Mtg. Beaudry (round-trip from PCHS)						38.00	0.545	20.71
									0.545	-
									0.545	-
									0.545	-
Total			-	-	33.00	-	-	172.80	6.54	94.18

Grand Total	\$	127.18
Charged Amount	\$	-
Net Due Employee	\$	127.18

Employee Signature: _____

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.