STATE OF CALIFORNIA

TRAVEL EXPENSE CLAIM

ELECTRONIC STD. 262 (REV. 04/95)

*See Instructions and *Privacy Statement On Reverse Side*

Page ___ of ___ Pages

CLAIMANT'S NAME: Matthew R. Bettenhausen		SSAN OR EMPLOYEE NUMBER*	DEPARTMENT: California Emergency Management Ag
POSITION: Acting Secretary	CB/ID NUMBER: E99	DIVISION OR BUREAU: Executive	INDEX NUMBER
RESIDENCE*		HEADQUARTERS ADDRESS: 3650 Schriever Ave.	TELEPHONE NUMBER: 916-324-8908
CITY	STATE: CA / ZIP CODE	CITY: Mather	STATE: CA / ZIP CODE: 95655

(1) MONTH/YEAR: September 2009		(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS		(6)	(7) TRANSPORTATION					(8)	(9)
(2) DATE	TIME			BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER	INCIDEN-TALS	(A) COST OF TRANS.	(B) TYPE USED	(C) CAREFARE TOLLS, PARKING	(D) PRIVATE CAR USE: MILES	(D) PRIVATE CAR USE: AMOUNT	BUSINESS EXPENSE	TOTAL EXPENSE FOR DAY
2-Sep	19:00	Sacramento to L.A.	$ 121.10						SC A					$ 121.10
3-Sep		L.A.	$ 121.10	$ 6.00	$ 10.00	$ 18.00	$ 6.00		R	$ 14.00				$ 175.10
4-Sep	15:20	L.A. to Sacramento		$ 6.00	$ 10.00			$ 13.31	A SC	$ 18.00				$ 47.31
11-Sep	19:00	Sacramento to L.A.	$ 121.10						SC A					$ 121.10
12-Sep	17:15	L.A. to Sacramento		$ 6.00	$ 10.00				A SC	$ 9.00				$ 25.00
17-Sep		Sac to SF and return							SC	$ 5.75				$ 5.75
23-Sep	9:40-17:10	Sac to San Diego and return				$ 18.00			SC A	$ 9.00				$ 27.00
24-Sep		Sacramento							SC	$ 5.00				$ 5.00
(10) SUBTOTALS			$ 363.30	$ 18.00	$ 30.00	$ 36.00	$ 6.00	$ 13.31		$ 60.75				$ 527.36

COLUMN CODE (ACCTG. USE ONLY)

CLAIM TOTAL $ 527.36

ACCOUNTING RECEIVED 10 MAR -3 PM 3:33

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attached receipts/voucher when required)

9/2-4: Ongoing visits to Fire Sites.

9/12: Attend Memorial Service for two Los Angeles County FD firefighters.

9/17: Travel to San Francisco to participate in Preparedness Month press event with SF Mayor; parking meter fees.

9/23: Testify at Joint Committee hearing - Flu, Fires and Federal Funding

9/24: Attend and speak at California Invasive Species Advisory Committee meeting

(12) NORMAL WORK HOURS: 9:00 - 6:00

(13) PRIVATE VEHICLE LICENSE NUMBER

(14) MILEAGE RATE CLAIMED: ~~48.5¢/Mile~~

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 milage rates exceed the minimun rate, I certify the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the [illegible] 0751, 0752, 0753, and 0754 pertaining to vehicle safety [illegible]

CLAIMA[illegible] DATE

DATE 3/2/2010

(17) SIGNATURE AND TITLE OF AU[illegible]TY FOR S[illegible]PENSES (See item 17 on reverse)

DATE

B-4

STATE OF CALIFORNIA

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POSITION: Acting Secretary	CB/ID NUMBER: E99	DIVISION OR BUREAU: Executive	INDEX NUMBER
RESIDENCE*		HEADQUARTERS ADDRESS: 3650 Schriever Ave.	TELEPHONE NUMBER: 916-324-8908
CITY	STATE: CA / ZIP CODE	CITY: Mather	STATE: CA / ZIP CODE: 95655

(1) MONTH/YEAR: September 2009		(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS		(6)	(7) TRANSPORTATION					(8) BUSINESS EXPENSE	(9) TOTAL EXPENSE FOR DAY
(2) DATE	TIME			BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER	INCIDEN-TALS	(A) COST OF TRANS.	(B) TYPE USED	(C) CAREFARE TOLLS, PARKING	(D) PRIVATE CAR USE: MILES	(D) PRIVATE CAR USE: AMOUNT	
28-Sep	6:15	Sacramento to DC											
29-Sep	21:30	DC to Sacramento											
(10) SUBTOTALS													
COLUMN CODE (ACCTG. USE ONLY)													

ACCOUNTING RECEIVED 10 MAR -3 PM 3:30

CLAIM TOTAL

11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attached receipts/voucher when required)

Travel to Virginia for ITACG meeting.

(12) NORMAL WORK HOURS: 9:00 - 6:00

(13) PRIVATE VEHICLE LICENSE NUMBER:

(14) MILEAGE RATE CLAIMED: 48.5¢/Mile

AGENCY ACCOUNTING OFFICE USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

5) 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.

a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify the cost of operating the vehicle was equal to or greater than the rate aimed, and that I have ... Section 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle safety and seat belt usage.

LA... DATE

DATE 3/2/2010

7) SIGNATURE AND TITLE OF AUTHORITY FOR ... 3 (See item 17 on reverse)

DATE