BOT 4/12/16
Finance 3/4/16

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MAR 17 2016
Office of the Chancellor
Peralta Community College District

Peralta Community College District
333 East 8th St., Oakland, CA 94606

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request *(Complete and submit before attending conference.)*

Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Matthew Jones	Int'l Stud. Supp. Spec.	International Education	District	510-466-7381

Conference or other Travel Name *(Attach conference announcement, brochure, or other descriptive document.)*

NAFSA Association of International Educators Annual Conference (NAFSA Academy Event)

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Denver	CO		5/28/2016	6/3/2016		5/28/2016	6/3/2016

Purpose: Intensive NAFSA training to increase knowledge and resources to better serve international students.

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.

- *Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed $25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.*
- *Per Diem Amount requested must be equal or less than maximum.*
- *Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.*

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)	Lodging	Meals & Incidentals	Section B. Total $ Each Day X Per Diem Days: Total $ (Per Day)	Per Diem Days	$ Each Day X Per Diem Days (Maximum Permitted)
See Per Diem Rates Tab for amount to enter	$229	$100	$329	7	$2,303

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	$2,303	$2,303		$205					$2,303
Non- Per Diem			$0	~~$220~~	$283	$9	$250		747 ~~$782~~
								Total (Not to Exceed Amount):	~~$3,065~~ $3,050

Funding

Source / Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration				5205					
Non-Local	1	01	125	5202	1	649400	0000	00	
Local				5203					
Membership				5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration	Already Paid through NAFSA Academy fees.		0.00
Employee	Matthew Jones		2,452.00

Signatures and Approvals

Employee / Date: 3/4/16	Supervisor / Date	President's Signature / Date
Business Officer / Date: 3/17/16	Chancellor / Date: LJ Crawford for JC 5/12/16	Out of State Travel: Board of Trustees Approval Date

BOT 4/12/16
Finance 3/4/1

RECEIVED
MAR 17 2016
Office of the Chancellor
Peralta Community College

Peralta Community College District
333 East 8th St., Oakland, CA 94606

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request *(Complete and submit before attending conference.)*
Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Nha Le	Int'l Stud. Supp. Spec.	International Education	District	510-587-7802

Conference or other Travel Name *(Attach conference announcement, brochure, or other descriptive document.)*

NAFSA Association of International Educators Annual Conference

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Denver	CO		5/30/2016	6/3/2016		5/30/2016	6/3/2016

Purpose: Intensive NAFSA training to increase knowledge and resources to better serve international students.

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.
- *Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed $25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.*
- *Per Diem Amount requested must be equal or less than maximum.*
- *Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.*

Section A. Daily Per Diem Limits *(Maximum Expenses Per Day)*

	Lodging	Meals & Incidentals
See Per Diem Rates Tab for amount to enter	$259	$100

Section B. Total $ Each Day X Per Diem Days

Total $ (Per Day)	Per Diem Days	$ Each Day X Per Diem Days (Maximum Permitted)
$359	5	*$1,795*

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	$1,795	$1,795							$1,795
Non- Per Diem			$740	~~$200~~ $154	~~$762~~ $342	$9	$150		~~$1,861~~ 1395
								Total (Not to Exceed Amount):	~~$3,656~~ $3,190.00

Funding

Source									
Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration				5205					
Non-Local	1	01	125	5202	1	649400	0000	00	
Local				5203					
Membership				5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee	Nha Le		2,924.80

Signatures and Approvals

3/4/16
Employee / Date

Supervisor / Date

President's Signature / Date

3/16/16
Business Officer / Date

YJ Crawford for JC Laguerre 3/18/16
Chancellor / Date

Out of State Travel:
Board of Trustees Approval Date

BOT 4/12/16

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Office of the Chancellor
Peralta Community Colleges

Peralta Community College District

333 East 8th St., Oakland, CA 94606

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request *(Complete and submit before attending conference.)*

Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Josh Ramos	Kin Instructor/Coach	Kinesiology/Athletics	Laney	(510)464-3475

Conference or other Travel Name *(Attach conference announcement, brochure, or other descriptive document.)*

2016 AFCA National Convention

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
San Antonio	TX		1/10/2016	1/13/2016		1/9/2016	1/12/2016

Purpose: Professional Development

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.

- *Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed $25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.*
- *Per Diem Amount requested must be equal or less than maximum.*
- *Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.*

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)	Lodging	Meals & Incidentals	Section B. Total $ Each Day X Per Diem Days: Total $ (Per Day)	Per Diem Days	$ Each Day X Per Diem Days (Maximum Permitted)
See Per Diem Rates Tab for amount to enter	$191	$61	$252	4	$1,010

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	1010	574							$574
Non- Per Diem			$100		$321		$100		$521

Total (Not to Exceed Amount): $1,095

Funding

Source Professional Development 1,000.00 only

Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration	5	01	551	5205	1	601100	3102	00	
Non-Local	5	01	551	5202	1	601100	3102	00	
Local				5203					
Membership				5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee		2-99152	1,000.00

Signatures and Approvals

Employee / Date 11/24/15

Supervisor / Date 12/1/15

President's Signature / Date 4/12/16

Business Officer / Date 1/8/16

Chancellor / Date 01-25-16

Out of State Travel: Board of Trustees Approval Date

BT 1/14/16

Post 4/12/16

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The Chancellor
Community College

Peralta Community College District

333 East 8th St., Oakland, CA 94606

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request *(Complete and submit before attending conference.)*

Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
DAVID SIMON	FACULTY	ECONOMICS	LANEY	510-464-3201

Conference or other Travel Name *(Attach conference announcement, brochure, or other descriptive document.)*

Online Course

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
NEWARK	DE		1-8-16	5/26/16			

Purpose: Tuition reimbursement for doctoral sustaining course at the University of Delaware

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.

- *Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed $25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.*
- *Per Diem Amount requested must be equal or less than maximum.*
- *Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.*

Section A. Daily Per Diem Limits *(Maximum Expenses Per Day)*

	Lodging	Meals & Incidentals
See Per Diem Rates Tab for amount to enter		

Section B. Total $ Each Day X Per Diem Days

Total $ (Per Day)	Per Diem Days	$ Each Day X Per Diem Days (Maximum Permitted)
$0		

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem									$0
Non- Per Diem			$966						$966
								Total (Not to Exceed Amount):	$966

Funding

Source: Professional Development

Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration	5	01	551	5205	1	601100	3102	00	
Non-Local				5202					
Local				5203					
Membership				5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee		2-101242	$966

Signatures and Approvals

Simon 2/24/16	[signature] 3-17-16	[signature] 3/24/16
Employee / Date	Supervisor / Date	President's Signature / Date
[signature] 3/21/16	Y Crawford for JC Laguerre 3/28/16	Out of State Travel: Board of Trustees Approval Date
Business Officer / Date	Chancellor / Date	

Form 7400A - 11/5/2014 Finance and Administration