



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

2-107907

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DEC 01 2016
Office of the Chancellor
Peralta Community Colleges

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
Kathy Ma	Counselor	Counseling	T-311	(510) 464-3132

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

2016 National Council on Student Development (NCSD) Conference - "America's Community Colleges: Sharpening Our Focus"

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
New Orleans	LA		10/14/2016	10/18/2016		10/14/2016	10/18/2016

Purpose: To learn promising student development research and practices at community colleges

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)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$77	\$64	\$141	5	\$705

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	\$705	\$705							\$705
Non- Per Diem							\$150		\$150
Total (Not to Exceed Amount):									\$855

Funding

Source	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration				5205					
Non-Local	5	11	542	5202	1	640000	1091	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	Kathy Ma	2-107907	463.85

Signatures and Approvals

 Employee / Date 10-24-16	 Supervisor / Date 11-15-16	 President's Signature / Date 11/30/16
 Business Officer / Date	 Chancellor / Date 11-01-16	Out of State Travel: Board of Trustees Approval Date

1/24/16
11/16/16

Reg 2-108075

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

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11/14/16

Vendor 731263

RECEIVED
11/16/16

TRAVEL REQUEST AND EXPENSE CLAIM

Office of the Chancellor
Peralta Community College District

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
Rina Santos	Instructor	Mathematics	Laney - G201	9258953917

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

American Mathematical Association of 2-year 42nd Annual Conference

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Denver	CO		11/18/2016	11/19/2016		11/18/2016	11/20/2016

Purpose: This is my first time attending the AMATYC Conference in Denver, Colorado. I wanted to explore what this conference had to offer versus those presented by CMC3. AMATYC is supposed to be more geared towards community college instruction

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)	Section B. Total \$ Each Day X Per Diem Days				
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$83	\$36	\$119	2	\$238

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		\$238							\$238
Non- Per Diem			\$513	\$37	\$0	\$0	\$133	\$78	\$761
Professional Development \$750 Max Total (Not to Exceed Amount):									\$999

Funding

Source	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	[Signature] 11/10/16
	Non-Local	5	01	551	5202	1	601100	3102	00	[Signature] 11/10/16
	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	Rina Santos	2-108075	750 ⁰⁰

Signatures and Approvals

[Signature] 10/31/16	Employee / Date	[Signature] 11/14/16	Supervisor / Date	[Signature] 11/16/16	President's Signature / Date
[Signature] 11/14/16	Business Officer / Date	[Signature] 11/23/16	Chancellor / Date		Out of State Travel: Board of Trustees Approval Date

411
11/14/16

11/16/16