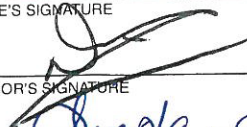
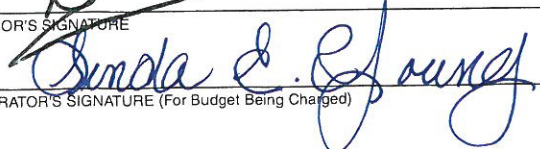

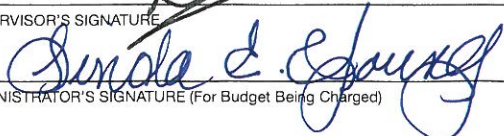


Clark County School District
MILEAGE/TRAVEL/EXPENSE CLAIM
 See Instructions On Page 3

EMPLOYEE NAME <div align="center">Dwight D. Jones</div>					
CONTACT NAME/PHONE # <div align="center">Elizabeth Carrero / 799-5310</div>		PERSONNEL IDENTIFICATION NUMBER <div align="center">[REDACTED]</div>		WORK LOCATION CODE <div align="center">001</div>	
MAILING ADDRESS (Checks will not be mailed to a School District address.) (Must agree with the address as it appears on your payroll stub.) [REDACTED]					
PURPOSE OF TRAVEL OR EXPENSE Nevada Association of School Superintendents (NASS) Meeting; Reno, Nevada; April 3-6, 2012					
CLASSIFICATION: <input checked="" type="checkbox"/> Travel <input type="checkbox"/> Other Expense <input type="checkbox"/> Travel Advance <input type="checkbox"/> Accumulated travel, normal duties, for the month of _____, 20____ <input checked="" type="checkbox"/> Special trip (out of county) LEAVE (time, date) <u>4/3/12</u> RETURN (time, date) <u>4/6/12</u>					
DATE	DESCRIPTION OF TRAVEL and/or OTHER EXPENSE	PER DIEM	DISTRICT CREDIT CARD CHARGES	OTHER EXPENSES	OWN CAR MILES
4/3/12	Fuel for Rental Car - Shell			38.90	
	Superintendent Jones used personal funds and will be reimbursed by CCSD.				
4/4/12	Lodging - Best Western Hi-Desert Inn		114.44		
4/5/12	Fuel for Rental Car - Shell			46.70	
	Superintendent Jones used personal funds and will be reimbursed by CCSD.				
4/6/12	Lodging - Grand Sierra Resort and Casino		133.34		
Page 1 TOTALS		\$0.00	\$247.78	\$85.60	0.00
Page 2 TOTALS		0.00	166.93	72.60	0.00
TOTALS		\$0.00	\$414.71	\$158.20	0.00
55.5 cents per mile x <u>0.00</u> = <u>\$0.00</u>					
Cost Center, Internal Order, Grant, WBS (Select One)		Fund	G/L Account	Functional Area*	
<div align="center">1010001001</div>			5580000000		
PLEASE PRINT NAME BESIDE SIGNATURE					
EMPLOYEE'S SIGNATURE 		DATE <div align="center">5-7-12</div>	AMT. REQUESTED IN ADVANCE \$ <div align="right">0.00</div>		
SUPERVISOR'S SIGNATURE 		DATE <div align="center">5-7-12</div>	AMT. CLAIMED (ATTACH RECEIPTS) \$ <div align="right">0.00</div>		
ADMINISTRATOR'S SIGNATURE (For Budget Being Charged)		DATE	BALANCE DUE EMPLOYEE \$ <div align="right">158.20</div>		
			BALANCE DUE CCSD \$ <div align="right">0.00</div>		

NOTE: In all cases of payment the employee's **Personnel Identification Number** is required before payment can be issued. **CCSD**

Clark County School District
MILEAGE/TRAVEL/EXPENSE CLAIM
See Instructions On Page 3

EMPLOYEE NAME		CONTACT NAME/PHONE #			
Dwight D. Jones		Elizabeth Carrero / 799-5310			
DATE	DESCRIPTION OF TRAVEL and/or OTHER EXPENSE	PER DIEM	DISTRICT CREDIT CARD CHARGES	OTHER EXPENSES	OWN CAR MILES
4/6/12	Fuel for Rental Car - Super 7			38.60	
	Superintendent Jones used personal funds and will be reimbursed by CCSD.				
4/6/12	Fuel for Rental Car - Sinclair			34.00	
	Superintendent Jones used personal funds and will be reimbursed by CCSD.				
4/6/12	Rental Car - Hertz Rent-A-Car		166.93		
TOTALS PAGE 2		0.00	166.93	72.60	0.00
EMPLOYEE'S SIGNATURE		DATE			
		5-7-12			
SUPERVISOR'S SIGNATURE		DATE			
		5-7-12			
ADMINISTRATOR'S SIGNATURE (For Budget Being Charged)		DATE			

NOTE: In all cases of payment the employee's **Personnel Identification Number** must be entered before payment can be issued.