## CCF-174 Rev. 12/14

## **Clark County School District** MILEAGE/TRAVEL/EXPENSE CLAIM

See Instructions On Reverse Side

EMPLOYEE N	IAME Skorkowsky							
CONTACT NAME/PHONE # PERSONNEL ID Elizabeth Carrero - 799-5310			DENTIFICATION NUMBER			WORK LOCATION CODE 001		
5100 We	RESS (Checks will not be mailed to a School District address.) (Must agree with the a st Sahara Avenue, Las Vegas, Nevada 89146	address as it	appears on you	ur payroll	stub.)			
	TRAVEL OR EXPENSE with Legislators, NASS Mtg./Nevada Association of Sc	chool Ad	Iministrato	ors (N	ASA) Annua	al Spring Co	onference	
CLASSIFICATION:   ☑ Travel  ☐ Other Expense				☐ Travel Advance				
Accumulated travel, normal duties, for the month of				, 20				
Special trip (out of county) LEAVE (time, date) 12:35 p.m., June 14, 2015 R			RETURN (tin	RETURN (time, date) 5:40 p.m., June 15, 2015  DISTRICT				
DATE	DESCRIPTION OF TRAVEL and/or OTHER EXPENSE		PER DIEM		CREDIT CARD CHARGES	OTHER EXPENSES	OWN CAR MILES	
6/14/15	Airfare - Southwest				348.00		mesy	
6/14/15	Registration - Nevada Association of School Administrators							
	(Paid by Check through P.O. # 3000449387)				89.00	17 311		
6/14/15	Lodging - Harrah's Lake Tahoe				103.96			
0/44/45								
6/14/15	Car Rental - Hertz			_	107.58			
							W.	
				+				
				+				
				+				
	TOTALS			0.00	\$648.54	\$0.00	0.00	
	57.5 cents per mile x =	\$0.00						
Cost Center, Internal Order, Grant, WBS (Select One)		Fu	und	G/L Account		Functional Area*		
1010001001			100	5580000000		F10002320		
and the second	INT NAME BESIDE SIGNATURE						- 1 1 1	
EMPLOYE'S SIGNATURE Pat Skorkowsky		6/16/15			MT. REQUESTED I ADVANCE	\$	0.00	
SUPERVISOR'S SIGNATURE DATE				AMT. CLAIMED (ATTACH RECEIPTS) \$ 0.00				
ADMINISTRATOR'S SIGNATURE (For Budget Being Charged)  DATE					ALANCE DUE MPLOYEE	\$	0.00	
Sunda Ochund 6-19-15					ALANCE DUE CSD	\$	0.00	