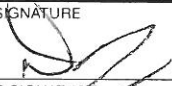
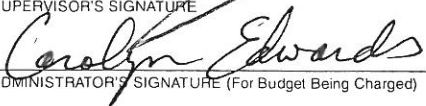


Clark County School District MILEAGE/TRAVEL/EXPENSE CLAIM

See Instructions On Page 3

EMPLOYEE NAME <p style="text-align: center;">Dwight D. Jones</p>					
CONTACT NAME/PHONE # Elizabeth Carrero / 799-5310		PERSONNEL IDENTIFICATION NUMBER [REDACTED]		WORK LOCATION CODE 001	
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 NBC News Education Nation Summit; New York City, New York; September 25-28, 2011					
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>9/25/11</u> RETURN (time, date) <u>9/30/11</u>					
DATE	DESCRIPTION OF TRAVEL and/or OTHER EXPENSE	PER DIEM	DISTRICT CREDIT CARD CHARGES	OTHER EXPENSES	OWN CAR MILES
	This trip was taken in conjunction with the U.S. Department of Education trip that took place September 29-30, 2011.				
9/25/11	Airfare - Frontier Airlines		47.00		
	Airline credit was applied to this roundtrip airfare purchase with the balance owed being \$47.00. The U.S. Department of Education paid for the return trip to Las Vegas; Frontier credit was received (not refunded) for the return portion of this airfare.				
Page 1 TOTALS		\$0.00	\$47.00	\$0.00	0.00
Page 2 TOTALS		0.00	53.04	0.00	0.00
TOTALS		\$0.00	\$100.04	\$0.00	0.00
55.5 cents per mile x <u>0.00</u> = <u>\$0.00</u>					
Cost Center, Internal Order, Grant, WBS (Select One) <p style="text-align: center;">1010001001</p>		Fund	G/L Account 5580000000	Functional Area*	
PLEASE PRINT NAME BESIDE SIGNATURE					
EMPLOYEE'S SIGNATURE 		DATE 10-13-11	AMT. REQUESTED IN ADVANCE \$ 0.00		
SUPERVISOR'S SIGNATURE 		DATE 11-02-11	AMT. CLAIMED (ATTACH RECEIPTS) \$ 0.00		
ADMINISTRATOR'S SIGNATURE (For Budget Being Charged)		DATE	BALANCE DUE EMPLOYEE \$ 0.00		
			BALANCE DUE CCSD \$ 8.84		

NOTE: In all cases of payment the employee's Personnel Identification Number is required before payment can be issued. **CCSD**
 060 *Functional Area is only required when using an Internal Order or Grant. CLARK COUNTY SCHOOL DISTRICT

Clark County School District MILEAGE/TRAVEL/EXPENSE CLAIM

See Instructions On Page 3

EMPLOYEE NAME <p style="text-align: center;">Dwight D. Jones</p>		CONTACT NAME/PHONE # <p style="text-align: center;">Elizabeth Carrero / 799-5310</p>			
DATE	DESCRIPTION OF TRAVEL and/or OTHER EXPENSE	PER DIEM	DISTRICT CREDIT CARD CHARGES	OTHER EXPENSES	OWN CAR MILES
9/25/11	Taxi - New York City Taxi Superintendent Jones utilized this service for transportation from the New York City airport to the Intercontinental Hotel. Mr. Jones will reimburse CCSD \$8.84 of this charge which was for the tip.		53.04		
9/28/11	Lodging - Intercontinental Hotel This was arranged and paid for by NBC News.				
9/30/11	Parking - McCarran International Airport Superintendent Jones utilized parking during this trip and the U.S. Department of Education Meeting during September 29-30, 2011. The charge of \$76.00 will be included on the CCF-174 for the U.S. Department of Education Meeting trip.				
TOTALS PAGE 2		0.00	53.04	0.00	0.00
EMPLOYEE'S SIGNATURE		DATE			
SUPERVISOR'S SIGNATURE		DATE			
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.