

CLAIMANT'S NAME Jonathan Y. Thomas		SSN or EMPLOYEE NUMBER* [REDACTED]		DEPARTMENT CIRM	
POSITION Chairman		CB/ID No.	DIVISION or BUREAU CIRM		INDEX NUMBER
RESIDENCE ADDRESS *			HEADQUARTERS ADDRESS		TELEPHONE NUMBER (415) 396-9113
CITY [REDACTED]		STATE [REDACTED]	ZIP CODE [REDACTED]	CITY [REDACTED]	
		STATE [REDACTED]	ZIP CODE [REDACTED]		

(1) MONTH/YEAR 10/2012	(2) DATE   TIME	(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY
				BREAK-FAST	LUNCH	O.T., L.T., N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE MILES   AMOUNT		
	9/30   18:30	Los Angeles to San Francisco	142.10					75.00	T		12   6.66		223.76
	10/1   19:30 18:30	San Francisco to Los Angeles		12.80		6.32		46.40	T	14.92	12   6.66		87.10
	3   07:00 21:45	Los Angeles to San Francisco to Los Angeles +				12.46		282.00	T	14.92	24   13.32	32.78	355.48
	4   18:45	Los Angeles to San Francisco	142.10					77.00	T		12   6.66		225.76
	5   18:00 15:30	San Francisco to Los Angeles			20.66			92.04 <del>46.90</del>	T	14.92	12   6.66		134.28 <del>89.14</del>
	7   19:00	Los Angeles to San Francisco	161.79					52.50 <del>50.19</del>	T		12   6.66		220.95 <del>218.64</del>
	8   21:30	San Francisco to Los Angeles			17.12	20.03		50.00 <del>50.00</del>	T	21.46 <del>20.03</del>	12   6.66		115.27 <del>113.84</del>
	9	Marina Del Rey										65.29	65.29
	10   06:45	Los Angeles to San Fran. to Berkeley +			24.00	49.33		50.00	T		12   6.66		129.99
	11	Berkeley		4.85		31.10							35.95
	12   17:00	Berkeley to Los Angeles			47.97			59.00	T	44.74	12   6.66		158.37
	14   19:00	Los Angeles to San Francisco	212.70 <del>21.70</del>			3.49		55.00	T		12   6.66		277.85 <del>86.85</del>
	15   20:30	San Francisco to Los Angeles									12   6.66	60.10	66.76
(10)	<b>SUBTOTALS</b>		467.69	17.65	109.75	122.73	0.00	791.49		109.53	144   79.92	158.17	1996.75 <del>1856.93</del> <b>2096.18</b>
<b>COLUMN CODE (ACCTG. USE ONLY)</b>													

**CLAIM TOTAL**

*See page 2 for Additional Expenses*

**3529.00**

~~13428.97~~  
~~1856.93~~

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)  
 9/30-10/1) CIRM Meetings; 3) CIRM mtgs plus meeting in Mtn View; 4-5) mtg and tour of UCSF stem cell bldg with Controller; 7-8) CIRM meetings, ICOC Science Subcmte; 9) Business Lunch; 10-12) Business lunch and ICIC Evaluation Subcmte, GWG Meeting; 14-15) CIRM meetings

(12) NORMAL WORK HOURS  
[REDACTED]

(13) PRIVATE VEHICLE LICENSE NUMBER  
[REDACTED]

(14) MILEAGE RATE CLAIMED  
.555

**AGENCY ACCOUNTING OFFICE  
 USE ONLY**  
 PAID BY REVOLVING FUND CHECK NUMBER

(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754

[REDACTED]

DATE 11/5/12

(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT  
[REDACTED]

DATE 11/5/2012

(See Item 17 on reverse)

**TRAVEL EXPENSE CLAIM**

STD. 262 (REV. 7/2005)

*See Instructions and \*Privacy Statement On Reverse Side*

CLAIMANT'S NAME [REDACTED]		SSN or EMPLOYEE NUMBER* [REDACTED]		DEPARTMENT CIRM	
POSITION Chairman		CB/ID No.	DIVISION or BUREAU CIRM		
RESIDENCE ADDRESS *			HEADQUARTERS ADDRESS		TELEPHONE NUMBER (415) 396-9113
CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]	CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]

(1) MONTH/YEAR 10/2012	(2) DATE	(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY	
				BREAK-FAST	LUNCH	O.T., L.T., N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
	TIME										MILES	AMOUNT		
17	19:30	Los Angeles to San Francisco									12	6.66		6.66
18	23:45	San Francisco to Los Angeles									12	6.66		6.66
22	05:30	Los Angeles to San Francisco	169.01	16.33	20.17	10.58		81.81 <del>83.50</del>	T		12	6.66		304.56 306.25
23		San Francisco to Oakland	169.96			10.58		121.02	T					301.56
24		Oakland to Burlingame		16.05	12.86	15.75		78.52	T					123.18
25		Burlingame				25.92		60.00	T					85.92
26	19:45	Burlingame to Los Angeles			8.85			70.00	T		12	6.66		85.51
29	19:00	Los Angeles to La Jolla	191.36								122	67.71		259.07
30		La Jolla	191.36											191.36
31	17:00	La Jolla to Los Angeles									122	67.71		67.71
														0.00
														0.00
														0.00
(10) SUBTOTALS			721.69	41.23	33.03	62.83	0.00	413.04		0.00	292	162.06	0.00	1432.19 <del>1,433.88</del>
COLUMN CODE (ACCTG. USE ONLY)														

**CLAIM TOTAL** 3,290.81 ~~1,433.88~~ 1432.19

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required) 17-18) CDAp Meeting; 22-26) CIRM meetings, Governance Subcmte mtg, mtg w/ Ted Love, Task Force Mtg, ICOC Board Mtg, Staff activity; 29-31) Stem Cells on the Mesa Meeting	(12) NORMAL WORK HOURS [REDACTED]
	(13) PRIVATE VEHICLE LICENSE NUMBER [REDACTED]
	(14) MILEAGE RATE CLAIMED .555
	<b>AGENCY ACCOUNTING OFFICE USE ONLY</b> PAID BY REVOLVING FUND CHECK NUMBER

(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and cost-benefit.

CL [REDACTED]	DATE 11/5/12	(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT [REDACTED]	DATE 11/5/2012
(17) [REDACTED]	(See Item 17 on reverse)		DATE