STATE OF CALIFORNIA – DEPARTMENT OF PERSONNEL ADMINISTRATION

TRAVEL EXPENSE CLAIM

STD. 262 (REV. 9/2007)

See Instructions and *Privacy Statement On Reverse Side

CLAIMANT'S NAME	SSN or EMPLOYEE NUMBER*	DEPARTMENT
Elona Baum	[redacted]	Legal

POSITION	CB/ID No.	DIVISION or BUREAU	INDEX NUMBER
General Counsel		CIRM	

RESIDENCE ADDRESS *	HEADQUARTERS ADDRESS	TELEPHONE NUMBER
	210 King Street, 3rd floor	(415) 396-9255

CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
			San Francisco	CA	94107

(1) NORMAL WORK HOURS	(2) PRIVATE VEHICLE LICENSE NUMBER	(3) MILEAGE RATE CLAIMED
[redacted]	[redacted]	0.565

(4) MONTH/YEAR 1/2013 (5) DATE	TIME	(6) LOCATION WHERE EXPENSES WERE INCURRED	(7) LODGING	(8) MEALS BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER	(9) INCIDEN-TALS	(10) TRANSPORTATION (A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE MILES	AMOUNT	(11) BUSINESS EXPENSE	(12) TOTAL EXPENSES FOR DAY
1/3/	1600 ~~4:32~~	SFO airport			4.40	32.00					20.00	11.30		47.70
1/4	~~7:48~~ 1630				18.72					103.10	30.00	16.95		138.77
												0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
												0.00		0.00
(13) **SUBTOTALS**			0.00	0.00	23.12	32.00	0.00	0.00		103.10	50.00	28.25	0.00	186.47
COLUMN CODE (ACCTG. USE ONLY)														

CLAIM TOTAL $186.47

(14) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)

1-3-13 Travel to San Diego to tour Organovo Labs on 1-4-13

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 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 seat belt usage.

[redacted] DATE 1/16/13

(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT [redacted] DATE 1/17/2013

(17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE and TITLE *(See Item 17 on reverse)* DATE