

TRAVEL EXPENSE CLAIM

See Instructions and *Privacy Statement On Reverse Side

STD. 262 (REV. 9/2007)

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CLAIMANT'S NAME Matthew James Plunkett		SSN or EMPLOYEE NUMBER*	DEPARTMENT
POSITION Chief Financial Officer	CB/ID No.	DIVISION or BUREAU Calif. Institute for Regenerative Medicine	INDEX NUMBER
RESIDENCE ADDRESS *		HEADQUARTERS ADDRESS 210 King St.	TELEPHONE NUMBER (415) 396-9811
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 0.555
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(4) MONTH/YEAR	(5) DATE	(5) TIME	(6) LOCATION WHERE EXPENSES WERE INCURRED	(7) LODGING	(8) MEALS			(9) INCIDENTALS	(10) TRANSPORTATION				(11) BUSINESS EXPENSE	(12) TOTAL EXPENSES FOR DAY	
					BREAK-FAST	LUNCH	O.T., LT, N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
										MILES	AMOUNT				
Feb '12	2/8	12:00 1:03p	Americano, San Francisco CA								0.00	29.54	29.54		
	2/7	8:30a 9:37a	Mimi's Cafe, Dublin CA								0.00	29.07	29.07		
	2/10	1145a 1244p	Paragon, San Francisco CA								0.00	20.56	20.56		
	2/29		Public Transit for Feb 2012						110.00	B	0.00		110.00		
	2/14	1200p 119p	Coco 500, San Francisco CA								0.00	109.79	109.79		
	3/2	7a 6p	Conference at Buck Institute in Novato, CA								5.00	69.40	38.52	43.52	
	3/5	640a 828a	Amtrak Emeryville-> Sacramento						27.00	R	0.00		27.00		
											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	0.00	0.00	0.00	137.00		5.00	69.40	38.52	188.96	369.48
COLUMN CODE (ACCTG. USE ONLY)															

CLAIM TOTAL \$369.48

(14) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)
 Feb 7: Marcy Feit, Finance Subcommittee co-chair; discussed CIRM finance
 Feb 8: Meeting with biotech licensing attorney regarding licensing economics and terms
 Feb 10: Elona Baum & Matt Plunkett meeting with stem cell investor in SF
 Feb 14: Jon Thomas (ICOC Chair) & Michael Goldberg (Finance subcommittee co-chair); discussed CIRM finance

AGENCY ACCOUNTING OFFICE USE ONLY
PAYED BY REVOLVING FUND CHECK NUMBER

*Note: 3/2/12 toll expense, \$5.00, is Richmond - San Rafael Bridge
 3/15/12 Transportation expense to CALSTAR training in Sacramento.*

(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, 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 the State of California Department of Personnel Administration, Section 54 pertaining to vehicle safety and seat belt usage.

DATE	(16) SIGNATURE AND PAYMENT	DATE
March 5, 2012	[Signature]	3.5.12
DATE	DATE	DATE