

TRAVEL EXPENSE CLAIM

STD. 262 (REV. 7/2005)

See Instructions and \*Privacy Statement On Reverse Side

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CLAIMANT'S NAME: Kevin McCormack; POSITION: Director Public Communications; RESIDENCE ADDRESS: 210 King Street, San Francisco, CA 94107; DIVISION of BUREAU: CA Institute for Regenerative Medicine; TELEPHONE NUMBER: (415) 396-9813

Table with columns for DATE, TIME, LOCATION, MEALS, TRANSPORTATION, BUSINESS EXPENSE, and TOTAL EXPENSES FOR DAY. Includes entries for Taxi to ALS Golden Gate chapter, SF to Lawrence Livermore Berkeley Lab, and San Jose Tech Museum.

SUBTOTALS row showing totals for various categories: LODGING (0.00), MEALS (0.00), TRANSPORTATION (16.00), BUSINESS EXPENSE (0.00), TOTAL EXPENSES (96.78).

CLAIM TOTAL row showing a total of \$96.93.

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required): 1) Provided CIRM posters for ALS Gala Event honoring ICOC Board member Diane Winokur; 2) Business meeting at Lawrence Livermore Berkeley Lab to discuss speaking event; 3) Business meeting with San Jose Tech Museum of Innovation - discuss collaboration event

(12) NORMAL WORK HOURS; (13) PRIVATE VEHICLE LICENSE NUMBER; 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. DATE: 5/20/13; DATE: 5/29/13