TRAVEL EXPENSE CLAIM STD. 262 (REV. 7/2005) Statement O											Page	of	Pa	nes	
CLAIMANT'S NAME							SSN or EMPLOYEE NUMBER*					RTMENT	ra	Pages	
ontl	nan Th	omas													
POSITION CB/ID No.							DIVISION or BUREAU						INDEX NU	MBER	
Chariman RESIDENCE ADDRESS								CIRM							
ESIDE	ENCE AD	DRESS *	HEADQUARTERS ADDRESS				TELEPHO		NE NUMBER						
210 King Street CITY STATE ZIP CODE CITY											STATE ZIP CODE		2005		
STATE ZIF CODE								San Francisco				CA			
1) MONTH/YEAR			(4)	/E)	MEALS				TRANSPORTAT		7		94107		
June		LOCATION	(4)	(5)	IVIEALS	0.T., L/1		(7)	TRANSPORTATION (C)		T		(8)	(9)	
) DATE		WHERE EXPENSES WERE INCURRED	LODGING	BREAK- FAST	LUNCH	N/C, RELC OR DINNER	O. INCIDEN-	(A) COST OF TRANS.	(B) TYPE USED	CARFARE, TOLLS, PARKING	PRIVATE CAR USE		BUSINESS EXPENSE	TOTAL EXPENSES FOR DAY	
11	8 .00 7 1030	San Francisco/Boston	289.56	and the second s	16.35	25.9)4				WILLO	AMOUNT		331.8	
12		Boston	289.56								-		211-25		
13	2400 9:00	Boston/San Francisco				23.5	55	22.00	Т	90.00			52.00 -59:22	187.5 194.77	
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														0.00	
)		SUBTOTALS												0.00	
OL		CODE (ACCTG. USE ONLY)	579.12	0.00	0.00	49.4	9 0.00	22.00		90.00	0	0.00	271.27	1,011.88	
CLAIM TOTAL												10	20.21	1028 1,011.88	
(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)											(12) NORMAL WORK HOURS				
Travel for ISSCR Meeting Boston, MA											(13) PRIVATE VEHICLE LICENSE NUMBER				
Business Expense: 5/12 Breakfast with Doug Melton - CIRM BUSINESS MEETING											(14) MILEAGE RATE CLAIMED				
inn	er with	Kevin Eggan CIRM BUS n Bob Klien CIRM BUSIN afast with Brock Reeve - C	IESS MEE	TING		G					.565 AGENCY ACCOUNTING OFFICE				
3/	SA	# 2012 CO11		(200)		5					USE ONLY PAID BY REVOLVING FUND CHECK NUMBER				
5) e	HEREBY f Californ dual to o	CERTIFY That the above is a true statia. If a privately owned vehicle was us r greater than the rate claimed, and the	ement of the tra sed, and if milea nat I have met I	avel expense age rates ex the requirem	es incurred by ceed the mini- nents as pres	me in acco mum rate, I cribed by S	ordance with D certify that the SAM Sections	PA rules in the cost of oper	e service ating the	of the State vehicle was 3 and 0754					
	o Noinin o	to contribute and other contributes		DATE:	, /12			,	, , , ,		PAYMEN		TE // , 13	,	
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