LOCAL AGENCY FORMATION COMMISSION FOR SAN BERNARDINO COUNTY

215 North D Street, Suite 204, San Bernardino, CA 92415-0490 (909) 383-9900 • Fax (909) 383-9901 E-MAIL: lafco@lafco.sbcounty.gov www.sbclafco.org

DATE: FEBRUARY 11, 2013

FROM: KATHLEEN ROLLINGS-McDONALD, Executive Officer

TO: LOCAL AGENCY FORMATION COMMISSION

SUBJECT: AGENDA ITEM #4 - APPROVAL OF EXECUTIVE OFFICER'S

EXPENSE REPORT

RECOMMENDATION:

Approve the Executive Officer's Expense Report for Procurement Card Purchases for November, December 2012 and January 2013 as presented.

BACKGROUND INFORMATION:

The Commission participates in the County of San Bernardino's Procurement Card Program to supply the Executive Officer a credit card to provide for payment of routine official costs of Commission activities as authorized by LAFCO Policy #4(H). Staff has prepared an itemized report of purchases that covers the billing period of October 23, 2012 through November 22, 2012, November 23, 2012 through December 22, 2012 and December 23, 2012 through January 22, 2013.

It is recommended that the Commission approve the Executive Officer's expense report as shown on the attachments.

KRM/rcl

Attachments



COUNTY OF SAN BERNARDINO PROCUREMENT CARD PROGRAM

Page <u>1</u> of <u>1</u>

MONTHLY PROCUREMENT CARD PURCHASE REPORT

Card Number	Cardholder	Billing Period
1	Kathleen Rollings-McDonald	10/23/12 to 11/23/12

Date	Vendor Name	Receipt/ Invoice No.	ltem Description	Purpose	\$ Amount	Reconciled (R) Disputed (D)	Sales Tax Included on Invoice (Yes or No)
11-09	Southwest Airlines	1	Airfare - Martinez		135.60	Ŕ	Y
11-09	Southwest Airlines	2	 Airfare – Rollings-McDonald		191.60	R	Y
11-15	Iron Mountain	3.	Monthly Payment	Record Maintenance and Storage	73.08	R	N
11-16	Verizon	4	Payment - Phone Bill	Phone Line for Alarm	40.61	R	Y
11-23	Panera Bread	5	Bagels	LAFCO Hearing	13.99	R	N
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The undersigned, under penalty of perjury, states the above information to be true and correct. If an unauthorized purchase has been made, the undersigned authorizes the County Auditor/Controller-Recorder to withhold the appropriate amount from their payroll check after 15 days from the receipt of the cardholder's Statement of Account.

Cardholder (Print & Sign)  Date  Approving Official (Print & Sign)  Date  1/10/13  James Curatalo, Chairman  2/20/13	taditor controller recogner to manipia are appropriate agreement	,, e., e., berling, and and entre		10004111
Kathleen Rollings-McDonald Millia Adulta Adulta Index 1/10/13 James Curatalo, Chairman 2/20/13	Cardholder (Print & Sign)	Date	Approving Official (Print & Sign)	Date
	Kathleen Rollings-McDonald Matthew Arthur March	1/10/13	James Curatalo, Chairman	2/20/13



## COUNTY OF SAN BERNARDINO PROCUREMENT CARD PROGRAM

Page <u>1</u> of <u>1</u>

## MONTHLY PROCUREMENT CARD PURCHASE REPORT

Card Number	Cardholder	Billing Period
	Kathleen Rollings-McDonald	11/24/12 to 12/24/12

Date	Vendor Name	Receipt/ Invoice No.	Item Description	Purpose	\$ Amount	Reconciled (R) Disputed (D)	Sales Tax Included on invoice (Yes or No)
12-7	Thomson West	1	Monthly Payment	Law Library Updates	126.90	R	Υ
12-7	Thomson West	2	Monthly Payment	Law Library Updates	126.90	R	Υ
12-10	Citizen Hotel	3	Hotel – Rollings-McDonald	CALAFCO Legislative Meeting	171.50	R	Y
	Alfredo's Pizza and Pasta	4	Lunch	Shared Services Prgrm Discussion—SB&OC LAFCO	43.12	R	Υ
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Cardholder (Print & Sign)

Catholder (Print & Sign)

Nathleen Rollings-McDonald

Catholder (Print & Sign)

Date

1/10/13

James Curatalo, Chairman

2/20/13



## COUNTY OF SAN BERNARDINO PROCUREMENT CARD PROGRAM

Page <u>1</u> of <u>1</u>

## MONTHLY PROCUREMENT CARD PURCHASE REPORT

Card Number	Cardholder	Billing Period
	Kathleen Rollings-McDonald	12/25/12 to 1/22/13

Date	Vendor Name	Receipt/ Invoice No.	Item Description	Purpose	\$ Amount	Reconciled (R) Disputed (D)	Sales Tax Included on involce (Yes or No)
1-15	Solano Press	1	CEQA Deskbook-3 rd Edition	Publication	164.68	R	Υ
1-15	Thomson West	2	Monthly Payment	Law Library Updates	127.20	R	Υ
1-15	ICMA Publications	3	Evaluating Financial Condition  — 4 th Edition	Publication	120.17	R	Υ
1-16	Verizon	4	Payment – Phone Bill	Phone Line for Alarm	70.07	R	Υ
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Cardholder (Print & Sign)

Kathleen Rollings-McDonald

**Date** 2/11/13

Approving Official (Print & Sign)

James Curatalo, Chairman

Date

2/20/13

## DETAIL SUPPORT FOR EMPLOYEE REIMBURSEMENT

## TO BE COMPLETED BY EMPLOYEE

Employee No.				Phone No	Phone No. 909-383-9900 For the Month of Octob					ber 17, 2012 through February 11, 2013			
Occup. Unit		E	<del>cempt</del>										
ssigned Hdqtrs.			emardino (cliy)		Principal pi	ace of resid	dence		Redia (City)				
	VHEN		PRIVATE	WHERE	WHY		B	MEAL	S, LODGING AND	OTHER EXPENSES	3		
Date	Time From	Time To	MILEAGE	City of Destination	Purpose			Amount		Expense Item			
12/06/12				Sacramento	CALAFCO - Legislative Commit	tee	D	43.70	Dinner - Mcl	Donald			
12/08/12				Sacramento	CALAFCO - Legislative Commit	tee		40.00	Cab Fare				
12/09/12				Sacramento	CALAFCO - Legislative Commit	tee		10.00	Cab Fare	-			
12/10/12				Yucapia	Special Districts Association		D	34.00	Dinner - Mcl	Donald			
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					SL	JB TOTAL	\$		\$ 127.70	<u>)</u>			
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						TOTAL	\$		\$ 127.70	\$ 1	127.		
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# OURTY SAN REPURSING

15-211-000 Rev 07-01-08

County of San Bernardino

#### FAS / EMACS

#### **EMPLOYEE REIMBURSEMENT FORM**

Your Employee Reimbursement will be paid in the same manner as your payroll check.



	ER DOCUMENT ID:					
21179	890	2013-1				

Employee ID FAS DEPT

CLAIM NUMBER

Employee Reimbursement document ID is for reference only. It will not appear on FAS reports. Charges will come through EMACS.

Last Name	OLLINGS-McE	ONALD		, KATHLEEN				10/17/2012		2/11/2013	
Description		Last Nar			First Name		Travel Begin	Date	Trave	el End Date	
Meals	V	Check box on lines for out-of-state travel.						DOCUM	ENT TOTAL	\$ 127.70	
Other Travel	Out-of- State	Description	Earning Cod	e Fund	Dept	Organization	GRC	APPR	Object Code	Amount	
Other Travel		Meals	XLN	NHY	890	890		294	2943	\$77.70	
		Other Travel		NHY	890	890		294	2946	\$50.00	
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	Department C	ontact:	Rebecca Lowery			Mail Code: 04	<u>190</u> Telephone	e:		909-383-9900	
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required by the County Charter and Government Codes have been complied with and this claim in the total amount shown is hereby approved for payment.								All verifications, or	entifications, and ch	ecking of computations	
	required by the C	ounty Charter and	Government Codes have been c	omplied with and this	claim in the total amou	nt shown is hereby appro	ved for payment.				
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