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: MAY 10, 2016

FROM: KATHLEEN ROLLINGS-McDONALD, Executive Officer

TO: LOCAL AGENCY FORMATION COMMISSION

SUBJECT: AGENDA ITEM #6 - APPROVAL OF EXECUTIVE OFFICER'S

EXPENSE REPORT

RECOMMENDATION:

Approve the Executive Officer's Expense Report for Procurement Card Purchases and expense claim for April 2016 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 and Procedure Manual Section II – Accounting and Financial Policies #3(H). Staff has prepared an itemized report of purchases that covers the billing period of March 23, 2016 through April 22, 2016.

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

KRM/rcl

Attachment



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	3/23/16 to 4/22/16

Date	Vendor Name	Receipt/ Invoice No.	Item Description	Purpose	\$ Amount	Reconciled (R) Disputed (D)	Sales Tax Included on invoice (Yes or No)
3-31	Hilton Universal City	1	Hotel – Lum	CALAFO Staff Workshop	323.96	R	Υ
4-5	Hilton Universal City	2	Hotel – Rollings-McDonld	CALAFO Staff Workshop	205.97	R	Υ
4-7	Advance Copy Systems	3	Monthly Payment	Copier	534.42	R	Υ
4-8	Daisy IT	4	Monthly Payment	Office Supplies	958.08	R	Υ
4-11	Southwest Airlines	5	Airfare – Rollings-McDonald	CALAFCO Leg Committee	463.96	R	N
4-22	Ontario Airport	6	Parking	CALAFCO Leg Committee	13.81	R	N

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
Kathleen Rollings-McDonald Within Bolling- With Thank	5/10/16
// // /	

Approving Official (Print & Sign)	Date
James Curatalo, Chairman	5/18/16