STATE OF CALIFORNIA

# TRAVEL EXPENSE CLAIM

STD. 262 A (REV.6/2000c)

*See Instructions and *Privacy Statement On Reverse Side*

Page of Pages

| CLAIMANT'S NAME | | DEPARTMENT |
|---|---|---|
| Maziar Movassaghi | [redacted] | Toxic Substances Control |

| POSITION | CB/ID NUMBER | DIVISION OR BUREAU | INDEX NUMBER |
|---|---|---|---|
| Acting Director | NR | Executive Office | 5000 |

| [redacted] | HEADQUARTERS ADDRESS | TELEPHONE NUMBER |
|---|---|---|
| | 1001 I Street | [redacted] |

| CITY | STATE | ZIP CODE |
|---|---|---|
| Sacramento | CA | 95814 |

| (1) MONTH/YEAR Oct 2009 | | (3) LOCATION | (4) | (5) MEALS | | | (6) | (7) TRANSPORTATION | | | | | (8) | (9) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| (2) DATE | TIME | WHERE EXPENSES WERE INCURRED | LODGING | BREAK-FAST | LUNCH | O.T., L/T, N/C, RELO. DINNER | INCIDEN-TALS | (A) COST OF TRANS. | (B) TYPE USED | (C) CARFARE, TOLLS, PARKING | (D) PRIVATE CAR USE MILES | (D) PRIVATE CAR USE AMOUNT | BUSINESS EXPENSE | TOTAL EXPENSES FOR DAY |
| 10/15 | 8:15 | Office to San Francisco | | | | | | | SC | 8.00 | | | | 8.00 |
| | | Speaker - Brownfields Media Event in San Francisco | | | | | | | | | | | | |
| 10/15 | 15:00 | Return | | | | | | | | | | | | |
| (10) SUBTOTALS | | | | | | | | | | 8.00 | | | | 8.00 |
| CLAIM TOTAL | | | | | | | | | | | | | | $8.00 |

(11) PURPOSE OF TRIP, REMARKS AND DETAILS *(Attach receipts/vouchers when required)*

| (12) NORMAL WORK HOURS | PCA | PROJECT | WORK PHASE | OBJ AO | AMOUNT | OBJ AO | AMOUNT | OBJ AO | AMOUNT | OBJ AO | AMOUNT | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8:00 am - 5:00 pm | 95080 | | | 286 | 8.00 | | | | | | | $8.00 |
| (13) PRIVATE VEHICLE LICENSE No. 7PGL740 | | | | | | | | | | | | |
| (14) MILEAGE RATE CLAIMED /mile | | | | | | | | | | | | |
| AGENCY ACCOUNTING OFFICE USE ONLY | | | | | | | | | | | | |
| PAID BY REV. FUND CHECK No. | | | | | | | | | | | | |
| | TOTALS | | | | 8.00 | | | | | | | $8.00 |

(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, and if mileage rates exceed the minimum rate, 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 SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage.

[redacted] DATE 11/14/07

DATE

STATE OF CALIFORNIA

# TRAVEL EXPENSE CLAIM

STD. 262 A (REV.6/2000c)

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Page of Pages

| | | | |
|---|---|---|---|
| CLAIMANT'S NAME: Maziar Movassaghi | [redacted] | DEPARTMENT: Toxic Substances Control | |
| POSITION: Acting Director | CB/ID NUMBER: NR | DIVISION OR BUREAU: Executive Office | INDEX NUMBER: 5000 |
| [redacted] | | HEADQUARTERS ADDRESS: 1001 I Street | [redacted] |
| | | CITY: Sacramento | STATE: CA / ZIP CODE: 95814 |

| (1) MONTH/YEAR: Oct 2009 | | (3) LOCATION | (4) | (5) MEALS | | | (6) | (7) TRANSPORTATION | | | | | (8) | (9) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| (2) DATE | TIME | WHERE EXPENSES WERE INCURRED | LODGING | BREAK-FAST | LUNCH | O.T., L/T, N/C, RELO. DINNER | INCIDEN-TALS | (A) COST OF TRANS. | (B) TYPE USED | (C) CARFARE, TOLLS, PARKING | (D) PRIVATE CAR USE MILES | (D) PRIVATE CAR USE AMOUNT | BUSINESS EXPENSE. | TOTAL EXPENSES FOR DAY |
| 10/25 | 15:50 | Residence to Las Vegas | | | | | | | SC/A | | | | | |
| 10/25 | | Las Vegas to Laughlin, NV | 50.39 | | | 18.00 | | | | | | | | 68.39 |
| 10/26 | | Laughlin, NV to Parker, AZ | 47.48 | 6.00 | 10.00 | 18.00 | 6.00 | | | | | | | 87.48 |
| 10/26 | | Seven River Tribe Coalition Meeting - PGE Topock Project – | | | | | | | | | | | | |
| | | Discussion of project options with impacted Tribes | | | | | | | | | | | | |
| 10/27 | | 2nd day of Summit | | 6.00 | 10.00 | 18.00 | 6.00 | | | | | | | 40.00 |
| 10/28 | 24:30 | Parker, AZ to Residence | | | | | | | A/SC | 27.00 | | | | 27.00 |
| (10) SUBTOTALS | | | 97.87 | 12.00 | 20.00 | 54.00 | 12.00 | | | 27.00 | | | | 222.87 |
| CLAIM TOTAL | | | | | | | | | | | | | | $222.87 |

(11) PURPOSE OF TRIP, REMARKS AND DETAILS *(Attach receipts/vouchers when required)*

(12) NORMAL WORK HOURS: 8:00 am - 5:00 pm

(13) PRIVATE VEHICLE LICENSE No.: 7PGL740

(14) MILEAGE RATE CLAIMED: /mile

AGENCY ACCOUNTING OFFICE USE ONLY

PAID BY REV. FUND CHECK No.

| PCA | PROJECT | WORK PHASE | OBJ AO | AMOUNT | OBJ AO | AMOUNT | OBJ AO | AMOUNT | OBJ AO | AMOUNT | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 95080 | | | 312 | 195.87 | 315 | 27.00 | | | | | $222.87 |
| TOTALS | | | | 195.87 | | 27.00 | | | | | $222.87 |

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[redacted]

DATE 11/19/09

DATE

STATE OF CALIFORNIA

# TRAVEL EXPENSE CLAIM

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| CLAIMANT'S NAME | | DEPARTMENT |
|---|---|---|
| Maziar Movassaghi | [redacted] | Toxic Substances Control |

| POSITION | CB/ID NUMBER | DIVISION OR BUREAU | INDEX NUMBER |
|---|---|---|---|
| Acting Director | NR | Executive Office | 5000 |

| | HEADQUARTERS ADDRESS | TELEPHONE NUMBER |
|---|---|---|
| [redacted] | 1001 I Street | [redacted] |

| CITY | STATE | ZIP CODE |
|---|---|---|
| Sacramento | CA | 95814 |

| (1) MONTH/YEAR Oct 2009 (2) DATE | TIME | (3) LOCATION WHERE EXPENSES WERE INCURRED | (4) LODGING | (5) MEALS BREAK-FAST | LUNCH | O.T., L/T, N/C, RELO. DINNER | (6) INCIDEN-TALS | (7) TRANSPORTATION (A) COST OF TRANS. | (B) TYPE USED | (C) CARFARE, TOLLS, PARKING | (D) PRIVATE CAR USE MILES | AMOUNT | (8) BUSINESS EXPENSE | (9) TOTAL EXPENSES FOR DAY |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 10/6 | 6:30 | Residence to Los Angeles | 95.00 | | 10.00 | | | | A/RC | 13.00 | | | | 118.00 |
| | | Speaker - Personal Care Care Products Council - Santa Monica, CA | | | | | | | | | | | | |
| 10/6 | | Los Angeles to Cypress | | | | 18.00 | | | RC | | | | | 18.00 |
| 10/7 | | DTSC Cypress Office -Dedication of Memorial Bench - (A.M.) | | | | | | | | | | | | |
| 10/7 | | Cypress Office to San Diego | 123.82 | 6.00 | 10.00 | | | | RC | | | | | 139.82 |
| 10/7 | | CA Manufacturers & Technology Assoc–IEA–CICC - Statewide Environmental Summit | | | | | | | | | | | | |
| 10/7 | | Location: San Diego, CA - Pre-conference meeting (CMTA) | | | | | | | | | | | | |
| 10/7 | | | 123.82 | | | N/A | 6.00 | | | | | | | 129.82 |
| 10/8 | | Speaker on Green Chemistry (Statewide Environmental Summit) | | | | | | | | | | | | |
| 10/8 | | Panelist - Regulatory Initatives & Expectations - (A.M.) | | | | | | | | | | | | |
| 10/8 | | Wrap-up speaker at conference - (P.M.) | | | N/A | 18.00 | | | | 40.00 | | | | 58.00 |
| 10/11 | 20:30 | Los Angeles to Residence | | | | | | | | 36.00 | | | | 36.00 |
| (10) | | SUBTOTALS | 342.64 | 6.00 | 20.00 | 36.00 | 6.00 | | | 89.00 | | | | 499.64 |
| | | CLAIM TOTAL | | | | | | | | | | | | $499.64 |

(11) PURPOSE OF TRIP, REMARKS AND DETAILS *(Attach receipts/vouchers when required)*

| (12) NORMAL WORK HOURS | PCA | PROJECT | WORK PHASE | OBJ AO | AMOUNT | OBJ AO | AMOUNT | OBJ AO | AMOUNT | OBJ AO | AMOUNT | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8:00 am - 5:00 pm | 95080 | | | 292 | 410.64 | 295 | 89.00 | | | | | $499.64 |
| (13) PRIVATE VEHICLE LICENSE No. | | | | | | | | | | | | |
| (14) MILEAGE RATE CLAIMED /mile | | | | | | | | | | | | |
| AGENCY ACCOUNTING OFFICE USE ONLY PAID BY REV. FUND CHECK No. | | | | | | | | | | | | |
| | TOTALS | | | | 410.64 | | 89.00 | | | | | $499.64 |

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[redacted]

Revised