

Phelan Piñon Hills Community Services District
Board Stipend & Mileage Report - 2024

Name: Chuck Hays
Email Address: cpcbasc7@aol.com
Current Date: July 31, 2024
Reimbursement Month: July

Meeting No. 1:
Date of Meeting/Event: Wednesday, July 10, 2024
Expense Description/Business Purpose: Regular Board Meeting
Charge Amount: \$120
Mileage (Distance): 0

Meeting No. 2:
Date of Meeting/Event (2): Tuesday, July 23, 2024
Expense Description/Business Purpose (2): Special Finance Committee Meeting
Charge Amount (2): \$120
Mileage (Distance) (2): 0

Meeting No. 3:
Date of Meeting/Event (3): Tuesday, July 30, 2024
Expense Description/Business Purpose (3): Special Board Meeting
Charge Amount (3): \$120
Mileage (Distance) (3): 0

Meeting No. 4:
Date of Meeting/Event (4):
Expense Description/Business Purpose (4):
Charge Amount (4):
Mileage (Distance) (4):

Meeting No. 5:
Date of Meeting/Event (5):
Expense Description/Business Purpose (5):
Charge Amount (5):
Mileage (Distance) (5):

Meeting No. 6:
Date of Meeting/Event (6):
Expense Description/Business Purpose (6):
Charge Amount (6):
Mileage (Distance) (6):

Meeting No. 7:
Date of Meeting/Event (7):
Expense Description/Business Purpose (7):
Charge Amount (7):
Mileage (Distance) (7):

Meeting No. 8:
Date of Meeting/Event (8):
Expense Description/Business Purpose (8):
Charge Amount (8):
Mileage (Distance) (8):

Meeting No. 9:
Date of Meeting/Event (9):
Expense Description/Business Purpose (9):
Charge Amount (9):
Mileage (Distance) (9):

Meeting No. 10:
Date of Meeting/Event (10):
Expense Description/Business Purpose (10):
Charge Amount (10):
Mileage (Distance) (10):

Other Expenses:
 List any meals, lodging, or other expenses you are requesting reimbursement for. Be sure to email or turn in your receipts within 24 hours of charges or return to the District.:

Certification:
 I certify the expenses listed above are related to my authorized travel according to District policies:


Reimbursement Summary:	
TOTAL MILEAGE:	0.00
TOTAL REIMBURSED MILEAGE REQUESTED:	\$0.00
TOTAL MEETINGS:	3
TOTAL MEETING REIMBURSEMENT REQUESTED:	\$360.00
OTHER EXPENSES REQUESTED:	\$0.00
Grand Total Reimbursement Requested:	\$360.00