

## **Reimbursement of Travel**

1.6c(6)

CAPITAL OF SILICON VALL	EY						HELP	
1. Employee Infor	mation							
	Spencer Horowitz		Dept.	Dept. Retirement Services				
	FED Board Chair		Visible Code					
Employee ID			Home Zip Code	Phone No.:				
Hourly / Salaried	O Hourly   Salaried		Select Purpose					
2. Group Travel	● Yes ○ No	(Group travel def	ined in City Travel Policy 1.8.2)					
	Names of other	Travelers						
	Eswar Menon Howard Lee Franco Vado							
T	Andrew Gardan	ier Mathe	w Faulkner	Deborah Abbott				
3. Travel Itinerary	ı						6	
Event Name:	Pension Bridge The Annual 2025							
	The Ritz-Cariton Hotel City: Half Moon Bay State: CA							
Departure Date:								
4. Travel Expenses  Estimated Actual Prepaid Expense								
0.4	Detailed Description				Actual		d Expense	
Category	Detailed Description				Expenses	Amount	Method	
Registration	Pension Bridge The Annual 2025					\$0.00	Select	
Airfare	The Ritz-Carlton Hotel 2 nights: 3/24/25 - 3/26/25 (includes taxes and fees) 892.07 \$892.08 \$892.08						Select	
Lodging	The Ritz-Carlton Hotel 2 nights: 3/24/25 - 3/26/25 (includes taxes and fees)					\$892.08	PCard (Cardholder Na	
Per Diem	Home to Conference: 43.1 miles x 0.70= \$30.17, Conference to Home: 42.8 miles x 0.70= \$29.96				\$60.13 \$146.50		Select Select	
Parking	Conference provides Breakfast and Lunch on 3/25 and 3/26			136.25 105.00			Select	
Other				100.00	\$0.00		Select	
Total				1,190.86	1,098.71	892.08		
5. Unforeseen Travel Expenses (expenses that were not pre-approved must be entered in this section)								
				,				
	Final Total Travel Expenses \$1,098.71 If Final Total Travel Expenses exc							
						Total Estimated Expenses, refer to		
	Prepaid Expenses  Total Due Employee/(Due City)					\$892.08 Section 3.1.9 of Employee Travel Policy for further instructions.		
6. Notes			I Otal D	ue Employee/(Due City	\$206.63	. oney ior i	arator mod dodono.	
	e because the con	nference offered complimentary atte	endance.					
Mileage reflects the City's updated mileage reimbursement rate as of 1/5/25 at \$0.70 per mile.								
Traveler was not charged for parking because they were placed at the hotel's guest house cottages, where they received complimentary parking in front of their room.								
traverer was not charged for parking because mey were placed at the noter's guest house cottages, where they received complimentary parking in front of their room.								
7. Certification								
I certify that I have read	l and understan	d the City's Travel Policy and t	hat the reimbursable expenses comply w	ith the policy and its ir	itent. I also ver	ify that all	expenses	
reported on this form w	ere incurred by	me for City business purpose	• •					
Employee Signature		Spencer Horo	with Spencer Horov	vitz		4/1/25		
	Emp ID #	// Signature '	Print Name			Date		
	ewed the expen	ditures and related documenta	tion associated with the reimbursable ex	penses and confirm th	at they are in co	ompliance	with the	
City's Travel Policy.					A //	2/05		
Direct Supervisor	128120 John Flynn John Flynn			n	4/2/25			
•	Emp ID#   Signature   Print Name					Date		
•	ewed the expen	ditures and related documenta	tion associated with the reimbursable ex	penses and confirm th	at they are in co	ompliance	with the	
City's Travel Policy.	1							
Travel Coordinator	l							
	Emp ID#	Signature	Print Name			Date		
		res contained in this Statemen	t and confirm that they are in compliance	with the City's Travel	Policy, were inc	curred for	City business	
and are within budgetary limits.								
Approving Official								
pp. cg c i i i o i a i								
	Emp ID #	Signature	Print Name			Date		
Finance Travel Desk	Emp ID # Date Rec'd	Signature   Date Processed   Finance		Date Rec'd Date Processed	Pay Period of Pymt.			