



**PER DIEM AND MILEAGE CLAIM FORM
BOARD OF DIRECTORS**

Director: _____

Month/Year Covered: _____

Date(s)	Meeting	Per Diems	Mileage
BOARD AND COMMITTEE MEETINGS:			
	Board Meeting (Regular and Special)		
	Engineering & Long-Range Planning Committee		
	Finance, Insurance & Personnel Committee		
	Public Information & Intergovernmental Relations Committee		
	Fire / Emergency Services Committee		
	Audit Committee		
	Business Meeting: _____		
	Business Meeting: _____		
AUTHORIZED MEETINGS AND CONFERENCES:			
	Association of California Water Agencies (ACWA)		
	Council of Water Utilities (COWU)		
	North County Water Group (NCWG)		
	California Special District Association (CSDA)		
	Urban Water Institute, Inc. (UWI)		
	Training Webinar: _____		
FUNCTIONS PRE-APPROVED BY BOARD PRESIDENT:			

Total Per Diems: _____ days @ \$160/meeting (10 per diems/month _____

max): Total Mileage: _____ miles @ \$0.58/mile: _____

TOTAL COST OF CLAIM _____

Approved for payment by Board action this _____ day of _____, 20____

The undersigned claimant makes the foregoing claim against Rincon del Diablo Municipal Water District, states that the money claimed was actually expended and/or the mileage stated was actually traveled on behalf of said District in pursuance of the duties of the claimant, and that said claim is presented in good faith and has not heretofore been paid.

Secretary, Rincon del Diablo MWD

Claimant (signature) (date)

Received for agenda _____
(date)

Treasurer, Rincon del Diablo MWD (date)