

**Mr. John
Mannes**

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

February 20, 2013

*Janey
Spel*
PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff *[Signature]*

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$247.86** in payment of the attached Monthly Mileage Statement for December as well as one receipt for business expenses. Mr. John B. Mannes is the Student Member of the Board of Education.

December
~~November~~ - 416 miles X .555 = \$230.88
Receipts = \$16.98

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes
\$230.88 - Mileage.....
\$ 16.98 - Expenses

Thank you.

IRI:rlg

Attachment

Approved *[Signature]*

Division of Controller
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
 FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name (Last) (First) (Middle) Mannes John	Board of Education
Address (Street No.) (Street) (Apt. No.) [REDACTED]	No. Miles to and from Home and Base Location 20
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Job Title Board Member
	Submitted for Month of: <u>December</u> Use one form for each month <u>2012</u>

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
		ED maners.			
12-3	Rockville CESC	TV Studio Taping	20		
12-4	Rockville CESC	BOE Sidecar-ins	20		
12-4	Rockville CESC	MCR Meeting	20		
12-5	N. Behn M Conf CTR	MCC Commencement Awards	30		
12-6	Clarksburg Bus Depot	BUS VISIT	18		
12-6	Rockville CESC	BOE Student Leaders	20		
12-9	N. Behn M Conf. CTR	MC Executives Ball	30		
12-10	Clarksburg HS	Think Tank	18		
12-11	Rockville CESC	BOE all Jan Meet	20		
12-12	Rockville Univ. @ Shady Grove	Harvard Bus.	14		
12-13	Bethesda-Cherry Chase HS	Think Tank	38		
12-13	Silver Spring Einstein HS	Comm Day	27		
12-17	German Town MS	Youth Town Hall	8		
12-18	Rockville CESC	Meet with Staff	20		
12-18	Rockville CESC	SMOB Council Meet	20		
(continue on back)		Total This Page	323		
		Total Reverse Page	93		
		GRAND TOTAL	416		

For Accounting Use Only
 _____ miles @ _____
 Other _____
 Pay _____

X John Mannes 1,3,2013
 Signature, Employee Date
[Signature] 2/6, 2013
 Signature, Principal/Supervisor Date
[Signature]
 Signature, Account Manager Date

APPROVED

ACCOUNT NUMBER [REDACTED]



that was easy.

Low prices. Every item. Every day.

1531 Rockville Pike

Rockville, MD 20852

(301) 881-6390

SALE 1644577 1 001 32837
0912 12/03/12 02:05

YOUR OPINION COUNTS AND WILL BE REVIEWED
BY THIS STORE'S MANAGER!

Please take a short survey
and be entered into a monthly drawing
for a \$5,000 Staples gift card.

NO PURCHASE NECESSARY.

Log on to www.StaplesCares.com

or call 1-800-881-1723

Your survey code: 0100 6052 4987 9241

See store for rules.

Survey code expires 12/10/2012.

**Tome nuestra encuesta en Español en
la página de Internet o por telefono.

Consiga las reglas en la tienda.**

QTY	SKU	Smob BoE	PRICE
1	13 AAG MTH DSKPD 2 038576002333	calendar new	24.99
1	2013 STAPLES DESKP 718103169196	2013	9.99
1	STAPLES COPY SELEC 718103145206	paper for printer	6.99
1	2013 STAPLES DESKP 718103169196		9.99
SUBTOTAL			51.96
Standard Tax 6.00%			3.12
TOTAL			\$55.08

Debit Tender: 55.08

Card No.: XXXXXXXXXX [S]

Auth No.: [REDACTED]

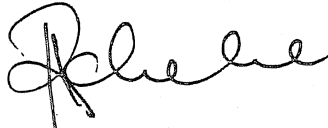
MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

March 11, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$485.09** in payment of the attached Monthly Mileage Statement for January as well as four receipts for business expenses while attending the Federal Relations Network Legislative Conference in Washington, D.C. Mr. John B. Mannes is the Student Member of the Board of Education.

~~November~~ ^{January} - 625 miles X .565 = \$353.13
Receipts = \$131.96

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes

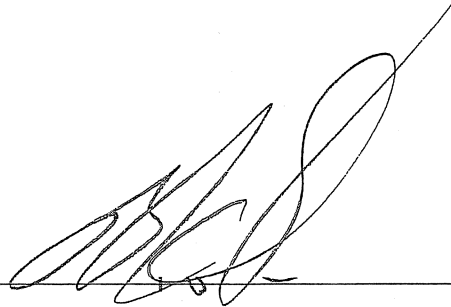
\$353.13 - Mileage..... 

\$131.96 - BOE Expenses 

Thank you.

IRI:rlg

Attachment

Approved _____ 

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Board of Education
Name (Last) (First) (Middle) Mannes John	No. Miles to and from Home and Base Location 20
Address (Street No.) (Street) (Apt. No.) [Redacted]	Job Title Board Member
(City) (State) (ZIP Code) [Redacted] Maryland [Redacted]	Submitted for Month of: <u>January</u> Use one form for each month <u>2013</u>

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
1-2-13	Rockville CESC	smob MoCo Student Meet	40		
1-3-13	Rockville CESC	MCR SMOB Meet	40		
1-5-13	Rockville MCEA	Legislative Breakfast	26		
1-8-13	Rockville CESC	BOE all day meet	20		
1-10-13	Rockville CESC	Super BOE Budget Hear	20		
1-10-13	Chew Chase, MD	Rock Creek Forest ES Back Road	42		
1-11-13	Rockville Univ e S	Grove MC President	14		
1-14-13	Germantown, MD	SUS Stou Comm Days	6		
1-15-13	Rockville CESC	policy Committee	20		
1-16-13	Rockville CESC	MCC PTA	40		
1-17-13	Rockville CESC	BOE Budget Hear	40		
1-18-13	Rockville Smtu Center	Minority Scholars	35		
1-19-13	N. Beth. mlk	Breakfast N. Beth. Marriott	60		
1-22-13	Rockville CESC	BOE Work Session	40		
1-23-13	Rockville CESC	SMOB SAC Meet	46		
1-23-13	Rockville, MD	MCEA meet	26		
1-24-13	Rockville CESC	BOE Work Session	40		
(continue on back)	Total This Page		555		
	Total Reverse Page		70	20.00	
	GRAND TOTAL		625		
				For Accounting Use Only	
				_____ miles @ _____	
				Other Pay _____	

*APPROPRIATE RECEIPTS MUST BE ATTACHED

John Mannes
Signature, Employee 2, 5, 13
Date

[Signature]
Signature, Principal/Supervisor 3, 14, 13
Date

APPROVED [Signature]
Signature, Account Manager 3, 11, 13
Date

PAID
353
13

ACCOUNT NUMBER [Redacted]

Submitted For Month Of:

Parking, Tolls, Public Transportation*

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Amount	Item
1-28-13	WASH DC Hi Han	FRNW Chris Barker		20.00	Metro DC FRW

1-29-13	Burransville, MD	PBHS Youth Town Hall	50		
1-30-13	Rockville CESC	Div. Staff Meet	20		

Please transfer these totals to Front Side



Totals

70

20.00

noreply@wmata.com

January 28, 2013 9:09 PM

To: [REDACTED]

SmarTrip® card or CharmCard® web account - Order Receipt

Hello jmannes,

Thank you for your purchase! Your order has been completed. You may load your items to your SmarTrip® or CharmCard® by touching your card to a rail fare gate, bus farebox, or Ticket Vending Machines (MTA TVM). Please allow time for the instructions to be sent to the gates, fareboxes and TVMs. It usually takes 1 business day for gates and TVMs, and up to 2 business days for bus fareboxes, to be updated. You need to touch your smartcard to the gate, TVM, or bus farebox within 30 days or your purchase will expire.

Below are the details for your order.

=====Merchant information=====

Washington Metropolitan Area Transit Authority
600 5th NW , Washington, DC, 20001
<http://www.wmata.com>

=====Order Information=====

Order Placed: 1/28/2013 9:09:21 PM
Order Number: 00000000 [REDACTED]
Card Number: [REDACTED]
Authorization Code: [REDACTED]
Order Total: \$20

#1
Product: Stored Value
Quantity:
Price: \$20
Subtotal: \$20
Auto Reload: No.

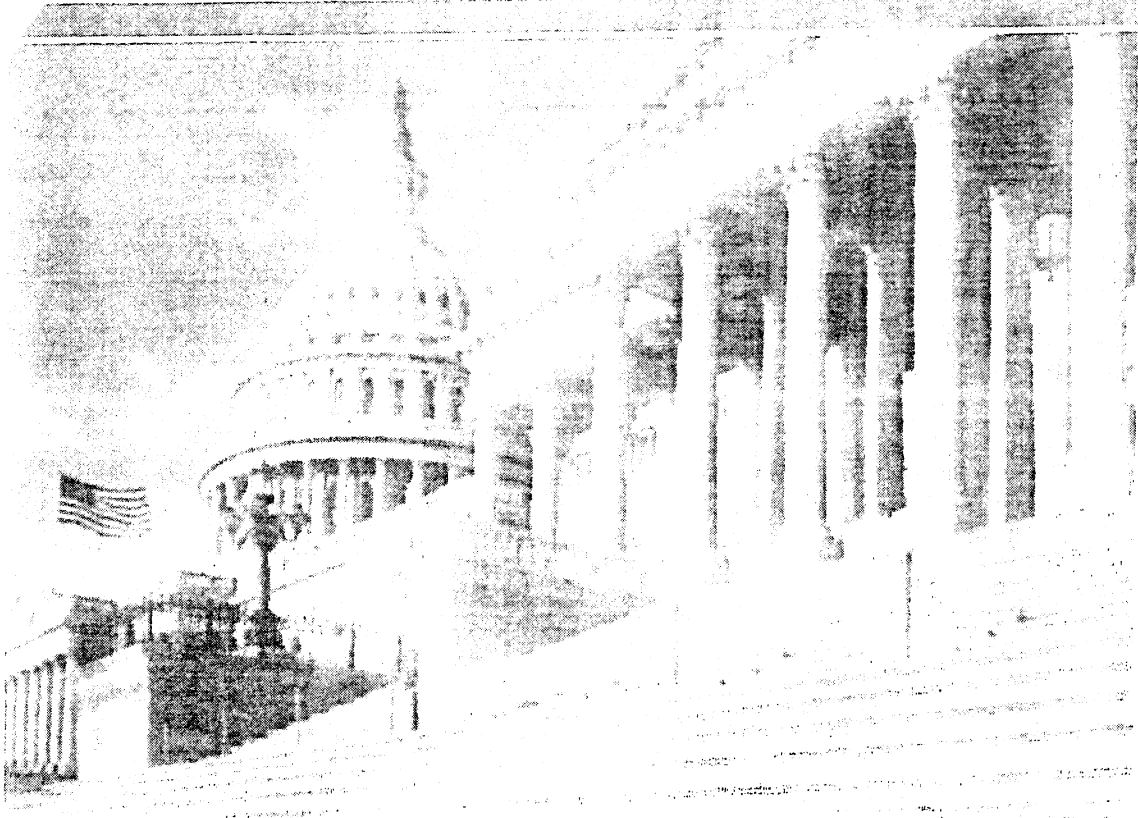
Total: \$20

=====Payment Information=====

Payment Method: Visa | Last digits: [REDACTED]
Billing Address:
[REDACTED]

You can access and print your order information anytime at <https://smartrip.wmata.com/Purchase/OrderHistory.aspx>.
If you have any questions or need assistance, please call +1-888-SMARTRIP (+1-888-762-7874) or send us an email at <mailto:smartrip@wmata.com>.

WMATA SmarTrip Support Team



School Boards: A Powerful, Unified Voice on Capitol Hill

The Federal Relations Network
(FRN) Legislative Conference

January 27-29, 2013
Washington, D.C.

Celebrating NSBA's 40 years of uniting local
school board members on Capitol Hill to
advance the future of America's schoolchildren.

X
FRN
Washington

01/26 - 01/29 - Meals while attending the
Federal Relations Network Legislative Conference
in Washington, D.C.

Meals *2/28*

Hilton Washington
IN -ROOM DINING

206 AMINUL

5171/1 4517 GST
2
JAN26'13 21:02

1 NY STRIP STEAK 33.00
1 MAC W/SHORT RIBS 22.00
2 SODAS 10.00
1 In House Charge 4.00
Subtotal 69.00
RM SVC 22% SVCCH 14.30
Tax 8.33
Payment Due 91.63

EXTRA GRATUITY _____

Total: _____

Room # _____

Print Name: _____

22% GRATUITY INCLUDED EXCEPT IN
THE EXECUTIVE LOUNGE
SIGNATURE _____

MAGGIANO'S CHEVY 088
MERCHANT ID
01/27/13 12:25:21 T203
KELLY CHK #002
CHARGE 1

VISA
XXXXXXXXXX
MANNES/ JOHN

AUTH # 959165

CHARGE AMOUNT 23.32

TIP AMOUNT \$4.00

TOTAL \$27.32

GUEST COPY

WE WELCOME YOUR COMMENTS!
PLEASE CALL US AT 1-800-983-4637
OR VISIT US AT WWW.MAGGIANOS.COM

Thank You

1916 MICHAEL H

CHK 8948 JAN26'13 13:24

1 Breakfast Sndwch 8.25
1 Nantucket Juice 3.75
Cash 20.00
SUBTOTAL 12.00
TAX 1.20
TOTAL 13.20
CHANGE DUE 6.80

**** GOODIE'S****

401 DULCE

CHK 7373 JAN29'13 2:49PM

GOODIES
SUBTOTAL 9.34
PAYMENT 9.34
XXXXXXXXXX XX/XX
VISA 9.34


MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

March 14, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$472.34** in payment of the attached Monthly Mileage Statement for February. Mr. John B. Mannes is the Student Member of the Board of Education.

February – 836 miles X .565 = \$472.34

Please charge the account numbers for the Board Member/Staff Person indicated.

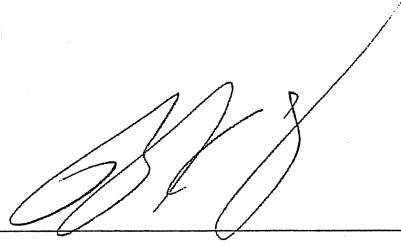
Mr. Mannes

- Mileage.....

Thank you.

IRI:rlg

Attachment

Approved  _____

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name (Last) (First) (Middle) Mannes John	Board of Education
Address (Street No.) (Street) (Apt. No.) [REDACTED]	No. Miles to and from Home and Base Location 20
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Job Title Board Member
	Submitted for Month of: February Use one form for each month 2013

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
2-1-13	Rockville CESC	Collective Bargaining	20		
2-4-13	Rockville CESC	mcr smob meeting	40		
2-5-13	Rockville CESC	mctc meeting	40		
2-6-13	Silver Spring Kennedy	Cluster BOE meeting	48		
2-8-13	Annapolis, MD	Del Anne Kaiser Student Issues	126		
2-11-13	Rockville MC Council	Business Meeting	40		
2-12-13	Rockville CESC	All Day Business Meeting	40		
2-13-13	Silver Spring GA@PBH	Meeting	56		
2-14-13	Bethesda BOE	Teacher after year lunch meet	20		
2-14-13	Rockville BOE	Magyler Cluster meeting	28		
2-19-13	Rockville CESC	BOE meeting	40		
2-20-13	Silver Spring	SMOB Council Meet Isaac Magoff	52		
2-21-13	Rockville Wooten	Cluster Meeting	22		
2-22-13	Saint Michaels	SMOB Council Meeting	20		
2-22-13	Olney, MD	Edwaint ES Meet Rea	34		
2-25-13	Rockville CESC	Even Business Meeting	40		
2-26-13	Rockville CESC	MCCPTA	40		
Total This Page			706		
Total Reverse Page			130		
GRAND TOTAL			836		
				For Accounting Use Only	
				_____ miles @ _____	
				Other _____	
				Pay _____	

continue on back)

*APPROPRIATE RECEIPTS
MUST BE ATTACHED

X John Mannes 2/28/13
Signature, Employee Date

[Signature] 3/14/13
Signature, Principal/Supervisor Date

APPROVED [Signature] 3/15/13
Signature, Account Manager Date

ACCOUNT NUMBER [REDACTED]

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

March 27, 2013

Jan 27
4:30
PAID

MEMORANDUM

To: Mrs. Susan Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff *Ikheloa*

Subject: Check Request Payable to MASC (Maryland Association
of School Councils)

Please issue a check in the amount of \$235.00 for the Student Member of the Board to attend the Maryland Association of Students Councils Annual Conference. Please send payment to the attention of Mr. Wayne H. Perry, MASC Registrar, P.O. Box 343, Forest Hill, Maryland 21050.

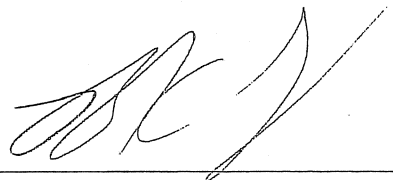
Please charge the account number indicated.

Mr. John Mannes 

Thank you.

IRI:rlg

Attachment

Approved 

2013 MASC Convention Registration Report/Invoice

Invoice: #2038
Date: 02/28/2013

Northwest High School
 13501 Richter Farm Road
 Germantown, MD, 20874
 MASC Region: MCR

Delegates: <u>1</u> x \$235=	\$ 235.00
Total Check Amt:	\$235.00
Payable to: MASC	
Allowed Votes:	10
Mail this form, school check (or Payment Guarantee), to: Wayne H. Perry (MASC Registrar), P.O. Box 343 Forest Hill, MD 21050	

mail to:

Advisor: Angelica Agosto (Angelica M Agosto@mcpsmd.org)
 Attending Advisor Responsible On Site: Ms. Karen Crawford

Last Name First Name	Role	Sex	Grade	House T-Shirt Code	No Nuts or Peanuts - Peanuts and Tree Nuts	Food Allergy	Bringing Meds?	Special Accommodations Medical Needs
2. Mannes John	Delegate	M	12	2A L	No			

AMERICANS WITH DISABILITIES ACT:
 Appropriate accommodations for individuals with disabilities will be provided upon request. Eight business days notice prior to the conference is required.

Those listed above are authorized to participate from this school in the 2013 MASC Convention at the Marion Resort Hotel in Ocean City on March 20-22, 2013

 Julie Perry
Principal Signature Date 2-28-13

This form and payment (or Payment Guarantee) MUST be postmarked by Wednesday, March 6, 2013. A late fee will be assessed for late postmarks. To make changes or updates, email Wayne Perry as soon as possible. Please note that changes are not effective until the advisor has received confirmation from MASC. After Wednesday, March 6, 2013, no refunds, and substitutions are \$25 each.

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

*Janet
4/11/13*

April 11, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller



From: Ikhide Roland Ikheloa, Chief of Staff *[Signature]*

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$288.98** in payment of the attached Monthly Mileage Statement for March 2013 as well as reimbursement for registration to attend the National Youth Association: American Youth Summit. Mr. John B. Mannes is the Student Member of the Board of Education.

March - 419 miles X .565 = \$236.74
Receipts = \$52.24

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes
\$236.74 - Mileage 
\$ 52.24 - BOE Expenses 

Thank you.

IRI:rlg

Attachment

Approved *[Signature]*

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name (Last) (First) (Middle) Mannes John	Board of Education No. Miles to and from Home and Base Location 20
Address (Street No.) (Street) (Apt. No.) [REDACTED]	Job Title Board Member
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Submitted for Month of: <u>March 2013</u> Use one form for each month

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
3-7	Bethesda, MD	SMOB Nom Convention	35		
3-11	Rockville, MD	CESC Tapirus "Meet the Candidates"	20		
3-12	Rockville, MD	CESC BOE ad Day Bus Meet	20		
3-12	Rockville, MD	CESC MCR meet	20		
3-13	Rockville, MD	MCEA meeting	25		
3-13	Rockville, MD	CESC SMOB Student Advisory Council	40		
3-14	Rockville, MD	CESC Bus Inspec Meet	40		
3-15	Silver Spring, MD	MCR- GA Springbook	50		
3-16	Gaithersburg, MD	St. Patrick's Day Parade	14		
3-18	Rockville, MD	Robert Frost MS Mark Mann			
3-18	Rockville, MD	meadow Hall ES principals	31		
3-19	Rockville, MD	County Council MCAP	20		
3-19	Rockville, MD	BOE Policy Committee	20		
3-20	Rockville, MD	CESC Dupont MASC Convention	20		
3-22	Rockville, MD	CESC pick up MASC Convention	20		
3-29	Wash, DC	NHA Summit Ronald Reagan	22		
3-30	Wash, DC	NHA Summit Inaugural	22		
(continue on back)			Total This Page	419	
*APPROPRIATE RECEIPTS MUST BE ATTACHED			Total Reverse Page	0	
			GRAND TOTAL	419	
				For Accounting Use Only	
				_____ miles @ _____	
				Other _____	
				Pay _____	

John Mann Signature, Employee Date 4/4/13
[Signature] Signature, Principal/Supervisor Date 4/18/13

PAID
3/26/13

APPROVED
[Signature] Signature, Account Manager Date 4/19/13

ACCOUNT NUMBER [REDACTED]

"service@paypal.com" <service@paypal.com>

March 14, 2013 8:56 AM

To: John Mannes [REDACTED]

Your payment to National Youth Association of America, Inc.



You sent a payment of \$52.24 USD to
National Youth Association of America,
Inc..

Mar 14, 2013 05:56:37 PDT
Receipt No:5153-8265-4284-3273

Hello John Mannes,

This charge will appear on your credit card statement as payment to PAYPAL *NATIONALYOU.

Merchant information:

National Youth Association of America, Inc.
member@nyaamerica.org
http://nyaamerica.org

Instructions to merchant:

None provided

Shipping information

Shipping method

Not specified

Description	Unit price	Qty	Amount
VIP Registration with Exclusive Luncheon - National Youth Association: American Youth Summit Item #: [REDACTED]	\$52.24 USD	1	\$52.24 USD
Total:			\$52.24 USD

Receipt No: [REDACTED]

Please keep this receipt number for future reference. You'll need it if you contact customer service at National Youth Association of America, Inc. or PayPal.

Use PayPal next time!

It looks as if you already have a PayPal account.

When you shop online, it's faster and easier to check out with PayPal. Your financial information is securely stored and never shared with merchants when you pay.

Please print and bring this ticket with you.

Event

National Youth Association: American Youth Summit



Date+Time

Friday, March 29, 2013 at 6:00 PM - Saturday, March 30, 2013 at 10:00 PM (EDT)

Type

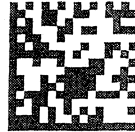
VIP Registration with Exclusive Luncheon \$52.24

Payment Status

PayPal
Completed

Location

Ronald Reagan Building and International Trade Center
1300 Pennsylvania Ave NW
Washington, DC 20004



Order Info

Order # [REDACTED] Ordered by John Mannes on March 14, 2013 5:52 AM

152033087193984433001




Please PRINT and bring your ticket(s) to the event entrance.



Do you organize events?

Start selling in minutes with Eventbrite!

www.eventbrite.com

"National Youth Association" <orders@eventbrite.com> 

March 14, 2013 8:56 AM

To: [REDACTED] Mannes

Order Confirmation for National Youth Association: American Youth Summit

Your order for National
Youth Association
American Youth Summit
is complete!

Friday, March 29, 2013 at 6:00 PM -
Saturday, March 30, 2013 at 10:00 PM
(EDT)

National Youth Association: American
Youth Summit
**Ronald Reagan Building and
International Trade Center**
1300 Pennsylvania Ave NW
Washington, DC 20004



Your tickets are attached to this email or download them
here. Please print and bring them to the event.

Or get the mobile app to access tickets on your phone.

Questions about the event? Contact thwang@nyaamerica.org

Your Receipt

Mar 14, 2013

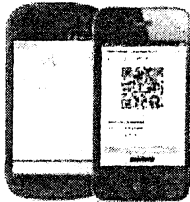
Order #: [REDACTED]

Ticket Buyer	Type	Quantity	Paid
John Mannes	VIP Registration with Exclusive Luncheon	1	\$52.24
TOTAL			\$52.24

This order is subject to Eventbrite Terms of Service

Share this event with your friends! [Email](#) [Share](#) [Tweet](#)

Having problems viewing your tickets?
[Download Adobe Acrobat Reader](#)



Event info on the go.

Access your tickets and more with the Eventbrite app.



Eventbrite | 651 Brannan St. Suite 110 | San Francisco, CA 94107




MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

June 17, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$502.85** in payment of the attached Monthly Mileage Statement for May. Mr. John B. Mannes is the Student Member of the Board of Education.

May - 890 miles X .565 = \$502.85

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes
\$502.85 - Mileage..... 

Thank you.

IRI:rlg

Attachment

Approved 

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name (Last) (First) (Middle) Mannes John	Board of Education No. Miles to and from Home and Base Location 20
Address (Street No.) (Street) (Apt. No.) [REDACTED]	Job Title Board Member
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Submitted for Month of: May 2013 Use one form for each month

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
5-1-13	Burtonsville, MD	Benjamin Banneker MS STEM	60		
5-1-13	Silver Spring, MD	Norwood Cluster BOE	52		
5-2-13	Bethesda, MD	Seven Locks ES Dedication	35		
5-7-13	Footersville, MD	GAMCJC Footersville M. S. 2013	31		
5-8-13	Rockville, MD	MCPS Service Center MC Awards	40		
5-9-13	N. Bethesda, MD	MCPTA Dinner Marriott Hotel	32		
5-10-13	Rockville, MD	BOE CESC Policy Committee	40		
5-13-13	Silver Spring, MD	Jackson R. ES Dedication	52		
5-14-13	Rockville, MD	CESC All Day Res Meet BOE	40		
5-14-13	Wash DC	Wash Post Bk Awards Teachers DC	62		
5-15-13	Bethesda, MD	Churchill Cluster Meet Seven Locks ES	35		
5-15-13	Rockville, MD	CESC meet MCJC	25		
5-16-13	Rockville, MD	CESC meet MCR	40		
5-20-13	Rockville, MD	MC Dinner SWICE Center Bldg	22		
5-22-13	Rockville, MD	MCAP Meeting	22		
5-22-13	Rockville, MD	RTC Dr. Shaw Meeting	23		
continue on back)			Total This Page	611	
*APPROPRIATE RECEIPTS MUST BE ATTACHED			Total Reverse Page	279	
			GRAND TOTAL	890	

For Accounting Use Only
_____ miles @ _____
Other _____
Pay _____

X John Mannes 5/31/13
Signature, Employee Date

[Signature] 6/26/13
Signature, Principal/Supervisor Date

APPROVED [Signature] 6/26/13
Signature, Account Manager Date

ACCOUNT NUMBER [REDACTED]

Submitted For Month Of:				Parking, Tolls, Public Transportation*	
Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Amount	Item
5-22-13	Rockville, MD	CESC Small Business Council	40		
5-23-13	Rockville, MD	CESC BOE Super (Nov) Session	4.2		
5-28-13	SPRINGFIELD, VA	DAR Constitution & New Virginia School Hill	67		
5-30-13	Rockville, MD	CESC BOE Eve Bus meet	40		
5-31-13	Emmitsburg, MD	MTI STMary's Poolesville & GRAD	90		
Please transfer these totals to Front Side			Totals	279	

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

Handwritten initials

July 3, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff *[Signature]*

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$201.72** in payment of the attached Monthly Mileage Statement for June. Mr. John B. Mannes is the Student Member of the Board of Education.

June - 318 miles X .565 = \$179.67
Parking Receipts = \$22.05

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes
\$201.72 - Mileage..... 

Thank you.

IRI:rlg

Attachment

Approved *[Signature]*

Division of Controller
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
 FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Board of Education
Name (Last) (First) (Middle) Mannes John	No. Miles to and from Home and Base Location 20
Address (Street No.) (Street) (Apt. No.) [REDACTED]	Job Title Board Member
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Submitted for Month of: June 2013 Use one form for each month

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
6-4-13	—				
6-5-13	NWHS Grad DAR Constitution Hall Wash DC		68		
6-5-13	BCC Grad DAR Constitution Hall Wash DC		68		
6-7-13	Kingsview MS Germantown MD Graduation		3		
6-10-13	Rockville CESC MCR meeting		40		
6-12-13	Rockville CESC Molo Student Coalition Meet		40		
6-13-13	Rockville CESC All Day Bus Meeting		40		
6-24-13	Rockville CESC Eye Bus Meeting		40		
6-7-13	Wash DC p/s DAR			4.45	p/s DAR
6-6-13	Shady Grove Metro DAR			10.00	Metro DAR
5-30-13	Wash DC p/s DAR			3.15	p/s DAR
5-30-13	Wash DC p/s DAR			4.45	p/s DAR
6-6-13	Shady Grove Metro Gaithersburg, MD to DAR		19		

(continue on back) *APPROPRIATE RECEIPTS MUST BE ATTACHED	Total This Page	318	\$22.05	For Accounting Use Only _____ miles @ _____ Other _____ Pay _____
	Total Reverse Page			
	GRAND TOTAL	318	\$22.05	

X John Mannes 6/29/13
 Signature, Employee Date

[Signature] 7/24/13
 Signature, Principal/Supervisor Date

APPROVED [Signature] 7/31/13
 Signature, Account Manager Date

ACCOUNT NUMBER [REDACTED]

Submitted For Month Of: Parking, Tolls, Public Transportation*

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Amount	Item
					BCC Gu2 DAR
					7/06/13 09:06:14
					Andy Grove Rockville MD TOP CUSTOMER SERVICE CALL 202-962-5719
					3003 Sommerville Dr. AZANINE 18 MACHINE 32

					ENDOR: 018-32-31141 F NC: 311419371971 TH NO: 931821
					DEBIT PURCHASE
					QUANTITY SELECTED: 1
					COST IS \$10.00 PER
					FARECARD
					S N: 110739371972
					TOTAL AMOUNT: \$10.00
					THANK YOU FOR RIDING METRORAIL
					THE FUTURE IS RIDING ON METRO

Please transfer these totals to Front Side ➡ Totals

DAR CONSTITUTION HIGH SCHOOL GRADUATIONS PARKING FEES JOHN MANNES

06/07/2013

Collapse transaction for Transaction date: 06/07/2013

DC PARKING

Transaction date:

06/05/2013

Card type:

Visa

Transaction type:

Purchases

Merchant description:

AUTOMOBILE PARKING LOTS AND GARAGES

Merchant information:

WWW.PARKMOBIL, DC

Offer ID:

JLDCHNNM3

Dispute this transaction

Type Purchases

\$4.45

05/30/2013

Collapse transaction for Transaction date: 05/30/2013

DC PARKING

Transaction date:

05/28/2013

Card type:

Visa

Transaction type:

Purchases

Merchant description:

AUTOMOBILE PARKING LOTS AND GARAGES

Merchant information:

WWW.PARKMOBIL, DC

Offer ID:

Dispute this transaction

Type Purchases

\$3.15

05/30/2013

Collapse transaction for Transaction date: 05/30/2013

DC PARKING

Transaction date:

05/28/2013

Card type:

Visa

Transaction type:

Purchases

Merchant description:

AUTOMOBILE PARKING LOTS AND GARAGES JOHN MANNES

Merchant information:

WWW.PARKMOBIL, DC

Offer ID:



Dispute this transaction

Type Purchases

\$4.45

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

May 22, 2013

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff

Subject: Check Request Payable to **John B. Mannes**



Please issue a check in the amount of **\$551.55** in payment of the attached Monthly Mileage Statement for April 2013 as well as reimbursement for receipts while attending the NSBA Conference and other business meetings. Mr. John B. Mannes is the Student Member of the Board of Education.

April – 399 miles X .565 = \$225.44
Receipts = \$326.11

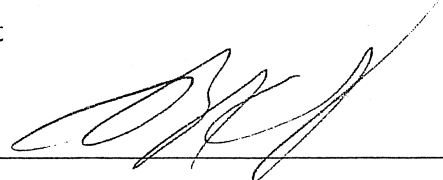
Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes
\$225.44 – Mileage [REDACTED]
\$ 41.65 – BOE Expenses [REDACTED]
\$284.46 – Out of State Travel..... [REDACTED]

Thank you.

IRI:rlg

Attachment

Approved  _____

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name (Last) (First) (Middle) Mannes John	Board of Education No. Miles to and from Home and Base Location 20
Address (Street No.) (Street) (Apt. No.) [REDACTED]	Job Title Board Member
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Submitted for Month of: April 2013 Use one form for each month

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
4-3-13	Rockville, MD	CESC SMOB Mdo 5 th grad	40		
4-4-13	Bethesda, MD	Westland MS GA	42		
4-5-13	Silver Spring, MD	Blair HS Student Activities	44		
4-5-13	Rockville, MD	CESC Maula Kaplan Materials Management	30		
4-8-13	Rockville, MD	CESC MCR meeting	40		
4-10-13	Rockville, MD	CESC SMOB Council	40		
4-11-13	Gaitersby, MD	MSD Youth Town Hall	20		
4-12-13	San Diego, CA	NSBA Convention			
4-16-13	to SG metro	depart	20		
	to SG metro	arrive	20		
4-18-13	Damascus ES	5 th Grade	28		
4-23-13	Rockville, MD	CESC ael Jay Bot meet	40		
4-24-13	Rockville, MD	CESC SMOB election	20		
4-25-13	Gaitersby, MD	MSD Immune for Child	15		
(continue on back)			Total This Page	399	
*APPROPRIATE RECEIPTS MUST BE ATTACHED			Total Reverse Page		
			GRAND TOTAL	399	

For Accounting Use Only

_____ miles @ _____

Other _____

Pay _____

X John Mannes 5, 6, 13
Signature, Employee Date

Signature, Principal/Supervisor Date

APPROVED

[Signature] 6, 4, 13
Signature, Account Manager Date

ACCOUNT NUMBER [REDACTED]



1001 DUNE STREET
ALEXANDRIA, VA 22314-347

REGISTRATION FOR

04/13/2013 - NSBA Conference Registration -
Site Visit: Mobile Learning - University of San Diego
and Qualcomm

To 04-13/2013 15:11:36
On tl Merchant ID 000000005764111
Terminal ID 04685371
Mail 076162443887
Call: CREDIT CARD

PLEASE USE VISA SALE
NAME XXXXX XXXX
NICKNAME 000000
MAILING Approval Code 074386
CITY/ST Eng Method: Swiped
DAYTIME Online
REGISTR Also send \$105.00
EMAIL A
SCHOOL Trip to Mobile Learning
ADDRESS
CITY/STATE/ZIP
PERSONAL EMERGENCY CONTACT INFORMATION
CONTACT NAME () PHONE NUMBER
TITLE FOR BADGE
 Board President Board Member
 School Attorney Other District Administrator
 Superintendent Board Support Professional
 Deputy/Assistant Superintendent Technology Director
 Other (specify):
SPOUSE/FAMILY MEMBER(S) NAME(S)
NAME(S) FOR BADGE (18 AND OVER)
NAME(S) FOR BADGE (UNDER 18)
METHOD OF PAYMENT (Advanced payment required in U.S. funds)
 Check enclosed, made payable to NSBA
 Bill my school district, listed above, using
Purchase Order #
(Required for registration to be processed.)
 MasterCard VISA American Express
CARD NUMBER EXPIRATION DATE
CARDHOLDER'S NAME (PLEASE PRINT OR TYPE)
AUTHORIZED SIGNATURE
CARDHOLDER'S TELEPHONE

Registration Fees

	NA/TLN		REGULAR		MY TOTAL
	By 1/10/13	After 1/10/13	By 1/10/13	After 1/10/13	
CONFERENCE FEE: Select the fee that applies to you and fill in the total.	\$725	\$755	\$895	\$920	
TEAM FEE: Teams of 9 or more attendees from same district receive \$125 off the 9th and subsequent registrations (TLN/NA only; separate forms must be submitted for each person. Submit all forms together).					
SPOUSE/FAMILY MEMBER FEE: Fee for each guest 18 years of age and over	\$49	\$49	\$49	\$49	

Optional Events (Fees are in addition to full Conference fee above)

	NA/TLN	REGULAR	MY TOTAL
Pre-Conference Workshops – Friday Morning #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/>	\$170	\$195	
Pre-Conference Workshops – Friday Afternoon #6 <input type="checkbox"/> #7 <input type="checkbox"/> #8 <input type="checkbox"/> #9 <input type="checkbox"/>	\$170	\$195	
Pre-Conference Workshop – Friday Full Day #10 <input type="checkbox"/>	\$270	\$320	
<input type="checkbox"/> School Law Seminar (begins Thursday 2:30 PM) <input type="checkbox"/> No additional fee if you are a Council of School Attorneys member and a full Conference registrant, but please check here if you plan to attend.	\$335	\$375	
<input type="checkbox"/> Council of Urban Boards of Education Programming – Friday and Saturday Morning	\$200	\$300	
<input type="checkbox"/> Board Member Boot Camp Pre-Conference Session – Friday Afternoon ONLY	\$75	\$75	
<input type="checkbox"/> Digging into the Common Core Standards – Friday Afternoon	\$0	\$195	
<input type="checkbox"/> Education Content for the iPad Friday, 9:00 AM – 12 NOON	\$125	\$150	
Friday, 1:00 PM – 4:00 PM	\$125	\$150	

	NA/TLN	REGULAR	MY TOTAL
<input type="checkbox"/> Site Visit: U.S. Navy SEALs Visit – Leadership Insights Friday, 1:00 PM – 4:00 PM	\$105	\$105	
<input checked="" type="checkbox"/> Site Visit: Mobile Learning – University of San Diego & Qualcomm Saturday, 12:15 PM – 4:00 PM	\$105	\$105	
<input type="checkbox"/> Site Visit: Birch Aquarium Education Program Sunday, 2:00 PM – 5:15 PM	\$130	\$140	
<input type="checkbox"/> Site Visit: Encinitas Union School District Monday, 8:30 AM – 2:30 PM	\$150	\$175	
<input type="checkbox"/> Site Visit: San Diego Zoo, Education Program Monday, 8:30 AM – 2:30 PM	\$175	\$195	

Meal Functions (Fees are in addition to full Conference fee above)

	# TICKETS x PRICE =	
<input type="checkbox"/> American Indian/Alaska Native Caucus Luncheon – Saturday, 12 NOON	_____ x \$65 = _____	
<input type="checkbox"/> For Board Members only: Join the Native Caucus at special conference rate.	_____ x \$15 = _____	
<input type="checkbox"/> National Networks Luncheon – Saturday, 12 NOON	_____ x \$65 = _____	
<input type="checkbox"/> Best Practices for School Leaders Luncheon – Saturday, 12 NOON	_____ x \$65 = _____	
<input type="checkbox"/> Hispanic Caucus Breakfast – Sunday, 8:00 AM	_____ x \$45 = _____	
<input type="checkbox"/> For Board Members only: Join the Hispanic Caucus at special conference rate	_____ x \$30 = _____	
<input type="checkbox"/> Black Caucus Luncheon – Sunday, 12 NOON	_____ x \$65 = _____	
<input type="checkbox"/> For Board Members only: Join the Black Caucus at special conference rate.	_____ x \$30 = _____	
<input type="checkbox"/> Education Technology Luncheon – Sunday, 12 NOON	_____ x \$65 = _____	

GRAND TOTAL (Conference Fee + Optional Events) in U.S. FUNDS = _____

CANCELLATIONS AND REFUNDS:

Requests for refunds can be honored only if made in writing to NSBA prior to March 22, 2013, and will be subject to a \$125 cancellation fee per registrant. No refunds will be honored after March 22, 2013.

LATE REGISTRATION:

AFTER MARCH 22, 2013
We suggest that you register on-site at the NSBA On-site Registration Desk at San Diego Convention Center.

Registrant mailing and email addresses are made available to exhibiting companies for a one-time mailing of useful product information. If you do not wish to receive such mailings, please check here.



Please email sfalks@nsba.org if you have any special needs.

How to Pay

If your district is an NSBA National Affiliate (NA) or Technology Leadership Network (TLN) district, you pay the reduced fees listed, otherwise pay regular fees. Non-NA Canadian districts pay regular fees. To qualify for the early registration discount, you must register and pay by January 10, 2013.

The NSBA Annual Conference is only open to U.S. school districts that hold membership in their state school boards association.

NSBA reserves the right to cancel the registration of any board member or employee of a school district not a member in good standing of their state association. In the event of cancellation, NSBA is not liable for hotel, airfare, or other charges incurred by that registrant.

04/12 - 04/16/2013 - NSBA Conference -
Meals while attending conference

Marriott
SAN DIEGO
HOTEL & MARINA

333 West Harbor Drive, San Diego, CA 92101 • 619.234.1500 • Marriott.com/SANDT

GUEST FOLIO

826 MANNES/JOHN

.00 04/16/13 12:00

Room Name
VD CC/GIBSON/REBECCA

Rate Depart Time
04/12/13 12:40

ACCT#

Type
195

Arrive Time

MRW#:

Room Clerk Address Payment

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
04/12	TEQ BAR	28.84		
04/15	MARKITCH	33.08		
04/15	RMSV/AMN	73.04		
04/16	VS CARD			
				\$134.96

TO BE SETTLED TO: VISA CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT,
PLEASE DIAL 71996 FOR VOICE MAIL CHECK-OUT; OR UTILIZE VIDEO
CHECK-OUT FOR AN UPDATED STATEMENT AT THE BELLSTAND.

WANT YOUR FINAL HOTEL BILL BY EMAIL? JUST ASK THE FRONT DESK!
SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X _____

04/12 - 04/16/2013 - NSBA Conference -
Meal receipts for charges to hotel bill

***** MARINA KITCHEN *****
105 ESMO
RBL 64/1 1125 GST
R826
15APR'13 7:25A

1 BREAKFAST BUFFET 26.00
Sub-Total: 26.00
Tax 2.08
7:25 TOTAL DUE: \$28.08
PLEASE COMPLETE FOR ROOM CHARGES
GRATUITY \$5.00
TOTAL \$33.08

ROOM NUMBER [REDACTED]
PRINT LAST NAME MRONES
SIGNATURE *John Mrones*

Complimentary Wireless High
Speed internet is available
to you in our public spaces!
Select: Marriott_PUBLIC
Support: 1-800-571-9462

28.84

***** ROOM SERVICE *****
San Diego Marriott Hotel Marina
234 THELMA

RBL 826/1 6522 GST
15APR'13 9:10PM
1 RS FAT IRON 35.00
1 JUIC 6.00
1 HAAG 4 DAYS 9.00
Sub Total: 50.00
DELIVERY CHARGE 3.00
20% IS SVC CHG 10.00
TAX 5.04
9:10 TOTAL DUE: \$68.04
SERVICE CHARGE INCLUDED

ROOM NUMBER
PRINT LAST NAME
SIGNATURE

ADDITIONAL GRATUITY
TOTAL
THANK YOU***

73.04

04/13 - 04/15/2013 - NSBA Conference -
Receipts while attending out of state conference



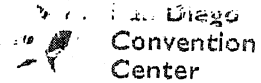
Starbucks Hall C
W. Harbor Dr. San Diego, CA

APR 13 9:56AM

1 T Chai Tea Latte 4.00

BEVERAGE 4.00
PAYMENT **4.00**
Cash 5.00
CHANGE DUE 1.00

--1100 Closed APR15 09:56AM--



Starbucks Hall C
W. Harbor Dr. San Diego,

0 Epifanio

322

APR14'13 9:42AM

1 V Iced Tea 4.0

BEVERAGE 4.0
PAYMENT **4.00**
Cash 5.00
CHANGE DUE 1.00

-1100 Closed APR14 09:42AM----



Starbucks Hall C
111 W. Harbor Dr. San Diego, CA

00 Epifanio

5711

APR13'13 9:44AM

1 Rice Krsp Bar 2.75
1 G Chai Tea Latte 5.00
1 Danish Chz 2.75

FOOD 5.50
BEVERAGE 5.00
PAYMENT **10.50**
Cash 20.00
CHANGE DUE 0

--1100 Closed APR13 09:45

04/16/2013 - NSBA Conference -
Food and beverage while attending conference

2009 04/16
JOHN HANNES III

QUAN.	CLASS	DESCRIPTION	PRICE	AMOUNT
DATE		AUTHORIZATION		SUB TOTAL
REFERENCE NO.		REG/DEPT.		TAX
FOLIO/CHECK NO.		SERVER	CLERK	TIPS MISC
SALES SLIP				TOTAL

CUSTOMER COPY

PURCHASER SIGN HERE

X *John Hannes III*

Cardholder acknowledges receipt of goods and/or services in the amount of the Total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with issuer.

IMPORTANT: RETAIN THIS COPY FOR YOUR RECORDS

04/09/2013 - Montgomery County Student Coalition
Student advocacy materials

V Michaels
Where Creativity Happens[®]

MICHAELS STORE #9709 (301)515-4951
MILESTONE CENTER
20902 FREDERICK RD.
GERMANTOWN, MD 20876-4134

** Return Barcode **

281-0615-0015-4031-1111-5110-1103-7173



709 SALE 7088 9709 001 4/09/13 15:09

YURA TRUE	17754	58048	1.79	1 @	1.79
YURA TRUE	17754	58048	1.79	1 @	1.79
HOLIDAY GR	17754	204110	5.99	1 @	5.99
SOFT 4OZ CO	17754	265364	5.99	1 @	5.99
SOFT 4OZ YE	17754	265456	5.99	1 @	5.99
TOOTH BRUSH 1"	4001008	00119	.04	1 @	.04
TOOTH BRUSH 1"	4001008	00119	.04	1 @	.04
TOOTH BRUSH 1"	4001008	00119	.04	1 @	.04
TOOTH BRUSH 1"	4001008	00119	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
TOOTH BRUSH 1"	886546	50203	.04	1 @	.04
SUBTOTAL					21.95
SALES TAX					1.37

04/09/2013 - Montgomery County Student Coalition
Student advocacy materials

V Michaels
Where Creativity Happens[®]

MICHAELS STORE #8809 (301)977-9400
KENTLANDS TOWN CENTER
821 CENTER POINT WAY
GAITHERSBURG, MD. 20878-5458

** Return Barcode **

9581-0945-0015-4899-5111-5110-1177-1881



224 SALE 0440 8809 001 4/09/13 12:59

LG ADULT W	883096067641	1.97	1 @	1.97
LG ADULT W	883096067641	1.97	1 @	1.97
LG ADULT W	883096067641	1.97	1 @	1.97
LG ADULT W	883096067641	1.97	1 @	1.97
LG ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
G ADULT W	883096067641	1.97	1 @	1.97
SUBTOTAL				19.70
SALES TAX				1.19

Student Affairs Office

<http://www.montgomeryschoolsmd.org/departments/studentaffairs/>



INVOICE

Date: March 18, 2013

Student Affairs Office
Upcounty Regional Services Center
12900 Middlebrook Road, 3rd Floor West
Germantown, MD 20874
301-444-8620 Fax 301-601-2905

TO Checks Payable to:
Student Affairs Office
Attn: Karen L. Crawford

Mail Payment to:
Student Affairs Office
Upcounty Regional Services Center
12900 Middlebrook Road, 3rd Floor West
Germantown, MD 20874

(MCPS Pony System: Student Affairs Office,
Upcounty Regional Services Center, 3rd Floor West)

EVENT OR OTHER	PAYMENT TERMS
MASC Convention	John Mannes - MASC Convention

DESCRIPTION	TOTAL
MASC Bus transportation, driver gratuity, lunch on Friday <i>(See convention packet for additional information)</i>	\$32
TOTAL DUE	\$32

Make all checks payable to Student Affairs Office
THANK YOU FOR YOUR SUPPORT OF MONTGOMERY COUNTY STUDENT LEADERS!

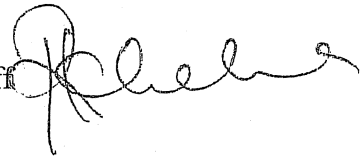
MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

August 7, 2012

PAID

MEMORANDUM

To: Mr. Robert Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to **MABE**

Please issue a check in the amount of **\$125.00** in payment of the attached invoice for one registration to the Maryland Association of Boards of Education's New Student Board member Orientation.

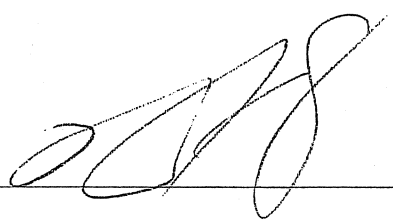
Please charge the account number indicated.

Mr. Mannes 

Thank you.

RI:rlg

Attachment

Approved  _____



MD ASSOCIATION OF BOARDS OF EDUCATION

621 RIDGELY AVENUE #300
ANNAPOLIS, MD 21401

Voice: 410 841 5414
Fax: 410 841 6580
www.mabe.org

INVOICE

Invoice Number: 2012 NwStdntBrd
Invoice Date: Jul 1, 2012
Page: 1

Duplicate

Bill To:
Montgomery Co Public Schls 850 Hungerford Drive Rockville, MD 20850

Ship to:
Montgomery Co Public Schls 850 Hungerford Drive Rockville, MD 20850

Customer ID	Customer PO	Payment Terms	
Montgomery Co P S		Net 10 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Airborne		7/11/12

Quantity	Item	Description	Unit Price	Amount
		John Mannes - Registration for August 16, 2012 - New Student Board Member Orientation		125.00

Subtotal	125.00
Sales Tax	
Total Invoice Amount	125.00
Payment/Credit Applied	
TOTAL	125.00

Check/Credit Memo No:

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

September 12, 2012

Handwritten: 9/12/12

Stamp: ER-115

MEMORANDUM

To: Mr. Robert Doody, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff

Subject: Check Request Payable to **John B. Mannes**

Handwritten signature: R. Ikheloa

Please issue a check in the amount of **\$383.84** in payment of the attached Monthly Mileage Statements for July and August as well as receipts for business meetings. Mr. John B. Mannes is the new Student Member of the Board of Education.

July – 260 miles X .555 + \$7.00 = \$151.30
August – 246 miles X .555 = \$136.53
Receipts – \$26.34 + \$10.17 + \$59.50 = \$96.01

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes

\$287.83 - Mileage.....
\$ 96.01 - BOE Expenses.....

Thank you.

IRI:rlg

Attachment

Approved _____

Handwritten signature: [Signature]

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Board of Education
Name (Last) (First) (Middle) Mannes John B.	No. Miles to and from Home and Base Location 10 x 2 = 20 miles
Address (Street No.) (Street) (Apt. No.) [Redacted]	Job Title Board Member <input checked="" type="checkbox"/>
(City) (State) (ZIP Code) [Redacted] Maryland [Redacted]	Submitted for Month of: July 2012 Use one form for each month

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
7-14-12	First Ward Rockville	SMOB/MCJC meet	20		
7-15-12	CESC Rockville	SMOB/MCR meet	20		
7-16-12	RM HS - Rockville	Drive for Supplies	20		
7-17-12	CESC Rockville	BoE meeting	40		
7-19-12	McPlan Board - Silver Spring	BoE w/Plan Board Meet	60		
7-24-12	Rockville	BoE/Council Lunch	20	2.00	pkgs.
7-25-12	CESC - Rockville	Gazebo, CORE Values BOE	20	5.00	metro
7-25-12	Shady Grove Metro	Dinner w/ Dr. Staff after Rockville	20		
7-30-12	CESC Rockville	BoE meeting 5PM	40		
7-30-12	CESC Rockville	Pictures BOE 11AM	--		

(continue on back)	Total This Page			For Accounting Use Only _____ miles @ _____ Other _____ Pay _____
	Total Reverse Page			
	GRAND TOTAL	360	7.00	

John Mannes
Signature, Employee 8, 30, 12
Date

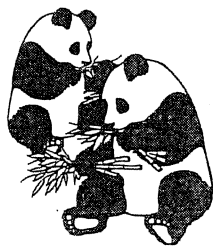
[Signature]
Signature, Principal/Supervisor 9, 11, 12
Date

APPROVED *[Signature]*
Date
9, 11, 12

ACCOUNT NUMBER [Redacted]

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Amount	Item
	GARAGE 59 CLUB 100 MARYLAND AVENUE ROCKVILLE, MD 20850 Rcpt# [REDACTED]				
	07/24/12 13:41 L# 1 AM 3 Txn# [REDACTED]				
	07/24/12 13:25 In 07/24/12 13:41 Out				
	Tkt# 005826				
	CASH PAID \$ 1.00-				
	THANK YOU				
	HAVE A SAFE TRIP				
	GARAGE 59 CLUB 100 MARYLAND AVENUE ROCKVILLE, MD 20850 Rcpt# [REDACTED]				
	07/24/12 12:33 L# 1 AM 3 Txn# [REDACTED]				
	07/24/12 12:22 In 07/24/12 12:33 Out				
	Tkt# 005735				
	CASH PAID \$ 1.00-				
	THANK YOU				
	HAVE A SAFE TRIP				

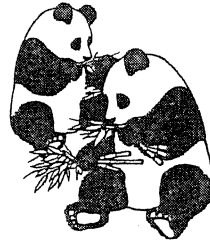
02 50
00 10



M opens doors
metro

Warning: Keep this farecard away from magnetic devices and other magnetic strips to minimize a loss of fare value.

02 50
00 10



M opens doors
metro

Warning: Keep this farecard away from magnetic devices and other magnetic strips to minimize a loss of fare value.

Please transfer these totals to Front Side



Totals

Division of Controller
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
 FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Board of Education
Name (Last) (First) (Middle) Mannes John B.	No. Miles to and from Home and Base Location 20 miles
Address (Street No.) (Street) (Apt. No.) [REDACTED]	Job Title Board Member <input checked="" type="checkbox"/>
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Submitted for Month of: August Use one form for each month 2012

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
8-16-12	Annapolis, MD	MABE New BOE Train	110		
8-16-12	Rockville, MD	SMOB eve meet	20		
8-27-12	Silver Spring, MD	BOE School Visit FSES	40		
8-29-12	Silver Spring, MD	BOE School Visit PBHS			
8-29-12	Silver Spring, MD	BOE School Visit BCMS	56		
8-30-12	CESC-Rockville	SMOB Council	20		

(continue on back) *APPROPRIATE RECEIPTS MUST BE ATTACHED	Total This Page		For Accounting Use Only _____ miles @ _____ Other _____ Pay _____
	Total Reverse Page		
	GRAND TOTAL	246 #	

John Mannes Signature, Employee 8,30,12 Date

[Signature] Signature, Primary Supervisor 9,13,12 Date

APPROVED [Signature] Signature, Account Manager 9,13,12 Date

ACCOUNT NUMBER [REDACTED]

First Name

Server: Host DOB: 07/14/2012
12:31 PM 07/14/2012
Table 110/1 3/30060

VISA 1048719
Card #XXXXXXXXXX [REDACTED]
Magnetic card present: MANNES JOHN
Approval: 723994

Amount: 26.34
+ Tip: _____
= Total: _____

X _____

City

07/14/2012 - Mannes meeting with SMOB/MCJC

bu

IHOP # 594

775 Rockville Pike
Rockville, MD 20852
Phone: (301) 738-1894

Date: Aug16'12 07:27PM
Card Type: Visa
Acct #: XXXXXXXXXX [REDACTED]
Card Entry: SWIPED
Trans Type: PURCHASE
Trans Key: DID000886802065
Auth Code: 576669
Check: 5546
Table: 121/3
Server: 3184 Elizabet

Subtotal: **\$10.17**

Tip _____

Total _____

YOUR COPY

I agree to pay the above total
according to my credit card
agreement.

08/16/2012 - Mannes, SMOB Evening Meeting

PIZZA HUT
DELIVERY

Ticket # 00076

ENTERED BY

MANUEL

025b23

08/30/12

07:57PM

** NEW CUSTOMER **

Please Confirm Customer Information

JUSTIN

850 HUNGERFORD DR

MCPS BUILDING

ROCKVILLE MD 20850

Business

xy: C-06

MCPS

01	2	Large	20.00
		Hand toss	
		Cheese	
02	1	Large	10.00
		Hand toss	
		Cheese	
		Pepperoni	
03	1	Large	10.00
		Pan	
		Cheese	
04	1	Large	10.00
		Pan	
		Cheese	
		Pepperoni	

Subtotal	50.00
Delivery Charge	2.50
SALES TAX	3.00
Balance Due	55.50

Taken at 07:57PM
Delivered by 08:27PM

#7.00
TIP

Gratuity Not Included
In The Delivery Charge

WIN CASH!
FLIP ME OVER TO WIN CASH!
FLIP ME OVER TO WIN CASH!
FLIP ME OVER TO WIN CASH!
FLIP ME OVER TO WIN CASH!

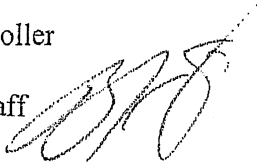
08/30/2012 - Mannes, SMOB Student Advisory Council Mtg

Office of the Superintendent of Schools
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland

October 12, 2012

MEMORANDUM




To: Ms. Susan Chen, Acting Controller
From: Brian K. Edwards, Chief of Staff
Subject: Request for Check



Please prepare a check as follows:

Payee: **Montgomery County Business Hall of Fame**

Amount: **\$400.00 – split as noted below**

Account Number: \$200.00 - 
\$100.00 - 
\$100.00 - 

Distribution: **Montgomery County Business Hall of Fame
c/o Monument Bank
Attn: Deb Kahley
7401 Wisconsin Avenue, Suite 300
Bethesda, MD 2014**

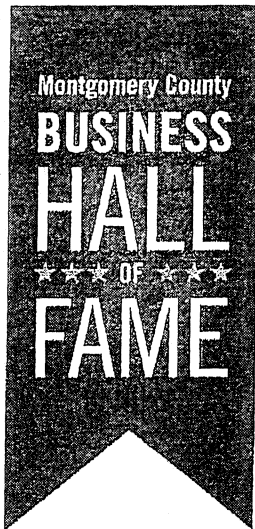
Date needed (if applicable): **ASAP**

Purpose (attach appropriate documentation):
**Joshua Starr, Brian Edwards, Tim Warner, John Mannes –
Montgomery County Business Hall of Fame event tickets**

BKE:slh
Attachment

Copy to:
Ms. Flinchbaugh
Ms. Gibson





Invoice

Montgomery County Business Hall of Fame
c/o Monument Bank
Attention: Deb Kahley
7401 Wisconsin Avenue, Suite 300
Bethesda, MD 20814

Date of Invoice: 10-10-12

Invoice #: [REDACTED]

To: Montgomery County Public Schools
Attention: Sandra L. Napoli
850 Hungerford Drive, Room 122
Rockville, MD 20850

For the purchase of four (4) tickets:

\$400.00

Dr. Joshua Starr
Mr. Brian Edwards
Mr. Timothy Warner
Mr. John Mannes

Please make your check payable to "Montgomery County Business Hall of Fame"

*Thanks for your generous support of the inaugural
Montgomery County Business Hall of Fame.*

If you have any questions regarding this invoice, please contact Deb Kahley at 301.841.9509 or dkahley@monumentbank.com.

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

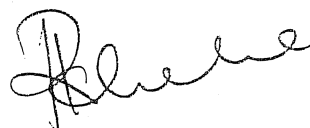
kmuf
10/16/12

October 15, 2012

MEMORANDUM

To: Mrs. Susan B. Chen, Acting Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff



Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$115.97** in payment of the attached Monthly Mileage Statement for September, as well as a receipt for home office supplies. Mr. John B. Mannes is the new Student Member of the Board of Education.

September – 196 miles X .555 = \$108.78
Receipt – \$7.19

Please charge the account numbers for the Board Member/Staff Person indicated.

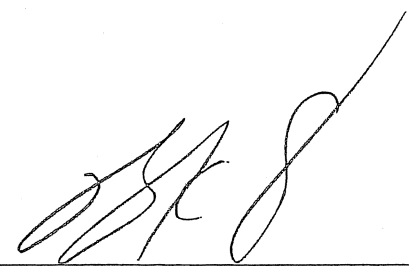
Mr. Mannes

\$108.78 - Mileage.....
\$ 7.19 - Supplies.....

Thank you.

IRI:rlg

Attachment

Approved  _____

Division of Controller
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Board of Education
Name (Last) (First) (Middle) Mannes John	No. Miles to and from Home and Base Location 20 miles
Address (Street No.) (Street) (Apt. No.) [REDACTED]	Job Title Board Member
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]	Submitted for Month of: September 2012 Use one form for each month

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
9-6	Printer	Office Printer		\$ 7.19	Paper
9-11	Rockville CESC	BoE Business Meet	20		
9-12	BAPA Bethesda	Partnership Day	36		
9-13	Rockville CESC	MCEA Dinner Meet	20		
9-15	Rockville CESC	Core Values Session	20		
9-18	Rockville CESC	BoE Policy Committee	20		
9-19	Rockville CESC	MoCo SmoB Council	20		
9-19	Rockville CESC Day	BoE Hearings	20		
9-24	Rockville CESC	BoE Eve Bus Meet	20		
9-27	Rockville Gude Dr.	BoE MCAAT Meet	20		

(continue on back) *APPROPRIATE RECEIPTS MUST BE ATTACHED	Total This Page		For Accounting Use Only _____ miles @ _____ Other _____ Pay _____
	Total Reverse Page		
	GRAND TOTAL	196 \$ 7.19	

John Mann Signature, Employee 10, 2, 12 Date

Signature, Principal/Supervisor _____ Date

APPROVED

Signature, Account Manager _____ Date

ACCOUNT NUMBER [REDACTED]



GAIL - STORG - 301-721-1760
09/06/2012 11:59 AM EXPIRES 12/05/12



CLEANING SUPPLIES

002090515 CORN EROOM T \$7.89

GROCERY

071060966 AFSB EKD CHP FN \$2.99

225033231 MP BREAD FN \$3.38

231100029 2 @ \$1.69 ea STARBUCKS FN \$7.99 ↓

Saved \$1.45 off \$9.44

STATIONERY-OFFICE

081050126 HP PAPER T \$7.19

SUBTOTAL \$29.44

PLASTIC BAG FEE (2) \$0.10

T = MD TAX 6.0000% on \$15.08 \$0.91

TOTAL \$30.45

DEBIT TOTAL PAYMENT \$30.45

↓ INDICATES SAVINGS

Target Pharmacy We're here to help!

9am - 9pm M-F

9am - 6pm Sat

9am - 6pm Sun

REC# [REDACTED] VCD#750-280-840


MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

November 14, 2012

PAID

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 

Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$333.04** in payment of the attached Monthly Mileage Statement for October, as well as a receipt for meeting. Mr. John B. Mannes is the Student Member of the Board of Education.

October – 583 miles X .555 = \$323.56
Receipt – \$9.48

Please charge the account numbers for the Board Member/Staff Person indicated.

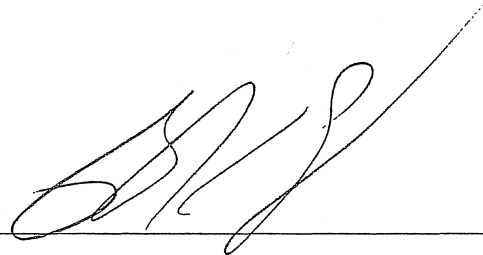
Mr. Mannes

\$323.56 - Mileage..... 
\$ 9.48 - Supplies..... 

Thank you.

IRI:rlg

Attachment

Approved  _____

Division of Controller
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
 FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>			Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Name (Last) (First) (Middle) Mannes Mannes, John			Board of Education	
Address (Street No.) (Street) (Apt. No.) [REDACTED]			No. Miles to and from Home and Base Location 20	
(City) (State) (ZIP Code) [REDACTED] Maryland [REDACTED]			Job Title Board Member	
			Submitted for Month of: Oct 2012	
Use one form for each month				

Date	Destination	Purpose of Trip. ^{38X} ↓ to Househiley	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
10-3	5 OC, Maryland	MABE → Brandman's	76		
10-8	Rockville, MD	SMOB Council meet	20		
10-9	Rockville CESC	BOE all day meet	20		
10-9	Rockville MHS	GA speech leave	10		
10-9	Rockville CESC	Back from closed session	20		
10-9	Rockville CESC	BOE and MHS ^{prep}	20		
10-10	Rockville CESC	Sam Arora Meet	20		
10-10	Rockville, MD	MoCo Council ^{you're}	22		
10-10	Rockville, MD	Youth town Hall	22		
10-11	Rockville CESC ²⁰¹	SEIU Local 500 meet	40		
10-13	Gaitheersby, WMHS	Marching Band Contest	76		
10-15	Rockville U@SG	Business Hall of Fame ^{by state}	10		
10-15	Rockville RMHS	WAACP meet ²²	44		
10-16	Olney Rosa PKs	Middle School ^{20th Anniversary}	40		
10-17	Bethesda, MD	Sen. Brian Fosh meeting ^{JVR}	37		
10-18	Rockville CESC	Policy Comm Meeting	20		
(continue on back) X over			Total This Page	437	
*APPROPRIATE RECEIPTS MUST BE ATTACHED			Total Reverse Page	146	\$
			GRAND TOTAL	583	10.05
				For Accounting Use Only	
				_____ miles @ _____	
				Other _____	
				Pay _____	

X John Mannes 10, 31, 12
 Signature, Employee Date

[Signature] 11, 26, 12
 Signature, Principal/Supervisor Date

[Signature] 11, 27, 12
 Signature, Account Manager Date

APPROVED

ACCOUNT NUMBER [REDACTED]

SNOB AT Lounge
Meeting

Panera Bread
Cafe 3574
Rockville, MD 20850
Phone: 301-545-1874

10/8/2012

3:46:59 PM

Check Number: 650394 Cashier: Ezell
1 CHIPOTLE 7.19
1 ***CHIPS
1 ICED GREEN TEA 2.29
1 HALF LEMONADE
SubTotal 9.48
Tax 0.57
Total 10.05
Cash 20.00
Change 9.95

If you didn't use your MyPanera card,
keep this receipt and enter the code below
at www.mypanera.com/missedvisit

Not a member yet? Ask an Associate for
your own card and join today!

4606-5466-6691-3062-6957-42

TELL US HOW WE ARE DOING
AND YOU MAY WIN \$2000
GO TO WWW.PANERALISTENS.COM
OR CALL 1-800-699-0130
WITHIN 48 HOURS/ MONTHLY DRAWING
RULES AT WWW.PANERALISTENS.COM

HERE

Your Order Number is: 694
Customer / Pager:

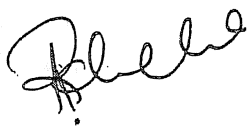
MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

December 19, 2012

FILED

MEMORANDUM

To: Mrs. Susan B. Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff 




Subject: Check Request Payable to **John B. Mannes**

Please issue a check in the amount of **\$368.28** in payment of the attached Monthly Mileage Statement for November, as well as two receipts. Mr. John B. Mannes is the Student Member of the Board of Education.

November – 469 miles X .555 = \$260.30
Receipts – \$85.98 + \$22.00 = \$107.98

Please charge the account numbers for the Board Member/Staff Person indicated.

Mr. Mannes

\$260.30 - Mileage.....
\$ 85.98 - Supplies.....
\$ 22.00 - Expenses

Thank you.

IRI:rlg

Attachment

Approved  _____

Division of Controller
 MONTGOMERY COUNTY PUBLIC SCHOOLS
 Rockville, Maryland 20850

MONTHLY STATEMENT OF MILEAGE
 FOR USE OF PRIVATE VEHICLE

INSTRUCTIONS: This form should be submitted to your immediate supervisor by the third of the month for the preceding month. Supervisors will forward immediately to the appropriate account manager; the Division of Controller should receive forms by the sixth of the month. (For additional information, see MCPS Regulation DIE-RA: Local Travel.) List all official stops in date order.

Employee ID No. <input type="text"/>	Base School Location New: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Board of Education
Name (Last) (First) (Middle) Mannes John	No. Miles to and from Home and Base Location 20
Address (Street No.) (Street) (Apt. No.) [Redacted]	Job Title Board Member
(City) (State) (ZIP Code) [Redacted] Maryland [Redacted]	Submitted for Month of: <i>November</i> Use one form for each month <i>2012</i>

Date	Destination	Purpose of Trip	No. of Miles Reimbursable	Parking, Tolls, Public Transportation*	
				Amount	Item
1-7	CESC Rockville, MD	MCR SMOB visit meeting	20		
1-8	Julius West MS Rockville	w MD Delegation visit	22		
1-8	CESC Rockville, MD	BOE Balance sheet Fac	20		
1-8	CESC Rockville, MD	BOE Meeting	20		
1-11	Saitheburg City Hall	Veteran's Day Celebr	16		
1-12	N. Bethesda Station	bus stop at the schools	36		
1-12	Silver Spring, MD Paint Branch HS	Medical visit	50		
1-12	CESC Rockville, MD	BOE Balance sheet Fac meet	20		
1-12	CESC Rockville, MD	BOE	20		
1-13	CESC Rockville, MD	BOE all day meet	20		
1-13	CESC Rockville, MD	BOE	20		
1-14	Kensington, MD Albert E. Nesbitt HS	Yearly Town Hall	40		
1-14	Rockville, MD	Comm. Review DRG Staff	20		
1-19	CESC Rockville, MD	BOE B&F meeting	20		
2-6	MCPS TV Studio	SMOB announcement taping	20		
2-7	Rockville, MD Reslan MS	Yearly Town Hall	25		
Total This Page			389		
Total Reverse Page			80		
GRAND TOTAL			469		

(Continue on back)

*APPROPRIATE RECEIPTS
 MUST BE ATTACHED

For Accounting Use Only
 _____ miles @ _____
 Other _____
 Pay _____

X John Mannes
 Signature, Employee 11,30,12
Date

[Signature]
 Signature, Principal/Supervisor 12,12,12
Date

[Signature]
 Signature, Account Manager 12,21,12
Date

APPROVED

ACCOUNT NUMBER [Redacted]

11-28-2012 - Student Member of the Board meeting with
Montgomery County Student Coalition

10-03-2012 - Ink supplies for Montgomery County Public Schools
home office printer

OFFICE DEPOT #350
15790 SHADY GROVE ROAD
GAITHERSBURG, MD 20877
(301) 527 - 0315

10/08/2012 12.3 4:16 PM
SIR 350 REG1 TRN 3107 EMP 629630 *8660*

SALE *Ink Molo BAE printer*
Product ID Description Total
781386 INK, 950, BLACK *28.99 S*
781602 INK, 951, COMBO *+ 56.99 S*
~~576549 FLSHLGHT, 9LED, 3.00 S~~
~~724639 Carryout bag 0.05 E~~

Subtotal: 89.03
Sales Tax: 5.34
Total: 94.37
Debit Card *[Redacted]* 94.37

Thank You For Choosing
Papa John's Pizza
Restaurant #0667

Name: john manis
Address: 8850 Hungerford Dr office
Rockville MD 20852

Cust#: 181786
Phone#: *[Redacted]* Sec: 3

Order #: 0136
Phone/Delivery

Out Time: 07:42:45 pm ElapsedTime: 12:23
1 <14> 14" Original 14.60
+Pepperoni
+1 Garlic Cups
+1 Pepperoncini Pepper
1 <14> 14" Original 13.00
+1 Garlic Cups
+1 Pepperoncini Pepper
Delivery Fee 2.00

Subtotal: 29.60
Discount: 7.60
Tax: 1.32

Total: *23.32*

twenty three dollars and 32/100
cents

Any delivery fee charged is not a tip
for the Driver. Please reward your
driver with a tip for outstanding
service.

2691 11/28/2012 07:19pm

MONTGOMERY COUNTY BOARD OF EDUCATION
Rockville, Maryland

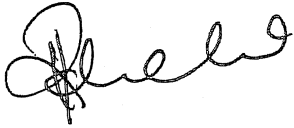
December 20, 2012

Handwritten notes: "Jones 12/20/12" and a stamp.

MEMORANDUM

To: Mrs. Susan Chen, Controller
Division of Controller

From: Ikhide Roland Ikheloa, Chief of Staff



Subject: Check Request Payable to **North Bethesda Middle School**

Please issue a check in the amount of **\$42.00** in payment of the attached receipt for lunch provided for the Student Member of the Board's Think Tank Road Show and mail check.

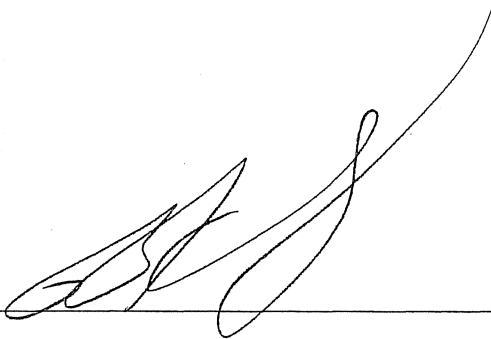
Please charge the account number indicated.

BOE Expenses 

Thank you.

IRI:rlg

Attachment

Approved  _____

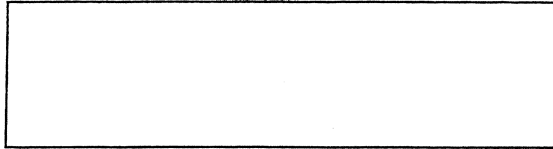
Gibson, Becky

From: Evans, Joseph F
Sent: Wednesday, December 19, 2012 6:36 PM
To: Gibson, Becky
Subject: FW: Subway Email Confirmation #22938990
Attachments: image001.jpg

We will have about 12 people eating lunch. Here is the receipt for Subway. Pizza was a no go because they will be eating too early.

Joe Evans

From: support@snapfinger.com [mailto:support@snapfinger.com]
Sent: Wednesday, December 19, 2012 6:34 PM
To: Evans, Joseph F
Subject: Subway Email Confirmation # [REDACTED]



Online Ordering Receipt
Subway
10400 Old Georgetown Rd
Bethesda, MD 20814
301-493-4174
[View Map](#)

Your order has been submitted.

Please print this receipt for your records.

If you have questions about your order, please call the restaurant at 301-493-4174.

Order/Confirmation #	-	[REDACTED]
Delivery Time	-	12/20/2012 10:15 AM

Customer Information

Name	-	Joseph Evans
Email*	-	Joseph_F_Evans@mcpsmd.org
Phone Number*	-	[REDACTED]
Address	-	[REDACTED]
State	-	[REDACTED]
City	-	[REDACTED]
Zip	-	[REDACTED]

Order Information

3 Ft Giant Sub	\$42.00
Joe Evans North Bethesda Middle School	
Catering Italian	
Cheddar	

Turkey Breast
 Lettuce
 Tomatoes
 Salt
 Pepper
 Mayo
 Mustard
 Chipotle Southwest Sauce
 Honey Mustard
 No Bacon, Thank You

	Payment Information	Cash
Payment Type	-	\$42.00
SubTotal	-	\$2.52
Tax	-	\$44.52
Total	-	\$0.00
Amount Paid	-	\$44.52
Balance	-	