

# COUNTY OF LAKE

# Legislation Details (With Text)

File #: 19-431 Version: 1 Name:

Type: Action Item Status: Agenda Ready

File created: 4/26/2019 In control: BOARD OF SUPERVISORS

On agenda: 5/14/2019 Final action:

Title: Approve request for reimbursement in the amount of \$103.40 on a late claim for Maria Allen as the

charge had been made on the employee's credit card in error

**Sponsors:** Social Services

Indexes:

**Code sections:** 

Attachments: 1. ExpenditureRequest\_Allen

Date Ver. Action By Action Result

### **MEMORANDUM**

**TO**: BOARD OF SUPERVISORS

FROM: CRYSTAL MARKYTAN, DIRECTOR LCDSS

**DATE**: May 14, 2019

**SUBJECT**: Approve request for reimbursement in the amount of \$103.40 on a late claim for Maria Allen as the charge had been made on the employee's credit card in error

#### **EXECUTIVE SUMMARY:**

On 4-19-19, Gracia Albin noticed that Social Worker, Maria Allen, had been charged for a motel room in Klamath, CA on 12-19-18 for \$103.40 while she was on County business. Ms. Albin brought this information to Deputy Director, Amber Davis. Ms. Albin stated that the motel reservation had been made with Ms. Davis's Cal-Card. Upon arrival, the motel requested Ms. Allen to give them a credit card for potential incidental charges. When Ms. Allen checked out of the motel on 12-20-18, the motel charged Ms. Allen's credit card instead of the Cal-Card. Ms. Allen did not submit an expenditure claim within 60 days because she had not noticed the charge had been made until Ms. Albin brought it to her attention on 4-19-19. Ms. Allen submitted a copy of her credit card statement to Ms. Davis showing that the charge had been made on her credit card. I am submitting a new claim on Ms. Allen's behalf and requesting that you approve the reimbursement for \$103.40.

FISCAL IMPACT: None X Budgeted Non-Budgeted

Estimated Cost: \$103.40 Amount Budgeted: \$103.40 File #: 19-431, Version: 1

Additional Requested: \$0

Annual Cost (if planned for future years): \$0

## FISCAL IMPACT (Narrative):

There is no County cost.

## STAFFING IMPACT (if applicable):

None.

### **RECOMMENDED ACTION:**

Approve request for reimbursement in the amount of \$103.40 on a late claim for Maria Allen as the charge had been made on the employee's credit card in error.

Thank you for your consideration.

Attachments: Back up data for charges.