



EAST VALLEY WATER DISTRICT

LEADERSHIP • PARTNERSHIP • STEWARDSHIP

DIRECTOR EXPENSE / REIMBURSEMENT ACTIVITY SHEET

Name: David E. Smith

Month / Year: October / 2024

No.	Date	Meeting / Event Description	Mileage	Meeting Stipend	Report Provided	
					Written	Oral
1	10 / 05	Chamber of Commerce Event		248.06	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2	10 / 08	City of Highland Council Meeting		248.06	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	10 / 09	San Bernardino VWC District		0.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4	10 / 09	Regular Board Meeting		248.06	<input type="checkbox"/>	<input type="checkbox"/>
5	10 / 17	Meeting with General Manager/CEO or Designee		248.06	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6	10 / 21	ASBCSD		248.06	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7	10 / 22	Chamber of Commerce Event		248.06	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8	10 / 23	Regular Board Meeting		248.06	<input type="checkbox"/>	<input type="checkbox"/>
9					<input type="checkbox"/>	<input type="checkbox"/>
10					<input type="checkbox"/>	<input type="checkbox"/>
11					<input type="checkbox"/>	<input type="checkbox"/>
12					<input type="checkbox"/>	<input type="checkbox"/>
13					<input type="checkbox"/>	<input type="checkbox"/>
14					<input type="checkbox"/>	<input type="checkbox"/>
15					<input type="checkbox"/>	<input type="checkbox"/>
16					<input type="checkbox"/>	<input type="checkbox"/>
17					<input type="checkbox"/>	<input type="checkbox"/>
18					<input type="checkbox"/>	<input type="checkbox"/>
19					<input type="checkbox"/>	<input type="checkbox"/>
20					<input type="checkbox"/>	<input type="checkbox"/>

Subtotal Meetings' Stipend	7 Meetings	\$1,736.42
Mileage	0.00 X 0.67/mi	\$0.00

No.	Date	Expense Type	Miscellaneous Reimbursement Description	Reimbursement
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Subtotal	\$0.00
TOTAL PAYMENT	\$1,736.42

I certify that the above is correct and accurate to the best of my knowledge.

David E. Smith
David E. Smith

Date of Approval

Administration Signature



EAST VALLEY WATER DISTRICT

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DIRECTOR EXPENSE / REIMBURSEMENT ACTIVITY SHEET AB 1234 SUPPLEMENTAL REPORT FORM

Name: David E. Smith

Month / Year: October / 2024

As part of the District's commitment to transparency, please provide a brief description of any meeting/event(s) that you will not be providing a report during the Board meeting at which your Director's Expense Sheet is being approved.

1 Meeting Date: 10 / 5 / 2024

Event Description: Chamber of Commerce Event

Brief Description of Meeting/Event Value to EVWD

COMMISSION OF NEW SENIOR CENTER

2 Meeting Date: 10 / 8 / 2024

Event Description: City of Highland Council Meeting

Brief Description of Meeting/Event Value to EVWD

REGULAR COUNCIL MEETING

3 Meeting Date: 10 / 9 / 2024

Event Description: San Bernardino VWC District

Brief Description of Meeting/Event Value to EVWD

REGULARBOARD MEETING

4 Meeting Date: 10 / 9 / 2024

Event Description: Regular Board Meeting

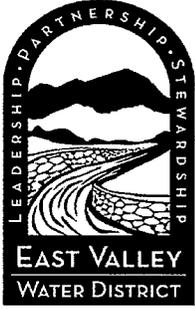
Brief Description of Meeting/Event Value to EVWD

5 Meeting Date: 10 / 17 / 2024

Event Description: Meeting with General Manager/CEO or Designee

Brief Description of Meeting/Event Value to EVWD

MET WITH GM FOR MONTHLY UPDATE OF EVWD



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6 Meeting Date: 10 / 21 / 2024
Event Description: ASBCSD

Brief Description of Meeting/Event Value to EVWD

REGULAR MONTHLY MEETING GUEST SPEAKER FROM SBVWD

7 Meeting Date: 10 / 22 / 2024
Event Description: Chamber of Commerce Event

Brief Description of Meeting/Event Value to EVWD

REGULAR MONTHLY BUSINESS MEETING

8 Meeting Date: 10 / 23 / 2024
Event Description: Regular Board Meeting

Brief Description of Meeting/Event Value to EVWD

9 Meeting Date: _____
Event Description: _____

Brief Description of Meeting/Event Value to EVWD

10 Meeting Date: _____
Event Description: _____

Brief Description of Meeting/Event Value to EVWD