

REQUEST FOR REIMBURSEMENT OF TRAVEL AND CONFERENCE EXPENSES

TO: _____
(Payee)

(Mailing Address)

(School District)

DATE	EXPLANATION	POINT OF ORIGIN	DESTINATION	POINT OF RETURN	PRIVATE CAR TRAVEL		
					ACTUAL MILEAGE	RATE	TOTAL AMOUNT
							\$
							\$
							\$

COST OF MEALS			COST OF HOTEL	COST OF MISCELLANEOUS EXPENSES (Tolls, Conference Fees, etc.)		TOTAL AMOUNT
Breakfast	Lunch	Dinner		EXPLANATION	AMOUNT	
\$	\$	\$	\$	\$	\$	\$
						\$
						\$
						\$

GRAND TOTAL REQUESTED \$ _____

NOTE
NO REIMBURSEMENT WILL BE ISSUED UNLESS
Copies of paid vendor's itemized receipts for meals/hotel/miscellaneous AND certificate and/or verification of attendance for the conference/workshop are attached

I certify that the above account is just and true in all respects and that all expenditures included were made under prior authority.

PAYEE: _____
(Signature)

(Date)

I certify that the travel was authorized to and from the point stated, that the account therein claimed is just and reasonable, and that all itemized receipts are attached.

SUPERVISOR: _____
(Signature)

(Date)