

CONFERENCE REQUEST AND EXPENSE CLAIM FOR OVERNIGHT TRAVEL

Name: _____ School: _____

Conference: _____ Purpose: _____

Location: _____ Dates of Trip: _____

Budget Category: _____

EXPENSE CLAIM FOR OVERNIGHT TRAVEL

Receipts MUST BE ATTACHED for lodging, registration, and transportation.

** Proof of lodging is needed if district is not covering the cost.*

Per Diem to be allocated as follows:

Daily allowance for breakfast \$ 12.00
Daily allowance for lunch \$ 14.00
Daily allowance for dinner \$ 24.00

Please provide conference itinerary with advance/reimbursement request.

No allowance is paid if any meal is provided as part of the conference, or is provided by the hotel.

Date	Meals: Breakfast	Lunch	Dinner	Lodging	Transportation	Miscellaneous: Amount	Specify
TOTALS							

I hereby certify that the expenses claimed hereon are actual; that they were expended in the performance of official District business and that no prior claim has been made of any portion thereof.

Total Expenses: _____

Less Advance: _____

Due Employee: _____

Due District: _____

Claimant's Signature: _____

Date: _____

Approved by: _____

Date: _____

Effective Date: 7/1/2018