

Request for *Reimbursement* of Conference/Workshop/Projects

Expense sheet must be in the Superintendent's Office by the last day of the month in order to be paid the following month. *This request must be accompanied by a written report of the conference, workshop, project content/activities and any and all receipts for reimbursement.*

Name: _____ Date Submitted: _____ / _____ / _____

Conference/Workshop/Project: _____

Location: _____

Dates for Conference/Workshop/Project: _____

Hours in Attendance: _____

- Please check what you are requesting:**
- Conference/Workshop Expense
 CompTime Points Comp Time & Points No Comp Time/No Points

Actual Costs: Please attach all receipts.

Total Amounts

Mileage _____ @ _____ per mile: _____

Mode of Travel: Automobile School Van Airline

Room Charge(s) \$_____ per night for _____ nights: _____

Meals: Breakfast(s) _____ x \$7.00

Lunch(es) _____ x \$10.00

Dinner(s) _____ x \$15.00

Total Meals: _____

Conference fees: _____

(If you paid for the conference, please attached copy of the registration form)

Other _____
(explain)

Total: _____

Approval: _____
Principal

Date: _____

Approval: _____
Superintendent

Date: _____