



POST-TRAVEL CONFERENCE REQUEST FORM

In accordance with Board Bylaw 1162 and Board Policy 5330, this form must be completed and documentation must be attached to verify conference travel expenses and to receive reimbursement, if eligible.

Name: _____ Date: _____

Name of Conference/Meeting: _____

Date(s): _____ Place: _____
City/State

ACTUAL EXPENSES

Registration Fee: \$ _____

Mileage: _____ \$ _____
(paid at approved IRS rate)

Lodging: \$ _____

Meals: \$ _____

Airfare: \$ _____

Car Rental: \$ _____

Other (include explanation): \$ _____

TOTAL EXPENSES: \$ _____

Request submitted by: _____

Request approved by: _____

Account Number: _____

NOTE: All back-up documentation (receipts) MUST be attached.