



CONFERENCE / WORKSHOP REQUEST & REIMBURSEMENT CLAIM

This Request Must Receive Prior Program Manager Approval.
Complete The Actual Expenses For Claim Reimbursement Upon Your Return.

Name: _____ Site/Dept: _____ Date: _____
Address: _____

Conference/Workshop Name: _____

Benefit: _____
Destination: _____

Departure Date/Time: _____ Return Date/Time: _____ Number Of Travel Days: _____

<u>Estimated Expenses</u>	<u>Estimate</u>	<u>To Be Reimbursed</u>
Substitute: Number Of Days _____ @ \$ _____ Per Day	\$ _____	\$ _____
Accommodations: Number Of Nights _____ @ \$ _____ Per Night	\$ _____	\$ _____
Food/Incidentals: Receipts Required	\$ _____	\$ _____
Per Diems: Breakfast \$ _____, Lunch \$ _____, Dinner \$ _____	\$ _____	\$ _____

Receipts Must Be Taped On A Sheet Of 8.5 x 11 Paper And Attached To This Form

Transportation: Number Of Miles _____ @ \$ _____ Per Mile	\$ _____	\$ _____
Airline Tickets: Name Of Airline _____	\$ _____	\$ _____
Registration: Attach Copy Of Registration Form Or Purchase Order Purchase Order # _____	\$ _____	\$ _____
Other: Specify _____	\$ _____	\$ _____
Deduct Per Diem Amount For Meals Included In Registration	(\$ _____)	(\$ _____)
TOTAL EXPENSES	\$ _____	\$ _____

FUND	RESOURCE	PROJ YEAR	OBJECT	SUB OBJ	GOAL	FUNCTION	COST CENTER	SITE	MGR	TOTAL

Prior To Travel

Sign & Date: _____
(Employee)

Supervisor Sign & Date: _____

Program Mgr Sign & Date: _____

After Travel

Sign & Date: _____
(Employee)

Supervisor Sign & Date: _____

Program Mgr Sign & Date: _____



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Instructions

- 76-GUS Conference/Workshop Request & Reimbursement Claim must be approved **BEFORE** making any final travel arrangements.
- The top section, estimate and account number should be completed and approval signatures obtained.
- The form is to be signed by the employee, the employee's supervisor, and the program manager if the trip is funded by a categorical program before the travel date.
- Out-Of-State travel must be approved (signed) by the Superintendent.
- The ORIGINAL form is then to remain with the originator until **AFTER** the trip has been completed and the actual costs are known.
- Submit a COPY of the request to Human Resources if a substitute is required.
- Conference registrations, airline tickets and hotel costs may be prepaid:

Revolving fund depending on time frame

If the vendor accepts purchase orders, follow the procedure for entering a requisition in QSS and a purchase order will be generated and sent to the vendor with approval to pay.

If the vendor does not accept purchase orders, complete a 134-GUS Direct Payment Request.

- Meal Reimbursement (Receipts must be attached): Rate Per 24-Hour Period (7am to 7pm): The District will reimburse the State per diem amount (currently \$16 per 24-hour period). Per Diem rates are breakfast - \$5, lunch - \$5 and dinner - \$6. Dates & times do matter on receipts. Please do not cut receipts. Alcoholic beverages are not reimbursable. Meals included in conference registration costs will be deducted from meal reimbursement.
- Transportation: Reimbursement for travel will be reimbursed for mileage or airfare (whichever is less). Reimbursement of travel must be the LESSOR of economy air fare or mileage reimbursement. Car rental must be approved in advance.



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- Within three (3) days of RETURN from travel, complete the reimbursement claim ***“to be reimbursed”*** column and obtain approval signatures. Submit the completed form to Business Services Accounts Payable for reimbursement. **RECEIPTS MUST BE INCLUDED.** Reimbursement will be paid within 2 weeks of receipt in the Business Department.
- Flyer from conference must be attached to reimbursement claim. Registration form does not meet this requirement.