

**CLAIM VOUCHER FOR CONFERENCE ATENDANCE**

TO BE SUBMITTED WITHIN ONE MONTH OF THE CONFERENCE ACCOMPANIED BY ALL ORIGINAL RECEIPTS, ORIGINAL CHECKS, CONFERENCE REPORT, AND ORIGINAL CONFERENCE APPROVAL FORM

NAME OF ATTENDEE: \_\_\_\_\_ SCHOOL \_\_\_\_\_

CONFERENCE: \_\_\_\_\_

CONFERENCE DATE(S) \_\_\_\_\_

AMOUNT OF EXPENSES ESTIMATED: \$ \_\_\_\_\_ AMOUNT OF ESTIMATED EXPENSES APPROVED: \$ \_\_\_\_\_

	<u>ESTIMATED EXPENSES</u>	<u>PRE-PAID EXPENSES</u>	<u>REIMBURSABLE EXPENSES</u>
Mileage: _____ miles @ 0.51 cents/mile	\$ _____	\$ _____	\$ _____
Tolls	_____	_____	_____
Registration Fee	_____	_____	_____
Hotel	_____	_____	_____
Transportation (air/ground)	_____	_____	_____
Meals	_____	_____	_____
Other Expenses (list individually & explain)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<b>TOTAL EXPENSES</b>	\$ _____	\$ _____	\$ _____
<b>TOTAL AMOUNT OF CLAIM</b>			\$ _____
<b>AMOUNT OVER (UNDER) APPROVED ESTIMATE:</b>	\$ _____		

_____ Amount of Claim	_____ Signature of Claimant	_____ Date
APPROVAL: _____ Principal/Administrator	_____ Assistant Superintendent for Business	

Distribution:
_____ Employee to Principal/Administrator
_____ Principal/Administrator to Asst. Supt. For Business