EXPENSE REPORT

for all **Conference** events, in-services, & meetings

Name_____ Date_____

Name of School _____

Event_____

Place_____ Date of Event_____

Miles_____ @ _____ per mile Total $_____

Per Diem Allowance_____ day(s) Total $_____
(Overnight trips only)

Lodging_____ Total $_____
(**Attach all necessary ORIGINAL receipts**)

Miscellaneous_____ Total $_____
(**Attach all necessary ORIGINAL receipts**)

Total Reimbursable Expense $_____

Comments:

Education Department Authorization _____

Payroll Authorization _____