

King William County Public Schools
Conference Expense Reimbursement Form

REV. 02/17

Employee Name: _____ School: _____

Name of Conference: _____

Date(s):							
Travel From Location							
Travel To Location							

LODGING (Room costs only, itemize meals & incidentals below)

Lodging Total								\$ -
Less: Items directly billed to school division								\$ -
Lodging Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

MEALS, including tips

*No reimbursement is allowed for hosted business meals and meals otherwise provided.
 This includes meals provided at a conference or seminar, meals purchased for you by another individual, etc.*

Breakfast	Maximum = \$7							\$ -
Lunch	Maximum = \$11							\$ -
Dinner	Maximum = \$18							\$ -
Less: Non-reimbursables (alcohol, etc)								\$ -
Meals total		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Please attach ITEMIZED receipts for meals **NO TIPS OVER 20% WILL BE REIMBURSED**

TRANSPORTATION

Airfare (including service fees)								\$ -
Auto Rental								\$ -
Rental Car Gas								\$ -
Train, Bus, Taxi, Limo								\$ -
Tolls/Parking								\$ -
Transportation total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

MISCELLANEOUS

Conference/Seminar Registration/Fees								\$ -
Other _____								\$ -
Other _____								\$ -
Less: Items directly billed to school division								\$ -
Misc. total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL EXPENSES	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

DETAILS, ADDITIONAL EXPLANATIONS AND OTHER NOTES

Other Additional Explanations and Notes:

Payee Certification & Approvals

I certify that these charges are accurate and that I am not claiming reimbursement from another source.

Payee Signature _____ Date _____

Principal _____ Date _____ Assistant Superintendent _____ Date _____