



Blackhawk School District

Conference Expense/Reimbursement Voucher

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Please forward a hard copy of this document to your building principal.

Name: _____ Dates: From _____ To _____

Event: _____ Location: _____

Please list each individual date across the top and list all expenses incurred on each date below.

Please staple all receipts to this form.

You will be reimbursed for all expenditures listed below upon submission and approval of this form.

Dates _____ _____ _____ _____ _____

Travel Expenses (circle one)

Air Fare Bus _____ _____ _____ _____

Automobile Expenses

of miles traveled: _____ _____ _____ _____ _____

of miles x \$.655/mile: \$ _____ \$ _____ \$ _____ \$ _____ \$ _____

Parking costs: _____ _____ _____ _____ _____

Tolls: _____ _____ _____ _____ _____

Taxi costs: _____ _____ _____ _____ _____

Lodging Expenses

Include tax and tip: _____ _____ _____ _____ _____

Meals

Include tax and tip: _____ _____ _____ _____ _____

Other

Attach description: _____ _____ _____ _____ _____

TOTAL: _____ _____ _____ _____ _____

Amount of Advance Payment: _____

Net Amount Payable to BSD: _____

Employee signature: _____ Date: _____

Building Principal signature: _____ Date: _____ ASN#: _____

***Building office: Please forward this document to the Superintendent's Secretary at District Office.**