



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 \$.70/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.**

Revised 01/2024