

Person requesting conference approval (Print or Type): Copy for your records	Name:		PO#:	
	Home Address:			
	Home School:			
Conference Title:		Conf. Date(s):		
Conference Location/Address:				
Reason for Conference Request:				
How will you share information gained with others?				

Before attending the conference, complete the top (blue) portion of the form and submit for approval. Complete all est. costs areas. Funding dept. provides the budget code and PO if applicable. After the conference complete the bottom (maroon) portion with the actual costs supported by receipts. Fill in white areas.

Budget Code(s):		Funding Dept(s):	
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**Estimated Expenses *Before* Attending Conference - fill in all est. cost blanks (use N/A or 0 if no expense)**

TRAVEL All white spaces should be filled. Add PO numbers if applicable.	Estimated Cost	PO Number(s)
<b>Air Fare:</b>		
<b>Mileage:</b> Round Trip Auto miles : <input type="text"/> x <input type="text"/>		
(Google maps or MapQuest directions for miles) # miles x current mileage rate:		
<b>Estimate Parking/Tolls/Taxi Etc.:</b>		
<b>Lodging:</b> Cost of stay x number of days: <input type="text"/> x <input type="text"/>		
<b>Meals:</b> *Per Diem rate x number of days: <input type="text"/> x <input type="text"/>		
(*Per Diem rates for conference locations can be found online at <a href="http://www.gsa.gov/portal/category/21287">http://www.gsa.gov/portal/category/21287</a> )		
<b>Registration:</b>		
<b>Total Estimated Reimbursement Request:</b> (Exclude funds in POs)		

Print the form at this point for signatures.

Employee Signature:		Date:	
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**Conference Approval Signatures – please verify that all est. costs and budget codes are entered before signing.**

Standards Leader Signature:		Date:	
Prin./Immediate Supv. Signature:		Date:	
Supt./Asst. Supt./Designee Signature:		Date:	
Purchasing Agent:		Date:	

**Actual Expenses *After* Attending Conference** Each expense must be supported by an itemized receipt.

	Actual Cost	Receipt ✓
(Attach receipt) <b>Air Fare:</b>		
(Attach internet directions) <b>Roundtrip Auto Mileage:</b>		
(Attach receipt) <b>Parking/Tolls/Taxi Etc:</b>		
(Attach receipt) <b>Lodging:</b>		
(Itemized receipts for up to the IRS rate must be attached for reimbursement. Alcoholic beverages will not be reimbursed. Please redact before submitting.) <b>Meals:</b>		
(Attach receipt) <b>Registration:</b>		
<b>Total Reimbursement:</b>		

I hereby certify that the above statement is just and correct and that the amount stated herein is due. (sign below)

Employee Signature:		Date:	
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I, the Principal/Immediate Supervisor, certify that this account has been examined and, to the best of my knowledge and belief, the amounts claimed were necessary for the performance of the claimant's assignments. (sign below)

Recommended for Payment:		Date:	
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Immediate Supervisor Signature

Approval of Payment:		Date:	
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Claims Auditor

➤ Please print in Black and White to preserve color ink.

**PITTSFORD CENTRAL SCHOOL DISTRICT  
TRAVEL REIMBURSEMENT GUIDELINES**

**THE OFFICIAL NAME OF THE CONFERENCE MUST APPEAR ON ALL  
REQUEST FOR CONFERENCE ATTENDANCE FORMS**

**ROUTINE MILEAGE:**

All routine requests for mileage reimbursement are made on the Mileage Claim Form (green). Such travel is the regular or routine travel required to fulfill the responsibilities of the position. Employee completes form, attaches tolls, itemized receipts, etc., and submits to immediate supervisor for approval. On approving the mileage form, the immediate supervisor sends the form to the Purchasing Agent for approval. Upon approval, the Purchasing Agent sends the form to Accounts Payable for reimbursement.

**EACH EMPLOYEE CLAIMS HIS OR HER OWN INDIVIDUAL EXPENSES**

1. **AIR TRAVEL:** Attach airline receipt to the "Request for Conference Attendance/Reimbursement Claim" form. Only the amount for coach or tourist class is reimbursed.
2. **AUTO TRAVEL:** Indicate the number of miles travelled and multiply by the current Board approved rate. Attach toll and parking receipts to conference form. Auto travel may be reimbursed to a maximum of the equivalent tourist (coach) class airfare. A means of travel within and around a convention city when the employee is in that city for an extended period of time as long as such travel does not interfere with the employee participating in the conference schedule shall be considered a valid expense of the employee's attendance at the conference.
3. **HOUSING:** Attach receipt. Receipt should show the rate per day. Multiply rate per day times the number of nights lodged. If spouse accompanies a staff member, the single rate should be asked for and placed on the billing. Only the single rate may be claimed. The Purchasing Agent will provide the employee with an Exemption Certificate For Tax on Occupancy of Hotel if such housing is in New York State. Taxes on housing outside New York State may be reimbursed. In the interest of efficiency, the employee may stay in conference hotels that provide quick and ready access to convention and meeting halls and other conference events.
4. **MEALS and INCIDENTAL EXPENSES:** Reimbursed as per the Maximum Federal Per Diem Rates published schedule. Itemized receipts for meals must be submitted. Per Diem is for 3 meals and is NOT used when meals are included in the registration. To find the total reimbursement for food, multiply the number of full days you attended the conference by the per diem rate. If you attend a **partial day** conference with less than three meals, take **20%** of the daily per diem rate for breakfast, **30%** for lunch, or **50%** for dinner. Incidental expenses include any expenses not listed above. One telephone call per day to employee's home of a reasonable duration shall be considered a valid expense of the employee's attendance at the conference.
5. **MATERIALS:** Reimbursement for materials may **not** be made on the Request for Conference Attendance form. Any purchases for materials must be made through the purchase order process.
6. **REGISTRATION:** Attach receipt or cancelled check made out to conference.
7. **MISCELLANEOUS:** Describe all claimed items.

**NON REIMBURSABLE EXPENSES:**

1. Those of a purely personal nature.
2. Sales or other taxes from which the District is exempt unless those taxes are paid on meal purchases.
3. Alcoholic beverages