

CERTIFICATED PROFESSIONAL DEVELOPMENT REIMBURSEMENT FORM

Instructions
 This form must be used for all claims for reimbursements of travel related expenditures. Employee must sign voucher and return within 10 days of trip.
 Receipts for "Other Expense" must be attached if item is more than \$10.
 Do not claim reimbursement for meals provided as part of a conference fee.
 *Meal reimbursement is taxable if there is no overnight stay.

Name: _____
 Address: _____

****You Must Actually Incur a Meal Expense for each meal claimed**

D A T E	Trip Information		Destination and Purpose of Trip	MEALS (per diem, receipts not necessary)					Receipt Required Lodging	Personal Vehicle			Other Expenses Per Detail Below	Grand Total
	TIME TRIP BEGAN	TIME TRIP ENDED		Brkfst 6:30a	Lunch 12:00p	Dinner 6:30p	Taxable Meals Check if Yes *	Subtotal		Miles Driven	Reimb Rate Per Mile	Mileage Reimb		
														\$
														\$
														\$
														\$
														\$
														\$
														\$
													Total Reimbursable Expenses	
													Deductions	
													Total due Employee	

Detail Of Other Expense			
Date	Paid To	For	Amount
Total of Other Expense			

Substitute Days required: _____
\$131 per day
\$65.5 1/2 day TOTAL: _____

Employee Certification

I hereby certify under penalty of perjury that this is a true and correct claim for necessary expenses incurred by me and that no payment has been received by me on account thereof.

Signature _____ Date _____

Business Office
 Approval for payment

Signature _____
 Date _____