

CONFERENCE/TRAVEL REQUEST

- 1. Include conference brochure, registration form, Google Map and any other applicable documents.
- $2. \ \ Remember to obtain itemized receipts for all expenses, NO \ receipts \ required for meals.$
- 3. All forms must be submitted 30 days prior to conference date.

Primary Building:													
Name:								Confer	ence [Date:			
Name of Conference	ce:							Locatio	n:				
Rationale for Confe	erence	2:					,						
Conference Registr	ation	Fees:											
Conference Fundin													
Substitute Needed:		Yes □	No □										
Substitute Funding	Acco	unt Number:											
_													
Mileage Rate	Number of Miles		Total Est	5									
.67													
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Estimated Meals:													
For Conferences outsid	de Sagir	naw County and no	ot provided b	y the co	nference.	Day be	fore meal	s only re	imburs	ed for out of			
state conferences. Plea	se see	meal allowance gu	uidelines for	addition	nal guidano	ce.							
Number of Breakfa	sts: (i	f leaving before	6 am or o	vernight)						\$10.00			
Number of Lunches	s: (if n	ot provided by	conference	e)						\$15.00			
Number of Dinners	: (if re	eturning after 7	pm or ove	rnight)						\$21.00			
Total:													
Numeric fields requ	uire a	Ω if N/Δ							.		//////A		
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