Los Banos Unified School District

LBTA-Travel Claim Form

						VENDOR NUMBER:			
Employee						Site			
Conference						Date(s)			
							Estimated	Actual	PAID
Registration									
Lodging									
Air Fare									
Miles		X Rate	$0.560			TOTAL =			

PLEASE INCLUDE PROOF OF MILEAGE

MEALS AND OTHER

DATE	BREAKFAST $16.00	LUNCH $20.00	DINNER $32.00	PARKING	TAXI UBER	MISC.	Estimated	TOTAL COST	

Note: Receipts are required to be reimbursed for parking, taxi and miscellaneous expenses.

			LESS: SUBSTITUTE $120.00 DAILY:			
REQUIRED SIGNATURES			SUBTOTAL:			
LBTA Signature			LBTA APPROVED REIMB:			
LBTA Signature			TOTAL REIMBURSEMENT			

REQUIRED SIGNATURES		
PRINCIPAL		
ASSOCIATION		
DISTRICT ADMIN		
FINANCE ADMIN		
ACCOUNT CODE #		

I CERTIFY THAT THE ABOVE CLAIM IS A CORRECT ACCOUNTING OF EXPENDITURES FOR THE CONFERENCE INDICATED

EMPLOYEE'S SIGNATURE DATE