



## Request for Professional Meeting Attendance

**Complete before meeting.** Please submit to your immediate supervisor at least 10 days prior to meeting date. Upon approval, the form will be returned to you for completion of the Reimbursement Expense Statement section.

Purchase Order No. \_\_\_\_\_

Staff Member \_\_\_\_\_ Date \_\_\_\_\_

Title of Meeting \_\_\_\_\_

Nature/Purpose of Meeting \_\_\_\_\_

Meeting Location \_\_\_\_\_

Date(s) of Authorized Attendance \_\_\_\_\_

### Requested Expenses

Registration \_\_\_\_\_ Lodging \_\_\_\_\_

Travel \_\_\_\_\_ Meals \_\_\_\_\_  
 (airfare, taxi, car rental, shuttle parking, etc.)

Total Requested \_\_\_\_\_

**Any mileage should be submitted on a monthly mileage form.**

Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Division Head/ESC Agent \_\_\_\_\_ Date \_\_\_\_\_

### Reimbursement Expense Statement

**Complete this section after meeting.** Itemized expenses: Attach receipted bill for lodging, registration and travel expenses. Allowable per diem: \$60 per day for meals at meetings requiring an overnight stay. State and local meetings not requiring an overnight stay will be reimbursed at \$15 maximum for lunch. **Any mileage should be submitted on a monthly mileage form.**

	Actual Expenses Incurred	Reimbursable Expenses	Amount Not Reimbursed*
Registration	_____	_____	_____
Lodging	_____	_____	_____
Meals	_____	_____	_____
Air Fare	_____	_____	_____
Other (taxi, car service, car rental, etc)	_____	_____	_____
<b>Grand Total</b>	_____	_____	_____

Staff Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Division Head/ESC Agent \_\_\_\_\_ Date \_\_\_\_\_

\* expenses that may be submitted to the IRS for tax purposes