## CONFERENCE TRAVEL REI MBURSEMENT FORM

(Submit after conference)

## Out of State Travel

To obtain your mileage and meal per diem reimbursement, complete this form, sign and date after the event verifying your attendance, attach form along with your hotel folio to the Purchase Order and send to Accounts Payable. (NOTE:Hotel lodging can still be paid in advance; however, hotel folio must be attached to the PO listed below.)

I certify my attendance to the as stated in the attached PO\#

## conference located in and am requesting reimbursement for the following:

MILEAGE: Number of Miles @ . 535 cents per mi (copy of map attached) Mileage Total \$ 0.00
MEALS: Record meals not provided by conference. Go to https://www.gsa.gov/portal/category/100120 select State look for city/county, to the far right under M\&IE find daily amount. Below input the date and find the daily amount on the chart below and enter the corresponding meal amount

| Date | Breakfast <br> travel begins on or before 7:00 am | Lunch <br> travel begins on or before 11:00 am, or ends on or after 11:00 am | Dinner <br> travel begins on or before 7:00 pm, or ends on or after 7:00 pm |
| :---: | :---: | :---: | :---: |
|  | None | None | None |
|  | None | None | None |
|  | None | None | None |
|  | None | None | None |
|  | None | None | None |


| M\&IE Total | Breakfast | Lunch | Dinner |
| :--- | :---: | :---: | :---: |
| $\$ 51$ | $\$ 11$ | $\$ 12$ | $\$ 23$ |
| $\$ 54$ | $\$ 12$ | $\$ 13$ | $\$ 24$ |
| $\$ 59$ | $\$ 13$ | $\$ 15$ | $\$ 26$ |
| $\$ 64$ | $\$ 15$ | $\$ 16$ | $\$ 28$ |
| $\$ 69$ | $\$ 16$ | $\$ 17$ | $\$ 31$ |
| $\$ 74$ | $\$ 17$ | $\$ 18$ | $\$ 34$ |

OTHER: Other travel related expenses (must provide original receipt or included on Folio)
Description (list all other expenses)
Total Cost
0.00
0.00

Employee Signature

## DATE

DATE
NOTE: Board approval is required for all out-of-state conferences for attendees seeking reimbursement.

