

**BERNARDS TOWNSHIP PUBLIC SCHOOLS
REPORT OF CONFERENCE ATTENDANCE**

Employee Name:	
Name of Conference:	
Dates of Attendance:	

SUMMARY OF CONFERENCE

Request for Expense Reimbursement (receipts attached)

Registration:	
Mileage/Tolls/Parking: <i>(Attach copy of Registration & Insurance Card)</i>	
Meals <i>(attach www.gsa.gov regional rates):</i>	
Hotel <i>(attach www.gsa.gov regional rates):</i>	
Total:	

Attendee Signature:		Date:
Superintendent Signature:		Date:
Business Adm. Signature:		Date:

Checklist:

- Purchase Order attached
- Receipts attached
- Copy of Pre-approval of Travel Form (administrator & superintendent's signatures)