

**GRAND BLANC COMMUNITY SCHOOLS
CERTIFICATION OF EXPENSES**

NAME: _____ DATE: _____

TITLE OF CONFERENCE: _____

LOCATION: _____

DATE(S): INCLUDING TRAVEL TIME: FROM _____ TO _____

BUILDING _____

ITEMIZED EXPENSES		
Mileage _____ Miles x		= \$ _____
Fees _____		= \$ _____
Meals <small style="color: red;">Allocated \$10/Breakfast, \$10/Lunch, \$20/Dinner</small>		= \$ _____
Other _____		= \$ _____
Total		= \$ _____

I certify that the above items are a true accounting of expenses incurred. I have attached the original receipts taped to an 8 ½" x 11" sheet of paper, for each expenditure and a copy of my Authorization for Absence Conference Form.

Employee Signature _____

Approved _____
Bldg. Administrator Signature

Date _____

Approved _____
Asst. Superintendent Signature

Date _____

Charge to Account Number _____

Account Name _____