



CONFERENCE AND TRAVEL REIMBURSEMENT CLAIM HACIENDA LA PUENTE UNIFIED SCHOOL DISTRICT

NAME _____ REQ. NO. _____

HOME ADDRESS _____ JOB TITLE _____

WORK SITE _____ MEETING ATTENDED _____

MEETING DATES(S) _____ MEETING LOCATION _____

REQUESTED REIMBURSEMENT

Registration (if not prepaid, <i>attach receipt</i> verifying registration paid)						\$
Travel	Mileage (Round Trip): _____ miles x .70¢ per mile					\$
	Airplane Ticket (if not prepaid, <i>attach e-ticket or ticket</i>)					\$
Date(s)						
Meals	<i>(Itemized receipt required, cannot exceed maximum amount per meal, one itemized receipt per daily meal)</i>					
Breakfast <small>(\$12 Max)</small>						
Lunch <small>(\$15 Max)</small>						
Dinner <small>(\$28 Max)</small>						
Total <small>(\$55 Max)</small>						\$
Lodging <small>(Attach Receipt)</small>						\$
Other Expenses <small>(Receipts Required)</small>	Rental Car	Parking	Gas	Other		
	\$	\$	\$	\$	Total:	\$
Total Reimbursement Claim						\$
LESS: Travel Advance (<i>Attach Receipts for Expenditure of Advance</i>)						\$
Reimbursement Due Employee/District (circle one)						\$
Budget Account To Pay Reimbursement					Amount Paid From Account	
					\$	
					\$	

Approved Form#1058 Attached
 Itemized Receipts
 Map Quest (if necessary)
 Reviewed By : _____
(Site representative who checked for requested items)

I certify that the above expenses were incurred in the performance of my job responsibilities as an employee or Board of Education member of Hacienda La Puente Unified School District and that each item is a business expenses as defined by the school district and Internal Revenue Service.

Signature of Claimant _____ Date _____

Supervisor's Approval of Claim _____ Date _____

Business Office Approval _____ Date _____

Form #1026 (1/3/2025)

Conference reimbursements are subject to review before being processed. Reimbursement forms must be submitted within 10 workdays following the conference. Forms not submitted in a timely manner may not be paid and paperwork will be returned to the claimant. Distance traveled will be calculated using Mapquest.com. Whiteout is prohibited on mileage form. Any forms that have whiteout will be returned. An original itemized receipt is needed for all meals claimed. An approved Conference Request Form (Form#1058) must be approved prior to any travel/meeting/conference. Only the amounts approved on the Conference Request Form (Form#1058) will be reimbursed. Claims that exceed the approved amount will require administrative approval. Forms missing any required documents will be returned.