



Req/PO # \_\_\_\_\_

Los Alamos Public Schools Travel & Reimbursement Request  
**Less than Overnight Travel**

Name \_\_\_\_\_ School/Dept. \_\_\_\_\_

Name of Conference/Meeting \_\_\_\_\_ Date of Event \_\_\_\_\_  
(Attach agenda or flyer)

Departure Time \_\_\_\_\_ am pm      Return Time \_\_\_\_\_ am pm

**Estimated Costs for Conference and Transportation is paid through Purchasing/Payables  
Purchase Order Required for these Expenses**

<b>Conference Fee</b>			\$
<b>Transportation</b>			
Parking, tolls, etc.			\$
Private Vehicle Mileage	_____ # of Miles	X \$.67 (effective 1-23-25)	\$
<b>Total Estimated Expenses</b>			\$

**Estimated Per Diem for Less than Overnight Travel  
Purchase Order is Not Required for Partial Day Per Diem**

<b>Hours Beyond the Normal Workday:</b>	<input type="checkbox"/> 2 but less than 6    \$12	\$
	<input type="checkbox"/> 6 but less than 12    \$20	
	<input type="checkbox"/> 12 but less than 24    \$30	
<b>Estimated per diem</b>		\$

\_\_\_\_\_  
Traveler Signature/Date\_\_\_\_\_  
Supervisor Signature/Date

**Per Diem for Less than Overnight Travel is paid through Payroll  
Purchase Order is Not Required for Partial Day Per Diem:**

Departure Time _____ Return Time _____	<b>Hours on Travel</b> _____ <b>Less Hours in Normal Workday</b> _____ <b>Hours Beyond the Normal Workday</b> _____	
<b>Choose # Hours Beyond the Normal Workday</b>	<input type="checkbox"/> 2 but less than 6    \$12 <input type="checkbox"/> 6 but less than 12    \$20 <input type="checkbox"/> 12 but less than 24    \$30 <b>This amount submitted to Payroll</b>	\$

**Reimbursement Request for Expenses Paid by Traveler**

	<b>Requested Reimbursement</b>
Conference Fee	\$
Parking	\$
Mileage: _____ miles x \$0.40/mile	\$
<b>TOTAL REIMBURSEMENT REQUEST</b>	\$

\_\_\_\_\_  
Traveler Signature/Date\_\_\_\_\_  
Supervisor Signature/DateB  
e  
f  
o  
r  
e  
  
T  
r  
a  
v  
e  
lA  
f  
t  
e  
r  
  
T  
r  
a  
v  
e  
l