**PLEASANT HILL SCHOOL DISTRICT NO. 1**
36386 Highway 58, Pleasant Hill OR 97455
PHONE: 541 746 9646 FAX: 541 746 2537

# EXPENSE CLAIM

**IN-SERVICE ACTIVITY MUST HAVE BEEN PRE-APPROVED ON IN-SERVICE APPLICATION**
You must **submit the conference agenda** with your expense claim for reimbursement.

**Name** _____

**Activity** _____

**Date(s) of Activity** _____

**Point of Origin:** ❑ Pleasant Hill ❑ Springfield ❑ Eugene

**Departure Date:** _____ **Time:** _____

**Return Date:** _____ **Time:** _____

**Registration Fee:** **$**_____
Attach receipt or copy of cancelled check

**Lodging:** **$**_____
Attach receipt or copy of cancelled check

**Meals:** **$**_____
Per Diem rate = $75/day – adjusted for partial days
This is the most the district will pay. **Attach itemized receipts.***

**Mileage:** _____ X $0.725 / mile = **$**_____

**Other:** **$**_____
Attach receipt or copy of cancelled check

**TOTAL EXPENSES:** **$**_____
The above expenses are connected with my attendance at this activity.

☐ **Conference Agenda Attached**

**CLAIMANT**_____ **DATE** _____

**SUPERVISOR** _____ **DATE** _____

| PHill | Spfld | Eug | Destination |
|---|---|---|---|
| 56 | 46 | 47 | Albany |
| 188 | 180 | 182 | Ashland |
| 128 | 108 | 108 | Astoria |
| 364 | 355 | 359 | Baker City |
| 120 | 110 | 110 | Beaverton |
| 139 | 128 | 132 | Bend |
| 57 | 47 | 43 | Corvallis |
| 26 | 19 | 21 | Cottage Grove |
| 86 | 76 | 73 | Dallas |
| 147 | 139 | 141 | Grants Pass |
| 132 | 122 | 122 | Gresham |
| 184 | 174 | 175 | Hood River |
| 153 | 173 | 173 | Klamath Falls |
| 378 | 372 | 374 | LaGrande |
| 20 | 13 | 6 | Lane ESD |
| 135 | 125 | 125 | Lincoln City |
| 103 | 93 | 89 | McMinnville |
| 175 | 167 | 169 | Medford |
| 79 | 69 | 65 | Monmouth |
| 122 | 114 | 116 | North Bend |
| 367 | 387 | 387 | OR Border E. |
| 128 | 118 | 118 | OR Border N. |
| 201 | 193 | 196 | OR Border S. |
| 330 | 320 | 321 | Pendleton |
| 123 | 113 | 113 | Portland |
| 156 | 143 | 147 | Prineville |
| 138 | 125 | 129 | Redmond |
| 79 | 71 | 74 | Roseburg |
| 77 | 67 | 67 | Salem |
| 185 | 175 | 177 | Seaside |
| 124 | 111 | 115 | Sisters |
| 158 | 137 | 141 | Sunriver |
| 204 | 194 | 194 | The Dalles |

*The district does not pay meal expenses for 1 day events.
There will be no per diem meal reimbursements when meals are provided by the conference.
Rev. 1/26