SWEETWATER UNION HIGH SCHOOL DISTRICT

FINAL CLAIM EXPENSE LOG

2026

PO#_____

EMPLOYEE NAME: _____

SITE: _____ **Vendor #:**_____

Conference Name: _____

Location: _____

City State

Conference Dates: _____

Board Approval Date: _____

Departure Time: _____ **AM/PM**

Approved Amount: _____

Return Time: _____ **AM/PM**

Budget: _____

		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	TOTAL
Fill in Dates of Conf.--->									
REGISTRATION									
HOTEL*									
FOOD	(MAX)								
Breakfast	$ 15.00								
Lunch	$ 20.00								
Dinner	$ 36.00								
Incidentals	$ 5.00								
TOTAL FOOD		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TRANSPORTATION									
Air									
Shuttle, Taxi, etc.									
Train									
Auto _____ miles x	0.76								
Parking (Airport/ Hotel/Conf. location)									
Car Rental									
TOTAL TRANSPORTATION		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

PO# _____

Total Claim	$ 0.00
Minus Cash Advance	
Employee Owes or District Owes	

_____

Employee's Signature

_____

Approved by Principal/Director

_____

Additional Director Signature (i.e. CCR/VAPA/State & Federal)

_____

Approved by Assistant Superintendent

Rev: 1.2026 Mileage Changed from 2025

Reviewed by: Travel@sweetwaterschools.org _____