

# TOWN OF HARVARD

## Expense, Travel and Conference Reimbursement Request

DEPARTMENT: \_\_\_\_\_ DATE: \_\_\_\_\_

### CONFERENCE REIMBURSEMENT INSTRUCTIONS

- 1) Please attach an agenda summary with event dates; required for overnight reimbursement.
- 2) Please attach itemized cash and credit card receipts.
- 3) Do not include non-conference local travel; see bottom section.
- 4) Advance payment by personal credit card not permitted.

DATE: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 PURPOSE/EVENT: \_\_\_\_\_

	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
Date:								
Hotel								\$ -
Registration								\$ -
Breakfast								\$ -
Lunch								\$ -
Dinner								\$ -
Taxi-Limousine								\$ -
Public Transportation								\$ -
Mileage (@ .55 cents)								\$ -
Telephone (Business Only)								\$ -
Parking and Tolls								\$ -
Air Fare								\$ -
Other								\$ -
<b>CONFERENCE SUBTOTAL</b>								<b>\$ -</b>

### EXPENSE REIMBURSEMENT

Vendor:	Purpose:		
	Purpose:	\$	-
Vendor:	Purpose:	\$	-
Vendor:	Purpose:	\$	-
<b>EXPENSE SUBTOTAL</b>			<b>\$ -</b>

### LOCAL TRAVEL REIMBURSEMENT

(for local, non-conference travel only)

Purpose:	Location/Date:	Miles @ .55¢	\$ -
Purpose:	Location/Date:	Miles @ .55¢	\$ -
Purpose:	Location/Date:	Miles @ .55¢	\$ -
Purpose:	Location/Date:	Miles @ .55¢	\$ -
Purpose:	Location/Date:	Miles @ .55¢	\$ -
<b>LOCAL TRAVEL SUBTOTAL</b>			<b>\$ -</b>

**TOTAL REIMBURSEMENT: \$ -**

Signature: \_\_\_\_\_ Approved: \_\_\_\_\_  
Traveler Supervisor