

AURA ELEMENTARY SCHOOL
GLASSBORO, NJ 08028

TRAVEL & CONFERENCE EXPENSES STATEMENT

Name: _____
 Conference: _____
 Location/Address: _____
 Dates Involved: _____

FINAL EXPENSE TABULATIONS
 (Attach all expense receipts, tolls, etc.)

Event - No Overnight

Date	Regist.	Mileage	Tolls	Parking	Other	Total

Event - Overnight

Date	Regist.	Mileage	Tolls	Parking	Hotel	Breakfast	Lunch	Dinner	Total

** Mileage Calculation _____ Miles x _____ Amount Per Mile _____

The above is correct in all particulars, the articles have been furnished or the services rendered as stated therein and no bonus has been given or received on account thereof

 Claimant/Signature

 Date

