



Position: Supt of Schools

Location: Springfield, IL

(to): \_\_\_\_\_ 09/26/25

(to): 09/26/25

Maximum ESTIMATES of expenses for which employee will request reimbursement:

- Special fares for bus and taxi

rate:

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292.60

- Day(s) x

rate:

11

0.00

Submit estimated rates or receipt/confirmation for hotel or motel bill

439.87

170.00

- Maximum (per GSA) per day is authorized for meals and incidentals

## 61st Annual Conference Registration

380.07

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**Total Estimate of Expenses:**

\$1,282.54

Date:

Date:

Upon approval of the conference, it is the staff member's responsibility to officially register for the event using the Building Principal's p-card.

Please submit **TWO** copies.

One will be returned and should be resubmitted when actual conference expenses have been finalized.

**ALSO**, please attach a brief summary about the purpose of attending this conference/meeting and how it will enhance the educational environment for students.