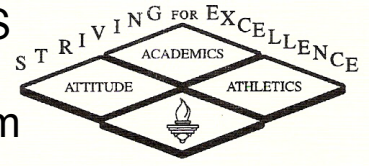


PONTOTOC COUNTY SCHOOLS

Reimbursement / Documentation of Attendance Form



Printed Name: _____ Location: _____

Documentation of Attendance						
Name of Conference or Meeting						
Location of Conference or Meeting						
Date of Conference or Meeting						
Time of Meeting(s) Attended						
Statement of Costs – Travel						
Date	From	To	Number of Miles			
				_____ # miles		
				x .45/mile (DJD)		
				= \$ _____		
				Total Private Vehicle		
Recap						
Statement of Costs				Amount		
Total Private Vehicle						
Total Meals, Lodging & Other Expense						
Grand Total Reimbursement Due						
<p><i>I verify that I attended the above conference or meeting(s) and remained in attendance at the meeting(s).</i></p> <p>Signature: _____ Date: _____</p>						

Please attach all receipts for this trip and copy of agenda or program to the back of this form.