

**LAKWOOD CITY SCHOOL DISTRICT**

Lakewood, Ohio

COMPLETE THIS SIDE OF FORM ONLY **AFTER** ATTENDING PROFESSIONAL CONFERENCE, SCHOOL BUSINESS, UNION BUSINESS, OR IN-SERVICE MEETING. FOR JURY DUTY AND/OR SUBPOENA/SUMMONS, COMPLETE VERIFICATION FORM (TOP SECTION) ONLY.

**VERIFICATION FORM**

SUBMIT A HARD COPY OF THIS FORM WITHIN TWO WEEKS OF THE EVENT/ACTIVITY.

This is to certify that I, \_\_\_\_\_, attended the event/activity entitled \_\_\_\_\_ on \_\_\_\_\_ for which I am **not** requesting reimbursement. (Dates)

\_\_\_\_\_  
Principal or Administrator                      Date                      Applicant                      Date

**EXPENSE VOUCHER**

SUBMIT A HARD COPY OF THIS FORM WITH RECEIPTS WITHIN TWO WEEKS OF THE EVENT/ACTIVITY.

This is to certify that I, \_\_\_\_\_, attended the event/activity entitled \_\_\_\_\_ on \_\_\_\_\_ for which I **am** requesting reimbursement. (Name) (Dates)

**Attach ALL Receipts**

<b>ACTUAL EXPENSES</b>	<u>Actual Costs</u>	<u>If Prepaid - Requisition or Purchase Order No.</u>	<u>Account Fund Coding</u>
Registration	\$		
Total Mileage (Miles x IRS Rate)	\$		
Lodging	\$		
Food	\$		
Parking/Tolls	\$		
Cab/Bus Fare	\$		
Air/Rail Fare	\$		
Car Rental	\$		
Other	\$		
<b>Total</b>	\$		

\_\_\_\_\_  
Principal or Administrator                      Date                      Applicant                      Date

**Authorized for payment:** \_\_\_\_\_  
Assistant Superintendent                      Date