



DATE 08/29/13

Request for CCOC Conference Funds

Name:	Mark Clear		
Purpose:	115 th Annual LWM Conference		
Destination/ Location:	Green Bay, WI		
Travel Dates:	Beginning		Ending
	Date: 10/17/13	Time: 8 am	Date: 10/18/13 Time: 5 pm

ESTIMATED COSTS	MODE OF TRANSPORTATION
LODGING Conf Hotel? Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> \$ 150.00	CITY CAR #
MEALS (APM 1-5 Pg 7) \$ 0.00	PERSONAL CAR <input checked="" type="checkbox"/>
TRAVEL* \$ 153.57	AIRPLANE <input type="checkbox"/>
REGISTRATION \$ 200.00	BUS <input type="checkbox"/>
OTHER \$	OTHER <input type="checkbox"/>
TOTAL \$ 503.57	

Travel should include all Transportation costs (including airfare, car rental, taxi fares, personal vehicle mileage cost estimate & gas)

NOTE:

- ◆ **LODGING – ALWAYS ASK FOR GOVERNMENT ROOM AND NO TAX PRIVILEGE OF A MUNICIPALITY**
- ◆ **ACTUAL EXPENSES SHOULD BE REPORTED UPON RETURN ON TRIP SETTLEMENT WITH ALL RECEIPTS ATTACHED (Including Meals/ Taxis/ Gas). INDICATE WHAT HAS BEEN PAID WITH A CREDIT CARD AND ATTACH COPY OF RECEIPTS TO SETTLEMENT IF RECEIPT IS NOT ALREADY ATTACHED TO ABSENCE FORM (Hotel/ Registration/ Airfare)**
- ◆ **BY SIGNING THIS FORM, I ACKNOWLEDGE THAT I AM AWARE OF AND AGREE TO THE CONDITIONS/RULES FOR TRAVEL FOR CITY BUSINESS CONTAINED IN APM 1-5.**

CCOC Approved Date: