

Travel Expense Report Checklist

1. Request Name
(Name of Event/Conference/Meeting)

2. Trip Start Date:
(Date of Departure)

3. Trip End Date:
(Date of Return)

4. Departure City:

5. Main Destination City:

6. Main Destination:
(Country/Region)

7. Booking Type
(Select One)

- ☐ District-Paid Using P-Card or PO
☐ Self-Paid Requesting Reimbursement
☐ District-Paid using Concur Travel Booking

8. Travel Destination
(Select One)

- ☐ Local (Less than 30 Miles)
☐ Instate
☐ Out-of-State
☐ International

9. What is the purpose of this trip?
(Select One)

- ☐ Professional Development
☐ Curriculum Development
☐ Award Recipient
☐ Presenter
☐ Instructional Planning
☐ Research
☐ Field Study
☐ Other (explain):

10. Freeze Justification
(Select One)

- ☐ Award Ceremony Recipient/Participant
☐ Chaperone Reimbursement
☐ Grant Requirement
☐ Legislative Meeting/Purpose
☐ Mandatory Training/Certification
☐ Non-Mandatory Training/Certification
☐ Other (explain):

Travel Expenses

☐	Conference Fee		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
☐	Seminar/Course Fee		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
☐	Hotel		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
		☐ LAUSD District Paid P-Card/PO	
	* Check-In Date:		
	* Check-Out Date:		
	* Location of the Hotel: (City/State)		
	* <u>Is the hotel less than \$400/night including taxes and fees?</u>		
☐	Air Ticket		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
	* From (Airport):		
	* To (Airport):		
	* Airline:		
☐	Baggage Fees		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
☐	Parking		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
	* Parking Vendor Name:		
☐	Taxi		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
	* Taxi Vendor Name: (Lyft, Uber, etc.)		
☐	Train		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO
	* Train Vendor Name: (AmTrak, Metro, etc.)		
☐	Car Rental		
	\$	☐ Self-Paid	☐ LAUSD District Paid P-Card/PO

Travel Expenses (Cont.)

☐	Fuel (Car Rentals Only)		
	\$	☐ <i>Self-Paid</i>	☐ <i>LAUSD District Paid P-Card/PO</i>
☐	Personal Car Mileage		
	* Distance:	☐ <i>Self-Paid</i>	☐ <i>LAUSD District Paid P-Card/PO</i>
☐	Per Diem		
	* Total # of Days of Trip:		
	* # of Half Days:		
	* # of Full Days:		
	* # of Meals Provided by Vendor or Hotel: (Lunch & Dinner Only)		
☐	Sub Teacher Costs		
	* # of Days Required:		
☐	Miscellaneous Expense		
	\$	☐ <i>Self-Paid</i>	☐ <i>LAUSD District Paid P-Card/PO</i>
	* Description of misc. expense:		