

**HARDYSTON TOWNSHIP PUBLIC SCHOOLS  
FORM TO REQUEST PAYMENT AFTER CONFERENCE/WORKSHOP**

Name: \_\_\_\_\_

Name of Conference/workshop: \_\_\_\_\_

Date of Conference: \_\_\_\_\_

Location: \_\_\_\_\_

What did I learn from Conference/Workshop?

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How will I use what I have learned?

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Any other information you would like to share or attach, please do so.

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**Please "attach" the following items:**

\_\_\_\_\_ Proof of attendance (certificate, CEU credits, agenda, or name badge)

\_\_\_\_\_ Mileage to and from (check one)     Middle School     Elementary School  
@NJ OMB rate - \$.35 per mile     Home if shorter distance

\_\_\_\_\_ Copy of "Mapquest" or actual odometer mileage

\_\_\_\_\_ Proof of expenses (copy of cancelled check, credit card statement, or invoice)

VENDOR DECLARATION: I do solemnly declare and certify that under the penalties of the law that the within bill is correct in all its particulars; that the goods or services itemized in the above have been delivered or rendered; that no bonus has been given or received by any person or persons within the knowledge of the above claim; and that the same is correct and true, and the amount therein stated is justly due and owing and that amount charged is a reasonable one.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NO REIMBURSEMENT WITHOUT ALL MATERIALS RECEIVED  
Please submit to the Business Office as soon as possible  
upon return from the conference/workshop**

**Attention!! To be reimbursed for travel you must submit unredacted photocopies of your driver's license and current auto insurance card.**