

Attendance at Conference

GSA Meals and Incidental Expenses Worksheet

The attached GSA Meals and Incidental Expenses Worksheet is to be completed and submitted with the purchase order for reimbursement of all meals and incidental expenses for the travel event.

The expenses to be reimbursed cannot exceed the Federal Per Diem Rates for the travel location as noted in www.gsa.gov.

GSA Meals and Incidental Expense (M&IE) Breakdown Overnight Travel -- Worksheet

Name of Employee _____

Destination: _____

Date(s) of Event: _____

A. Date: _____				
	<u>Meal/Expense</u>	<u>Allowance</u>	<u>Expenditure</u>	<u>Reimbursement</u>
	Breakfast:	_____	_____	_____
	Lunch:	_____	_____	_____
	Dinner:	_____	_____	_____
	Incidental:	_____	_____	_____
	(A) *Total:	_____		Total \$ _____
B. Date: _____				
	<u>Meal/Expense</u>	<u>Allowance</u>	<u>Expenditure</u>	<u>Reimbursement</u>
	Breakfast:	_____	_____	_____
	Lunch:	_____	_____	_____
	Dinner:	_____	_____	_____
	Incidental:	_____	_____	_____
	(B) *Total:	_____		Total \$ _____
C. Date: _____				
	<u>Meal/Expense</u>	<u>Allowance</u>	<u>Expenditure</u>	<u>Reimbursement</u>
	Breakfast:	_____	_____	_____
	Lunch:	_____	_____	_____
	Dinner:	_____	_____	_____
	Incidental:	_____	_____	_____
	(C) *Total:	_____		Total \$ _____

Travel Days -- 75% Rate

Please Note: The GSA Meals and Incidental Expense Rates are for actual days spent at the travel event. On days traveling to the event (first day) and traveling from the event (last day), employees are to use a 75% rate of the M & IE Rates.

Certification

I understand that pursuant to N.J.S.A. 18A:11-12(l-o), meal expenses under the Federal per diem allowance rules do not require I certify that all expenditures for meals are "actual and reasonable" and are in compliance with the travel administrative rules of the Passaic Public School District.

Signature

Date

Example Only!: Total M & IE Per diem Rate \$66.00*(A)

Date: May, 20XX

<u>Meal/Expense</u>	<u>Allowance</u>	<u>Expenditure</u>	<u>Reimbursement</u>
Breakfast:	\$11.00	\$12.00	\$11.00
Lunch:	\$16.00	\$0.00	\$0.00
Dinner:	\$34.00	\$38.00	\$34.00
Incidental:	\$5.00	\$3.00	\$3.00
(A) Total:	\$66.00		*Total \$48.00

*Total Amount to be reimbursed