



Estimated Conference Costs Form

Out of State and In-State Travel

Employee Name: _____ Department Name: _____

Dates of Travel: Departure Date: _____ Return Date: _____

	Qty.	Daily Amount (With Taxes)	Total	Notes/Description
Registration				
Hotel				
Airfare (Roundtrip)				
Meals				
Ground Transportation				
Miscellaneous				
Total Estimated Cost:				
Funding Source (org/object code):			Org: _____	Object: _____

Direct Supervisor's Signature: _____ **Date:** _____

Department Director signature required for all overnight/out-of-state travel:

Department Director's Signature: _____ **Date:** _____

Example of how to fill out the Estimated Conference Costs Form

	Qty.	Daily Amount (With Taxes)	Total	Notes/Description
Registration			\$325	Tyler Connect Conference - Boston
Hotel	3	\$117	\$351	Including estimated taxes
Airfare (Roundtrip)			\$173	
Meals	4	\$50	\$200	2 days of breakfast and lunch are included in conference fee
Ground Transportation			\$126	Airport parking, mileage, shuttle/taxi from airport and to/from hotel
Miscellaneous	2	\$25	\$50	Baggage fee round trip
Total Estimated Cost:			\$1,225	
Funding Source (org/object code):			Org: 10117200	Object: 816500

Please include the signed form as back up with your **hotel** receipt.