



## Personal Professional Development Fund Expenses

Name		Email:	
School			
Date		Approved by	
Conference	Dates	Location	
Expenses	Dates	Details	Amount
<b>Transportation</b>		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$
		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$
		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$
		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$
<b>Own car</b>		Mileage	\$
<b>Lodging</b>		Location	\$
		Location	\$
		Location	\$
		Location	\$
<b>Meals</b>		(Breakfast not to exceed \$10.00)	\$
		(Lunch not to exceed \$13.00)	\$
		(Dinner not to exceed \$22.00)	\$
		(**Policy GCID)	\$
<b>Conference fees</b>		Purpose	\$
		Purpose	\$
<b>Other</b>		Purpose	\$
		Purpose	\$
		Purpose	\$
		Purpose	\$
<b>Subtotal</b>			\$
<b>Total amount owing to employee</b>			\$
Signature		Date	

Please attach receipts for all listed expenses, sign the form and send to the **RETTA Office**, c/o Concordia Place.