

Conference Request

Name	Lisa Loranc		
Conference/Workshop/Class	Library Journal Directors' Summit		
Location	Denver, CO		
Date	te 10/16-17/2025		
I estimate my expenses as follow	vs:		
Complete the following areas if any p	ortion o	of the expe	nses will be paid/reimbursed by the county.
			Please include registration form, member
Registration	Ś		- number and event schedule
	т		
Travel	\$	436.96	
Method	flight		
-			see mileage table or consult
Mileage (if applicable)			Google Maps
Other (airfare, parking, etc.)	\$	45.00	
Total	\$	481.96	
·			
	Please	include ho	tel confirmation paperwork with this
Lodging	Lodging <i>request</i>		
Name of Hotel	Art Hotel		
Number of nights		2	
Rate/night	\$	190.00	
Total	\$	380.00	
Total Per diem (from calculator)	\$	176.00	
GRAND TOTAL	\$ 1	.,094.92	
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GRAND TOTAL			
	/ supervis	or	to be forwarded to Administration if no county funds are being used
	/ supervis	or does not need	to be forwarded to Administration if no county funds are being used

Director approval is only needed if county funds are being used.