

**TRAVEL EXPENSE RECORD FOR  
TRAVEL REIMBURSEMENT 2021-2022**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**RECORD OF TRANSPORTATION AND DUTIES PERFORMED**

DAY OF MONTH	CONFERENCE OR WORKSHOP TITLE AND LOCATION	TOTAL MILES
		*

- **MAKE SURE A COPY OF MAPQUEST MILEAGE DOCUMENTATION IS ATTACHED ALONG WITH A COPY OF THE OVERNIGHT TRIP REQUEST**

Total Car Mileage \_\_\_\_\_ miles at 56 cents per mile                      \$ \_\_\_\_\_

Total Meals\*\*: \_\_\_\_\_ \$ \_\_\_\_\_

Each meal receipt **MUST** be attached. Employee will be reimbursed up to the district maximum: Overnight Travel, Breakfast \$15, Lunch \$15, Dinner \$25 (Reimbursement for meals without detailed receipts cannot be paid. Departure and Return Times **must** be provided.

Name of Conference or Event: \_\_\_\_\_

Travel Dates: \_\_\_\_\_

**Time of Departure:** \_\_\_\_\_

**Time of Return:** \_\_\_\_\_

Other Expense: \*\* (parking, etc.) \_\_\_\_\_ \$ \_\_\_\_\_

Budget Number \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

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

**\*\*Detailed Receipts required on reimbursement for cash paid out. Credit card sales slips without detailed line items will NOT be reimbursed.**

ADMINISTRATIVE APPROVAL: \_\_\_\_\_

DATE: \_\_\_\_\_