Elmore County Board of Education Travel Reimbursement Request Form

REMINDER: Meals will be reimbursed according to GSA per diem rates for the travel destination (find per diem rates here: https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown). **Original itemized receipts must be provided for all other expenses**. Credit card receipts **WILL NOT** be accepted for any expenses.

Name		School/Location			Date Submitted		
Home Address					-		
City/State/ZIP							
Location/Purpose							
Conference Name							
Conference Date							
RANSPORTATION							
Personal	Vehicle From _	From to					
	Round	Kound trip mileage @ \$.67 per mile = \$					
Air Fare	From _	From to Total Air Fare = \$					
		ı	Otal All Fale		 Il Transportati	on	
				1018	ii iiaiispoitati	O11	
ODGING/PARKING	G/REGISTRATION	N/PER DIEM					
Date	Lodging	Parking	Registra	tion	Per Diem	Total	
	<u> </u>					\$	
						\$	
						\$	
						\$	
						\$	
						\$	
Total Lodging/Parking/Registration/Per Diem						\$	
MISCELLANEOUS E	XPENSES (taxi/U	ber, tolls, gas for	county car, e	tc.)			
						\$	
						\$	
Attachments REQUIRED for reimbursement: Total Miscellaneous						<u>\$</u>	
		sement:					
 Google Map with mileage. Documentation of attendance (e.g., agenda or certificate). 						\$	
3. Attach GSA Me							
4. Original, itemiz	ed receipts for ho	tel, registration, par	king, etc.				
mployee Signatur	e						
Director Approval							
Superintendent Ap							
For Office Use Only							
or Office use Offing	. ACCOUNT NUMBE	=I					