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	of Trip					
Conference Name	e					
Conference Date						
TRANSPORTATIO						
Personal	Vehicle From	to		per mile = \$		
	Round t	rip mileage	@ \$0.67 բ	oer mile = \$		
Air Fare	From	 -	to			
			Total Air Fare	= \$		
	Total Transportation \$					
LODGING/PARKI	NG/REGISTRATION	I/PER DIEM				
Date	Lodging	Parking	Registratio	n Per Diem	Total	
		Total Lod	ging/Parking/R	egistration/Per Diem	\$	
MISCELLANEOUS	EXPENSES (taxi/U	ber, tolls, gas for	county car, etc	c.)		
		_		Total Miscellaneous		
Attachments REQUIRED for reimbursement:						
				GRAND TOTAL	\$	
	eal Per Diem rate for	· · · · · ·	cate).			
	zed receipts for hote		king etc			
	fessional Developme					
11		•				
Employee Signatu	ıre					
Director Approva						
rui Ujjice use Un	iy. Account Numbe					