PERRY COUNTY SCHOOLS
TRAVEL REIMBURSEMENT

EMPLOYEE NAME: _____
SCHOOL/DEPARTMENT: _____
BUDGET CODE: _____
VENDOR NUMBER: _____

FOR THE MONTH OF _____

DATE	TO	FROM	REASON	MILES	AMOUNT
	gdddd				
ssss		ddde			45444
			fggfdf		
	ssdss				
TOTAL					765.00

SIGNATURE: th (Jun 29, 2022 09:37 CDT) _____

TITLE: sssss

VERIFIED BY: _____

****VERIFICATION OF ATTENDANCE TO WORKSHOPS, SEMINARS, CONFERENCES, ETC., MUST BE ATTACHED TO TRAVEL SHEET FOR PAYMENT TO BE PROCESSED.**

REVISED JULY, 2018