Avoyelles Parish School Board Expense Report

Exhibit #7

School/Building	Account Name				
Name	Account Group Account				
Address					
Job Position					
Date Submitted					
	_				
Date Destination	Description	Mileage			
I certify that the charges set forth on this	expense account have been examined by me; that the services for which the charge	s are made were			
necessary and proper; and that the amou	unts claimed are correct and reasonable.				
Miles @ .655=					
Other (see attached)	Principal Supervisor/Director				
Total Expenses Budget	Supervisor/Director				
Over/Under					
	 <u>nt(</u> Submit 1(one) expense report per overnight trip.)				
Approved request for overnight					
	otel, flight, regis., etc. and proof of payment				
3) Agenda					
Indicate mileage traveled					
5) Sign BOTH sheets of expense	report				

6) Reimbursement will be made up to approved budgeted amount.

Rev 5/9/2022

Avoyelles Parish School Board

Travel Voucher

THE FOLLOWING EXPENSES WERE INCURRED:

		THE TOLLO	WING EX	LINOLO	TERE INCORRED.		
Date(s)	a. Registration	h I	n-State Mea	ole .	c. Other Expenses	d. Lodging	TOTALS
Date(s)	Registi ation	Breakfast \$10.00	Lunch \$25.00	Dinner \$36.00	(With Explanations)	u. Loughig	TOTALS
			·	·			
						Total	

Total	
Expenses	

- **a.** Registration documentation/receipt is required.
- b. Meals allowance includes gratuity.

Number of breakfast, lunch, and dinner meals claimed must be shown on this travel voucher.

- c. Actual cab fares in connection with meetings are allowed, plus tip/gratuity not to exceed 15%. Indicate cab fares with gratuity and hotel parking under "Other Expense(s)" column. (Receipts are required for both.)
- **d.** Original detailed/itemized hotel bills are still required for lodging.

	Signature
Attach to Avoyelles Parish Expense Account Sheet	Rev 5/9/2022