## 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: <a href="https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown">https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown</a>). **Original itemized receipts must be provided for all other expenses**. Credit card receipts **WILL NOT** be accepted for any expenses.

Name		School/Lo	cation	Date Submitted		
Home Address						
City/State/ZIP						
Location/Purpose						
Conference Name						
Conference Date						
TRANSPORTATION						
Personal	<b>Vehicle</b> From _	Prom to to Round trip mileage @ \$.655 per mile = \$				
	Round trip mileage @ \$.655 per mile = \$				<del></del>	
Air Fare	From _	Fromto				
		From to Total Air Fare = \$				
Total Transportat					i <b>on</b> _	
LODGING/PARKING	-					
Date	Lodging	Parking	Registrati	on Per Diem	Total	
					\$	
					\$	
					\$	
					\$	
					\$	
					\$	
Total Lodging/Parking/Registration/Per Diem					\$	
MISCELLANEOUS E	XPENSES (taxi/U	ber, tolls, gas for o	county car, etc	: <b>.</b> )		
Total Miscellaneous					\$	
					\$	
Total Miscellaneous					\$	
Attachments REQUIRED for reimbursement:						
1. Google Map with mileage. GRAND TOTAL					\$	
<ol> <li>Documentation of attendance (e.g., agenda or certificate).</li> <li>Attach GSA Meal Per Diem rate for location.</li> </ol>						
4. Original, itemized receipts for hotel, registration, parking, etc.						
4. Original, itemiz	ed receipts for flot	ei, registration, pan	King, etc.			
Employee Signatur	e					
Director Approval						
Superintendent Ap	proval					
For Office Use Only	: Account Numbe	er				