

WEST BOLIVAR CONSOLIDATED SCHOOL DISTRICT

TRAVEL VOUCHER

REQUESTED BY _____

POSITION _____

PURPOSE OF TRIP _____

FROM _____ TO _____

DATE	POINT VISITED	MILES ONE WAY	TOTAL MILES	AMOUNT OF CLAIM (total miles @ .67 per mile)

SUBTOTAL \$ _____

*MEALS _____ DAYS \$59.00 PER DAY----- \$ _____

**Southaven, MS-\$59.00; Oxford, MS & Starksville, MS-\$64.00

MOTEL (MUST ATTACHED RECEIPT) ----- \$ _____

OTHER EXPENSES (LIST & DOCUMENT) ----- \$ _____

TOTAL EXPENSES CLAIMES FOR REIMBURSEMENT: \$ _____

It is the policy of West Bolivar Consolidated School District that all reasonable and necessary expenses for official travel incurred by district employees are reimbursed according to the laws of the State of Mississippi. Penalty for presenting fraudulent claim is a fine of no more than \$250.00; civil liability for the full amount received illegally, and in addition, removal from office or position held by the person presenting such claim (Section 25-3-45, Mississippi Code 1972).

REQUESTER'S SIGNATURE

PRINCIPAL'S/SUPERVISIOR'S SIGNATURE

SUPERINTENDENT'S SIGNATURE

*MEAL CLAIM BASED ON OVERNIGHT STAY

MUST BE ON GREEN PAPER