

BALLARD COUNTY SCHOOLS

2023-24 (effective 10/1/23)

TRAVEL REIMBURSEMENT

NAME _____ **VENDOR#** _____

ADDRESS _____

PURPOSE AND LOCATION

DATE OF OVERNIGHT STAY	DAY OF TRAVEL _/_/_/	2ND NIGHT STAY _/_/_/	3RD NIGHT STAY _/_/_/	4TH NIGHT STAY _/_/_/	5TH NIGHT STAY _/_/_/	RETURN DAY _/_/_/	TOTAL	
Breakfast							0	
Lunch							0	
Dinner							0	
TOTAL MEALS*							0	LINE 1
ROOM COST							0	LINE 2
REGISTRATION FEE							0	LINE 3
PARKING							0	LINE 4
MISC.							0	LINE 5
SUBTOTALS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	LINE 6 = (LINE 1-5)

RECEIPTS ARE REQUIRED FOR ALL REIMBURSEMENTS. DAILY FOOD ALLOWANCE INCLUDES TIP AMOUNT.

DAY OF TRAVEL IS FIRST NIGHT'S STAY.

***REASONABLE EXPENSE FOR MEALS ON DAYS OF TRAVEL IS CONSIDERED TO BE \$20.00.**

***REASONABLE EXPENSE ON DAYS OF MEETING AND TRAVEL IS CONSIDERED TO BE \$35.00.**

MILEAGE							0	LINE 7
TOTAL MILES (LINE 7) X 46 CENTS PER MILE (EFFECTIVE 10-1-23)							\$ -	LINE 8
TOTAL TO BE REIMBURSED							\$0.00	LINE 9 = LINE 6 + 8
PAY FROM MUNIS CODE:								

SIGNATURE _____

DATE _____

APPROVED BY _____

DATE _____