Iosco RESA Travel Expense Approval and Reconciliation Form

Name:	Department:				_	
Conference name (Agenda attached): Location:						
Departure date:			n date:	_		
Dates of Travel :						Estimated \$
Breakfast (\$15.00)						
Lunch (\$20.00)						
Dinner (\$30.00)						
Misc.						
Mileage/School Car						
Account #						
Registration						
Lodging						
Confirmation						
	Sales Tax Exem	ption Form				
					Total ESTIMATED	

Itemized receipts are required for reimbursement.

The school car must be used if available. Further distance travelers shall have priority to school vehicles

Meals will not be reimbursed If they are provided with the event.

Valet parking, room service, alcoholic beverages, entertainment, or non-school related expenses will not be reimbursed.

ALL OVERNIGHT OUT-OF-DISTRICT TRAVEL MUST BE PRE-APPROVED BY THE BOARD OF EDUCATION.

Business Manager: _____ Date: _____

Superintendent: _____ Date: _____

Board of Education: _____ Date: _____

Reconciliation of Travel Expense (after travel): Attach Itemized Receipts – required for reimbursement

Dates of Travel :				Actual \$
Breakfast (\$15.00)				
Lunch (\$20.00)				
Dinner (\$30.00)				
Misc.				
Mileage/School Car				
Registration				
Lodging				

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