

losco RESA
Travel Expense Approval and Reconciliation Form

Name: _____ Department: _____

Conference name (Agenda attached): _____ Location: _____

Departure date: _____ Return date: _____

| Dates of Travel : | | | | | | Estimated \$ |
|--------------------|--------------------------|--|--|--|--|--------------|
| Breakfast (\$8.00) | | | | | | |
| Lunch (\$12.00) | | | | | | |
| Dinner (\$20.00) | | | | | | |
| Misc. | | | | | | |
| Mileage/School Car | | | | | | |
| Account # | | | | | | |
| Registration | | | | | | |
| Lodging | | | | | | |
| Confirmation | | | | | | |
| | Sales Tax Exemption 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 (\$8.00) | | | | | | |
| Lunch (\$12.00) | | | | | | |
| Dinner (\$20.00) | | | | | | |
| Misc. | | | | | | |
| Mileage/School Car | | | | | | |
| Registration | | | | | | |
| Lodging | | | | | | |
| | Total Due to Employee | | | | | |

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