

Driving and Miscellaneous Expense Report

Maximum reimbursable amount for meals is \$30.00 per day, per person.

Name: _____

Date: _____ P.O. Number: _____

Mileage:

Date	Destination	Purpose	Miles

Total Miles _____

Price Per Mile _____ .545

Total Travel Due _____

Reimbursements for Receipts Attached (Must Attach Receipts):

Date	Description for Receipt	Amount

Total Receipts _____

Total Travel Due _____

Grand Total Due _____

Employee Signature: _____

Principal Signature: _____

Superintendent Signature: _____