

**SOUTH LAKE SCHOOLS**  
Conference-Meeting-Activity

**TRAVEL REIMBURSEMENT VOUCHER**

(To be submitted within five business days of return from approved travel.)

Date: \_\_\_\_\_

I hereby request reimbursement for expenses of the Conference-Meeting-Activity:

\_\_\_\_\_

on dates \_\_\_\_\_ time: \_\_\_\_\_.

Expenses to be reimbursed are as follows:

**TRANSPORTATION:**

**MEMO:**

Fare: \$ \_\_\_\_\_

Mileage (auto .535 per mile) \$ \_\_\_\_\_

Other (MISD \$16.05) \$ \_\_\_\_\_

**LODGING - Lodging and miscellaneous trip expenses in excess of \$500 require prior approval of the Board.**

Hotel \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

**MISCELLANEOUS EXPENSES**

Registration fees, etc. \$ \_\_\_\_\_

Meals, tips, and other daily expenses \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**REIMBURSEMENT:**

Total amount requested: \$ \_\_\_\_\_

Make check payable to: \_\_\_\_\_

Signature of Requester: \_\_\_\_\_

**Reimbursements in the amount of \$25 or less are to be refunded from the building's petty cash fund.**

\*\*\*\*\*

**ATTACH ALL RECEIPTS**

Approvals: Principal \_\_\_\_\_ ASN \_\_\_\_\_

Superintendent \_\_\_\_\_

See other side for directions:

## SOUTH LAKE SCHOOLS

### DIRECTIONS FOR COMPLETING THE TRAVEL REIMBURSEMENT VOUCHER

1. Filing this voucher culminates the "accounting trail" initiated by you when you submitted your Authorization for Travel Request. Public funds were spent by you and it is important that this form be accurately completed for future school district audits.
2. The blank spaces with dollar signs to the left of the form are for you to enter dollar amounts. Notes about the dollar entries should be entered by you, if necessary, in the "Memo" column of blank spaces on the right.
3. Allowable expenses are as follows:  
**Lodging and miscellaneous trip expenses in excess of \$500 require prior approval of the Board.**

Hotel Costs: **The maximum rate allowable is the single room rate.** In order to secure maximum benefit from allocated funds, travelers to the same conference are encouraged, when appropriate, to share double rooms. When a room is shared with a spouse, hotel bills must indicate the single room rate. The difference between the single rate and double room rate must be borne by the individual.

Travel: Approval will be made upon the least expensive means of travel with total distance and number of travelers to be considered.

Air coach fare is the standard for distant points. Auto mileage at .535 per mile is the standard when that is the least expensive means of travel.

Meals and Incidentals: Actual costs are reimbursed up to a **maximum of \$29 per day (Breakfast \$6.00, Lunch \$8.00, Dinner \$15.00.)** All receipts must be **itemized**. Per Board policy, alcoholic beverages will not be reimbursed. Please attach itemized receipts.

#### **ATTACH ALL RECEIPTS**

4. "Total" entry must show full costs of your trip not including registration fees if they were paid by the Board in advance. (You received a copy of your approved Authorization for Travel Form which shows if you requested payment of registration fees.)
5. "Total Reimbursement Requested" is the amount of our conference expenses you request the Board to reimburse you.
6. Sign your name in the space marked Signature of Requester.
7. Enter the name of the person who will cash the check in the space marked Make Check Payable To.
8. Within five business days of your return from travel, please give this completed form, with all receipts attached, to your principal or to the administrator who approved your request to travel.
9. Remember to file a conference summary with your principal.