

TRAVEL EXPENSE REIMBURSEMENT FORM FOR JAMES A. GARFIELD LOCAL SCHOOL DISTRICT

NAME _____

BUILDING _____

POSITION _____

ADDRESS _____

PURPOSE OF TRIP _____

YEAR		DETAILED EXPENDITURES (OTHER THAN MILEAGE)							TRAVEL BY PRIVATELY OWNED VEHICLE				
		TOWN VISITED	HOTEL ROOM	MEALS OR PER DIEM	TAXI	MISC	PHONE	TOTAL FOR DAY	BETWEEN WHAT POINTS		MILES DRIVEN	RATE PER MILE	AMOUNT CLAIMED
MO.	DAY							FROM	TO				
											0.550		
											0.550		
											0.550		
											0.550		
											0.550		
											0.550		
											0.550		
											0.550		
SUB-TOTALS							\$	TOTALS FOR MILEAGE			0.550	\$	

APPROVED BY _____
SUPERVISOR OR SUPERINTENDENT

SIGNATURE OF TRAVELER

TITLE

SUB TOTAL \$ _____

MILEAGE \$ _____

TOTAL CLAIMED \$ _____

Eff. 1/1/09 MILEAGE ALLOWANCE .55 CENTS PER MILE

If you will be requesting reimbursement for meals, parking or mileage, a quarterly purchase order for travel is on file for these reimbursements. You must complete the travel reimbursement form for reimbursement, obtain supervisor approval and submit to the Treasurer's office. The negotiated agreement with GEA states that a teacher shall be paid at the end of the semester or whenever the amount due reaches \$25.00, whichever occurs first. All mileage logs must be received within 20 days of the end of the semester in which travel occurred. Failure to do so will result in forfeit of payment.

ITEMIZED RECEIPTS REQUIRED FOR ALL EXPENSES OTHER THAN MILEAGE

For example, meal receipts must be detailed, stating what was ordered and the price of each item.