



Expense Report

Name _____ Soc. Sec. (Last 4 digits) _____ Date Filed _____

Note: Receipts must be attached for each expense claimed.

| DATE | TRAVEL POINT | PURPOSE OF TRIP | MILEAGE OR FARE | BREAKFAST | LUNCH | DINNER | LODGING | OTHER EXPENSES (EXPLAIN) |
|------|--------------|-----------------|-----------------|-----------|-------|--------|---------|--------------------------|
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| | | TOTALS | | | | | | |

Use of vehicle on school business
_____ net miles @ \$0.545 _____

Lodging, Other _____

Total Expenses This Report _____

I certify that the expenses shown were incurred on Board of Education business, and I have attached required itemized receipts.

Signature of Employee

Signature of Principal

Approved by Superintendent