

**TULOSO-MIDWAY INDEPENDENT SCHOOL DISTRICT
TRAVEL EXPENSE REPORT**



Departure Date & Time:					Return Date & Time:			
Employee Name						Campus/Dept.		
Employee ID#					Date:		Vendor #	
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Totals
Date	/ /	/ /	/ /	/ /	/ /	/ /	/ /	
Meals (\$25 per day)	\$	\$	\$	\$	\$	\$	\$	\$
Lodging								\$
Total Mileage (point to point)								
Mileage Reimbursement @ \$.50 per mile	\$	\$	\$	\$	\$	\$	\$	\$
Gasoline (Rental Only)								\$
Parking								\$
Transport (ie taxi, bus, shuttle)								\$
Tolls								\$
Plane Fare								\$
Misc. Below								\$
Total Expenses Charged to District								\$
ADVANCEMENTS (i.e. registration, hotel, etc.)						Total Advancements		\$
Date	Advancement				Amount	Employee Owes District		\$
						District Owes Employee		\$
						Reimbursement to Employee		
						Mileage/Account #		
						Other/Account #		
MISCELLANEOUS EXPENSE EXPLANATION						Reimbursement to District		
						Account #		
<p>I certify that the above expenses are true and correct and were incurred by me in the performance of official duties in accordance with policies of the Board and according to regulations of the Texas Education Agency.</p>								
Event Attended and Location						Employee Signature		
						Date:		
Supervisor Approval			Administrative Approval			Accounting Approval		
Date:			Date:			Date:		
						Reviewed for payment		
						Initials:		
						Date:		