

PLEASE USE THIS FOR ANY EVENT REQUIRING MEAL REIMBURSEMENT

Conference Title _____ MONTH/YEAR _____

ORONDO SCHOOL DISTRICT #13
100 ORONDO SCHOOL RD
ORONDO, WA 98843

ADVANCE TRAVEL TAKEN

DATE	TRIP INFORMATION				MEALS AND LODGING				MOTOR VEHICLE			OTHER EXPENSE PER DETAIL BELOW	GRAND TOTAL	AMOUNT SUBJECT TO PAYROLL TAXES
	FROM where	TO where	TRIP TIME		ATTACH RECEIPTS				REIM-BURSE-MENT RATE	MILEAGE ALLOW-ANCE				
		DEPART time	RETURN time	BREAK-FAST	LUNCH	DINNER	ACTUAL LODGING	MILES DRIVEN						
					\$	\$	\$	\$		0.560		\$	\$	
					\$	\$	\$	\$		0.560		\$	\$	
					\$	\$	\$	\$		0.560		\$	\$	
										0.560				

PLEASE BE SURE TO SIGN on BOTTOM of form

TOTAL \$ _____

INSTRUCTIONS: Advance Travel: Return balance if taken \$ _____

DETAIL OF OTHER EXPENSE (NO SINGLE EXPENSE OVER \$10.00)

DATE	PAID TO	FOR	AMOUNT

TRIP INFORMATION: FOR EACH TRIP COMPLETE THE DATE; DEPARTURE POINT; DESTINATION POINT; DEPARTURE TIME AND RETURN TIME. IF THE TRIP TERMINATES ON A DATE DIFFERENT THAN THE DEPARTURE DATE, COMPLETE THE RETURN TIME ONLY ON THE DATE ACTUALLY RETURNED.

MEAL COST
Meal Cost will be reimbursed by receipt. RECEIPT MUST ITEMIZE THE MEAL, A VISA SLIP IS NOT ENOUGH INFORMATION.
Guideline for meal and incidental cost is: (normal per diem) -includes tip
\$11.00 breakfast \$12.00 Lunch \$23.00 dinner, plus \$5.00 incidental
Seattle : \$17.00 brkfst \$18.00 lunch \$34.00 dinner plus \$5.00 incidental

WHEN NOT ON OVERNIGHT YOUR MEAL COST IS PAID ON YOUR PAYCHECK AND TAXES ARE TAKEN PER IRS REGULATIONS.

I HEREBY VERIFY UNDER PENALTY OF PERJURY THAT THIS IS A TRUE AND CORRECT CLAIM FOR NECESSARY EXPENSES INCURRED BY ME AND THAT NO PAYMENT HAS BEEN RECEIVED BY ME ON ACCOUNT THEREOF.

LODGING IF YOU PAID FOR LODGING (NOT UNDER A PURCHASE ORDER) ACTUAL LODGING COSTS ARE TO BE REPORTED. RECEIPTS MUST BE ATTACHED

OTHER EXPENSE If multiple people on are one receipt you must write the names of those on the back or attach list to the receipt
Other Expense Section. Receipts in excess of \$10.00 must be attached except no receipt is required for parking, transit fees and phone calls.

SIGNATURE _____

APPROVED BY' _____ **PROGRAM FUNDED** _____ **DATE** _____

BE SURE THIS IS SIGNED BY PROGRAM MANAGER OR PRINCIPAL