

Roanoke City Schools

Travel Voucher

Name: _____ Date submitted: _____

Fund: _____

Date(s) of Travel: _____

Purpose of Travel: _____

POINTS OF TRAVEL

From	To	Miles
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Miles _____

PLEASE ATTACH RECEIPTS FOR REGISTRATION (if applicable), MEALS AND LODGING TO THIS FORM. Please attach a copy of your approved travel request form.

Total amount for Meals & Lodging \$ _____

miles _____ x \$0.655 = \$ _____

Registration \$ _____

Grand Total \$ _____

I hereby certify that the travel listed above was accomplished in the performance of official duties for the Roanoke City School System.

Signature