



NAME _____

DATE _____

Building or Department _____

Date(s) Expenses Incurred From _____ to _____

Event/Location _____

Nature of Expense(s) _____

Fund #/ Short Account # _____

1. REGISTRATION - Attach Receipt or Proof of Registration _____

2. TRANSPORTATION

A. Use of Personal Vehicle 0.655¢/mile Total # of Miles _____
Personal mileage will only be approved by the superintendent when a district vehicle is unavailable.

B. District Vehicle Total Fuel Receipts Attached _____

C. Public Transportation Total Receipts Attached _____

3. HOUSING - Attach Statement/Folio _____

4. MEALS - DAY TRIP Meal Total _____

Day 1 Meals _____

Day 2 Meals _____

Day 3 Meals _____

6. OTHER

A. _____

B. _____

Total Expenditures _____

Total Reimbursement Requested _____

Submitted by: _____

School/Department _____

Confirmed by: _____

Building Administrator/Supervisor

1. Complete this form and submit it to the appropriate personnel and/or administrator for approval.
2. Transportation - If district vehicle or common carrier, attach gas receipts and enter total.
3. All receipts turned in **must be Itemized** receipts.
4. Reimbursement for professional development is based upon pre-approved expenditures and methods of distribution of funds at the building level. See your building PDC representative if you have questions.
5. All expenditures should be related to district business and follow policies.

USD 250 Business Office _____