	NAMEBuilding o	r Department		DATE		
Date(s) Expenses Incur	red	From		to		
Event/Location						
Nature of Expense(s)						
Fund #/ Short Account	#					_
1. REGISTRATION - Att	tach Receipt or Pro	of of Registration				_
2. TRANSPORTATION						
A. Use of P						
Personal mil	eage will only be app	proved by the superintendent when	n a district vehicle is <u>unave</u>	<u>ailable</u> .		
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 Meal	S					
6. OTHER						
Α.						
В.						
					Total Expenditures	
					sement Requested	
Submitted by:						
School/Department			Confirmed by:			
				Buildin	ng Administrator/Supe	ervisor
<ol> <li>Complete this form and submit it to the appropriate personnel and/or administrator for approval.</li> <li>Transportation - If district vehicle or common carrier, attach gas receipts and enter total.</li> <li>All receipts turned in <u>must be Itemized receipts</u>.</li> <li>Reimbursement for professional development is based upon pre-approved expenditures and methods of distribution of funds at the building level. See your building PDC</li> </ol>						
<ul> <li>representative if you have questions. Itemized receipts are required.</li> <li>All expenditures should be related to district business and follow policies.</li> </ul>						

USD 250 Business Office

Last updated 9/11/2024