

SUSSEX-WANTAGE REGIONAL BOARD OF EDUCATION
2025-2026 EXPENSE SUMMARY FORM
(used for overnight travel and other miscellaneous items)

Name: _____ Period: _____

School: _____ Event: _____

Mileage (Automobile travel) - (Note-maximum mileage for a round trip is 500 miles)

Date	From	To	Miles

Total Miles _____ x \$0.47 cents per mile = _____

Traveling expenses (parking, tolls, etc.)

Date	Description	Amount

Total Traveling expenses _____

Meals (please log on to www.gsa.gov/mie for meal allowances by location)

Date	Breakfast	Lunch	Dinner	Total

Total Meals _____

Other Expenses (Hotel, etc. - please log on to www.gsa.gov/perdiem for lodging allowances by location)

Dates	Place	Description	Amount

Total Other expenses _____

Total all Travel expenses _____

Note: Please attach all original receipts, copies will not be accepted

Employee Signature

Approval _____
Supervisor/Principal