MITCHELL COUNTY SCHOOLS
Reimbursement of Travel and Other Expenses

Instructions: Attach all necessary receipts and documents to this form and submit to the Finance Department within 30 days.

Name: **Vendor #:**	**Account Code:**
Address:	**Workshop/Activity:**
Social Security Number:	**Departure Time:** **Return Time:**
Position/Title	**School/Department:**

TRAVEL

Date	From (City and State)	To (City and State)	Daily Private Car Mileage	In-State	Out-of-State
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			TOTAL	$	$

SUBSISTENCE

Date	Expense	In-State	Out-of-State
	Breakfast	$	$
	Lunch	$	$
	Dinner	$	$
	Hotel	$	$
	Breakfast	$	$
	Lunch	$	$
	Dinner	$	$
	Hotel	$	$
	Breakfast	$	$
	Lunch	$	$
	Dinner	$	$
	Hotel	$	$
	TOTAL	$	$

OTHER EXPENSES (registration, parking, etc.)

Date	Explanation	Amount
		$
		$
		$
		$
	TOTAL	$

_____

GRAND TOTAL	$

I have examined this reimbursement request and certify that it is just and reasonable.

Employee's Signature _____ Date _____

Supervisor's Signature _____ Date _____

Finance Officer's Signature _____ Date _____

Subsistence Rates

	In-State	Out-of-State
Breakfast	$8.60	$8.60
Lunch	$11.30	$11.30
Dinner	$19.50	$22.20
Lodging (guideline)	$75.10	$88.70

Travel Rates

School Vehicle Not Available	.50 per mile
School Vehicle Available (but opt to use private)	.25 per mile

TRAVEL

Date	From (City and State)	To (City and State)	Daily Private Car Mileage	In-State	Out-of-State
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			@ $_____	$	$
			TOTAL	$	$

SUBSISTENCE

Date	Expense	In-State	Out-of-State
	Breakfast	$	$
	Lunch	$	$
	Dinner	$	$
	Hotel	$	$
	Breakfast	$	$
	Lunch	$	$

OTHER EXPENSES (registration, parking, etc.)

	Dinner	**$**	**$**
	Hotel	**$**	**$**
	Breakfast	**$**	**$**
	Lunch	**$**	**$**
	Dinner	**$**	**$**
	Hotel	**$**	**$**
	Breakfast	**$**	**$**
	Lunch	**$**	**$**
	Dinner	**$**	**$**
	Hotel	**$**	**$**
	TOTAL	**$**	**$**

Date	Explanation	Amount
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
		$
	TOTAL	$