

PROFESSIONAL MEETING EXPENSE REIMBURSEMENT

NAME _____ DATE _____

SCHOOL _____

PURPOSE OF TRIP _____

DATES OF ATTENDANCE FROM _____ TO _____

TRANSPORTATION ---- e.g., plane ticket (statement attached) \$ _____

Mileage Driven From _____
to _____

TOTAL MILEAGE _____ X **(\$.56 cents/mile)** \$ _____

Local Transportation (taxi, bus, etc.) \$ _____

Lodging (If paid for by MasterCard, do not include) \$ _____

Meals (Itemized receipts must accompany voucher) \$ _____
(Total Meals)

Registration (statement attached) \$ _____

Miscellaneous --- e.g., parking (provide itemized statement) \$ _____

***IRS has adjusted the rate for mileage
driven effective January 1, 2021.**

TOTAL \$ _____

Signature

APPROVED

Superintendent Date