# TRAVEL REIMBURSEMENT FORM (Out of District)

	dependent Scl Wells Street	hool District	Employee: _								
	exas 77957		Employee					<del></del>			
	2-3573 - (361)7	81-1002 Fax	Campus:					Date:			
				eimbursem	ent of Sch	edule B,C, o	r D even if	mileage is not being re	eimbursed.	<del></del>	
	e A - Mileage	•						le B - Lodging			
TRIP 1	Destination:			Total	TRIP 1	Name & Location of Hotel:			Total		
	Purpose:	Roundtrip	Mileage	Mileage					Lodging		
	Date & Time of Departure:  Date & Time of Return:			Miles	Rate	Expense	ı	Check In Date:		Cost/Day	
					x 0.65	\$		Check Out Date:		\$	\$
TDID 0	Т					1 1	<b>TDID 0</b>	T			1
TRIP 2	Destination:	1	1	Total		RIP 2 Name & Location of Hotel:			Total		
	Purpose:  Date & Time of Departure:			Roundtrip	Mileage Rate	Mileage Expense		<u> </u>			Lodging
				Miles						Cost/Day	Expense
	Date & Time of Return:				x 0.65	\$		Check Out Date:		\$	\$
TRIP 3	Destination:			Total	TRIP 3	Name & Location of Hotel:			Total		
TIXIF 3		Roundtrip	Mileage		TIXIF 3	Name & Location of Hotel.			<del>-</del>		
	Purpose:  Date & Time of Departure:			Miles	Mileage Rate	Mileage Expense		Check In Date:		Cost/Day	Lodging Expense
	Date & Time of Return:			IVIIICS	x 0.65	\$		Check Out Date:		\$	\$
	24.0 4 1		X 0.05	Ψ		Offect Out Date.		ĮΨ	ļΨ		
Schedul	e C - Meals *						Schedule D - Other Expenses				
	Leave District:	Return to District:	Breakfast	Lunch	Dinner	Total Meal		(Please document reason fo			TOTAL
Date	Time of Day Time of Day		Amt.	Amt.	Amt.	Expense	Date	(i.e. parking, registration fees, etc.)			OTHER EXP
					1	\$					\$
					<u> </u>	\$					\$
						\$					\$
						\$					\$
						\$					\$
						\$					\$
TOTAL SC					JLE C	\$			TOTAL SCH	EDULE D	\$
							T	otal Expenses for Sched			<b> </b> \$
ACCOU	NT CODE TO E	BE CHARGED				_	10	otal Expenses for Sched	ule A, B, C, & D		Ψ
					DATE	_		Less Travel Advance for	or Lodging		(\$
SIGNATURE OF EMPLOYEE										1	
CICNIAT			ND		DATE	_		Total Claim	Due to Employee		\$
SIGNAT	UKE OF PKING	CIPAL/SUPERVISC	JΓ		DATE						
FEDERAL PROGRAM APPROVAL						_					
BUSINESS OFFICE APPROVAL						_				I	Revised 7.25.2

#### **Schedule A - Mileage**

Mileage will be reimbursed at a rate of \$.65 (65 cents) per mile when an employee uses his/her vehicle for school business.

# **Schedule B - Lodging**

Receipts for Lodging

Lodging receipts must be submitted for reimbursement.

The district will not reimburse state tax. It will be the employee's responsibility to submit a tax exempt form when checking in at a commercial lodging establishment.

These tax exemption certificates are available on each Campus and should be obtained from the principal's office.

#### Rate of Reimbursement

Actual expense not to exceed \$125 per night. There are hotels and motels that will give you the state rate provided it is requested. The reimbursement limit applies without carry over from one day to another. For example, if an employee incurs a lodging expense of \$85 on day 1 of a trip, and \$140 on day 2 of that trip, only \$210 of those expenses are reimbursable.

Lodging Rates Beyond the \$125 Limit Paid with Local Funds Reimbursement may exceed the \$125 limit per day, when employees must stay alone or are staying at conference hotel. Any amount beyond the \$125 per day limit must be approved in advance by the Superintendent or Business Manager.

#### Schedule C - Meals

## Meal Receipts

Itemized meal receipts must be submitted for reimbursement. A total of \$59.00 will be allowed per day.

Alcohol **cannot** appear on any receipt that is presented for reimbursement. If receipt is presented with alcohol (even if it is marked out), that receipt will be denied.

#### Daily Reimbursement Rate for Meals

Meals are reimbursed at a maximum rate of \$59 per day, if you are gone a full day and leave before 7 a.m. and return after 7 p.m. Reimbursement is made only when official school business requires the employee to be away a minimum of four (4) hours. Only qualified meals will be reimbursed. **Itemized receipts are required.** 

Meal Rates and Partial Day Maximums -

Full Day: \$59.00 Per Day

Partial Day: Breakfast - \$15.00 Lunch - \$18.00 Dinner - \$26.00

If employee leaves before 7 am, returns after 1 pm and before 7 pm Employee is entitled to breakfast and lunch. Itemized receipts are required.

If employee leaves before 10 am and returns after 7 pm Employee is entitled to lunch and dinner. Itemized receipts are required.

If employee leaves before 7 am and returns after 7 pm Employee is entitled to breakfast, lunch, and dinner. Itemized receipts are required.

If employee leaves after 12 noon and returns after 7 pm Employee is entitled to dinner only. Itemized receipt is required.

If employee leaves after 7 am and returns before 7 pm Employee is entitled to lunch only. Itemized receipt is required.

## Schedule D – Other Expenses

Other travel expenditures such as parking fees, registration fees may be submitted for reimbursement. <u>Itemized receipt(s) required.</u>

ALL REQUESTS FOR REIMBURSEMENT MUST BE SUBMITTED WITHIN 30 DAYS AFTER THE EVENT TO THE BUSINESS OFFICE.

REIMBURSEMENT CHECKS WILL BE WRITTEN ON THE NEXT ACCOUNTS PAYABLE CHECK RUN DATE PROVIDED ALL INFORMATION IS INCLUDED ON THE REIMBURSEMENT FORM AND THE REQUEST IS SIGNED. RECEIPTS MUST BE PROVIDED AND RECEIPTS MUST SHOW ITEMS PURCHASED, NOT JUST A TOTAL. AUGUST REIMBURSEMENTS NEED TO BE SUBMITTED TO THE BUSINESS OFFICE BY THE END OF AUGUST TO BE PROPERLY CODED.