

# **McFARLAND SCHOOL DISTRICT TRAVEL EXPENSE SHEET**

NAME \_\_\_\_\_ SCHOOL \_\_\_\_\_

ACCOUNT # \_\_\_\_\_ APPROVED \_\_\_\_\_

DATE \_\_\_\_\_

TOTAL AMOUNT \$ \_\_\_\_\_

		<u><b>RATE</b></u>	<u><b>TOTAL</b></u>	<u><b>DESTINATION(S)</b></u>
<b>MILEAGE</b>	<u><b>TOTAL # OF MILES</b></u>	<b>TIMES 54 CENTS PER MILE</b>		
<b>LODGING EXPENSES (RECEIPT)</b>	<u><b># OF NIGHTS</b></u>	<u><b>PER NIGHT</b></u>		
<b>MEALS (RECEIPT)</b>	<u><b>QUANTITY</b></u>	<b>SEE MEALS BELOW</b>		

**\*\* PLEASE REMEMBER TO ATTACH RECEIPTS.**

## **REIMBURSEMENT RATES :**

**Mileage:** 54 cents per mile (IRS rate)

**Lodging:** \$80\* maximum, excluding taxes. Please ask for state or convention rate.

**Meals:** \$40\* daily maximum for 3 meals.

**\*-In the event you exceed these limits, please attach explanation and seek supervisor approval.**

*\*\*Please note that many conventions and hotels offer complimentary breakfast and lunch as part of your conference registration.*

## **Examples of some expenses which are NOT reimbursable:**

- |   |  |
|---|--|
| Alcoholic beverages                         | Child care                                       |
| Spouse or family member costs               | Flight Insurance                                 |
| Meals included with conference/seminar      | Taxi fares to/from restaurants                   |
| Lost/stolen cash or personal property       | Pay per view movies                              |
| Traffic citations, parking tickets or fines | Fitness center costs                             |
| Repairs, towing, etc. for personal vehicle  | Add'l charges for late check-out or cancellation |

