## **Wattsburg Area School District**

## **Travel & Conference Expense Voucher**

IRS Mileage Rate 65.5¢ per mile

			_					
Name:				Conference Name:				
Building:				Grant Name (if funded by grant):				
Month:			School Program/Activity:					
Purpose	e of Travel:							
	Date	Travel Miles	Location/Des	tination/Restaurant	Description of Purchase	Total of Receipt	Amount Requested	
example:	7/1/2023	22.6	NW Tri Coun	ty IU5			\$14.80	
example:	7/1/2023		<b>Burger King</b>		Lunch	\$47.85	\$40.00	
	Total Miles: Total				Amount Requested for Reimbursement:			
<b>*</b> (	`onference Rec	illest Form must	he suhmitted t	o the Assistant to				
t	he Superintend	dent for <b>Board a</b> p	oproval prior to	event start				
	Maximum Reimbursable Costs for Meals: \$40.00 per day.  Unspent allowance is not carried over to the next day. Meals are				To the best of my knowledge, the record above is a true accounting of travel expenses incurred in performing my duties as an employee of the Wattsburg Area School District. I request			
	only reimbursed for overnight conferences.							
<b>*</b> 9	Scan and save copies of all receipts before turning in. DAO is not responsible for receipts lost during delivery.				reimbursement from Wattsbur	rg Area School	District.	
	•	receipts lost duri I <b>IPTS must be ITI</b>	-	hmitted with				
	form. Receipts that are not itemized will be returned to				Employee Signature Date		Date	
		vill not be reimb	ursed until an i	temized copy is				
	provided by the Signed form mu		t the DAO by th	e 2nd Monday of				

each month to receive payment within the same month.

Meeting, held the 3rd Monday of each month

Payments are distributed after approval from the monthly Board

Approved by Principal, Supervisor,

or Program coordinator