

# WEBSTER COUNTY SCHOOLS TRAVEL EXPENSE REPORT

NAME \_\_\_\_\_ DATE \_\_\_\_\_

DATE	MEETING/CONFERENCE TITLE	MILES	MEALS	LODGING

I certify that the amounts listed are the actual expenses incurred.

MILES \_\_\_\_\_ x .585

\_\_\_\_\_  
SIGNATURE OF EMPLOYEE

TOTAL FOR MILES \_\_\_\_\_  
MEALS \_\_\_\_\_  
LODGING \_\_\_\_\_  
FEES \_\_\_\_\_  
TOTAL \_\_\_\_\_  
EXPENSES \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF ADMINISTRATOR