

ANNISTON BOARD OF EDUCATION
POST OFFICE BOX 1500
ANNISTON, ALABAMA 36202

SUBJECT: REQUEST FOR REIMBURSEMENT OF TRAVEL EXPENSES

FROM: _____
(Name) (Street Address)

(City and State) (Zip Code)

TO: ANNISTON BOARD OF EDUCATION

1. Purpose of Travel and Destination:

From: _____ To: _____

Date and Time of Departure: _____
(Date) (Time)

From: _____ To: _____

Date and Time of Departure: _____
(Date) (Time)

Purpose of Trip: _____

H. Expenses:

A. Travel: () Automobile _____ Miles @ \$.36 _____
() Other _____ \$ _____
Total \$ _____

B. Per Diem Pay: _____ Units @ \$ _____ Per Unit \$ _____

C. Food and Lodging:

_____ Meals (Attach paid receipts) \$ _____

_____ Nights lodging (Attach paid receipts) \$ _____

Total \$ _____

111. Other (Itemize)

A. _____ \$ _____

B. _____ \$ _____

Total \$ _____

This is to certify that the above expenses were incurred by me while on authorized travel as indicated above and that the amount has not been paid.

(Signature)

Signed this _____ day of _____, 20 _____

APPROVED _____
(Superintendent)