



## EXPENSE CLAIM FORM INFORMATION

Know the rules before you travel because some expenses are authorized only if they are pre-approved.

To avoid having a claim rejected and delaying your reimbursement, make sure all necessary information is included.

*Expense / Mileage Claim Form* is designed for both mileage claims and all other expense reimbursements. Claims should be submitted on a monthly basis. **All claims must be submitted with sufficient time to process payment by the end of the fiscal year, June 30.**

**DATE:** Include each date that expenses are incurred.

**DESCRIPTION:** Identify purpose of trip. If space is not adequate, the explanation can be placed on a separate sheet as long as there is sufficient cross reference. In-district travel; record round trip and indicate *From – To* locations. List other items expected for reimbursement.

**TRANSPORTATION:** If personal vehicle was used, record actual miles traveled in the *Miles column*. If school vehicle was used, there is no reimbursable claim for mileage; do not include this information. If public transportation was used, record cost under *Misc column* and include ticket stub. Taxi or limousine fares require a receipt, also recorded under *Misc column*. If you share a ride with another individual, indicate name of individual on the claim.

**LODGING:** Reimbursement is for single room rate. If you share a room with another employee, please indicate employee's name on the form below *Budget Account Codes*.

**MEALS:** Maximum allowable: Breakfast - \$10.00; Lunch - \$12.00; Dinner - \$18.00. Receipts must be attached for all meals.

**MISC:** Record other reimbursable expenses; i.e. purchased materials, registration fee (must have receipt/cancelled check, front and back, meeting schedule), parking, telephone, other expenses.

**RECEIPTS:** All expenses must be accompanied by itemized receipts unless dictated by contract language.

**MILEAGE RATES:** The Federal mileage rate in effect as of July 1<sup>st</sup> is used through the following June 30<sup>th</sup>, to complete the school district's fiscal year.

**TOTALS:** Complete *Total miles* at the bottom of the *Miles column* then calculate to the right into the *Total column*. Calculate other columns, *Lodging, Meals, and Misc* to the right into the *Total column*. All expenses including mileage should be indicated in the line for *Total Claimed for All Expenses*. This is the amount expected for reimbursement.

**BUDGET ACCOUNT CODES:** Indicate account(s) to be charged.

**SIGNATURES:** You must sign the claim. It will not be processed without your signature.

Forward the claim to your Principal/Supervisor for signature. Claims should be reviewed to ascertain it is complete and that costs conform to District Policy. Signed forms are then forwarded to the Business Office for processing.