**MOREHOUSE PARISH SCHOOL BOARD**

# OUT OF PARISH TRAVEL REQUEST/REIMBURSEMENT FORM:

Receipts for lodging, parking, registration, luggage charge, and taxi must be attached to this form when submitting for reimbursement.

Documentation such as agenda, certificate of attendance, and name tag must be attached to verify attendance & meals.

Name: Trip to: Date/Time of Departure:

Mailing Address (Home): Purpose:

Date/Time of Return:

Justification: Date: Principal’s Approval to Attend, if applicable: Is a substitute teacher? Yes or No

Employee Contact Phone#:

Registration Fees

Check one:

School Board credit card

Registration Amount:

 PO or check

 Paid by employee

Hotel/Lodging:

Prepaid-By purchase order or check prior to registration deadline.

Not prepaid -By employee, attach receipt for reimbursement.

**No late fees will be paid by school board or reimbursed.**

School Board credit card PO or check

Paid by employee

 Number of Nights @ $ =

 School Board credit card

**Mileage:** Miles @ $.655= \_\_\_\_\_\_\_\_\_\_\_\_\_

Airfare

PO or check

Paid by employee

Mileage

**Day 1 Day 2 Day 3 Day 4 Day 5 Day 6 Day 7 TOTAL**

Meals:

Breakfast:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

(Per Diem-no receipts needed) Lunch:

Dinner:

Meal Total

Other Expenses:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

 Subtotal of Estimated Expenses:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

 **(To be completed by the Business Office)**

 **Reimbursement Amount:**

 **Total Reimbursement: \_\_\_\_\_\_\_\_\_\_\_\_**

Signature:

Supervisor Prior Approval to Attend:

Date:

Charge to Fund/Account Number: Superintendent Prior Approval:

Supervisor or Superintendent Approval to Reimburse:

(NOTE: All receipts & documentation stated above MUST be attached for reimbursement to be approved)

Revised 02/2023