

**CENTRAL CITY PUBLIC SCHOOLS  
EXPENSE VOUCHER**

**Name:** \_\_\_\_\_  
**Date or Dates Gone:** \_\_\_\_\_  
**Activity:** \_\_\_\_\_  
**Location:** \_\_\_\_\_

Submit within 10 days of Activity to District  
 Office. Reimbursement will be the day following  
 the next monthly Board of Education meeting.

List actual expenses. ATTACH RECEIPTS. Receipts are required for transportation expenses, lodging expenses, rental cars, meals, registration, and professional materials .

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Breakfast</b>							
<b>Lunch</b>							
<b>Dinner</b>							
<b>MEALS-TOTAL</b>							

Reimbursement will include tax and gratuity.

Meals that are a part of the professional activity are not included in this procedure and will be paid at the actual expense.  
 Usually these costs will be included when registration is sent in for the activity.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>LODGING:</b>							
<b>MISC EXPENSES:(Describe)</b>							
<b>MISC EXPENSES:(Describe)</b>							
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**\*\*\*MILEAGE:**            Personal Car \_\_\_\_\_  
                                  Out-of-District \_\_\_\_\_ miles @ \$0.50 = \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

SCHOOL CREDIT CARD TOTAL: \_\_\_\_\_  
 CASH TOTAL: \_\_\_\_\_  
 Less Cash Advance (If any) \_\_\_\_\_  
**GRAND TOTAL:** \_\_\_\_\_

**OFFICE USE ONLY**

Approved(Principal/SUPT) \_\_\_\_\_  
 Budget Code \_\_\_\_\_

MEALS TOTAL: \_\_\_\_\_  
 LODGING: \_\_\_\_\_  
 MILEAGE: \_\_\_\_\_  
 MISC: \_\_\_\_\_