TRAVEL EXPENSE CLAIM

MONROE COUNTY BOARD OF EDUCATION 109 ROSENWALD DRIVE MONROEVILLE. AL 36460

	MONROEVILLE, AL 30	0460	
Name:	e:School/Location:		
	ddress:		
	T and Zip Code:		
hone	e#:		
PURPO	OSE OF TRIP:		
- 1	tach Approved <i>PerfectForm</i>		
Agend	la Provided: Yes 🗖 No (Attach Agenda, Cer	tificates of Co	mpletions or Itineraries)
Dates	- From:To: _		
_		_	
A.	AUTO TRAVEL (City, ST) From:		
	(Attach Mapquest or Google maps mileage verification. You should use the shortest mileage between points. Maps will be checked.) mapquest.com or maps.google.com		
			<u> </u>
	Total Miles (Round trip) * @ .6	7 per mile	=
R	LODGING Name of Hotal:		
Б.	LODGING Name of Hotel: (If lodging paid by Board in Advance, Keep & Attach copy of paid receipt from Hotel)		
	If Hotel expenses paid out of pocket, Attach Receipt =		
	in Hotel expenses paid out of pocket, Attach Rece	iρτ	
C.	MEALS: Meal amounts to be reimbursed will	ha \$50 00 nar	day of overnight
	MEALS: Meal amounts to be reimbursed will be \$50.00 per day of overnight travel only. This is for pre-approved travel outside of the county.		
			-
	Number of Days X \$50.00 per day		<u>-</u>
_	(Bd. Approved	-	
D.	, , , , , , , , , , , , , , , , , , , ,	CELLANEOUS (Registration, Parking fees, bus, taxi –	
	ther business related) Attach ALL receipts; Explain:		
	TOTAL REIMBURSABLE EXPENSES:		=
	TOTAL REIMBORGABLE LA	LINGES.	
	Signature of Traveler	Date	
	************	******	*******
	Approved by Principal/Supervisor		
	Approved by Department Head		
	Approved by Superintendent		
	5 U G		
	Funding Source		
	Account code		

Revised 01/12/2024

Principal(s) will approve all expense claims prior to being sent to the Superintendent. Employees not under direct supervision of a principal shall have all expense claims approved by their direct

supervisor/director. Reimbursement will be made only for reasonable employee business travel.

PURPOSE AND DATE OF TRIP – Please attach a copy of the meeting agenda. If an agenda was not provided, please attach a copy of the registration receipt or email of meeting dates and location.

*Reimbursements will be calculated by multiplying the <u>total</u> mileage on the expense account

(travel claim) times the Board approved rate. (Example: 110 miles $\times .67 = 73.70).

EXPENSE REIMBURSEMENT

Board members and employees shall be reimbursed for reasonable and customary travel expenses incurred in the exercise of school business or professional travel. The rate of

reimbursement shall be established by the Board and amended as applicable.

Employees shall be reimbursed for travel expenses incurred while performing duties related

to their jobs. The travel must be at the request of or approved by the Superintendent and immediate supervisor. Reimbursement for travel expenses in or out of the state shall not exceed actual, itemized

expenses. Prior approval for all out of state employee travel must be obtained from the

Superintendent before any travel expenses can be incurred.

Claims for travel expenses must be recorded on forms provided by the Superintendent.

Expense claims for in-state and out-of state travel must be supported by receipts (examples: hotel, airline tickets, parking, taxicab, registration, meals, etc.) Cost of travel and lodging should be shared with other employees when possible. Reimbursement for personal items, entertainment, alcoholic

beverages and snacks will not be made.

Reimbursement is provided for out-of-state travel by automobile or public carrier. Air travel

shall be coach class only. Automobile mileage shall be reimbursed at a rate approved by the Board.

Reimbursement is available to the Board employee or Board member only upon his/her signature.

LEGAL REF: Code of Alabama 16-13-14