

Fraser Public Schools
2024 Expense Report



Name

Date

Conference Name and Location

Please note the following:

Only record what you actually paid for out of pocket.

DO NOT include expenses for unauthorized people (e.g. spouse).

Attach all receipts to this form. All receipts must be itemized.

Expense Description	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	<u>Date</u>	Item Total
Miles traveled (car only)						
Mileage @ _____ per mile						\$
Lodging (include tax)						\$
Meals (\$40 per diem limit, gratuities limited to 20%)						\$
Registration						\$
Parking						\$
Other (description)						\$
Daily Expense Totals	\$	\$	\$	\$	\$	\$

Amount due to Employee \$ _____

Employee Name (Print)

Employee Signature

Mailing Address

Approval

ASN#