## East Buchanan C-1 School District

## Request for Reimbursement

Name (Please Print)				Month		_ Year				
All expenses (except mileage) must be supported by attaching itemized receipts. Restaurant receipts that do not itemize what was purchased will NOT be reimbursed. For mileage, please refer to back of sheet—for listed locations, only the mileage listed will be reimbursed. Meals will not be reimbursed if provided at event/conference attended. Ubers, taxis, tolls, etc., will only be reimbursed if receipt provided.										
Date	Event	Miles @.60	Breakfast	Lunch	Dinner	Other-specify	Amount			
					Total Am	ount Due	\$			
Signat	ure									
Admin	istrator Approval			Date_						
Superi	ntendent Approv	/al		Date						

Location	Round trip mileage from Gower	Allowable Round Trip mileage expense @ .60 per mile
Benton	38	\$22.80
Cameron	67	\$40.20
CentralSt. Joe	40	\$24.00
Chillicothe	150	\$90.00
Easton	19	\$11.40
Gallatin	108	\$64.80
Lafayette	45	\$27.00
Lathrop	37	\$22.20
Lawson	66	\$39.60
LeBlond	36	\$21.60
Lexington	130	\$78.00
Margaritaville	428	\$256.80
Maryville	116	\$69.60
Maysville	68	\$40.80
Menards	29	\$17.40
Mid-Buchanan	30	\$18.00
Northeast Nodaway	138	\$82.80
Northland Christian	48	\$28.80
North Platte	34	\$20.40
Penney	94	\$56.40
Plattsburg	22	\$13.20
Rockport	160	\$96.00
Sam's ClubSt. Joseph	44	\$26.40
Savannah	60	\$36.00
South Nodaway	100	\$60.00
St. Pius	65	\$39.00
Smithville	36	\$21.60
Stanberry	98	\$58.80
Stewartsville	40	\$24.00
Tarkio	162	\$97.20
Trenton	156	\$93.60
West Platte	62	\$37.20