

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 @.63 | Breakfast | Lunch | Dinner | Other-specify | Amount |
|------|-------|---------------|-----------|-------|--------|---------------|--------|
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Total Amount Due

Signature _____

Administrator Approval_____ Date_____

Superintendent Approval _____ Date _____

| Location | Round trip mileage from Gower | Allowable Round Trip mileage expense @ .60 per mile |
|------------------------|-------------------------------|---|
| Benton | 38 | \$23.94 |
| Cameron | 67 | \$42.21 |
| Central--St. Joe | 40 | \$25.20 |
| Chillicothe | 150 | \$94.50 |
| Easton | 19 | \$11.97 |
| Gallatin | 108 | \$68.04 |
| Lafayette | 45 | \$28.35 |
| Lathrop | 37 | \$23.31 |
| Lawson | 66 | \$41.58 |
| LeBlond | 36 | \$22.68 |
| Lexington | 130 | \$81.90 |
| Margaritaville | 428 | \$269.64 |
| Maryville | 116 | \$73.08 |
| Maysville | 68 | \$42.84 |
| Menards | 29 | \$18.27 |
| Mid-Buchanan | 30 | \$18.90 |
| Northeast Nodaway | 138 | \$86.94 |
| Northland Christian | 48 | \$30.24 |
| North Platte | 34 | \$21.42 |
| Penney | 94 | \$59.22 |
| Plattsburg | 22 | \$13.86 |
| Rockport | 160 | \$100.80 |
| Sam's Club--St. Joseph | 44 | \$27.72 |
| Savannah | 60 | \$37.80 |
| South Nodaway | 100 | \$63.00 |
| St. Pius | 65 | \$40.95 |
| Smithville | 36 | \$22.68 |
| Stanberry | 98 | \$61.74 |
| Stewartsville | 40 | \$25.20 |
| Tarkio | 162 | \$102.06 |
| Trenton | 156 | \$98.28 |
| West Platte | 62 | \$39.06 |