## OCOUNTY SCHOOLS

the time of processing.

## TRAVEL REIMBURSEMENT FORM

## **Mingo County Board of Education**

110 Cinderella Road, Williamson, WV 25661 Phone: (304) 235-3333 F (304) 235-5070 Submit within 40 days of travel

## **OUT-OF-COUNTY**

I CERTIFY I have a valid Drivers License. YES			Today's Da	Today's Date				
		NO	School					
Yo	our Name			Title				
Address		Phone			Cell			
		email ad						
Name of	f Meeting you Attended							
Name of		n vou are submi	tting this travel exp	pense)				
Dial								
Dia you r	ide in a CAR POOL? YES NO If yes,	who drove?						
Budge	et Account Code:							
	<del>-</del>		day on separ					
	Documentation for registration f	ees, tolls, l	1	ust be atta	ched to th	is form	I	
Date	Destination	Mileage	Transport Mileage x .545	Hotel	Meals	All Other	TOTAL	
	From:		\$ -				\$ -	
	То:		7				Ÿ	
	From:		\$ -				\$ -	
	То:		'				'	
	From:	_	\$ -				\$ -	
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	То		\$ -				\$ -	
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	То		7				- ب	
	TOTALS	0		\$ -	\$ -	-	\$ -	
X								
	signature of person requesting reimbursement		<del></del>	Immediate Supervisor				
Meal Rei	mbursement Rates and Mileage to most pro	fessional				20,000,000	<del>.</del> .	
	ment sites from individual county school loca							
provided in a table that is available at all school offices and on				BOE Approval				
-	ty website. Any errors in calculation may be					•		

We will not accept faxed or emailed forms. Only the ORIGINAL will be processed for reimbursement.