

# FOREST MUNICIPAL SCHOOL DISTRICT

325 Cleveland Street • Forest, Mississippi 39074 • (601) 469-3250

## TRAVEL VOUCHER

\_\_\_\_\_ attended \_\_\_\_\_  
[Employee] [Conference or Workshop Name]

\_\_\_\_\_  
[Destination City/State]

Date of trip: \_\_\_\_\_

**Expenses for personal vehicle:** State rate: 0.535/mile X \_\_\_\_\_ # miles Total for mileage \$ \_\_\_\_\_

**Expenses for lodging:**  
(attach receipt) Total for lodging \$ \_\_\_\_\_

**Meals:**  
(Limit of \$40 per night) Total for meals: \$ \_\_\_\_\_

**Other [e.g.parking]:**  
(Attach receipt) Total for other: \$ \_\_\_\_\_

**Total Expenses:** \$ \_\_\_\_\_

(Attach to a purchase order)

\_\_\_\_\_  
Signature of person making claim

\_\_\_\_\_  
Supervisor's Authorization to Pay