



TRAVEL EXPENSE REPORT
PADUCAH BOARD OF EDUCATION
P.O. Box 2550
Paducah, Kentucky 42002-2550

NAME _____ DATE _____ ADDRESS _____

POSITION _____

PURPOSE OF TRAVEL _____

FROM _____ TO _____ DATE _____

FROM _____ TO _____ DATE _____

TRAVEL (attach receipts)

Car _____ miles @ 36¢
(mileage report) \$ _____

MOTEL \$ _____

AIRFARE \$ _____

CAR RENTAL \$ _____

TAXI \$ _____

PARKING \$ _____

FOOD \$ _____

OTHER (explain) _____

TOTAL: \$ _____

I affirm that the above statement of expense is accurate.

DATE _____

Traveler's Signature

APPROVED BY: _____

Principal/Supervisor

APPROVED BY: _____

Finance Office

CODE _____