



Beaverton Rural Schools Expense/Mileage Reimbursement Request Form

Payroll Date: _____

This form must be submitted along with a copy of map-quest directions showing the mileage, the District Professional Development Form and the Professional Development Evaluation Summary (if applicable). All receipts need to be attached as well.

Employee: _____

Date	Location	Description	Total Mileage	Amount to be Reimbursed	Training Pay? Yes or No	Account Code

TOTAL \$

Employee Signature: _____ Date: _____

- ** Mileage is reimbursed per BOE Policy #6550 - \$0.34 cents per mile.
- ** Mileage is paid between school/home (whichever is closer) and the destination. A MapQuest printout is required if destination is not listed below.
- **Common destination round trip mileage: RESD = 44 / Gladwin = 18 / Clare = 40 / Harrison = 50 / Farewell = 50 / Meridian = 42 / Midland = 56 / MMCC = 45 / CMU Mt. Pleasant = 70
- **All supporting documentation and receipts must be attached to receive reimbursement. (Receipt must specifically list items purchased – Credit Card receipts will not be accepted.)
- **Meal Allowance: Breakfast is \$8.00, Lunch is \$8.00, and Dinner is \$10.00. (No alcoholic beverage purchases will be reimbursed.)

For Administrative Use Only

Administrator / Supervisor Signature: _____ Date: _____

Superintendent Signature: _____ Date: _____

Evaluation Received

- Code # Account Number**
1. _____
 2. _____
 3. _____
 4. _____