KELSO SCHOOL DISTRICT #458 Taxable Meal Claim Form

Meals are taxable if they	are not in	conjunction	with an c	vernight	stay or w	hen they a	re not an integral part of the n	neeting.	
Name					Budget Code				
Reimbursement shall be i	in accorda	ance with Boa	rd Policy	6213P.					
Complete this form and r month. Please attach doc				fice to ta	ke receip	t <u>no later (</u>	than five (5) days upon retur	rn from trip or end o	
Γ	Date	Destination	Meals			Totals	Purpose of Trip		
			Brkfst	Lunch	Dinner				
	TOTALS:								
Due to Clai	mant				Super	visor's Ap	proval		
					Supt/I	Designee A	Approval		
Taxable Meal Claims will be included in your payroll check.					Fiscal Approval				
I hereby certify under per by me for this travel.	nalty of p	erjury that this	s is a true	e and cor	rect claim	as stated a	and that no other reimburseme	ent has been received	
BO-053			_			Signature		Date	