

**PALMYRA R-I SCHOOL DISTRICT  
REIMBURSEMENT REQUEST FOR EXPENSES**

Employee Name \_\_\_\_\_

List passengers (if any) \_\_\_\_\_

Were expenses below pre-approved on a Professional Leave Request?

\_\_\_ If YES, list activity title, date, and expense information, then submit to Central Office.

\_\_\_ If NO, list activity title, date, expense information, funding source, and have program administrator responsible for funding sign this form before submitting to Central Office.

Activity Title \_\_\_\_\_ Date \_\_\_\_\_

List each expense separately (mileage, meals, lodging, registration); attach receipts.

**ITEMIZE EXPENSES**

AMOUNT (or) # OF MILES

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

MILEAGE \_\_\_\_\_ x .40/mile = \$ \_\_\_\_\_

OTHER EXPENSES \$ \_\_\_\_\_

TOTAL REIMBURSEMENT REQUESTED \$ \_\_\_\_\_

Funding Source: \_\_\_\_\_

Administrator Signature/Date \_\_\_\_\_

APPROXIMATE MILEAGE FROM PALMYRA TO  
FREQUENTED CITIES/SCHOOLS IN OUR AREA:

BOWLING GREEN	40
CANTON	25
CENTER	25
CENTRALIA	80
COLUMBIA	105
ELSBERRY	75
EWING/HIGHLAND	25
HANNIBAL	10
JEFFERSON CITY	125
KAHOKA/CLARK CO.	50
KIRKSVILLE	75
KNOX CITY	50
LOUISIANA	50
MACON	60
MOBERLY	70
MONROE CITY	20
NORTH SHELBY	35
OSAGE BEACH	180
PHILADELPHIA	12
QUINCY, IL	20
SHELBINA	40
ST. LOUIS	120
TROY	73
VANDALIA	45