ATLANTA INDEPENDENT SCHOOL DISTRICT

TRAVEL REIMBURSEMENT REQUEST

Employee name:		Date Submitted:	
Destination:			
		Departure Date	Time
Purpose of Trip:			
		Return Date	Time

MEALS **Receipts are required to be attached. Maximum is $46 full day or $23 half day.**

Half day is defined as departure after 1 p.m. or return before 1 p.m.
Reimbursement for overnight meals only. Deduct alcohol and related tax.
Fill out the chart below with actual meal receipts not to exceed maximum.

Full Day Meals		**Half Day Meals**	
Enter Date	Enter actual amount not to exceed **$46**	Enter Date	Enter actual amount not to exceed **$23**
Totals	***$*** -		***$*** -

TOTAL MEALS $ -

LODGING Receipts are required to be attached.
Lodging reimbursable only if not prepaid by AISD.

TOTAL LODGING $ -

AUTO Use approved mileage chart or attach Mapquest document.

Evidence of unavailability of district vehicle be attached before mileage will be paid.

Enter # miles 0 miles@ **.575 per mile (Revised 1/1/2020)**

TOTAL AUTO $ -

OTHER Receipts are required to be attached.

Description	enter $	$ -
Description	enter $	$ -

TOTAL OTHER $ -

GRAND TOTAL $ -

Employee Signature

Principal/Supervisor Signature

Central Office Administrator

Budget Account Number