SAN JUAN ISLAND SCHOOL DISTRICT EXPENSE REPORT FORM

FORM 6213F, Board Policy 6213

PURCHASE ORDER NO.

NAME AND ADDRESS OF CLAIMANT

No meal allowance for day travel. For overnight travel - no breakfast allowance on departure date. Dinner allowance is not provided on return date unless departure from Anacortes is after 7 pm. Attach google maps for mileage. Attach a copy of the conference agenda if applicable. Meals may not be claimed when provided by and included in conference registration fee. Receipts for meal expenses are <u>not</u> required. Hotel, parking and other incidental expense receipts <u>must</u> be submitted with report. Authorized claims for expenses must be submitted within 30 days of the activity

See negotiated agreement regarding reimbursements for bus drivers.

					PER MEAL ENTITLEMENT				Mileage Rate:				
	FROM	TO	TIME OF	TIME OF	BKFAST	LUNCH	DINNER	ACTUAL	OTHER PER	Jan. 2023	\$0.655	GRAND	PURPOSE
DATE	(Location)	(Location)	DEPARTURE	RETURN	\$13.00	\$14.00	\$23.00	LODGING *	DETAIL *	NO. MILES	AMOUNT	TOTAL	OF TRAVEL
SUBT								SUBTOTAL:					
								LESS ADV.					
				TOTALS:									

*DETAIL OF RECEIPTS								
DATE	PAID TO	FOR	AMOUNT					

District Office/Building Use						
AMOUNT	EXPENSE TYPE	ACCOUNT CODE				

CLAIMANT'S CERTIFICATION

I hearby certify, under penalty of perjury, that this is a true and correct claim for necessary expenses incurred by me and that no payment has been received by me on account thereof.

TITLE

SUPERVISOR'S CERTIFICATION

I, the undersigned, do hereby certify under penalty of perjury, that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is just, due and unpaid, obligation against San Juan Island School District and that I am authorized to authenticate and certify to said claim.

DATE