

Sherman ISD Request to Travel

Employee Name Date

Destination

Departure Date Departure Time Return Date Return Time

Purpose of Trip and Comments

MEALS: Employees will be reimbursed by the per diem method. The per diem method allocates a rate for each meal during the day. Employees are not required to submit receipts for their meals with the per diem method. A copy of the meeting agenda, conference registration, or other approved documentation should be provided. Employees are currently reimbursed \$8.00 for breakfast, \$10.00 for lunch, and \$18.00 for dinner. Employees may qualify for per diem meals with the following conditions: Breakfast - Departure before 6:00 a.m., Lunch - Departure before 11:30 a.m., and Dinner - Return after 6:00 p.m. Employees will not qualify for meal per diem unless they are required to stay overnight.

Federal and State grants do not allow the per diem method and require receipts for all expenditures

# of Breakfast Meals	<input type="text"/>	\$8.00 per meal	Total Breakfast	<input type="text"/>
# of Lunch Meals	<input type="text"/>	\$10.00 per meal	Total Lunch	<input type="text"/>
# of Dinner Meals	<input type="text"/>	\$18.00 per meal	Total Dinner	<input type="text"/>
				Total Meals <input type="text"/>

LODGING: The hotel tax exempt form is available on the SISD website. When checking in, employees should present the tax exempt form to the hotel. The state sales tax of 6% should be deducted from the room taxcharge when calculating the cost per night.

of Nights Lodging Cost Per Night Total Lodging

TRANSPORTATION: Method(s) of Transportation

Personal Vehicle Miles @ .58.5 per mile Total Cost for Mileage

***Only one person out of a group of four attending the same event may be reimbursed for mileage.**

Mileage should be calculated by using MapQuest or Google Maps. Employees will use their campus or assignment location as the beginning address unless their residence is closer to the destination. A copy of the MapQuest or Google map calculation should be attached to the travel request. The shortest travel distance will be used to calculate the mileage reimbursement.

Riding with someone else <input type="checkbox"/>	School Vehicle <input type="checkbox"/>	Taxi, Parking Tolls, Etc. <i>*Receipts must be submitted</i>	<input type="text"/>
Airplane <input type="checkbox"/>		Airfare <i>*Receipts must be submitted</i>	<input type="text"/>

OTHER EXPENSES: All other expenses require employees to submit itemized receipts.

Other expenses <input type="text"/>	Amount	<input type="text"/>	
Other expenses <input type="text"/>	Amount	<input type="text"/>	Total Other <input type="text"/>

Budget Code <input type="text"/>	Amount	<input type="text"/>	
Budget Code <input type="text"/>	Amount	<input type="text"/>	Total Expenses <input type="text"/>

*****The completed Travel Reconciliation Form along with required itemized receipts must be returned to the Business Office within 30 days of travel.*****

Employee Signature _____ I will request reimbursement after completing my travel

Supervisor Approval _____ I am requesting an advancement of travel expenditures

Sherman ISD
Travel Reconciliation Form
To be Completed after Travel

This form and all supporting documentation should be returned to the Business Office within 30 days after your event.

Employee Name Date

Date of Travel Destination

Departure Date Departure Time Return Date Return Time

Meals Per Diem

Lodging

Miles Miles @ \$.58.5 per mile

Airfare

Taxi, Parking, Tolls, etc.

Other Expenses Description Other Amount

Other Expenses Description Other Amount

Other Information

Total Expenses

Subtract Amount Advanced by District

Due to Employee (Due to District)

Employee Signature _____

Date _____

Supervisor Signature _____

Date _____