FIREBAUGH-LAS DELTAS UNIFIED SCHOOL DISTRICT

| NAME OF EMPLOYEE: | | | Date: | _ | |
|---|---------------------------------------|----------------------|---|--|------|
| RECEIP | TS FOR MEAL | .S and MILE | AGE REIMB | URSEMENT | |
| Documentation for APY Audit Inc DF TRAVEL (e.g. Conference Age | | | | OYEE, b) DATE OF TRAVEL, c) PURF | 'OSE |
| | MILEA | GE REIMBUR | RSEMENT | | |
| Date | Destination (to and from) and Purpose | | | Number of Miles (Roundtrip) |) |
| | | | | | |
| | | | | | |
| | | | Total Miles | 0.0 | |
| Effective January 1, 2018, maximur | n rate per mile is 54.5 cent: | Mileage Rate | 0.545 | | |
| This rate changes annually January 1. | | | Total Due | \$ | - |
| Н | OTEL, AIRLINE | AND OTHER | REIMBURSEN | MENTS | |
| Date | AIRLINE COST | Hotel | Parking/Other | TOTAL COST FOR AIRLINE, HOTEL, REGISTRATION & OT | /HER |
| | - | | | \$ | |
| | | | | \$ | _ |
| | | | | \$ | _ |
| | | | | \$ | - |
| * If paid by Employee, copy of registration form & proof of payment required | | | Total Airline, Hotel & Registration Cost | \$ | - |
| | | | Total Meals Cost | \$ | - |
| CLAIMS WILL BE REJECTED BY THE FCSS AUDIT TEAM IF NON- EMPLOYEE EXPENDITURES ARE INCLUDED IN THE EMPLOYEE REIMBURSEMENT | | Total Mileage Cost | \$ | - | |
| | | | TOTAL CLAIM | \$ | - |
| | diem reimbursements h | igher than the feder | al per diem rates mu | properly track and record employee ust be included as gross wages on th | |
| | _ | | | _ | |
| Claimant | | | Administrator | | |
| Business Manager | | | Superintendent | i | |
| | Account | | | | |

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NAME OF EMPLOYEE: Date:

| Maximum Per Meal Rate | \$13.00 | \$18.00 | \$29.00 | \$60.00 | |
|-----------------------|-----------|---------|---------|----------------|---|
| with Receipts | | | | | |
| Month of: | Breakfast | Lunch | Dinner | Receipt Totals | |
| 1 | | | | \$ | - |
| 2 | | | | \$ | - |
| 3 | | | | \$ | - |
| 4 | | | | \$ | - |
| 5 | | | | \$ | - |
| 6 | | | | \$ | - |
| 7 | | | | \$ | - |
| 8 | | | | \$ | - |
| 9 | | | | \$ | - |
| 10 | | | | \$ | - |
| 11 | | | | \$ | - |
| 12 | | | | \$ | - |
| 13 | | | | \$ | - |
| 14 | | | | \$ | - |
| 15 | | | | \$ | - |
| 16 | | | | \$ | - |
| 17 | | | | \$ | - |
| 18 | | | | \$ | - |
| 19 | | | | \$ | - |
| 20 | | | | \$ | - |
| 21 | | | | \$ | - |
| 22 | | | | \$ | - |
| 23 | | | | \$ | - |
| 24 | | | | \$ | - |
| 25 | | | | \$ | - |
| 26 | | | | \$ | - |
| 27 | | | | \$ | - |
| 28 | | | | \$ | - |
| 29 | | | | \$ | - |
| 30 | | | | \$ | - |
| 31 | | | | \$ | - |
| Total Receipts | | | | \$ | _ |