



TRAVEL REIMBURSEMENT FORM

Mingo County Board of Education
 110 Cinderella Road, Williamson, WV 25661
 Phone: (304) 235-3333 F (304) 235-5070

**Submit within 40 days
of travel**

OUT-OF-COUNTY

TRIP DIRECT NUMBER _____ Today's Date _____

I CERTIFY I have a valid Drivers License. YES ___ NO ___ School _____

Your Name _____ Title _____

Address _____ Phone _____ Cell _____
 _____ email address _____

Name of Meeting you Attended _____

(OR - Reason you are submitting this travel expense)

Did you ride in a CAR POOL? YES NO If yes, who drove?

Budget Account Code: _____

List expenses for each day on separate lines

Documentation for registration fees, tolls, hotels, etc. must be attached to this form

Date	Destination	Mileage	Transport Mileage x .535	Hotel	Meals	All Other	TOTAL
	From: _____ To: _____						
	From: _____ To: _____						
	From: _____ To: _____						
	From: _____ To: _____						
	From: _____ To: _____						
	From: _____ To: _____						
	From: _____ To: _____						
	From: _____ To: _____						
	TOTALS						

X _____
signature of person requesting reimbursement

Immediate Supervisor

Meal Reimbursement Rates and Mileage to most professional development sites from individual county school locations are provided in a table that is available at all school offices and on the county website. Any errors in calculation may be corrected at the time of processing.

BOE Approval

We will not accept faxed or emailed forms. Only the ORIGINAL will be processed for reimbursement.