

EXPENSE REIMBURSEMENT REPORT

GENERAL McLANE SCHOOL DISTRICT
EDUCATION CENTER
11771 EDINBORO ROAD
EDINBORO, PA 16412

MILEAGE RATE EFFECTIVE 1/1/2022 \$.585 ***** OBTAIN & ATTACH RECEIPTS ***** REIMBURSEMENT IS TO MAXIMUM FEDERAL PER DIEM RATES

Employee's Name _____

Building Assigned _____

Purpose of Travel or Expenses _____

Location of Travel _____

Dates of Travel _____

ITEMIZED EXPENSES – ATTACH RECEIPTS

Date Incurred	Itemize separately all expenses, indicating the purpose and place the expenses were incurred (and persons for whom were paid if other than you) REIMBURSEMENT IS LIMITED TO MAXIMUM FEDERAL PER DIEM RATES PER PUBLICATION 1542	Amount
TOTAL EXPENSES		

I hereby certify that the expense itemized above were incurred by me in the performance of my duties as an employee of the General McLane School District.

Employee's signature _____ Date _____

Approved by _____ Date _____

Payment Authorized _____ Business Manager _____ Date _____

Account Number _____