

EDGEFIELD COUNTY SCHOOLS TRAVEL EXPENSE VOUCHER

Employee Name: _____ Date: _____
(PLEASE print)

Address: _____

School/Office: _____

Please circle one: mail to address on file place in interoffice mail

Expense Reimbursement Guide:

- Meal reimbursement is based on a per-diem rate and is paid for overnight stays only; no meals will be reimbursed unless the travel is overnight. An agenda of the meeting must be attached before meal reimbursement can be made. Meals that are included or furnished by others must be deducted from the per-diem allowance (example: if breakfast is provided, deduct 25% from per-diem rate, if lunch is provided, deduct 25% from per-diem rate, if dinner is provided, deduct 50% from per-diem rate)
- Receipts are required in order to be reimbursed for anything other than meals and mileage.
- Mileage will be paid from point of departure to point of destination (you may attach a Mapquest).
- Lodging is paid per hotel receipt. Charges for extra hotel services are not reimbursable. Receipts are required for all hotel stays.
- For day trips, only your mileage will be reimbursed, no meals.

TRAVEL Number of Miles: _____ X _____ /mile = _____

LODGING Number of Nights: _____ = _____
** (hotel receipt **MUST** be attached)**

MEALS Paid only for overnight stays = _____
(deduct breakfast 25%, lunch 25%, dinner 50%, if included in registration;
based on the per-diem rates below) ** (agenda of meeting **MUST** be attached)**

PER-DIEM RATES \$25.00/in-state
 \$32.00/out-of-state (includes Myrtle Beach, Hilton Head, & Charleston)

OTHER ITEMS (tolls, parking, etc.) (attach receipt) = _____

TOTAL TO BE REIMBURSED = _____

Employee's Signature: _____

Account Number: _____

Supervisor's Signature: _____

