

# Quitman County School District Voucher For Reimbursement of Expenses Incident to Official Travel

Payee Information

To: \_\_\_\_\_  
Address: \_\_\_\_\_

Conference and Travel Location

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECORD OF PAYMENT	
Date:	_____
Req No.	_____
Check No.	_____
Fund	_____

For mileage for privately owned automobile used by me for transportation, and for reimbursement for subsistence (meals and lodging) and other expenses paid by me in the discharge of official from \_\_\_\_\_, 20 \_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_ as per itemized statement within.

Amount Claimed			Amount Due (As Per Office Verification)		
For	Dollars	Cents	For	Dollars	Cents
<b>Subsistence (Meals)</b> Breakfast \$13 Lunch \$15 Dinner \$31					
<b>Travel (by Automobile) .67 rate</b> <small>updated 1.1.2024</small>					
<b>If District Vehicle available (opt out) .21 rate</b> <small>updated 1.1.2024</small>					
<b>Travel (by Public Carrier)</b>					
<b>Other Expenses</b>					
<b>Total</b>			<b>Amount Verified Correct For</b>		

Subject to any differences determined by verification. I certify that the above amount claimed by me for travel expenses for the period indicated is true and just in all respects, and that payment for any part thereof has not been received.

Approved for payment: \_\_\_\_\_ Payee: \_\_\_\_\_  
 \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_ Verified by \_\_\_\_\_ Date \_\_\_\_\_

PENALTY FOR PRESENTING FRAUDULENT CLAIM. - Fine of not more that \$250.00; civilly liable full amount received illegally; and in addition, removal from the office or position held by the person presenting such claim. (See Section 10 of H.B.: No. 223, Mississippi Laws of 1950.)

ACCOUNTING CLASSIFICATION (for completion of Administrative Office)					
APPROPRIATION AND/OR COST ACCOUNT			OBJECTIVE OR PROJECT CLASSIFICATION		
SYMBOL OR TITLE	AMOUNT		SYMBOL OR TITLE	AMOUNT	

