

TRAVEL/MILEAGE REIMBURSEMENT CLAIM

Federal Way Public Schools

| Employee: | John Doe | ID# 99999 School/Dept. ILH | | | |
|--|---|--|---------------------------------------|--|--|
| Date (example) | From – To (Destination) | Purpose (for mileage) or Description (meals, lodging, taxi) | # of Miles | Amount (attach receipt) | |
| 2-2-00 | ESC to Mall Annex & return | Meeting with staff | 1,2 | THE PERSON NAMED IN COLUMN TWO WAY AND ADDRESS OF THE PARTY OF THE PAR | |
| | Mileage as associated with program | A STATE OF THE STA | | | |
| | specialist duties for June 2016 | | | | |
| | Please see attached | | | | |
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| | | | | | |
| | | Subtotal Miles x \$0.54 = | 95.1 | \$51.35 | |
| | | Total Cost / Other | | \$ | |
| | Travel Advance Received? □ Yes□ No | Less Advance Received | | \$ (| |
| Balance Due Employee or Refund Due District (attach personal check only) | | | | 51.35 | |
| I, the unders Federal Way | igned, do hereby certify under penalty of p School District. | perjury that the claim is a just, due and | l unpaid oblige | tion against the | |
| | 917/16 | Account Code | Account Codes | | |
| Employee Si | gnature Date | | | | |
| | | | | | |
| Supervisor's | Signature Date | | | 79.4 | |
| • | <u></u> | 1100 | | | |
| | | Use procedures on rev | erse side | | |

EXAMPLE

Form 5341-A Rev. 01/16 Page 2

Budget Approval Signature

EXAMPLE

Travel Reimbursement Claim

| Name: | John Doe | Month: | June |
|-------|----------|--------|------|
| | | | |

| Date | From | То | Distance | Reason |
|-----------|------|------|----------|-------------------|
| 3-Jun-16 | ESC | MIR | 2.0 | Materials |
| 3-Jun-16 | MIR | WIL | 1.9 | Check in |
| 3-Jun-16 | WIL | ESC | 3.3 | Return |
| 7-Jun-16 | ESC | CAM | 4.6 | CR Visit |
| 7-Jun-16 | CAM | ESC | 4.6 | Return |
| 8-Jun-16 | ESC | MIR | 2.0 | Eval Mtg |
| 8-Jun-16 | MIR | ESC | 2.0 | Return |
| 9-Jun-16 | ESC | MIR | 2.0 | IEP Meeting |
| 9-Jun-16 | MIR | LGV | 1.0 | Check in |
| 9-Jun-16 | LGV | ESC | 2.2 | Return |
| 9-Jun-16 | ESC | MIR | 2.0 | IEP Meeting |
| 9-Jun-16 | MIR | ESC | 2.0 | Return |
| 10-Jun-16 | VLH | ESC | 6.6 | IEP Meeting |
| 10-Jun-16 | ESC | NRM | 2.5 | Check in |
| 10-Jun-16 | NRM | ESC | 2.5 | Return |
| 10-Jun-16 | ESC | CAM | 4.6 | Interviews |
| 10-Jun-16 | CAM | ESC | 4.6 | Return |
| 13-Jun-16 | ESC | NAU | 4.1 | Dept Mtg |
| 13-Jun-16 | NAU | MIR | 2.7 | Check in |
| 13-Jun-16 | MIR | ESC | 2.0 | Return |
| 14-Jun-16 | ESC | CAM | 4.6 | IEP Meeting |
| 14-Jun-16 | CAM | ESC | 4.6 | Return |
| 15-Jun-16 | ESC | LGV | 2.2 | Check in |
| 15-Jun-16 | LGV | WIL | 2.7 | Check in |
| 15-Jun-16 | WIL | ESC | 3.3 | Return |
| 15-Jun-16 | ESC | MIR | 2.0 | Pick up materials |
| 16-Jun-16 | MIR | ESC | 2.0 | Return |
| 16-Jun-16 | ESC | TBHS | 2.9 | ESY |
| 16-Jun-16 | TBHS | NRM | 4.1 | ESY |
| 16-Jun-16 | NRM | ESC | 2.5 | Return |
| 17-Jun-16 | ESC | NRM | 2.5 | Materials |
| 17-Jun-16 | NRM | ESC | 2.5 | Return |
| | | | ļ | |

Column Total:

95.1

Column Total:

0.0

I hereby certify under penalty of perjury that this is a true and correct claim for necessary expenses incurred by me and that no payment has been received by me on account thereof.

Total Mileage: Pay (\$0.54/mile): 95.1 \$51.35

Signature

Updated 07.11.11.mc 2-11-14.tf 2-1-15 tf

EXAMPLE