

**SNOOK ISD EMPLOYEE EXPENSE REPORT FOR
NON-OVERNIGHT TRAVEL**

Employee Name _____

Trip Origin _____

Trip Destination _____

Departure Date _____

Return Date _____

Departure Time _____

Return Time _____

Purpose of Trip

Only actual meal expenses (minus sales tax) up to the allowable limit per meal (breakfast - \$8.00, lunch - \$12.00, dinner - \$16.00) will be reimbursed; itemized receipts must be attached.

Breakfast _____

Lunch _____

Dinner _____

Mileage: _____ miles @ \$0.67 _____

Parking: _____

Other (Explain): _____

Advance/Prepayment: _____

Total Due to Employee: _____

Employee Signature

Supervisor Signature

Date Submitted to Business Office