George County School District

In-District Travel Reimbursement Voucher

This form will be the authorized reporting form for mileage reimbursement for employees whose job assignments require them to travel using their personal vehicles in the performance of their duties.

Policy Reference: DJD Expense Reimbursements

Name			Job Title	
Travel Period		to	Expenditure Code	
Travel Date			Trip Routing: Include All Stops	Miles Traveled
Office Use:			Total Miles this Page	
Vendor #			Miles from back side of form	
Invoice #			Total Miles	
ACH information	on has been		Reimbursement Amount effective 1/1/2025	
submitted:		<u> </u>		
			I to perform the duties of my job assignment as indicated ement for such travel as per board policy.	on the above
			eive a paper check and I verify that my ACH deposit inform	nation has been
submitted to th				
Employee Signature Supervisor Approval				

Travel Date	Trip Routing: Include All Stops	Miles Traveled
	Total Miles this Page	