# *Meriwether County School System*

Employee Expense Statement

2021 - 2022

| NAME | | | | SS# | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| LOCATION | | | | Mth. Ending | | | | | | | | | |
| Date | Time Departed/ Arrived | From/To | Odom. Reading/ Beginning | # Local Use Miles | Other Transp. | Total Transp. | B'Fast | Lunch | Dinner | Total Meals | Lodging (Attach Receipt) | Total Subsist. | Other Expenses |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| | | | Total Miles | | Total Transp. | | Total Subsistence | | | | Total Other | | |
| | | | | | | | | | | | | | |

Employee's Signature Date

Supervisor's Signature Date

Program Director's Signature Date

CFO's Signature Date

| | **Total to be reimbursed:** | | | | | | |
|---|---|---|---|---|---|---|---|
| | Account Coding | | | | | | |
| | Fund Codg | Proj Codg | Funct Codg | Obj Codg | Fac Codg | Amount | **Purpose of Travel** |
| Prepaid Expend. | | | 0181 | | | | |
| Travel Expend. | | | | 580 | | | |
| Dues/Fees Expend | | | | 810 | | | |
| Other Expend. | | | | | | | |
| Other Expend. | | | | | | | |
| Net Reimbursement check to the employee | | | | | | | |

I do solemnly swear, under penalty provided by law, that the above statements are true and I have incurred the described expenses and the Local use mileage in the discharge of my official duties for the Meriwether County School System.

**2021 Mileage Rate: .56 Effective 1.4.2021**