ROCKFORD BOARD OF EDUCATION
SCHOOL DISTRICT #205
TRAVEL VOUCHER

Employee Name: _____ (Last / First)

Expenses from: _____ (Start Date) Through _____ (End Date)

Location (School, Dept): _____

Home Address: _____ (Street)

Account # Charged: _____ (Confirm with Budget)

_____ (City, State, Zip)

_____ (Phone)

BUSINESS PURPOSE OF TRIP _____

_____

_____

ATTACH APPROVED "REQUEST FOR LEAVE" AND ALL RECEIPTS

Date(s) of Leave	Explanation	Transportation	Lodging	Meals (Incl. tips) (See Reverse)	Registration	Misc. (Explain On Reverse)	TOTAL
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
Sub-Total		$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Less Charges Billed Direct to District:							
Enter these values as negative numbers i.e. -45.31		< >	< >	< >	< >	< >	< $0.00 >
TOTALS		$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Enter travel advance as a negative nuimber i.e. -100.50						Less Travel Advance Received	
						TOTAL DUE TO (FROM) EMPLOYEE	$0.00

This information is correct and accurate to the best of my knowledge and belief.

_____ Employee Signature Date

_____ Supervisor Approval Date

5800330 / 9-94

TRAVEL VOUCHER

Employee Name: _____ _____

MEALS - *Provide details below for meals hosted by employee and claimed on travel voucher.*

DATE	ATTENDEES' NAMES, TITLES, ORGANIZATIONS	RESTAURANT NAME, CITY, STATE	MEAL AMOUNT

MISCELLANEOUS - *Provide details for miscellaneous claimed on travel voucher.*

DATE	DESCRIPTION	AMOUNT