

# Lamar County Board of Education Travel Report

Name & Address
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Date	Points of Travel	Mileage
Total		
Total Mileage _ at \$0.56 / mile		\$
Total Expenses		\$
Total Claim		\$

**Expenses:**

Meals: \_\_\_\_\_

Lodging: \_\_\_\_\_

Registration: \_\_\_\_\_

Other (list): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Approved by

**For Office Use Only**

Accounting Code: \_\_\_\_\_