

**LONDON ISD
Travel Voucher**

Name: _____
Event: _____
Location: _____
Date(s): _____
PO #: _____

	AMOUNT
MILEAGE (# miles _____ X .50¢): Notes: _____	
HOTEL (receipt required): Notes: _____	
MEALS (receipts required): Notes: _____	
OTHER ALLOWABLE TRAVEL EXPENSES: (airfare, taxi, rental car, phone, parking) receipts required-list separately Notes: _____	

TOTAL TRAVEL EXPENSES _____

less: Advance (Ck. # _____) _____

Total due to employee or district _____

District Approval Date

Employee Signature Date

ACCOUNT CODE(S): _____

***Form is to be turned in to the Business Office upon return with
receipts attached.***