

Claimant

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School

11

<i>MM/DD/YY</i>	<i>Destination &amp; Purpose:</i>	<i>Klm:</i>	<i>Rate:</i>	<i>Total:</i>
	<b>Total:</b>			

## Expense Claim

[illegible]**Account Code:**

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Signature of Authorized Personnel

**\*Breakfast: if you leave your school community before 7:00 a.m.**

**\*Supper: if you return to your school community after 6:00 p.m.**