Rumson School District Expense Report

								_			
Employee:											
School:											
Board Approval Date:											
Purpose of Travel:											
								_			
Reflection of	how and when this PD wi	ll be applied:									
								_			
			(A)	(B)	(C)	(D)	(E)	(F)	(G)		
			Total								
_ ,		a and study	Mileage @								
Date(s)	Destination	Mileage**	.31/mile	Tolls**	Train	Bus	Taxi	Parking	Other	11,	Total of A-G
H			\$	\$	\$	\$	\$	\$	\$	\$	
H										#	
H							-			#	
										╫	
										#	
							CDANI	D TOTAL		H	
							GRAN	D TOTAL		\$	
Employee Sie	rnatura				Date:						
Employee Sig	mature.			•	Date.					_	
Supervisor Signature:					Date:						
Supervisor Si	giiature.				Date.					_	
				**Mileage:	Fauals RT r	miles betwe	en 60 Forrest	Avenue and	the PD Dest	ination	
**All Mileage and Tolls involve a calculation as follows:				······caBer	Equals RT miles between 60 Forrest Avenue and the PD Destination LESS RT miles beween your home and 60 Forrest Avenue						
Receipts must be attached for reimbursement					2200 M. Miles Seriesti your home and our orrest/Wende						
Submit this form with a voucher for payment				**Tolls:	Equals the total of RT Tolls between 60 Forrest Avenue and the PD Destination						
, pa ₁					IFSS the total of RT Tolls between your home and 60 Forrest Avenue						