## HAYWOOD COUNTY SCHOOLS

Local Travel Reimbursement Schedule

Date Subm	itted	No							
								_	
Name:		ıt/School:		Position:					
Travel Account									
Approval is conting									
Day of Month	Official Travel								Miles
	From To							Purpose of Travel	Traveled
	•	•	•	•	•	•	•		0
	-	•	~	•	~	-	~		0
	•	•	•	•	•	•	•		0
	•	•	•	•	•	•	•		0
	•	•	•	•	•	•	•		0
	•	•	•	•	•	•	•		0
	•	•	•	•	•	•	•		0
	•	▼	•	•	•	▼	•		0
	•	•	•	•	•	•	•		0
	•	•	•	•	•	•	•		0
	•	<b>V</b>	•	•	•	•	•		0
	•	•	•	•	•	•	•		0
	_	_	_	_	_	_	_		0
		_	<b>-</b>		<b>~</b>		_		0
	<b>▼</b>	<b>~</b>	<b>*</b>	•	<b>V</b>	<b>*</b>	<b>~</b>		0
	<b>~</b>	<b>V</b>	<b>*</b>		<b>*</b>	<b>—</b>	<b>*</b>		0
	▼	▼	▼	▼	▼	<b>~</b>	▼		0
	~	_	_	_	~	_	~		0
	▼	•	•	•	•	•	•		0
Total Travel Expense 0 miles @ \$0.545 per mile									\$0.00
Related Other Exp	penses (itemize):							-	
TOTAL TRAVEL AND OTHER RELATED EXPENSES PAID:  PAYEE CERTIFICATE: This is a true and accurate statement of expenses incurred in discharged official business.									\$0.00
PAYEE CERTIF	TCATE: This is	a true and accur	Date	f expenses incu	rred in discharge				Date
Cialinant		Date				Approving Official			