

**Gadsden City High School Travel Reimbursement  
(to be paid from school activity/funds)**

DATE: \_\_\_\_\_ PO# \_\_\_\_\_

Miles traveled in personal car: \_\_\_\_\_ x .50 per mile

= AMOUNT: \_\_\_\_\_

PAYABLE TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PURPOSE OF TRAVEL \_\_\_\_\_

DATE(S) OF TRAVEL \_\_\_\_\_

LOCATION OF EVENT \_\_\_\_\_

DATE CHECK IS NEEDED:

- Mail Check
- Place check in Employee Mailbox
- Bookkeeper will hold for pick up

ACTIVITY TO CHARGE: \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

Attach documentation regarding expenditure. (Ex: event schedule)

APPROVED BY: \_\_\_\_\_

Principal