

LUMPKIN COUNTY SCHOOLS
 51 MOUNTAIN VIEW DRIVE
 DAHLONEGA, GEORGIA 30533
 706 864-3611

GEORGIA DEPARTMENT OF EDUCATION
 EMPLOYEE EXPENSE STATEMENT

REFERENCE _____
 (for accounting use)
 MONTH ENDING _____
 AUTO TAG NUMBER _____

Employee _____ Phone Number _____ SS # _____ Location _____

Place of Residence _____
 Street _____ City _____ State _____ Zip _____

EXPLAIN EXPENSES THAT ARE UNUSUAL OR EXCEED ESTABLISHED LIMITS: _____

** FOR ACCOUNTING USE ONLY** POSTING CODE _____

ODOMETER READINGS SUSTAINING STATE MILEAGE MUST BE RECORDED ON THE BACK OF THIS FORM

Date		Departure Time	Arrival Time	Location	Breakfast	Lunch	Dinner	Total Meals	Location	Lodging	Total Meals & Lodging
Mo.	Day										
					\$	\$	\$	\$		\$	\$
1. TOTAL										\$	

Date	Common Carrier/Taxi/Limousine	Amount
		\$
2. TOTAL		\$

Date	Miscellaneous	Amount
		\$
3. TOTAL		\$

"I DO SOLEMNLY SWEAR, UNDER CRIMINAL PENALTY OF A FELONY FOR FALSE STATEMENTS SUBJECT TO PUNISHMENT BY FINE OF NOT MORE THAN \$1,000 OR BY IMPRISONMENT FOR NOT LESS THAN ONE NOR MORE THAN FIVE YEARS, THAT THE ABOVE STATEMENTS ARE TRUE AND I HAVE INCURRED THE DESCRIBED EXPENSES AND THE STATE USE MILEAGE IN THE DISCHARGE OF MY OFFICIAL DUTIES FOR THE STATE."

SIGNATURE _____ Date _____

APPROVED _____ Date _____

APPROVED _____ Date _____

Audited By _____

1. TOTAL MEALS & LODGING (attach lodging receipts) \$ _____

2. COMMON CARRIER EXPENSE _____

3. MISCELLANEOUS EXPENSE _____

4. STATE USE MILEAGE _____ MILES AT _____ CENTS/MILE _____

TOTAL EXPENSES (1+2+3+4) \$ _____

LESS TRAVEL ADVANCE AND/OR AIRLINE TICKET \$ _____

TOTAL DUE \$ _____

