

**Expense Report/ Reimbursement Form
2018**

Name: Dr. Pamela Magee Date: 1/3/2018 P.O. # _____

Date	Vendor	Description	Office Supplies 4350	Classroom Materials 4310	Conferences 5220	Comm/Postage 5920	Other*	Business Miles	Rate Per Mile	Total Mileage
11/7/2017	Dr. Magee	Curriculum Counsel Meeting					\$31.47		0.535	-
12/4/2017	Dr. Magee	Curriculum Counsel Meeting					\$88.00		0.535	-
12/11/2017	Dr. Magee	Legal Training in Pasadena (Special Ed Training) Garage					\$6.00		0.535	-
12/6/2017	Dr. Magee	Consultant Lunch E Noguera					\$58.15		0.535	-
12/6/2017	Dr. Magee	Main Office Supplies	\$83.90						0.535	-
1/17/2018	dr. Magee	Curriculum Counsel Meeting (Cash Reimbursement)					\$25.99		0.535	-
1/17/2018	dr. Magee	Curriculum Counsel Meeting					\$33.05		0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
									0.535	-
Total			83.90	-	-	-	242.66	-	0.535	-

Grand Total	\$	326.56
Charged Amount	\$	326.56
Net Due Employee		\$25.99

Employee Signature: _____
 Approved By: _____
 Date: _____
 Department/Program Name & #: _____

*-Provide full description on amounts in this column to allow for proper identification
 Please submit original receipts for reimbursement. Reimbursement forms must be submitted within 30 days of purchase.