Staple documentation supporting all expenditures (i.e., receipts, invoices, memos)

Pittsford District Teachers' Association
Expense Reimbursement Voucher

Name:

Purpose of Expense:

Date of Expense	Expense Item	Miles Driven	Amount of Expense
		Total Due	$

Provide full explanation of each expense item. Example: # of miles driven, tolls, parking fees, public transportation costs, hotel charge, meals, etc. Alcohol will not be reimbursed. **PLEASE CALCULATE YOUR MILEAGE EXPENSE AND INCLUDE ABOVE. 2024 mileage rate = $ 0.67**

_____   _____
Signature   Date   Approved by   Date