

Pana Community Unit School District No. 8
Pana, Illinois

Meeting: _____

Place: _____

Date: _____

Mileage: _____ miles @ \$.50 per mile = \$ _____

Registration Fee: \$ _____

Hotel Room: \$ _____

Meals: \$ _____

Tips/Fares: \$ _____

Other: \$ _____

Total Expenses \$ _____

Signed _____
(Teacher)

Please indicate to which area expense should be charged:

Athletic Travel _____
 Baseball _____
 Basketball _____
 Cheerleading _____
 Football _____
 Golf _____
 Softball _____
 Track _____
 Volleyball _____
Staff Development _____
Nurse Travel _____
Elementary Travel _____
Jr. High Travel _____
Sr. High Travel _____

Superintendent Travel _____
Principal Travel _____
Lunchroom Travel _____
Library Travel _____
Grant Travel _____
 Title I _____
 Title II _____
Transportation Travel _____
Adult Ed. Travel _____
Tech. Travel _____
Band Travel _____
Chorus Travel _____
Other (specify) _____