

**LOUISIANA SCHOOL FOR THE DEAF
Travel Claim Form**

Please Print

Student: _____

Street Address: _____

City: _____

Zip: _____

Telephone: _____

Please fill in the appropriate date traveled by car from home to LSD, the beginning and ending odometer readings, and the number of miles traveled. LSD can only reimburse for a one-way trip (the trip bringing the child to school and the trip returning the child home). **Odometer readings must be filled in completely. Reimbursements will be done MONTHLY and claim forms are due on the 10th of each month. Please do not use the back of the form and be sure to sign and date the form. Please DO NOT** wait until the end of the school year to turn in a whole year's worth of travel reimbursement. Forms must be filled out completely in order to process in a timely manner. Your child's school attendance and mileage from the address on the form to the school will be verified for state auditing purposes. Payments will be processed in a timely manner. Requests received after the deadlines listed may not be honored because of funding. **Please turn all forms in on time. All forms for the current school year must be turned in no later than June 15th. Any forms turned in after June 15th may not be honored.**

Name of Parent/Guardian (Please Print): _____

Date Traveled	Beginning Odometer Reading	Ending Odometer Reading	Total Miles
1.	a.m.		
	p.m.		
2.	a.m.		
	p.m.		
3.	a.m.		
	p.m.		
4.	a.m.		
	p.m.		
5.	a.m.		
	p.m.		
6.	a.m.		
	p.m.		
7.	a.m.		
	p.m.		
8.	a.m.		
	p.m.		
9.	a.m.		
	p.m.		
10	a.m.		
	p.m.		
Total Number of Days Traveled			
Total Mileage			

Parent/Guardian Signature: _____ Date: _____

Transportation Coordinator Use Only		Business Office Use Only	
Date Received:		Date Received:	
Cost Center:		Check Number:	
Computation/Total Due:	_____ X .48=\$	Amount of Check:	
Verified by:		Date Check Mailed:	
Approved by Admin SLD:		Accountant:	

This form should be **submitted/mailed directly to:**
Louisiana School for the Deaf, P.O. Box 3074, Baton Rouge, LA 70821/Attn: Transportation Coordinator.