SOUTHERN PLAINS EDUCATION COOPERATIVE
1200 North Park Street
Fairmont, MN 56031
Phone: (507) 238.1472 Fax (507) 238-2361

EXPENSE FORM 2024-2025 (after January 1, 2025)

DATE OF EXPENSE	PURPOSE	TO FROM	MILES	IN-TOWN	OTHER (PARKING, FOOD) ATTACH

SEND CHECK TO: (circle one)	MAIL: *Home address on file*	SCHOOL MAILBOX: *circle one*				OTHER: *note below*
		ARISE	SPEC	FHS	FES	
	Special notes or instructions:					

Signature:	Date:	RETURN TO JUDY BERKLAND: SPEC OFFICE
Print Name:	Program:	

ALL EXPENSES FOR THE 2024-2025 SCHOOL YEAR NEED TO BE TURNED IN NO LATER THAN JULY 1ST, 2025

FOR OFFICE USE ONLY

ACCOUNT CODE	AMOUNT	ACCOUNT CODE	AMOUNT

MILES DRIVEN ( ) X $ 0.70 = $	OTHER EXPENSES $
TOTAL EXPENSES $	PROGRAM
DIRECTOR'S SIGNATURE	**DATE**

UPDATED 03/25/2025