

Please enter current mileage rate: (i.e. .35)

0.46

Month:

Dec 2014

Employee: Taylor Schlosser
Address: _____

Employer: Board of Education of Marion County
Address: 755 East Main Street, Lebanon, Kentucky

[illegible]

I hereby certify that all items of expense included in the above statement were incurred in the discharge of official business in connection with my duties as _____.

No meal reimbursement was requested for any meals provided as part of the activity or conference.

--An overnight is required for reimbursement of meals

Maximum meal reimbursement including gratuity - \$78/15 or \$89/19 (high rate areas)

--Original itemized meal receipt is required. Gratuity can not exceed 20%

- For lodging to be reimbursed, an original, itemized receipt is required

---Registration fee, parking, tolls, etc. may be reimbursed with original receipts

—Credit card slips, registration forms, or check copies are not accepted as receipts

---Please see the official policy and/or procedures for complete details

(Signature of Principal/Supervisor)

2011071-0580 Pgs. 64

0011071-0532 125.00

(Fund to be Charged)

(Signature of Employee)

(Date)

rdlb -10/2004