

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

Month:

Mar 15

Address: 755 East Main Street, Lebanon, Kentucky

[illegible]

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 - \$7/8/15 or \$8/9/19 (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)

0011071-0580

(Fund to be Charged)

(Signature of Employee)

(Date)