## TRAVEL VOUCHER

(Fund to be Charged)		(Signati		,	I hereby certify t														6/15/2015		6/10/2015	Date & Time of Departure	Address:	Employee:	Please enter cı
	0011071-0580	are of Pr			hat all i														8		8	From			urrent i
	1-0580	(Signature of Principal/Supervisor)			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:														Bowling Green & Return		Lexington	Destination	316 Harmony Lane, Springfield	Taylora Schlosser	Please enter current mileage rate: (i.e35)
Credit card slips, registration forms, or check copies are not accepted as receiptsPlease see the official policy and/or procedures for complete details.	For lodging to be reimbursed, an original, itemized receipt is required. Registration fee, parking, tolls, etc. may be reimbursed with original re-	-Original itemized meal receipt is required. Gratuity can not exceed 20%.	An overnight is required for reimbursement of mealsMaximum meal reimbursement including gratuity - \$7/8/15 or \$8/9/19 (high rate areas)	No meal reim	n the above stat														GRREC Summer Leadership Mtg		KASS Conference	Purpose	gfield		0.41
	eimbursed, an ori arking, tolls, etc. i			nbursement	ement were	<del>(S)</del>													mer Leaders		ence	Breakfast	Address:	I.	' :
	gınal, itemized re nay be reimburse			No meal reimbursement was requested for any meals provided as part of the activity or conference	incurred in	<del>сэ</del> -													ship Mtg			Meals Lunch		Employer:	
	-ror loaging to be reimbursed, an original, itemized receipt is required.  -Registration fee, parking, tolls, etc. may be reimbursed with original receipts.				the dischard	<del>\$</del>																Dinner	755 East N	Board of Education of Marion County	į
				neals provid	e of official	350.0													215		135	Mileage Miles Ct	lain Street	ducation	
(Date) rdb -10/2004	(		, all toller	ted as part	business ir	143.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	88.15	0.00	55.35	age Charge	≬ain Street, Lebanon, Kentucky	of Marion C	
	6/30/15			of the activi	connection																	Otl (Specify)	Kentucky	County	Month:
		(Signature of Employee)		y or confere	with my du	<del>(\$</del>																Other y) Amount			June 2015
				ince.	ties as:	\$ 143.50	\$ -	<del>\$</del>	<del>\$</del>	<del>\$</del>	\$ -	<del>\$</del>	<del>\$</del>	<b>⇔</b> -	\$ -	<del>\$</del>	<del>69</del>	\$ -	\$ 88.15	<del>\$</del>	\$ 55.35	Total Charge			