TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	AME Jay Brewer			
POSITION	Superintendent			
SUBMITTED FOR:	Jul-15			
DATE	August-15			

DAYTON INDEPENDENT SCHOOLS TRAVEL REIMBURSEMENT FORM

					X /PER MIL	E						
DATE	PURPOSE OF TRIP	FROM	то	# MILES	*	_	MEALS	LO	DGING	M	ISC.*	 TOTAL
7/272015	KASA Ethics Meeting	Dayton	Erlanger	28	\$ 0.4	13	\$ -	\$	-	\$	-	\$ 12.04
8/4/2015	KASA Ethics Meeting	Dayton	Erlanger	28	\$ 0.4	13	\$ -	\$	-	\$	-	\$ 12.04
8/262015	NKCES Superintendent Meeting	Dayton	Gateway	32	\$ 0.4	13	\$ -	\$	-	\$	-	\$ 13.76
							\$ -	\$	-	\$	=	
							\$ -	\$	_	\$	-	
							\$ -	\$		\$	-	
TOTALS							\$ -	\$	-	\$		\$ 37.84

^{*} CHECK MILEAGE RATE WITH CENTRAL OFFICE. RATES SUBJECT TO CHANGE QUARTERLY BASED ON STATE MILEAGE RATE

A DETAILED RECEIPT MUST BE SUBMITTED FOR ALL CHARGES TO INCLUDE: LODGING, MEAL CHARGES, TOLLS, ETC. ALL MISCELLANOUS CHARGES MUST BE EXPLAINED ON THE REVERSE SIDE OF THIS FORM.

I certify that the amount requested is a correct statement of the amount due as itemized above.

Signature