

TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent	
SUBMITTED FOR:	November	
DATE	November-15	

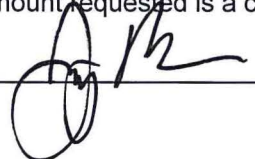
DAYTON INDEPENDENT SCHOOLS
TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	TO	# MILES	X /PER MILE *	MEALS	LODGING	MISC.*	TOTAL
11/11/2015	Regional Superintendent Meeting	Dayton	Gateway	32	\$ 0.40	\$ -	\$ -	\$ -	\$ 12.80
11/12/2015	United Way Action Meeting	Dayton	Central Bank	30	\$ 0.40	\$ -	\$ -	\$ -	\$ 12.00
11/18/2015	Early Childhood Summit	Dayton	Frankfort	184	\$ 0.40	\$ -	\$ -	\$ -	\$ 73.60
11/1/2015	NKCES Data Report	Dayton	Gateway	32	\$0.40	\$ -	\$ -	\$ -	\$12.80
						\$ -	\$ -	\$ -	
						\$ -	\$ -	\$ -	
TOTALS						\$ -	\$ -	\$ -	\$ 111.20

* 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 MISCELLANEOUS 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.


11/16/15

 Signature