

# TRAVEL EXPENSE VOUCHER

## DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent	
SUBMITTED FOR:	May-16	
DATE	May-16	


DAYTON INDEPENDENT SCHOOLS  
TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	TO	# MILES	X /PER MILE *	MEALS	LODGING	MISC.*	TOTAL
5/2/2016	Superintendent Summit	Dayton	Frankfort	180	\$ 0.39	\$ -	\$ -	\$ -	\$ 70.20
5/11/2016	NKCES Regional Meeting	Dayton	Gateway	32	\$ 0.39	\$ -	\$ -	\$ -	\$ 11.70
5/12/2016	Regional School Awards	Dayton	NKCES	14	\$ 0.39	\$ -	\$ -	\$ -	\$ 5.46
5/16/2016	Executive Director Evaluation	Dayton	NKCES	14	\$0.39	\$ -	\$ -	\$ -	\$5.46
5/17/2016	English Language Learners Program	Dayton	NKCES	14	\$ 0.39	\$ -	\$ -	\$ -	\$ 5.46
5/23/2016	Summer Learning Meeting	Dayton	NKCES	28	\$ 0.39	\$ -	\$ -	\$ -	\$ 10.92
<b>TOTALS</b>						\$ -	\$ -	\$ -	\$ 109.20

\* 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.

 5/23/16  
Signature