## TRAVEL VOUCHER

(Fu	00	(Signature			I nereby certify that												1/20/2017 L-ton	1/19/2017 CO	1/18/2017 CO	1/5/2017 Fr	1/4/2017 CO	Date & Time of Departure F	Address:		Please enter curi
(Fund to be Charged)	0011075-0580	(Signature of Principal/Supervisor)			No meal reimbursement was requested for any n														D Lexington, KY	1/5/2017 Frankfd Springfield	O Frankfort, KY	From Destination	Taylora Schlosser	Taylors Schlosser	Please enter current mileage rate: (i.e35)
-Credit card slips, registration forms, or check copies are not accepted as receipts.  -Please see the official policy and/or procedures for complete details	-Registration fee, parking, tolls, etc. may be reimbursed with original receipts	<ul> <li>Original itemized meal receipt is required. Arianuty can not exceed 20%.</li> <li>For lodging to be reimbursed, an original, itemized receipt is required.</li> </ul>	Maximum mearre	<ul> <li>An overnight is required for reimbursement of meals.</li> <li>Maximum meal reimbursement including gratuity - \$7/8/15 or \$8/9/19 (high rate areas).</li> </ul>	No meal rein	in the above sta											Next Gen Pres	Next Gen Presentation	CKEC Mtg	GRREC Mtg &	GRREC Mtg & LEAD Conf	Purpose			0.4
		neai receipt is rec eimbursed, an ori	mbursement incl		nbursement	\$ 14.00											\$ 7.00	sentation		\$ 7.00	LEAD Con	Breakfast			•
		ginal, itemized re	uuilig giaiuily - s		was reques	\$ 24.00	1										\$ 8.00	\$ 8.00		\$ 8.00		Meals Lunch	Address:	Employer	
	d with original re	an not exceed 20: ceipt is required.	/8/15 or \$8/9/19 (high rate areas) in not exceed 20%.		ne 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.	\$ 30.00	•											\$ 15.00			\$ 15.00	Dinner	755 East Main Street, Lebanon, Kentucky	Roard of Education of Marion County	
	ceipts.	· · ·				3/0.0											52.5	67.5	135	52.5	62.5	Mileage Miles Ct	lain Street	ducation o	
(Date)	2/1/17		ÿ.	2 	ded as part	148.00 husiness in	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	21.00	27.00	54.00	21.00	25.00	age Charge	, Lebanon,	of Marion C	
		, amprifiket	(SX)	200	of the activ	connection																Ot (Specify)	<u>.</u>	County	Month:
			of Employon		the activity or conference	with my d																Other y) Amount			Jan 2017
		3			ence.	\$ 216.00	ı	) <del>(</del>	49	<del>()</del>	<del>()</del>	<del>\$</del>	<del>69</del>	<b>⇔</b>	\$	<del>69</del>	\$ 36.00	\$ 50.00	\$ 54.00	\$ 36.00	\$ 40.00	Total Charge			