TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent]
SUBMITTED FOR:	Feb]
DATE	February-17	s

DAYTON INDEPENDENT SCHOOLS TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	то	# MILES	X /PER MILE		MEALS		LODGING		G MISC.*		TOTAL
2/6/2017	Prichard Com. On Early Childhood	Dayton	Frankfort	164	\$	0.40	\$	_	\$	_	\$	-	\$ 65.60
2/7/2017	Chamber of Commerce	Dayton	Ft. Wright	16	\$	0.40	\$	-	\$	-	\$	_	\$ 6.40
2/7/2017	NKEAT	Dayton	Florence	22	\$	0.40	\$	-	\$	-	\$	-	\$ 8.80
2/9/2017	Action Council	Dayton	Florence	22		\$0.40	\$	-	\$	-	\$	-	\$8.80
2/15/2017	#loveKYschools committee	Dayton	Walton	38	\$	0.40	\$	-	\$	-	\$	-	\$ 15.20
2/23/2017	KSBA and KASA	Dayton	Louisville	182	\$	0.40	\$	-	\$	-	\$	=	\$ 60.80
TOTALS							\$	-	\$	-	\$	-	\$ -165.60-

^{*} 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

TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent	
SUBMITTED FOR:	Feb-17	
DATE	Feb 17 Page two	

DAYTON INDEPENDENT SCHOOLS TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	то	# MILES	X /PER MILE		MEALS		LODGING		M	SC.*	7	OTAL
2/27/2017	Ky Health Presenation of Core Life	Dayton	Elizabethtown	248	\$	0.40	\$	-	\$	-	\$	-	\$	99.20
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							\$	*	\$	-	\$	-		
<u>TOTALS</u>							\$	=	\$	* = 1	\$	-	\$	264.80

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