TRAVEL VOUCHER

| lease enter current | Please enter current mileage rate: (i.e35) | 0.4 | | | | | | Month: | May/June 2017 | 2017 |
|----------------------------------|--|--|--------------------------------------|--|-----------------------------------|---------------------------|--|-------------------|-------------------------------|--------------------|
| Employee: | Taylora Schlosser | | | Employer: Address: | Board of Ed 755 East Ma | | Board of Education of Marion County 755 East Main Street, Lebanon, Kentucky | ounty Kentucky | | |
| Date & Time of Departure From | Destination | Purpose | Breakfast | Meals Lunch | Dinner | Miles | Mileage s Charge | Ot (Specify) | Other y) Amount | Total Charge |
| S-field | MCHS | Baseball Tournament | nament | | | 20 | 8.00 | | | \$ 8.00 |
| 5/30/2017 Lebano | 5/30/2017 Leband E-town/N. Hardin HS | Softball Tournament | ament | | | 90 | 36.00 | | | \$ 36.00 |
| 6/7/2017 S-field | Frankfort | KASA | | | | 105 | 42.00 | | | \$ 42.00 |
| 6/8/2017 S-field | Lexington | Baseball Tournament | nament | | | 115 | 46.00 | | | \$ 46.00 |
| 6/16/2017 S-field | Lexington | Baseball State Games | Games | | | 115 | 46.00 | | | \$ 46.00 |
| 6/19/2017 S-field | Louisville | Airport for PLC Conference | Conference | \$ 9.00 | \$ 19.00 | 60 | 24.00 | | | \$ 52.00 |
| 6/19/2017 | San Antonio, TX | PLC Conferen | \$ 8.00 | \$ 9.00 | \$ 19.00 | | 0.00 | | | \$ 28.00 |
| | San Antonio, TX | PLC Conferen | \$ 8.00 | \$ 9.00 | \$ 19.00 | | 0.00 | | | \$ 36.00 |
| 6/21/2017 | San Antonio, TX | PLC Conferen | \$ 8.00 | \$ 9.00 | \$ 19.00 | | 0.00 | | | \$ 36.00 |
| 6/22/2017 | San Antonio, TX | PLC Conferen | \$ 8.00 | \$ 9.00 | \$ 19.00 | | 0.00 | | | \$ 36.00 |
| 6/23/2017 L-ville | Springfield | Return from A | \$ 8.00 | \$ 9.00 | \$ 19.00 | 60 | 24.00 | | | \$ 60.00 |
| | | | | | | | 0.00 | | | \$ |
| | | | | | | | 0.00 | | | \$ |
| | | | | | | | 0.00 | | | (S) |
| | | | | | | | 0.00 | | | \$ |
| | | | \$ 40.00 | \$ 54.00 | \$ 114.00 | 565.0 | 226.00 | | ⇔ | \$ 426.00 |
| I hereby certify that all | I hereby certify that all items of expense included in the 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. | in the above statement were incurred in the discharge of official business in connection with my duties No meal reimbursement was requested for any meals provided as part of the activity or conference | itement we bursement | re incurred ir was request | the dischar | ge of offic neals prov | ial business ided as part | of the activi | on with my d ty or confere | uties as: ince. |
| | | -An overnight is required for reimbursement of mealsMaximum meal reimbursement including gratuity - \$7/8/15 or \$8/9/19 (high rate areas). | uired for reimbu nbursement incl | rsement of meals. luding gratuity - \$3 | 7/8/15 or \$8/9/19 | (high rate area | | | 2000 | |
| (Signature of Pr | (Signature of Principal/Supervisor) | -Original itemized meal receipt is required. Gratuity can not exceed 20%. For Independ to be reimburged an original itemized receipt is required. | eal receipt is re | quired. Gratuity c | an not exceed 20 | % | . (| Signature | (Signature of Employee) | |
| 0011075-0580 | 5-0580 | -Registration fee, parking, tolls, etc. may be reimbursed with original receipts. | rking, tolls, etc. | may be reimburse | d with original re | ceipts. | 61 | 34/11 | + | |
| (Fund to | (Fund to be Charged) | Credit card slips, registration forms, or check copies are not accepted as receiptsPlease see the official policy and/or procedures for complete details. | gistration forms al policy and/or | , or check copies a procedures for cor | re not accepted a mplete details. | s receipts. | | (| (Date) | |