

TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent	
SUBMITTED FOR:	Jul-17	
DATE	July-17	

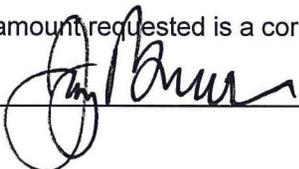
DAYTON INDEPENDENT SCHOOLS
TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	TO	# MILES	X /PER MILE *	MEALS	LODGING	MISC.*	TOTAL
7/12/2017	KEAT- Advocacy	Dayton	Frankfort	190	\$ 0.40	\$ -	\$ -	\$ -	\$ 76.00
7/19/2017	Drug Free Club Regional Meeting	Dayton	Central Bank	32	\$ 0.40	\$ -	\$ -	\$ -	\$ 12.80
7/24/2017	NKCES PLC Meeting for Arts and Humanities	Dayton	North Point Elem.	48	\$ 0.40	\$ -	\$ -	\$ -	\$ 19.20
7/26-7/28	KASA Leadership Retreat	Dayton	Louisville	206	\$0.40	\$ -	\$ -	\$ -	\$82.40
						\$ -	\$ -	\$ -	
						\$ -	\$ -	\$ -	
TOTALS						\$ -	\$ -	\$ -	\$ 191.40

* 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