

TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent	
SUBMITTED FOR:	Nov-17	
DATE	November-17	

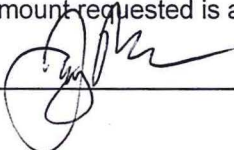
DAYTON INDEPENDENT SCHOOLS
TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	TO	# MILES	X /PER MILE *	MEALS	LODGING	MISC.*	TOTAL
10/31/2017	NKCES Training: Stephen Covey	Dayton	Fort Mitchell	20	\$ 0.42	\$ -	\$ -	\$ -	\$ 8.40
11/2/2017	Pension Oversight Committee	Dayton	Frankfort	202	\$ 0.42	\$ -	\$ -	\$ -	\$ 84.84
11/6/2017	Chamber of Commerce Pension	Dayton	Crestview	18	\$ 0.42	\$ -	\$ -	\$ -	\$ 7.56
11/13/2017	Drug Free Clubs of America House Ed. Committee Presentation	Dayton	Frankfort	202	\$0.42	\$ -	\$ -	\$ -	\$84.84
11/14/2017	Independent School District Forum	Dayton	Campbellsville, KY	332	\$ 0.42	\$ -	\$ -	\$ -	\$ 139.44
						\$ -	\$ -	\$ -	
TOTALS						\$ -	\$ -	\$ -	\$ 325.08

* 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.



 Signature