

**PLEASE COMPLETE ALL REQUESTED INFORMATION
TO EXPEDITE YOUR REIMBURSEMENT.**

DATE	TIME		LOCATION/PURPOSE	MILEAGE		OVERNIGHT		LODGING	REGISTRATION	OTHER	TOTAL
	Depart	Return		# of Miles	\$ Amount	Yes	No				
2/20/8	4:30	4:30	Newport; Active Shooter Seminar			✓		85.94			
TOTALS											
GRAND TOTAL:											

Overnight stay is required for meal reimbursement. Meals will be reimbursed at the per diem rate established by the Board plus 20% for tips. Mileage will be reimbursed at 40¢ per mile. Please attach your Mapquest and all receipts for expense reimbursement (meal receipts not required).

Page 1 of 1



CHARLES ADAMS
956 NORMANDY HGTS
Taylorsville KY 40071
United States

Room No. : 413
Arrival : 02-20-18
Departure : 02-21-18
Page No. : 1 of 1
Folio No. : 2592
Conf. No. : 40760122
Cashier No. : 7001

INFORMATION INVOICE

Membership No. :
A/R Number :
Group Code :
Company Name :

02-21-18 05:52:10 AM EST

Date	Text	Charges	Credits
02-20-18	Room	76.49	
02-20-18	State Sales Tax 6%	4.59	
02-20-18	City Tax 5%	4.05	
02-20-18	State Tax 1%	0.81	
02-21-18	Mastercard		85.94
	XXXXXXXXXXXX0613 XX/XX		
Total		85.94	85.94
Balance			0.00

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Thank You For Staying With Us

We are committed to a smoke-free and pet-free policy. A \$250 room recovery fee will be charged for any smoking and/or unauthorized pets in your room.

I agree that my liability for this bill is not waived and agree to be held personally responsible in the event that the indicated person, company or association fails to pay for any portion or the full amount of these charges.

Guest Signature _____

Country Inn & Suites Erlanger
630 Donaldson Hwy
Erlanger, KY 41018
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