

TRAVEL EXPENSE VOUCHER

DAYTON INDEPENDENT SCHOOLS

NAME	Jay Brewer	
POSITION	Superintendent	
SUBMITTED FOR:	July/August 22	
DATE	August-22	

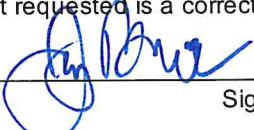
DAYTON INDEPENDENT SCHOOLS
TRAVEL REIMBURSEMENT FORM

DATE	PURPOSE OF TRIP	FROM	TO	# MILES	X /PER MILE *	MEALS	LODGING	MISC.*	TOTAL
		Dayton	Louisville	204	0.49 ^{.53}	\$ -	\$ -		\$ ^{108.12} 99.96
						\$ -	\$ -		
						\$ -	\$ -		
						\$ -	\$ -		
						\$ -	\$ -		
						\$ -	\$ -		
						\$ -	\$ -		
TOTALS						\$ -	\$ -		\$ ^{108.12} 99.96

* 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.

 ^{8/22/22}
Signature