TRAVEL EXPENSE VOUCHER DAYTON INDEPENDENT SCHOOLS

NAME	Rick Wolf
ADDRESS	5955 Riverrock Way
ADDRESS	Cold Spring, KY 41076
DATE	4/21/25
POSITION	Superintendent

DAYTON INDEPENDENT SCHOOLS TRAVEL REIMBURSEMENT FORM

DATE March 27,2025	PURPOSE OF TRIP	FROM	то	# MILES	@ per mile*		MEALS/TIPS		LODGING		MISC.	TOTAL	
	New Superintendent Training	Home	Central Bank - Lexington - New superintendent Training	146	\$	61.32	\$	-	\$	-	\$ -	\$ 61.32	
					\$	-	\$	-	\$	-	\$ -	\$ _	
					\$	-	\$	_	\$	_	\$ -	\$ _	
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					\$		\$		\$	-	\$ -	\$ **	
				***************************************	\$	-	\$	-	\$	-	\$ -	\$ _	
TOTAL							\$	-	\$	-	\$ -	\$ 61.32	

^{*} mileage rate subject to change quarterly based on state's 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.

ROWN 4/22/25
Employee's Signature Date Signature of Superintendent/designee Date