

**Travel Expense Voucher**

Date Submitted \_\_\_\_\_ Name \_\_\_\_\_  Board Member  Employee  
 Home Address \_\_\_\_\_ City \_\_\_\_\_, State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Location/Purpose \_\_\_\_\_

DATE	TIME		MILEAGE <sup>1</sup>		MEALS (OVERNIGHT LODGING REQUIRED) <sup>2</sup>		ATTACH ORIGINAL, ITEMIZED RECEIPTS			
	Departure	Return	No. of Miles	Amount	Amount	Tips	Lodging	Registration	Parking and/or Tolls*	Other
<b>TOTALS</b>										
<b>GRAND TOTAL</b>										

<sup>1</sup>Mileage will be reimbursed at the rate approved by the Commonwealth of Kentucky for State Government Employees for the time period that the travel occurred.

Mileage will not be reimbursed if a Board vehicle is available for use.

<sup>2</sup>Meals will be reimbursed at a daily per diem amount of \$45.00 for Standard Locations. The Departure and Return travel day in Standard Locations will be reimbursed \$33.75, which is seventy-five percent (75%) of the daily per diem rate.

Meals will be reimbursed at the daily per diem rate established by the General Services Administration (GSA) for travel in cities that are deemed to be Non-Standard or High Rate. Visit [www.gsa.gov/portal/category/21287](http://www.gsa.gov/portal/category/21287) to locate these cities and rates. On the Departure and Return travel day, , employees are eligible for seventy-five percent (75%) of the total M & IE rate for these cities.

Tips in excess of fifteen percent (15%) of the cost of food will not be approved.

\*No tolls for District vehicles being operated in state in an official capacity.

Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

Superintendent/Asst Supt. Signature \_\_\_\_\_ Date \_\_\_\_\_

MUNIS Code \_\_\_\_\_