

## Northern Kentucky Cooperative for Educational Services

### Travel Voucher Reimbursement

**The expenses on this form are to be reimbursed for items YOU PAID FOR PERSONALLY on your own card.**

**Please INCLUDE ALL RECEIPTS from your travel with this form (including Lodging, Rental Car, etc).**

In State:		Out of State:		Meals will be reimbursed as follows AND MUST be an overnight stay, traveling between these times:																				
Traveler's Name:																								
Department Name:																								
Traveler's Residence:																								
Purpose of Travel:																								
				<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;"><b>In State</b></td> <td style="width: 15%; text-align: center;"><b>Out of State</b></td> <td style="width: 55%;"></td> </tr> <tr> <td>Breakfast: 6:00 am-9:00 am</td> <td style="text-align: right;">\$6.00</td> <td style="text-align: right;">\$8.00</td> <td></td> </tr> <tr> <td>Lunch: 11:00 am - 2:00 pm</td> <td style="text-align: right;">\$8.00</td> <td style="text-align: right;">\$9.00</td> <td></td> </tr> <tr> <td>Dinner : 5:00 pm - 8:00 pm</td> <td style="text-align: right;">\$16.00</td> <td style="text-align: right;">\$19.00</td> <td></td> </tr> <tr> <td><b>Daily Totals</b></td> <td style="text-align: right;"><b>\$30.00*</b></td> <td style="text-align: right;"><b>\$36.00*</b></td> <td>*Gratuities/tips included</td> </tr> </table>		<b>In State</b>	<b>Out of State</b>		Breakfast: 6:00 am-9:00 am	\$6.00	\$8.00		Lunch: 11:00 am - 2:00 pm	\$8.00	\$9.00		Dinner : 5:00 pm - 8:00 pm	\$16.00	\$19.00		<b>Daily Totals</b>	<b>\$30.00*</b>	<b>\$36.00*</b>	*Gratuities/tips included
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**NOTE: Employees MUST be traveling the entire time for each period listed. (If employee begins travel at 6:30 am, no breakfast reimbursement will be earned). If claiming reimbursement for 3 meals in 1 day, employees may exceed individual meal limits if the **DAILY TOTAL** is not exceeded.**

**NOTE: For other allowable expenses please refer to NKCES Financial Procedures**

Mo	Day	Time of		Location		Taxi Uber Parking	Luggage	Other (Lodging, Airfare, etc IF being reimbursed to traveler)	Subsistence	Totals
		Departure	Arrival	From	To					
									B	
									L	
									D	

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Totals for this page										
Totals from all continuation pages										
Grand Total										

By signing, I hereby certify, subject to the provisions of KRS 523:100(unsworn falsification to authorities), that the above are proper charges in the discharge of official business and that all data furnished herewith are true and correct to the best of my knowledge.

\_\_\_\_\_  
Traveler's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Program Name / #

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
G/L #

