Fannin County Reimbursement Form

Department: _____

Employee making trip: _____

Date(s) of trip: _____

Round trip to: _____

The following documents/receipts should be attached as applicable:
MapQuest, registration form, hotel confirmation, airline reservation, parking and agenda

Number of Miles: _____ @ .58 = $_____

Registration ..... $_____

Hotel ..... $_____

Airfare ..... $_____

Parking ..... $_____

Parking is payable to (select one) (●) employee ( ) hotel

Meals are per diem

Meals are prorated $6.00 breakfast, $9.00 lunch and $15.00 dinner. Those are the maximum amounts you can receive for each of those meals. If a meal is included as part of your registration fee, that meal will not be paid to you. No meal receipts are required. Please see travel policy for specifics on approved meals.

Date	Breakfast	Lunch	Dinner	Total

Total meal expenses ..... $_____

Total trip expenses ..... $_____

Employee Signature _____

Certificate: I hereby certify that the above, including attached documents, is true and correct, and I further certify that I attended the training session presented.

Approved by _____
(Signature of Department Head)

Auditor's office only

Check amount due employee _____

Check amount due registration _____

Check amount due hotel _____

Amount charged to County credit card _____