

CONFERENCE TRAVEL
EMPLOYEE EXPENSE VOUCHER (In State)
NORTHERN KENTUCKY COOPERATIVE FOR EDUCATIONAL SERVICES
5516 EAST ALEXANDRIA PIKE
COLD SPRING, KY 41076
Phone (859) 442-8600 *** Fax (859) 442-7015**

Employee Name: _____ Social Security # _____
Please Print

Address: _____

City: _____ State: _____ Zip: _____

Purpose of Trip: _____

MILEAGE: List only mileage that cannot be reported on the travel voucher.

DATE	FROM	TO	MILES
Total Miles			_____
@ _____			= \$ _____

EXPENSES: (Must include an overnight stay.) List expenses below. Attach receipts.

DATE	EXPENSE	AMOUNT
Total Expenses \$		_____

Grand Total Mileage and Expenses \$ _____

Signed: _____ Date: _____

Approved: _____ Date: _____

Instructions for Use:

- Please submit expenses within one month of the event.
- Receipts are required for all meal expenses. *Please tape receipts on a blank sheet of paper (do not tape over parts of other receipts)
- Food costs will only be reimbursed in conjunction with an overnight stay. Alcoholic beverages will not be reimbursed. Credit Card receipts are not acceptable as the only evidence of an expense. We must have the itemized receipt.
- Meals will be reimbursed as follows (subject to change): In-State-Breakfast \$6.00/Lunch \$8.00/Dinner \$16.00 If you are claiming three meals, you may exceed individual meal limits if the daily total is not exceeded. Meals will be reimbursed at a rate not to exceed \$30.00 per 24-hour day.
- Please refer to NKCES Financial Procedures Manual for complete details available at www.nkces.org.