

**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: \_\_\_\_\_ @ .675 = \$ \_\_\_\_\_

Registration ..... \$ \_\_\_\_\_ Hotel

..... \$ \_\_\_\_\_

Airfare..... \$ \_\_\_\_\_

Parking.....\$ \_\_\_\_\_

Parking is payable to (select one)      employee      hotel

**Meals are per diem**

Meals are prorated \$12.00 breakfast, \$20.00 lunch and \$30.00 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 \_\_\_\_\_