POLK COUNTY
EXPENSE REIMBURSEMENT 2016

County Board/ Employee Name: **CB/ Employee No**

Attach Agenda or minutes, and Receipts

Meal Allowance

Breakfast - must depart before 6:00 a.m
Lunch - must depart before 10:30 am and return after 2:30pm
Dinner - return after 7:00 pm or depart before 6:00 pm for overnight

	Breakfast	Lunch	Dinner	Total
In State	$8.00	$10.00	$20.00	$38.00
Out of State	$10.00	$15.00	$25.00	$50.00

Lodging and Transportation-Refer to Pocket Guide or handbook

DATE	Destination / Description Meal Times (for per Diems) Meeting Name/ Location List the time of each meal	Account to Charge Fund-Dept-Acct XXX-XX-XXXXX	Personal Mileage .54 Cty Car unavailable Slip .352 county car available			Per Diem, Misc Expense Lodging	
			Miles	@	Amount	Amount	Overnite
	All Reimbursement Forms are due within 60 days						
	Please use ONE Line for EACH Expense						
		TOTALS:					

Employee Signature _____ Date _____

Authorized by: _____ Date _____

***** OFFICE USE ONLY *****

Code	Account	Amount