



**Millard County Request for Reimbursement for 2022**

<b>Name</b>	<b>Address</b>	<b>City, State, Zip</b>																	
	<b>E-mail</b>	<b>Phone</b>																	
<p><i>Policy Compliance:</i></p> <ul style="list-style-type: none"> <li>• A copy of the event agenda must be attached documenting the date, time and business purpose</li> <li>• Group sponsored gatherings must list attendees, date, time, and business purpose</li> <li>• Only meals not provided by the event or hotel are reimbursable</li> <li>• In accordance with IRS regulations, the maximum per-diem rate for days of travel is \$40.50</li> <li>• If a county vehicle is available and the employee chooses to take their own vehicle, mileage is reimbursed for one-way only</li> <li>• Receipts must be attached for actual expenses not based on per-diem rates</li> </ul>			<table border="1"> <tr> <td><i>Mileage</i></td> <td colspan="2">\$ .585 per mile</td> </tr> <tr> <td rowspan="3"><i>Meals</i></td> <td><i>Breakfast</i></td> <td>\$13.00</td> </tr> <tr> <td><i>Lunch</i></td> <td>\$15.00</td> </tr> <tr> <td><i>Dinner</i></td> <td>\$26.00</td> </tr> <tr> <td colspan="2"><b><i>Daily Per Diem Rate</i></b></td> <td><b>\$54.00</b></td> </tr> <tr> <td colspan="2"><b><i>*75% Travel Day</i></b></td> <td><b>\$40.50*</b></td> </tr> </table>	<i>Mileage</i>	\$ .585 per mile		<i>Meals</i>	<i>Breakfast</i>	\$13.00	<i>Lunch</i>	\$15.00	<i>Dinner</i>	\$26.00	<b><i>Daily Per Diem Rate</i></b>		<b>\$54.00</b>	<b><i>*75% Travel Day</i></b>		<b>\$40.50*</b>
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**Event or Conference Attended:**

Transportation					Hotel	Other Expenses			Totals
Date	From	To	Mileage	Taxi Fare		Meals	Parking	Other	
<b>SUBTOTALS</b>									
<b>TOTAL EXPENSES</b>									

I certify that the identified expenses were incurred on behalf of Millard County.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Department Head Approval

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Budget Account