## Millard County Auditor 50 South Main Fillmore, UT 84624



## Millard County Request for Reimbursement for 2024

Name	Address	City, State, Zip			
	E-mail	Phone			
<ul><li>Policy Compliance:</li><li>A copy of the event agenda must</li></ul>	Mileage	.67 cents per mile			
<ul> <li>Group meetings must list attendees, date, time, and business purpose per IRS regs</li> <li>Only meals not provided by the event or hotel are reimbursable</li> </ul>				Breakfast	\$13.00
• In accordance with IRS regulation		Lunch	\$15.00		
• If a county vehicle is available and the employee chooses to take their own vehicle, mileage is reimbursed for one-way only				Dinner	\$26.00
• Receipts must be attached for actu		r .	ily Per Diem Rate 5% Travel Day		

## Event or Conference Attended:

Transportation					Hotel	Other Expenses			Totals	
Date	From	То	Mileage Taxi Fare				Meals Pa	arking Oth		
SUBTO	SUBTOTALS									
						TOTAL	EXPENSES			

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

Signature

Date