



Millard County Request for Reimbursement for 2026

Name	Address	City, State, Zip
	E-mail	Phone
Policy Compliance: • A copy of the event agenda must be attached documenting the date, time and business purpose • Group meetings must list attendees, date, time, and business purpose per IRS regs • Only meals not provided by the event or hotel are reimbursable • In accordance with IRS regulations, the maximum per-diem rate for days of travel is 75% of total per diem or \$40.50 • If a county vehicle is available and the employee chooses to take their own vehicle, mileage is reimbursed for one-way only • Receipts must be attached for actual expenses not based on per-diem rates		
Mileage		.72 1/5 cents per mile
Meals		Breakfast \$16.00
		Lunch \$19.00
		Dinner \$28.00
Daily Per Diem Rate *75% Travel Day		\$63.00 \$47.25*

Event or Conference Attended:

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

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

Signature _____ Date _____

Department Head Approval _____ Budget Account _____