Millard County Auditor
50 South Main
Fillmore, UT 84624

Millard County Request for Reimbursement

Name:	**Address:**	**City, State, Zip:**
	E-Mail:	**Phone:**

Policy Compliance:
- A copy of the event agenda or other document must be attached supporting the date, time and business purpose.
- Group meetings must list attendees, date, time, and business purposes per IRS regulations.
- Provided meals are not reimbursable and must be deducted from the applicable daily rate.
- The maximum per diem rate for days of travel is 75% of total per diem.
- If a county vehicle is available and the employee chooses to take their own vehicle, mileage is reimbursed for one-way.

Mileage		
Meals	*Breakfast*	
	Lunch	
	Dinner	
Daily Per Diem Rate ****75% Travel Day***		

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 *Date* *Budget Account*