



**IDAHO DISTRICTS EMPLOYEES ASSOCIATION  
TRAVEL EXPENSE VOUCHER**

Name (please print): \_\_\_\_\_  
 Purpose of Travel: \_\_\_\_\_  
 Location of Travel: \_\_\_\_\_

**PER DIEM:**

Breakfast: \$11.25 (is applicable if Travel starts prior to 6:00 am)  
 Lunch: \$15.75 (is applicable if Travel starts prior to or ends after 12:00 pm)  
 Dinner: \$24.75 (is applicable if Travel ends at Home after 6:00 pm)

**MILEAGE:**

Mileage Reimbursement is: \$0.54 per mile (based upon current State of Idaho rate)

DATE	BREAKFAST	LUNCH	DINNER	TOTAL	MILEAGE	TOTAL
				\$0.00		\$0.00
				\$0.00		\$0.00
				\$0.00		\$0.00
				\$0.00		\$0.00
				\$0.00		\$0.00
				\$0.00		\$0.00
				\$0.00		\$0.00
				\$0.00		\$0.00
TOTAL PER DIEM FOR MEALS:				\$0.00	TOTAL MILEAGE:	\$0.00

ITEMIZE MISCELLANEOUS EXPENSES BELOW	ITEMS OR PURPOSE	AMOUNT
	Airfare	
	Registration	
	Parking	
	Rental Car	
	Shuttle	
	Lodging	
	Miscellaneous	
	Mileage (\$.54 per mile)	\$0.00
	Meals	\$0.00
	<b>TOTAL CLAIM:</b>	<b>\$0.00</b>

I hereby certify that the Travel Services or Supplies that are stated in this voucher are correct.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CLAIMANT'S SIGNATURE