

# Dane County Board Supervisor Meeting/Mileage Claim

<b>NAME</b>				<b>Meetings During the Month of</b>						
<b>STANDING COMMITTEE/STANDING SUB-COMMITTEE SALARIED</b>						<b>NON-STANDING COMMITTEE PER DIEM</b>				
Day of Month	CHECK ONE			Mileage	Name of Committee Other Than County Board	Day of Month	Meeting Start Time*	Other Comm.	Mileage	Name of Non-Standing Committee
	Co. Board	Comm.	Sub-Comm.							

\*Compensation shall not be paid for a second or subsequence meetings unless the first meeting of the day has a starting time which is at least two (2) hours before the starting time of the second meeting or subsequent meeting for which compensation is sought.

**EMAIL FORM TO [BOARD.OFFICE.STAFF@COUNTYOFDANE.COM](mailto:BOARD.OFFICE.STAFF@COUNTYOFDANE.COM) ON A MONTHLY BASIS**

<b>I hereby certify that the information on this form is true, correct and to the best of my knowledge complies with current Dane County Ordinance. To certify, please check the box to the right.</b>	<b>DATE</b>  
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