

COUNTY OF DANE

EMPLOYEE REIMBURSEMENT FORM

EMPLOYEE NAME		Steve Hutchinson		CITY/STATE/ZIP				Sun Prairie, WI 53590		DEPARTMENT		Facility Management ORG # 1025		MONTH EXPENSES INCURRED		December		MILES TRAVELED		MEALS			Description of item - Include original receipts with reimbursement request		Date	
ADDRESS		343 Scott Trl		Signature of Employee				Department Head Approval		Date		02/17/2020		Date		3/2/2020										
CITY/STATE/ZIP		Sun Prairie, WI 53590		Signature of Employee				Department Head Approval		Date		02/17/2020		Date		3/2/2020										
Date	DESTINATION OF TRIP	PURPOSE OF TRIP	TIME	MILES TRAVELED	Morning \$8.00	Noon \$10.00	Evening \$20.00	OTHER EXPENSES	Amount	Date																
12/04/2019	DCDHS NPO-CCB (round trip)	Include starting and ending address	Left	12																						
12/05/2019	DCDHS NPO-SMO (Round Trip)	Include Conference & Training and Outreach Request Form if applicable	Return	22																						
12/06/2019	DCDHS NPO-BPHCC (round trip)	Meeting		42																						
12/09/2019	DCDHS NPO-NIP (round trip)	Annex Space Review		6																						
12/10/2019	DCDHS NPO-CCB (round trip)	FM Meeting		12																						
12/10/2019	DCDHS NPO-8PHCC (round trip)	Code Compliance Meeting		42																						
12/11/2019	DCDHS NPO-CCB (round trip)	Lead worker meeting		12																						
12/11/2019	DCDHS NPO-ADRC	Meeting with Jennifer		2																						
12/12/2019	DCDHS NPO-JCO	Carpet Inspection		6																						
12/16/2019	DCDHS-CCB	FM Meeting		12																						
12/17/2019	DCDHS NPO-ADRC (round trip)	Meeting with Jennifer		2																						
12/17/2019	DCDHS NPO-JCO (round trip)	Meeting with Liza		6																						
12/17/2019	DCDHS NPO-SMO (round trip)	Meeting with New Supervisor		22																						
12/18/2019	DCDHS NPO-CCB (round trip)	Pre-D Meeting		12																						
12/18/2019	DCDHS NPO-BPHCC (round trip)	FM meeting		42																						
12/19/2019	DCDHS NPO-CCB (round trip)	Meeting		12																						
12/19/2019	DCDHS NPO-JCO (round trip)	Restroom Project meeting		6																						
12/20/2019	DCDHS NPO-CCB (round trip)	Q4 Meeting		12																						
12/20/2019	DCDHS NPO-BPHCC (round trip)	Meeting with Kelly		42																						
									324.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00							\$	0.00	

***Items not requiring an original receipt include parking meters, tolls, hotel gratuity (limited to \$2.00 per day). This is not an all inclusive list.

***Items requiring an original receipt include hotel, registration fees, taxi fare, bus fare, rental cars, ride share, parking (except for parking at meters that do not provide receipts), airfare and reimbursement for supplies purchased. This is not an all inclusive list.

Mileage at 58.0 cents per mile 187.92

Meals 0.00

Other Expenses*** 0.00

Total \$ 187.92