REQUEST FOR PER DIEM FOR A MEETING

DATE OF MEETING:	
NAME OF MEETING:	-
Special Line item #if applicable	
Are you officially appointed to this Committee?YesNo	
Are you the alternate to this Committee?Yes No	
If this is not a regular meeting, list reason for special meeting:	
LOCATION:	
☐ HMCR ☐ Commissioners Conference Room ☐ Media Room ☐ Other	
Per Diam Coot 5	
Miles (round trip) Meals	
Miles (round trip) Meals Original receipts **If you have a Waiver of Mileage on file at the Clerk's office, you will not be paid for milea \$60 - full day Full days are 3 or more hours & half days are less than 3 ho	ige.
□ \$60 - full day □ \$30 - half day	ige.
□ \$60 - full day □ \$30 - half day	ige.
□ \$60 - full day □ \$30 - half day Full days are 3 or more hours & half days are less than 3 ho	ige.
□ \$60 - full day □ \$30 - half day Full days are 3 or more hours & half days are less than 3 ho Signature Date	ige.
Signature Serint Name	urs