

82800

"Reimb for #50 tire repair

CITY OF ANTHONY

34-01001-15

01-03-3040 - #17530

Mileage & Travel Expenses

Reimbursement Form

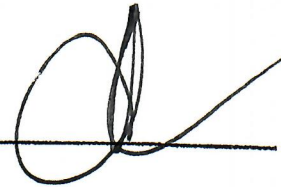
Name:

Kenny Hodson

Dates of Travel:

1-27-23

Travel Destination:



Total Mileage (Roundtrip):



☒ Purpose of Travel:



Total Cost of <sup>Reimb.</sup> Meals:

\$1758.98

(Must Attach Meal Receipts – Reimbursed Meals for Overnight Stays Only)  
(CITY DOES NOT REIMBURSE FOR ALCOHOL PURCHASES)

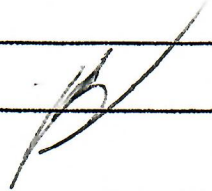
Other Reimbursable Expenses (Include Name of Expense and Amount):

(Must Attach Receipts for Expenses)

(Examples of Expenses: Parking Passes, Toll Road Fees, Bus Ticket Fees, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☒ Signature & Date:



Approved & Date :

KANSAS TURNPIKE AUTHORITY  
RECEIPT

CLASS: 02    AMOUNT \$ 5.75

ENTRY PLAZA: 053

EXIT PLAZA: 177

DATE: 01/27/01    TIME: 09:01:49

COLLECTOR: 1337

SEAL NUM.: 0000



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