MELVYN J HOUSER POTTAWATTAMIE COUNTY AUDITOR AND ELECTION COMMISSIONER 227 S 6TH ST, PO BOX 649 COUNCIL BLUFFS, IOWA 51502-0649



Linda Swolley, First Deputy - Real Estate Becky Lenihan, Finance & Tax Officer Phone (712) 328-5700 FAX (712) 328-4740

Signature / Date

Misc. Expense Affidavit Reimbursement Form

This form is to detail information needed to substantiate the business purpose of a purchase when you have an itemized receipt. It is to be used with meal receipts, tolls, and various travel related expenses. Please make sure to fill out any applicable sections, sign, and date before returning to Accounts Payable.

** BE SURE TO INCLUDE YOUR ITEMIZED RECEIPT**

One rece	ipt	per	form	please	,
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Please include Print out of Per Diem Destination Rates if meals are included.
This is for a receipt that is: Meal, need to relate to business purpose or trip, or multiple meals that need attendees listed
Toll needing related to business purpose or trip
Other, please explain:
Vendor purchased from/Date/Amount to match to receipt:
Was there an overnight stay?
How does this pertain to County business? (What purchase was for/if relates to a trip please list info here):
Description of what was purchased or who attended:
I, certify that I made the purchase described above, that all of the purchase was for County business (unless otherwise noted) and all is within policy guidelines.