

## Rachel Parker

Hill County Treasurer

## Request for Per Diem

Date:	
I hereby request funds in the amount of \$attended on behalf of Hill County.	for meals at a Conference/Event to be
A COPY OF THE CONFERENCE/EVENT AGEND	A MUST BE ATTACHED TO THIS
FORM.	
Conference/Event Name:	City:
Dates of Conference/Event:	
Budget Line:	
	Amount
Departure Day Only / Meals ( $$68.00 \times 75\% = $51.00$ )	\$
Full Days (\$68.00 each)	\$
Return Day /Last Day of Conference (\$68.00 x 75% = \$	51.00) \$
TOTAL FUNDS REQUESTED:	<b>\$</b>
In the event of non-attendance (for any reason), the per diem must be within 5 days of the event. Failure to comply will result in the amount	
Please make EFT payable to:	
Department Head/or representative	Date