

CASEY COUNTY BOARD OF EDUCATION  
1922 N US 127  
Liberty, KY 42539  
(606) 787-6941

**STIPEND VOUCHER**

This voucher must be completed fully and sent to Payroll by the tenth of the month.

Employee's Name \_\_\_\_\_

Date(s) \_\_\_\_\_

Title of Workshop \_\_\_\_\_

Location of Workshop \_\_\_\_\_

Time Started \_\_\_\_\_ Time Ended \_\_\_\_\_

STIPEND (\$ \_\_\_\_\_ per hour for \_\_\_\_\_ hours) ..... \$ \_\_\_\_\_

**TOTAL REQUESTED TO BE PAID ..... \$ \_\_\_\_\_**

Employee's Signature \_\_\_\_\_

Person Authorizing Payment \_\_\_\_\_

Munis Budget Code: \_\_\_\_\_