



OWEN COUNTY SCHOOLS

1600 Highway 22 East ~ Owenton, Kentucky 40359

TRANSPORTATION DEPARTMENT STANDARD INVOICE

DRIVER NAME _____ **SOC SEC #** _____

(Invoices must be promptly completed and filed with the Board "in writing, itemized and verified" according to law.)

DESCRIPTION OF SERVICES	# OF HOURS	RATE PER HOUR	TOTAL AMOUNT	CODE
SUBSTITUTE DRIVER-REG BUS				9011092-0150
SUBSTITUTE DRIVER-HANDI BUS				9011093-0150
VOCATIONAL ROUTE				9011010-0131
DRIVER TRAINING/EVALUATION/ETC				9011091-0131
MONITOR FOR HANDICAPPED OR OTHER SPECIAL EDUCATION STUDENT(S)				9011093-0131
MBMS BAND SHUTTLE & OTHER TRIPS				0781919-0131
OCHS TRIPS				0801919-0131
ELEMENTARY TRIPS				0751919-0131

DRIVER'S CERTIFICATION

I hereby certify that the above is a correct statement of amount due from the Owen County Board of Education for services rendered as itemized.

Driver's Signature _____ **Date signed** _____

Supervisor Signature _____ **Date signed** _____