Travel Request and Reimbursement

Professional Development Activity

Name	Date of Request:		So	chool		
Departure Date						
Transportation Application for Reimbursement Activity #						
Transportation Application for Reimbursement Activity #	Departure Date		Return	Date		
District	Transportation:Air					
District						
State/Grant	Reimbursement Source:	_			%	
Activity # Request is:ApprovedNot ApprovedNot Approved		District			%	
Activity # Request is:ApprovedNot ApprovedNot Approved					%	
Application for Reimbursement *Submit prior to activity. Estimate of Expenses Transportation Registration Meals Lodging Other Expenses Subtotal Total Reimbursement Requested: The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Signature: Date: Date: Expenditures charged to account: #		Other			%	
Application for Reimbursement *Submit prior to activity. Estimate of Expenses Transportation Registration Meals Lodging Other Expenses Subtotal Total Reimbursement Requested: The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Expenditures charged to account: #	Activity #			Request is:		
*Submit prior to activity. Estimate of Expenses Amount Paid By Actual Expense for Reimbursement		⊣		Dr. Be	eth Savidge	
Estimate of Expenses Amount Paid By District P.O./Card Reimbursement Transportation Registration Meals Lodging Other Expenses Total Reimbursement Requested: The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Signature: Date: Expenditures charged to account: #		Application	on for Re	imbursement		
Transportation Registration Meals Lodging Other Expenses Total Reimbursement Requested: The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Signature: Date: Expenditures charged to account: #		*Submit <u>prio</u> r to activity.	o activity. *Resubmit with receipts after activity.			
Registration Meals Lodging Other Expenses Total Reimbursement Requested: The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Signature: Date: Expenditures charged to account: #		Estimate of Expenses				
Meals Lodging Other Expenses Total Reimbursement Requested: The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Signature: Date:						
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The above is a true and correct statement of my expenses in transacting authorized school business in the period specified above. I have attached receipts for all expenditures in which I am seeking reimbursement. Signature: Date: Expenditures charged to account: #		To	tal Reim	bursement Re	quested:	
Expenditures charged to account: #		correct statement of my exp	enses in tr	ansacting author	ized school business in the period	1
Expenditures charged to account: #	Signature:		Date: _			
	Expenditures charged to	account: #				
					S	

Please make a copy of this completed form for your records.