

**Out of State Travel Request
And Expense Claim Procedures**

All receipts must list a description of each item purchased. Credit Card slips that show a total only are not acceptable.

Request (Must be completed prior to traveling. See School Board Procedure P6213)

Name _____ School/Location _____

Name of Organization or Sponsoring Body _____

Place _____ Purpose of Meeting _____

Date(s) of meeting _____ Leave _____ Return _____
Date Time Date Time

Will substitute be required? Yes No

If expenses are being requested, please approximate:

Transportation	Lodging	Meals	Registration	Other	Total
\$	\$	\$	\$	\$	\$

Method of Travel Air Private Car District Car

I hereby certify under penalty of perjury that when completing check request for expense reimbursement that information provided will be a true and correct claim for necessary expenses(s) incurred by me and that no payment was received prior to request by or on account thereof. Any goods which were purchased by me and claimed for reimbursement will be utilized in the program indicated.

Signature _____ Date _____

Authorization (Must be completed prior to traveling)

Approval _____ Authorization _____
Principal/Administrator Date Superintendent/Designee (Out of State Only) Date

Board Approval (Out of State Travel only) _____

Account to be charged _____

Claim (Complete online Check Request upon return)

Please refer to School Board policy and procedure 6213 and P6213 for allowable travel expenses.

Sign, scan, and attach all receipts plus this form to the Check Request.