

Raisin City School District

TRAVEL/CONFERENCE FORM
(To be filled out in ADVANCE)

TO: BOARD MEMBERS

Name: _____

Conference/Meeting Dates: _____

Purpose: _____

Location: _____

Registration Fee	\$ _____
Transportation	\$ _____
Lodging _____ Night(s) @ \$ _____ per night	\$ _____
Mileage _____ Miles @ .67 cents per mile	\$ _____
Meals* _____ Day(s) @ \$39.00 per day	\$ _____
Other _____	\$ _____

TOTAL AMOUNT REQUESTED \$ _____

Requested by _____ _____
Date

Approved by _____ _____
Date

* Breakfast \$13.00 per day
Lunch \$15.00 per day
Dinner \$26.00 per day

Please attach a copy of Conference/Meeting brochures, etc.

If approved by the Board of Trustees; please submit requisition(s) to the Business Department.