



# Brownsville Independent School District

1900 E. Price Road, Brownsville, Texas 78521  
(956) 548-8361 Fax (956) 548-8367

Dr. Jesus H. Chavez  
Superintendent

Rosario Peña, RTSBA  
Purchasing Director

## **HOTEL STUDENT TRAVEL DISTRICT CREDIT CARD PAYMENT**

### **PROCEDURES**

**Fill out the form on page 2 and forward to the Travel Department prior to having the Travel department provide the hotel with the district's credit card number. Without this form the Travel department will not release the District's credit card to any hotel.**

**PURCHASING 548-8361  
MAYRA CASTAÑEDA 698-0684  
REBEKAH RIVAS 956-698-0226**

**Call the hotel directly and ask for the in-house reservations department.**  
IF BOOKING MORE THAN 10 ROOMS ASK FOR THE HOTEL SALES  
DEPARTMENT.

- 1- Inform the hotel agent that you will be guaranteeing the hotel rooms with the District's credit card and that you will be transferring the call to the travel department who will be providing them with credit card number.
- 2- Request a credit card authorization form from the hotel and forward to the travel department along with the hotel e-mail confirmations. The Travel department will transfer the call back to the person making the hotel room reservations to conclude the hotel booking. The travel department will fill out the credit card authorization form and fax to the hotel for payment once the e-mail confirmations and the credit card authorization forms are received.
- 3- You need to process a PR for payment made out to ELAN CORPORATE PAYMENT SYSTEMS, vendor V019477, BID #19-117 CONTRACT N/A.  
**A PO NEEDS TO BE IN PLACE PRIOR TO YOUR DEPARTURE.**
- 4- **You must turn in an itemized hotel invoice, with the PO number written on it, to the Travel department no later than 3 days after you return from your trip.**



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## **HOTEL STUDENT TRAVEL CREDIT CARD PAYMENT**

**PROVIDE TRAVEL DEPARTMENT WITH THE FOLLOWING  
INFORMATION**

**NAME:** \_\_\_\_\_

**CAMPUS:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Hotel Name:** \_\_\_\_\_

**Hotel Address:** \_\_\_\_\_

**Hotel Phone Number:** \_\_\_\_\_

**Hotel Arrival Date:** \_\_\_\_\_ **Departure Date:** \_\_\_\_\_

**Name hotel reservation booked under:** \_\_\_\_\_

**Name of hotel booking agent:** \_\_\_\_\_

**Hotel Confirmation #:** \_\_\_\_\_

**FORWARD MAYRA CASTAÑEDA ANY HOTEL E-MAIL CONFIRMATIONS  
YOU HAVE.**

**DON'T FORGET TO REQUEST A CREDIT CARD AUTHORIZATION FORM FROM  
THE HOTEL. HAVE THEM E-MAILED TO: [mayra@bisd.us](mailto:mayra@bisd.us) .**