Hazlehurst City School District
Excellence is the Expectation
Dr. Nonya C. Thrasher, Interim Superintendent
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OFFICE OF ACCOUNTS PAYABLES

TRAVEL ADVANCE WITHHOLDING AUTHORIZATION

Employee's Name: _____

Dates of Travel: From _____/_____/_____to _____/_____/_____

Advancement Details:

1. Daily Meal Allowance # Days _____ x $68.00 = $ _____ *(Overnight Stays Only)*
2. Mileage # Miles _____ x $0.70 = $ _____
3. Other: _____

Total Advance Requested **$_____**

In consideration for the District issuing a travel advance to me for travel on District related/sponsored business, I execute this authorization. This authorization specifically allows the Hazlehurst City School District to withhold any amount of the travel advance that is not accounted for by documentation/receipts and the returned, unused travel advance from my paycheck.

By executing this authorization, I understand and agree to the following:
I have read and understand the Hazlehurst City School District's Travel Advance Guidelines listed below:

1. I am being provided a travel advance from the District for the purpose of traveling to the following District related/sponsored event:
   a. _____
2. I understand that I am solely responsible for providing the District with any documentation/receipts supporting the use of the travel advance within five (5) business days of my return from travel.
3. I understand that I am to return the entire unused portion of the travel advance, if any, to the District within five (5) business days of my return from travel.
4. I understand that if I fail to return all documentation/receipts supporting the use of the travel advance and the entire unused portion of the travel advance, if any, to the District within 7 business days of my return from travel, the District will withhold any amount of the travel advance not supported by the documentation/receipts and the unused portion of the travel advance from my next paycheck, up to and including the entire amount of the above requested travel advance I received from the District.

I, _____, specifically authorize the District to withhold any amount of the travel advance not supported by the documentation/receipts and the unused portion of the travel advance from my next paycheck, up to and including the entire amount of the travel advance I received from the District. This authorization is only effective in the event I fail to provide the required documentation/receipts and the unused portion of the travel advance to the District as set forth in this authorization and in the Hazlehurst City School District's Travel Advance Guidelines

District Employee Signature: _____ Date: _____
☐ Approved
☐ Denied
Superintendent Signature: _____ Date:_____