Revised 09/10/2026

PREAPPROVAL FOR REIMBURSEMENT OF TRAVEL EXPENSES

DATE: _____

Mrs. Lori Beasley, Superintendent
Henry County Board of Education
P O Box 635
Abbeville, AL 36310

Dear Mrs. Beasley,

I have been granted detached duty on _____(date) for the purpose of

_____.

I wish to be reimbursed for the following expenses:

_____ Mileage (at the rate of .76 per mile)
_____ Registration fee in the amount of _____.
_____ Hotel / Motel accommodations
_____ Meals
_____ Other (please specify) _____

Appropriate receipts will be submitted with a travel form upon completion of the trip.
Your consideration of this matter will be appreciated.

Sincerely,

_____
Teacher

APPROVED:

_____
Principal

APPROVED:

_____
Signature of Supervisor from whose budget expenses will be paid

APPROVED:

_____
Superintendent