

THERMALITO UNION SCHOOL DISTRICT
VTXGN REQUEST HQTO

Requested by: _____ Date Submitted: _____

Organization/Location of Trip: _____

Nature of Trip: _____

Date(s): _____

Estimated Expenses (*Original itemized receipts are required for all expenses except mileage*):

Meals \$ _____

Travel _____

Mileage _____

Registration _____

Lodging _____

Parking _____

Other _____

Substitute Costs _____

Total Estimated Expenses _____

Is this a budgeted item? _____

Advance Tgs wguv< Yes/No (Please Circle) If Yes, amount_ aaa_ aa _____

Employee Requesting Approval

Employee ID #

Approved: _____
Principal/Program Manager

CeeqwpvE qf g<

Superintendent/Cukr/Uwr 'qhdwukpgui

Board Approval Date, if applicable

NOTE: All overnight and/or out of state travel for which reimbursement will be claimed shall have prior Board approval (BP 3350). Submit to the District Office fifteen (15) working days in advance of planned trip. You must complete "Reimbursement tgs wguv'for Travel/Workshop Expenses" after your trip to reconcile your advance within fourteen (14) following return to the District. If advance exceeds expenses, attach a check made payable to TUSD.

Board Approved: 03/23/06