

School Board

Exhibit - Board Member Travel Expense Purchase Order

Submit to the Superintendent who will include this request in the monthly list of bills that is presented to the School Board.

Name: _____ Request date: _____

Destination: _____ Purpose: _____

Departure date: _____ Return date: _____

Please print

Estimated Expenses									
* Auto Travel Allowance: _____ per mile									
Date	Mileage *		Lodging	Meals			Other		Daily Total
	Miles	Cost		Breakfast	Lunch	Dinner	Item	Cost	
Total									\$

Board Action: **Approved** **Denied**

Board President or Secretary

Date