

Rio Brazos Education Cooperative Professional Travel Request

To: Special Education Director
 From _____ Date _____

I request permission to travel on behalf of Rio Brazos Education Cooperative for the following purpose:

Destination: _____ Dates of travel: _____

I estimate my expenses as follows:

| | |
|--|--|
| Transportation (include type) (Auto allowance = .585¢/mile) | |
| Lodging (no state tax) (Paid directly to hotel) | |
| Meals (\$36/day max.) | |
| Registration (Paid directly to conference) | |
| Other (please specify) | |
| TOTAL | |

I request an advance payment of \$ _____.

Only meals will be advanced. Original receipts are required upon completion of travel. Lodging and/or registration information will be needed for advanced direct payment(s).

 Advance Amount Approved

 Total Amount Approved

Approval _____
 Special Education Director Date

Please submit this form to the Special Education Director at least 30 days before the proposed travel. All expenditures, with the exception of mileage, must be substantiated by original receipts (not credit card receipts). Expenditures for which receipts are required include meals, tolls, and conference registration fees, as well as lodging and travel by public transportation.