## San Felipe Del Rio CISD Student Travel Authorization & Settlement Form **Purchase Order Numbers:** Mileage Transportation Hotel Meals Registration Campus and Organization Name: # of Male Students: # of Female Students: Purpose of Travel: # of Male Sponsors: # of Female Sponsors: Lead Sponsor: Address of Destination: City: Estimated Date Actual Date Leave Time Leave Time Return Time Return Time Mode of Transportation: Enter the Number of vehicles needed in the box. **Activity Bus** Charter Bus Other Fund Function Org Yr PI OTC Account Code: **Estimated** Actual **Expenses: Expenses:** Student Meals Student Meals Obj 6412 SO 56 Sponsor Meals Obj 6412 SO 56 Sponsor Meals Driver Meals Obj 6412 SO 56 Driver Meals Registration Obj 6412 SO 10 Registration Bus Obj 6494 SO 52 Bus Activity Bus Obj 6494 SO 51 Activity Bus $Van\ \mathrm{Obj}\ 6494\ \mathrm{SO}\ 54$ Van Charter Obj 6412 SO 53 Charter Lodging Obj 6412 SO 55 Lodging Other Obj 6412 Other Total Total Amount Advanced: Due to Traveler: Due to District: Return Travel Settlement Signatures (Completed): Approval Signatures: TEA 1/8/15 Grant Travel Guidance- I certify that the actual costs listed above are true and correct. I understand that I may be required to validate the actual Sponsor/Coach Date costs with detailed receipts. If actual costs are less than the advanced per diem, the traveler must reimburse the unspent funds to the district with this settlement form. Actual costs that exceed the GSA rates will not be reimbursed. Principal/Athletic Director Date Sponsor/Coach Date District Officer Date Principal/Athletic Director Date