

San Felipe Del Rio CISD
Student Travel Authorization & Settlement Form

Purchase Order Numbers:

Mileage		Hotel		Transportation	
Meals		Registration		Other	

Campus and Organization Name:	# of Male Students:
Purpose of Travel:	# of Female Students:
Lead Sponsor:	# of Male Sponsors:
Address of Destination:	# of Female Sponsors:
	City:

Estimated Date	Actual Date
Leave	Leave
Time	Time
Return	Return
Time	Time

Mode of Transportation: **Enter the Number** of vehicles needed in the box.

Bus		Activity Bus		Charter	
Van		Air		Other	

	Fund	Function	Org	Yr	PI	OTC
Account Code:						

		Estimated Expenses:	Actual Expenses:	
Student Meals	Obj 6412 SO 56		Student Meals	
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	Obj 6494 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:		

Approval Signatures:

Sponsor/Coach	Date
Principal/Athletic Director	Date
District Officer	Date

Return Travel Settlement Signatures (Completed):

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 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.

Sponsor/Coach	Date
Principal/Athletic Director	Date