

Travel Request FormName: Greg Duty _____ ☐ Board Member ☒ Employee ☐ Other, as specified _____

School/Work Site: Griffin Gate Lexington Conference/Workshop: KASS Annual Conference

Date(s): 12/10-12/12 _____ Departure Time: 12:00pm _____ Return Time 2:00pm _____

Rationale for Attendance: The Kentucky Association of School Superintendents will be holding the KASS Annual Conference in order to offer opportunities for professional development, professional networking, and career growth for top-level school administrators.

Expenses paid by: ☐ Individual ☒ Board ☐ Special Education ☐ KEA ☐ Co-Op☐ School Council ☐ Other, as specified _____Substitute Needed? ☒ No ☐ Yes Number of Days _____Registration Reimbursement Requested ☒ No ☐ Yes Amount: _____

Estimated Mileage Total Miles: 161 miles Total Cost \$66.01

Mileage will be reimbursed at the rate approved by the Board.

Lodging Reimbursement Requested ☒ No ☐ YesAmount per night _____ ☐ Regular Rate ☐ Business Rate ☐ Conference Rate**The District will not reimburse for lodging expenses for guests/traveling companions.**Meals Reimbursement Requested: ☐ No ☒ Yes Total Daily Meal Expense Limit \$ _____

Meal limits do not include gratuities. The District will not reimburse employees for gratuities exceeding 15% of the meal charge.

Receipts required for all expenditures.

After Conference/Workshop, turn in expenses for Registration, Lodging, Meals, and other related charges on a Standard Invoice and attach receipts, as appropriate.

Greg Duty _____

11/7/17 _____

*Signature of Applicant**Date*_____
*Signature of Superintendent/Designee*_____
*Date***RELATED PROCEDURE:**

04.31 AP.2 (District procurement cards)

Review/Revised: 7/11/13