



\* Day trip w/ students

Abilene Independent School District

TRAVEL REQUEST / EXPENSE STATEMENT

Date Aug. 8 2018 Campus One AISD Center  
Employee Name Meghann Kilchrist Employee ID # 9110785 (# on your badge)  
Home Address 322 CR 676 City Tuscola State TX Zip Code 79562  
Purpose of Trip Football Playoffs  
Estimated Date of Departure Aug. 10, 2018 Destination Odessa

Estimated Expenses

Type of Expense

Actual Expenses

Air Travel \_\_\_\_\_  
Mileage on personal car \_\_\_\_\_ @ \_\_\_\_\_ cents  
Rode with \_\_\_\_\_  
Lodging (Attach itemized receipt)  
Roomed with \_\_\_\_\_  
Meals-Employees (\$7 Breakfast, \$10 Lunch, \$18 Dinner) *overnight required*  
Meals provided for (list names) Kilchrist, Mathis \$28.00  
Johnson, Reece, Stevenson  
Meals-Students # 125 @ \$7 each (average) \$847.00  
Registration (attach receipts) (121)  
Other expenses (please itemize, attach receipts)  
Gas for Semi \$133.18  
Bus driver meals (x3) \$25.00

\$35.00  
\$875.00  
\$125.00  
\$25.00

\$1056.00 TOTAL

TOTAL EXPENSES \$1,033.18

NEED ADVANCE

AMOUNT ADVANCED

AMOUNT DUE EMPLOYEE

YES ☒ NO

AMOUNT DUE DISTRICT \$22.82

Actual Date of Departure _____ Time _____ AM/PM	MUST COMPLETE UPON RETURN
Actual Date of Return _____ Time _____ AM/PM	

ADVANCE/PERMISSION TO ATTEND		FINAL APPROVAL AFTER TRIP IS COMPLETED <small>I certify that the above expenses were incurred by me in the performance of my official duties.</small>	
Date _____	Employee _____	Date _____	Employee _____
Date _____	Supervisor _____	Date _____	Supervisor _____

BUDGET CODES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List Prepaid Expenses (paid by AISD Accounting including registration, hotel deposits, etc.)

VENDOR	DESCRIPTION	PO#	PAYMENT AMOUNT
_____	_____	_____	_____
_____	_____	_____	_____

White - Send to appropriate supervisor for permission to attend or for advance if requested 5 working days before departure  
Yellow - Send to appropriate supervisor when trip is completed  
Pink - Campus copy  
Gold - Employee copy

RETURN FINAL WITHIN 5 DAYS OF RETURN

For Business Office Use Only	
Advance Check # _____	Receipt # _____
Trip ID # _____	Refund Check # _____