TRAVEL REQUEST FORM (POLICY 546.00F)

5 p.	TITLE OF C	ONFERENCE					* .	DESTI	NATIO	N						(CHECK	ONE		
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	Professiona	l Developme	nt				BOAR	D ST	ΓAFF	TE	АМ		#STI	JDENT	S			# CHAPE	RONES	
REQUESTS THAT ARE REQU	JIRED BY GRANT, G	OVERNMENTA	AL RULES A	ND REGI	ULATIONS, OR C	ONSIDERED II	MPERATIVE TO TH	HE OPERATI	ON OF	THE DIST	RICT ARE SUB.	JECT TO	1			IDING		CE (MARK C		
APPROVAL. THE DEADLINI REQUESTS ARE REVIEWED	FOR ALL TRIP REQ	UESTS ARE TH	IE FIRST M	ONDAY	EACH MONTH.				OUT (OF RADIL	JS AND STUDE	NT	DISTRI	CT PD		SPECIA	L ED		ACTIVITIES	
NEQUESTS AND NEVIEWED	AT THE SEPTEMBE	N BOARD WILL	TING.	MEA	1.0			MUTACE			1 1/51		FEDER	AL	xx	SAFETY			VOCATION	
NAMES OF ATTENDEES	DATE(S) OF TRAVEL	BREAKFAST \$10	LUNCH \$15	DIN STA		DAILY TOTAL	DESTINATION CITY OR AIRPORT	MILEAGE MILES	TOTA .45 PER M		Y/N DISTRICT CAR AVAILABLE	PARKING BAGGAGE		AL CAR	SUB	REGIST	TRATION	AIRFARE	LODGING	TOTAL STAFF REIMB
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	7-Nov-19		\$	15 \$ 15 \$	30 20		and the second control of the second control		*				ľ	50			80	7 323	\$ 223	\$ 303
Michael Pearson	4-Nov-19 5-Nov-19 6-Nov-19	\$ 10	\$	\$ 15 \$ 15 \$	20 30 30	\$ 55 \$ 55	1		\$	7 <u>-</u>			\$	50		\$	160	\$ 325	\$ 225	\$ 225
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				0	UT OF RADIL	JS TRAVEL.	RECIEPTS RE	QUIRED F	OR NO	N PER	DIEM EXPE	NSES INCU	RRED.							
BUDGET CODE: PROGRAM DIRECTOR INITIAL: SIGNATURE(S) OF SUPERVISOR ADMINISTRATOR: DocuSigned by:												SL			TOTAL CO	OST OF	REQUEST	Ī	\$	1,869
SIGNATURE(S) OF SUPER	GNATURE(S) OF SUPERVISOR/ADMINISTRATOR: Docusigned by: 9/26/2019																			
SIGNATURE OF SUPERIN	TENDENT:					0/2019					BOARD) APPRO	VAL DATE							
	BDA	355988D4640C																		

Wells Fargo

INVOICE FOR THE IML EXPO - NEVADA

Invoice To: Sylvia Lujan Minidoka School District

Invoice number:	4794
Invoice Date:	09/27/2019
Registration Reference:	EV1472V9O8P
VAT Number:	1234567

Description	Unit price	Quantity	Amount (USD)
Advanced Breaking And Entering	40.00	2	80.00
How To Keep Your Door Hardware Code Compliant	40.00	2	80.00
Security Lockdown Solutions For Classrooms		2	
Servicing LCN Closers And Von Duprin Exit Devices	40.00	1	40.00
Transponder Keys, Machines And Programming	40.00	1	40.00
Lock Picking Tips And Tricks	40.00	2	80.00
IML Security Show		. 1	
Event Booking: Attendee		2	

Sub total: Grand total: 320.00

pay 50 Se 9/30/19

Course Date: November 5th and 6th

Course Held At: The Orleans Hotel And Casino 4500 West Tropicana Ave Las Vegas, Nevada 89103 Phone: (702) 365-7111

Please send all course payments to:

IML Security Supply

ATTN: Crystal Hickenlooper PO Box 65158 Salt Lake City, Utah 84165 P: (800) 453-5386

Cancellation Policy - For a full refund for class(es), please send a cancellation request at least 24 hours prior to your class(es) to crystalh@imlss.com. If you do not cancel, you will be charged the full price for the class(es) you do not attend.



The Orleans Hotel Room Reservations

4 messages

The Orleans Hotel Room Reservations

Fri, Sep 27, 2019 at

<boydnevadareservations@boydgaming.com>

To: Michael Pearson <slujan@minidokaschools.org>

10:45 AM

Reservation Confirmation

Dear Michael Pearson,

Thank you for booking with the Orleans Hotel and Casino. We look forward to your stay with us.

Guest Details

MICHAEL PEARSON 310 10TH STREET RUPERT, ID 83350

Reservation Details

Confirmation Number:

3WRSP

Arrival Date:

Monday, 11/04/2019

Number of Nights:

2

Departure Date:

Wednesday, 11/06/2019

Room Type:

T3/PK

Number of Rooms:

4

Room Description:

13/PK

PREM KING NONSM

Number of Guests:

1 Adult(s) 0 Children

Group:

A9MLC11

Reservation Policies

Check-in Time:

04:00 PM

Check-out Time

12:00 PM

Deposit Requirements:

\$.00 due 10/11/2019

Deposit Received:

\$56.50 09/27/2019

Deposit Forfeited:

\$56.50 if cancelled within 1 days of arrival

Tax Info:

TAX 2 - 13.000000%

Room Rate Info

Date	Rate inc Tax	Nts	Total	Info
11/04/2019	\$56.50	2	\$113.00	Group Rate

Reservation Policies

Check-in Time:

04:00 PM

Check-out Time

12:00 PM

Tax Info:

TAX 2 - 13.000000%

[Quoted text hidden]

The Orleans Hotel Room Reservations

Fri, Sep 27, 2019 at 10:46 AM

<boydnevadareservations@boydgaming.com>
To: Pat Swigert <slujan@minidokaschools.org>

Reservation Confirmation

Dear Pat Swigert,

Thank you for booking with the Orleans Hotel and Casino. We look forward to your stay with us.

Guest Details

PAT SWIGERT 310 10TH STREET RUPERT, ID 83350

Reservation Details

Confirmation Number:

2WWVP

Arrival Date:

Monday, 11/04/2019

Number of Nights:

3

Departure Date:

Thursday, 11/07/2019

Room Type:

T1/PK

Number of Rooms:

1

Room Description:

PREM KING NONSM

Number of Guests:

1 Adult(s) 0 Children

Group:

A9MLC11

Reservation Policies

Check-in Time:

04:00 PM

Check-out Time

12:00 PM

Deposit Requirements:

\$.00 due 10/11/2019

Deposit Received:

\$56.50 09/27/2019

Deposit F orfeited:

\$56.50 if cancelled within 1 days of arrival

Tax Info:

TAX 2 - 13.000000%

Room Rate Info

Date	Rate inc Tax	Nts	Total	Info

	TITLE OF CONFERENCE MINICO GIRLS BASKETBALL							DESTI	NATION					CHECK	ONE		
	MINICO GIR	LS BASKET	ΓBALL					ВС	DISE			IN-RADIU	S	х	OUT-RA	ADIUS	
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BUDGET CODE:	GIRLS BASKE	TBALL; DIST	RICT TRAN	SPORTATION			AM DIRECTOR IN			INCO TON	NOW FER	DILIVI EAPEI		COST OF REQU	EST	\$	3,156
SIGNATURE(S) OF SUI	PERVISOR/ADN	INISTRATO	R: P	~/		~											
SIGNATURE OF SUPER	RINTENDENT:	Keb.	B	9-16-1	9									BOARD APPR	OVAL		

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ROLLIE LANE	3442 1,2020				\$ -	NAMPA	360		N		\$ 1,170		\$ 350		\$1,848	
					\$ -											
	JAN 10-11, 2020				\$ -											
SKYVIEW DUAL					\$ -	NAMPA	360		N		\$ 1,170		\$ 200		\$ 840	
	JAN 16-17, 2020				\$ -	_										
SPRING CREEK					\$ -	SPRING CREEK, NV	420		N		\$ 1,365		\$ 200		\$1,080	
	FEB 7-8, 2020				\$ -	-		-								h
MARIO D'ORAZIO TOURNAMENT	, 25 7 0, 2020				\$ - \$ -	CHALLIS	408		N		\$ 1,326		\$ 250		\$ 910	
	FEB 21-22, 2020				\$ - \$ -	1										
DISTRICT TOURNAMENT	16521-22, 2020				\$ -	POCATELLO	148		N		\$ 481				\$1,526	
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BUDGET CODE:		PERDIEM F		SED AHEAD FOR		RADIUS TRAV		IEPTS REQI	JIRED FOR	NON PER	DIEM EXPEN	CONTRACTOR OF THE PROPERTY OF	CURRED.	JEST	\$	15,088
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	NOV 1-2, 2019															
CROSS COUNTRY TEAMS					\$ 481				\$ 500							
TEAIVIS																
	NOV 1-2, 2019															
VOLLEYBALL TEAM			\$ 3,900				\$1,800									
VOLLETBALL TEAM					\$ -	POST FALLS	1200		N		\$ 3,500				31,800	
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ALL FORMS MU											DIEM EXPEN	SES INC	CURRED.			
PERDIEM REIMBURSED AHEAD FOR OUT OF RADIUS TRAVEL. RECIEPTS REQUIRED FOR NON PERDIEM EXPENSES INCURRED. BUDGET CODE: ATHLETICS, DISTRICT TRANSPORTATION PROGRAM DIRECTOR INITIAL: TOTAL COST OF REQUEST \$ 9,354													9,354			
SIGNATURE(S) OF SU	PERVISOR/ADM	IINISTRATO	1													
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	TITLE OF C	ONFERENC	Œ				DESTI	NATION			1 185		CHECK	ONE]	
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REQUESTS THAT ARE R	EQUIRED BY GRA	NT, GOVERN	MENTAL RU	LES AND REGULATI	ONS, OR CO	NSIDERED IMPE	RATIVE TO	THE OPERAT	ION OF THE D			FUN	DING SOUR					
ARE SUBJECT TO APPRI RADIUS AND STUDENT						ACH MONTH.				OUT OF	DISTRICT PD FEDERAL		SPECIAL ED SAFETY		ACTIVITIES			
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ORCHESTRA STUDENTS													850/PERSON					
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MEAGEN ANDREW	APRIL 1-5, 2020				\$ - \$ - \$ -	ANAHEIM, CA			N			\$ 225	\$ 850					
				\$ -												*		
CHAPERONES TBD	APRIL 1-5, 2020				\$ -	ANAHEIM,			N				850/PERSON					
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SIGNATURE OF SUPE	ATURE OF SUPERINTENDENT: 10-4-19												BOARD APPR	ROVAL				
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Orchestra Tour Proposal April 1-5, 2020 Anaheim, California

Itinerary

Wednesday Leave 6 am MHS Arrive in Anaheim around 8:30 p.m.

Thursday
Huntington Beach
Camelot Golfland
Downtown Disney District

Friday
Disneyland/California Adventure
Competition Music in the Parks

Saturday Disneyland/California Adventure Award Ceremony in the Park

Sunday Leave hotel 8:30 a.m. Arrive MHS 10:30 p.m.

Cost: \$850 per person

\$260 per person for 2 days in Disneyland, Music in the Parks competition, and Awards Ceremony

\$150 per person for the bus

\$170 for meals (\$30 per day Wednesday, Thursday, and Sunday. \$40 per day Friday and Saturday)

\$20 for Camelot Golfland

\$250 per person for hotel

TRAVEL REQUEST FORM (POLICY 546.00F)

	TITLE OF	CONFERENCE					DEC	TIALATI	ON	***************************************			DESTINATION CHECK ONE									
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					1	200																
	UDENT ACTIVIT		- 200			BOAF		STAFF	TEA			# STUDEN	TS	30	# CHAPE	RONES	4					
REQUESTS THAT ARE REC	QUIRED BY GRAN	T, GOVERNMENT	AL RULES AN	ND REGULATIONS, C	OR CONSIDER	RED IMPERATIVE T	O THE OPE							UNDING SC	URCE (M	ARK ONE)						
APPROVAL. THE DEADLING ARE REVIEWED AT THE SI			HE FIRST MO	NDAY EACH MONT	н.			OUT C	OF RADIUS A	ND STUDENT	REQUESTS	DISTRICT PD		SPECIAL ED		ACTIVITIES						
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SHEILA BARBOZA (SUB BUS DRIVER)	2-Nov-19				\$ -			\$	_				\$300			c 100						
BOS DRIVER)			 	 	\$ -			*					2300			\$ 100	\$ -					
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	7	XMM/						9,	/19/201	C8ACBED45D L 9				DATE								
	C,	BDA355988D4640	O			-	1															

TRAVEL REQUEST FORM (POLICY 546.00F)

	TITLE OF	CONFEDENCE			DESTINATION									CHECK ONE				
	TITLE OF	CONFERENCE			1		DES	TINAT	ION					CHE	CK ONE			
м	IIDDLE SCHOOL							BOISE				IN RADIUS	5	х	OUT OF RADIUS			
	PURPOSE	OF CONFERENCE	CE			R	EPORT TO	D: (CIF	RCLE ONE)			ST	TUDENT	TRAVEL OV	ERNIGHT	Y/N		
ST	UDENT ACTIVIT	Y TRAVEL - EAS	ST/ WEST			BOAF	RD !	STAFF	TEA	AM		# STUDEN	TS	30	# CHAPE	RONES	4	
REQUESTS THAT ARE REC	QUIRED BY GRAN	T, GOVERNMENT	TAL RULES AN	ND REGULATIONS, C	OR CONSIDER	RED IMPERATIVE T	O THE OPE	ERATIO	N OF THE D	STRICT ARE SI	UBJECT TO			UNDING SC			L	
APPROVAL. THE DEADLIN	NE FOR ALL TRIP I	REQUESTS ARE T	HE FIRST MO	NDAY EACH MONT	н.					ND STUDENT		DISTRICT PD		SPECIAL ED	ONCE (IVI	ACTIVITIES		
ARE REVIEWED AT THE SI	EPTEMBER BOAR	D MEETING.										FEDERAL		SAFETY		VOCATION		
			M	EALS			MILEAC	GE.		Y/N								
NAMES OF ATTENDEES	DATE(S) OF TRAVEL	BREAKFAST \$10	LUNCH \$15	DINNER IN-STATE \$20 OUT-STATE \$30	DAILY TOTAL	DESTINATION CITY OR AIRPORT	MILES	\$1.00 MILE	0 PEF	DISTRICT CAR AVAILABLE	PARKING BAGGAGE	RENTAL CAR SHUTTLE TAXI	SUB	REGISTRATION	AIRFARE	LODGING	TOTAL STAFF REIMB	
	20-Dec-19 21-Dec-19	NON NEEDED			\$ -													
RICK STIMPSON	21-Dec-19		 		\$ - \$ -	BOISE	330	\$	330.00	NO				\$ -		\$ 140	\$ 330.00	
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		NON NEEDED			\$ -			T										
COACH	21-Dec-19		ļ	ļ	\$ -	l		\$	_							SHARING	\$ -	
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	20-Dec-19	NON NEEDED		 	\$ -			+-		<u> </u>								
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COACH					\$ -	1		\$	-							SHARING	\$ -	
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	20-Dec-19 21-Dec-19	NON NEEDED			\$ -													
SHEILA BARBOZA (SUB BUS DRIVER)	21-060-19				\$ -			\$	-				\$300			\$ 140	\$ -	
DOS DRIVERY		-	 		\$ -			1					7556			7 140	7 -	
							VEELCE I	ICE (2011									
ALL FORMS MUST	F DE TYPED	INCOMPLETE	TDAVICE D	FOLIFETE MILL	DE DETUD		FFICE L											
ALL FORINS INIUS	I BE ITPED.	INCOMPLETE		HEAD FOR OUT						ION PERDIE	M EXPENS	SES INCURRI	ED.			PERDIEM RE	IMBURSED	
BUDGET CODE:		EAST/ WEST AC			PROG	RAM DIRECTOR IN	ITIAL:	U	J	DocuSig	_ss_		TOTAL C	OST OF REQUE	ST	\$	2,310.00	
SIGNATURE(S) OF SUPE			Docusigned t	D. =	7 9	9/14/2019					Heath		9/16/2019					
SIGNATURE OF SUPERI	NTENDENT	DocuSigned by:	1D212EEB3C	1A403				9/1	9/2019		ACBED45D			BOARD APPROVAL DATE				
	1	WW.							,	***************************************								
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