AMPHITHEATER PUBLIC SCHOOLS STAFF TRAVEL/CONFERENCE REQUEST

THIS FORM SHOULD BE USED FOR ALL TRAVEL EXCEPT THAT TRAVEL WITHIN PIMA COUNTY OR A.I.A. SANCTIONED EVENT TRAVEL.

EMPLOYEE(S):	<u>Lacy</u> <u>Mendoza</u>		SC	SCHOOL: <u>CDO</u> Department (opt.):	
		- Company - Comp			
	MA TOTAL CONTROL OF THE STATE O	DATE(S): <u>June 24 -28, 2013</u>			
ACTIVITY/EVEN			ts Category 2		
LOCATION: M	<u>Iontezum</u>	a, NM			
ABSENCE: #	Days <u>5</u>	Sub Required: [Yes No	# of School Days Missed 0	
EXPENSES REQU	ÆSTED:	(OBTAIN RECE	IPTS FOR ALL INC	URRED EXPENSES)	
		<u>APPROXIMA</u>	TE COST	BUDGET CODE/DESCRIPTION (Note: Tax credit contributions are District funds and require a budget code.)	
Registratio	n <u>1</u>	<u>519.00</u>		140-13-100-2210-510-6360	
Transporta	ation <u>6</u>	<u>50.00</u>	Mode <u>airline</u>	140-13-100-2210-510-6582	
Rental Car	_1	00.00 Taxi/shuttle	<u>e</u>	<u>140-13-100-2210-510-6582</u>	
Meals	9	<u>8.00</u>		<u>140-13-100-2210-510-6582</u>	
Lodging		anni de de la companya de la company		Statements	
Substitutes	4 -горования	0.00		harmone and the second	
TOTAL	23	67.00			
The District will	or) wil	l not 🛛 receive i	reimbursement from o	outside sources.	
Purpose of travel: 1	Lacy will	receive her categ	ory 2 training for Vi	sual Arts that is a requirement of IB.	
				e and benefit is the in-depth training in dents with assessment knowledge.	
Submitted by: Sig	Lac pature	y Me	ndoza	5/16/13 Date 5/16/13	
Principal/Supervisor				Date	
	Mi	Rel		5/24/13	
Associate Superintendent/Superintendent				Date	