

Recognit	ion: Students	Staff	Parents			
Informat	tion: 🗌 Building Report	Old Business	Superintendent's Report			
Action:	Resignations	Hiring	Contract Service Agreements			
	Travel Out-of-State	Travel In State	Approvals			
	Termination	Legal Matters	Other:			
	This action request pertains to	Elementary (only)	High School/District Wide			
Date:	12/8/21					
To:	Board of Trustees		Brian Gallup			
	Browning Public Schools	Title:	School Board Chair			
Subject: 2021-2022 Board of Directors Winter Meeting						

Description: The Board of Directors meeting will be held in Miami, FL in January 2022. Due to changes in the NAFIS office, the agenda will be distributed later. However in order to prepare for the travel I have requested to add this item to the board agenda and hope that an agenda is ready soon.

Justification (District Goals): Mr. Gallup sits on the NAFIS Board of Directors and is the NAFIS representative for Montana.

Financial Impact: \$380.88 (Per Diem \$440.00 less \$250.00; Mileage \$110.88; Lodging \$0; Registration \$0; Airfare \$0; Luggage \$80.00 (<u>District will receive reimbursement of \$250.00 for meals and full reimbursement for airfare</u>)

Funding Source (Budget/grant, etc.): Board Travel Budget

Attachment(s): Agenda to be distributed as soon as received

Approval: Superintendent's Office/Finance/Personnel as applicable (Initial)

Browning Public Schools Board of Trustees Travel Request

Trustee Name	Brian Gallup						
Type of Travel:	be of Travel: Travel to Posted Meetings (MCA 2-18-503)						
	Travel Out of D	istrict					
Date Approved by	y Board						
Out of District Tr							
	shop NAFIS Board of]	Directors Winte Brochure/Agend					
Location Miami,	Florida						
Departure Date		Return Da	te				
Departure Time _		Return Tir	ne				
Transportation:	🛛 Personal Vehicle		Mileage 198	<u>@.56</u> = <u>110.88</u>			
	District Vehicle	Per Diem	4@\$90+\$30IS+\$180	DB+\$32 $OL=$ 440.00			
	Other	Registratio	on <u>PO</u> #	= 0.00			
		Hotel	PO#	= 0.00			
		Airfare	PO#	= 0.00			
			PO# Luggage				
		Other	PO# Meal Reimb	ursement = -250.00			
				Sub Total <u>\$380.88</u>			
8).2310.582.84 (75%)\$ 4).2310.582.84 (25%)\$ 1		Check To	tal <u>\$630.88</u>			
Trustee Signature	2		Date				
Chairman Signatu	ure		Date				
Superintendent Si	ignature		Date				

Please attach receipts for hotel, airline and/or conference fees. All over payments will be rectified by adjusting the next per diem allowance.