: -		Date:							
-	Date:								
	CANTON	N INDEPENDE	NT SCF	IOOL DISTRI	ICT				
				ense Form					
/el									
Γravel _									
Date of Departure:		Time:							
Date of Return:		Time:							
	Attach a list o	of Sponsors & Stud	dents for	Meals & Hotel L	odging.				
Obta	ain signatures documenti	ing receipt of cash.	. Submit	to the business	office withi	n 5 days of retu	ırn		
'EES				STUDEN	TS				
t # _	@ \$10.00 =	=		Breakfast	#	@ \$1	0.00 = _		
# _	@ \$12.00	=		Lunch	#	@ \$1	0.00 = _		
# _	@ \$18.00	=		Dinner	#	@ \$1	0.00 = _		
То	tal Employee Meals				Total Stude	ent Meals:	-		
Rooming L	ist. Remit hotel rece	eipt(s) within 5 d	ays of ı	eturn					
NAME:						-			
Sponsor Hotel Rooms			Student Hotel Rooms						
# Rooms	Room Rate To	otal		# Nights	# Rooms	Room Rate	!	Total	
			ı			Sub Tota	al .		
	Sub-Total						F		
						City & Loca	arrax		
Student Hete			Tota	al Sponsor Ho	tel Charge	S			
student note	er Charges								
					Total Evne	nse Claimed			
					Total Expe	nisc Glaimea			
			Bud	get Code					
rtment Direc	ctor Approval		Bus	iness Office A	pproval				
	rel	CANTOI Special Common Cantol	CANTON INDEPENDE Sponsor & Student T CO Vel Travel Attach a list of Sponsors & Stude Obtain signatures documenting receipt of cash TEES It # @ \$10.00 = # @ \$12.00 = # @ \$18.00 = Total Employee Meals I Rooming List. Remit hotel receipt(s) within 5 d IAME: Sponsor Hotel Rooms # Rooms Room Rate Total Sub-Total City & Local Tax Student Hotel Charges	CANTON INDEPENDENT SCH Sponsor & Student Travel Exp Campus Vel Travel Travel Attach a list of Sponsors & Students for Obtain signatures documenting receipt of cash. Submit EES t # @ \$10.00 = # @ \$12.00 = # @ \$18.00 = Total Employee Meals RROOMING List. Remit hotel receipt(s) within 5 days of responsor Hotel Rooms # Rooms Room Rate Total Sub-Total City & Local Tax Student Hotel Charges Bud	CANTON INDEPENDENT SCHOOL DISTRI Sponsor & Student Travel Expense Form Campus rel Travel Time: Attach a list of Sponsors & Students for Meals & Hotel I Obtain signatures documenting receipt of cash. Submit to the business EES STUDEN #	CANTON INDEPENDENT SCHOOL DISTRICT Sponsor & Student Travel Expense Form Campus //el Travel If re: Time:	CANTON INDEPENDENT SCHOOL DISTRICT Sponsor & Student Travel Expense Form Campus rel Travel Time: Attach a list of Sponsor & Students for Meals & Hotel Lodging Obtain signatures documenting receipt of cash. Submit to the business office within 5 days of return EES STUDENTS t #@ \$10.00 = Breakfast #@ \$1 #@ \$12.00 = Lunch #@ \$1 Total Employee Meals Total Student Meals: Rooming List. Remit hotel receipt(s) within 5 days of return IAME: Sponsor Hotel Rooms # Rooms Room Rate Total # Nights # Rooms Room Rate City & Local Tax Student Hotel Charges Total Sponsor Hotel Charges Total Expense Claimed Budget Code	CANTON INDEPENDENT SCHOOL DISTRICT Sponsor & Student Travel Expense Form Campus Fravel Fravel Time: Attach a list of Sponsors & Students for Meals & Hotel Lodging Obtain signatures documenting receipt of cash. Submit to the business office within 5 days of return EES STUDENTS #	