

PREAPPROVAL FOR REIMBURSEMENT OF TRAVEL EXPENSES

DATE: \_\_\_\_\_

Mr. Chris Padget, Superintendent  
Henry County Board of Education  
P O Box 635  
Abbeville, AL 36310

Dear Mr. Padget,

I have been granted detached duty on \_\_\_\_\_(date) for the purpose of  
\_\_\_\_\_.

I wish to be reimbursed for the following expenses:

- \_\_\_\_\_ Mileage (at the rate of .58 per mile)
- \_\_\_\_\_ Registration fee in the amount of \_\_\_\_\_.
- \_\_\_\_\_ Hotel / Motel accommodations
- \_\_\_\_\_ Meals
- \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Appropriate receipts will be submitted with a travel form upon completion of the trip.  
Your consideration of this matter will be appreciated.

Sincerely,

\_\_\_\_\_  
Name  
APPROVED:

\_\_\_\_\_  
Principal  
APPROVED:

FUND SOURCE: \_\_\_\_\_

\_\_\_\_\_  
Signature of Supervisor from whose budget expenses will be paid

APPROVED:  
\_\_\_\_\_  
Superintendent