

PART 1

SCHOOL DISTRICT OF CLAY COUNTY
AUTHORIZATION TO INCUR TRAVEL

(Part 1 is to be completed prior to departure.)

COPY OF REGISTRATION FORM AND AGENDA/PROGRAM SHOWING DATES, TIME, LOCATION, REGISTRATION FEES AND ANY MEALS OR LODGING INFORMATION MUST BE ATTACHED.

Name Carol Studdard Date: 6-18-14
 School/Department: School Board Position: Member
 Conference Title and Location: FSBA Conference Tampa
 Estimated Cost Information: Departure Date: 6/11/2014 Return Date: 6/13/2014
 Number of Meals: # Breakfast # Lunch # 1 Dinner Meal Cost \$ 19.00
 Hotel OR Per Diem \$ VISA Registration Fee \$ _____ Transportation Cost \$ _____
 Incidental Expenses \$ _____ (Specify: _____) = TOTAL COST \$ _____
 Signature of Employee: Carol G. Studdard Date: _____
 Signature of Immediate Supervisor: _____ Date: _____
 Signature of Cost Center Supervisor: _____ Date: _____
 (If different than Immediate Supervisor)

PART 2

VENDOR# E0700002035

OUT-OF-COUNTY TRAVEL VOUCHER FOR REIMBURSEMENT FOR TRAVEL EXPENSES

(Part 2 is to be completed upon completion of travel.)

IF ANY EXPENSES WERE PAID BY PURCHASE ORDER, ATTACH A COPY TO THIS FORM. ATTACH COPIES OF ALL RECEIPTS/VERIFICATION OF PAYMENTS (EXCEPT INDIVIDUAL MEAL RECEIPTS). INCLUDE PROOF OF ATTENDANCE (HOTEL RECEIPT, NAME BADGE, CERTIFICATE OF COMPLETION, ETC.)

Date	Travel Performed From Point of Origin to Destination (list each day separately) FROM: TO:	Hour of Departure and Hour of Return	Per Diem or Meals	Auto Mileage Claimed	-Incidental- Expenses COST AMOUNT	- Incidental- Expenses TYPE (Room, tolls)
6/11	Home Tampa Bay	12:00 PM		187		H
12	Tampa Bay	M	19.00			
13	Tampa Bay Home	12:30 M 4:30 PM	11.00	187		
		(See attachment) M				
		M				
		M				

Did you drive? Yes or No Rode with _____
 Did you share a Room? Yes or No With whom? _____
 Did you pay for Room personally? Yes or No
 If NO how was room paid for? School Board VISA
 Were any meals/lodging included? Yes or No
 If yes, please list: all but dinner on 6/12
+ lunch 6/13
 Location to send payment to: Home

374 mi.
- 56
30^{hrs} 209.44
GRAND TOTAL
239.44

Reimbursement Approved By: _____ BUDGET CODE: 0100 17739 0330 19000 10000
Fund Function Object Cost Center Project

I hereby certify or affirm that this travel claim is true and correct in every material matter; that the expenses were actually incurred by the undersigned as necessary travel expenses in the performance of my official duties; and that same conforms in every respect with the requirements of Section 112.061, Florida Statutes. The School Board of Clay County retains its authority to audit and make any necessary corrections. In addition, should final audit by the Office of the Auditor General necessitate any changes, the School Board of Clay County retains the authority to seek reimbursement.

Payee: Carol G. Studdard (Signature)
 Approved By: _____ Date: _____
 Superintendent of Schools

PART 1

SCHOOL DISTRICT OF CLAY COUNTY
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COPY OF REGISTRATION FORM AND AGENDA/PROGRAM SHOWING DATES, TIME, LOCATION, REGISTRATION FEES AND ANY MEALS OR LODGING INFORMATION MUST BE ATTACHED.

Name Janice Kerekes Date: 6/18/14

School/Department: Clay County Position: Board Member

Conference Title and Location: FSBA Summer Con

Estimated Cost Information: Departure Date: 6/11/2014 Return Date: 6/13/2014

Number of Meals: # Breakfast # Lunch # Dinner Meal Cost \$
Hotel OR Per Diem \$ 346.00 Registration Fee \$ PO Transportation Cost \$

Incidental Expenses \$ _____ (Specify: _____) = TOTAL COST \$

Signature of Employee: Janice A Kerekes Date: 6/18/14

Signature of Immediate Supervisor: _____ Date: _____

Signature of Cost Center Supervisor: _____ Date: _____
(If different than Immediate Supervisor)

PART 2

VENDOR# E0700003475

OUT-OF-COUNTY TRAVEL VOUCHER FOR REIMBURSEMENT FOR TRAVEL EXPENSES

(Part 2 is to be completed upon completion of travel.)

IF ANY EXPENSES WERE PAID BY PURCHASE ORDER, ATTACH A COPY TO THIS FORM. ATTACH COPIES OF ALL RECEIPTS/VERIFICATION OF PAYMENTS (EXCEPT INDIVIDUAL MEAL RECEIPTS). INCLUDE PROOF OF ATTENDANCE (HOTEL RECEIPT, NAME BADGE, CERTIFICATE OF COMPLETION, ETC.)

Date	Travel Performed From Point of Origin to Destination (list each day separately) FROM: TO:	Hour of Departure and Hour of Return	Per Diem or Meals	Auto Mileage Claimed	-Incidental-Expenses COST AMOUNT	- Incidental-Expenses TYPE (Room, tolls)
6/11	Home Tampa Bay	8:00A M		183	173	<input checked="" type="checkbox"/>
12	Tampa	- M			173	
13	Tampa Bay Home	4:30P M		183		
		M				
		M				
		M				
		M				

Did you drive? Yes or No Rode with _____

Did you share a Room? Yes or No With whom? _____

Did you pay for Room personally? Yes or No

If NO how was room paid for? County VISA

Were any meals/lodging included? Yes or No

If yes, please list: * not claiming meals

346 mi. @ .56	VISA	GRAND TOTAL
204.96		204.96

Location to send payment to: _____

Reimbursement Approved By: _____ BUDGET CODE: 0100, 7739, 0330, 9100, 0700
Fund Function Object Cost Center Project

I hereby certify or affirm that this travel claim is true and correct in every material matter; that the expenses were actually incurred by the undersigned as necessary travel expenses in the performance of my official duties; and that same conforms in every respect with the requirements of Section 112.061, Florida Statutes. The School Board of Clay County retains its authority to audit and make any necessary corrections. In addition, should final audit by the Office of the Auditor General necessitate any changes, the School Board of Clay County retains the authority to seek reimbursement.

Payee: Janice A Kerekes (Signature)

Approved By: _____ Date: _____

Superintendent of Schools

PART 1

SCHOOL DISTRICT OF CLAY COUNTY
AUTHORIZATION TO INCUR TRAVEL

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COPY OF REGISTRATION FORM AND AGENDA/PROGRAM SHOWING DATES, TIME, LOCATION, REGISTRATION FEES AND ANY MEALS OR LODGING INFORMATION MUST BE ATTACHED.

Name: Shirley (Tina) Bullock Date: June 18, 2014

School/Department: School Board Member Position: District 3

Conference Title and Location: FSBA Conference Tampa, FL

Estimated Cost Information: Departure Date: 6/11/2014 Return Date: 6/13/2014

Number of Meals: # Breakfast # 1 Lunch # 1 Dinner Meal Cost \$ 30
Hotel OR Per Diem \$ 406.00 Registration Fee \$ 225 Transportation Cost \$ 173.38

Incidental Expenses \$ _____ (Specify: _____) = TOTAL COST \$ _____

Signature of Employee: Shirley Bullock Date: 6-18-14

Signature of Immediate Supervisor: _____ Date: _____

Signature of Cost Center Supervisor: _____ Date: _____
(If different than Immediate Supervisor)

PART 2

VENDOR# 80717001607

OUT-OF-COUNTY TRAVEL VOUCHER FOR REIMBURSEMENT FOR TRAVEL EXPENSES

(Part 2 is to be completed upon completion of travel.)

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Date	Travel Performed From Point of Origin to Destination (list each day separately) FROM: TO:	Hour of Departure and Hour of Return	Per Diem or Meals	Auto Mileage Claimed	-Incidental-Expenses COST AMOUNT	- Incidental-Expenses TYPE (Room, tolls)
6-11-14	Keystone Hts Tampa	1:00 PM		154.8		
6-12-14	Tampa	M	1			
6-13-14	Tampa Keystone Hts	4:00 PM		154.8		
		M				
		M				
		M				
		M				

Did you drive? Yes or No Rode with _____

Did you share a Room? Yes or No With whom? _____

Did you pay for Room personally? Yes or No

If NO how was room paid for? School Board Visa

Were any meals/lodging included? Yes or No

If yes, please list: 2 Breakfast, One lunch

3096 mi.
+ .50
173.38

GRAND-TOTAL
203.38

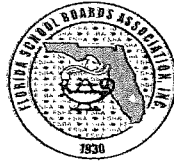
Location to send payment to: Tina Bullock 6036 Hunter Rd. Keystone Hts FL 32656

Reimbursement Approved By: _____ BUDGET CODE: 0100/7739/0330/9000/10000
Fund Function Object Cost Center Project

I hereby certify or affirm that this travel claim is true and correct in every material matter; that the expenses were actually incurred by the undersigned as necessary travel expenses in the performance of my official duties; and that same conforms in every respect with the requirements of Section 112.061, Florida Statutes. The School Board of Clay County retains its authority to audit and make any necessary corrections. In addition, should final audit by the Office of the Auditor General necessitate any changes, the School Board of Clay County retains the authority to seek reimbursement.

Payee: Shirley Bullock (Signature)

Approved By: _____ Date: _____



Wednesday, June 11, 2014
Annual Summer Conference

FSBA/FADSS Annual Summer Conference
June 11-13, 2014
Grand Hyatt Tampa Bay
Tampa, Florida

Wednesday, June 11, 2014

- 11:00 a.m. - 5:00 p.m. Conference Registration - Audubon Foyer (1st Floor)
- 11:30 a.m. - 1:00 p.m. FSBA Executive Officers' Lunch - Tower Suite (14th Floor)
- 1:00 p.m. - 2:00 p.m. Legislative Committee, Federal Relations (FRN) Subcommittee & Advocacy Subcommittee Meeting - Pelican (2nd Floor)
- 2:00 p.m. - 2:30 p.m. Finance Committee Meeting - Conference Room (2nd Floor)
- 2:00 p.m. - 3:00 p.m. Multicultural & Diversity Committee Meeting - Kingfisher (2nd Floor)
- 3:00 p.m. - 5:30 p.m. FSBA Board of Directors' Meeting - Audubon III/A (1st Floor)

Thursday, June 12, 2014

- 7:30 a.m. - 5:00 p.m. Conference Registration - Audubon Foyer (1st Floor)
- 7:30 a.m. - 8:30 a.m. Continental Breakfast - Audubon Foyer (1st Floor)
- 7:30 a.m. - 8:30 a.m. FSLRS Board of Directors' - Breakfast Meeting - Pelican (2nd Floor)
- 7:30 a.m. - 8:30 a.m. FSBA Small District Council - Breakfast Meeting - Audubon I/DE (1st Floor)
- 7:30 a.m. - 8:30 a.m. Central Florida Public School Boards Coalition - Breakfast Meeting - White Ibis (1st Floor)
- 7:30 a.m. - 8:30 a.m. North East Florida School Boards Coalition - Breakfast Meeting - Herring Gull (2nd Floor)
- 8:45 a.m. - 10:30 a.m. Opening General Session - Audubon III/A (1st Floor)
- 10:30 a.m. - 10:45 a.m. Break - Audubon Foyer (1st Floor)
- 10:45 a.m. - 11:45 a.m. Breakout Session 1: Creating a Successful Career/Tech Program - Audubon I/DE (1st Floor)
- 10:45 a.m. - 11:45 a.m. Breakout Session 1: Your Audience has Gone Mobile - Are You Mobile? - Roseate Spoonbill (2nd Floor)
- 10:45 a.m. - 11:45 a.m. Breakout Session 1: School-Justice - Promising Practices in Palm Beach County -

White Ibis (1st Floor)

10:45 a.m. - 11:45 a.m. Breakout Session 1: Alignment of Decision Making and Spending - Audubon I/F (1st Floor)

10:45 a.m. - 11:45 a.m. FADSS Superintendent Leadership Development Training Program (Superintendents Only) - Snowy Egret (2nd Floor)

11:45 a.m. - 1:00 p.m. Luncheon - Audubon II/III (1st Floor)

12:30 p.m. - 4:00 p.m. FSBA Facilitator Resource Area - Audubon Foyer (1st Floor)

1:00 p.m. - 1:15 p.m. Break - Audubon Foyer (1st Floor)

1:00 p.m. - 3:00 p.m. FADSS Superintendent Leadership Development Training Program (Superintendents Only) - Snowy Egret (2nd Floor)

1:15 p.m. - 2:15 p.m. Breakout Session 2: School-Justice - Promising Practices in Orange County - White Ibis (1st Floor)

1:15 p.m. - 2:15 p.m. Breakout Session 2: Alignment of Decision Making and Spending - Audubon I/F (1st Floor)

1:15 p.m. - 2:15 p.m. Breakout Session 2: Questions You Should Know and Ask of Your School Finance Officer - Herring Gull (2nd Floor)

1:15 p.m. - 2:15 p.m. Breakout Session 2: Social Media-OMG! What Could Go Wrong? - Roseate Spoonbill (2nd Floor)

2:15 p.m. - 2:30 p.m. Break - Audubon Foyer (1st Floor)

2:30 p.m. - 3:30 p.m. Breakout Session 3: Creating a Successful Career/Tech Program - Audubon I/DE (1st Floor)

2:30 p.m. - 3:30 p.m. Breakout Session 3: Your Audience has Gone Mobile - Are You Mobile? - Pelican (2nd Floor)

2:30 p.m. - 3:30 p.m. Breakout Session 3: Questions You Should Know and Ask of Your School Finance Officer - Herring Gull (2nd Floor)

2:30 p.m. - 3:30 p.m. Breakout Session 3: Social Media-OMG! What Could Go Wrong? - Roseate Spoonbill (2nd Floor)

3:15 p.m. - 5:15 p.m. FADSS Superintendent Leadership Development Training Program (Superintendents Only) - Snowy Egret (2nd Floor)

3:30 p.m. - 3:45 p.m. Break - Audubon Foyer (1st Floor)

3:45 p.m. - 5:00 p.m. FELL Board of Directors' & Business Meeting - Audubon I/F (1st Floor)

3:45 p.m. - 5:45 p.m. FSBA General Membership Meeting - Audubon II/BC (1st Floor)

5:30 p.m. - 6:30 p.m. Greater Florida Consortium of School Boards Business Meeting & Reception - Herring Gull (2nd Floor)

6:00 p.m. - 7:00 p.m. Welcome Reception - Audubon III/A (1st Floor)

Friday, June 13, 2014

7:30 a.m. - 10:00 a.m. Conference Registration - Audubon Foyer (1st Floor)

8:00 a.m. - 10:45 a.m. General Session II - Audubon II/III (1st Floor)

10:45 a.m. - 11:00 a.m. Break - Audubon Foyer (1st Floor)

11:00 a.m. - 12:30 p.m. 2014 Legislative Review - Audubon I/DEF (1st Floor)

12:30 p.m. Adjourn

This is text that will print as a footer at the bottom of each printed agenda.

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Request for Reimbursement - Mileage Only Travel

6-14-14	KH.	OP	32.2	FLYCA Graduation
6-14-14	OP	KH	32.2	Return

0100 7139 0330 9000 0000

64.4
.56

36.06

Shirley Dutton

School Board Member
6-18-14