

**Weslaco Independent School District
TRAVEL CARD REQUEST DETAIL**

Dept. / Campus – Requesting Travel Card _____	Location Code _____	Requesting Credit Card YES _____ NO _____
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Traveler or Group: _____ **Position:** _____

Authorized Person: _____

Reason for Travel: _____

Destination: (City & State): _____

Description	<u>Requested Amount</u>	<u>Actual Spent</u>
Hotel Fees (attach quote with all room charges less State of Texas Sales Tax, include if applicable and if traveling with students)		
Incidental Fees (include only if students are traveling)		
Fuel - \$75 per district vehicle per day		
Rental Vehicle charges (attach quote)		
Staff Meals (include # of meals & cost per meal; Brkfst, Lunch & Dinner)		
Student Meals - (attach list of students - include # of meals & cost per meal; Brkfst, Lunch & Dinner)		
Parking Expenses (attach hotel quote)		
<i>CREDIT CARD REQUESTED AMOUNT</i>		

Travel Dates: From _____ **Return Date:** _____

Employee Acknowledgement: _____

Signature

Date: _____

CARD INFORMATION
(TO BE COMPLETED BY BUSINESS OFFICE)

Credit Card # _____ CARD PIN# _____ CARD AMOUNT: \$ _____

PROBLEMS WITH CARD: 956-376-0089 PURCHASE ORDER #: _____

REPORT LOST OR STOLEN CARD: 1-800-248-4553