Abbeville, AL 36310	
Dear Mrs. Beasley,	
I have been granted detached duty on(date) for the purpose of	
I wish to be reimbursed for the fol Mileage (at the rate of Registration fee in the Hotel / Motel accommod Meals Stipends Other (please specify)	.67 per mile) amount of odations
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

Revised 1/23/2024