

Central Consolidated School District #22

BOA Travel Notification Form

To be submitted to Purchasing to notify BOA of out-of-state activity travel at a minimum of three (3) business days prior to travel.

Please submit to Purchasing via email: waltc@centralschools.org or purchasing@centralschools.org

NOTE: Check balance on PCard prior to issuing to person travelling.

Person Completing Form: _____ Cell: _____

Club/Sport Name: _____

Name of Person Travelling: _____ Cell: _____

PO#: _____ DAC: _____

REASON FOR TRAVELING: (Check Mark / "X")

Game: _____ Trip: _____ Other: _____

Are Students Travelling: Yes No Number of Students Travelling: _____

Event Description: _____

Event Location: (City, State) _____

Departure Date: _____

Return Date: _____

BOA USE: (Check Mark / X)

Types of Purchasing Use: Lodging: _____ Meals: _____ Fuel: _____ Other: _____

CARD USAGE:

PCARD # (Last 4 digits Only) _____

FOR PURCHASING USE ONLY:

Contacted BOA: Yes No Date Contacted: _____