

Runge Independent School District

P.O. Box 158 Runge, TX 78151

2019-2020

Travel Reimbursements

District Travel Consideration	Student Rates	Board, Employee, and Superintendent Rates
Mileage	Not Applicable	.58 cents per mile
Lodging	Up to \$93.00 1	Up to \$93.00 1
Meals	Up to \$40.00	Up to \$40.00
Meal Breakdown	Breakfast: \$10.00 Lunch: \$12.00 Dinner: \$18.00	Breakfast: \$10.00 Lunch: \$12.00 Dinner: \$18.00

Student Day Trip:

Receipt required at \$9.00 per meal or \$18.00 for two meals. Post district meals increase to \$12.00 per meal or \$24.00 for two meals. Employees traveling with students must also use student meal prices.

Employees:

Day Trips: Receipts for reimbursement based on meal breakdown. **Overnight Trips:** Meal receipts must be submitted upon return from trip.

Travel Note:

Rates: Student and all other district rates are set as listed in the chart.In extenuating circumstances the superintendent may authorize a rate no higher than those posted by the Texas State Comptroller.

Contact the following with questions:

Business Manager (830) 239-4315 ext. 206 Superintendent (830) 239-4315 ext. 204

Recommendation and Source:

Texas Comptroller of Public Accounts, Window on State Government <u>https://fmx.cpa.state.tx.us/fm/travel/travelrates.php</u>

Board Approved: 7.23.19

2019-2020 Runge Independent School District Employee Travel Request

Name	Campus			
Address	City		Zip	
Budget Code:				
Date/Dates:				
			n:am/pm	
			nust depart by 6:00 a.m. nan 8:00 p.m. for dinner.	
	Breakfast	@ \$10.00	\$	
	Lunch	@ \$12.00	\$	
	Dinner	@ \$18.00	\$	
Mileage Reimbursen	nent:			
miles at .58 cents per mile			\$	
Total Reimbursement Claim			\$	
Employee Signature/Date		Supervisor/Da	te	
Supervisor/Date		NOTE:		
Superintendent/Date	•			

2019-2020 Runge Independent School District Student Travel Request

Extracurricular Activity/Event:						
Budget Code:						
Purpose of Travel:						
Date/Dates:						
Time of Departure:	am/pm	Time of Return:_	am/pm			
Meal Reimbursements: To qualify for meals, claimant must depart by 6:00 a.m. for breakfast, 10:00 a.m. for lunch, and return no earlier than 8:00 p.m. for dinner.						
	Breakfast	@\$10.00	\$			
	Lunch	@ \$12.00	\$			
	Dinner	@ \$18.00	\$			
Meal Reimbursement	Claim		\$			
Claim	_ X No. Students _	=	\$			
Attach an itinerar	ry and/or list of spon	sors and students	attending event.			
Sponsor Signature/Date		NOTE:				
Supervisor/Date						
Superintendent/Date						