PINELLAS COUNTY SCHOOLS

TEMPORARY DUTY ELSEWHERE

THE FOLLOWING EXPENSES ARE AUTHORIZED FOR THE EMPLOYEE(S) LISTED BELOW.

TRAVEL E			-		BSTITUTI		IER(S)		
YES	ESTIMATED	COST	TOTA	L	YES	NUMBE	ER COST PE	R SUB.	TOTAL COST
NO	Include milea transportatio	age, per diem n, registration, etc	s. \$		NO		Х	= \$.	
	NAME		SCHOOL/DEPAR	RTMENT		DA	ATE(S)	S	GNATURE
	ACTIVITY AND	PURPOSE FOR AT							
LOCATION TRAVEL DATES									
FROM THRU									
Pursuant to	Section 112.061	(3) (a), Florida St ol Board of Pinella	atutes, I hereby	certify or affirm th	at to the l	pest of m	ny knowledge the ex	penses request	ed will be on
	TED BY - Signatu		as county and w		n the pur	TITLE			DATE
-									
EXPENSE AUTHORIZED BY - Signature TITLE									DATE
TDE APP	TDE APPROVED BY- Signature TITLE - Principal/Immediate Supervisor								
FUND	GENERAL LEDGER	FUNCTION	OBJECT	COST CENTER	PROJ	IECT	SUB PROJECT	PROGRAM	AMOUNT
			0332						
		++							
			0333						