

Travel/Education Request Form

Name(s) MSHA TRAINING

Department Highway Position EDUCATION

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
MARCH 2-3, 2016			Government Center 3rd floor

Reason for Travel:

MSHA

Passengers: _____

Estimated Expenses:

•Method of Travel: County Vehicle Private Auto Air
 _____ Miles \$ _____ /mile = \$ 0.00

•Meals: _____ Breakfast @ \$ _____ = \$ 0.00
 _____ Lunch @ \$ _____ = \$ 0.00
 _____ Dinner @ \$ _____ = \$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):
 Please list _____ = \$ 0.00

•Lodging: _____ Estimated number of days/nights = \$ _____

•Registration: _____ Estimated Cost = \$ _____

Total Cost Estimate = \$ 0.00

•Department Head designated mileage rate: \$ _____ /mile

•A travel advance form is attached to this request Yes No

 Department Head Signature

 Date

Travel/Education Request Form

Name(s) Robert W. Hill and/or Richard Haugen

Department County Development Position Director/Deputy Director

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
3/17/2016			Mitchell, SD

Reason for Travel:

Participate in a Region VI meeting in Mitchell.

Passengers: 0

Estimated Expenses:

•Method of Travel: County Vehicle Private Auto Air
234 Miles \$ /mile = \$ 0.00

•Meals: 0 Breakfast @ \$ 6.00 = \$ 0.00
0 Lunch @ \$ 11.00 = \$ 0.00
0 Dinner @ \$ 15.00 = \$ 0.00

Employees will not be reimbursed for meals that are included in the registration fee.

•Additional Expenses (taxi, parking, etc.):
 Please list None = \$

•Lodging: 0 Estimated number of days/nights = \$

•Registration: 0 Estimated Cost = \$

Total Cost Estimate = \$ 0.00

•Department Head designated mileage rate: \$ 0.00 /mile

•A travel advance form is attached to this request Yes No



 Department Head Signature

_____ Date

Travel/Education Request Form

Name(s) Sonia Mack

Department Extension/4-H Position: Program Advisor

Travel/Education

Date(s)	Beginning Odometer	Ending Odometer	Destination
4/4-7/2016			Hill City, SD
6/6-8-2016			Lake Poinsett
7/18-21/2016			Huron, SD
8/30-9/5/2016			Huron, SD

Reason for Travel: Hill City -Spring SDAE4-HP meeting; Lake Poinsett - 4-H camp for Brookings County; July-Huron-State 4-H Horse Show; 8/30-9/5 - Huron - South Dakota State Fair

Passengers:

Estimated Expenses:

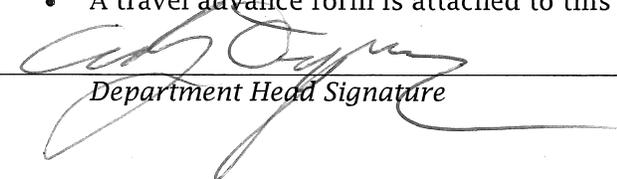
- Method of Travel: County Vehicle Private Auto And State Car for State Fair
 1200 Miles @ \$.42/per mile = \$ 504.00
- Meals:
 - 11 Breakfast @ \$ 6.00 = \$ 66.00
 - 11 Lunch @ \$ 11.00 = \$ 121.00
 - 14 Dinner @ \$ 15 = \$ 210.00

Employees will not be reimbursed for meals that are included in the registration fee.
- Additional Expenses (taxi, parking, etc):
 Please list State Fair parking and entry fee = \$ 40.00
- Lodging: 13 Estimated number of days/nights = \$ 780.00
- Registration Estimated cost = \$ 190.00

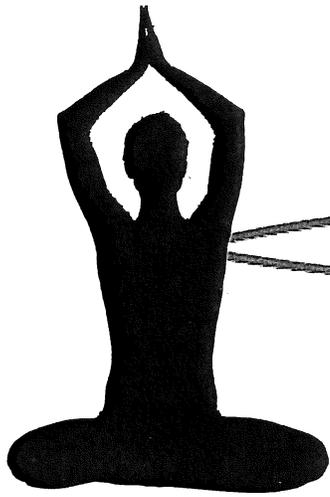
Total Cost Estimate = \$1911.00

Department Head designated mileage rate: \$.42 /per mile

- A travel advance form is attached to this request yes no


 Department Head Signature

February 26, 2016
 Date



2016 SDAE4-HP Spring Professional Development Conference

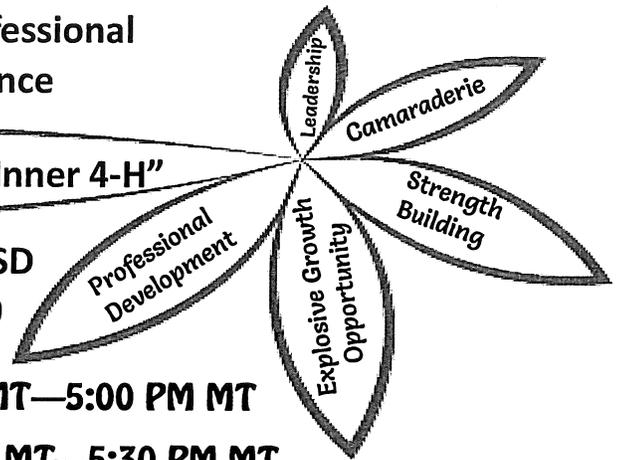
"Relax and Rejuvenate Your Inner 4-H"

**Super 8 Motel • Hill City, SD
Registration Fee: \$40.00**

Tuesday, April 5 at 1:00 PM MT—5:00 PM MT

Wednesday, April 6 at 8:30 AM MT—5:30 PM MT

Thursday, April 7 at 8:30 AM MT—11:30 AM MT



Join

us in Hill City, SD to relax and rejuvenate your inner 4-H with opportunity for explosive growth, professional prioritization and ongoing education through leadership and connection building.

The SDAE4-HP Professional Development has planned a fun, educating three days. Members will be engaged through interactive programs, be inspired by NAE4-HA North Central Regional Director, Joan Grott and rejuvenated by camaraderie! Formal agenda will be sent out by March 14th. **Register TODAY!**

Hotel Information

Room Block available at Super 8 (605-574-4141) at state rate.

Rooms are \$55 plus tax for 1 or \$85 plus tax for 2. Rooms are reserved SDSU Extension 4-H. Each room has 2 queen sized beds and smoke free facility.

Hosted by South Dakota Association of Extension 4-H Professionals

Registration Form

Name: _____ Phone: _____

_____ County(ies) Extension Office

Email: _____

List any food allergies: _____

*Registration Fee of \$40 covers one meal & snacks for all 3 days, materials, and a book for the next SDAE4-HP professional development book read.

Please send completed registration form and fee of \$ to:

Stephanie Chambliss, SDAE4-HP Treasurer

P.O. Box 188

Lake Andes, SD-57356

Make Checks Payable to: **SDAE4-HP**

Registration Deadline: **March 18, 2015**

Travel / Education Request Form

Name(s) James Sampson

Department Commission Position(s) GIS Coordinator

Travel/Education

<i>Date(s)</i>	<i>Beginning Odometer</i>	<i>Ending Odometer</i>	<i>Destination</i>
6-27 – 7/1			San Diego, CA

Reason for Travel ESRI National GIS Conference

Passengers _____

Estimated Expenses

- *Method of Travel:* *County Vehicle* *Private Auto* X *Air*

 miles @ \$ /per mile = \$ 700.00
 - *Meals:* 6 *Breakfast* @ \$ 8 = \$ 48

7 *Lunch* @ \$ 11 = \$ 77

6 *Dinner* @ \$ 17 = \$ 102
 - *Additional Expenses (taxi, parking, etc)*

Please list _____ = \$ _____
 - *Lodging:* 6 *Estimated number of days/ nights* = \$ 600
 - *Registration* _____ *Estimated cost* = \$ 0
- Total Cost Estimate* = \$ 1527

Department Head designated mileage rate: \$ _____ /per mile

Department Head Signature

Date