

RECEIVED



Peralta Community College District
333 East 8th St., Oakland, CA 94606

JUL 08 2014

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.)

Office of the Chancellor
Peralta Community Colleges

Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Charles Frost	Instructor	ECT	Laney College	510-464-3292

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

BEST workshop - Building Automation Systems II: Curriculum Development

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Memphis	TN		7/10/2014	7/12/2014		7/9/2014	7/12/2014

Purpose: To assist with workshop facilitation and documentation, strategic planning with co-Pis

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.

- Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.
- Per Diem Amount requested must be equal or less than maximum.
- Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$99 ✓	\$61 ✓	\$160	3	\$480

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$480	\$480 ✓							\$480
Non- Per Diem			\$0	\$48	\$1,212 ✓	\$50	\$50	\$100	\$1,459
Total (Not to Exceed Amount):									\$1,939

Funding

Source	Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration					5205					
Non-Local		5	11	552	5202	1	672700	1931	05	
Local					5203					
Membership					5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee			

Signatures and Approvals

Charles Frost 6/26/14 Employee / Date	Pete J. Criste Supervisor / Date	[Signature] 7-7 President's Signature / Date
[Signature] 6/30/14 Business Officer / Date	[Signature] 7.9.14 Chancellor / Date	Out of State Travel: Board of Trustees Approval Date

2/30/14



Peralta Community College District
333 East 8th St., Oakland, CA 94606

RECEIVED
JUL 03 2014

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.)

Please type or print and ensure all information is provided as omissions can delay processing (Office of the Chancellor)

JUL 08 2014

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Peter Crabtree	Dean, BEST Ctr PI	CTE	Laney College	510-464-3218

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

BEST workshop - Building Automation Systems II: Curriculum Development

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Memphis	TN	7/10/2014 - 7/12/2014	7/10/2014	7/12/2014	7/9/2014 - 7/12/2014	7/9/2014	7/12/2014

Purpose: To assist with workshop facilitation and documentation, strategic planning with co-Pis

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.

- Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See instructions for additional details and restrictions.
- Per Diem Amount requested must be equal or less than maximum.
- Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)

Section B. Total \$ Each Day X Per Diem Days

See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$99	\$61	\$160	3	\$480

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$480	\$480							\$480
Non- Per Diem			\$0	\$48	\$907		\$50	\$80	\$1,084
Total (Not to Exceed Amount):									\$1,564

Funding

Source	Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration					5205					
Non-Local		5	11	552	5202	1	672700	1931	05	
Local					5203					
Membership					5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee			

Signatures and Approvals

<i>Peter Crabtree</i> 6/26/14	<i>[Signature]</i> 7.9.14	<i>[Signature]</i> 7.8.14
Employee / Date	Supervisor / Date	President's Signature / Date
<i>[Signature]</i> 7/3/14	Chancellor / Date	Out of State Travel: Board of Trustees Approval Date
Business Officer / Date		



Peralta Community College District
333 East 8th St., Oakland, CA 94606

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JUL 08 2014
Office of the Chancellor
Community Colleges

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.)
Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Phone Number
Cynthia Taing	Counselor	APASS	Laney	510-464-3203

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

Leadership Development Program for Higher Education

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Pomona	CA		7/9/2014	7/12/2014		7/9/2014	7/12/2014

Purpose: Attend Leadership Education for Asian Pacifics, Inc (LEAP) Leadership Development Training for Higher Education Professionals.

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.
 • Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See instructions for additional details and restrictions.
 • Per Diem Amount requested must be equal or less than maximum.
 • Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$89	\$71	\$160	4	\$640

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$284	\$284							\$284
Non- Per Diem			\$1,250	\$50	\$230		\$60		\$1,590
Total (Not to Exceed Amount):									\$1,874

Funding

Source	Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration		5	11	543	5205	1	672700	1122	00	
Non-Local		5	11	543	5202	1	672700	1122	00	
Local					5203					
Membership					5301					

Advance Payment Request

• Must be submitted with designated approvals 15 working days prior to event.
 • Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee			

Signatures and Approvals

Employee: Cynthia Taing, Date: 7/1/14
 Supervisor: [Signature], Date: 7.9.14
 President's Signature: [Signature], Date: 7.7
 Board of Trustees Approval Date: [Blank]



Peralta Community College District
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TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.) Office of the Chancellor
Please type or print and ensure all information is provided as omissions can delay processing. Peralta Community Colleges

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Larry Chang	BEST Ctr proj. mgr.	T-807 / CTE dept.	Laney College	510-464-3240

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

BEST workshop - Building Automation Systems II: Curriculum Development

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Memphis	TN		7/10/2014	7/12/2014		7/9/2014	7/15/2014

Purpose: To assist with workshop facilitation and documentation, strategic planning with co-Pis

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.
 • Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.
 • Per Diem Amount requested must be equal or less than maximum.
 • Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$99 ✓	\$61 ✓	\$160	3	\$480

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$480	\$480 ✓							\$480
Non- Per Diem			\$0	\$48	\$585 ✓	\$50	\$50	\$100	\$832
Total (Not to Exceed Amount):									\$1,312

Funding

Source	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration				5205					
Non-Local	5	11	552	5202	1	672700	1931	05	
Local				5203					
Membership				5301					

Advance Payment Request

• Must be submitted with designated approvals 15 working days prior to event.
 • Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee			

Signatures and Approvals

 Employee / Date 6/30/14	 Supervisor / Date 7-9-14	 President's Signature / Date
 Business Officer / Date	 Chancellor / Date	Out of State Travel: Board of Trustees Approval Date

6/30/14

Peralta Community College District

333 East 8th St., Oakland, CA 94606

JUN 18 2014

JUN 19 2014

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.)

Office of the Chancellor
Peralta Community College District
Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Sean Brooke	Director	Office of International Education	District	510-466-7295

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

AIRC: Strategic Planning for Effective International Recruitment (July 29) & Visit Green River Community College (July 30)

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Seattle	WA		7/28/2014	7/30/2014		7/28/2014	7/30/2014

Purpose: Learn best practices for growing international student enrollment and internationalizing our colleges

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.

- Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.
- Per Diem Amount requested must be equal or less than maximum.
- Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$152	\$71	\$223	3	\$669

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$669	\$669							\$669
Non- Per Diem			\$195	\$40	\$300		\$200		\$735
Total (Not to Exceed Amount):									\$1,404

Funding

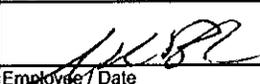
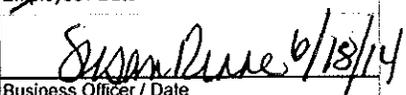
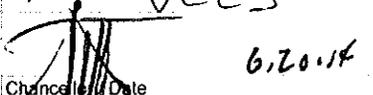
Source	Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration		1	01	125	5205	1	649400	0000	00	
Non-Local		1	01	125	5202	1	649400	0000	00	
Local					5203					
Membership					5301					

Advance Payment Request

- Must be submitted with designated approvals 15 working days prior to event.
- Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration	American International Recruitment Council	2000085183	195.00
Employee	Sean Brooke	2000085184	1,209.00

Signatures and Approvals

 Employee / Date	 Supervisor / Date	 President's Signature / Date
 Business Officer / Date	 Chance / Date	Out of State Travel: Board of Trustees Approval Date

RECEIVED
 JUN 19 2014
 Office of the Chancellor
 Peralta Community College

Peralta Community College District
 333 East 8th St., Oakland, CA 94606

JUN 18 2014

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.)

Please type or print and ensure all information is provided as omissions can delay processing.

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Drew Gephart	Ex. Asst/Progm Adm.	Office of International Education	District	510-587-7834

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

AIRC: Strategic Planning for Effective International Recruitment (July 29) & Visit Green River Community College (July 30)

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Seattle	WA		7/28/2014	7/30/2014		7/28/2014	7/30/2014

Purpose: Learn best practices for growing international student enrollment and internationalizing our colleges

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.
 • Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.
 • Per Diem Amount requested must be equal or less than maximum.
 • Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$152	\$71	\$223	3	\$669

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$669	\$669							\$669
Non- Per Diem			\$195	\$40	\$300				\$535
Total (Not to Exceed Amount):									\$1,204

Funding

Source	Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration		1	01	125	5205	1	649400	0000	00	
Non-Local		1	01	125	5202	1	649400	0000	00	
Local					5203					
Membership					5301					

Advance Payment Request

• Must be submitted with designated approvals 15 working days prior to event.
 • Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration	American International Recruitment Council	2000084062	195.00
Employee	Drew Gephart	2000084064	1,009.00

Signatures and Approvals

Employee / Date: [Signature] 6/9/14
 Supervisor / Date: [Signature]
 Business Officer / Date: [Signature] 6/18/14
 Chancellor / Date: [Signature] 7.9.14
 President's Signature / Date: [Signature] 6/16/14
 Out of State Travel: _____
 Board of Trustees Approval Date: _____



Peralta Community College District
333 East 8th St., Oakland, CA 94606



RECEIVED
JUN 16 2014

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.)
Please type or print and ensure all information is provided as omissions can delay processing.

JUN 17 2014

Employee Name	Job Title	Office / Department	Location	Day Phone Number
Louis Quindlen	Instructor	Machine Technology	Laney	510 464-3444

Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)
2014 HTEC Educator Conference

City	State	Conference (Working) Dates (Used to compute per diem days)	Opening	Closing	Travel Dates (See instructions tab)	Depart	Return
Minneapolis	Minnesota		7/20/2014	7/24/2014		7/20/2014	7/25/2014

Purpose: Networking, Learning new technologies to better teach classes.

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.
 • Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.
 • Per Diem Amount requested must be equal or less than maximum.
 • Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)	
See Per Diem Rates Tab for amount to enter	\$134	\$205	5	\$1,025	

Section C. Total Requested Expenditures for Conference

Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem		\$1,025							\$1,025
Non- Per Diem			\$150	\$69	\$233	\$46	\$247	\$150	\$894
Total (Not to Exceed Amount):									\$1,919

Funding

Source									
Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration				5205					
Non-Local	5	11	552	5202	1	095630	1096	03	
Local				5203					
Membership				5301					

Advance Payment Request

• Must be submitted with designated approvals 15 working days prior to event.
 • Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee			

Signatures and Approvals

 Employee / Date 6/11/14	 Supervisor / Date 6/11/14	 President's Signature / Date 6/17/14
 Business Officer / Date 6/12/14	 Chancellor / Date 7.9.14	Out of State Travel: Board of Trustees Approval Date



Peralta Community College District
333 East 8th St., Oakland, CA 94606

RECEIVED

JUN 30 2014

TRAVEL REQUEST AND EXPENSE CLAIM

Part 1: Travel Request (Complete and submit before attending conference.) *Approval of the Chancellor*
Please type or print and ensure all information is provided as omissions can delay processing: *Community College*

Employee Name Luis Sanchez	Job Title Student	Office / Department Gateway to College	Location Laney College A-203	Day Phone Number 510-986-6941
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Conference or other Travel Name (Attach conference announcement, brochure, or other descriptive document.)

Gateway to College Peer Learning Conference

City Boston	State MA	Conference (Working) Dates (Used to compute per diem days) 7/28/2014 - 7/30/2014	Opening 7/28/2014	Closing 7/30/2014	Travel Dates (See instructions tab)	Depart 7/26/2014	Return 7/30/2014
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Purpose: To attend the Gateway to College Peer Learning Conference

Estimated Expenses

Identify all anticipated expenses for this conference. Claim may be less than, but cannot exceed requested amount.
 • Total lodging, meals & incidentals cannot exceed the total per diem rate for the destination times the number of working days. Incidentals cannot exceed \$25/day and do not require receipts. Exception: Lodging can be higher if sponsor's lowest hotel discounted rate is higher. See Instructions for additional details and restrictions.
 • Per Diem Amount requested must be equal or less than maximum.
 • Use "Google Maps" to determine mileage. Personal vehicle travel cannot exceed economy airfare.

Section A. Daily Per Diem Limits (Maximum Expenses Per Day)			Section B. Total \$ Each Day X Per Diem Days		
See Per Diem Rates Tab for amount to enter	Lodging	Meals & Incidentals	Total \$ (Per Day)	Per Diem Days	\$ Each Day X Per Diem Days (Maximum Permitted)
	\$149 ✓	\$71	\$220	3	\$660

Section C. Total Requested Expenditures for Conference									
Category	Maximum Permitted	Amount Requested	Registration	Lodging Taxes	Travel (Air/Train)	Mileage	Car/Taxi/ Shuttle	Parking / Tolls	Total Request
Per Diem	\$880	\$880							\$880
Non-Per Diem	\$660		\$205 ✓	\$65 ✓	\$572 ✓	\$0	\$40	\$0	\$882
Total (Not to Exceed Amount):									\$1,762

Funding

Source									
Coding	Loc	Fund	Cost Center	Object	Program	Activity Suffix	Proj	Line	Cost Center Manager Approval / Date
Registration	5	11	543	5205	3	640000	0711	00	\$205.00
Non-Local	5	11	543	5202	3	640000	0711	00	\$1,337.00
Local				5203					
Membership				5301					

Advance Payment Request

• Must be submitted with designated approvals 15 working days prior to event.
 • Advance payments are limited to registration plus 80% of the employee's remaining expenses.

Category	Payee on Check	Requisition Number	Amount
Registration			
Employee			

Signatures and Approvals

Employee / Date LS 6-19-14	Supervisor / Date <i>[Signature]</i> 6-26-14	President's Signature / Date <i>[Signature]</i> 6-26-14
Business Officer / Date <i>[Signature]</i> 6/26/14	Chancellor / Date <i>[Signature]</i> 7.2.14	Out of State Travel: Board of Trustees Approval Date