



**HIDALGO COUNTY, TEXAS
APPLICATION FOR OFFICIAL TRAVEL**

DATE OF REQUEST: 04/16/12
 TOTAL NUMBER OF EMPLOYEES TRAVELING: 2
 DEPARTMENT NAME: VETERANS SERVICES
 NAME & TITLE OF EMPLOYEE(S): REY OROPEZ & FELIX RODRIGUEZ

EVENT INFORMATION

TITLE OF EVENT: TVC Spring Training Conference
 EVENT DATE(S) FROM: 05/01/12 TO: 05/03/12
 DEPARTURE DATE: 04/30/12 RETURN DATE: 05/03/12
 LOCATION OF EVENT: CITY: CORPUS CHRISTI STATE: TEXAS

PURPOSE OF TRAVEL

Place an "X" by the applicable purpose of the trip.

To obtain statutorily required continuing professional education.

To obtain continuing education related to an employee's work or maintenance of a license or certification.

To testify before legislative bodies, regulatory agencies and commissions, and other forums that may make decisions affecting the County and its affiliated organizations and operations.

To participate in professional organizations related to the employee or official's job assignment.

To conduct essential research & information-gathering for improvement of County operations or compliance with law.

To monitor the development of state or federal legislation or implementation of legislation that might affect the County

To participate in forums, coalitions, & discussions relating to the policy, legislative & regulatory interests of the County

To pursue the County's interests in litigation or criminal justice.

To promote the economic development interests of the County.

To carry out other purposes determined by Commissioners' Court to be in the interest of the County (Commissioners' Court approval is attached).

JUSTIFICATION FOR THE NEED TO TRAVEL OUT-OF-STATE

Explain the benefits that this trip it will bring to Hidalgo County. Attach an itinerary, agenda, or schedule for the conference and/ or event. If applicable, justify the need for multiple persons traveling to the same event.

To maintain certification in order to remain a County Veteran Service Officer

SUMMARY OF ESTIMATED TRAVEL EXPENSES	ESTIMATED EXPENSES	(DBM USE ONLY) FUNDS AVAILABLE BALANCE	MODE OF TRAVEL (Place an "X" by applicable mode of travel)
1. REGISTRATION FEE(S)	\$ -		AIRFARE* _____
Subtotal for Object Code 584	\$ -	\$	BUS** _____
2. AIRFARE- ROUNDTRIP COACH FARE ONLY	\$ -		Rental Car** _____
3. TAXI FARE	\$ -		County Vehicle** _____
4. BUS FARE	\$ -		Private Vehicle** <input checked="" type="checkbox"/>
5. RENTAL CAR	\$ -		OTHER** (Specify) _____
6. GASOLINE/DIESEL/FUEL	\$ -		* If traveling by airplane, the traveler should consider purchasing a refundable fare if possibility of a cancellation exists.
7. MILEAGE REIMBURSEMENT	\$ 162.57		
8. TELEPHONE CALLS	\$ -		** If mode of travel includes bus, rental car, county vehicle, private vehicle, or other form of transportation, a comparison of the savings that will be achieved by not choosing to travel by airplane must be provided with supporting documentation.
9. PARKING	\$ -		
10. LODGING	\$ -		
11. MEALS	\$ -		
12. OTHER EXPENSES	\$ -		
Subtotal for Object Code 583	\$ 162.57		
13. TOTAL ESTIMATED TRAVEL EXPENSES	\$ 162.57	\$	

14. IF HIDALGO COUNTY IS NOT FUNDING ANY OR PART OF THIS TRIP, INDICATE BELOW THE EXPENSE TYPE & SOURCE OF PAYMENT:

TEXAS VETERANS COMMISSION WILL BE FUNDING LODGING AND MEALS FOR THIS TRAINING

NOTE: If trip duration is extended to take advantage of lower airfare, a comparison of the savings to the additional estimated cost must be provided with supporting airfare rate documentation.

ELECTED OFFICIAL/DEPARTMENT HEAD CERTIFICATION (Place an "X" by each of the certifications)

I certify that:

Trip expenses are necessary and will be incurred for official county business.

Reasonable efforts to minimize the use of county funds have been explored.

Sufficient funds are available within my department's budget to pay for the related travel expenses without the need of a budget amendment.

If this trip is for out-of-state training, the training is not available in some other form that does not require out-of-state travel.

APPROVED BY ELECTED OFFICIAL/DEPARTMENT HEAD: [Signature] DATE: _____ DEPARTMENT CONTACT PERSON: _____ PHONE NO.: _____

FOR DEPARTMENT OF BUDGET & MANAGEMENT (DBM) USE ONLY:

TRAVEL IS APPROVED for the individuals listed below:
[Signature]
 TRAVEL IS NOT APPROVED for the individuals listed below:

REVIEWED BY (PRINT NAME): _____ DATE: _____ REVIEWER'S SIGNATURE: _____ PHONE NO.: _____

DBM'S DEPARTMENT HEAD APPROVAL (PRINT NAME): _____ DATE: _____ SIGNATURE OF DBM DEPARTMENT HEAD: _____

2-1100-444-00-370-001-0-583

cc 4/24/12



HIDALGO COUNTY, TEXAS
APPLICATION FOR OFFICIAL TRAVEL

DATE OF REQUEST: 04/17/12
TOTAL NUMBER OF EMPLOYEES TRAVELING: 1
DEPARTMENT NAME: VETERANS SERVICES
NAME & TITLE OF EMPLOYEE(S) TRAVELING: EMILIO DE LOS SANTOS

EVENT INFORMATION
TITLE OF EVENT: TVE Spring Training Conference
EVENT DATE(S) FROM: 05/01/12 TO: 05/03/12
DEPARTURE DATE: 05/01/12 RETURN DATE: 05/01/12
LOCATION OF EVENT: CITY: CORPUS CHRISTI STATE: TEXAS

PURPOSE OF TRAVEL
Place an "X" by the applicable purpose of the trip.
[X] To obtain statutorily required continuing professional education.
[X] To obtain continuing education related to an employee's work or maintenance of a license or certification.
To testify before legislative bodies, regulatory agencies and commissions, and other forums that may make decisions affecting the County and its affiliated organizations and operations.
To participate in professional organizations related to the employee or official's job assignment.
To conduct essential research & information-gathering for improvement of County operations or compliance with law.
To monitor the development of state or federal legislation or implementation of legislation that might affect the County
To participate in forums, coalitions, & discussions relating to the policy, legislative & regulatory interests of the County
To pursue the County's interests in litigation or criminal justice.
To promote the economic development interests of the County.
To carry out other purposes determined by Commissioners' Court to be in the interest of the County (Commissioners' Court approval is attached).

JUSTIFICATION FOR THE NEED TO TRAVEL OUT-OF-STATE
Explain the benefits that this trip it will bring to Hidalgo County. Attach an itinerary, agenda, or schedule for the conference and/ or event. If applicable, justify the need for multiple persons traveling to the same event.

To maintain certification in order to remain a County Veteran Service Officer

Table with 4 columns: SUMMARY OF ESTIMATED TRAVEL EXPENSES, ESTIMATED EXPENSES, (DBM USE ONLY) FUNDS AVAILABLE BALANCE, and MODE OF TRAVEL. Rows include Registration Fee, Airfare, Taxi, Bus, Rental Car, Gasoline, Mileage, Telephone, Parking, Lodging, Meals, and Other Expenses.

14. IF HIDALGO COUNTY IS NOT FUNDING ANY OR PART OF THIS TRIP, INDICATE BELOW THE EXPENSE TYPE & SOURCE OF PAYMENT:

NO FUNDING REQUESTED: 1 DAY ATTENDANCE, RETURNING SAME DAY.
NOTE: If trip duration is extended to take advantage of lower airfare, a comparison of the savings to the additional estimated cost must be provided with supporting airfare rate documentation.

ELECTED OFFICIAL/DEPARTMENT HEAD CERTIFICATION (Place an "X" by each of the certifications)

I certify that:
Trip expenses are necessary and will be incurred for official county business.
Reasonable efforts to minimize the use of county funds have been explored.
Sufficient funds are available within in my department's budget to pay for the related travel expenses without the need of a budget amendment.

If this trip is for out-of-state training, the training is not available in some other form that does not require out-of-state travel.
APPROVED BY ELECTED OFFICIAL/DEPARTMENT HEAD: DATE: 4/19/12 DEPARTMENT CONTACT PERSON: PHONE NO.:

FOR DEPARTMENT OF BUDGET & MANAGEMENT (DBM) USE ONLY:

TRAVEL IS APPROVED for the individuals listed below:
TRAVEL IS NOT APPROVED for the individuals listed below:

REVIEWED BY (PRINT NAME): DATE: REVIEWER'S SIGNATURE: PHONE NO.:

DBM'S DEPARTMENT HEAD APPROVAL (PRINT NAME): DATE: SIGNATURE OF DBM DEPARTMENT HEAD:

cc 4/24/12

VCSO ATTENDANCE REGISTRATION FORM

TEXAS VETERANS COMMISSION

2012 Spring Training Conference

May 1 - 3, 2012

Omni Bayfront Hotel

900 North Shoreline Blvd. Corpus Christi, Texas

DESIGNATED TRAVEL DAY IS MONDAY, APRIL 30, 2012

CUT-OFF FOR RESERVATIONS IS FRIDAY, MARCH 30, 2012

~ RESERVATIONS FIRST COME - FIRST SERVED ~

For hotel reservations, call 1-800-843-6664 or reserve online at:

<http://omnihotels.com/FindAHotel/CorpusChristiBayfront/MeetingFacilities/TVC2012SpringTrainingConference4.aspx>

When securing your hotel reservation, please be sure to indicate that you are attending the Texas Veterans Commission Conference to ensure you receive the TVC rate. TVC will only reimburse eligible VCSOs at that rate.

PLEASE CHECK ONE LEVEL BELOW. YOU SHOULD HAVE RECEIVED NOTIFICATION IF YOU ARE TO ATTEND THE COMPUTER TRAINING. ALL OTHERS CHECK CERTIFICATION/ACCREDITATION.

Certification/Accreditation Training

Computer Training

SECTION I: Please complete Section I for each person in your county, agency or organization <u>who will attend the conference</u> , even if they are not staying at the hotel or attending the training sessions.			
PLEASE PRINT CLEARLY			
Attendee Name: <i>Emilio De los Santos</i>	County: <i>Hidalgo</i>		
Office Address: <i>2816 S. BUSINESS Hwy 281</i>	City & Zip: <i>Edinburg 78539</i>		
Phone (Day/Office): <i>956-318-2436</i>	Emergency/Other Phone (Evening):		
Phone (Cell): <i>956-684-6076</i>	Fax: <i>956-318-2439</i>		
Email: <i>tveterans@co.hidalgo.tx.us</i>			
VCSOs: Will you be requesting reimbursement for attendance? (See note below)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Will this be reimbursed to you (VCSO) or to your county? (See note below) <i>N/A</i>	<input type="checkbox"/> VCSO <input type="checkbox"/> COUNTY
★	TVC does not provide financial assistance to non-VCSO attendees.		★
SECTION II: Please complete this section once you have secured & confirmed your own reservation. Remember to inform the hotel you are with the TVC to ensure you receive the TVC rate of \$88/single; \$106/double.			
Name on Reservation: <i>N/A</i>	No. in party: <i>N/A</i>		
Hotel Confirmation No.: <i>N/A</i>	Arrival Date: <i>May 1 2012</i>	Departure Date: <i>May 3, 2012</i>	
Please indicate any special needs you requested from the hotel:			
If you need to cancel your hotel reservation, please notify TVC HQ in writing either via email to training@tvc.state.tx.us or via fax to (512) 463-2847 Attn: Spring Conference PRIOR to cancellation.		PLEASE SUBMIT THIS FORM SO IT IS RECEIVED BY TVC HQ NO LATER THAN MARCH 30, 2012.	
		SUBMIT TO: Texas Veterans Commission Attn: Spring Conference P.O. Box 12277; Austin, TX 78711-2277 <i>or fax to (512) 463-2847</i> Attn: Spring Conference <i>or email to: training@tvc.state.tx.us.</i>	