



HIDALGO COUNTY, TEXAS
APPLICATION FOR OFFICIAL TRAVEL

DATE OF REQUEST: 03/01/13
TOTAL NUMBER OF EMPLOYEES TRAVELING: 5

DEPARTMENT NAME: BUDGET & MGMT.
NAME & TITLE OF EMPLOYEE(S): SERGIO CRUZ, DINA TREVINO, DAMARIS SAN MIGUEL, REY SALAZAR, FLORA VAZQUEZ

EVENT INFORMATION

TITLE OF EVENT: 2013 COUNTY MGMT. INSTITUTE
EVENT DATE(S) FROM: 04/10/13 TO: 04/12/13
DEPARTURE DATE: 04/10/13 RETURN DATE: 04/12/13
LOCATION OF EVENT: CITY: AUSTIN STATE: TX

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.
[X] 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.

Table with columns: SUMMARY OF ESTIMATED TRAVEL EXPENSES, ESTIMATED EXPENSES, (DBM USE ONLY) FUNDS AVAILABLE BALANCE, MODE OF TRAVEL. Includes rows for Registration Fee, Airfare, Rental Car, Taxi Fare, Bus Fare, Gasoline/Diesel/Fuel, Mileage Reimbursement, Telephone Calls, Parking, Lodging, Meals, and Other Expenses.

Registration: Req: 232629
Car Rental: Req # 232542
Gasoline/Fuel Req # 232620
Lodging: Req # 232542

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

Meal Requisitions: Sergio Cruz - 232620, Dina Trevino - 232621, Damaris San Miguel - 232623, Rey Salazar - 232622, Flora Vasquez - 232627

APPROVED BY ELECTED OFFICIAL/DEPARTMENT HEAD: DATE: 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:
Janie Alejos 3-4-13 Janie Alejos 242-7025

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



**HIDALGO COUNTY, TEXAS**  
**SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE**  
**CHECK REQUEST FORM**  
**PAGE 1 OF 2**

DEPARTMENT:	DBM- EMPLOYEE BENEFITS		
DEPARTURE DATE:	4/10/2013	RETURN DATE:	4/12/2013
TO CITY:	AUSTIN	STATE:	TX
NAME OF EMPLOYEES ATTENDING SEMINAR:	FLORA VAZQUEZ		
TOTAL # OF EMPLOYEES ATTENDING SEMINAR:	1		
PURPOSE/BENEFIT TO HIDALGO COUNTY:	TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.		

**A. WORKSHOP/SEMINAR REGISTRATION(S)**

TITLE OF WORKSHOP/SEMINAR:	2013 COUNTY MGMT. INSTITUTE		
SPONSORED BY:	TEXAS ASSOC. OF COUNTIES		
REGISTRATION CHECK PAYABLE TO:	TEXAS ASSOC. OF COUNTIES		
REGISTRATION ADDRESS:	ATTN: EDUCATION DEPT.	SEMINAR START DATE:	4/10/2013
	P.O. BOX 8131	SEMINAR END DATE:	4/12/2013
	AUSTIN, TX 78768	PURCHASE ORDER NO.	
1. REGISTRATION COST PER EMPLOYEE:	\$ 95.00	NO. OF EMPLOYEES ATTENDING AT THIS RATE:	1
2. REGISTRATION COST PER EMPLOYEE:		NO. OF EMPLOYEES ATTENDING AT THIS RATE:	
3. *FREE REGISTRATION COST:	"FREE"	NO. OF EMPLOYEES ATTENDING FOR "FREE*":	
GL ACCT NO.:	3-2201-415-00-115-009-0-583	TOTAL NO. OF EMPLOYEES ATTENDING:	
TOTAL COST OF SEMINAR (Registration Cost per Employee x Number of Employees Attending at a rate) . . . . A.	\$	95.00	
(SEE PAGE 2 FOR SECTIONS B, C, & D)	TOTAL THIS PAGE (A):	\$	95.00
	TOTAL 2ND PAGE (B + C + D):	\$	248.40
	GRAND TOTAL (A + B + C + D)	\$	343.40

**E. CERTIFICATIONS AND EMPLOYEE AUTHORIZATIONS FOR PAYROLL DEDUCTIONS**

DEPARTMENT'S PUBLIC OFFICIAL CERTIFICATION: I hereby certify that trip expenditures are necessary and will be incurred for official county business. Reasonable efforts to minimize the use of county funds have been explored. The information and estimates provided on this form are true and as accurate as possible. If it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. Travelers have read the Travel Policy, Guidelines, and Procedures and understand that failure to cancel reservations for any reasons other than those allowed by the Travel Policy will be at their expense.

DEPARTMENT'S PUBLIC OFFICIAL (Signature)	DEPARTMENT'S CONTACT PERSON	PHONE #

TRAVELER'S AUTHORIZATION: I certify that if it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. If I fail to cancel reservations for reasons other than those allowed by Section 17 of the Travel Policy, Guidelines, and Procedures, I authorize the deduction of any travel expenses incurred by the county on my behalf from my payroll check.

Flora Vazquez		101001
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.

Acct # 3-2201-415-00-115-009-0-583 (583 & 584)



**HIDALGO COUNTY, TEXAS**  
**SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE**  
**CHECK REQUEST FORM**  
**PAGE 2 OF 2**

DEPARTMENT: \_\_\_\_\_ DBM- EMPLOYEE BENEFITS  
 DEPARTURE DATE: \_\_\_\_\_ 4/10/2013 \_\_\_\_\_ RETURN DATE: \_\_\_\_\_ 4/12/2013  
 TO CITY: \_\_\_\_\_ AUSTIN \_\_\_\_\_ STATE: \_\_\_\_\_ TX  
 NAME OF EMPLOYEES ATTENDING SEMINAR: \_\_\_\_\_  
 SEMINAR: \_\_\_\_\_ FLORA VAZQUEZ  
 TOTAL # OF EMPLOYEES ATTENDING SEMINAR: \_\_\_\_\_

**B. HOTEL RESERVATION(S)**

Note: Use of a travel agency is discouraged. Unless a benefit is achieved by other means, you must use the State of Texas travel management services contract by visiting: [www.window.state.tx.us/procurement/prog/stmp/](http://www.window.state.tx.us/procurement/prog/stmp/)

NAME OF HOTEL:	DOUBLE TREE HOTEL	HOTEL PHONE NO:	1-800-347-0330
ADDRESS OF HOTEL:	6505 IH 35 NORTH AUSTIN, TX 78752	CONFIRMATION NO.(S):	82581766
ROOM RATE:	\$108.00	PURCHASE ORDER NO.	
NUMBER OF NIGHTS:	2	GENERAL LEDGER ACCT NO:	3-2201-415-00-115-009-0-583
ROOM RATE:		TOTAL NO. OF ROOMS:	1
NUMBER OF NIGHTS:			
ROOM RATE:		HOTEL TAX RATE:	15.00%
NUMBER OF NIGHTS:			
TOTAL CHECK AMOUNT FOR HOTEL (Daily Room Rate x No. of Rooms x No. of Days x Tax Rate) . . . . . B.			\$ 248.40

**C. CAR RENTAL(S)**

Note: Reservations for car rentals made under the name of Hidalgo County are required to be made through the State of Texas travel management services contract by visiting: [www.window.state.tx.us/procurement/prog/stmp/](http://www.window.state.tx.us/procurement/prog/stmp/)

IS A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? YES / NO	NO	IF YES, EXPLAIN REASON FOR NOT UTILIZING IT? Attach memo if more space needed.	
NAME OF CAR RENTAL COMPANY:			
ADDRESS OF CAR RENTAL COMPANY:			
<i>Note: Coordination of travel is required for every group of 4 or less</i>			
PHONE NUMBER OF CAR RENTAL COMPANY:			
VEHICLE NO. 1 TYPE:		VEHICLE NO. 2 TYPE:	
DAILY CAR RATE:		DAILY CAR RATE:	
NUMBER OF DAYS:		NUMBER OF DAYS:	
CONFIRMATION NO.:		CONFIRMATION NO.:	
VEHICLE NO. 1 - NAMES OF EMPLOYEES TRAVELING:		VEHICLE NO. 2 - NAMES OF EMPLOYEES TRAVELING:	
PURCHASE ORDER NO.		GL ACCT NO:	
TOTAL CHECK AMOUNT FOR CAR RENTAL (Daily Car Rate x No. of Days) . . . . . C.			\$ -

**D. AIRFARE(S)**

Note: Use of a travel agency is discouraged. Refundable fares should be considered if possibility of a trip cancellation exists.

NAME OF AIRLINE COMPANY:			
ADDRESS OF AIRLINE COMPANY:			
PHONE NO. OF AIRLINE COMPANY:		CONFIRMATION NO.:	
ROUND TRIP AIRFARE PER PERSON:			
NUMBER OF TRAVELERS:			
GENERAL LEDGER ACCOUNT NUMBER		P.O. NO.	
TOTAL CHECK AMOUNT FOR AIRLINE COMPANY . . . . . D.			\$ -
<b>SUBTOTAL ( B+C+D)</b>			<b>\$ 248.40</b>



**HIDALGO COUNTY, TEXAS  
SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE  
CHECK REQUEST FORM  
PAGE 1 OF 2**

DEPARTMENT:	DBM- BUDGET DIVISION		
DEPARTURE DATE:	4/10/2013	RETURN DATE:	4/12/2013
TO CITY:	AUSTIN	STATE:	TX
NAME OF EMPLOYEES ATTENDING SEMINAR:	SERGIO CRUZ, DINA TREVINO, DAMARIS SAN MIGUEL, REY SALAZAR		
TOTAL # OF EMPLOYEES ATTENDING SEMINAR:	4		
PURPOSE/BENEFIT TO HIDALGO COUNTY:	TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.		

**A. WORKSHOP/SEMINAR REGISTRATION(S)**

TITLE OF WORKSHOP/SEMINAR:	2013 COUNTY MGMT. INSTITUTE		
SPONSORED BY:	TEXAS ASSOC. OF COUNTIES		
REGISTRATION CHECK PAYABLE TO:	TEXAS ASSOC. OF COUNTIES		
REGISTRATION ADDRESS:	ATTN: EDUCATION DEPT.	SEMINAR START DATE:	4/10/2013
	P.O. BOX 8131	SEMINAR END DATE:	4/12/2013
	AUSTIN, TX 78768	PURCHASE ORDER NO.	
1. REGISTRATION COST PER EMPLOYEE:	\$ 195.00	NO. OF EMPLOYEES ATTENDING AT THIS RATE:	1
2. REGISTRATION COST PER EMPLOYEE:	\$ 95.00	NO. OF EMPLOYEES ATTENDING AT THIS RATE:	3
3. "FREE REGISTRATION COST:	"FREE"	NO. OF EMPLOYEES ATTENDING FOR "FREE":	
GL ACCT NO:	3-110415-14-115-03-0-583		
TOTAL NO. OF EMPLOYEES ATTENDING:			
TOTAL COST OF SEMINAR (Registration Cost per Employee x Number of Employees Attending at a rate) . . . . A.	\$	480.00	
(SEE PAGE 2 FOR SECTIONS B, C, & D)	TOTAL THIS PAGE (A):	\$	480.00
	TOTAL 2ND PAGE (B + C + D):	\$	1287.55
	GRAND TOTAL (A + B + C + D)	\$	1767.55

**E. CERTIFICATIONS AND EMPLOYEE AUTHORIZATIONS FOR PAYROLL DEDUCTIONS**

DEPARTMENT'S PUBLIC OFFICIAL CERTIFICATION: I hereby certify that trip expenditures are necessary and will be incurred for official county business. Reasonable efforts to minimize the use of county funds have been explored. The information and estimates provided on this form are true and as accurate as possible. If it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. Travelers have read the Travel Policy, Guidelines, and Procedures and understand that failure to cancel reservations for any reasons other than those allowed by the Travel Policy will be at their expense.

	DEPARTMENT'S CONTACT PERSON	PHONE #
DEPARTMENT'S PUBLIC OFFICIAL (Signature)		

TRAVELER'S AUTHORIZATION: I certify that if it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. If I fail to cancel reservations for reasons other than those allowed by Section 17 of the Travel Policy, Guidelines, and Procedures, I authorize the deduction of any travel expenses incurred by the county on my behalf from my payroll check.

Sergio Cruz		132438
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
Dina Trevino		070548
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
Damaris San Miguel		140325
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
Rey Salazar		124788
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.



**HIDALGO COUNTY, TEXAS**  
**SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE**  
**CHECK REQUEST FORM**  
**PAGE 2 OF 2**

DEPARTMENT: DBM- BUDGET DIVISION

DEPARTURE DATE: 4/10/2013 RETURN DATE: 4/12/2013

TO CITY: AUSTIN STATE: TX

NAME OF EMPLOYEES ATTENDING SEMINAR: SERGIO CRUZ, DINA TREVINO, DAMARIS SAN MIGUEL, REY SALAZAR

TOTAL # OF EMPLOYEES ATTENDING SEMINAR: 4

**B. HOTEL RESERVATION(S)**

Note: Use of a travel agency is discouraged. Unless a benefit is achieved by other means, you must use the State of Texas travel management services contract by visiting: [www.window.state.tx.us/procurement/prog/stmp/](http://www.window.state.tx.us/procurement/prog/stmp/)

NAME OF HOTEL:	<u>DOUBLE TREE HOTEL</u>	HOTEL PHONE NO:	<u>1-800-347-0330</u>
ADDRESS OF HOTEL:	<u>6505 IH 35 NORTH</u> <u>AUSTIN, TX 78752</u>	CONFIRMATION NO.(S):	<u>82581766</u>
ROOM RATE:	<u>\$108.00</u>	PURCHASE ORDER NO.	
NUMBER OF NIGHTS:	<u>2</u>	GENERAL LEDGER ACCT NO:	<u>3-1100-415-14-115-001-0-583</u>
ROOM RATE:		TOTAL NO. OF ROOMS:	<u>4</u>
NUMBER OF NIGHTS:			
ROOM RATE:		HOTEL TAX RATE:	<u>15.00%</u>
NUMBER OF NIGHTS:			

TOTAL CHECK AMOUNT FOR HOTEL (Daily Room Rate x No. of Rooms x No. of Days x Tax Rate) . . . . . B. \$ 992.80

**C. CAR RENTAL(S)**

Note: Reservations for car rentals made under the name of Hidalgo County are required to be made through the State of Texas travel management services contract by visiting: [www.window.state.tx.us/procurement/prog/stmp/](http://www.window.state.tx.us/procurement/prog/stmp/)

IS A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? YES / NO	<u>NO</u>	IF YES, EXPLAIN REASON FOR NOT UTILIZING IT? Attach memo if more space needed.	
NAME OF CAR RENTAL COMPANY:	<u>ENTERPRISE RENT A CAR</u>		
ADDRESS OF CAR RENTAL COMPANY:	<u>615 S. CLOSNER BLVD.</u> <u>EDINBURG, TX 78539</u>		
PHONE NUMBER OF CAR RENTAL COMPANY:	<u>956-383-3815</u>		
VEHICLE NO. 1 TYPE:	<u>MINIVAN</u>	VEHICLE NO. 2 TYPE:	
DAILY CAR RATE:	<u>\$ 58.95</u>	DAILY CAR RATE:	
NUMBER OF DAYS:	<u>5</u>	NUMBER OF DAYS:	
CONFIRMATION NO.:	<u>S1WNM1</u>	CONFIRMATION NO.	
VEHICLE NO. 1 - NAMES OF EMPLOYEES TRAVELING:	<u>SERGIO CRUZ, DINA TREVINO, REY SALAZAR, DAMARIS SAN MIGUEL, FLORA VAZQUEZ</u>	VEHICLE NO. 2 - NAMES OF EMPLOYEES TRAVELING:	
PURCHASE ORDER NO.		GL ACCT NO:	<u>3-1100-415-14-115-001-0-442</u>

TOTAL CHECK AMOUNT FOR CAR RENTAL (Daily Car Rate x No. of Days) . . . . . C. \$ 294.75

**D. AIRFARE(S)**

Note: Use of a travel agency is discouraged. Refundable fares should be considered if possibility of a trip cancellation exists.

NAME OF AIRLINE COMPANY:	
ADDRESS OF AIRLINE COMPANY:	
PHONE NO. OF AIRLINE COMPANY:	CONFIRMATION NO.:
ROUND TRIP AIRFARE PER PERSON:	
NUMBER OF TRAVELERS:	
GENERAL LEDGER ACCOUNT NUMBER:	P.O. NO.

TOTAL CHECK AMOUNT FOR AIRLINE COMPANY . . . . . D. \$ -

SUBTOTAL ( B+C+D) \$ 543.15



## HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

### A. TRIP AND TRAVELER INFORMATION

EMPLOYEE I.D. NO.: 070548 EMPLOYEE TITLE: ASST. BUDGET OFFICER  
 EMPLOYEE NAME: DINA TREVINO  
 DEPARTMENT: DBM - BUDGET DIVISION DO YOU HAVE AN OUTSTANDING TRAVEL ADVANCE? NO  
 DEPARTURE DATE: 4/10/13 RETURN DATE: 4/12/13  
 TIME OF DEPARTURE: 600AM TIME OF RETURN: 630PM  
 TO CITY: AUSTIN STATE: TEXAS  
 SEMINAR/CONFERENCE/MEETING: START DATE: 4/10/2013 END DATE: 4/12/2013 ACTUAL NO. OF DAYS 3  
 TITLE OF WORKSHOP/CONFERENCE: 2013 TAC COUNTY MGMT. INSTITUTE  
 METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL): CAR RENTAL IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL.  
 LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE? REY SALAZAR, SERGIO CRUZ, DAMARIS SAN MIGUEL, FLORA VAZQUEZ  
 DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? NO IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE?  
 PURPOSE/BENEFIT TO HIDALGO COUNTY:  
 TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.

### B. ESTIMATED EXPENSES:

**I. MEALS: (Meals for one-day travel not requiring an overnight stay will not be advanced)**

Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		10-Apr	11-Apr	12-Apr					
Breakfast	\$9.00	\$9.00	\$9.00	\$9.00					\$27.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00					\$36.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00					\$54.00
<b>Total</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$117.00</b>

Meal per diems must be prorated for 1st day and last day of travel as follows:

Departure:	Arrival:
Before 8:00 a.m. (breakfast, lunch, & dinner) \$ 39.00	Before 8:00 a.m. (breakfast) \$ 9.00
8:00 a.m. - 1:00 p.m. (lunch & dinner) \$ 30.00	8:00 a.m. - 6:00 p.m. (breakfast & lunch) \$ 21.00
After 1:00 p.m. (dinner) \$ 18.00	After 6:00 p.m. (breakfast, lunch, & dinner) \$ 39.00

**II. INCIDENTAL EXPENSES (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):**

Expense type: \_\_\_\_\_ days @ \$ 20.00 \$ -

**III. PERSONAL VEHICLE MILEAGE** \_\_\_\_\_ Miles @ \$ 0.565 (Current Rate) . . . \$ -

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

**IV. OTHER (Itemize)**

FUEL FOR CAR RENTAL \_\_\_\_\_ \$

**V. P.O. # ISSUED UNDER EMPLOYEE'S NAME** \_\_\_\_\_ **VI. TOTAL TRAVEL ADVANCE REQUESTED: \$ 117.00**

**VII. COMMENTS:** \_\_\_\_\_ **VII. GENERAL LEDGER ACCOUNT NUMBER:** \_\_\_\_\_

### C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary. The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.

	Sergio Cruz	
EMPLOYEE SIGNATURE	DEPARTMENT OFFICIAL'S NAME (Print Name)	DEPARTMENT OFFICIAL'S APPROVAL (Signature)



## HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

### A. TRIP AND TRAVELER INFORMATION

EMPLOYEE I.D. NO: 124788 EMPLOYEE TITLE: DIRECTOR  
 EMPLOYEE NAME: REYNALDO SALAZAR  
 DEPARTMENT: DBM - BUDGET DIVISION DO YOU HAVE AN OUSTANDING TRAVEL ADVANCE? NO  
 DEPARTURE DATE: 4/10/13 RETURN DATE: 4/12/13  
 TIME OF DEPARTURE: 600AM TIME OF RETURN: 630PM  
 TO CITY: AUSTIN STATE: TEXAS  
 SEMINAR/CONFERENCE/MEETING: START DATE: 4/10/2013 END DATE: 4/12/2013 ACTUAL NO. OF DAYS: 3  
 TITLE OF WORKSHOP/CONFERENCE: 2013 TAC COUNTY MGMT. INSTITUTE  
 METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL): CAR RENTAL IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL: \_\_\_\_\_  
 LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE? DINA TREVINO, SERGIO CRUZ, DAMARIS SAN MIGUEL, FLORA VAZQUEZ  
 DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? NO IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE? \_\_\_\_\_  
 PURPOSE/BENEFIT TO HIDALGO COUNTY:  
TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.

### B. ESTIMATED EXPENSES:

**I. MEALS: (Meals for one-day travel not requiring an overnight stay will not be advanced)**

Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		10-Apr	11-Apr	12-Apr					
Breakfast	\$9.00	\$9.00	\$9.00	\$9.00					\$27.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00					\$36.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00					\$54.00
<b>Total</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$117.00</b>

\$ 117.00

Meal per diems must be prorated for 1st day and last day of travel as follows:

Departure:	Arrival:
Before 8:00 a.m. (breakfast, lunch, & dinner)	Before 8:00 a.m. (breakfast)
8:00 a.m. - 1:00 p.m. (lunch & dinner)	8:00 a.m. - 6:00 p.m. (breakfast & lunch)
After 1:00 p.m. (dinner)	After 6:00 p.m. (breakfast, lunch, & dinner)
\$ 39.00	\$ 9.00
\$ 30.00	\$ 21.00
\$ 18.00	\$ 39.00

**II. INCIDENTAL EXPENSES (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):**

Expense type: \_\_\_\_\_ days @ \$ 20.00 \$ -

**III. PERSONAL VEHICLE MILEAGE** \_\_\_\_\_ Miles @ \$ 0.565 (Current Rate) . . . \$ -

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

Mapquest

**IV. OTHER (Itemize)**

FUEL FOR CAR RENTAL . . . . . \$ \_\_\_\_\_  
 \_\_\_\_\_ . . . . . \$ \_\_\_\_\_

**V. P.O. # ISSUED UNDER EMPLOYEE'S NAME FOR THE AMOUNT OF THE TRAVEL ADVANCE:** \_\_\_\_\_ **VI. TOTAL TRAVEL ADVANCE REQUESTED: \$ 117.00**

**VII. COMMENTS:** \_\_\_\_\_ **VII. GENERAL LEDGER ACCOUNT NUMBER:** \_\_\_\_\_

### C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary. The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.

 EMPLOYEE SIGNATURE	 DEPARTMENT OFFICIAL'S NAME (Print Name)	 DEPARTMENT OFFICIAL'S APPROVAL (Signature)
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## HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

### A. TRIP AND TRAVELER INFORMATION

EMPLOYEE NAME: <u>DAMARIS SAN MIGUEL</u>		EMPLOYEE I.D. NO.: <u>140325</u>	EMPLOYEE TITLE: <u>DIRECTOR</u>
DEPARTMENT: <u>DBM - BUDGET DIVISION</u>		DO YOU HAVE AN OUSTANDING TRAVEL ADVANCE? <u>NO</u>	
DEPARTURE DATE: <u>4/10/13</u>	RETURN DATE: <u>4/12/13</u>		
TIME OF DEPARTURE: <u>600AM</u>	TIME OF RETURN: <u>630PM</u>		
TO CITY: <u>AUSTIN</u>	STATE: <u>TEXAS</u>		
SEMINAR/CONFERENCE/MEETING: <u>START DATE: 4/10/2013</u>	<u>END DATE: 4/12/2013</u>	<u>ACTUAL NO. OF DAYS 3</u>	
TITLE OF WORKSHOP/CONFERENCE: <u>2013 TAC COUNTY MGMT. INSTITUTE</u>			
METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL): <u>CAR RENTAL</u>		IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL. _____	
LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE? <u>DINA TREVINO, SERGIO CRUZ, REY SALAZAR, FLORA VAZQUEZ</u>			
DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? <u>NO</u>		IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE? _____	
PURPOSE/BENEFIT TO HIDALGO COUNTY: <u>TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.</u>			

### B. ESTIMATED EXPENSES:

I. MEALS: (Meals for one-day travel not requiring an overnight stay will not be advanced)									
Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		10-Apr	11-Apr	12-Apr					
Breakfast	\$9.00	\$9.00	\$9.00	\$9.00					\$27.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00					\$36.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00					\$54.00
<b>Total</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$117.00</b>

Meal per diems must be prorated for 1st day and last day of travel as follows:			
Departure:		Arrival:	
Before 8:00 a.m. (breakfast, lunch, & dinner)	\$ 39.00	Before 8:00 a.m. (breakfast)	\$ 9.00
8:00 a.m. - 1:00 p.m. (lunch & dinner)	\$ 30.00	8:00 a.m.- 6:00 p.m. (breakfast & lunch)	\$ 21.00
After 1:00 p.m. (dinner)	\$ 18.00	After 6:00 p.m. (breakfast,lunch,&dinner)	\$ 39.00

II. INCIDENTAL EXPENSES (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):

Expense type: \_\_\_\_\_ days @ \$ 20.00 \$ -

III. PERSONAL VEHICLE MILEAGE \_\_\_\_\_ Miles @ \$ 0.565 (Current Rate) . . . . \$ -

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

Mapquest

IV. OTHER (Itemize)

FUEL FOR CAR RENTAL \_\_\_\_\_ \$

\_\_\_\_\_ \$

V. P.O. # ISSUED UNDER EMPLOYEE'S NAME FOR THE AMOUNT OF THE TRAVEL ADVANCE:	VI. TOTAL TRAVEL ADVANCE REQUESTED: \$	117.00
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VII. COMMENTS: \_\_\_\_\_

VII. GENERAL LEDGER ACCOUNT NUMBER: \_\_\_\_\_

### C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary . The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

*Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.*

 EMPLOYEE SIGNATURE	 DEPARTMENT OFFICIAL'S NAME (Print Name)	 DEPARTMENT OFFICIAL'S APPROVAL (Signature)
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## HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

### A. TRIP AND TRAVELER INFORMATION

EMPLOYEE I.D. NO: 101001 EMPLOYEE TITLE: DIRECTOR  
 EMPLOYEE NAME: FLORA VAZQUEZ  
 DEPARTMENT: DBM - EMPLOYEE BENEFITS DO YOU HAVE AN OUSTANDING TRAVEL ADVANCE? NO  
 DEPARTURE DATE: 4/10/13 RETURN DATE: 4/12/13  
 TIME OF DEPARTURE: 600AM TIME OF RETURN: 630PM  
 TO CITY: AUSTIN STATE: TEXAS  
 SEMINAR/CONFERENCE/MEETING: START DATE: 4/10/2013 END DATE: 4/12/2013 ACTUAL NO. OF DAYS: 3  
 TITLE OF WORKSHOP/CONFERENCE: 2013 TAC COUNTY MGMT. INSTITUTE  
 METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL): CAR RENTAL IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL: \_\_\_\_\_  
 LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE? DINA TREVINO, SERGIO CRUZ, REY SALAZAR, DAMARIS SAN MIGUEL  
 DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? NO IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE? \_\_\_\_\_  
 PURPOSE/BENEFIT TO HIDALGO COUNTY:  
TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.

### B. ESTIMATED EXPENSES:

**I. MEALS: (Meals for one-day travel not requiring an overnight stay will not be advanced)**

Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		10-Apr	11-Apr	12-Apr					
Breakfast	\$9.00	\$9.00	\$9.00	\$9.00					\$27.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00					\$36.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00					\$54.00
<b>Total</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$117.00</b>

\$ **117.00**

Meal per diems must be prorated for 1st day and last day of travel as follows:

Departure:	Arrival:
Before 8:00 a.m. (breakfast, lunch, & dinner)	Before 8:00 a.m. (breakfast)
8:00 a.m. - 1:00 p.m. (lunch & dinner)	8:00 a.m. - 6:00 p.m. (breakfast & lunch)
After 1:00 p.m. (dinner)	After 6:00 p.m. (breakfast, lunch, & dinner)
\$ 39.00	\$ 9.00
\$ 30.00	\$ 21.00
\$ 18.00	\$ 39.00

**II. INCIDENTAL EXPENSES (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):**

Expense type: \_\_\_\_\_ days @ \$ 20.00 \$ -

**III. PERSONAL VEHICLE MILEAGE** \_\_\_\_\_ Miles @ \$ 0.565 (Current Rate) . . . \$ -

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

Mapquest

**IV. OTHER (Itemize)**

FUEL FOR CAR RENTAL \_\_\_\_\_ \$

\_\_\_\_\_ \$

**V. P.O. # ISSUED UNDER EMPLOYEE'S NAME FOR THE AMOUNT OF THE TRAVEL ADVANCE:** \_\_\_\_\_

**VI. TOTAL TRAVEL ADVANCE REQUESTED: \$ 117.00**

**VII. COMMENTS:** \_\_\_\_\_

**VII. GENERAL LEDGER ACCOUNT NUMBER:** \_\_\_\_\_

### C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary. The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.

 EMPLOYEE SIGNATURE	 DEPARTMENT OFFICIAL'S NAME (Print Name)	 DEPARTMENT OFFICIAL'S APPROVAL (Signature)
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## HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

### A. TRIP AND TRAVELER INFORMATION

EMPLOYEE NAME: SERGIO CRUZ EMPLOYEE I.D. NO.: 132438 EMPLOYEE TITLE: BUDGET OFFICER

DEPARTMENT: DBM - BUDGET DIVISION DO YOU HAVE AN OUSTANDING TRAVEL ADVANCE? NO

DEPARTURE DATE: 4/10/13 RETURN DATE: 4/12/13

TIME OF DEPARTURE: 600AM TIME OF RETURN: 630PM

TO CITY: AUSTIN STATE: TEXAS

SEMINAR/CONFERENCE/MEETING: START DATE: 4/10/2013 END DATE: 4/12/2013 ACTUAL NO. OF DAYS: 3

TITLE OF WORKSHOP/CONFERENCE: 2013 TAC COUNTY MGMT. INSTITUTE

METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL): CAR RENTAL IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL: \_\_\_\_\_

LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE? REY SALAZAR, DINA TREVINO, DAMARIS SAN MIGUEL, FLORA VAZQUEZ

DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? NO IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE? \_\_\_\_\_

PURPOSE/BENEFIT TO HIDALGO COUNTY:  
TO IDENTIFY WAYS TO IMPROVE EMPLOYEE RETENTION, UNDERSTAND HEALTH CARE REFORM CAN EFFECT HIDALGO COUNTY, WAYS TO FIND GRANTS FOR HIDALGO COUNTY, CONTROL FACTORS THAT CAN LEAD TO EMPLOYEE BURNOUT AND REDUCE COMMON CAUSES OF COUNTY LOSSES.

### B. ESTIMATED EXPENSES:

**I. MEALS:** (Meals for one-day travel not requiring an overnight stay will not be advanced)

Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		10-Apr	11-Apr	12-Apr					
Breakfast	\$9.00	\$9.00	\$9.00	\$9.00					\$27.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00					\$36.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00					\$54.00
<b>Total</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$39.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$117.00</b>

\$ 117.00

Meal per diems must be prorated for 1st day and last day of travel as follows:

Departure:	Arrival:
Before 8:00 a.m. (breakfast, lunch, & dinner) \$ 39.00	Before 8:00 a.m. (breakfast) \$ 9.00
8:00 a.m. - 1:00 p.m. (lunch & dinner) \$ 30.00	8:00 a.m.- 6:00 p.m. (breakfast & lunch) \$ 21.00
After 1:00 p.m. (dinner) \$ 18.00	After 6:00 p.m. (breakfast,lunch,&dinner) \$ 39.00

**II. INCIDENTAL EXPENSES** (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):

Expense type:	days @ \$ 20.00	\$ -
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**III. PERSONAL VEHICLE MILEAGE** \_\_\_\_\_ Miles @ \$ 0.565 (Current Rate) . . . . \$ -

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

Mapquest

**IV. OTHER (Itemize)**

<u>FUEL FOR CAR RENTAL</u>	\$ 100.00
_____	\$ _____

<b>V. P.O. # ISSUED UNDER EMPLOYEE'S NAME FOR THE AMOUNT OF THE TRAVEL ADVANCE:</b>	<b>VI. TOTAL TRAVEL ADVANCE REQUESTED: \$ 217.00</b>
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**VII. COMMENTS:** \_\_\_\_\_ **VII. GENERAL LEDGER ACCOUNT NUMBER:** \_\_\_\_\_

### C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary. The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

*Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.*

EMPLOYEE SIGNATURE	DEPARTMENT OFFICIAL'S NAME (Print Name)	DEPARTMENT OFFICIAL'S APPROVAL (Signature)

[Calendar of Events](#) · [Contact Us](#)

TAC **Member Services** Pool & Risk Services Texas County Government Legislative

SEARCH

**EDUCATION & TRAINING** LEGAL RESOURCES LEGISLATIVE RISK MANAGEMENT SERVICES COUNTY MARKET

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[Calendar of Events](#)

## 2012 County Management Institute - Agenda

[CIO Certification](#)

[Overview](#) | [Registration](#) | [Hotel](#) | [Scheduled Activities](#) | [Agenda](#) | [Continuing Education](#) | [Cancellation](#)

[Judicial Education Center](#)

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### Wednesday, April 10

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[Leadership Program](#)

9-5 p.m.

Registration

[Presentations](#)

1:30-1:45 p.m.

Welcome & Opening Remarks

1:45 – 3:15 p.m.

**Opening Keynote**

Ignite Your Staff: From Burnout to On Fire!

3:30 – 5 p.m.

**General Session**

The Changing Face of Texas and the Future of Your Office

5 – 6:30 p.m.

**Welcome Reception**

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### Thursday, April 11

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7:30 – 8:30 a.m.

**Continental Breakfast**

**Session 1**

How Secure is Your Office?

**Session 2**

Health Care Reform: What We Know Now, and What We'll Learn in the Next Six Months\*

8:30 – 9:20 a.m.

**Session 3**

Wellness Programs – Improving Lives, Saving Dollars

**Session 4**

Grant Seeking and Administration: The Basics (Part 1)

9:20 – 9:30 a.m.

**Break**

**Session 1 (repeated)**

How Secure is Your Office?

**Session 2 (repeated)**

Health Care Reform: What We Know Now, and What We'll Learn in the Next Six Months\*

9:30 – 10:20 a.m.

**Session 3 (repeated)**

Wellness Programs – Improving Lives, Saving Dollars

**Session 4**

Grant Seeking and Administration: The Basics (Part 2)

10:20 – 10:50 a.m.

**Refreshment Break**

**General Session**

County Best Practices: Ideas You Can Use

11:40 – 1:10 p.m.

**Best Practices Awards Luncheon** (open to all)

1:10 – 1:25 p.m.

**Short Break for Session Rotation**

**Session 5**

Is Your Personnel Policy Manual Up to Date?

1:25 – 2:15 p.m.

**Session 6**

The Total Cost of Risk

**Session 7**

Data Security for County Managers

2:15 – 2:25 p.m.

**Break**

**Session 5 (repeated)**

Is Your Personnel Policy Manual Up to Date?

2:25 – 3:15 p.m.

**Session 6 (repeated)**

The Total Cost of Risk

**Session 7 (repeated)**

Data Security for County Managers

3:15 – 3:45 p.m.

**Refreshment Break**

3:45 – 4:35 p.m.

**HR Panel Discussion: Ask the HR Experts**

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Friday, April 12

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7:00 – 8:00 a.m.

**Continental Breakfast**

**How to Build a No Complaints, No Excuses, Let's Go For It Team**

8:00 – 9:30 a.m.

9:30 – 9:45 a.m.

**Break**

9:45 – 11:15 a.m.

**Closing Keynote**

**Whale Done! Enhancing the Power of Positive Relationships**

11:15 – 11:30 a.m.

**Closing Remarks & Adjourn**

