

Guilford County Schools
P.O. Box 880
Greensboro, NC 27402-0880



911386
DISTRICT EXPENSE FUND

UNIT NO. 410

CHECK NO. 911386

ACCOUNT NUMBER	INVOICE NUMBER	PO #	DESCRIPTION	INV. AMOUNT	DISCOUNT	NET AMOUNT
2-6942-028-312-000-230-03	95721505 WATLI		HOTEL T. WATLINGTON	562.81		562.81

FILE COPY

911386 02/06/18 7875227 RENAISSANCE NASHVILLE HOTEL 484.00 .00 78.81 562.81

PAYEE SHOULD DETACH STUB AND DEPOSIT VOUCHER AT ONCE



GUILFORD COUNTY SCHOOLS ADMINISTRATIVE UNIT
GREENSBORO, NORTH CAROLINA

DISTRICT EXPENSE FUND
VOID AFTER 90 DAYS

NO. 911386

66-162
531

DATE
02/06/18

WACHOVIA BANK, NATIONAL ASSOCIATION

AMOUNT OR PAYEE ALTERATION VOIDS THIS DOCUMENT

\$ *****562.81
DOLLAR FIVE SIX TWO PERIOD EIGHT ONE

PAY EXACTLY *****562 DOLLARS AND 81 CENTS

TO
THE
ORDER
OF
RENAISSANCE NASHVILLE HOTEL
611 COMMERCE STREET
NASHVILLE, TN 37203

THIS DISBURSEMENT HAS BEEN APPROVED AS REQUIRED
BY THE SCHOOL BUDGET AND FISCAL CONTROL ACT.

NON-NEGOTIABLE
SCHOOL FINANCE OFFICER

☐ Advance
☐ Reimbursement

GUILFORD COUNTY SCHOOLS RECEIVED
Staff Development Travel Expense

FIN-F008
10/08
Rev.A

2018 FEB -5 PM 3:14

Vendor # _____ Social Security # _____
Name (Type or Print) _____
Street Address _____
City/State _____ Zip _____
*Prepay Renaissance Nashville Hotel
Street Address 611 Commerce St.
City/State Nashville, TN Zip 37203
Budget Code 2-6442-028-312-100-220 School/Dept. Chief of Schools
Purpose of Travel National Principal Supervisor Academy
Job Assignment During Travel Attendance to conference

PAYEE CERTIFICATION: This is a true and accurate statement of expenses incurred in discharging official business duties.

Signature Tom B. Wallingford Sr. Date 2/5/18

SUPERVISOR APPROVAL: This is a true and accurate statement of expenses incurred in discharging official business duties.

Signature Sharon L. Contreras Date 2/5/18

Period Covered by Travel:

Date/Time of Departure 2:13 1 2018

Date/Time of Return: 2:15 1 2018

Total Expense

Less:

Prepayment/Advance

Net Reimbursement

562.81

Travel (Show each city visited)			Transportation			Subsistence			Other	
Date	From	To	Mode	Auto Miles	Amount	Type	In-State	Out-of-State	Explanation	Amount
									Registration	
			P			B				
			A	XX		L				
			O	XX		D				
			R	XX		H		✓	HOTEL	562.81
						TOT				
			P			B				
			A	XX		L				
			O	XX		D				
			R	XX		H				
						TOT				
			P			B				
			A	XX		L				
			O	XX		D				
			R	XX		H				
						TOT				
			P			B				
			A	XX		L				
			O	XX		D				
			R	XX		H				
						TOT				
						TOT				
			Total Trans			Total Subs.			Total Other	562.81

Accounting Approval [Signature]
TRAVEL: P - Privately owned automobile
Air - Air O - Other R - Rental

TYPE OF SUBSISTENCE: B - Breakfast L - Lunch
D - Dinner H - Lodging

WHITE COPY - ACCOUNTS PAYABLE

YELLOW COPY - EMPLOYEE