

From: [Bill Rooney](#)
To: ["Lea Dell Morris"](#)
Subject: RE: T&L - Leon, Mexico
Date: Tuesday, September 22, 2009 2:04:00 PM
Attachments: [WLR - Leon MX TL.pdf](#)

Second page is signed.

Bill

Dr. William L. Rooney
Professor, Sorghum Breeding and Genetics
Chair, Plant Release Committee
Texas A&M University
College Station, Texas 77843-2474
979 845 2151

-----Original Message-----

From: Lea Dell Morris [<mailto:LMorris@ag.tamu.edu>]
Sent: Tuesday, September 22, 2009 1:51 PM
To: Bill Rooney
Subject: T&L - Leon, Mexico

Please print, sign and return to me.

Have a great day!



TRAVEL REQUEST

Dept/Unit/District: _____ Date: _____ Request Number: _____

From: _____ To: _____
Travel Dates (including travel time)

Destination: From: _____ To: _____ District: _____
City State (AgriLife Extension)

Counties Visited (if applicable)*: _____
* County required for out of state travel

Purpose of Travel: _____

ADDITIONAL TRIPS LISTED ON BACK OF FORM

MODE OF TRANSPORTATION:

_____ Private Auto _____ Accompanying Another Party*
_____ Official Auto _____ Accompanied by* _____
_____ University Plane _____ Commercial Transportation (Includes Rental Car)

*Explanation required for two or more employees attending the same or similar duties: _____

EXPENSE TO BE CHARGED TO:

Account Name: _____ Account No: _____

Estimated Expenses: \$ _____ Project No/Support Account: _____

Name: _____
Print or Type



Signature: _____

Title: _____

RECOMMENDED: _____
Supervisor

Department Head/Resident Director

Director/Designee



TRAVEL REQUEST

Dept/Unit/District: Soil & Crop Sciences Date: 9/22/2009 Request Number: _____

From: Sept 24, 2009 To: Sept 26, 2009

Travel Dates (including travel time)

Destination: From: College Station, Tx To: Leon, Mexico District: _____
City State (AgriLife Extension)

Counties Visited (if applicable)*: _____

* County required for out of state travel

Purpose of Travel: To meet with Sweet Sorghum producers

ADDITIONAL TRIPS LISTED ON BACK OF FORM

MODE OF TRANSPORTATION:

Private Auto _____ Accompanying Another Party*
 Official Auto _____ Accompanied by* _____
 University Plane Commercial Transportation (Includes Rental Car)

*Explanation required for two or more employees attending the same or similar duties: _____

EXPENSE TO BE CHARGED TO:

Account Name: NO CHARGE Account No: _____

Estimated Expenses: \$ _____ Project No/Support Account: _____

Name: William L Rooney UIN [REDACTED]
Print or Type

Signature: [Handwritten Signature] Title: Professor

RECOMMENDED: _____
Supervisor

APPROVED: _____
Department Head/Resident Director

APPROVED: _____
Director/Designee