

**School Board**

**Exhibit - Board Member Estimated Expense Approval Form**

*Submit to the Superintendent, who will include this request in the monthly list of bills presented to the School Board. Use of this form is required by 2:125-E3, Resolution to Regulate Expense Reimbursements. Please print.*

Name: \_\_\_\_\_ Title/Office: \_\_\_\_\_

Travel Destination: \_\_\_\_\_ Purpose: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

**Estimated Expenses Approval Requested** (50 ILCS 150/20)

**Purchase Order Requested** Purchase Order #: \_\_\_\_\_

**Expense Advancement Voucher Requested** (105 ILCS 5/10-22.32)

Voucher Amount: \_\_\_\_\_

Estimated Expense Report										
Auto Travel Allowance: _____ per mile										
Date	Mileage		Comm. Travel Expense	Lodging	Meals			Other	Cost	Daily Total
	Miles	Cost			Bkfst	Lunch	Dinner			
<b>Total</b>										\$

\_\_\_\_\_  
Submitting Board Member's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent Signature

\_\_\_\_\_  
Date

School Board Action:  **Approved**  **Denied**  
 **Approved in Part**  **Exceeds Maximum Allowable Amount**