## **Executive Board Governance and Operations**

## **Exhibit - Board Member Expense Reimbursement Form**

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

Name:							Title/Office:				
Travel Destination:							P	Purpose:			
Departure Date:							R	Return Date:			
Receipts attached							Request Date:				
			es attached required for					Member Estima	ited Exper	ise Approvo	
		_	e advancei imated Exp	,	,		hed, if a	pplicable* (Co	mpleted 2	:125-E2,	
				Actu	al Exp	ense R	eport				
refund a For fede estimate	ny expen ral and S d expens	se advar State gra es as per	ncement that nts, board mo mitted by Bo	exceeds the embers will ard policy 2	actual be rein	and nec	essary exp for actual	t exceed the amountenses incurred. 10: and necessary expansation; Expens	5 ILCS 5/10- enses that ex	-22.32.	
71000 110	avel Allowance: per mile  Mileage Trans.			Meals are per diem		Other		Daily			
Date	Miles	_	Expenses	Lodging				Item	Cost	Total	
Subtotal											
Advances									-		
TOTAL (a negative amount indicates refund due from Board member)									\$		

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Submitting Boar	d Member's Signature	Date
Superintendent S	Signature	Date
School Board A	Approved in Part	☐ Denied ☐ Exceeds Maximum Allowable Amount e (if applicable):
Comments:		
DATE:	November 2016	
REVIEWED:	May 2020; October 24, 2024	

REVISED:

May 2020

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