

# North Boone

## Community Unit School District 200

6248 North Boone School Road, Poplar Grove, IL 61065  
815-765-3322 ~ Fax 815-765-2053 ~ [www.nbcusd.org](http://www.nbcusd.org)

### General Personnel

#### Exhibit - Employee Estimated Expense Approval Form

*Submit to the Superintendent. Use of this form is required by 2:125-E3, Resolution to Regulate Expense Reimbursements. Please print.*

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

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

**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: \_\_\_\_\_

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

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**Superintendent** (*below maximum allowable amount*):

**Approved**                       **Denied**  
 **Approved in Part**

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

\_\_\_\_\_  
Date

**School Board Action** (*exceeds maximum allowable amount*):

**Approved**                       **Denied**  
 **Approved in Part**