## **Board Member Compensation; Expenses**

## 2:125-E2 Exhibit - Board Member Estimated Expense Approval Form

Submit to the Executive Director, who will include this request in the monthly list of bills presented to the Board. Use of this form is required: (1) by 2:125-E3, Resolution to Regulate Expense Reimbursements, and (2) for pre-approval of expenses to be charged to a federal grant or State grant governed by the Grant Accountability and Transparency Act. Please print.

Name: _	lame: Title/Office:										
Travel De	I Destination: Purpose:										
Departur	e Date: _			R	Return Date:						
□Estim	ated Exp	enses Ap	oproval Requ	ested (50 IL	CS 150	/20 or gr	ant expe	nditure	)		
🗆 Trave	el is grant	t-related*	(specify grant	):							
□Purch	ase Orde	er Reque	sted								
Purchase	e Order <b>#</b> :	·									
Exper	nse Adva	ncement	Voucher Ree	quested (10	5 ILCS	5/10-22.	32)				
Voucher	Amount: _										
Estimated Expense Report											
* <b>Grant-</b> reimbur at or be	<b>related tr</b> sement/p	<b>avel only</b> per diem is oplicable i	r: Except for m s only allowed rate cannot be	nileage and official	other tra travel s	nsportat tatus for	12 hours	s or mo	ore. If Ic	dging	
Date		1ileage Cost	Transp. Expenses	Lodging	Meals or Per D Bkfst Lunch Di			Other Item Cost		Daily Total	
2:125-E2											

	ļ			1						
Total										\$
Submitting Board Member's Signature Date										
Executive Director Signature Date										
School Board Action:										
□ Approved □ Denied										
Approved in Part Exceeds Maximum Allowable Amount Grant Funding Source (if applicable):										
DATED	: August 2	1, 2024								

Proviso Area for Exceptional Children (P.A.E.C.)