



LIBERTYVILLE SCHOOL DISTRICT #70

1381 West Lake Street
Libertyville, IL 60048
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d70schools.org

BOARD MEMBER ESTIMATED EXPENSE APPROVAL FORM

Make a copy of this form to fill out and save to your Google Drive: file > make a copy

Please type form, sign and staple supporting documentation.

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.

Travel from 1/1/24-current = \$0.67 per mile

Name **Brian Lawton**

Title/Office **Board Member**

Name of conference/meeting **ED-RED Advocacy Day**

Date(s) of conference/meeting **4/10/24**

Location **Springfield, IL**

Travel Departure Date **4/9/24**

Travel Return Date **4/10/24**

ESTIMATED EXPENSES

Auto Travel Allowance: \$0.670 per mile

DATE	MILEAGE		LODGING	MEALS			OTHER		DAILY TOTAL
	# OF MILES	AUTO FILLED AMOUNT		BREAKFAST	LUNCH	DINNER	ITEM	COST	
4/9/24	221.0	\$ 148.07							\$ 148.07
4/9/24		\$ -	\$ 147.06						\$ 147.06
4/10/24	221.0	\$ 148.07							\$ 148.07
		\$ -							
		\$ -							
		\$ -							
		\$ -							
		\$ -							
Grand Total:								\$	443.20

Brian Lawton

04/12/24

Submitting Board Member's Signature

Date

Superintendent Signature (if total is below maximum allowable amount)

Date

School Board Action (if total exceeds maximum allowable amount)

FALSE

Approved in full

FALSE

Approved in Part

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Denied