2020 EXPENSE STATEMENT*

The following expenses were incurred by the undersigned, in connection with services performed on behalf of the Indiana School Boards Association, One North Capitol Ave., Suite 1215, Indianapolis, IN 46204.

Date of Service: __________________________________________________________

Payable to: ______________________________________________________________

Address: ________________________________________________________________

Reason: _________________________________________________________________

Transportation:

Mileage __________ miles at $.575 per mile*** ______________

Plane, train, or bus - (attach receipt) ______________

Hotel/motel charges: ______________

Meals: ______________

Miscellaneous: (includes tips, parking, telephone, etc.)

_________________________________ ______________

_________________________________ ______________

TOTAL: $____________

I hereby certify that the above Expense Statement is correct and just, and that payment therefor has not been received.

_____________________________________

Claimant’s Signature

*All claims for reimbursement of expenses incurred in 2020 must be submitted by December 31, 2020

***When choosing to drive rather than fly, mileage reimbursement will not exceed cost of round trip airfare.

Note: The IRS mileage rate for 2020 is 57.5 cents.

4/7/2020