

OFFICE
 Northern Illinois Synod
 Evangelical Lutheran Church in America
 103 W. State St., Rockford, IL 61101-1105
 (815) 964-9934

Name: _____
 Address: _____

 (City) (State) (Zip)

Auto Miles _____ at 55¢ per mile: \$ _____
 Tolls or Parking Fees: \$ _____
 Meals or Food: \$ _____
 Lodging: \$ _____
 Other (must specify) _____: \$ _____
 Total Expenses: \$ _____

- Reimburse for above, or
- Approve and return form to verify deductible contribution
 - **(Please note:** If using this voucher as verification of an income tax deduction, per the IRS you may claim only 14¢ per mile as a charitable contribution. Therefore, change the 44.5¢ figure above to 14¢ per mile before calculating your expense.)

 (Sub-Committee or Task Force) (Place of meeting) (Date)

I certify the above to be true and correct _____
 (Signature of Individual Payee)

Receipts must be attached for expenses other than mileage totaling more than \$20.00.

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| <ul style="list-style-type: none"> ___ 175-60020 Equipment – Computers, etc. ___ 175-60023 Equipment Maintenance ___ 175-60025 Equipment – Labor ___ 175-60027 Furniture ___ 175-60205 R.I. – Equipment ___ 175-60210 R.I. – Equipment Maintenance ___ 200-60010 Occupancy Exp. – Rockford ___ 200-60020 Occupancy Exp – R.I. ___ 250-60010 Bank Charges & Other Fees ___ 250-60029 Internet ___ 250-60030 Office Supplies ___ 250-60040 Postage ___ 250-60050 Printing ___ 250-60060 Subscriptions & Dues | <ul style="list-style-type: none"> ___ 250-60070 Telephone ___ 250-60072 Telephone – Electronic Network ___ 250-60230 R.I. – Office Supplies ___ 250-60240 R.I. – Postage ___ 250-60250 R.I. – Printing ___ 250-60270 R.I. – Telephone ___ 400-60030 Continuing Ed - Bishop & Assistants ___ 400-60220 Continuing Ed - Support Staff ___ 500-60020 Consultation Team Expense ___ 500-60030 Interest Expense ___ 500-60040 Loss on Disposition of Sale ___ 500-60050 Miscellaneous Expense ___ 500-60060 Moving Expense |
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