

# EVANS COUNTY BOARD OF EDUCATION - EMPLOYEE EXPENSE STATEMENT

TRAVEL EXPENSE STATEMENT EFFECTIVE JANUARY 1, 2023

THE EXPENSE STATEMENT BELOW CAN BE COMPLETED FOR ONE TRIP ONLY. PLEASE COMPLETE A SEPARATE EXPENSE STATEMENT FOR EACH TRIP TRAVELLED.																																																										
Pers Info	Name of Employee		Martin G. Waters		ONLY THE GRAY AREAS MUST BE FILLED IN.																																																					
	Physical Home Address, City and State		318 Nevils-Denmark Road, Nevils, GA 31321																																																							
Trip Info	How far do you commute to work each day (one way not round trip)?			13		What is your Work Location?		BOE																																																		
	THE AGENDA FROM YOUR MEETING/CONFERENCE MUST BE ATTACHED. WHAT MEETING/CONFERENCE DID YOU ATTEND?			Georgia Charter Foundation BOD																																																						
Trip Info	What city and state was your conference held?			Atlanta, GA		Did you drive?		YES																																																		
	What date did you depart on your trip?			9/12/2023		What day did you return from your trip?		9/13/2023																																																		
Trip Info	Did you depart from your home or work location?			WORK HEADQUARTERS		Did you return to your home or work location?		WORK HEADQUARTERS																																																		
	PLEASE NOTE THAT YOUR COMMUTE MILEAGE IS SUBTRACTED FROM YOUR TOTAL MILEAGE. THE STATE OF GA DOES NOT REIMBURSE FOR NORMAL COMMUTING MILES.																																																									
Mileage Reimb	What was your Odometer Reading on your vehicle when you first departed on your trip?			35200		What was your Odometer Reading on your vehicle when you returned from your trip?		35625																																																		
	In detail, type your "depart from" and "return to" locations including points visited on trip. (for ex., Home to GDOE in Atlanta back to BOE)			Work to 450 Northridge Pkwy, Atlanta, GA 30350, US; return		Did you drive an automobile or motorcycle?		AUTOMOBILE = \$.655/MILE																																																		
Mileage Reimb	Was this an overnight trip?		YES		If yes, did you room with anyone?		NO		Did you pay the lodging fee?																																																	
									YES																																																	
Lodging Information	Note: Most overnight trips must exceed 50 miles from your home or work headqtrs AND must require you to be away longer than 12 hrs in 1 day.																																																									
	If you did not stay overnight, then did your travel time plus meeting/conference require you to be away for more than 12 hours in one day? If you answer yes, please make sure that you complete the meal section below.																																																									
Lodging Information	Do you have a copy of your lodging receipt to attach to your printed expense statement?		YES - ATTACH		Who did you room with at the conference?		Please indicate how many nights you stayed overnight		1																																																	
	Where did you lodge (please specify hotel name and city/state)?		Doubletree 1075 Holcomb Bridge Road Roswell, GA 30076		Did you book your lodging through a website, such as Priceline, Travelocity, Expedia, ...?																																																					
Lodging Information	How much did the lodging cost you per night? (This amt should include the daily rate plus any taxes charged. Please do not include incidental charges, such as rm serv, movies or parking fees. If the hotel refused to waive the hotel/motel tax, then the BOE can reimb this tax to you.)		Pd via BOE Credit Card		IMPORTANT NOTE ABOUT BOOKING LODGING THROUGH A WEBSITE: If you booked through a website, please make sure you obtain an actual receipt from the hotel to serve as proof that you stayed overnight. A confirmation of your reservation via email from the website is not adequate documentation to support reimbursement.																																																					
	If you paid your own registration or miscellaneous fee (such as bus fuel), please input amount paid.																																																									
Misc	NOTE: You must attach to the exp stmt. the miscellaneous receipt, registration receipt OR copy of your cancelled check/credit card stmt showing the pmt.																																																									
	Please select travel status from dropdown list in gray box on the right.																																																									
Misc	Please select travel status from dropdown list in gray box on the right.																																																									
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Meals and Employee Signature	<p><b>PARKING FEES OR TOLLS:</b> If you paid parking, please input the amt spent below &amp; attach a detailed receipt to the exp stmt. (No receipt means no reimbursement). Fill in the space below.</p> <p><b>MEALS:</b> Please indicate in the section below which meals were provided AND were not provided by the conference/hotel. You must select PROV BY HOTEL/CONF or NOT PROV BY HOTEL/CONF on ALL meals on ALL days of travel. State travel regs require you to choose either PROV BY or NOT PROV BY on ALL meals. Meal per diem will be paid at the rate of \$13.00 for Breakfast, \$14.00 for Lunch, and \$23.00 for Dinner with the exception of travel days. Meal per diem will be paid at the rate of \$9.75 for Breakfast, \$10.50 for Lunch, and \$17.25 for Dinner on travel days. Meal receipts are NOT required. Also, non-overnight trips, if less than 12 hrs in duration, are not reimbursed for meals.</p>																																																									
	<table border="1"> <thead> <tr> <th>DATE</th> <th>BREAKFAST</th> <th>AMOUNT</th> <th>LUNCH</th> <th>AMOUNT</th> <th>DINNER</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>DAY 1</td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$9.75</td> <td>NOT PROV BY</td> <td>\$10.50</td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$17.25</td> </tr> <tr> <td>DAY 2</td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$9.75</td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>NOT PROV BY CONF/HOTEL</td> <td>\$17.25</td> </tr> <tr> <td>DAY 3</td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> </tr> <tr> <td>DAY 4</td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> </tr> <tr> <td>DAY 5</td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> <td>PROV BY CONF/HOTEL</td> <td></td> </tr> <tr> <td>TOTAL</td> <td></td> <td>\$19.50</td> <td></td> <td>\$10.50</td> <td></td> <td>\$34.50</td> </tr> </tbody> </table>										DATE	BREAKFAST	AMOUNT	LUNCH	AMOUNT	DINNER	AMOUNT	DAY 1	NOT PROV BY CONF/HOTEL	\$9.75	NOT PROV BY	\$10.50	NOT PROV BY CONF/HOTEL	\$17.25	DAY 2	NOT PROV BY CONF/HOTEL	\$9.75	PROV BY CONF/HOTEL		NOT PROV BY CONF/HOTEL	\$17.25	DAY 3	PROV BY CONF/HOTEL		PROV BY CONF/HOTEL		PROV BY CONF/HOTEL		DAY 4	PROV BY CONF/HOTEL		PROV BY CONF/HOTEL		PROV BY CONF/HOTEL		DAY 5	PROV BY CONF/HOTEL		PROV BY CONF/HOTEL		PROV BY CONF/HOTEL		TOTAL		\$19.50		\$10.50	
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Reimb Totals and Approvals	TOTAL MILEAGE REIMBURSEMENT		TOTAL LODGING FEES		TOTAL MEAL PER DIEM		TOTAL REGIS OR MISC FEES		TOTAL																																																	
	\$278.38		HOW MUCH PER NIGHT?		\$64.50		\$0.00		\$342.88																																																	
This section below is for Accounting Purposes and Approval Purposes Only. This section below must be manually entered.																																																										
ACCOUNT NO. ASSIGNED BY PRINCIPAL OR PROGRAM DIRECTOR: 100-5-9990-2300-580-8010																																																										
ACCOUNT NO. ASSIGNED BY PRINCIPAL OR PROGRAM DIRECTOR:																																																										
Principal's Approving Signature & Date																																																										
Program Dir Sign & Date																																																										
Financ Director Sign & Date																																																										
Superintendent's Approval																																																										



1075 Holcomb Bridge Road • Roswell, GA 30076  
Phone (770) 992-9600 • Fax (770) 993-6539  
Reservations  
www.doubletree.com or 1 800 222 TREE

Name & Address

WATERS, MARTIN G.  
705 W MAIN ST  
CLAXTON GA 30417-1715  
UNITED STATES OF AMERICA

Room 507/NK1  
Arrival Date 9/12/2023 8:28:00 PM  
Departure Date 9/13/2023

Adult/Child 1/0  
Room Rate 155.00

Rate Plan: LVO  
HH # 1600457236 BLUE  
AL:  
Car:

Hilton

Confirmation Number: 5

9/13/2023

*paid via  
BOE credit  
card*

DATE	REFERENCE	DESCRIPTION	AMOUNT
9/12/2023	2947297	FANTA	\$5.00
9/12/2023	2947297	GIFT SHOP TAX	\$0.39
9/12/2023	2947469	GUEST ROOM	\$155.00
9/12/2023	2947469	STATE SALES TAX	\$12.01
9/12/2023	2947469	CITY OCCUPANCY TAX	\$12.40
9/12/2023	2947470	STATE OF GA HB 170 FEE	\$5.00
9/13/2023	2947604	VS REF=0000580481-00848560 CHIP 05 AID:A0000000031010 AID:A0000000031010 AID-NM:A0000000031010 AC:E5C47DE042C8A384 **BALANCE**	(\$189.80)       \$0.00

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 6,500+ hotels and resorts in 119 countries, please visit Honors.com

ACCOUNT NO. VS	
CARD MEMBER NAME WATERS, MARTIN G.	
ESTABLISHMENT NO. & LOCATION USE OF A DEBIT CARD/BANK CARD MAY RESULT IN AUTHORIZATION HOLDS, THAT COULD TAKE UP TO 5 BUSINESS DAYS FOR THE FINANCIAL INSTITUTION/BANK TO REMOVE FROM PROCESSING.	
CARD MEMBER'S SIGNATURE X	

DATE OF CHARGE 9/13/2023	FOLIO NO./CHECK NO.
AUTHORIZATION	INITIAL
PURCHASES & SERVICES	
TAXES	
TIPS & MISC.	
TOTAL AMOUNT	-189.80

PAYMENT DUE UPON RECEIPT • 1.5% PER MONTH INTEREST  
CHARGE WILL BE APPLIED TO ALL PAST DUE INVOICES

W  
WALDORF ASTORIA

L X R

CONRAD

canopy

Signia  
Hilton

Hilton

CURIO  
COLLECTION

DOUBLETREE

TAPESTRY  
COLLECTION

EMBASSY  
SUITES

TEMPO

MOTTO

Hilton  
Garden Inn

Hampton

tru

HOMEWOOD  
SUITES

HOME2  
SUITES

Hilton  
Grand Vacations

Hilton  
HONORS

# GUEST PARKING

HANG ON  
REARVIEW  
MIRROR FACING  
OUTWARD

HANG ON  
REARVIEW  
MIRROR FACING  
OUTWARD

paid  
via  
BOE  
Credit  
card

**DOUBLETREE ATLANTA ROSWELL**  
**OVERNIGHT GUEST PARKING PASS**  
DOUBLETREE by HILTON ATLANTA ROSWELL  
1075 Holcomb Bridge Rd | Roswell, GA 30076  
**\$7.00 CHARGE PER NIGHT + TAX**  
770.992.9600

CHECK-IN DATE	3984
CHECK-OUT DATE	



"Screw it, do it"

Peach Tax Credit



## Charter System Foundation Team & Board of Directors Meeting

Wednesday September 13, 2023

9:00 am - 2:00 pm

Fulton County North Learning Center  
450 Northridge Pkwy, Atlanta, GA 30350  
Room 106

9:00am - 10:15

### Welcome

Dan Weber, CSF Executive Director  
Michele Taylor, Board Chair

- Motte to accept new member

5 years

### Introductions

Board of Directors  
Foundation Staff

2 years into new  
CRIS

History of the Charter System Foundation - Dan Weber  
Membership - Spotlight on Districts - Dan Weber

• Beth in Matt

Yvonne • Heam in Evans

10:15 - 10:30 - Break

10:30 - 11:15 - SWOT Analysis - Michele Taylor and Team

Strengths of the Foundation  
Weaknesses / Challenges  
Opportunities for the Organization  
Threats to the Organization

180 districts  
23-24 → 51 New Super's

48 charter  
district

11:15 - 11:30 - Break

11:30 - 1:00 - Working Lunch and Staff Reports

Report from Flexibility and Governance Team  
Report from Career Development Team

1:00 - 2:00 - Strategic Planning-Short and Long-Range Goals for the Foundation

Goals for 2023-2024  
Future Goals

Career Development Team

Sean Allen

6:00 in John

Flexibility / Governance

Emily Lumbick  
Lynn Phibbs