

Jump River Electric Cooperative
 1102 W 9th Street North, PO Box 99
 Ladysmith WI 54848
 PH: 715-532-5524 FAX: 715-532-3065

Bob Boyd

MONTH/YR: 2022 Dec

EXPENSE STATEMENT

Director Name: Myron Brooks

Date	Description	Motel	Mileage	Mileage Amt	Parking	Meals/Tips	Per Diem	Other	TOTAL
12/27	Monthly Board Meeting		58	36 ²⁵			\$350.00		386 ²⁵
12/19	Agenda		58	36 ²⁵					36 ²⁵
Totals			116	72.50					422.50

20 21 22 23 24 25 26 27 28 29 30 31

Signature Myron Brooks

Number of Hours Spent During the Month Performing Director Duties:

*Mileage = \$.625/mile to Ladysmith

58 \$36.25

*Mileage = \$.625/mile to Hayward
 Account 5721

172 \$107.50

21

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[Handwritten signatures]

MONTH/YR: 11/2022

EXPENSE STATEMENT

Director Name: Joe Lorence

Date	Description	Motel	Mileage	Mileage Amt	Parking	Meals/Tips	Per Diem	Other	TOTAL
12/27	Monthly Board Meeting		24	\$15.00			\$325.00		340.00
Totals			24	\$15.00			\$325.00		\$340.00

Signature *Joe Lorence*

Number of Hours Spent During the Month Performing Director Duties:

*Mileage = \$.625/mile to Ladysmith

24 \$15.00

30

*Mileage = \$.625/mile to Hayward
 Account 5721

125 \$78.13

Bill Case

EXPENSE STATEMENT

Walter Kruk

Totals

Number of Hours Spent During the Month Performing Director Duties:

30

4	\$2.50
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~~BoD~~ ~~CAC~~

EXPENSE STATEMENT

Director Name: Jane Reich

Totals	
Game A	Reech
.625/mile to Ladysmith	

26

54	\$33.75
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14	\$8.75
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BoD
Chad

MONTH/YR: DEC
2022

EXPENSE STATEMENT

Director Name: Bill Amery

Date	Description	Motel	Mileage	Mileage Amt	Parking	Meals/Tips	Per Diem	Other	TOTAL
12/21	Monthly Board Meeting		111.0	69 ³⁸			\$300.00		369 ³⁸
Totals			111	69 ³⁸			300		369 ³⁸

Signature 

Number of Hours Spent During the Month Performing Director Duties:

*Mileage = \$.625/mile to Ladysmith

124.5 \$77.81

*Mileage = \$.625/mile to Hayward
Account 5721


52.4 \$32.75

76

Bred

MONTH/YR: December 2022

Director Name: Jerry Carow

Date	Description	Motel	Mileage	Mileage Amt	Parking	Meals/Tips	Per Diem	Other	TOTAL
12 27 2022	Monthly Board Meeting						\$300.00		300
<div>  Totals </div>							300		300

Signature _____

Number of Hours Spent During the Month Performing Director Duties:

40

*Mileage = \$.585/mile to Hayward
Account 5721

BoD
CNS

EXPENSE STATEMENT

Director Name: Sandy Schara

Totals	134	83.75				300.00		383.75

Number of Hours Spent During the Month Performing Director Duties:

134	\$83.75
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18	\$11.25
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25