

NORTHERN INDIANA PUBLIC SERVICE COMPANY - EMPLOYEE EXPENSE & REIMBURSEMENT AUTHORIZATION FORM
2022 District Employees, Non-PPS Generation, Clerical

Employee Name: _____

Job Number: _____

Employee ID # & District: _____

Job Classification: _____

Table with columns: Date, Account Number/Work Order, Charge to HRI, Meal Money \$16.23 Enter # of Meals (Taxable), HPIC Meals and Major Storm Meal Per Diem Enter \$ Amount (Taxable) (1), Personal Vehicle (Mileage Paid at IRS Standard \$0.585 - Non-Taxable) (2), Miles < 25 (Flat rate calculated at 25 miles of IRS standard \$14.63 - Taxable), Miles =>25 (Miles paid at IRS Standard \$0.585 - Non-Taxable), Misc. (Non-Taxable - Attached Receipt Required) (3), Total

Employee Signature: _____

Supervisor (Print Name): _____

Date: _____

Supervisor Signature: _____

Date: _____

(1) Per Article XVI, Section 7, 2022 HPIC Breakfast & Lunch - \$14.77, Dinner - \$16.23. Major & Severe Storm Meal Per Diem Amount per Federal Government Lake County M&IE rate - \$64.00

(2) Per Article XVI, Section 14, when employees are required by the company to operate their personal vehicle for any reason during periods when they receive their regular rate of pay on either straight or premium time shall be reimbursed for such operation at the maximum applicable government allowance, per mile.

(3) Examples of reimbursements per CBA, separate MOAs or Company policies (subject to maximum allowance):

- Maximum boot allowance is \$75.00 and one (1) Company reimbursement per year.
- Cell Phone reimbursement for Meter Readers.
- Negotiated tool reimbursement

Important Reminders:

- 1.) Form should be submitted no later than bi-weekly.
2.) This form is a Company report which is consistent with timesheets and payroll records and must be completed accurately. Failure to do so may result in corrective action up to and including termination.
3.) Please note, per the Internal Revenue Service (IRS), if expenses are not submitted within 60 days, the expense reimbursement may be categorized as supplemental wages and becomes taxable for federal, state, FICA, and Medicare; and withholding tax must be taken.

Form processed by: _____

Date: _____