

WILLARD CITY SCHOOL DISTRICT

MILEAGE REIMBURSEMENT FORM

Start at the first location in the morning and end at last location in the afternoon. Do not count mileage to and from places used for personal business (e.g. lunch, errands, etc.).

ACTUAL MILEAGE FOR REGULAR SCHEDULE:

| <u>DATE:</u> | <u>FROM:</u> | <u>TO:</u> | <u>MILEAGE:</u> |
|--------------|--------------|------------|-----------------|
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |
| _____ | _____ | _____ | _____miles |

TOTAL MILEAGE: _____

X \$ _____ PER MILE _____

TOTAL MILEAGE REIMBURSEMENT \$ _____

Employee _____ DATE _____

Supervisor _____ DATE _____

ACCOUNT NUMBER _____