

**MONTHLY MILEAGE & EXPENSE REPORT
EAST HOLMES LOCAL SCHOOLS**

SCHOOL _____

MONTH/YEAR _____

DATE	DESTINATION	MEETING ATTENDED/PROGRAM ACTIVITY	MILEAGE

OTHER EXPENSES: _____ TOTAL MILEAGE _____ @ \$.56 PER MILE _____

MEALS: _____ TOTAL OTHER EXPENSES _____

LODGING: _____ TOTAL AMOUNT DUE _____

FEES: _____ APPLICANT'S NAME (Please Print) _____

TOTAL: _____ APPLICANT'S SIGNATURE _____

APPROVED _____ APPROVED _____

Supervisor Superintendent

RETAIN ONE COPY AND SEND ONE COPY TO THE TREASURER'S OFFICE