

## MONTHLY MILEAGE & EXPENSE REPORT EAST HOLMES LOCAL SCHOOLS

SCHOOL \_\_\_\_\_

MONTH/YEAR \_\_\_\_\_

DATE	DESTINATION	MEETING ATTENDED/PROGRAM ACTIVITY	MILEAGE

OTHER EXPENSES:	TOTAL MILEAGE _____ @ \$.54 PER MILE _____
MEALS: _____	TOTAL OTHER EXPENSES _____
LODGING: _____	TOTAL AMOUNT DUE _____
FEES: _____	APPLICANT'S NAME (Please Print) _____
TOTAL: _____	APPLICANT'S SIGNATURE _____
APPROVED _____ Supervisor	APPROVED _____ Superintendent

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