

**MARGARETTA LOCAL SCHOOLS  
MILEAGE REIMBURSEMENT FORM**

DESTINATION					Person/Place Visited	
	Date	From	To	To	Miles	Reason for Trip
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
			⇒	<b>TOTALS</b>		X ⇒

**DIRECTIONS:**

1. All trips originate from Margarettta Schools (unless overnight).
2. If more than one trip is made on the same date, list each separately.
3. If a round trip is made, fill all three columns (ex. From Margarettta to Sandusky to Margarettta).
4. Write in total miles.
5. Give reason or place visited.
6. Fix signature on line below and submit to principal/supervisor.

\_\_\_\_\_  
Name of Person Submitting Report

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Signature of Person Submitting Report

\_\_\_\_\_  
Signature of Principal/Supervisor

\_\_\_\_\_  
Date Approved