MONTHLY MILEAGE REPORT FORM for travel after January 1, 2025

| Name | | Month | Month | | |
|------------------------------------|----------------|------------|-------|-----------|---------|
| Date | Destination | In Dist. N | Miles | Out Dist. | . Miles |
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| | | | | | |
| Total Miles Dr | iven | | 0 | | 0 |
| | | | U | | 0 |
| Total Miles Dr | riven at Rate | \$ | 0.445 | \$ | 0.700 |
| Totals | | \$ | - | \$ | - |
| Mileage Rein | nbursement Due | | | | 0 |
| Employee Sig | nature | | | Date | |
| Employee Signature | | | | Date | |
| Superintendent/Supervisor Approval | | | | Date | |
| Charge to Acc | count | | | | |
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