



MILEAGE & EXPENSE CLAIM

I certify that this is a true and accurate statement of expenses incurred in the conduct of official school business by:

Signature Date

Print Name: _____

EXPENSES

Date	Expense	Amount	Date	Expense	Amount

TOTAL EXPENSES _____

MILEAGE

Date	From	To	Miles	Explanation	Date	From	To	Miles	Explanation

TOTAL MILES _____

Standard Mileage (nearest 1/2 mile)
 LES to LMS/LHS 2.5
 LES to LECC 5.5
 LMS/LHS to LECC 3.5

General Fund # _____

or

Activity Account # _____

BUILDING ADMINISTRATOR'S APPROVAL