Bristol Warren Regional School District
MILEAGE REIMBURSEMENT FORM

Employee: ______________________________ Month of Travel: __________

Date Submitted:_________________________ Building: __________________

Line # ____

Mileage Rate $0.560

DATE	FROM	DESTINATION TO	Miles	Cost

Parking $

Total DUE $0.00

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Employee Signature

Current Mileage Rate .56 cents per mile

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Supervisor approval

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director of administration approval