

# PERSONAL VEHICLE FOR SCHOOL BUSINESS REIMBURSEMENT FORM

To: Accounts Payable Department Date: \_\_\_\_\_

From: \_\_\_\_\_ School/Dept: \_\_\_\_\_

Request Payment of \$ \_\_\_\_\_ For The Month Of \_\_\_\_\_

Employee Requesting Reimbursement Signature: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

For personal vehicle mileage reimbursement at 58.5 cents per mile effective March 19, 2008, in the performance of school business as follows:

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\_\_\_\_\_ Miles at 58.5 cents per mile \$ \_\_\_\_\_

- Account Code \_\_\_\_\_
- Account Code \_\_\_\_\_
- Account Code \_\_\_\_\_
- Account Code \_\_\_\_\_
- Account Code \_\_\_\_\_

**Mileage must be calculated from your school/building/place of business to the destination.**

*In other words, if you live north of Burlington, normally traveling to Burlington to work and need to drive to Montpelier – you will not be reimbursed for the mileage from home to Burlington, as that is your normal travel to work.*

**Important, please fill out the reverse side Mileage Form with dates, to, from, and mileage. Forward to Accounts Payable Office for payment.**



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Mileage Chart

	Admin	Barnes	BHS	Champlain	Edmunds	Flynn	Hunt	Smith	Taft
Barnes	1.5								
BHS	3	1.5							
Champlain	2.5	2	3.5						
Edmunds	1	1	2.5	1.5					
Flynn	5	4	2	6	4.5				
Hunt	4.5	3.5	1.5	5.5	4	0.5			
Smith	4.5	3.5	1.5	5.5	4	1	0.5		
Taft	0.5	1	2.5	2	0.5	4.5	4	4	
Wheeler	1.5	0.5	1.5	2.5	1	4	3.5	3.5	1
Prop Serv	2.5	2	3.5	0.5	1.5	6	5.5	5.5	2
ICS	3								
Panurgy	4								
Staples	1								