NCKSEC INTERLOCAL #636
P.O. Box 369, Phillipsburg, KS 67661
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EMPLOYEE MILEAGE REPORT

Due on the FIRST of each month

If you are using the built-in calculations, you must start on the first line of each section and not skip lines within a section for it to calculate properly.

NAME:_____ _____

Date:	Itinerant Staff Traveled to:	Reason for Going:	Actual Miles Traveled:
		TOTAL REGULAR:	

MILEAGE for Conferences, Inservices, Dept. Meetings, Workshops, Etc:

Date:	Traveled to:	Carpooling? (If yes, check)	Reason for Going:	Actual Miles Traveled:
		☐		
		☐		
		☐		
		☐		
		☐		

Click here when finished (allows numbers to compute properly)

Regular Miles		.50	
Inservice Miles		.50	
Total Miles		.50	

Director Approval _____