



35 East Avenue Arkport, New York 14807-0070 Phone: 607-295-7471 FAX: 607-295-7473 http://www.arkportcsd.org

REIMBURSEMENT FOR SCHOOL USE OF PERSONAL CAR

Date:	Destination:
Purpose of Trip:	
Number of Passengers:	
* If a Workshop	
Date of Workshop:	
Name of Workshop:	
Building Where Workshop was held:	
Address of Workshop:	
	Signature
Speedometer Reading – End of Trip:	
Speedometer Reading _ Start of Trip:	
Total Mileage:	
Allowance per Mile:	40
Total Reimbursement:	
Approved for Payment:	Superintendent
	Supermiendent