

SOUTH WINDSOR BOARD OF EDUCATION MILEAGE REIMBURSEMENT REQUEST FORM –2019

Name: _____ Vendor Number: _____

DATE	SCHOOL STARTING POINT AND DESTINATION	MILEAGE*

***Refer to standard mileage schedule on the back of this form.**

TOTAL Mileage: _____

Travel at 58¢/mile: \$ _____

Please attach receipts for parking and toll charges

Parking: \$ _____

Tolls: \$ _____

TOTAL Reimbursement: \$ _____

_____10081110-0580 Admin Mileage-Reimbursable

_____10081147-0580 SW Staff Mileage-Reimbursable

I certify that the above is a true statement, the expenses claimed were incurred by me on official district business on the dates shown, that I have attached original receipts as applicable. I further certify that I maintain the minimum liability insurance amounts required by the State of Connecticut if using my personal vehicle for business related purpose.

SIGNATURE: _____ APPROVED BY: _____

PLEASE FORWARD TO ACCOUNTING SERVICES ON A MONTHLY BASIS.

SOUTH WINDSOR PUBLIC SCHOOLS
Mileage Between Schools

	WEBSTER BANK	ELLS	ET	SWHS	OH	PRS	PV	TEMS	TOWN HALL	WAPPING	UNITED BANK Sullivan Ave	UNITED BANK Ellington Rd
WEBSTER		5.0	3.5	1.5	2.5	2.5	3.0	2.5	0.5	2.0	2.0	0.5
ELLSWORTH	5.0		3.5	3.5	5.5	5.5	4.5	6.0	4.0	3.0	2.5	4.5
ELI TERRY	3.5	3.5		2.5	4.0	4.0	5.5	4.5	3.0	2.0	2.5	3.5
HIGH SCHOOL	1.5	3.5	2.5		2.5	2.5	4.0	2.5	1.5	0.5	1.5	2.0
ORCHARD HILL	2.5	5.5	4.0	2.5		0.5	5.0	0.5	2.5	2.5	4.0	2.5
PHILIP R. SMITH	2.5	5.5	4.0	2.5	0.5		5.0	0.5	2.5	2.5	4.0	2.5
PLEASANT VALLEY	3.0	4.5	5.5	4.0	5.0	5.0		5.5	3.0	4.0	5.0	3.0
TIMOTHY EDWARDS	2.5	6.0	4.5	2.5	0.5	0.5	5.5		2.5	3.0	4.0	2.5
TOWN HALL	0.5	4.0	3.0	1.5	2.5	2.5	3.0	2.5		1.5	2.0	0.5
WAPPING	2.0	3.0	2.0	0.5	2.5	2.5	4.0	3.0	1.5		1.0	2.0
UNITED BANK SULLIVAN AVE	2.0	2.5	2.5	1.5	4.0	4.0	5.0	4.0	2.0	1.0		2.5
UNITED BANK ELLINGTON RD	0.5	4.5	3.5	2.0	2.5	2.5	3.0	2.5	0.5	2.0	2.5	

All mileage is rounded to nearest half-mile.