

Hastings Public Schools Mileage Claim

This form is due in the business office by the fourth working day of the month for the previous month's mileage. Form must be completed by the day. Mileage will be paid at the conclusion of each semester.

Name:_____Position:_____Month:_____

Date	From-To	Miles

Total Miles Claimed: _____

@_____per mile= _____

Staff Member Signature

Director of Finance Signature