

Inver Grove Heights Community Schools
Independent School District 199
2990 - 80th Street East
Inver Grove Heights, MN 55076-3235

Employee Number _____

MILEAGE REPORT
Please complete entire form

Make check payable to (please include address):

Date: _____

Mileage request for the month of: _____

					Other Expenses	
Date	From	To	Activity	Miles	Item	Amount
Totals						

Total mileage..... _____ **x rate \$.575 = \$** _____
Total expenses..... _____ **\$** _____
Grand total this month..... _____ **\$** _____

*Employee's Signature*_____
*Supervisor's Signature*_____
(Account Number)

\$ _____

*(Amount)*_____
*(Invoice #)*_____
(Account Number)

\$ _____

*(Amount)*_____
*(Invoice #)*_____
(Account Number)

\$ _____

*(Amount)*_____
(Invoice #)

Mileage between schools/TIES:							
HT to DO	1.5	HT to SH	2.9	SH to DO	3.0	DO to TIES	17
HT to PB	4.3	SH to PB	5.6	PB to DO	3.3	DO to MDE	18.6

Mileage reimbursement: as of January 1, 2015=\$.575/mile (January 1, 2014 – December 31, 2014) was .56/mile)