

District Expense Report

Wyoming City Schools

Employee Name: _____

I hereby certify the foregoing mileage to be true and that actual expenses occurred on school district business.

Employee Signature: _____

Date: _____

Date	Meeting	From	To	Miles	Reimbursement per mile	\$ Parking (Attach Receipts)	\$ Total
TOTALS							

Notation: Any miles driven in your personal vehicle after January 1, 2019, will be reimbursed at \$0.58 per mile.

Revised 1/2/2019