

## Fairbanks North Star Borough School District In-District Mileage Report

Employee F#	Location
Name - Last, First	MI
Account Number	Month/Year

**\*\*Mileage Report must be submitted by the 10th working day following the end of the month for which the reimbursement is required. See negotiated agreements/board policy. \*\***

Day	Locations Visited	Mileage	Day	Locations Visited	Mileage
1			17		
2			18		
3			19		
4			20		
5			21		
6			22		
7			23		
8			24		
9			25		
10			26		
11			27		
12			28		
13			29		
14			30		
15			31		
16			<b>TOTAL MILES</b>		

\_\_\_\_\_

Employee Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Supervisors Signature

\_\_\_\_\_

Date

Total Miles \_\_\_\_\_