Plainview - Old Bethpage Central School District

Mileage Reimbursement For The Month of _____ 2023

BUDGET C	ODE:		VENDOR #:					
DATE	FROM	то	REASON FOR TRIP		MILEAGE			
This is to ce	rtify that the above claim, amou	TOTAL MILES						
	same; that the items are correc	RATE PER MILE	0.655					
made on account thereof, except as included or refunded to in such amount or claim. Dated AMT OF CLAIM								
Signature			Approved for Payment					
Print Name			Date					

SEE REVERSE SIDE FOR INSTRUCTIONS

Plainview–Old Bethpage CSD Intra-District Mileage BUDGET CODE: 2110-431-00

	JFK HS	MATTLIN MS/ ADMIN	POBMS	PASADENA	JUDY JACOBS PARKWAY	OLD BETHPAGE	STRATFORD RD
JFK HS	N/A	.4 miles	1.5 miles	2.1 miles	1.9 miles	2.3 miles	3 miles
MATTLIN MS/ADMIN	.4 miles	N/A	1.1 miles	1.7 miles	1.5 miles	1.9 miles	2.6 miles
POBMS	1.5 miles	1.1 miles	N/A	1.2 miles	1 mile	2.5 miles	1.3 miles
PASADENA	2.1 miles	1.7 miles	1.2 miles	N/A	2.7 miles	2.8 miles	1.1 miles
JUDY JACOBS PARKWAY	1.9 miles	1.5 miles	1 mile	2.7 miles	N/A	3.3 miles	2 miles
OLD BETHPAGE	2.3 miles	1.9 miles	2.5 miles	2.8 miles	3.3 miles	N/A	5.4 miles
STRATFORD RD	3 miles	2.6 miles	1.3 miles	1.1 miles	2 miles	5.4 miles	N/A

Instructions for Completing Mileage Reimbursement Form

Employees must use the Intra-district mileage above when travelling from school to school.

All requests must provide a valid budget code. (See above for intra-district mileage)

All requests must be approved by a supervisor prior to submission.

Reimbursement requests must be submitted on a timely basis. Employees who travel from school to school on a regular basis

must submit their reimbursement request monthly.

All requests must be submitted to the Business Office by July 15 for the previous school year.

All requests for mileage other than school to school must submit MapQuest or Google Maps to document the mileage.

This form is NOT to be used for mileage reimbursement for conferences. Those expenses should be listed in My Learning Plan.