

HAMDEN PUBLIC SCHOOLS

**MILEAGE REIMBURSEMENT  
23-24**

Name: \_\_\_\_\_ Dept: \_\_\_\_\_

School: \_\_\_\_\_

**PLEASE SUBMIT THIS FORM BY THE LAST DAY OF SCHOOL -JUNE 11,  
2024.**

DATE	FROM	TO	# OF MILES

Mileage JULY 1, 2023 - DEC. 31,2023 \_\_\_\_\_ @ .655/mile = \_\_\_\_\_  
Mileage JAN. 1, 2024 – JUNE 30,2024 \_\_\_\_\_ @ TBD = \_\_\_\_\_  
Total Amount of Reimbursement \$ \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_