**Return to Mary Jo Cussatt**

**HAZLETON AREA SCHOOL DISTRICT**

**TRAVEL EXPENSE FORM**

Building \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Month \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Budget Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 DATE FROM TO MILES REASON

 **TOTAL MILES** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **@ $ 0.54** **PER Mile = $** \_\_\_\_\_\_\_\_\_\_\_\_

I certify that the above expenses were actually incurred in the fulfillment of my duties to the

Hazleton Area School District. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Employee

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ Signature of Immediate Supervisor