



MILEAGE REIMBURSEMENT
MARLBOROUGH PUBLIC SCHOOLS
25 Union Street
Marlborough, MA 01752

REIMBURSEMENTS WILL BE MADE ONLY FOR MUNICIPAL BUSINESS

NAME:

ADDRESS

DATE:

DEPARTMENT:

EXPENSE PERIOD:

Date	Time	Start Location	Stop Location	Begin Mileage	Stop Mileage	# of Miles	Whom Seen	Purpose

Account Number: _____

Vendor #: _____

Employee Signature: _____

Department Head Signature: _____

Total # of Miles

Mileage Reimbursement Rate

Amount of Mileage Reimbursement

Additional Travel Expenses(Tolls, Parking, Etc.

receipts required)

Total Reimbursement: _____

Below are the approved mileage distances between MPS school buildings. Please use these distances for employee mileage reimbursement purposes.

FROM	TO								
	Mileage Grid	MHS	Whitcomb	Goodnow	Richer	Kane	Jaworek	Hildreth	ECC
	MHS		0.8	0.1	3.4	2.8	1.7	1.5	1.3
	Whitcomb	0.8		0.6	2.9	2.4	1.8	1.1	0.8
	Goodnow	0.1	0.6		3.2	2.9	1.9	1.7	1.2
	Richer	3.3	2.9	3.2		4.4	4.2	2.9	2.8
	Kane	3.1	2.6	2.9	4.9		2.3	1.6	2.0
	Jaworek	2.5	1.8	2.3	4.2	2.3		1.7	1.9
	Hildreth	1.8	1.1	1.7	3.0	1.6	1.7		0.7
	ECC	1.4	0.9	1.2	2.5	1.9	2.0	0.7	