

Town Board Member/Employee's Name: Address: Phone Number:

## Mileage Record

Date	Destination	Purpose	Starting Odometer	Ending Odometer	Total miles

Total Miles	
Multiply by Rate per Mile (2019 rate)	0.58
Total amount due for mileage - add to total below	

## Expense Record

Date	Description	Please include the necessary receipts when submitting this request	Amount

Town Board Approval:	Expenses	
	Mileage costs	+
	<b>Total Expenses</b>	