

School District 145 - Waverly PO Box 426 Waverly, Nebraska 68462

CLAIM FOR MILEAGE REIMBURSEMENT

Date	Comments
Name	
Address	
City, State, Zip	
Account #	Balance Due

Date of Travel	Purpose	From	То	Mileage

Total Miles _____

Amount Claimed at .67¢/mi

I hereby certify that the above expenses were actually incurred by me in the performance of my duties to School District 145, and I declare and affirm under the penalties of perjury that this claim has been examined by me, and the best of my knowledge and belief, is in all things true and correct.

Signature of Claimant	Date	Title	Date
Principal Signature	Date	Business Manager Signature	Date
			2024 Mileage Rate

2024 Mileage Rates Updated 1/23/2024