

**MONTHLY TIME TRAVEL REPORT
MADISON BOARD OF EDUCATION**

Madison Local Schools
1379 Grace Street, Mansfield, Ohio 44905

Month _____ 20__

Please file in the Treasurer's office by the 1st of each month.

Day of Month	Day of Week	List of activities to carry out your work, meetings attended, purpose of trips and other program activities	Person or Place Visited	Total Mileage
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

Total Miles 0

Signature _____

Mileage Rate \$0.625

Approved by
Principal/Supervisor _____

Reimbursable Amount \$0.00

PO # _____