

## ONOTA TOWNSHIP EMPLOYEE REIMBURSEMENT FORM

Name \_\_\_\_\_ Position \_\_\_\_\_

| MILEAGE REIMBURSEMENT |             |         |                           |
|-----------------------|-------------|---------|---------------------------|
| TRAVEL DATE           | DESTINATION | PURPOSE | # OF MILES<br>(TO + FROM) |
|                       |             |         |                           |
|                       |             |         |                           |
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|---|--|
| <p style="text-align: center;">PURCHASE REIMBURSEMENT<br/><i>(attach <u>original</u> receipts &amp; invoices)</i></p> <p>Costs <i>(list receipts separately)</i>: _____</p> <p>_____</p> <p>_____</p> <p>Dept/office purchased for: _____</p> | <p>TOTAL MILES: _____</p> <p><i>(2022 rate)</i>                      × \$ 0.59</p> <p style="text-align: right;">= _____</p> <hr style="border-top: 1px dashed black;"/> <p style="text-align: center;">EMPLOYEE SIGNATURE</p> <p>X _____</p> <p>Date: _____</p> |
|---|--|

*If you have questions about this form, please contact the Onota Township Clerk (onotatwp@tds.net).*

| OFFICE USE ONLY   |              |
|---|--------------|
| Acct #: _____   | Cost: _____  |
| Acct #: _____   | Cost: _____  |
| Acct #: _____   | Cost: _____  |
| Acct #: _____   | Cost: _____  |
| Fund: <input type="checkbox"/> General <input type="checkbox"/> Fire <input type="checkbox"/> Waste | Total: _____ |