

**VSBIT Multi-line Intermunicipal School Program**  
**2 Prospect Street, Suite 5**  
**Montpelier, VT 05602**  
**802-223-6132**  
**802-223-6135 (fax)**

**MILEAGE REIMBURSEMENT FORM**

| <b>DATE</b> | <b>FROM</b> | <b>TO</b> | <b>MILES</b> | <b>LESS TO WORK</b> | <b>TOTAL</b> |
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Claimant: \_\_\_\_\_ Claim#: \_\_\_\_\_

Home Address: \_\_\_\_\_

I hereby certify that the above information is true and accurate to the best of my knowledge:

Claimant signature: \_\_\_\_\_