



Carman Collegiate

Box 1510
Carman MB R0G 0J0
Phone (204) 745-2001
Fax (204) 745-6288

Gas Mileage Reimbursement Form

- Please complete this form and return it to the office
- Mileage for volunteer drivers is paid at \$0.30 per km.
- Please make sure forms are submitted within 2 weeks of program' s end

School Team or Program: _____

Name of Volunteer Driver: _____

Date of Trip: _____

Destination: _____

Signature of Driver

Date

FOR OFFICE USE ONLY:

Signature of Teacher Supervisor

Date

Signature of Principal

Date

Date Received: _____

Payment / Cheque #: _____

of KM: _____

Account #: _____