Illini West High School District #307

600 Miller Street
Carthage, IL 62321
Phone: (217) 357-9607
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Jay Harnack, Superintendent
E-mail: Harnack.jay@illiniwest.org
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Mileage Reimbursement Request Form

Name:
Address:
Phone #:
Student Passenger(s):

Date	From Location	To Location	Purpose	Round Trip Mileage

Total Miles	
2026 Rate (July – Dec)	**$.76/mile**
Amount Due	**$**

Requestor Signature	

Administrative Approval	