

**HARRISON HILLS CITY SCHOOL DISTRICT**  
**Box 356, Hopedale, Ohio 43976**

**T R A V E L E X P E N S E R E P O R T**

This report **MUST** be submitted to the Superintendent on the **SEVENTH (7th)** day of each month  
***(INSIDE THE DISTRICT)***

Name \_\_\_\_\_ School \_\_\_\_\_ Date \_\_\_\_\_

MONTH	DATE	REASON FOR TRIP	TRAVELED		ROUND TRIP		TOTAL MILES TRAVELED
			FROM	TO	YES	NO	

I certify this report is true and accurate to the best of my knowledge and belief.

Signed: \_\_\_\_\_ Date \_\_\_\_\_  
 Approved by: \_\_\_\_\_ Date \_\_\_\_\_  
 Principal  
 Approved by: \_\_\_\_\_ Date \_\_\_\_\_  
 Superintendent

Total Miles \_\_\_\_\_  
 .4 \_\_\_\_\_  
 Amount Due \$ \_\_\_\_\_

Code: \_\_\_\_\_