

COOPER CITY CYCLONES
MILEAGE REPORT – Parents Association

Please use this form to submit mileage traveled using your personal vehicle to attend meets on behalf of the Cooper City Cyclones Parents Board. If you have any questions, please contact Marcie Martine on 954-648-1533 or via email at mmartine@att.net.

DATE: _____ **NAME:** _____

MEET NAME: _____

MEET DATE: _____

ORIGIN CITY NAME: _____

DESTINATION CITY NAME: _____

TOTAL ROUND TRIP MILES: _____

Note: Current IRS Guidelines for Mileage Reimbursement will be used to compute the payment.

Please check one: Apply to Escrow Issue Check

SIGNATURE: _____

***** **Current IRS Guidelines** *****

2008 Mileage: \$0.505/mile from 1/1/08 to 6/30/08
\$0.58/mile from 7/1/08 to 12/31/08

2009 Mileage: \$0.55/mile

For Treasurer Use Only:

Approved: Y N *Date Paid:* _____ *Escrow* *Check#:* _____

Remarks: _____