

Club Sports Program  
Gas Reimbursement Form

Club Sport \_\_\_\_\_

Destination \_\_\_\_\_

Event \_\_\_\_\_

Dates of Travel \_\_\_\_\_

CAR	DRIVER	MILEAGE	MILEAGE x \$0.51	TOLLS	TOTAL
1			\$	\$	\$
2			\$	\$	\$
3			\$	\$	\$
4			\$	\$	\$
5			\$	\$	\$
6			\$	\$	\$
7			\$	\$	\$
8			\$	\$	\$
9			\$	\$	\$
<b>TOTAL</b>					\$
<b>TOTAL DIVIDED BY 2</b>					\$

**Cars must provide a printout of directions indicating the total mileage traveled and toll receipts.**

Business Manager (Printed Full Name): \_\_\_\_\_

Business Manager (Signature): \_\_\_\_\_