

Mountain Home School District #193 In-Lieu of Transportation Non-Policy Procedure Form - 846.60F1  
 Monthly in lieu of transportation and/or rooming  
 Allotment voucher

Name of parent or guardian \_\_\_\_\_

Month of transportation or rooming \_\_\_\_\_

Transportation Name of pupil	School	Grade	Number of miles (rnd Trp)	no. of days transported	days of month ("X" days of month school was attended)																														
					0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
				0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
				0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
				0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
				0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

Fixed amount

Total reimburseable miles

Mileage Reimbursement rate @ \$ 0.625

Mileage Reimbursement amount \$ -

Rooming Name of Student	School	Grade	Number of weeks boarded	Week of the month student was roomed				
				1st	2nd	3rd	4th	5th
			0	1st	2nd	3rd	4th	5th
			0	1st	2nd	3rd	4th	5th
			0	1st	2nd	3rd	4th	5th
			0	1st	2nd	3rd	4th	5th

0 Number of students roomed

wkly rate of reimbursement

number of weeks roomed

Rooming reimbursement amt

\$ -  
0  
\$ -

Rooming Rates	1 student	\$37.50
per student	2 students	\$31.25
per week	3 or more	\$25.00

Mileage Reimbursement

\$ -

Rooming Reimbursement

\$ -

set reimbursement

Total due parent or guardian \$ -

Attendance certified by: \_\_\_\_\_

Title: \_\_\_\_\_

Date Attendance verified \_\_\_\_\_

Signature of Guardian \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

The above information is correct and accurate to the best of my knowledge

Revised: July 19, 2022