

# School Field Trip Report / Invoice

Field Trip ID:

Date of Trip:

School Year:

Odometer Reading:

Bus Number:

Driver ID:

Ending Reading:

Beginning Reading:

Driver Name

Total Trip Mileage:

Field Trip Total Mileage

X 1.25 per mile = \$

Number of hours driving time:

X \$9.00 per hour = \$

Number of down time hours:

X \$7.25 per hour = \$

Substitute Name:

Total Driving Expenses: \$

Days / Hours Worked:

Less Substitute Pay: \$

Amount Paid: \$

Total Due Driver: \$

(Minimum: \$36.00 - Substitute Pay)

Calculation Method: Normal

Total Charges: \$

Change method when all numbers have been entered.

This report has been completed.

Signature

Date

Save Report

6003771162f74dbda134269fb3e0e1

Password

Launch Admin