

TVQA MILEAGE REIMBURSEMENT FORM

FILL OUT AND SEND TO:

Jean Odom
923 Downy Dr
Nashville, TN 37205

TVQA TEACHER: _____

MAILING ADDRESS FOR CHECK: _____

GUILD NAME (LECTURE/CLASS): _____

DATE OF LECTURE OR CLASS: _____

REIMBURSEMENT MILEAGE FOR: (Please check one or both):

LECTURE _____ CLASS _____

MILEAGE: _____ (ROUND TRIP)

THIS WILL BE PAID AT _____.50/MILE____