



Superintendent's Circular

School Year 2009-2010

NUMBER:
FIN-2

UPDATED:
December 16, 2009

MILEAGE REIMBURSEMENT

All Boston Public School employees who apply for mileage reimbursement are required to document fully each trip taken, on a daily basis. Tax laws and regulations now require rigorous documentation for mileage reimbursement. No individual will be reimbursed unless all procedures are followed and the necessary documentation (see attached form) is completed.

Boston Public School employees who use their own car on authorized school business are entitled to reimbursement as listed below. It should be noted that travel to and from home is not allowed for reimbursement.

BASAS		58.5¢ per mile from 07/01/08 – 12/31/08 55.0¢ per mile from 01/01/09 – 12/31/09 50.0¢ per mile from 01/01/10 – 12/31/10
BTU	-School Psychologists and Pupil Adjustment Counselors (Part year: 1/180 th for each workday)	\$600.00 per year (without documentation)
	-Adjustment Counselors	58.5¢ per mile from 07/01/08 – 12/31/08 55.0¢ per mile from 01/01/09 – 12/31/09 50.0¢ per mile from 01/01/10 – 12/31/10
	-Supervisors of Attendance	58.5¢ per mile from 07/01/08 – 12/31/08 55.0¢ per mile from 01/01/09 – 12/31/09 50.0¢ per mile from 01/01/10 – 12/31/10
	-All other BTU members	58.5¢ per mile from 07/01/08 – 12/31/08 55.0¢ per mile from 01/01/09 – 12/31/09 50.0¢ per mile from 01/01/10 – 12/31/10
	-Management	58.5¢ per mile from 07/01/08 – 12/31/08 55.0¢ per mile from 01/01/09 – 12/31/09 50.0¢ per mile from 01/01/10 – 12/31/10
	Planning & Engineering	\$15.00 per day

Please be advised the mileage reimbursement for management employees will be dictated by the Internal Revenue Service rate. The rate is 50.5¢ per mile from 01/01/08 – 06/30/08, 58.5¢ per mile from 07/01/08 – 12/31/08, and 55.0¢ per mile from 01/01/09 – 12/31/09. To qualify for this rate, there must be a sufficient appropriation in the respective responsibility center manager's budget.

- Parking fees and tolls will be reimbursed only when it is clearly documented that the trip taken, which resulted in parking fees or tolls, was required for school business and original receipts in addition to a duplicate are attached.

- **The following statement must be incorporated on all voucher reimbursement for parking fees and tolls:**

I, _____, incurred the attached parking fees and/or tolls within the scope of my employment.

Signature: _____

RC Manager: _____

- For reimbursement, submit a City of Boston Special Draft/Non Order (this can be found on MyBPS - Central Admin >> Finance >> Business Services), to the Office of the Business Manager. Invoices must state: "I hereby certify, under penalty of perjury, that amounts authorized are correct and were incurred in the service of the City of Boston." Also, list the total number of miles traveled daily, and attach a completed Mileage Detail Form. Employee group (union) affiliation must be indicated to insure correct reimbursement.
- The City of Boston Special Draft/Non Order must be signed by the employee's immediate supervisor. This pertains to all employees, including those who are specifically provided mileage allotments in the contract. The supervisor's signature is required as verification that the travel was undertaken.
- Clearly, a supervisor cannot directly observe all travel. However, common sense measures of review can be applied in verifying payment claims, i.e., was the employee at the locations claimed, are distances between the locations involved consistent with the mileage claimed? The supervisor's signature attests that these criteria have been met.
- Invoices must, in all instances, be submitted in advance of the end of the fiscal year and may be submitted monthly, quarterly, or semi-annually (December and June).

Summary of significant dates and deadlines:

Date	Activity
December	Mileage Reimbursement due to Business Services
June	Mileage Reimbursement due to Business Services

For more information about this circular, contact:

Name:	Ronan FitzPatrick, Business Manager
Department:	Business Services
Mailing Address:	26 Court Street, Boston, MA 02108
Phone:	617-635-9490
Fax:	617-635-9479
E-mail:	rfitzpatrick@boston.k12.ma.us

Carol R. Johnson, Superintendent

MILEAGE DETAIL FORM
 (Please Type)

TO BE COMPLETED FOR ALL MILEAGE CLAIMS AND SUBMITTED WITH A STANDARD INVOICE.

Date _____

 Signature Title Position # Employee Group
 (Union)

 From To \$ _____

Inclusive dates of all Prior periods
 within the current fiscal year
 (July 1 - June 30) for which travel
 reimbursement was previously
 claimed.

Total amount claimed
 for all prior periods
 within the current
 fiscal year.

Number of miles

TRAVEL DETAILS*

Date	From	To	Miles

 Signature

 Date

*Each individual trip must be identified, along with the number of miles traveled during that trip. Please, also summarize the total number of miles traveled each day on this form.