MILEAGE EXPENSE INSTRUCTIONS

Expense forms are due buy the last day of the following month for which you are claiming. i.e. May expenses are due by June 30th

One month per form.

Purpose is the job number and/or work order you have been called to cover.

Responsibility Code applies to the location of the job you have been called to cover. i.e. Called to cover T515, and your crew base is Danbury, the responsibility code is North White.

Once completed, forms must be signed and dated on the 3rd page.

Click the share button at the top right-hand corner of your screen.

Click "save a copy".

Change EXCEL to PDF with the drop-down screen arrow.

Email to CMCMileage@MNR.org.

DEADHEADING MILEAGE CHART

	GCT	HM	PO	NW	BR	WA	SM	BP	NH	DN
GCT	X	40	80	25	60	93	40	65	75	75
HM	40	X	45	16	70	60	30	X	70	40
PO	80	45	X	60	30	25	75	X	80	40
NW	25	16	60	X	30	60	17	X	55	40
BR	60	30	30	30	X	35	47	X	50	10
WA	93	60	25	60	35	X	60	X	75	40
SM	40	30	75	17	47	60	X	25	40	30
BP	65	X	X	X	X	X	25	X	17	35
NH	75	70	80	55	50	75	40	17	X	40
DN	75	40	40	40	10	40	30	35	40	X

DEADHEADING RESPONSIBILITY CODES

BREWSTER	31212
BRIDGEPORT / CP257	31314
CAMPBELL HALL	80800
DANBURY	31313
GRAND CENTRAL TERMINAL	31215
CROTON HARMON	31220
NORTH WHITE PLAINS	31210
NEW HAVEN	31300
POUGHKEEPSIE	31222
STAMFORD	31312