

# Mileage Log & Expense Reimbursement Form

Remember to attach receipts!

Name		Rate Per Mile	
ID		For Period	
Vehicle Description		Total Mileage	0
Authorized By		Total Reimbursement	\$0.00

**NOTE:** The IRS periodically changes the reimbursement rate per mile.

Date	Starting Location	Destination	Description/Notes	Odometer Start	Odometer End	Mileage	Expense
Total Mileage x Rate per Mile:							
Total Amount of Reimbursement Request:							

Signature of Requester: \_\_\_\_\_  
 Received & Approved by (please print): \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Authorized for payment (signature): \_\_\_\_\_

