**EMPLOYEE MILEAGE EXPENSE REPORT**

|  |  |
| --- | --- |
| Employee Name |  |

|  |  |  |
| --- | --- | --- |
| Pay Period | From |  |
| To |  |

|  |  |
| --- | --- |
| Employee ID |  |

|  |  |
| --- | --- |
| Vehicle Description |  |

|  |  |
| --- | --- |
| Mileage Rate | $  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date | Description | Starting Location | Destination | Total Miles | Amount |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  |  |  | $  |
|  |  |  | **Total Reimbursement :** | **$**  |

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Authorized By |  | Date |  |

