Mileage Reimbursement

If employee is set up with ACH payment (direct deposit)for payroll, Mileage Reimbursement will be processed as an ACH Payment to the primary account set up for payroll.

District Name: _____ **Payment #** _____

Name: _____ **Month\Year** _____

Address: _____

_____

Date	Mileage	Destination & Task	Budget Classification

Mileage Total _____ **X Rate per mile: $0.76 =** _____

I hereby certify that the above is a correct and true statement of the actual necessary traveling expenses incurred by me in performance of official duties.

_____ _____

Signature Date Approval Signature Date