

Mileage and Expense Claim

Name: _____

Period Covered by Claim: _____ to _____

Mileage Rate: 0.54 Date: _____

***** Use .54 for claims prior to January 1, 2017 and .535 for claims after January 1, 2017

Mileage

Date	Destination	Reason	Miles
		Total Miles Traveled	0
		Total Mileage Claim	\$0.00

Expenses Other Than Mileage

Date	Itemized Expenses (Support with Receipts)	Amount	
		Total Expenses Other than Mileage	\$0.00

TOTAL CLAIM (Mileage and Expenses)		\$0.00
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