

COURIER MILEAGE & EXPENSE LOG SHEET

Delivery Driver Weekly/Monthly Reimbursement Record

Driver Name:

Period Ending:

Vehicle Make & Model:

License Plate No.:

Employee ID:

Department/Project:

Standard Mileage Reimbursement Rate: \$ _____ per mile / km

DATE	DESTINATION / PURPOSE (DELIVERY ID)	ODOMETER START	ODOMETER END	TOTAL DISTANCE	FUEL COSTS	TOLLS & PARKING	OTHER EXPENSES	NOTES / DESCRIPTION
Total:								

Driver Signature

Date: _____

Authorized Approver Signature

Date: _____