

EXPENSE REIMBURSEMENT

PAYROLL DIVISION

EMPLOYEE NAME:
EMPLOYEE ID:
DEPARTMENT:
MANAGER/APPROVER:
PAY PERIOD START:
PAY PERIOD END:

1. MILEAGE LOG (REIMBURSEMENT)

DATE	ORIGIN / FROM	DESTINATION / TO	BUSINESS PURPOSE	MILES	RATE	TOTAL
Total Mileage Reimbursement:						

2. OUT-OF-POCKET EXPENSES

DATE	DESCRIPTION OF EXPENSE	CATEGORY	RECEIPT ATTACHED (Y/N)	AMOUNT
Total General Expenses:				

Mileage Total	
Expenses Total	
TOTAL REIMBURSEMENT	

EMPLOYEE SIGNATURE DATE

AUTHORIZED APPROVER SIGNATURE DATE