

DRIVER FUEL AND MILEAGE EXPENSE SHEET

Driver Name:

Vehicle Make/Model:

License Plate No:

Period Start Date:

Period End Date:

Department/Project:

Date	Purpose of Trip / Route	Odometer Start	Odometer End	Total Distance	Fuel Qty (Gal/L)	Fuel Cost	Receipt Attached (Y/N)

Total Distance	
Mileage Rate	
Mileage Reimbursement	
Total Fuel Cost	
Total Reimbursement	

Driver Signature

Date:

Approved By (Signature)

Date: