Non-Taxable Travel and Mileage Reimbursement

**Employee Name:**

**Employee ID:**

**Department:**

**Pay Period Start:**

**Pay Period End:**

**Submission Date:**

## 1. PERSONAL VEHICLE MILEAGE LOG

| Date | Purpose / Destination (From & To) | Miles Driven | IRS Rate ($) | Total Amount ($) |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | Subtotal Mileage: | | | |

## 2. TRAVEL & INCIDENTAL EXPENSES

| Date | Expense Category (e.g., Lodging, Meals, Tolls) | Description / Business Purpose | Amount ($) |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | Subtotal Travel Expenses: | |

## 3. SUMMARY OF REIMBURSEMENT

| | |
|---|---|
| **Total Mileage Reimbursement (Section 1)** | |
| **Total Travel Expenses (Section 2)** | |
| **GRAND TOTAL NON-TAXABLE REIMBURSEMENT** | |

**Important Note:** This reimbursement is paid under an accountable plan. It is non-taxable and should not be reported as wages on Form W-2. Receipts must be attached for all individual travel expenses listed in Section 2.

**Employee Signature**

Date: _____

**Approver Signature**

Date: _____