For Accounting Use Only

INPUT DATE: ____________

AMOUNT: ____________

DOC # : ____________

CERRITOS COMMUNITY COLLEGE DISTRICT
HOURLY MILEAGE EXPENSE REPORT
FOR PRIVATELY OWNED VEHICLES

Employees who use their cars on a regular basis for District business must submit this form for approval in order to receive mileage reimbursement. Mileage reports should be submitted on a **monthly** basis. **The total is automatically calculated.**

Name: ______________________________ Phone: ____________________

Account Number: ______________________ Date: ____________________

DATE	LOCATION (TO/FROM)	ROUND TRIP MILES

TOTAL MILEAGE	0.00
APPROVED I.R.S. RATE	$0.760
AMOUNT DUE	$ 0.00

______________________________ ____________________

Signature of Employee Date

______________________________ ____________________

Signature of Manager/Supervisor Date