For Accounting Use Only

INPUT DATE: _____
AMOUNT: $0.00
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 to receive mileage reimbursement. Mileage reports should be submitted monthly. **The total is automatically calculated.**

Name: _____ Phone: _____

Home Address: _____

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