



MILEAGE REIMBURSEMENT REPORT

Name: _____
 Payroll No: _____
 Mail Station No.: _____

Month Ending: _____
 Budget Code: _____

Use of Private Automobile to travel on Fermilab site

A) Flat Charge One -Way Trips - Tally		Total One Way Trips	
WH/Village	Dates: _____	_____	X \$.975= _____
B) Other Trips On-Site			
<u>Destination</u>	<u>Date</u>	<u>Purpose</u>	<u>Mileage</u>
_____	_____	_____	X \$.325 = _____
_____	_____	_____	X \$.325 = _____
_____	_____	_____	X \$.325 = _____
_____	_____	_____	X \$.325 = _____
_____	_____	_____	X \$.325 = _____
_____	_____	_____	X \$.325 = _____
TOTAL COST ON-SITE MILEAGE			\$ <input type="text"/>

Use of Private Automobile to travel off-site

<u>Destination</u>	<u>Date</u>	<u>Purpose/Company</u>	<u>Mileage</u>	
_____	_____	_____	_____	X \$.325 = _____
_____	_____	_____	_____	X \$.325 = _____
_____	_____	_____	_____	X \$.325 = _____
_____	_____	_____	_____	X \$.325 = _____
			Sub-total Mileage	Miles <input type="text"/> \$ <input type="text"/>
SITE TO ANL = 23 MILES			Parking Fees	_____
SITE TO O'HARE = 28 MILES			Tolls	_____
Explain & attach receipt			Misc.	_____
TOTAL COST OFF-SITE MILEAGE				\$ <input type="text"/>

TOTAL REIMBURSEMENT

EMPLOYEE'S SIGNATURE _____

DIVISION APPROVAL _____