Mileage Record

SWEAT AmeriCorps
905 Irving Avenue
Dayton, Ohio 45409
(937) 229-2053
FAX (937) 229-4638

Name: _____

Date: _____

Please turn in your mileage forms with your time sheets on the 5th and/or the 20th of each month. To get reimbursed: you must complete this form **and** a *University of Dayton Expense Report* duplicate form. Mileage is reimbursed at 20 cents per mile. If your mileage exceeds $50.00, reimbursement will be issued in the form of a check within 2 to 4 weeks **OR** you can document your mileage on 2 separate forms so as not to exceed $50.00 on any one form, and be reimbursed in cash. You can pick up your mileage money on the Wednesday afternoon following the 5th and 20th of each month. Thank you for your following this procedure.

Date	Odometer Start	Odometer Stop	Destination	Parking	Total Miles
			Grand Totals:		

SAMPLE

Approved by: _____ Date: _____