

**Centerville Baptist Church
Personal Vehicle
Mileage Reimbursement Request**

Requestor is to complete the log below for reimbursement for work related travel.				
Date	Odometer Beginning Reading	Odometer Ending Reading	Total Miles	Destination, Timeframe, and Purpose of trip.

Total Miles submitted for reimbursement: _____

Current Year _____ IRS Mileage Rate: _____

Total Miles _____ x Mileage Rate _____ per mile = Reimbursement Amount \$ _____

Signature of requestor: _____ Date: _____

REIMBURSEMENT AUTHORIZATION (To be completed by Treasurer)

Amount approved for reimbursement: \$ _____

Budget line item: _____

Signature: _____ Date: _____