

# MILEAGE REIMBURSEMENT REQUEST

Employee: \_\_\_\_\_

## MILEAGE REIMBURSEMENT:

<u>DATE</u>	<u>CITY TRAVELED TO</u>	<u>PURPOSE OF TRAVEL</u>	<u>TOTAL MILES</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Miles \_\_\_\_\_ @ \$ .50/mile = \$ \_\_\_\_\_

- ❖ You will be reimbursed \$.485 per mile to use your personal vehicle only if a WISD vehicle is not available.
- ❖ Mileage reimbursement will begin at WISD campus unless departing at a point closer to destination.
- ❖ Maximum allowed mileage: Victoria – 140 Austin – 172 Houston – 176 San Antonio - 222
- ❖ For destinations other than these, consult [www.wildtexas.com/travel-calculator.php](http://www.wildtexas.com/travel-calculator.php).

**PARKING REIMBURSEMENT:** \$ \_\_\_\_\_ (attach receipts)

**OTHER REIMBURSEMENT:** \$ \_\_\_\_\_ (attach receipts)

TRAVEL ACCOUNT CODE: \_\_\_\_\_ -- 6 4 1 1 -- \_\_\_\_\_ -- X -- \_\_\_\_\_

**TOTAL REIMBURSEMENT DUE EMPLOYEE** \$ \_\_\_\_\_

***ALL REQUIRED RECEIPTS MUST BE ATTACHED. Submission of false information is in violation of state law.***

## **EMPLOYEE:**

I certify that the above request is true and correct: \_\_\_\_\_

Employee signature

## **ADMINISTRATOR APPROVAL:**

\_\_\_\_\_  
Campus Principal Signature

\_\_\_\_\_  
Business Manager Signature