Town of Roxbury Mileage Log and Reimbursement Form

SAMPLE

Employee Name		**Rate Per Mile**	IRS 2013 Mileage Reimb Rate	**0.565**
Employee ID		**For Period**	**1/1-1/15/2013**	
Vehicle Description		**Total Mileage**		
Authorized By		**Total Reimbursement**		**$41.25**

Date	Starting Location	Destination	Description/Notes	Odometer Start	Odometer End	Mileage	Reimbursement
						0	$0.00
1/2/2013	29 North Street	59 Bank Street New Milford	Bank Deposits	10000	10013	13	$7.35
						0	$0.00
1/7/2013	29 North Street	CityPlace II Hartford, CT	Meeting w/ Webster Bank	10025	10085	60	$33.90
						0	$0.00
						0	$0.00
						0	$0.00
						0	$0.00
						0	$0.00
						0	$0.00
						0	$0.00
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						0	$0.00
						0	$0.00
						0	$0.00
						0	$0.00
						0	$0.00
					Totals	**73**	**$41.25**