

## UNIVERSITY OF ALASKA CAR MILEAGE REIMBURSEMENT FORM

Traveler's Name:		TA#:		ID:			
Date	Destination		Odometer Reading		Total Miles	Trip Description or Explanation	
	From	To	Start	Finish			
<b>Traveler's Signature:</b>						<b>Date:</b>	
<b>Approved by:</b>					<b>55 cents x            = \$</b>		
Supervisor or Department Head					# of miles	Total Reimbursement	
Travel is reimbursed at the rate of fifty-five cents per mile.							