Philomath School District 17J

Request for Mileage Reimbursement Form

Employee Name	
Account Number:	

Rate Per Mile	**$0.670**
Total Mileage	**0**
Total Reimbursement	**$0.00**

NOTE: **The IRS periodically changes the per mile reimbursement rate. Current rate for 2024.**

Date	Starting Location	Destination	Description/Notes	Odometer Start	Odometer End	Mileage	Expense
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00

No google map is required for trips to KVCS, LBL ESD, LBCC or between PSD campuses.
Round trip from Philomath to KVCS (28 mi) LBL ESD (48 mi) LBCC (42 mi).

Requester (signature): _____ **Date:** _____

Authorized Approver (signature): _____ **Date:** _____