CUESTA COLLEGE

San Luis Obispo County Community College District

MILEAGE REIMBURSEMENT FORM

(For Non-Conference Travel)

NAME:		BANNER ID#:	
ADDRESS:	CITY:	STATE:	ZIP:
PURPOSE OF TRAVEL:	DEPARTMENT:	ACTIVITY DATES/TIME PERIOD:	

PLEASE ATTACH MILEAGE TRAVEL LOG FOR VERIFICATION OF DATES/DESTINATIONS AND MILES TRAVELED

Number of miles to outlying campus (one way):

- ☐ SLO to NCC = 36 miles
- ☐ SLO to ARROYO GRANDE HS = 22 miles
- ☐ SLO to NIPOMO HS = 32 miles
- ☐ NCC to ARROYO GRANDE HS = 46 miles
- ☐ NCC to NIPOMO HS = 55 miles
- ☐ NCC to CMC = 34 miles
- ☐ Other _____to _____ (calculate mileage with online Map)

A. Total Miles Traveled: _____

B. **Standard IRS mileage rate for the period:** *current rate (.76)* _____

MULTIPLY (A) x (B) = Your Reimbursement Amount: $ 0.00

Account						
Account						

SIGNATURE OF EMPLOYEE
SIGNATURE OF ADMINISTRATOR
SIGNATURE OF BUDGET OFFICE

- ✓ Attach supporting documents:
  --Mileage log worksheet
  --Copy of map if location is not listed above
- ✓ Obtain Employee and Administrator signatures
- ✓ Submit both form and supporting documents to Budget Office for final approval and processing. budget@cuesta.edu