

Business Mileage Reimbursement Receipt

Employee Name: John Doe
Employee ID: 12345

Department: Sales
Date Submitted: 2024-05-15

Purpose of Trip: Client Meeting Visit
Approval Manager: Jane Smith

Trip Details

Date	Origin	Destination	Miles Driven	Rate per Mile	Subtotal
2024-05-10	Company HQ	Client Office A	24	\$0.67	\$16.08
2024-05-11	Client Office A	Company HQ	24	\$0.67	\$16.08
2024-05-12	Company HQ	Client Office B	15	\$0.67	\$10.05
Total Reimbursement					\$42.21

Employee Signature: _____
Date: _____

Manager Signature: _____
Date: _____

- Mileage reimbursement is based on accurate and truthful reporting of business-related travel only.
- Receipts and supporting documents should be attached where relevant as per company policy.
- Only approved routes and rates are eligible for reimbursement.
- This document must be signed by both the employee and manager before processing.
- Incomplete or incorrect forms may cause reimbursement delays.