



Reimbursement for Mileage, Parking, Taxi and Car Expenses
Attach this completed form as support with the expense report

Employee name: _____ **Employee ID:** _____

Cost Center + Program,
Gift, Grant or Project Worktag: _____ **Page number:** _____ of _____

Expense Details							
Instructions: Indicate odometer readings or exact addresses for each location. Miles should be supported by printed directions such as Google maps. Include a receipt for all expenses. If parking is at a meter with no receipt option, write "meter parking" in the business purpose field.							
Date	Departed From	Arrived At	Miles	Parking Expense	Taxi or Car Expenses	Misc. Expenses	ASU Business Purpose Attach additional pages if needed.
Totals		Miles at \$0.445					Grand total

Common one-way mileage from Tempe campus: Downtown Phoenix campus – 10; Polytechnic campus – 23; Research Park – 7; West campus – 25

I certify that the items of expense were incurred for authorized official state business; the expenses are correct and the charges are proper; and reimbursements claimed were out-of-pocket charges paid by me. For expenses related to car rentals and state vehicles, I certify that I have attended the Authorized Driver Program. For claiming mileage on a personal vehicle, I certify that I have current vehicle insurance and a valid driver's license.

Employee signature: _____ **Date:** _____

Cost Center Manager signature: _____ **Date:** _____

Contact name: _____ **Phone:** _____