

MILEAGE LOG -- Berkeley Unified School District

Name	Position Title	School/Department
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INSTRUCTIONS:

- 1. Use this form for trips where only mileage, tolls and/or parking reimbursement is requested. For other travel use the BUSD Travel Request Form.**
- 2. Submit this form to Accounts Payable Section when total exceeds \$50 or prior to June 20th of each Fiscal Year.**
- 3. See Mileage Chart on the back for approved mileage distance between sites**

[illegible]

Traveler's Signature:	Date:	AMOUNT TO PAY Parking \$ _____ Tolls \$ _____ Miles _____ \$ 0.56 \$ _____ <u>7/1/2014 to 12/31/2014</u> TOTAL \$ _____
Approved: Budget Manager's Signature:	Date:	

ACCOUNT CODE

Fund		Resource			Location			Year	Budget Manage	Object				Goal				Function				District Def		