# UFCT Travel Mileage Form    Week Of _____

| Date | Beginning Location | List all locations Traveled For each day | Beginning Odometer | Ending Odometer | Total Mileage For Day |
|------|--------------------|------------------------------------------|--------------------|-----------------|-----------------------|
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          |                    |                 |                       |
|      |                    |                                          | Total              | Mileage =       |                       |

Total Miles    X    IRS Mileage Rate    =    Total Expense

_____    _____
Signature                            Date

_____    _____
Approval Signature                   Date