GRAYSON COUNTY
MILEAGE REIMBURSEMENT FORM

This form is to be used to reimburse employees for mileage expense incurred while performing County duties in employees' personal vehicles. All information must be properly completed for reimbursement to be made.Only one request may be made each month, and it should be turned in to the County Auditor's office as soon after month-end as possible.

Employee: _____ Dept: _____ Month: _____

Date	Destination	Purpose of Travel	Miles To & From
		Total Miles	0.0
		Mileage Rate	X 0.655
		Total Reimbursement	$0.00

_____
Signature of Employee

_____
Signature of Department Head