

University of Alaska Anchorage Mileage Report

Name _____ Employee Yes No ID# _____

Mailing Address _____ Department _____

_____ Phone _____

<i>Date</i>	<i>Travel From</i>	<i>Travel To</i>	<i>Odometer Readings</i>		<i>Actual Mileage</i>	<i>Purpose</i>
			<i>Beginning</i>	<i>Ending</i>		

Remit By: US Mail
 Intercampus Mail

$$\frac{\text{Total Miles}}{\text{Rate}} \times \text{Rate} = \$ \text{Amount Claimed}$$

Traveler's Signature _____ Date _____

Approved By _____ Date _____

Budget Approval _____ Date _____

Audited By _____ Date _____

Accounting

ORG	OBJ	FUND	AMOUNT