

**Loyola Marymount University/Loyola Law School  
Mileage Reimbursement Request**

**Name :** \_\_\_\_\_  
**Address :** \_\_\_\_\_  
 \_\_\_\_\_

**Contact Name :** \_\_\_\_\_  
**Contact Number :** \_\_\_\_\_

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When a privately owned vehicle or a university owned vehicle is used for University business, reimbursement will be in accordance with the IRS code. If the total mileage traveled is less than your regular daily commute then none of your miles are reimbursable. If the total mileage traveled for that day is more than your daily commute, you will be reimbursed for the additional miles driven.

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Date	Business Purpose	Starting Point	Destination	Miles	Rate	Total
<b>Total Reimbursement:</b>						

I certify that the mileage shown on this form was incurred by me on official university business on the dates shown and no part was for personal business.

Employee Signature : \_\_\_\_\_

Check Mail : \_\_\_\_\_  
 Direct Deposit : \_\_\_\_\_

Account # : \_\_\_\_\_

Supervisor Approval : \_\_\_\_\_

Date : \_\_\_\_\_