

**MILEAGE REIMBURSEMENT
WASHINGTON COUNTY, TEXAS**

NOTE: This form must be completed in detail and submitted to the County Auditor to claim reimbursement for use of personal auto for official local or intercounty business travel. Reimbursement will be 57.5 cents per mile.

PERSON SUBMITTING REQUEST: _____

DATE OF REQUEST: _____ DEPARTMENT: _____

DATE	ODOMETER READING FROM	TO	MILES	DESCRIPTION OF OFFICIAL COUNTY TRAVEL
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL MILES _____ X **57.5 CENTS = \$** _____

"I hereby certify that the above is a true and correct statement of use of my personal auto for official local or intercounty business travel and request reimbursement for the same."

SIGNATURE OF EMPLOYEE DATE

BUDGET ACCOUNT (\$) TO BE CHARGED

SIGNATURE- OFFICIAL/DEPT. SUPERVISOR DATE

COUNTY JUDGE DATE

COUNTY AUDITOR DATE

