M-23
Revised: 8/1/95, 7/04, 7/07,7/08,7/11

LINK ASSOCIATES

MILEAGE REIMBURSEMENT

NAME: _____ **MONTH OF** _____

DEPARTMENT: _____

DATE	DESTINATION/EXPLNATION/ADDRESS	BEGINNING ODOMETER	ENDING ODOMETER	# OF MILES

TOTAL MILES _____
X $ .37

SIGNED _____ **DATE** _____

REVIEWED _____ **DATE** _____ **MILEAGE REIMBURSEMENT $** _____

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FOR ACCOUNTING USE ONLY (DO NOT WRITE IN THIS AREA)

Voucher # _____ **Vendor #** _____ **Account** _____

Dist. Date _____ **Invoice #** _____ **Due Date** _____

Word M-23 mmc 7/04