Lehigh University 2019 OneCard Mileage Log

Use this form to summarize multiple trips for a common business purposes

Name: _____

Mileage for the period _____to _____for purpose of_____

- Enter the above in the “Description” field of the Wells Fargo “Out-of-pocket Expenses” tab (don’t use symbols or punctuation marks).
- Enter within 30 days of travel.
- Submit this form with Wells Fargo cover sheet.
- Reimbursement for traveling from home to work or return is unallowable.

Date	Destination	Number of Auto Miles Driven	2019 Mileage Rate	Reimbursement
/ /			.580	
/ /			.580	
/ /			.580	
/ /			.580	
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/ /			.580	
/ /			.580	
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/ /			.580	
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/ /			.580	
/ /			.580	
/ /			.580	
/ /			.580	
Total: Enter in “Amount” field of Wells Fargo “Out-of-pocket Expenses” tab				