

Administrative Travel – Personal Car Use

Study Center

Use this form to claim reimbursement of mileage for official Study Center business travel for which you have used your personal car (excluding travel from home to the Study Center and back).

Date (Month/Day/Year)	Between what points? (Use RT if round trip)	Number of Miles	Purpose of travel
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____	X	_____	=	_____	at	_____	=	_____
(No. of miles)		(Mileage rate*)		(U.S. dollars)		(Conversion rate)		(Foreign currency)

I certify that the vehicle for which mileage reimbursement is being claimed is covered by liability insurance which meets the legal requirements in the country in which usage has occurred.

The above is a true statement of travel expenses incurred by me on official Study Center business on the dates shown above. I have been reimbursed from the Study Center operating funds.

Traveler's signature Date

Director's signature *(if traveler is NOT Director)* Date

****Please check with the SC Accountant for the current mileage rate.***