

# MONTHLY MILEAGE CLAIM

Shasta County Office of Education  
1644 Magnolia Avenue - Redding, Ca 96001

\_\_\_\_\_  
Employee Name

\_\_\_\_\_  
Non Employee Name

\_\_\_\_\_  
Employee Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Mileage Month

\_\_\_\_\_  
City, State Zip Code

Monthly Mileage Claims are due to Business Services by the 10th of the following month. Reimbursement of mileage claims received after the 10th may be delayed until the next monthly batch process.

Escape Key #	Date	Beginning At	Destination	Purpose	Miles
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					

Reimbursement rate is the rate per mile that the IRS allows to be unreported as taxable compensation.  
\*Beginning 01/01/2023 mileage rate per mile =

Total Miles for Month  
Total Reimbursement

↑	Escape Key		
	Resource ####	Program ####	Object ####
1			5211
2			5211
3			5211
4			5211

Alias	Amount
0#####	\$

\_\_\_\_\_  
Admin Support Contact

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

\_\_\_\_\_  
Supervisor Signature