



# EDUCATION

## Student Mileage Log

Name:		CUID (Required):	
Purpose of Travel:		Funding Source:	
Departure		Return	Auto Miles
Date:	Time:	Date: Time:	
		Site Visited	City, State
			Total Miles:
(Mileage Rate: \$0.70) Amount Owed:			

### Reimbursement Information (Required for Reimbursements)

Are you signed up for TigerPay (Zelle)?	Yes	No
If not, do you want to sign up or receive a check mailed to the mailing address below?	Sign Up	Mail Check
Current Mailing Address: (Required to receive a check)		

I certify that the above expenditures were made by me for official use only, and that claim for reimbursement has not been made.

Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

Fund Approval: \_\_\_\_\_ Date: \_\_\_\_\_