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CALIFORNIA STATE UNIVERSITY FULLERTON

# Monthly Mileage Details (Attachment to Travel Expense Claim)

Traveler's Name _____

Travel Document # TR _____

Month/Year _____



| Date | Departure Time | | Return Time | | WD / DO | Departure Location (Home, Campus, School Site, Other) | Traveled To Address (Street, City) | Visit Description / Purpose | Total Miles (Private vehicle) |
|---|---|---|---|---|---|---|---|---|---|
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| | | | | | | | **Total Mileage:** | | 0.00 |
| | | | | | | | **rate per mile:** | Select the appropriate mileage rate | 0.545 |
| | | | | | | | | | $ 0.00 |

**Direct trips between employee's residence and their designated work location are considered commuting miles and not reimbursable.**

**Mileage reimbursement for employee travel to a location (excluding their designated work location) is calculated as follows:**

On a **regularly scheduled work day (WD)**, traveler departs and/or returns to their residence, mileage is calculated:

· From the lesser of the two locations (traveler's headquarters or traveler's residence).

On a **regularly scheduled work day (WD)**, traveler departs from their headquarters and/or returns to their headquarters, mileage is calculated:

· From the traveler's headquarters to destination or from destination to traveler's headquarters.

On a **regularly scheduled day off (DO)**, mileage is calculated:

· From the traveler's residence.

**Business Travel**

1/1/18 - 12/31/18: 0.545

1/1/17 - 12/31/17: 0.535

**Rev 12/2017**