Mileage Reimbursement Form

YOUR NAME	DEPARTMENT	ASSIGNED HOME CAMPUS	FOR THE PERIOD OF

THE RATE/KM

Return mileage example for Business Kilometres: TRAIL to CASTLEGAR = **62 km** / NELSON to CASTLEGAR = **94 km**

DATE	PURPOSE	TO/FROM	BUSINESS KILOMETERS
			TOTAL

| | | | | | | | 8 | 3 | 0 | 4 |

AMOUNT

| | | | | | | | 8 | 3 | 0 | 4 |

AMOUNT

GST

VOUCHER

I certify that the kilometers claimed are true and have been claimed in accordance with Selkirk College guidlines for reimbursement as outlined in the appropriate policy and/or collective agreement. This form will be disclosed to the CRA in the event of an audit.

PRINT NAME (MANAGER)

YOUR SIGNATURE (CLAIMANT)

APPROVING MANAGER SIGNATURE