

**Salt Lake Corporation Private Car Use
Mileage Reimbursement Form**

Mileage rate for 2023 is .655 Mileage rate for 2024 is .67

Department: _____ Division _____

Period Begin: _____

Name: _____

Period End: _____

Position: _____

Date	Beginning Mileage	Ending Mileage	Miles Driven	Purpose	\$\$ Amount
Total Miles Driven				X \$.67 per mile =	\$

Affidavit

I certify that the above accounting is true and correct and that travel was on official City business. This form was submitted within 90 days of the first trip reimbursement requested on this form per department policy.

Approved By

Signature of City Employee

Division/Battalion Chief