

Ecumenical Ministries of Oregon

Automobile Mileage and Parking Report

Employee Name _____

_____ Miles @ 0.445 per Mile = \$ _____.

Address _____

Zip Code _____

Parking \$ _____.

Total \$ _____.

Accounting Period:

Beginning _____ Ending _____ Program _____ Account to Charge _____

Date	Odometer Reading	Odometer Reading	Trip	Trip	Trip Purpose	Date	Odometer Reading	Odometer Reading	Trip	Trip	Trip Purpose
	Start	Finish	Mileage	Parking			Start	Finish	Mileage	Parking	

I hereby affirm that the foregoing statement is true to the best of my knowledge and belief.

Total Miles \$ _____.

Employee Signature _____

Approval Signature _____

Total Parking \$ _____.