

Granville County  
STATEMENT OF TRAVEL EXPENSES

NAME \_\_\_\_\_

DATE \_\_\_\_\_

See Granville County Personnel Policy, Article V, Section 21 for travel policy restrictions and current meal reimbursement rates.

<b>SECTION I.</b> <i>Enter your home and work locations and the one-way commuting miles for a normal day. An example is provided.</i>	<b>NORMAL COMMUTE</b>	<b>Total Miles (One-Way)</b>
	<b>One-Way from Home to Work Location</b>	
	<i>123 Any Road, City to 104 Belle Street, Oxford</i>	<i>20</i>

**SECTION II.** Enter each starting and ending travel point on a separate line. If starting or ending at your home location, include the one-way commuting miles in the "Normal Commute (One-Way)" column for all days when you would have commuted to work rather than to the travel location. To calculate the miles eligible for reimbursement, commuting miles must be subtracted from total miles driven. If commuting miles are greater than travel miles, no mileage is eligible for reimbursement.

Enter Start and End Travel Points			Reimbursement Rate (per mile): \$0.655					
	Total Travel Miles (One-Way)	Normal Commute (One-Way)	Total Eligible Miles	Meals*	Other	Total		
Date of Travel	From	To	<small>Enter one way normal commute miles</small>	<small>Subtract normal commute miles from total miles.</small>	<small>Enter eligible meal reimbursements.</small>	<small>Enter other eligible reimbursements</small>	<small>Multiply current rate per mile x total eligible miles. Add meal and other reimbursements.</small>	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
<b>TOTAL REIMBURSEMENT</b>								

\* ONLY meal reimbursement for **overnight travel** can be reported on this form; for reimbursement of non-overnight meal expenses use the "Non-Overnight Travel Reimbursement Form".

I hereby certify that the distances for which charge is made in this statement have been necessarily traveled and that the expenses for which reimbursement is claimed were incurred in the service of Granville County.

\_\_\_\_\_  
Traveler's Signature

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Finance Director/Assistant Finance Director Signature