

# Fiscal Services Mileage Reimbursement Policy and Procedures

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## MILEAGE REIMBURSEMENT POLICY

### PURPOSE

The Purpose of the Mileage Reimbursement Policy is to assist employees in obtaining a reimbursement for mileage driven using a personal vehicle to conduct business on behalf of Morgan Hill Unified School District (MHUSD). MHUSD reimburses for mileage using the current IRS rate.

### BASIC GUIDELINES

1. The current IRS mileage rate effective January 1, 2017, is .535 per mile. Please note: this rate is subject to change.
2. When requesting a reimbursement solely for mileage, please use the newly revised [Mileage Claim Form](#). The Mileage Claim Form is now in a PDF fillable format. You may find the form online at the Morgan Hill Unified School District website's Staff Room, under Business Services. Complete it in detail for each round or one-way trip showing exactly when and where you traveled. Do not combine travel to more than one location on the same line. If your reimbursement request contains other travel expenses, please use the [Travel Reimbursement Claim Form](#).
3. When requesting a mileage reimbursement for travel outside of school district sites, you must attach a Google-map of the distance traveled to the back of the request.
4. When requesting a mileage reimbursement for travel within the school district, you may refer to the [Mileage Chart](#) to determine the mileage distance to record on your reimbursement.
5. Mileage is paid for the distance directly to and from your destination only. If you are departing for your destination from your home address, your starting point will be your place of employment or your home address, whichever is the lesser mileage amount.
6. When attending a conference, mileage is paid to the conference site or hotel. The district will also provide for daily travel between the conference site and the hotel (*if different*) but not to any other area locations.
7. All mileage reimbursement requests must be submitted within 20 days of travel. If you travel frequently on a monthly basis, your due date for submission will be 20 days after the last day of the month

### MILEAGE CLAIM FORM INSTRUCTIONS

#### General Information

1. Enter Employee Information
  - a. Name, Address, City, State, Zip
2. Enter the Budget Account Number(s)
3. Enter the month related to your trips listed on the form.

#### Individual Line Entry

1. Date: Enter the date of the trip.
2. Departure School District Site or Out-of-District Address: Enter the school site name or the address of an out-of-district location. \*

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3. Destination School District Site or Out of District Address: Enter the school site name or out-of-district address. \*
4. OW or RT: Enter either OW (One-Way) or RT (Round-Trip) for each trip.
5. Purpose of Trip: Enter your reason for traveling.
6. Mileage: Enter the mileage distance.
7. Mileage Total: The total reimbursement amount that you will receive for your mileage reimbursement will automatically populate in the mileage total box.

*\*(An out-of-district location requires a Google map to be attached.)*

## **Signature and Approval**

1. Enter Supervisor Name and print
2. Sign on Employee Signature line and date
3. Obtain supervisor signature and date.

## **For Business Use Only**

This section will be used by the Business Department for processing your reimbursement.