



VOUCHER # _____

Local Mileage Request

A valid Auto Use Permission Form must be on file in the Business Office and Defensive Driving Training must be complete before any mileage will be reimbursed.
Send the form through Adobe Sign signature process, then to travel@redwoods.edu, or cc travel@redwoods.edu through Adobe Sign.

EMPLOYEE ID# _____

DATE _____

EMPLOYEE NAME _____

EMPLOYEE SIGNATURE _____

TOTAL MILES _____ X \$.72.5 / MILE = AMOUNT OF REIMBURSEMENT \$ _____

APPROVED BY:

Manager: _____ Signature: _____ Date: _____

Senior Staff: _____ Signature: _____ Date: _____

SUBLEND COST CENTER PROGRAM ACTIVITY OBJECT

FOR BUSINESS OFFICE USE ONLY

DDT Completed: YES NO

Auto Use Form On File:

YES NO

REV 01.2026