Rainbows United, Inc.

MILEAGE REPORT FOR USE OF PERSONAL VEHICLE/TURNPIKE FEES/PERSONAL CELL PHONE USE

Name: _____ Date (Month/Year) _____

Date	Destination	Purpose	Beginning Odometer Reading	Ending Odometer Reading	Miles Driven
				MILEAGE TOTAL	-
				MILEAGE RATE	$ 0.505
				MILEAGE x RATE TOTAL AMOUNT	-

Account 5420

TURNPIKE FEES	DATE		DATE		DATE		DATE		DATE		
	AMOUNT		AMOUNT		AMOUNT		AMOUNT		AMOUNT		TOTAL -

Account 5421

RUI CELL PHONE MINUTES - X APPROPRIATE BOX:										
0-20, $2		21-40, $4		41-60, $6		61-80, $8		81-100, $10		TOTAL -

Account 5281

Total Reimbursement -

Sub Account _____

Employee Signature _____ Date _____

Approved By _____ Date _____

Form No. 23 (Rev. 01/2010)