

UNIVERSITY OF BRITISH COLUMBIA

Department of Educational and Counselling Psychology, and Special Education

Mileage (Kilometers) Claim Form

Name: _____

DATE (mm/dd/yyyy)	FROM / TO Travelled locations	Travelled Distance (km)
TOTAL MILEAGES:		

TOTAL REIMBURSEMENT: @\$0.49/Km X _____ (Km) = \$ _____

Traveller's signature: _____