



The Five Colleges of Ohio

Travel Expense Form

Complete this OH5 Travel Expense Form to request reimbursement for necessary and reasonable mileage/travel expenses incurred while transacting the affairs of OH5. This form reflects the updated mileage rate for travel **January 1, 2023 and after**. Submit the completed form and each receipt/documentation to accounting@ohio5.org within 30 days of the incurred expenses. Please list each trip/receipt on a separate line.

Name: _____ Date: _____

Address Line 1: _____ Email: _____

Address Line 2: _____

City: _____ State: _____ Zip: _____ 2023 Mileage Reimbursement Rate (per mile): _____

Date	Destination	Business Purpose	Personal Auto Mileage	Mileage Reimbursement	Airfare, Taxi, Bus, Train, Auto Rental	Lodging	Meals (list each receipt on a separate line)	Other Enter amount here and explain below	Total
Totals									

Explanation of Other Expenses / Comments:

I certify that the expenses incurred are accurate and necessary for official OH5 business:

Traveler's Signature

Date