

Ministry Mileage Log - 2020

Month/Year: _____

Rev. _____

Employer: _____

<i>Date</i>	<i>Destination</i>	<i>Purpose</i>	<i>Business Miles</i>

Total Ministry Miles _____

x **\$0.575** (2020 Policy Rate) _____

Total Ministry Miles _____

Total Reimbursement _____

Signature _____ Date _____