

**COLORADO STATE UNIVERSITY
MILEAGE LOG – PERSONAL VEHICLES**

Employee Name _____

CSU Number _____

Shop or Team _____

Vehicle License # _____

DATE	DESTINATION	TOTAL DAILY MILEAGE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL MILES: _____

I certify the above reported mileage is correct and was for University Business.

Employee Signature _____

Supervisor Signature _____