

**Parkside Christian Church**  
**Request for Reimbursement of Professional Expenses**  
**Calendar Year 2022**

**NAME:** \_\_\_\_\_ **PERIOD (MO/YR):** \_\_\_\_\_

**MILEAGE EXPENSES**

Date	Description	Start	End	Miles

\*\*\*Additional mileage on back or attached? [check here]

<b>Total Business Miles Driven</b>	_____
<b>x 2022 IRS Mileage Rate</b>	<b>\$ 0.585</b>
<b>= Total Mileage Expense Reimbursed</b>	\$ _____
<b>+ Parking Fees (attach receipts)</b>	\$ _____
<b>= Total Auto Expenses (A)</b>	<u>\$ _____</u>

**MISCELLANEOUS EXPENSES**

Date	Description	Acct#	Amount
			\$ _____
			\$ _____
			\$ _____
			\$ _____
			\$ _____

**Total Misc. Business Expenses (B)** \$ \_\_\_\_\_

**Total Amount Requested (A + B) =====** \$ \_\_\_\_\_

<b>SIGNED:</b> _____	<b>DATE:</b> _____
<b>APPROVED BY:</b> _____	<b>DATE:</b> _____