



**GREENSLATE**

GreenSlate  
150 W. 30th Street, Suite 405  
New York, NY 10001  
(212) 206-1099 tel.  
(212) 206-1070 fax

MILEAGE REIMBURSEMENT FORM

PRODUCTION COMPANY: \_\_\_\_\_

PRODUCTION TITLE: \_\_\_\_\_

EMPLOYEE NAME: \_\_\_\_\_

EMPLOYEE SS#: \_\_\_\_\_

LOAN OUT CORP NAME: \_\_\_\_\_

FEDERAL ID #: \_\_\_\_\_

MILEAGE REIMBURSEMENT WILL BE PAID TO THE UNDERSIGNED EMPLOYEE

FOR THE PRO-RATABLE AMOUNT OF \$ \_\_\_\_\_ PER MILES/DAY

X \_\_\_\_\_ # OF MILES/DAY = \_\_\_\_\_ TOTAL

IF PAYMENTS ARE BEING MADE FOR BUSINESS USE OF EMPLOYEES' VEHICLE, SUCH PAYMENTS **MUST** BE REPORTED BASED ON THE NUMBER OF ACTUAL MILES OF BUSINESS USE. CURRENTLY, SUCH PAYMENTS FOR MILEAGE WOULD BE NON-TAXABLE TO EMPLOYEES, SUBJECT TO A MAXIMUM PAYMENT OF \$. **585 cents PER MILE**. ANY EXCESS OVER IRS LIMIT WILL BE CONSIDERED AS ADDITIONAL COMPENSATION SUBJECT TO ALL WITHHOLDING TAXES.

\*SIGNATURES MUST BE BELOW FOR PAYMENT

DATE	FROM	TO	DESTINATION	MILES DRIVEN

\_\_\_\_\_  
Employee Signature & Date

\_\_\_\_\_  
Authorized Signature & Date