

Mileage Reimbursement Confirmation

Date: [Insert Date]

To: [Employee Name]

[Employee Address]

Subject: Mileage Reimbursement Confirmation

Dear [Employee Name],

We are pleased to inform you that your mileage reimbursement claim submitted on [Insert Submission Date] has been approved. The total amount of [Insert Amount] will be processed for reimbursement.

Details of your mileage claim are as follows:

- Travel Date: [Insert Travel Date]
- Start Location: [Insert Start Location]
- End Location: [Insert End Location]
- Total Miles: [Insert Total Miles]
- Rate per Mile: [Insert Rate]

Please allow [Insert Processing Time] for the reimbursement to appear in your account.

If you have any questions, feel free to reach out to the HR department.

Thank you for your diligence and service.

Sincerely,

[Your Name]

[Your Position]

[Company Name]