How To Set Up Your Own Mileage Calculator Form [1]		Video Tutorial				
Step 1:	Make a Copy of this Spreadsheet (if you haven't made a copy yet, you will need to do so in order to make the changes necessary)					
Step 2:	Run Initial Configuration for Both formRanger and formMule (You may have to do this a couple of times to get the right menu options to show up)					
Step 3:	Assign Form Items to Columns in the formRanger Menu (set the From, To, and Purpose fields to populate from the FormRanger Fields Sheet)					
Step 4:	Set Triggers for Form Refresh in the formRanger Menu (check all boxes and save trigger settings)					
Step 5:	Define Merge Source Settings from formMule Menu (set it up for the Form Responses 1 Sheet)					
Step 6:	Click on Advanced Options in the formMule Menu and then select Copy Down Formulas on Form Submit					
Step 7:	Select Column H for the driving distance formula and then selct paste as values only.					
Step 8:	Change your Home and Office Information in the first Row of Form Responses 1 and then Go into the Mileage Template and Input your Information at the top					
Step 9:	Duplicate the Mileage Template sheet and change the month/yr you would like to make this new sheet for.					
Step 10:	Fill out your form as many times for the month you want to submit mileage for, and then print that sheet as a PDF for signature.					

Timestamp	Date of Travel	Where did you Travel From?	Where did you Travel To?	What was the purpose of your Trip?	Parking Fees?	Month of Reimbursement	Milage	Formula Copy Down Status [2]
7/31/2014 21:09:29	7/31/2014	My Home, 5900 S University Blvd Greenwood Village, CO 80121	My Office, 1860 Lincoln St, Denver,	Going back to my		01/2014	15	Formulas in columns G copied down on 07/31/14 at 10:13:29 PM

	REQUEST FOR MILEAGE REIMBURSEMENT 2014									
					01/201	4				
SC	HOOL/DEPARTMENT	EMPLOYEE'S LE	GAL NAME (TYPE OR P	RINT)	MONTH/	/YR		EMPLOYEE ID		
				1						
STREET	ADDRESS (FOR MAILING)	CITY	STATE	ZIP		EMPL	OYEE'S EMAIL	ADDRESS		
Please X		NURSING				SOCIAL				
one:	FLOATERS	SERVICES		ROTC		SERVICES		OTHER		
DATE (M/D/YRRR)	TRAVEL FROM	DESTINATION	PURI	POSE OF TRI	P	PARKING FEES	MILES (ROUNDED)	RATE [3]	TRIP TOTAL	
	My Home, 5900 S University Blvd	My Office, 1860 Lincoln								
7/31/2014	Greenwood Village, CO 80121	St, Denver, CO 80203	Going back to my office	•			12	0.56	6.92	
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								0.56	0.00	
1								0.56	0.00	
		1	1			TOTAL	40	0.56	00.00	
						TOTAL:	12	10 (AL.	0.92	
I CERTIFY THAT: 1) The mileage as stated above is true and accurate and includes only trips made during the working day in the performance of assigned duties. 2) I carry a minimum of \$50,000/\$100,000 bodily injury liability Automobile insurance. 3) I have a valid COLORADO Driver's License.										
						EMBL OV				
						EMPLOYE	E'S SIGNATUR	E		
	I CERTIFY THAT I HAVE V	ERIFIED THIS EMPLOYEE	HAS CURRENT AUTO I	NSURANCE (COVERAGE AND IS	EMPLOYE	E'S SIGNATUR	eimbursement.		
	I CERTIFY THAT I HAVE V	ERIFIED THIS EMPLOYEE	HAS CURRENT AUTO I		COVERAGE AND IS	EMPLOYE S ELIGIBLE F	E'S SIGNATUR OR MILEAGE R PT. HEAD SIGN	EIMBURSEMENT.		
	I CERTIFY THAT I HAVE V	ERIFIED THIS EMPLOYEE	HAS CURRENT AUTO I		COVERAGE AND IS	EMPLOYE S ELIGIBLE F	E'S SIGNATUR OR MILEAGE R PT. HEAD SIGN	EEEIMBURSEMENT.		
	I CERTIFY THAT I HAVE V	ERIFIED THIS EMPLOYEE	HAS CURRENT AUTO I		COVERAGE AND IS	EMPLOYE	E'S SIGNATUR OR MILEAGE R PT. HEAD SIGN			

Unique From and To	Unique Purposes
	Going back to my office
My Home, 5900 S University Blvd Greenwood Village, CO 80121	
My Office, 1860 Lincoln St, Denver, CO 80203	

[1] Once you are done with these steps, you can hide the FormRanger Fields Sheet and Delete the instructions sheet.

[2] Edit formula copy down preferences in Advanced settings

[3] Rate is determined by IRS Rules. Make sure you have downloaded a current copy of this form from the DPS website.