

**CITY OF RICHARDSON
CERTIFICATION OF BUSINESS MILES DRIVEN**

*(FOR EMPLOYEE WITH CAR ALLOWANCE TAKING IRS TAX DEDUCTION
ATTRIBUTABLE TO BUSINESS MILES DRIVEN)*

I, _____ certify that during calendar
(Employee Name - Please **Print**)

year _____, I drove _____ miles for business.
(Year) (# of Miles)

Signature of Employee

Title and Department

Social Security Number

NOTE:

*This form is needed **ONLY** if an employee who receives a car allowance (reported as taxable income) wishes to take advantage of a reduction in taxable income (on W-2 statements) due to business miles driven. Such a reduction will also reduce TMRS and FICA (Social Security) wages.*