

# WAYNE COUNTY SCHOOLS CAREER CENTER

## MONTHLY MILEAGE REPORT

Name \_\_\_\_\_ Date Submitted \_\_\_\_\_ Month / Year \_\_\_\_ / \_\_\_\_

Date	Mileage	Activities	Persons	Places Visited	Meeting
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.					
22.					
23.					
24.					
25.					
26.					
27.					
28.					
29.					
30.					
31.					

Total Miles \_\_\_\_\_ @ 72.5¢ per mile Amount Due \_\_\_\_\_

Employee Sign: \_\_\_\_\_ Approved Supervisor \_\_\_\_\_

*Mileage reports must be turned into your supervisor by the 1st day of the month following the travel.*