

UNIFIED GOVERNMENT MILEAGE REPORT

For the Period _____, 20__ To _____, 20__

Employee Name _____ Department _____ Office Location _____

If travel is **originated** at the regular **office** location **noted** above, simply mark the column noted 'office, as your starting point.

If travel is **originating** from your last stop (preceding entry 'To'), simply mark the column noted 'travel continuing' as your **starting** point

Circle appropriate day	Date	From (starting point)			To (destination)	Miles Traveled	Tolls & Parking
		Office	Travel Continuing	Other			
		Sun M Tu W Th F Sat					
Sun M Tu W Th F Sat							
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Sun M Tu W Th F Sat							

Certification: I do solemnly swear that the mileage claimed on this report is the true number of miles traveled using my own private vehicle on Unified Government business for the period listed and does not include any commuting mileage

Page _____ of _____ Page total.		
Complete on last page of report Total Reported Mileage Tolls & Parking		

Employee Signature _____ Date _____ Supervisor Signature _____ Date _____