## Plumas Rural Services IHRS Transportation Log Record of Actual Driving Mileage

Employee Name:				Month:		20	, Page #	
License #, Ye	ear & Model: _							
Date	Client	Begin Mileage All #'s	End Mileage All #'s	Total Trip Miles	Trip From (Location)	Trip To (Location)	Describe Trip Purpose	
				For Figael	Dant Usa Onl		es:@ \$0. per m	nile
Provider Signature Date				For Fiscal Dept. Use Only: Account #:Miles:			\$0 mile=	
110,1001 016		Du	2			Miles:	\$0. mile=	
				Account #		Miles:	\$0. mile=	
							\$0. mile=	
Supervisor S	Signature						Totoal Claim: \$	

NOTE: Mail mileage sheets with timesheets, sheets received after the due date will be paid the following pay period.