ADMINISTRATIVE MILEAGE LOG

Sheet _____ of _____

Name:_____ For Month Of: _____

Instructions: Enter the date, your Starting and Stopped Odometer readings. Subtract Start from Stopped for the number of miles traveled. Keep receipt for itemized expense sheet. Enter the destination and who you saw. Lastly enter the code identifying the purpose of the trip.

Providers Food Program

Provider Resources Inc.

Code: HV – Home Visit; **SU** – Sign-Up; **M** – Meeting; **MU** – Menu Collection; **MS –** Miscellaneous

DATE	**ODOMETER READING**		**NO. OF MILES**	**DESTINATION / PERSON**	**Code**
	FROM START	**TO STOP**			
		TOTAL			

FORM NO 9605
1-Jul-96