

**WASHINGTON COUNTY  
DEPARTMENT OF EDUCATION**

**OFFICIAL MONTHLY TRAVEL STATEMENT**

DATE	PLACES VISITED ON OFFICIAL BUSINESS	MILEAGE
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 official mileage for month \_\_\_\_\_  
amount due @ .47 per mile \_\_\_\_\_

I certify that the above is a correct statement of my official mileage covered by  
this report for the month of \_\_\_\_\_

Employee \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Director: \_\_\_\_\_ Date: \_\_\_\_\_