## Career and Technology Education Centers of Licking County
## MONTHLY TRAVEL REPORT

**Name:** _____ **Month** _____

**Title:** _____

**Area:** _____

| DATE | PERSONS OR PLACES VISITED | MILEAGE |
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| DATE | PERSONS OR PLACES VISITED | MILEAGE |
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Total Miles for the Month: 0.000

Signature: _____ Mileage: 0.000 at IRS Rate Per Mile 0.535 0.00

Supervisor's Signature: _____ Date: _____

Director's Signature: _____