Douglas County 4-H Mileage Report

NAME	ADDRESS	CITY	STATE	ZIP

PHONE NUMBER	EXPLANATION OF MILEAGE EXPENSES	DATE(S)

Date of Travel	Departure Time	Arrival Time	Departure City	Arrival City	Vehicle Miles
				TOTAL MILES:	
					x 0.325
				TOTAL:	$

I declare that this account of mileage is true, that it was incurred for a 4-H Youth Development Program using my personal vehicle, and that fuel was paid for by me alone.

CLAIMANT'S SIGNATURE	DATE	COUNTY AGENT SIGNATURE	DATE

Last updated 11/20/2008