



# LOS ANGELES UNIFIED SCHOOL DISTRICT

## DAILY MILEAGE STATEMENT

FOR PRIVATELY-OWNED CARS

		Pay Period:
Employee No.:	Employee Name:	Status:
Location Code:		Location Name:
Program Code:	Fund:	
Round Trip	<u>NOTE:</u> Total mileage claimed must adhere to policies and procedures noted in Bulletin 6873.0.	

### LIST BELOW DAILY TERMINAL POINTS FOR BUSINESS MILEAGE ONLY

Date	Nature of Work	FROM	TO	Total Mileage

Total Miles:

I certify that the mileage shown is School Business Mileage, as defined in Board Rule 1532, and approve same for payment.

Employee Signature:	Principal, Section Head or Administrator:
Date:	Date: