Clark County
FIRE & RESCUE

Form No. 514.10.03
MILEAGE LOG
Created: April 25, 2008

Employee Name _____ Department _____

Position _____ Account Code _____

For Period From: _____ Through: _____

Date	Official Mileage From	Official Mileage To	Miles Traveled	Reason for Travel

Employee Signature _____ Authorization Signature _____

Date _____ Date _____