BURNABY ASSOCIATION FOR COMMUNITY INCLUSION

PERSONAL VEHICLE USAGE LOG

Name _____

Program _____ **Month & Year** _____

DATE	STARTING MILEAGE	ENDING MILEAGE	KM'S DRIVEN	DESTINATION AND PURPOSE OF TRIP

This form is for your personal vehicle usage only. Only include one programme per form. If you have mileage for multiple programmes you must submit a separate form for each programme.

TOTAL KM'S DRIVEN: _____ X **$0.45**= $ _____

Please Pay: _____

(Please print employee name clearly)

Approved by: _____

(Manager\Coordinator\Supervisor)

For Office Use only:

Account # _____

Dept. #: _____