

PRINCE GEORGE COUNTY PUBLIC SCHOOLS

# Travel

Name \_\_\_\_\_ Date \_\_\_\_\_

Date	Nature and Purpose of Travel	Mileage

Signature \_\_\_\_\_

Total Miles \_\_\_\_\_

.58 cents \$ \_\_\_\_\_

Approved \_\_\_\_\_

Superintendent or Designee

Total Expenses \_\_\_\_\_