



**Monthly Mileage Report**

Month:  Previous Month Odometer:   
 Make/Model/Yr:  Plate#:   
 Prepared By:  Agency Code:  774

Date		Describe the business purpose of travel and its benefit to TTUHSCEP	Destination	Driver Last Name	Number of Passengers	Odometer Start	Odometer Finish
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							



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Date	Describe the business purpose of travel and its benefit to TTUHSCEP	Destination	Driver Last Name	Number of Passengers	Odometer Start	Odometer Finish
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

For questions or assistance, please contact the Office of Vehicle Fleet Management at (915) 215-4296. **Month End Odometer:**