ALAY
HOME CARE

# MILEAGE TRACKING FORM

**Instructions**

1. Mileage is to be calculated from the moment the client is in the car.
2. Round miles to the nearest whole number.
3. Email/scan a clear photo to payroll@alayhc.com no later than Monday at 5PM to ensure prompt reimbursement.

**Consumer Name:**________________________________ **Employee Name:**_________________________________

**Individuals Signature:**____________________________ **Employee Signature:** _____________________________

| Date | Destination | | Miles |
|---|---|---|---|
| | From | To | |
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