

PIMA COUNTY MILEAGE REPORT

EMPLOYEE NAME: Naomi Oku-Alonzo
 EMPLOYEE IDENTIFICATION NUMBER: u131681

DEPARTMENT: Board of Supervisors, District 1
 MILEAGE FOR MONTH/YEAR: September 2014

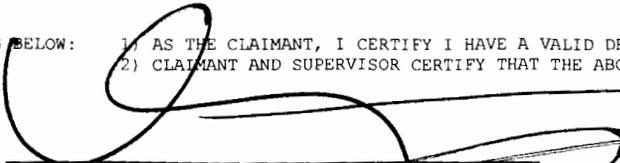
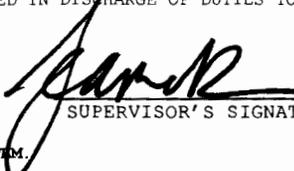
DATE	DEPARTED FROM	BEGINNING ODOMETER	ARRIVED AT	ENDING ODOMETER	ADDRESS *	TOTAL MILEAGE
9/11/14	130 W. Congress	35300	35311	35322	Constituent - 6400 N Placita De Ona Tucson 85741	22
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0

<p>PERSONAL MILEAGE IS DEFINED IN THE LOCAL MILEAGE ADMINISTRATIVE PROCEDURE. TO CALCULATE PERSONAL MILEAGE FOR A COMMUTER THAT HAS A REGULAR WORK PLACE, COMPLETE THE FOLLOWING: ADD THE NUMBER OF DAYS TRAVELED, THEN MULTIPLY THIS NUMBER BY THE REGULAR COMMUTE MILES TO AND/OR FROM YOUR REGULAR WORK PLACE. (10 DAYS X 12 MILES = 120)</p> <p>TO CALCULATE PERSONAL MILEAGE IF YOU DO NOT HAVE A REGULAR JOB SITE, ADD THE NUMBER OF MILES FROM YOUR HOME TO THE FIRST WORK SITE, THEN ADD THE NUMBER OF MILES FROM THE LAST WORK SITE BACK TO YOUR HOME. ADD EACH DAY'S PERSONAL MILEAGE TO OBTAIN THE MONTHLY PERSONAL MILEAGE.</p>	TOTAL MILEAGE	22
	LESS PERSONAL MILEAGE	
	REIMBURSABLE MILES	22

* PUBLIC HEALTH NURSING AND CONSUMER HEALTH AND FOOD SAFETY ARE NOT REQUIRED TO COMPLETE THE ADDRESS COLUMN. DETAILED LOGS ARE COMPLETED AND MAINTAINED BY THE HEALTH DEPARTMENT.

MILEAGE REIMBURSEMENT # OF MILES 22 X RATE \$0.445 = \$ 9.79 + PARKING \$ _____ (ATTACH RECEIPTS) = TOTAL REIMBURSEMENT \$ 9.79

BY SIGNING BELOW: 1) AS THE CLAIMANT, I CERTIFY I HAVE A VALID DRIVER LICENSE, CURRENT VEHICULAR LIABILITY INSURANCE, AND THE VEHICLE DRIVEN HAS CURRENT REGISTRATION.
 2) CLAIMANT AND SUPERVISOR CERTIFY THAT THE ABOVE AMOUNTS ARE CORRECT AND WERE EXPENDED IN DISCHARGE OF DUTIES TO THE BENEFIT OF THE COUNTY.

 CLAIMANT'S SIGNATURE	10/8/14 DATE	 SUPERVISOR'S SIGNATURE	10/8/14 DATE
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THE MILEAGE REIMBURSEMENT WARRANT WILL BE MAILED TO THE HOME ADDRESS ON FILE IN THE PAYROLL SYSTEM.

