

**SEBASTIAN COUNTY EMPLOYEE  
MILEAGE REPORT**

DATE	DESTINATION (PHYSICAL ADDRESS)	Miles	Mileage Rate	Total Expense	REASON FOR TRAVEL
Total Expense					

I, \_\_\_\_\_, do hereby certify that the foregoing claim is for actual expenses incurred in the official performance of my duties for the County of Sebastian, State of Arkansas, and that said claim is just and correct.

Employee: \_\_\_\_\_  
Signature

Approved: \_\_\_\_\_  
Elected Official

Miles are calculated from the employee's primary place of work to the actual destination address.