



A partner in **CTWORKS**

Jobs First Employment Services PARTICIPANT MILEAGE LOG AND SPECIAL BENEFITS REIMBURSEMENT REQUEST

Customer Name:		Address:					
Request Period:	From:	To:			Client ID #:		
Date:	Starting Address <i>Street and City</i>	Destination Address <i>Street and City</i>	Starting Odometer Reading	Ending Odometer Reading	Total Miles	Company Visited	Purpose of Visit
Total Miles Reimbursement Request		Total Miles:	@.20/mile =		\$		

I certify that this is a true record of my travel related to my participation in the Jobs First Employment Services program.

Participant Signature

Date

Case Manager Signature

Date