MONTHLY MILEAGE REPORT

EPISCOPAL DIOCESE OF SOUTH DAKOTA

Name: _____ **Date: _____**

	Odometer Readings		**Nature of Business**	
Date	Start	End	Who/What/Where	Daily Miles

For funerals and wakes, please include the name of the deceased. For weddings, please include the name of the couple and for home communions, please include the name of the primary communicant.

Date Received in Diocesan Office: _____

Revised: May 2014