



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION  
 Student Transportation  
 Old Capitol Building  
 PO BOX 47200  
 Olympia WA 98504-7200  
 Phone: (360) 725-6120 TTY: (360) 664-3631  
<http://www.k12.wa.us/transportation>

**DISTRICT CAR MILEAGE LOG**  
**2019–20 School Year**  
**(optional)**

DRIVER'S NAME (PLEASE PRINT)	DISTRICT CAR NUMBER	MAKE AND YEAR OF VEHICLE	LICENSE PLATE NUMBER	DISTRICT ROUTE NUMBER (IF ANY)	DATE

Mileage logs must be completed in ink by the driver.

Use this form to record any to-and-from school transportation provided with a district motor pool vehicle. See Detailed Guidance for additional information.

START OR STOP LOCATION	STUDENT NAME (When Present)	DESTINATION	TIME	ODOMETER

**NOTICE:**

I verify that the information provided is true and accurate to the best of my ability:

\_\_\_\_\_  
 Driver Signature

\_\_\_\_\_  
 Date

Do not submit this form to OSPI.