TRANSPORTATION ASSISTANCE PAYMENT LOG
Program Year: 2022

Participant Name _____   Approved on: _____

JULY		AUGUST		SEPTEMBER		OCTOBER		NOVEMBER		DECEMBER		JANUARY		FEBRUARY		MARCH		APRIL		MAY		JUNE	
Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount

Program Year: 2023

JULY		AUGUST		SEPTEMBER		OCTOBER		NOVEMBER		DECEMBER		JANUARY		FEBRUARY		MARCH		APRIL		MAY		JUNE	
Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount

Program Year: 2024

JULY		AUGUST		SEPTEMBER		OCTOBER		NOVEMBER		DECEMBER		JANUARY		FEBRUARY		MARCH		APRIL		MAY		JUNE	
Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount	Miles	Amount