Fulton County Partnership, Inc.

ETAP Transportation Journal

Client Name: _____

Address:_____

_____

Week:_____
(Beginning and Ending Dates)

FAX each Friday to :
(717) 485-4505
Before 12:00 Midnight
Then mail original to: PO Box 464, McConnellsburg, PA 17233

Or Bring to:

the Fulton County Partnership Office
22438 Great Cove Road, Suite 102
(The Overly-Raker Building)
Before 3:30 PM

Date	Passenger Name	Odometer Start	Odometer End	Total Miles
Total Miles				

FOR FCPI OFFICE USE ONLY
Miles Reimbursed:
Rate: $
Total Paid:
Check Number:
Check Date:
Approved for Processing:

Employer Name: _____

Employer Address: _____
Street Address

_____
City, State Zip Phone Number

Employer Signature: _____

_____
Driver Signature

By my signature, I certify that the travel dates, miles, & all information listed above are accurate and true. I understand that providing false information could be interpreted as fraud and could lead to prosecution.