

HIDALGO COUNTY, TEXAS DAILY COMMUTING RECORD

FOR THE MONTH ENDING _____ 2011

1. Employee Name: _____
2. Employee Number: _____
3. Social Security #: _____
4. Department Name: _____
5. Department Number: _____
6. Employee Job Title: _____

A Working dates for this month: <small>month / day / year</small>	B # of commuting trips:	C Remarks:

INSTRUCTIONS

1. **COLUMN A**
Working dates for this month: The dates in this column must agree with the dates on the time sheets for this month.
2. **COLUMN B**
Number of commuting trips for date: The number in this column should be based on the number of trips per day. (2 trips per day is the normal amount)
3. **COLUMN C**
REMARKS: Enter a reason for no entry in column B (Annual, sick or comp-time leave; Holiday or Weekend)

I certify that the reported information is correct.

_____ Date

_____ Date

Total Commuting Trips For This Month:

x 1.50 (IRS amount per trip)

Total Amount To Be Added To The Employee's Earnings: \$

This form must be submitted to the County Treasurer's Office, Payroll Division, by 10th of the following month.