# Wheelchair Weekly Log (TRA F011)
## Sacramento City Unified School District

_Driver's Name_                                                          _Vehicle #_

**VERY IMPORTANT:**
If you write down the tenths of miles, be sure to include the decimal point.

| Program | Student Name | Monday Date: Pick up Odometer | Monday Drop off Odometer | Tuesday Date: Pick up Odometer | Tuesday Drop off Odometer | Wednesday Date: Pick up Odometer | Wednesday Drop off Odometer | Thursday Date: Pick up Odometer | Thursday Drop off Odometer | Friday Date: Pick up Odometer | Friday Drop off Odometer |
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Driver's Signature:                                                          Date: