U.S. Postal Service

LOCAL TRANSPORTATION PAYMENTS

Check Type of Payment Covered by this Sheet *(Use separate sheet for each type of payment)*

- ☐ 1. Fares for Established Routes *(Complete Section I)*
- ☐ 2. Fares and Tolls for Other Official Business *(Complete Section II)*
- 3. Payment to Carrier for Use of Vehicle* *(Complete Section II)*
  - ☐ 3a. For travel to a suitable place
  - ☐ 3b. For travel to a comfort stop
  - ☐ 3c. For transporting parcels

Post Office	Station or Unit	Fares Distributed By

SECTION I — ESTABLISHED FOOT ROUTES

If Fares Paid in Cash, State Amount of Money	If Fares Paid by Tokens, State Number of Tokens
$	
Date of Period Covered	Approved By *(Supervisor of Carriers)*

SECTION II — OTHER OFFICIAL BUSINESS OR REIMBURSEMENT

The employees whose signatures appear below, certify that the payments received were used for the purpose stated in 1, 2, or 3 above, and that each trip was made and was necessary.

Date or Period Covered	Name of Employee Print *(Last, first, middle initial)*	Route No.	Number of * Stops			Received *(Employee's Signature)*	Fares or Reimbursements	Tolls
			Lunch	Comfort	Parcels			

Approved By *(Supervisor of Carriers)*	Date	**Totals** ►		

PS Form **1312,** April 1987