# **Travel log for approved treatment and rehabilitation services**

Participants, workers and clients can use this travel log to help record kilometers travelled.

Participant / Worker / Client name:

Participant / Claim number:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | From | To  | Km Travelled | Reason |
| *E.g. 08/07/13* | *Cardiff* | *Newcastle* | *15km* | *Rehab Specialist Appointment* |
|       |       |       |       |       |
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|       |       |       |       |       |
|  | Total kms |       |

Please email your completed travel log together with your completed Expense Claim form to:

care-expenseclaim@icare.nsw.gov.au