VEHICLE USAGE SHEET

DRIVERS NAME	VEHICLE #
DESTINATION 1	
PURPOSE OF TRIP	
DEPARTMENT / PROGRAM #	
OD READING	START DATE OF TRIP
OD READING	END DATE OF TRIP
DESTINATION 2	
PURPOSE OF TRIP	
DEPARTMENT / PROGRAM #	
OD READING	START DATE OF TRIP
OD READING	END DATE OF TRIP
FUELING COSTS (THIS LOG MUST ACCOMPANY ALL RECEIPTS)	
ODOMETER READING AT FUEL	ING
total gallons	total costs
ODOMETER READING AT FUEL	ING
total gallons	total costs
ODOMETER READING AT FUEL	ING
total gallons	total costs
ODOMETER READING AT FUELING	
total gallons	total costs
INCIDENTAL COSTS (Oil, Maintenance, Car Wash, Repairs, etc.)	
DESCRIPTION	COSTS