MONTHLY STATE VEHICLE UTILIZATION AND EXPENSE RECORD
ARKANSAS DEPARTMENT OF AGRICULTURE

OPERATOR NAME: _____ DIVISION: _____ OFFICIAL STATION: _____ Month/Year: _____

YEAR, MAKE, MODEL: _____ LICENSE NUMBER: _____ INVENTORY NUMBER _____ LAST FOUR V# _____

	ODOMETER				TIME		MILEAGE			FUEL PURCHASE			REPAIRS/MAINT.		GRANT INFO	
DATE	BEGIN	END	DESTINATION/ TOWN/ COORDINATES	INITIALS/ CALL#	OUT	IN	TOTAL MILES		VICINITY	GALLONS	COST	NONWEX COST	REPAIRS/ LABOR	COST	PROG	MILES
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									
							-									

MONTHLY STATE VEHICLE UTILIZATION AND EXPENSE RECORD
ARKANSAS DEPARTMENT OF AGRICULTURE

							-								
							-								
							-								
							-								
							-								
							-								
							-								
							-								
							-								
							-								
									0	0	0				0

REMARKS:

SAVA DATA

ENDING MLG - PAGE	0	VERIFY	0 miles in month	NONWEX	0
FUEL	0 Gallons	MAINT/REPAIRS	0	WEX DISC	
Cost *****	0	INSURANCE		TOTAL FUEL	

This form is to be completed and submitted to Accounting/Division Office by the 5th of each month.