Vehicle .todian _____ _____ **VEHI(E USE REPORT** Activity Other Identification Code

(Last) (First) **Monthly**

Report Month_____ 19_____ Vehicle Make_____ Type_____ Year_____ Lic. No._____ Inv. No. EXHIBIT F8

DATE	Previous months odometer / Daily ending odometer or hour meter readings	Miles Driven Primary Fuel	Miles Driven Alt Fuel	Purpose or Program and location in which vehicle was used	Drivers Last Name	Primary Fuel Gallons	Primary Fuel Cost (Total)	Alternative Fuel Gallons	Alternative Fuel Cost (Total)
1							$.		$.
2							$.		$.
3							$.		$.
4							$.		$.
5							$.		$.
6							$.		$.
7							$.		$.
8							$.		$.
9							$.		$.
10							$.		$.
11							$.		$.
12							$.		$.
13							$.		$.
14							$.		$.
15							$.		$.
16							$.		$.
17							$.		$.
18							$.		$.
19							$.		$.
20							$.		$.
21							$.		$.
22							$.		$.
23							$.		$.
24							$.		$.
25							$.		$.
26							$.		$.
27							$.		$.
28							$.		$.
29							$.		$.
30							$.		$.
31							$.		$.
Total Miles				**Total Fuels**			$.		$.

Maintenance and Other Expenses

DAY	Purchase order, Work order, or Invoice #	Maintenance Code: Feature Code	Maintenance Code: Sub-feature Code	Cost (Total)
				$.
				$.
				$.
				$.
				$.
				$.
				$.
				$.
				$.
				$.
				$.
				$.
DAY	**Total Repair Cost**			$.
	Passengers (Art. 146 P.C.)			
DAY	**Driver other than primary**	**Oil other than oil change**		
		DAY	QTS	Cost (Total)
				$
				$
				$
				$

Circle Primary Fuel Used

Gasoline *Diesel*

Circle Alternative Fuel Used

CNG *Propane* *Other*

Methanol *Ethanol-blend*

I certify that I have read the provisions of law quoted on the front page of this form book and that the foregoing report is correct and that the operation and maintenance of this vehicle have been in accordance with lawful orders.

_____ Signature of Custodian