**CITY OF BRAZIL**

DAILY TRIP SHEET

| Truck/Car No. (if applicable) | Year: | Make: | License No.: | Supervisor Signature: |
|---|---|---|---|---|
| | | | | |

| DAY | DRIVER | TRIP ORIGIN | TRIP DESTINATION* | FUEL (IN GALLONS) | ODOMETER READING BEGINNING | ODOMETER READING ENDING | TOTAL DAY MILES | DRIVER INITIALS |
|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
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| 28 | | | | | | | | |
| 29 | | | | | | | | |
| 30 | | | | | | | | |
| 31 | | | | | | | | |

MONTH OF: _____ TOTAL FUEL _____ TOTAL MILES: _____

ENGINE HOURS: _____ *applicable only when driven outside Clay County