Current
Month/Year:____________________________
License #:_______________________________
Vehicle
Make/Model:_____________________________

OHIO UNIVERSITY

DAILY VEHICLE USAGE LOG

Department
Name:__________________________________
Next Preventative Maintenance Due Date:
Date:___________________________________
Mileage:________________________________

Date:	Destination/Purpose:	Time:		Mileage:		Total Miles Traveled:	Driver:	Comments:
		Out	In	Out	In			