Form 190041
12-06

TRIP RECORD

Carrier Name_____ Unit Number_____

Address _____ Fuel ☐ Diesel ☐ Gasoline ☐ Other

CONTINUOUS MONTHLY MILEAGE RECORD

Beginning Odometer Reading _____ Ending _____ Difference _____

Origin	Date	Highways Traveled	Miles by Jurisdiction										Destination
			Iowa										
		Total Miles											

- Retain all ORIGINAL copies of fuel tickets
- Show total miles, routes of travel, and miles by jurisdiction
- Complete all information on this page
- Odometer difference and total jurisdictional miles should agree

Attachment A-2

SAMPLE