# VEHICLE MAINTENANCE LOG

Department: _____

MONTH: Jan. Feb. March April May June July Aug. Sept. Oct. Nov. Dec.

YEAR: 2009 2010 2011 2012 2013 2014 2015

| Date of Service: | Vehicle Being Serviced: | Type of Maintenance: | Cost of Service: |
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***Please complete monthly and mail by the 10th of the following month to FCDPS, 1488 Franklin St, Rocky Mt., VA 24151 or fax to 540-483-3086.** *Please send whether there is vehicle maintenance or not.