

Vehicle Mileage Log

Name: _____ Vehicle: _____

Pre-Trip Inspection		
Brakes	Fluids	Tire - pressure
Lights	Antifreeze	Tire-spare
Wipers	Oil	First aid kit
Engine Belts	Transmission	Flashlight
Heater	Brake	Flares
Defroster	Power steering	
Battery	Windshield	

Date (dd/mm/yyyy)	Pre-trip (✓)	From	To	Odometer Reading		Mileage
				Start	Finish	
/ /	<input type="checkbox"/>					
/ /	<input type="checkbox"/>					
/ /	<input type="checkbox"/>					
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