

AFC Unit_____

TR-1A

ARKANSAS FORESTRY COMMISSION PRIVATE AUTOMOBILE MILEAGE REPORT

EMPLOYEE _____ AASIS# _____

OFFICIAL STATION _____ VEHICLE LICENSE PLATE # _____

[illegible]

I certify the above mileage is accurate official duty travel.

Employee's signature _____ Title _____ Date _____

Supervisor approval _____ Title _____ Date _____