IFTA FUEL TAX DRIVER TRIP REPORT FORM Save this form to your computer. Use it to keep track of your miles and fuel purchases for the month. At Month end, Print the completed Trip Report form, Sign and fax it to - TRUCKTAX. Toll-Free: (866) 323-8250 UNIT# CARRIER-TRUCKER NAME TRIP END DATE TRIP START DATE TRIP END CITY TRIP TURNAROUND CITY AND STATE- or PROVINCE **BEGINNING ODOMATER ENDING ODOMETER** WAS YOUR TRIP DISTANCE IN MILES OR KILOMETER TOTAL MILES OR TRIP KILOMETERS for TRIP MILES KILOMETER ON TOLL TRIP ROUTE OR HIGHWAYS USED STATE OR PROVINCE NOTES TO SERVICE PROVIDER TRIP DATE CD Miles ROADS RECORD O THIS EL PURCHASES FUEL PURCHASL | JEL . RCHASE GALLONS LITRES COST IN COST IN US FUNDS VENDOR NAME STATE/PROV **PURCHASED PURCHASED** CANADIAN FUNDS

Driver Signature or Individual Submitting this Information



4261-highway 7, East, Suite 885, Markham Ontario L3R 9W6 Canada

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