

STATEMENT OF PERSONAL USE OF COUNTY OWNED VEHICLE

EMPLOYEE IDENTIFICATION

Name: _____ Emp No: _____
SS No: _____ DL No: _____

VEHICLE IDENTIFICATION

Make _____ Model: _____
Vin No: _____ Year: _____
Date vehicle was made available: _____

If you have had personal use of more than one vehicle this year, please complete separate forms on each.

MILEAGE INFORMATION

Odometer reading as of first day of this year's use: _____

Total miles driven: _____ Total personal miles driven: _____

Was the vehicle used for commuting? _____ What is the distance, one way, from your home to your work site? _____

Was the vehicle available for use in off duty hours? _____

Do you have adequate records or sufficient written evidence to support the business use claimed for the vehicle _____ (The accountant suggests that you attach a copy to this form).

EMPLOYEE'S STATEMENT OF VERIFICATION

I verify that the information given above is a true and accurate statement to the best of my knowledge and I submit this information to my employer to be used for calculation of the value of personal use of an employer furnished vehicle for the purposes of reporting said value to the Internal Revenue Service and the Social Security Administration.

Employee's Signature

Date

DEPARTMENT HEAD OR ELECTED OFFICIAL'S STATEMENT

I confirm that this information is true to the best of my knowledge and further state that I have no knowledge of any additional information that should be reported to Washington County for use in computing the valuation of the personal use of this county owned vehicle.

Official's Signature

Date

