**State of Illinois**
Department of Central Management Services

Division of Vehicles
# Trip Log

Month/Year: _____ Equipment Number: _____ License Number: _____

| Date | Driver's First and Last Name | Beginning Mileage | Ending Mileage | Number of Passengers | From | To |
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https://bit.ly/2TL7AhL

**CMS**
Illinois Department of
Central Management Services

**Division of Vehicles**
**(217) 782-2536**
https://bit.ly/2TL7AhL

https://bit.ly/2HSi5yi

**After-Hours Emergency Roadside Assistance**
**(800) 782-7860 (in Illinois) or (217) 782-7860 (Out-of-State)**
**In Event of an Accident, Call 9-1-1**
This vehicle is self-insured by the State of Illinois

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