P. M.189 E.
(Wt.) (Men)

## FROM B

Vehicle :_____ Reg No. : _____ Police No. : _____Carrying capacity :_____ Load : _____

| Date | Driver's Name and Buckle No. | Journey | | Time | | Milometer Reading | | Mileage | Purpose of Jurney | No. of Men/ goods carried (excluding driver) | Signature and designation (in full) of user | Remarks (if any) and Signature of Gazetted Checking Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | From | To | From | To | Befor Journey | After Journey | | | | | |
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