

Company/Trust Name: _____

Motor Vehicle Odometer Record at 31 March 20				
	Make & Model	Reg'n No.	Odometer Reading	Name of person who drives the car
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Signed:

Date:

Return completed form to Wardle Partners Pty Ltd

- Email: info@wardlepartners.com.au
- Fax: (07) 5491 1067
- Post: PO Box 231, Caloundra QLD 4551