OREGON DEPARTMENT OF TRANSPORTATION
COMMERCE AND COMPLIANCE DIVISION
3930 FAIRVIEW INDUSTRIAL DRIVE SE
SALEM OR 97302-1166

FLAT MONTHLY REPORT CONTINUATION SHEET

INSTRUCTIONS: This continuation sheet must be attached to your MOTOR CARRIER FLAT MONTHLY TAX REPORT and should be used only when additional space is required for listing additional vehicles . You must use your approved fee basis.

CCD ACCOUNT NUMBER	NAME OF CARRIER	PERIOD OF OPERATION

A LICENSE PLATE OR PASS NUMBER	B STATE/ PROV.	C UNIT NUMBER	D OREGON DECLARED WEIGHTS	MONTHLY ODOMETER READINGS		G TOTAL MILES OPERATED (F-E)	H PRIVATE RD & OUT-OF-STATE MILES	I OREGON PUBLIC ROAD MILES (G-H)	J NO. OF AXLES >80000	K ENTER C- CHIP D - DUMP L -LOG	L FLAT MONTHLY FEE
				E BEGINNING	F ENDING						

FORM 735-9189a (3-20)

A LICENSE PLATE OR PASS NUMBER	B STATE/ PROV.	C UNIT NUMBER	D OREGON DECLARED WEIGHTS	MONTHLY ODOMETER READINGS		G TOTAL MILES OPERATED (F-E)	H PRIVATE RD & OUT-OF-STATE MILES	I OREGON PUBLIC ROAD MILES (G-H)	J NO. OF AXLES >80000	K ENTER C- CHIP D - DUMP L -LOG	L FLAT MONTHLY FEE
				E BEGINNING	F ENDING						