

## MOBILE VENDOR 'S MONTHLY AUDIT OF COMMISSARY VISITS

Mobile Truck Name:

Vehicle License Plate#:

By signing the block after the day of the month, the commissary operator certifies that the above licensed and permitted mobile food vehicle was serviced (cleaned inside, potable water loaded, and dirty water emptied) at the approved commissary on the date signed.

Month of \_\_\_\_\_, 20\_\_\_\_\_

| Day of Month | Commissary Operator's Printed Name | Commissary Operator's Signature |
|--------------|------------------------------------|---------------------------------|
| 1            |                                    |                                 |
| 2            |                                    |                                 |
| 3            |                                    |                                 |
| 4            |                                    |                                 |
| 5            |                                    |                                 |
| 6            |                                    |                                 |
| 7            |                                    |                                 |
| 8            |                                    |                                 |
| 9            |                                    |                                 |
| 10           |                                    |                                 |
| 11           |                                    |                                 |
| 12           |                                    |                                 |
| 13           |                                    |                                 |
| 14           |                                    |                                 |
| 16           |                                    |                                 |

| Day of Month | Commissary Operator's Printed Name | Commissary Operator's Signature |
|--------------|------------------------------------|---------------------------------|
| 17           |                                    |                                 |
| 18           |                                    |                                 |
| 19           |                                    |                                 |
| 20           |                                    |                                 |
| 21           |                                    |                                 |
| 22           |                                    |                                 |
| 23           |                                    |                                 |
| 24           |                                    |                                 |
| 25           |                                    |                                 |
| 26           |                                    |                                 |
| 27           |                                    |                                 |
| 28           |                                    |                                 |
| 29           |                                    |                                 |
| 30           |                                    |                                 |
| 31           |                                    |                                 |

This form must be available for auditing by the HFSO during all times that your mobile food vehicle is operating. Failure to maintain this form in the mobile food vehicle may result in suspension or revocation of your mobile food vending permit.





