

Respondent Name:

[Green Bar]						
[Light Blue Bar]						
State Class	ACRIS Code	Example Vehicle(s) Mile/Model	Daily Rate	Additional Hus Rate	Weekly Rate	Monthly Rate
		[Light Blue Cell]	[Yellow Cell]			



Respondent Name:

Asst Budget Group:

State Contracted Classes Effective Minimum Rates

[Green Bar]						
[Light Blue Bar]						
Vehicle Class	ACRIS Code	Proposed Vehicle(s) Make/Model	Daily Rate	Additional Hours Rate	Weekly Rate	Monthly Rate
		[Light Blue Cell]	[Yellow Cell]			