

Department of Administration
OFFICE OF ACCOUNTS AND CONTROL

**ANNUAL STATEMENT OF PERSONAL USAGE FOR STATE PROVIDED VEHICLES
ANNUAL LEASE VALUE METHOD**

SECTION A: DRIVER AND VEHICLE INFORMATION

EMPLOYEE NAME (PLEASE PRINT) _____ SOCIAL SECURITY #: _____
(11 DIGITS)

AGENCY _____ PAYROLL ACCOUNT #: _____

PERIOD COVERED: FROM _____ TO: _____

MAKE / MODEL / YEAR _____ REGISTRATION NO. _____ VEHICLE FAIR MKT. VALUE _____

SECTION B: CALCULATION OF FRINGE BENEFIT AMOUNT

_____ MINUS _____ = _____
TOTAL MILES PERSONAL USAGE MILES BUSINESS MILES

_____ X _____ ÷ _____ = _____
ANNUAL LEASE VALUE BUSINESS MILES TOTAL MILES % BUSINESS USE

GASOLINE CALCULATION 5.5 CENTS X _____ = _____
OR NO. OF PERSONAL MILES AMOUNT OF GASOLINE

_____ X _____ = _____
TOTAL COST OF GASOLINE % OF PERSONAL MILES AMOUNT OF GASOLINE
(100% MINUS BUSINESS USE%)

_____ MINUS _____ PLUS _____ PLUS _____
= ANNUAL LEASE BUSINESS USE AMOUNT OF CHAUFFEUR
VALUE (ALV) (BUS. USE % X ALV) GASOLINE AMOUNT

\$ _____ MINUS _____ = \$ _____
GROSS TAXABLE FRINGE COMMUTER REIMBURSEMENT NET TAXABLE FRINGE
AMOUNT (VEHICLE USE)

TO EMPLOYEE:

Complete and sign this form in duplicate and return to your payroll office. If more than one vehicle is used under this method, complete separate form A-95b for each vehicle.

Employee's Signature / Date

NOTE: Under the annual lease value method, employees are required to furnish to the employing agency substantiating evidence used to arrive at the personal and business miles.