



REQUEST FOR USE OF COLLEGE VEHICLE

TYPE OF VEHICLE _____ ESTIMATED MILEAGE _____

EMPLOYEE _____ # OF PEOPLE TRAVELING _____

PURPOSE OF TRAVEL _____

ITINERATY _____

Date & Time Vehicle Will Be Picked Up: _____

Date & Approx Time Vehicle Will Be Returned: _____

DIV/DEPT TO BE EXPENSED _____ PROJECT # _____

SPECIAL INSTRUCTIONS _____

FOR PLANT OPERATIONS USE ONLY				
Date	Beginning Odometer Reading	Ending Odometer Reading	Mileage	Vehicle #
		Total Miles		

FOR BUSINESS OFFICE USE ONLY	
Account Expensed:	_____
Amount Expensed:	_____ miles X \$ _____ /mile = \$ _____
	Less gas purchased (_____)
	TOTAL EXPENSE \$ _____