

**REID STATE TECHNICAL
COLLEGE 2010 FORD Focus
TRANSPORTATION VOUCHER**

Date of request: _____ Date needed: _____

Requested by: _____
Name Title

Driver: _____ Driver License#: _____

Requested for: _____ Number of passengers: _____
(Recruiting, conference, teaching, etc.)

Destination: _____ Number of miles one way: _____

Departure time: _____ a.m. _____ p.m. Time returning: _____ a.m. _____ p.m.

I do hereby acknowledge that the above schedule will be adhered to (unless an emergency arises) and that I will obey all traffic laws while operating the motor vehicle. The vehicle will be used for Reid State purposes only, and no other driver will drive the assigned vehicle during this trip. KEYS WILL BE TURNED IN UPON MY RETURN. ACCIDENTS MUST BE REPORTED IMMEDIATELY TO THE NEAREST POLICE DEPARTMENT, MR. JEFF RHODES (BUSINESS OFFICE), AND TO THE INSURANCE COMPANY (SEE NAME AND ADDRESS IN GLOVE COMPARTMENT OF VEHICLE).

State gas card requested

State gas card not requested

Employee (Driver) Signature

President

Complete this checklist prior to your trip. If assistance is required, request maintenance (Mr, Grace) to complete the checklist:

____ Gas ____ Oil ____ Lights ____ Tires Odometer reading _____

Driver's initials ____ or Maintenance initials ____

Complete this section upon return to campus:

List any problem areas needing attention (tires, gasoline, dashboard lights, etc.) _____

Driver's initials _____

Odometer reading _____

REID STATE TECHNICAL COLLEGE
2015 FORD FUSION
TRANSPORTATION VOUCHER

Date of request: _____ Date needed: _____

Requested by: _____
Name Title

Driver: _____ Driver License #: _____

Requested for: _____ Number of passengers: _____
(Recruiting, conference, teaching, etc.)

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Employee (Driver) Signature

President

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Gas ___ Oil ___ Lights ___ Tires _____ Odometer reading _____

Drivers initials ___ or Maintenance initials _____

Complete this section upon return to campus!

List any problem areas needing attention (tires, gasoline, dashboard lights, etc.) _____

Drivers initials _____ Odometer reading _____

REID STATE TECHNICAL COLLEGE
2019 FORD FUSION
TRANSPORTATION VOUCHER

Date of request: _____ Date needed: _____

Requested by: _____
Name Title

Driver: _____ Driver License #: _____

Requested for: _____ Number of passengers: _____
(Recruiting, conference, teaching, etc.)

Destination: _____ Number of miles one way: _____

Departure time: _____ a.m. _____ p.m. Time returning: _____ a.m. _____ p.m.

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Odometer reading _____