

Reed College
Campus Vehicle Reservation Form

Date: _____

Part 1

Organization/Residence: _____

Destination: _____

Date(s) Vehicle _____ Depart at: _____ am/pm

Needed: _____ Return at: _____ am/pm

Van: ☐ Gray Fund-I ☐ Gray Fund-II ☐ Lift ☐ White ☐ Silver ☐ White
 024 CFG 117 DQU 207 CYV 023 CFG 208 CYV 210 DZM

Driver: _____ Phone No: _____

Person Responsible: _____ Phone No: _____

Payment From: ☐ Departmental Funds - Budget No: _____

Departmental Approval: _____

☐ Residence Hall Social Fund - Budget No: _____

Residence Life Approval: _____

Part 2

Van: ☐ Gray Fund-I ☐ Gray Fund-II ☐ Lift ☐ White ☐ Silver ☐ White
 024 CFG 117 DQU 207 CYV 023 CFG 208 CYV 210 DZM

Trip Log

Driver: _____

Starting Odometer Reading: _____ Return Odometer Reading: _____

Number of Passengers: _____

Gas and Oil Purchases: (Last four digits of credit card)

Chevron Gas Card: _____ Amount: \$ _____

Shell/Texaco Gas Card: _____ Amount: \$ _____

Cash/Personal Charge Card: _____ Amount: \$ _____

Name: _____

Signature of Driver: _____

Part 3

Office use only

Beginning odometer reading _____

Ending odometer reading _____

Mileage x _____ ¢.75= \$ _____

Total charge \$ _____