

Facilities Management - Internal UNM Vehicle Request Form

COMPLETE AND SUBMIT REQUEST AT LEAST ONE WEEK PRIOR TO TRAVEL

OOMIT E		D CODIN	TREGOEST AT EEAST ONE WEEKT KICK TO TRAVEE
Date Submitted			
Date you will pick up	the vel	nicle	
Name(s) of individua operating the vehicle		o will be	
Cell number(s)			
E-mail address(s)			
Date of departure			
Approximate time of	departu	ıre	
Date of return			
Approximate return time			
Destination			
Purpose of Travel			
Billing Index			
Note: All receipts for fuel (If UNM Vehicle.	applicat	ole) and e	nding mileage must be submitted to Facilities Management Dept. upon return of
Signature of Traveler:			Date:
			FACILITIES OFFICE USE ONLY
Vehicle Issued:			Vehicle Request Date:
Return Date:			Cost Per Mile: <u>.45</u>
Ending Mileage:			Total Miles:
	YES	NO	Index Billed:
Fuel Card Requested:			Total Charge to Dept.: \$
Fuel Card Returned:			
Fuel Receipts Turned In:			
Signature:			Date: