

**GUSTAVUS ADOLPHUS COLLEGE**  
**VEHICLE AUTHORIZATION AND INVOICE # \_\_\_\_\_**

**Part 1 and Part 2 must be completed before a vehicle can be picked up. Minimum Charge - \$25.00.**  
 Additional Charges: Removal of Seats - \$15.00, Late Return - \$15.00/day, Minimum Clean-Up - \$25.00.  
**Switchboard Hours for Key Pickup: Monday – Friday, 8:00 AM – 4:00 PM.**

**1. AUTHORIZATION:**

<b>Department to be Charged:</b>	<b>Authorized Driver(s):</b>
<b>Purpose of Travel:</b>	<b>Destination:</b>
<b>Departure DAY &amp; Date:</b> _____ <b>Time:</b> _____	<b>Account # to be Charged:</b>
<b>Return DAY &amp; Date:</b> _____ <b>Time:</b> _____	<b>Account # to be Credited:</b> <div style="text-align: right; border: 1px solid black; padding: 2px;"><b>00-63600000-76000</b></div>
<b>Trip Authorization Signature:</b> _____	<b>Position/Contact #:</b> _____

**2. DISPATCHING:**

Vehicle Number: _____	Type: _____
Dispatcher Signature: _____	Date: _____
Keys Checked Out By: _____	Date: _____ Time: _____

**3. DRIVER – PLEASE COMPLETE ITEMS IN BOLD PRINT.**

**PRE-DRIVE SAFETY CHECK:** \_\_\_ Fuel \_\_\_ Lights \_\_\_ Tires \_\_\_ Wipers  
**Vehicle Damage/Condition notes:**

~ALWAYS LOCK THE VEHICLE WHEN UNATTENDED!!!! The College is not responsible for lost or stolen items.

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<b>BEGINNING Mileage:</b> _____	
<b>RETURN Mileage:</b> _____	Miles Driven: _____
* Leave this invoice in the vehicle on seat.	
<b>Keys Returned By:</b> _____	<b>Date:</b> _____ <b>Time:</b> _____
<b>Please note any vehicle problems*:</b>	

**4. BILLING**

_____ X _____ Miles/Cents: (or minimum charge)	\$ _____
Additional Charges:	\$ _____
<b>TOTAL CHARGE:</b>	<b>\$ _____</b>

**In case of Emergency/Incident: Call Campus Safety at (507) 933 – 8888 (24 Hours/Day) \***  
*Accident/Incident Forms are located in the vehicle and online at the Motor Pool website. Please fill out and return to Campus Safety w/in 24 hours.*