














EASTERN ILLINOIS
UNIVERSITY

VEHICLE REQUEST ----MILEAGE REPORT DEPT PHONE #  _____

TO BE COMPLETED BY REQUESTING DEPARTMENT				I HEREBY CERTIFY THAT I AM DULY LICENSED TO DRIVE MOTOR VEHICLES IN THE STATE OF ILLINOIS.	
DATE	TIME	DATE	TIME		
F R O M		T O			
UNIVERSITY DEPARTMENT OR ACCOUNT TO BE CHARGED				X DRIVER'S SIGNATURE	
/ 					
TYPE VEHICLE REQUESTED		NO. OF OCCUPANTS		TO BE COMPLETED BY DISPATCHER'S OFFICE	
 SEDAN	MINI VAN	STUDENTS	STAFF 		
STA.WGN	VAN			VEHICLE <input type="checkbox"/> IS AVAILABLE <input type="checkbox"/> NONE AVAILABLE	
DRIVER'S NAME 		DESTINATION 			
OPERATOR'S LICENSE NO. 		EXPIRATION DATE 		DISPATCHER	
REASON FOR TRIP: 				VEHICLE NO.	CREDIT CARD ISSUED
AUTHORIZED BY (SIGNATURE OF DEPT. HEAD OR FISCAL AGENT) 				MILEAGE IN _____ DATE _____	
				MILEAGE OUT _____ DATE _____	
				MILEAGE USED	RATE