



# Employee Use of University Vehicle

ROUTING  
Treasury Services  
MSC CAR  
treassvcs@nmsu.edu  
Phone 646-8122

If more than one vehicle was used during the quarter, complete a form for each vehicle. For questions call Treasury Services at (575) 646-8122.

## SECTION 1: REQUESTOR INFORMATION

Date (mm/dd/yyyy): \_\_\_\_\_ Employee Name: \_\_\_\_\_ Aggie ID: \_\_\_\_\_

Department: \_\_\_\_\_ E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## SECTION 2: REQUEST DETAILS

- |                                  |   |                         |
|----------------------------------|---|-------------------------|
| <b>Quarter Ending:</b>           | <b>Period Covered by Report:</b>            | <b>Report Due Date:</b> |
| <input type="checkbox"/> January | <input type="checkbox"/> Nov 1 - Jan 31     | February 10th           |
| <input type="checkbox"/> April   | <input type="checkbox"/> Feb 1 - April 30   | May 10th                |
| <input type="checkbox"/> July    | <input type="checkbox"/> May 1 - July 31    | August 10th             |
| <input type="checkbox"/> October | <input type="checkbox"/> Aug 1 - October 31 | November 10th           |

Vehicle Make: \_\_\_\_\_ Vehicle Model: \_\_\_\_\_ Vehicle Year: \_\_\_\_\_

Vehicle was first available for use: \_\_\_\_\_

Did the University provide the gasoline used in the vehicle?  Yes  No

If Yes - was it:  Reimbursed  Charged to University  Provided at University Pump

**Vehicle Used** From: \_\_\_\_\_ Odometer Reading: \_\_\_\_\_

To: \_\_\_\_\_ Odometer Reading: \_\_\_\_\_

Total Miles Driven for the Period: \_\_\_\_\_

Total Business Miles: \_\_\_\_\_

Total Commuting\* Miles: \_\_\_\_\_

Total Other Personal Miles: \_\_\_\_\_

*\*Commuting miles are distances traveled between your residence and your regular business location(s).*

Comments:

## SECTION 3: REQUESTOR APPROVAL

I certify, to the best of my knowledge, that this is my business/commuting/personal use of this vehicle for the period presented and that I have adequate records to support this claim.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reset