



CHURCH OF THE REDEEMER BAPTIST

VAN TRANSPORTATION REQUEST

DATE OF REQUEST: _____

REQUESTER: _____

MINISTRY: _____

DATE NEEDED: _____

PURPOSE: _____

DEPARTURE TIME: _____ RETURN TIME: _____

TOTAL NUMBER OF HOURS NEEDED: _____

DESIGNATED DRIVER: _____

APPROVAL: _____

INSPECTION OF VAN BY: _____

LICENSE NUMBER: _____

BEFORE USE AFTER USE

ODOMETER _____ ODOMETER _____

VAN CLEAN _____ VAN CLEAN _____

GAS TANK _____ GAS TANK _____

KEYS AVAILABLE _____ KEYS AVAILABLE _____

CONDITION OF VAN: _____
