



# City of Coral Gables GAS CARD REQUEST FORM

Reference: Personnel Rules & Regulations - Rule 28

<b>Traveler</b>	This Travel Request is for: <input type="checkbox"/> Employee <input type="checkbox"/> Other (Specify):		
	Name:	Title:	Employee Number:
	Department:	Division:	
<b>Travel Data</b>	Purpose of Travel:		
	Destination From:	Destination To:	City Vehicle Number:
	Date and Time of Departure:	Date and Time of Return:	Working Days Absent:
<b>Certification/Approvals</b>	<b>Certification</b>		<b>Approvals</b>
	I certify that the gas card(s) requested will only be used to fuel the city-owned vehicle. I understand that failure to comply may result in disciplinary action up to and including termination of employment.		
	_____		Department Director _____ Date _____
	Traveler _____ Date _____	Finance Director _____ Date _____	
<b>Gasoline Card(s) Issued/Returned: To be completed by Finance Department Cashier</b>			
<b>Card(s) Issued</b>	Gas Card Company: _____		Account Number: _____
	Gas Card Company: _____		Account Number: _____
	The above cards will be returned on or about (Date): _____		
	Traveler Signature _____	Date _____	
<b>Card(s) Returned</b>	Returned By _____		Date _____
	Accepted By _____		Date _____