RESEARCH CORPORATION
OF THE UNIVERSITY OF GUAM

FOR RCUOG ACCOUNTING DEPT ONLY	
VENDOR ID:	
BRV:	
AUTHOIRZED AMOUNT:	
EFFECTIVE DATE:	

AUTHORIZATION FOR USE OF PRIVATE VEHICLES ON OFFICIAL BUSINESS

Driver's Name: _____

Employee Position Title: _____

END TERM DATE: **09/30/2026**

Expiration Date of Vehicle Registration: _____

Insurance Provider: _____

Estimated Total Miles in Dollars: $_____(_____Total number of miles x $0.725)

Justification/Reason for using Private Vehicle:

G.L Account Number: _____

Attachment Checklist: (*Items listed below must be current and attached with this document*)

☐ Vehicle Registration ☐ Insurance Policy ☐ Driver's License

Approval:

Principal Investigator (*Print Name*)	Signature	Date
Dean/Director (*Print Name*)	Signature	Date
Certifying Officer (*Print Name*)	Signature	Date

RCUOG is an EEO Employer and Provider
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