

# Pace Shuttle Vehicle Program Monthly Report

Month Reporting: \_\_\_\_\_, 2009

Agency \_\_\_\_\_ Van # \_\_\_\_\_ Pool # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Days Van Used \_\_\_\_\_

Total Trips Provided \_\_\_\_\_

Assigned  
Van #

Loaner #

Loaner #

## I Mileage

A. 1 Ending Odometer Reading					
2 Beginning Odometer Reading	-	-	-		
3 Total Miles Traveled		+		+	
				=	A <u>          </u>

## II Revenue (due Pace)

A. Late Fee - if report mailed after 5th of current month. Add \$7.00 A \$          

## III Expenditures

Original receipts for out-of-pocket expenses must be submitted. \_\_\_\_\_

A. Gasoline \$ \_\_\_\_\_ Explanation \_\_\_\_\_ B           

B. Other \_\_\_\_\_ C           

C. **TOTAL EXPENDITURES (A + B + C)** D \$          

**BALANCE: Payable to Pace (if Line IIA > Line IIID) or  
Amount Due Agency (if Line IIID > Line IIA)**

\$