



Passenger and Transit Voucher Form / Forma de Pasajero y Vale de Transito

last 4 of PIN # _____
(Ultimos 4 Numeros de PIN)

Van: <input style="width: 100%;" type="text"/>	Crew/Job: <input style="width: 100%;" type="text"/>	Authorized Driver / Conductor Autorizado: <input style="width: 100%;" type="text"/>	Year/ Ano: <input style="width: 100%;" type="text"/>									
For Week of: <input style="width: 100%;" type="text"/>	to / Hasta <input style="width: 100%;" type="text"/>	Total Weekly Miles / Total de Millas Semanal <input style="width: 100%;" type="text"/>	I accept the Minimum usage of 40 miles per day or \$270 Weekly Charge Acepto el mínimo uso de 40 millas por día o \$270 de cargo semanal.									
Start Mileage / Milaje Inicio: <input style="width: 100%;" type="text"/>	Final Mileage / Milaje Final: <input style="width: 100%;" type="text"/>	Employer Voucher/Vale de Empleador? If so, please complete this section. NO [] YES / SI []										
Starts Monday/ Comienza Lunes: 12:00am Stops Sunday/ Para Domingo: 11:59pm		This voucher is being provided by the following company: <input style="width: 100%;" type="text"/>										
Company Address: <input style="width: 100%;" type="text"/>		Signature of Individual Authorizing Payment: <input style="width: 100%;" type="text"/>										
What van are you driving? / En que van anda? →→→		The company providing this voucher has entered in to an agreement with CalVans to submit payment to CalVans for all vouchers submitted on behalf of their employees. This Transit Voucher is being offered to employees for ride-sharing purposes on a California Vanpool Authority vanpool operating under the provision of Internal Revenue Code (IRC), Section 132(f) that permits an employer to subsidize employees' cost of commuting to work by a public transit entity.										
Please note van's odometer mileage daily/ →→→ Anote el millaje de su odometro diario		The Transit Voucher must be completed in its entirety to be valid and is Non-transferable. CalVans assumes NO responsibility for lost Transit Vouchers. Questions? Contact the California Vanpool Authority, 1340 North Drive, Hanford, CA 93230 Call: (866) 655-5444 Email: calvans@co.kings.ca.us										
Different Driver Today?	Back-up Driver Names Conductores Alterno(s)											
Driver 1												
Driver 2												
Day of the Week / Dia de la Semana												
Number of Riders- Trip 1 / Cuantos Pasajeros- Primer Viaje												
Number of Riders- Trip 2 / Cuantos Pasajeros- Seguando Viaje												
List Passenger Names / Nombres de Pasajeros		Mon/ Lun	Tues/ Mart	Wed/ Mier	Thurs/ Juev	Fri/ Vier	Sat/ Sab	Sun/ Dom	Weekly Cost / Costo Semanal	Transit Voucher / Vale	Subsidy/ Cupon	OFFICE USE ONLY
Employee / Rider 1									\$	\$	\$	Cashing Date:
Employee / Rider 2									\$	\$	\$	By:
Employee / Rider 3									\$	\$	\$	QB Posting Date:
Employee / Rider 4									\$	\$	\$	By:
Employee / Rider 5									\$	\$	\$	Verification By:
Employee / Rider 6									\$	\$	\$	/
Employee / Rider 7									\$	\$	\$	Total Payment (s)
Employee / Rider 8									\$	\$	\$	Cash: <input style="width: 100%;" type="text"/>
Employee / Rider 9									\$	\$	\$	Voucher Type-
Employee / Rider 10									\$	\$	\$	Transit: <input style="width: 100%;" type="text"/>
Employee / Rider 11									\$	\$	\$	Employer: <input style="width: 100%;" type="text"/>
Employee / Rider 12									\$	\$	\$	Other: <input style="width: 100%;" type="text"/>
Employee / Rider 13									\$	\$	\$	Check #: <input style="width: 100%;" type="text"/>
Employee / Rider 14									\$	\$	\$	Total: <input style="width: 100%;" type="text"/>
Employee / Rider 15									\$	\$	\$	
Employee / Rider 16									\$	\$	\$	
Employee / Rider 17									\$	\$	\$	
Total Amount (Cantidad Total) »									\$ -	\$ -	\$ -	