




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

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

Van: <input type="text"/>		Crew/Job: <input type="text"/>	Authorized Driver / Conductor Autorizado: <input type="text"/>		Year/ Ano: <input type="text"/>							
For Week of: <input type="text"/>		Starts Monday/ Comienza Lunes: 12:00am	Stops Sunday/ Para Domingo: 11:59pm	Total Weekly Miles/ Total de Millas Semanal <input type="text"/>	I accept the Minimum usage of 40 miles per day or \$290 Weekly Charge Acepto el mínimo uso de 40 millas por día o \$290 de cargo semanal. 							
to / Hasta <input type="text"/>				Employer Voucher/Vale de Empleador? If so, please complete this section. NO [] YES / SI []								
				This voucher is being provided by the following company: <input type="text"/>								
Start Mileage / Milaje Inicio: <input type="text"/>		Final Mileage / Milaje Final: <input type="text"/>		Company Address: <input type="text"/>								
What van are you driving? / En que van anda? →→→				Signature of Individual Authorizing Payment: <input type="text"/>								
Please note van's odometer mileage daily/ →→→→ Anote el millaje de su odometro diario				<p>The Volunteer Drive and/or Company providing this Transit 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 vehicle operating under the provision of Internal Revenue Code (IRC), Section 132(f) that permits an employer to subsidize their employees' cost of commuting to work by a Public Transit Entity.</p> <p>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, P.O. Box 1447, Armona, CA 93202 or Call: (866) 655-5444 or send and email to the following general Email address: calvans@co.kings.ca.us</p>								
Different Driver Today?	Back-up Driver Names Conductores Alterno(s)											
Driver 1	<input type="text"/>											
Driver 2	<input type="text"/>											
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									\$	\$	\$	
Employee / Rider 3									\$	\$	\$	By: <input type="text"/>
Employee / Rider 4									\$	\$	\$	QB Posting Date:
Employee / Rider 5									\$	\$	\$	
Employee / Rider 6									\$	\$	\$	By: <input type="text"/>
Employee / Rider 7									\$	\$	\$	Verification By:
Employee / Rider 8									\$	\$	\$	/
Employee / Rider 9									\$	\$	\$	Total Payment (s)
Employee / Rider 10									\$	\$	\$	Cash: <input type="text"/>
Employee / Rider 11									\$	\$	\$	Voucher Type-
Employee / Rider 12									\$	\$	\$	Transit: <input type="text"/>
Employee / Rider 13									\$	\$	\$	Employer: <input type="text"/>
Employee / Rider 14									\$	\$	\$	Other: <input type="text"/>
Employee / Rider 15									\$	\$	\$	
Employee / Rider 16									\$	\$	\$	Check #: <input type="text"/>
Employee / Rider 17									\$	\$	\$	
Total Amount (Cantidad Total) »									\$ -	\$ -	\$ -	Total: <input type="text"/>