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**REQUEST FOR PERSONAL REIMBURSEMENT**

* In order to be processed, all information must be completed and signed by the driver and Department Coordinator or authorized signer.
* **Transaction receipts must accompany this form**. Blacken out your credit card number!
* More than one receipt can be attached to this form. Total reimbursement cannot exceed $100.
* Mail to: Fleet Services, 5420 Highway 8, Arden Hills, MN 55112.

PURCHASE INFORMATION: Date:      /     /      Time of Day:

Description of Purchase:

Reason Credit Card or Shop Authorization was not used:

VEHICLE NUMBER:       Amount of Expense to be reimbursed: $

|  |  |
| --- | --- |
| Driver: |       |
| Driver’s Address: |       |
| Employee ID #: |       |
| Work Phone #: |       |
| Fax Phone #: |       |
| Department: |       |
| Dept. Address: |       |
| **I certify that the materials and/or services listed have been rendered to a fleet services vehicle and no part of the same has been paid to me.** |
| Driver’s signature: |  |
| Department Coordinator or Authorized Signature |  |

**FLEET SERVICES VEHICLE REPAIR & MAINTENANCE AUTHORIZATION POLICY**

All repairs and maintenance on Fleet Services vehicles must receive prior approval from ARI Holman 800-227-2273. Neither repairs nor Maintenance are to be charged on the WEX Fuel card.

**FOR FLEET SERVICES USE ONLY:** CHECK #

FS APPROVAL:

Rev. 8/15/2022