



**Sixth Mount Zion Baptist Church**  
**Request for Use of Church Transportation**

**INSTRUCTIONS: Complete all sections of this form. The Administrative Office will make every effort to accommodate your request. However, please be advised that the submission of this form does not automatically guarantee approval of request.**

Ministry: \_\_\_\_\_

Event: \_\_\_\_\_

Destination: \_\_\_\_\_

Approximate # Miles: \_\_\_\_\_ Name of Driver: \_\_\_\_\_

Date Requested: \_\_\_\_/\_\_\_\_/\_\_\_\_ Day of the Week: M T W Th F Sat Sun  
Please circle the day this activity will take place

Departure time: \_\_\_\_\_ AM / PM Return time: \_\_\_\_\_ AM / PM

Approximate # Persons Traveling: \_\_\_\_\_ people

Beginning Mileage: \_\_\_\_\_ Ending mileage: \_\_\_\_\_

Gas purchased or repairs made?  Yes  No

a. Name of station \_\_\_\_\_

b. Amount purchased \_\_\_\_\_

c. City or County \_\_\_\_\_

Donation amount received \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Telephone: \_\_\_\_\_

Requested by: \_\_\_\_\_ Date of Request: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PLEASE NOTE:**

**ALL REQUESTS MUST BE RECEIVED AT LEAST FOURTEEN (14) DAYS IN ADVANCE OF ACTIVITY DATE!**

**For Office Use Only:**

\_\_\_\_ Requisition Approved

\_\_\_\_ Requisition Not Approved

Copies given to:

\_\_\_\_ Church Business Administrator \_\_\_\_ Trustee

\_\_\_\_ Driver

\_\_\_\_ Church Office