Sam Houston State University Vehicle Fleet Management Vehicle Maintenance Reporting Form

Department			Date					
Contact Person		Phone Number			Extension			
Maintenance Type		Date Work Requested						
Vehicle License Pla	ant Number	Vehicle Odometer Reading						
Vehicle Make		Vehicle Model		Vehicle Model Year				
Vehicle Inoperable		Date Vehicle Returned	d to Service	•				
		/ehicle Maintenance Task De						
Maintenance Task	Date Performed	Description of Maintenance Perform	ned					
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Maintenance Task	Materials Used	cle Maintenance Parts Descri	Quantity	Units	Cost Par Unit	Materials Costs		
Waintenance Tack	Waterials Osed		Quartity	Offico	COSET OF CHILE	Waterials Costs		
								
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Fill in this section when maintenance was	performed by a party not affiliated with SH	SU.				
Vendor Name		Federal Tax ID Number				
Address						
City	State	Zip Code				
Fill in this section when vehicle required t	owing.					
Name of Towing Company						
Address						
City	State	Zip Code				
Description of Miscellaneous Cost		1				
		Total Labor Cost \$				
		Total Materials Cost \$				
		Total Cost \$				

Fill in this section for maintenance task performed by an independent vendor or SHSU personnel other than Vehicle Maintenance

Task Labor Hours Hour Labor Rate Task Labor Cost 1

Name of Person or Vendor Performing Maintenance

Department personnel.

Maintenance Task