



**First Baptist Church of District Heights
Dr. Robert A. Manning, Senior Pastor**

Van Usage Post-Trip Form

Ministry: _____ Representative: _____

Contact Phone # (Home): _____ (Cell): _____

Date Started: _____ Date returned: _____

Start Mileage: _____ End Mileage: _____

Was the van returned in clean condition?: _____ Was the Van Refueled?: _____

Number of Passengers: _____ Was this a recurring use? _____

Please list all drivers during the trip: _____

A detail description of any problems with the van during usage (if applicable): _____

Driver Signature: _____ **Date:** _____

Please Note: If the van was not returned in clean condition or properly refueled, the transportation ministry reserves the right to debit the ministry budget for the necessary corrections to the van

Email Completed Form to transportation@fbcdh.org.

Connecting with Communities to Cultivate STRONG Christians

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