

Boise State University

Fuel Card
VEHICLE WORKSHEET

Department:	
Contact:	
Telephone:	
Fax:	
Mail Stop:	
Date of Request:	

Vehicle Information

License Plate Number	Description Year-Make-Model	Fuel Product U= Unleaded X=Diesel	Add (A) Change (C) Delete (D)

Authorizing Signature _____
Date _____

After completed, contact lstolwo@boisestate.edu for further instructions

Admin Use Only	Successfully Added by/date: