



## Diocese of Pensacola-Tallahassee

### Vehicle Change Form

Parish/School Name: \_\_\_\_\_ Date reported: \_\_\_\_\_

Contact person \_\_\_\_\_ Phone # \_\_\_\_\_

email address \_\_\_\_\_ Fax # \_\_\_\_\_

---

#### **VEHICLE INFORMATION**

Date of change \_\_\_\_\_

VIN \_\_\_\_\_ Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

License Plate # \_\_\_\_\_ State \_\_\_\_\_ Color \_\_\_\_\_

---

**Add** a vehicle Acquired from \_\_\_\_\_  **Delete** a vehicle Sent to \_\_\_\_\_

Purpose \_\_\_\_\_ Purpose \_\_\_\_\_

\_\_\_\_\_

---

Please email or fax this completed form to the Finance Department at the Pastoral Center:

Fax 850- 435-3568 or [gagnond@ptdiocese.org](mailto:gagnond@ptdiocese.org)

**All vehicle changes must be reported within 30 days of chang**