

Metro Vanpool Program

Monthly Vanpool Report

 metro.net/vanpool
 vanpool@metro.net
 213.922.7003
 fax 213.652.1112

Submit your completed report by the third business day of the following month. Send as a scanned PDF to vanpool@metro.net or by fax to 213.652.1112.
Detailed instructions and guidelines are on page two.

Failure to submit a complete and valid Monthly Vanpool Report will result in the termination of your Participation Agreement and lease fare subsidy payment.

SECTION I – VOLUNTEER PARTICIPANT IDENTIFICATION *(Complete all fields.)*

Vehicle Number _____ Last Name _____ First Name _____ Telephone Number _____
Vehicle Supplier (check one): ☐ CalVans ☐ Enterprise Rideshare ☐ vRide

SECTION II – DAILY TRIP INFORMATION *(Complete the month and year. Every day the vanpool operates, for both trips, record the actual number of passengers, the precise trip time, and accurate trip distance. Every day the vanpool is parked, leave the column blank. Record actual values only.)*

Month _____ 20____
Year

CALENDAR DAY OF THE MONTH	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
TRIP TO WORK																															
Passengers (Total)																															
Trip Time (Minutes)																															
Trip Distance (Miles)																															
TRIP FROM WORK																															
Passengers (Total)																															
Trip Time (Minutes)																															
Trip Distance (Miles)																															

SECTION III – VANPOOL COSTS *(Record the actual value for gas in dollars. Complete the remaining fields only if applicable.)*

\$ _____ \$ _____ \$ _____ \$ _____ \$ _____
Gas Vehicle Cleaning Tolls Parking Fees Other (Do not include lease costs)

SECTION IV – VOLUNTEER PARTICIPANT ACKNOWLEDGEMENT *(Sign and date. Only the enrolled Volunteer Participant's signature will be accepted.)*

Volunteer Participant means the primary driver or vanpool leaseholder operating a vanpool under agreement with the Metro Vanpool Program. By signing this report, you are confirming that the information provided herein is true and correct, and the fare subsidy credit is due to your vanpool group. No other signature will be accepted.

Volunteer Participant Signature _____ Date _____



False or estimated values will not be accepted as a valid report.

Send your Monthly Vanpool Report as a scanned PDF to vanpool@metro.net.

Every month, all Metro Vanpool Program Volunteer Participants must submit a Monthly Vanpool Report detailing the actual operations of the vanpool's movements and passengers. Use this document as a guide to help you complete the Monthly Vanpool Report. Current versions of all forms, instructions, and samples can be found at metro.net/vanpoolforms.

All required fields must be complete and valid. Failure to submit a complete and valid Monthly Vanpool Report will result in the termination of the Participation Agreement and lease fare subsidy payment.

SECTION I – VOLUNTEER PARTICIPANT IDENTIFICATION

- > **Vehicle No.** is the 5-6 numeric or alphanumeric equipment identification assigned to your vehicle by your vehicle supplier. License plate number, VIN number, or internal number will not be accepted.
- > **Last Name and First Name** is the legal last and first name of the Volunteer Participant who is the primary driver or leaseholder under agreement with Metro.
- > **Telephone Number** is to include the 3-digit area code and 7-digit number where we may contact you during normal business hours.
- > **Vehicle Supplier** is the organization that owns your vehicle.

SECTION II – DAILY TRIP INFORMATION

- > Fill in the **Month** and **Year** of the operating report and record the actual trip information for each day of the calendar month the vanpool operated in Normal Commute Service as approved by Metro. Do not record incidental trip data. **Days not operated are to remain blank.**
- > **Passengers:** record the actual total number of riders including the driver on board traveling TO the work/drop-off location, and the total number of riders on board traveling FROM the work/drop-off location. Do not include minors, or others not traveling as a subscribed vanpool commuter. Do include subscribed, casual, and part-time riders.
- > **Trip Time:** record the total trip time from when the vehicle starts (key-in) to when the vehicle ends (key-out). Use whole numbers only. *Example, for 45 minutes, write as 45, for 1 hour and 30 minutes, write as 90. Conversion, 1 hour = 60 minutes.*
- > **Trip Distance:** record the total trip miles from when the vehicle starts (key-in) to when the vehicle ends (key-out). Use whole numbers only. *Example, for 33.67 miles write as 34 miles. For 24.23 miles, write as 24. Do not record odometer reading. Conversion, Start odometer – End odometer = Total trip distance.*

Each required field must contain a real number. Continuation lines and arrows will not be accepted as a complete report. Estimated trip information will not be accepted as a valid report.

Month	Year									
DEC	2015									
CALENDAR DAY OF THE MONTH	1	2	3	4	5	6	7	8	9	10
TRIP TO WORK										
Passengers (Total)	8	8	10	9			7	8	8	9
Trip Time (Minutes)	40	45	50	45			47	40	45	50
Trip Distance (Miles)	30	35	28	30			34	40	37	30
TRIP FROM WORK										
Passengers (Total)	8	8	10	9			7	8	8	9
Trip Time (Minutes)	40	45	55	45			50	45	40	45
Trip Distance (Miles)	30	40	25	30			40	40	42	38

SECTION III – VANPOOL COSTS

- Total monthly vanpool costs must be recorded for all vanpools each month. They are all costs expended excluding the vanpool lease fare to keep the vanpool vehicle in operation each month. Record as dollars and cents. *Example, for 10 dollars and 54 cents, write 10.54. Retain purchase receipts and records of costs for audit purposes.*
- > **Gas** includes the total gas cost for commute trips during the report month and is required for all vanpools – no exceptions. Every vanpool will have gas costs each month whether paid by credit, check, cash, gift card, fuel card, employer sponsored, supplier sponsored, or otherwise. **Reports received without gas costs reported will not be accepted as a complete report.**
 - > **Vehicle Cleaning** field includes the total cost of supplies and/or services during the reporting month. Not every vanpool will have cleaning costs each month, record this amount only when it applies.
 - > **Toll Fees** include the total costs paid for toll lane devices, administration, and fees required for use in commute trips during the reporting month. Not every vanpool will have toll costs. Record the monthly amount only when it applies.
 - > **Parking Fees** include the total monthly fees paid to park the vanpool vehicle during non-operational hours. Not every vanpool will have parking costs. Record this amount only when it applies.
 - > **Other** includes any other out-of-pocket costs paid by vanpool members necessary for the day-to-day operation of the vehicle that was not reimbursed by the vehicle supplier including traffic/parking tickets, a cellular Wi-Fi hotspot rental, etc.

Record actual values only. False or estimated values will not be accepted as a valid report.

SECTION IV – VOLUNTEER PARTICIPANT ACKNOWLEDGEMENT

The Acknowledgement must be the true and authentic signature of the the Volunteer Participant who is the primary driver or leaseholder operating under agreement with Metro. Only handwritten signatures will be accepted as a valid report.

Signatures of others, including but not limited to, alternative drivers, vanpool passengers, or employers will not be accepted as a valid report.

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