

Faith in Action of Dodge County, Kenyon, & Nerstrand Volunteer Mileage Reimbursement Form

When providing transportation services to care recipients, Faith in Action volunteers will be reimbursed at the rate of .25 for each mile driven.

1. Volunteers seeking reimbursement must fill out the mileage form below, sign it, and submit it to the Faith in Action Coordinator.
2. A check will be mailed to the volunteer upon receipt of the mileage reimbursement form.

MILEAGE LOG

Volunteer name: _____ (please print)

Date:	Destination:	Purpose:	Total Miles:
_____	_____	_____	Grand Total: _____

$$\begin{array}{r}
 \underline{\hspace{2cm}} \\
 \text{Total miles driven}
 \end{array}
 \times
 \begin{array}{r}
 \underline{\hspace{2cm}} \\
 \text{\$0.25 per mile} \\
 \text{Rate of mileage}
 \end{array}
 =
 \begin{array}{r}
 \underline{\hspace{2cm}} \\
 \text{Amount to be reimbursed}
 \end{array}$$

Signature of Volunteer Driver

Date

Volunteer Driver's Address

Please submit to FIA Coordinator
 Cyndi Reed
 P.O. Box 246
 Kasson, MN 55944
 507-634-3654