

Volunteer Mileage Log

Rocky Mountain Conference of Seventh-day Adventists

Volunteer's Name: _____ Position/Role _____

Church/School Name: _____

DATE	# Miles Driven	Cost (miles x reimbursement rate) CO current rate \$0.40/mile	Purpose
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
TOTALS		\$	

I certify that the miles listed above are miles that I drove while serving as a volunteer. I understand that mileage will be reimbursed at current RMC Mileage Reimbursement Rate, which may fluctuate from month-to-month.

Print Volunteer Name

Volunteer Signature

(Date)

RETURN THIS FORM TO YOUR LOCAL CHURCH/SCHOOL FOR REIMBURSEMENT