

VOLUNTEER MILEAGE FORM



1) VOLUNTEER INFORMATION

Name: _____ *Check box if this is a new address*
Address: _____
City: _____ State: _____ Zip Code: _____

2) TRAVEL INFORMATION

Make-A-Wish requires that you provide documentation of the mileage traveled by attaching a print-out from a mapping website of the total distance traveled. You can use this form to submit for multiple trips.

Wish Child	Travel Date	Purpose	Total Miles (roundtrip)
Sum of Miles:			

Total Miles Driven: _____ x \$0.14 per mile = \$_____

3) REIMBURSEMENT/DONATION INFORMATION

*Make-A-Wish requires that you submit this paperwork within **30 days of the date of travel**. Select if you would like for this expense to be a reimbursement or a donation.*

Would you like for Make-A-Wish to reimburse you for this expense or would you prefer to submit this expense as a donation? Reimbursement Donation

Be sure to complete all sections of this form.

You can email this form and supporting documentation to a staff member for processing or mail to:

Make-A-Wish Eastern North Carolina
3809 Computer Drive, Suite 201
Raleigh, NC 27609