

**Interfaith Community Services Volunteer Activity Form** Name: (Please Print) \_\_\_\_\_

Volunteer requests RTA Mileage Reimbursement ( for eligible Transportation /Errand activities): ☐YES ☐NO

How do you want the funds issued?

☐ **Reimburse at the rate of 14 cents per mile-** this results in no reportable income to the IRS ( up to \$600)

☐ **Reimburse at the rate of 57.5 cents per mile-** this results in reportable income which will be reported on a 1099 Misc form if over \$600 for the calendar year. (Please fill out a Form W-9)

				<b>Mobile Meals</b>							
<b>Month and YEAR of Service</b>						<b>Volunteer Signature</b>				<b>Date</b>	
<b>Date of Service</b>		<b>Route # / # Recipients</b>		<b>Destination- Farthest main Street</b>		ERRANDS Meal Delivery #Miles   # Hours					
						Total					
Total Individuals Served				Total Reimburseable							

**Maximum allowable round trip mileage for reimbursement is 50 miles PER ROUTE** regardless of the number of actual miles driven. Count mileage from meals facility through the recipient route and back to the facility to return trays. Record whole MILES. Record HOURS to the nearest 15 minutes.

**Return Activity Form to the Mobile Meals Coordinator by 5th of the month.**

Payment will NOT be made if this form is received after the 5th of the month, following the month of service.

**Type of Service**  
MM= Mobile Meals

**EMAIL form to: [Jwillkom@icstucson.org](mailto:Jwillkom@icstucson.org)**

**FAX: 797-3029 MAIL: 2820 W. Ina Rd., Tucson, AZ 85741**

**Program Manager** \_\_\_\_\_ **Date** \_\_\_\_\_

NCA/RSVP Director \_\_\_\_\_ Date \_\_\_\_\_