

Washington County Volunteers!

18865 SW Johnson Street, Aloha, OR 97006 (503) 466-4749 Fax (503) 649-1530 wa

washcorsvp@lcsnw.org

4/2013-3/2014 MILEAGE REIMBURSEMENT APPLICATION

RSVP of Washington County offers a limited mileage reimbursement program. We will reimburse volunteers for their travel within Washington County <u>to and from their volunteer site only</u>. Mileage reimbursement rate will vary depending on number of enrolled volunteers and funds available and my have a quarterly mileage cap. Time sheets must be turned in to RSVP by the 10^{th} of the month – completely filled out and **signed by the station volunteer supervisor** in order to be valid.

For those volunteers riding the bus, we will reimburse your bus cost at \$1.25 each way for a total of \$2.50 each time you volunteer. Please note "bus" on your timesheet under miles.

Complete the application below and mail or FAX to RSVP.

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ddress:			
	Street		
	City	State	Zip
regon Driver	's License Number: (mu	st enclose copy)	
ar Insurance	Company: (must enclose	e copy)	
adress of loca	ll agent's office <u>:</u>		
eneficiary for	RSVP Accident Insurar	nce: Name	
ddress:			
elephone Nur	nber:		
	w and enclosing copies o f current license and valid i	•	and Car Insurance, you
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