



## Instructions for Completing This Form

Use one form per calendar month only. Please use a separate form for each. Forms with multiple months will be returned.

Submit your form by the 15th of the next month. For example, July forms are due by August 15.

### Volunteer Information:

Write your name, address, and phone number. We use this to calculate your mileage starting point.

### Date:

Enter the date you served using MM/DD/YY format (for example, 03/28/25).

### Location:

Write the name and address of the agency you served with. This helps us verify mileage.

### Assignment:

Write your job title for that day (examples: *Food Pantry Worker, Meals on Wheels Driver, Blood Drive Ambassador*).

### Expenses:

If you used public transit, a taxi, Uber, or Lyft, enter the cost here and attach a receipt if possible. Include parking costs and meal receipts (only if you worked over 6 hours and no meal was provided).

### Total Miles:

Write the number of miles you drove for the assignment. You may record:

- Home to assignment and back
- Mileage during the assignment (e.g., meal delivery) – must be verified by the assignment supervisor

*If you did not drive to or for your assignment, or have a meal or other expense, leave this part blank.*

### Hours Worked:

Write the number of hours you served that day.

### Notes:

You can include more than one assignment on the same form. Just make sure all the dates are from the same calendar month.

If you serve in **different assignments**:

- Use one form and list each assignment clearly.
- Ask each assignment supervisor to sign at least once under your job title.
- If your site supervisor changes often (like at a blood drive), any supervisor sign under the assignment section.

*Have questions? Call RSVP at 607-664-2298. We're happy to help you fill out the form or figure out what's needed for reimbursement.*

*Reminder:* Reimbursements provided through AmeriCorps Seniors **do not count as income** and will not affect income-based benefits.