LILAC - CIVIC ENGAGEMENT
TRANSPORTATION EXPENSE REIMBURSEMENT REPORT

FOR **INDIVIDUAL COMMUNITY SERVICE VOLUNTEERS**

Name of Student: __________________________________________
Bryn Mawr College ID #: __________ Telephone Number: __________ E-Mail: __________

Students receive reimbursement for **50 %** of travel expenses to and from their field sites. Please describe the type of transportation expense, ie. train/bus/subway/tolls /metered parking. If traveling by personal car, record number of miles driven and calculate the cost at 57.5 cents per mile. **ATTACH ALL RECEIPTS!!**

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Organization</th>
<th>Location: Address, City, &amp; State</th>
<th>Description of Travel Expenses</th>
<th>Mileage (# of miles)</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Subtotal: $ __________

50% of subtotal = Total Reimbursement: $ __________

Please note: The maximum amount of transportation reimbursement a student may receive per semester is $416.00.

**Deadlines for Fall 2015**

**Submit Request Form to CEO By 5pm on:**
- August 28, 2015
- September 25, 2015
- October 23, 2015
- November 27, 2015
- December 11, 2015

**Payment Issued:**
- September 8, 2015
- October 5, 2015
- November 2, 2015
- December 7, 2015
- January 6, 2016

Check here if you have direct deposit: _____ If you do not have direct deposit, please provide:

Campus Mail Box #: ______________ OR US Mail Address: ________________________________

I certify the following:
1. I have provided to the CEO a letter on letterhead from the organization listed above that indicates my work as a volunteer.
2. I incurred the above expenses as a community service volunteer or unpaid intern. The reported travel expenses are substantiated by the attached, original, itemized receipts which indicate method of travel and amount of payment.
3. No portion of the claimed travel expenses has or will be reimbursed from other sources.
4. Expenses adhere to the College's travel policy and guidelines. Exceptions to the policy have been approved for the following reason(s) as described below:

__________________________
Student's Signature: __________________________ Date: __________________________

(Questions? Contact Sydney Coppola, scoppola@brynmawr.edu; 610 526-7320)