



# Pacific Northwest Mennonite Conference

An area conference of  
Mennonite Church USA

## VOLUNTEER TRAVEL REIMBURSEMENT

Travel costs are allowed for necessary expenses related to attending Board and Committee meetings. Reductions should be made for travel which combines personal and Conference business.

Reason for Travel: \_\_\_\_\_

Charge to Account No: \_\_\_\_\_ Account Name: \_\_\_\_\_

DATE \_\_\_\_\_ Departing: \_\_\_\_\_

PLACE \_\_\_\_\_ Arriving: \_\_\_\_\_

Lodging \$ \_\_\_\_\_

☐ Check if Round Trip

Mileage: \_\_\_\_\_ miles @ \$0.14 \$ \_\_\_\_\_

Car Rental \$ \_\_\_\_\_

### PLEASE ATTACH ALL RECEIPTS

Airfare \$ \_\_\_\_\_

Gas \$ \_\_\_\_\_

Meals \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Less cash advance \$ \_\_\_\_\_

Total reimbursement allowed \$ \_\_\_\_\_

Total reimbursement requested \$ \_\_\_\_\_

Date submitted \_\_\_\_\_ Signature \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

E-mail address \_\_\_\_\_ Phone \_\_\_\_\_

Submit completed form with receipt for each item to: PNMCA Administrative Assistant  
22455 Finn Road  
Sheridan, OR 97278