## Wisconsin Cervid Farmers' Foundation

## Reimbursement Expense and Mileage Sheet

| NAME:<br>ADDRESS: |  |        |                     |           |
|-------------------|--|--------|---------------------|-----------|
| PHONE:            |  |        |                     |           |
| DATE              | EXPLANATION OF EXPENSE OR MILES DRIVEN | MILES  | X \$.50<br>or \$.65 | \$ AMOUNT |
|                   |  |        |                     |           |
|                   |  |        |                     |           |
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|                   |  |        |                     |           |
|                   |  |        |                     |           |
|                   |  | OTALS: |                     |           |
|                   | TOTAL                                  | . AMUU | NT DUE:             |           |
| Signature:        |  |        |                     |           |

## Please note:

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You may request reimbursement for expenses incurred while working on a voluntary basis for the Wisconsin Cervid Farmers' Foundation (WCFF). Paid employees may not be eligible for reimbursement.

Expense reimbursements are at the discretion of, and must be approved by, the WCFF Board of Directors.

Receipts MUST be attached to this form.

A full day of WCFF work is required for each night of hotel expense to be reimbursed.

Meals may be reimbursed up to these maximums per meal: breakfast \$3, lunch \$5, dinner \$7.

Mileage reimbursement amount is different than \$.14/mile set by the current standard IRS rate for miles driven in service of charitable organizations. (information from www.irs.gov)

9/13/23 it was voted by the WCFF Board to pay volunteers \$.50/mile or \$.65/mile for pulling the trailer for outreach events such as trade shows.

Submit this form, with receipts, to the WCFF Treasurer:

Emma Gehring, 1968 County Rd. E, Baldwin, WI 54002