



**CHRISTIAN CHURCH (DISCIPLES OF CHRIST)
in the NORTHERN LIGHTS REGION**

A partnership of the congregations in Alaska, Washington, North Idaho, and Montana
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Camp Transportation Reimbursement Request Form

BEFORE REQUESTING REIMBURSEMENT, PLEASE BE SURE TO READ THE POLICY TO BE SURE YOU ARE ELIGIBLE:

northernlightsdisciples.org/wp-content/uploads/2026/04/NLR-Policy-Regional-Camper-Mileage-Reimbursement-April-2026.pdf

Driver name for reimbursement: _____

Mailing address for check: _____

Date of travel expense	# of campers	Travel point of origin address or description <i>(church, home, camp venue...)</i>	Travel destination address or description <i>(church, home, camp venue...)</i>	Total miles	Total \$ amount <i>Federal nonprofit volunteer rate: 14¢/mile</i>
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____

TOTAL EXPENSES: \$ _____

SIGNED: _____

Check and initial here if you wish to donate your expenses as a gift to the Northern Lights Region: _____

Please list expenses so we will have a record of actual costs and we will send a receipt for your gift.

Donated mileage will be credited at the IRS nonprofit volunteer rate of 14¢ per mile.