



Wildlife Rehabilitation Society of Saskatchewan
PO Box 24004, Midtown Postal Outlet, Saskatoon, SK, S7K 8B4
www.wrsos.org | 306-242-7177

Helping keep Saskatchewan wildlife wild!

WRSOS MILEAGE CLAIM FORM

Date: _____

Volunteer Information:

Full Name: _____

Full Mailing Address: _____

Phone Number: _____ Circle one: cell / home / work

Email Address: _____

Donation tax receipts will be issued in the sum of \$0.50 per kilometer traveled.

Board authorization:

Name: _____

Date: _____

Signature

Claim Information:

Please fill in the following table completely and accurately. Once finished, please submit this form to donate@wrsos.org or mail to our PO box. Thank you!

Date (mm/dd/yy)	Purpose (i.e. transport robin to WCVM)	Starting Location	Destination Location	Start Km on odometer	End Km on odometer	Kilometers Traveled	Notes



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I prefer to be reimbursed in the form of a tax receipt, at a rate of \$0.50 per kilometer traveled. ☐

Total Distance Claimed _____ KM Total Amount of Receipt \$ _____

Volunteer Signature _____ Date _____