

**FY 2017 VOCA PMC Project Grant Funds  
Volunteer Travel Reimbursement Project  
Total Available Grant Funds: \$200,000**

The purpose of the volunteer mileage reimbursement funding is to help local CASA programs assist their volunteers with the mileage cost for long distance travel to visit their CASA children.

The following guidelines are to govern the reimbursement and distribution of these funds:

1. The reimbursement must only be for an assigned CASA volunteer advocate for mileage costs incurred during a visit to their CASA child(ren). Paid staff persons serving in a "volunteer" capacity are not eligible.
2. These grant funds cannot be used to supplant or replace any other funds already paid to the volunteer for the travel being claimed.
3. Volunteer travel reimbursement requests must be submitted on the travel reimbursement form provided by Texas CASA.
4. The volunteer's travel must be at least 50 miles one way (100 miles roundtrip) from the home of the volunteer being reimbursed and must include a Google Map (or equivalent) documenting the point to point mileage being claimed. If volunteer chooses to fly to make the visit, then the least expensive option can be submitted for reimbursement.
5. The volunteer's visit may include up to two nights lodging if necessary. Lodging is limited to the approved state lodging rate for the city they are staying. The state lodging rate can be found online at <https://fmx.cpa.texas.gov/fmx/travel/texttravel/rates/current.php>. A copy of the lodging receipt must be submitted with the travel request.
6. Local program's requests for reimbursement must be submitted by the last day of the month and will be processed in the order of date received by Texas CASA.
7. Local programs are not limited in the amount of volunteer travel reimbursement requests submitted per month.
8. Texas CASA will accept volunteer mileage reimbursement requests for volunteer travel made between **October 1, 2016 and September 30, 2017**; however, if funds are

exhausted prior to September 30, 2017, then no funds will be distributed after that date and all programs will be notified.

9. The ongoing balance of funding remaining from this grant will be listed on the Texas CASA website and will be updated each month after our monthly disbursements are made.
10. Local programs requesting reimbursement under this project must submit the Texas CASA reimbursement form (Attachment 4: Request for Volunteer Mileage Reimbursement) and include the following: (a) volunteer's name, (b) the case number or child's initials, (c) volunteer's city of origin for the travel, (d) the destination city of child's placement, (e) the total number of miles traveled, (f) a copy of the local program's mileage reimbursement rate policy, (g) total travel time and total time spent with child, and (h) the total dollar amount requested. In addition, a copy of a Google Map (or equivalent) documenting the point to point mileage being claimed must be attached. If the volunteer travels by air and that is the least expensive option, then a copy of the airfare receipt and flight information must also be submitted with the travel voucher. The travel voucher must be signed and dated by the volunteer, their staff supervisor, and the board treasurer or designated alternate.
11. Travel documentation, as specified above, must be submitted to Elizabeth Mast by email at [emast@texascasa.org](mailto:emast@texascasa.org) or by fax at 512-610-6134.

**NOTE: Reimbursement requests under this project are not to be entered into CTK as part of your current VOCA, CVC or any other grant.**



STRENGTHENING THE VOICES OF CASA STATEWIDE

## Request for Volunteer Mileage Reimbursement

Program Name/City	Click here to enter text.
Volunteer's Name	Click here to enter text.
Case Number	Click here to enter text.
Travel Date	Click here to enter text.
Volunteer's City of Origin	Click here to enter text.
Destination City of Child's Placement	Click here to enter text.
Total Miles Traveled Roundtrip	Click here to enter text.
Total travel Time	Click here to enter text.
Total time Spent with Child	Click here to enter text.
Mileage Reimbursement Amount Requested <i>(rate x roundtrip miles travelled)</i>	Click here to enter text.
Lodging Amount Requested	Click here to enter text.

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**Volunteer Signature**

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**Caseworker Supervisor**

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**Board Treasurer or Alternate**

Attachment 4

***Attach:*** (1) *Google Map or equivalent* (2) *Lodging Receipt*  
(3) *Mileage Reimbursement Policy [first submission only]*