

RSVP Reimbursement Form

This form is to be completed by a volunteer to elect the format he/she wishes to receive mileage reimbursement and to initialize or change his/her Direct Deposit information. The completed form should be returned to your RSVP Coordinator.

New Volunteer **Change to Existing Volunteer**

(Please Print)

First Name _____ MI _____ Last Name _____

Address _____ Apt. # _____

City _____ State _____ Zip Code _____

Home Phone: _____ Other Phone: _____

E-Mail _____

I elect to have my reimbursement delivered to me in one of the following ways: OPTION #1 OR #2

VOLUNTEER SIGNATURE _____ **EFFECTIVE DATE** _____

OPTION # 1

Direct Deposit

For Direct Deposits, we make every effort to ensure that your initial reimbursement is a "Direct Deposit" to your account, but we cannot guarantee that will occur. Your first reimbursement may be issued as a "paper check". Please plan accordingly.

Direct deposit will take time to set up. You must attach a voided check or Bank Routing/Savings Account #'s for Direct Deposit.

Please deposit my entire reimbursement check to my **checking account**.
You must attach a voided check

Please deposit my entire reimbursement check to my **savings account**.
You must attach a Savings Deposit slip or Bank Routing # and a Savings Account #

---PLEASE ATTACH A VOIDED CHECK OR SAVINGS ACCOUNT DEPOSIT SLIP HERE---

OPTION # 2

Paper Check

RSVP Coordinator Signature _____ Date _____