

Mileage Reimbursement Application

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Recipient Title]

[Organization Name]

[Organization Address]

[City, State, Zip Code]

Dear [Recipient Name],

I hope this message finds you well. I am writing to submit my application for mileage reimbursement for the volunteer hours I dedicated to [specific event or task] on [date(s)].

According to my records, I drove a total of [total miles driven] miles. Based on the approved reimbursement rate of [rate per mile], my total reimbursement amount is [total reimbursement amount].

Attached are my detailed travel logs and any supporting documents for your reference.

Thank you for considering my request. I appreciate your support and look forward to your timely response.

Sincerely,

[Your Name]