**VOLUNTEER DRIVER JOB CARD VOLUNTEER DRIVER JOB CARD**

**DRIVER NAME (PRINT):**

**…................................................ Charity No:** 286318 **DRIVER NAME (PRINT):**

**… Charity No:** 286318

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| **Date** | **Client Name** | **Destination** | **Mileage** | | **Donation £** | | | |
| **Cash** | | **Cheque** | |
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| **TOTALS**  Mileage Allowance at 40p per mile | | |  | | **£** |  | **£** |  |
| **£** |  |  | | | |
| Mileage Claimed | | | | | **£** |  |  | |

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| **Date** | **Client Name** | **Destination** | **Mileage** | | **Donation £** | | | |
| **Cash** | | **Cheque** | |
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| **TOTALS**  Mileage Allowance at 40p per mile | | |  | | **£** |  | **£** |  |
| **£** |  |  | | | |
| Mileage Claimed | | | | | **£** |  |  | |

Paid **to** the Driver **£** Paid **to** the Driver **£**

# Paid **by** the driver

OR OR

# Paid **by** the driver

**£**

**£**

Driver Signature: ….......................................... Date: …................................. Driver Signature: …........................................ Date: ….............................

Office Signature: Office Name (print): Office Signature: Office Name (print):

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Support and Transport for the Community Support and Transport for the Community

Telephone: 0118 9723986 Telephone: 0118 9723986