R&N Family Support Services, Inc.

Monthly Mileage Log

**This log is for 862 respite care only.** Mileage is only reimburseable for miles incurred taking client from home to activities during your shift. Mileage is not reimburseable for the commute from your residence to the client's home.

CLIENT NAME _____

CAREGIVER NAME _____

The following is a true statement of mileage driven during the month of _____ 2026

	MILEAGE			
	Date	**FROM**	**TO**	**MILES**
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				
MONDAY				
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THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
			Total Miles	

Total Miles (1st Half)

Total Miles (2nd Half)

Caregiver Signature

Parent/Guardian Signature

Parent/Guardian Name

Mileage Log Due Dates

1st to 15th of the month - Due by 18th of same month (example: Jan 1-15 log due Jan 18)

16th to end of the month - Due by 3rd of the following month (example: Jan 16-31 log due Feb 3)

Pay Days

Every 10th and 26th of the month. If the 10th or 26th fall on a weekend, we pay the Friday before.

Contact

Send log to Timesheets@RNServes.com

www.rnautismfamilycare.com